REPORT CONTENTS:

1. THE JOINT COMMISSION MEDICARE SURVEY
2. AIDS WALK SAN FRANCISCO
3. PUBLIC HOSPITAL REDESIGN AND INCENTIVES IN MEDI-CAL (PRIME) UPDATE
4. SAN FRANCISCO HEALTH NETWORK (SFHN) LAUNCH
5. PATIENT FLOW REPORTS
6. SALARY VARIANCE TO BUDGET BY PAY PERIOD REPORT

1  THE JOINT COMMISSION MEDICARE SURVEY

On August 4th, The Joint Commission (TJC) conducted a one-day unannounced Medicare Deficiency survey. The purpose of the survey was to follow-up with the findings from this past June's Triennial Accreditation Survey of the Hospital Program. Due to the condition level finding, this TJC revisit was required within 45 days of the exit conference.

During the visit, the surveyors toured the following areas:

- Emergency Department
- Psychiatric Emergency
- Acute Psychiatry
- 6G Women’s Options Clinic
- 5M Women’s Health Center
- Outpatient Dialysis (Ward 17)p
- Food and Nutrition Services
- Sterile Processing Department (SPD)
- Operating Room

The unit managers and frontline staff worked diligently to implement the various policies and procedures. TJC surveyors congratulated the organization on their accomplishments in a short period of time.

TJC confirmed that there were no additional findings, however the TJC will return within 30 days to ensure our ligature points have been corrected. We have purchased and are awaiting delivery of the necessary hardware (e.g. door knobs, faucets etc.) to install.

Many thanks to the team for a successful survey.
2 AIDS WALK SAN FRANCISCO

On Thursday, July 13, ZSFG hosted the kick-off for AIDS Walk SF. Over 100 people came together on the plaza to build excitement for and enlist participation in the annual AIDS Walk. The program started with music by the San Francisco Lesbian/Gay Freedom Band, and included remarks by Mayor Ed Lee, Supervisor Jeff Sheehy, himself an HIV+ patient here at ZSFG, Health Director Barbara Garcia and Dr. Diane Havlir, chief of HIV medicine. The event centered around an historically important panel from the legendary AIDS quilt, which included Ryan White, an Indiana teenager who became an international symbol of the world’s ignorance about the disease when he was barred from school once being diagnosed with AIDS, and internationally-renowned artist and social activist Keith Haring.

As a tangible recognition of our singular history and connection to HIV/AIDS, ZSFG and the Names Project are in talks at this very moment to arrange for the permanent loan of an AIDS quilt panel to be displayed in our Building 5 lobby.

3 PRIME UPDATE

Public Hospital Redesign and Incentives in Medi-Cal (PRIME) is California’s Medi-Cal pay-for-performance program to help drive improvement in the services we provide our patients. The objective of PRIME is to improve the quality and value of care provided in California’s safety net hospital systems by: (1) shifting their care delivery models to strengthen patient-centered primary and specialty outpatient care; (2) providing the right care in more appropriate and cost-effective settings; (3) proactively managing their patient populations to achieve better health outcomes; and (4) shifting from volume to value-based payments.

The PRIME program contains scores of metrics on which we must perform in order to be reimbursed: overall about $34 million a year, if we perform. Our PRIME leadership team here at ZSFG has successfully helped us succeed by organizing improvement teams for each metric, each of which developed an improvement charter aligned with our True North goals. In a resounding testament of success, ZSFG just completed year two of PRIME on June 30, 2017, and ZSFG did remarkably well. The organization is on track to earn all of the $34 million.

There are a number of factors that contributed to the teams’ successes: (1) having clear target goals; (2) putting together diverse, interdisciplinary teams to address the work; (3) having the discipline to put together improvement charters and getting feedback; (4) having regular follow-up on successes and barriers; and (5) having leadership engaged to address the barriers.

Congratulations to the improvement team for achieving success in each of the metrics.
On July 31st, ZSFG celebrated the SFHN’s new brand in the cafeteria. The celebration included the sharing of the new branding, large slices of cakes for all staff to enjoy, and color new buttons to show Network pride. The new branding work ensures that our patients and staff know what the Network is, its value and how to use it.

Additionally, the timing of the launch lines up well with the third birthday celebration of the SFHN.

Many thanks to the Network team for setting us on the right path for health care in San Francisco.
5  PATIENT FLOW REPORT FOR JUNE 2017

Attached please find a series of charts depicting changes in the average daily census.

**MEDICAL/SURGICAL**

Average Daily Census was 214.13 which is 105% of budgeted staffed beds level and 85% of physical capacity of the hospital. 13.32% of the Medical/Surgical days were lower level of care days: 1.58% administrative and 11.74% decertified/non-reimbursed days.

**ACUTE PSYCHIATRY**

Average Daily Census for Psychiatry beds, **excluding 7L**, was 41.97, which is 95% of budgeted staffed beds and 62% of physical capacity (7A, 7B, 7C). Average Daily Census for 7L was 5.35, which is 76% of budgeted staffed beds (n=7) and 45% of physical capacity (n=12). Latest Utilization Review data from the INVISION System shows 69% non-acute days (65% lower level of care and 4% non-reimbursed).

**4A SKILLED NURSING UNIT**

ADC for our skilled nursing unit was 29.39, which is 105% of our budgeted staffed beds and 98% of physical capacity.

6  SALARY VARIANCE TO BUDGET BY PAY PERIOD REPORT FOR FISCAL YEAR 2016-2017

For Pay Period ending July 28, 2017, Zuckerberg San Francisco General recorded a 2.4% variance between Actual and Budgeted salary cost – actuals were $345,230 over budget. For variance to budget year-to-date, ZSFG has a negative variance of $773,441 /2.7%.
Variance Between Salary Expenditure and Budget by Pay Period (PP) and Year To Date (YTD)