

# HOSPITAL HEALTHCARE UPDATE REPORT

Presented to the JCC-ZSFG on April 24, 2018

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## 1 STROKE PROGRAM RECERTIFIED BY JOINT COMMISSION

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On April 10<sup>th</sup>, a Joint Commission surveyor arrived at ZSFG to conduct the one day Stroke recertification survey. The surveyor observed a Code Stroke within moments of its activation and was complimentary of the collaborative process among involved staff, which included physicians, pharmacists, radiology technicians, nursing, and EMS staff. The surveyor also conducted stroke tracers involving one intensive care unit patient and two medical-surgical patients and was impressed with the compassionate and quality care rendered to our stroke patients by all staff and specifically with the comprehensive progress notes by occupational and physical therapy staff.

Many thanks to the Dr. Claude Hemphill, Christine Martin, Sara Cole, the entire Stroke Team, the Emergency Department, Intensive Care Unit Staff, Rehabilitation Staff (Physical, Occupational, and Speech Therapy), Leslie Safier, Karen Hill, Dan Schwager, Myra Garcia and the entire staff at ZSFG who consistently demonstrate excellent care and compassion for our patients and their families on a daily basis.

## 2 LONG TERM CARE (4A) FIRE/LIFE SAFETY SURVEY

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On April 9<sup>th</sup>, a Health Facilities Evaluator from the California Department of Public Health (CDPH) Life Safety Branch arrived unannounced to conduct the annual 4A-Skilled Nursing Facility Fire-Life Safety Survey. Overall, the surveyor indicated that they were impressed with the recordkeeping by the Facilities team, and commended the Emergency Plan.

There were only two minor findings identified and the team developed a countermeasure plan to address them.

Many thanks to Genieve Delacruz, Kathy Ballou, Rich Elliott, Greg Chase, Lann Wilder, and Cheryl Kalson for their assistance during this survey.

### 3 TRAUMATIC BRAIN INJURY PROGRAM JOINT COMMISSION SURVEY

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On April 11, the Joint Commission arrived at ZSFG to conduct The Traumatic Brain Injury (TBI) Program re-certification survey. The surveyor conducted multiple TBI patient tracers in the ICU and Med/Surg clinical settings, which included medical record review and staff interviews. The surveyor was complimentary of the skills and competence of the rehab staff.

The collaboration among the team members led to a successful survey with no identified findings. During the exit conference the surveyor made a point of how the organization truly treated and cared for each patient as a whole individual in a culturally competent approach versus as another patient with a similar disease presentation. The surveyor also stated “the TBI Team should share their expertise and creativity with other healthcare organizations nationally”.

Special thanks to Dr. Geoff Manley, Amy Winkelman, Lawrence Chyall, and the entire TBI Team, Intensive Care Unit Staff and Medical Surgical Staff, Rehabilitation Staff (Physical, Occupational, and Speech Therapy), Leslie Safier, Karen Hill, Dan Schwager, Myra Garcia and the entire team of amazing staff in *all* the departments at ZSFG who provide quality services for our patients and their families every day.

### 4 DAILY MANAGEMENT SYSTEM UPDATE

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ZSFG is implementing the Daily Management System (DMS), which aims to cultivate leaders through improving communication, demonstrating respect, and developing problem solvers through the use of A3 thinking and Plan-Do-Study-Act problem solving. The Daily Management System also helps staff understand how their work aligns with True North and creates an environment for improvement work to be part of our daily work.

There are four components to the Daily Management system:

1. **Daily Status Sheets:** A structured way to understand the business, problem solve together and coach each other. These will also provide a platform for escalation of communications. This escalation of communication will be integral as we launch the enterprise-wide electronic health record.
2. **Huddles:** A forum for everyone in a unit to suggest opportunities for daily continuous improvements, and a way for the unit to prioritize working on those improvements and to monitor progress. Huddles are also a way to demonstrate leadership behaviors, understand capacity, drive improvement and develop problem solvers.

3. **PDSA and Standard Work:** Fundamentals for problem solving and a standardized approach to implementations, or rollouts. Standard Work will be increasingly important as we create workflows in preparation for the new electronic health record.

4. **Area Improvement Center:** A form of visual management to quickly and easily understand data, stratify, prioritize and improve. This involves the development of a leadership team who will drive improvement through the use of A3 Thinking and Plan-Do-Study-Act problem solving.

The DMS roll out plan starts with five cohorts, each cohort completing four modules. Cohort 1, which included Department of Care Coordination, and Perioperative Services, completed their DMS training in February. Last month, Cohort 2, which includes Rehab, Pharmacy, 5M and Urgent Care Clinic, and Critical Care and Respiratory, began their DMS journey and will complete the final module in June. Cohorts three, four, and five will follow, with full DMS implementation being completed in March of 2019.

## 5 ZSFG STAFF SELECTED FOR NATIONAL AWARD TO ELIMINATE RACIAL AND ETHNIC DISPARITIES IN HEALTH CARE

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Tosan O. Boyo, Chief Operating Officer, and Jenny Chacon, Senior Health Program Planner have been selected to receive an award for Best Overall Project from the Disparities Solutions Center. The team from ZSFG was selected for this award out of 16 health care organizations from around the United States from the Disparities Leadership Program's 2017-2018 class. This award is based on various criteria, including the breadth of impact of the project on the organization, use of Disparities Leadership Program tools and skills, and overall achievements over the course of the year.

The Disparities Leadership Program is the first program of its kind in the nation, and is designed for leaders from hospitals, health insurance plans, and other health care organizations who are seeking to develop practical strategies to eliminate racial and ethnic disparities in health care. The program aims to create leaders prepared to meet the challenges of health care transformation by improving quality for at-risk populations who experience disparities. It is led by the Disparities Solutions Center at Massachusetts General Hospital in Boston, Massachusetts.

Congratulations to Tosan Boyo and Jenny Chacon!

## 6 ZSFG CELEBRATES NATIONAL NUTRITION MONTH

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In March, ZSFG celebrated National Nutrition Month, which is a nutrition education and information campaign created annually in March by the Academy of Nutrition and Dietetics. The campaign focuses on the importance of making informed food choices and developing healthy eating and physical activity habits. The theme this year was "'Go Further with Food'" to highlight that preparing foods to go further at home and within the community can have a positive impact.

## 7 PATIENT FLOW REPORT FOR MARCH 2018

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

### MEDICAL/SURGICAL

Average Daily Census was 235.03 which is 116% of budgeted staffed beds level and 93% of physical capacity of the hospital. 16.68% of the Medical/Surgical days were lower level of care days: 5.28% administrative and 11.60% decertified/non-reimbursed days.

### ACUTE PSYCHIATRY

Average Daily Census for Psychiatry beds, **excluding 7L**, was 42.58, which is 96.8% of budgeted staffed beds and 63.6% of physical capacity (7A, 7B, 7C). Average Daily Census for 7L was 5.29, which is 75.6% of budgeted staffed beds (n=7) and 44.1% of physical capacity (n=12). Latest Utilization Review data from the INVISION System shows 78.76% non-acute days (71.21% lower level of care and 7.58% non-reimbursed).

### 4A SKILLED NURSING UNIT

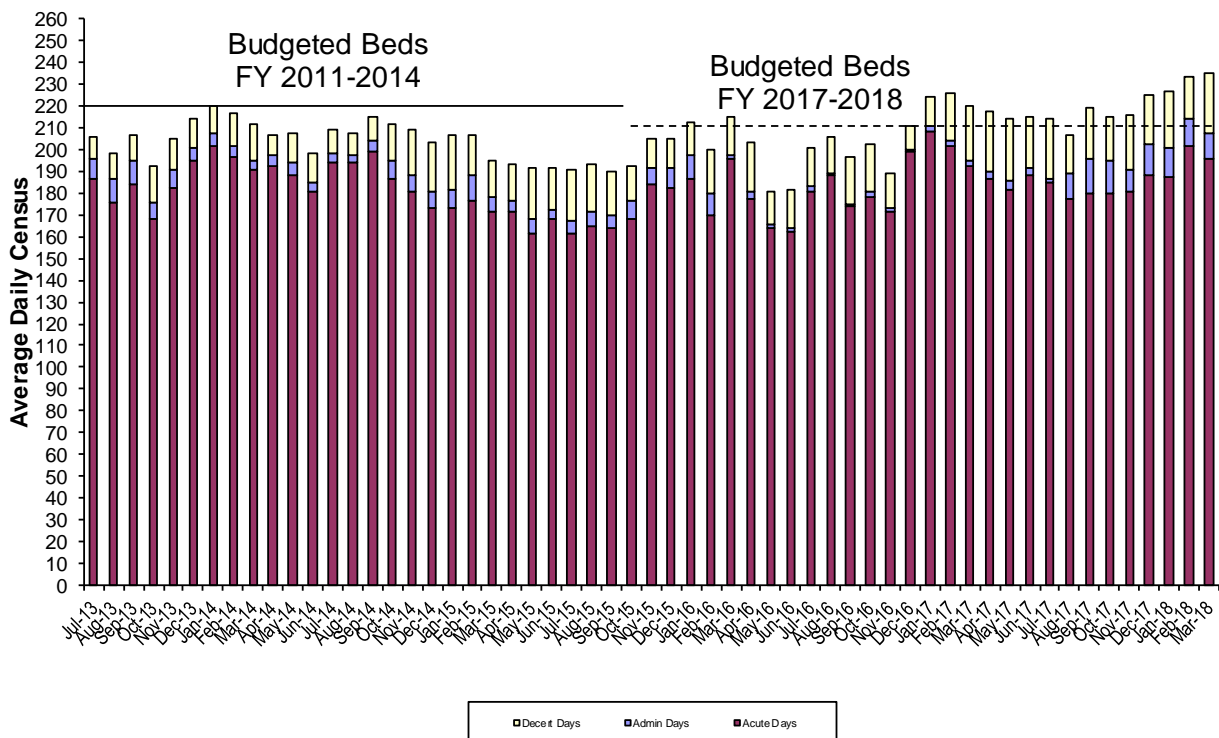
ADC for our skilled nursing unit was 28.8, which is 103% of our budgeted staffed beds and 96% of physical capacity.

## 8 SALARY VARIANCE TO BUDGET BY PAY PERIOD REPORT FOR FISCAL YEAR 2017-2018

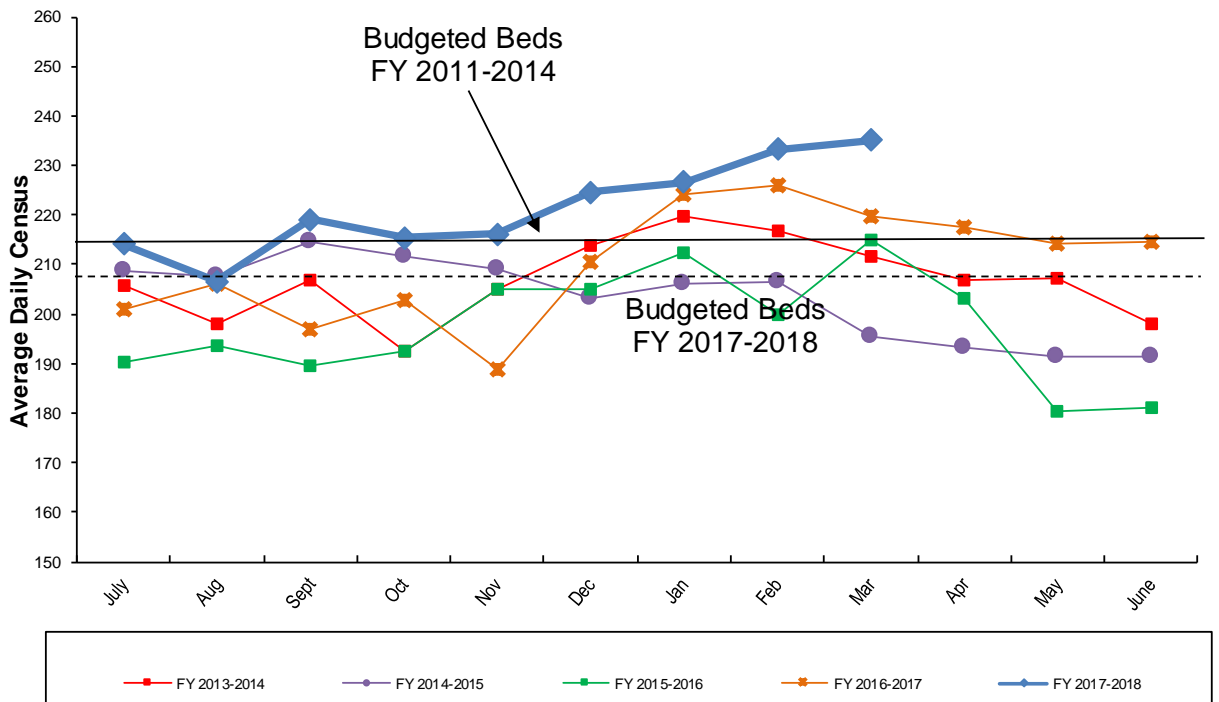
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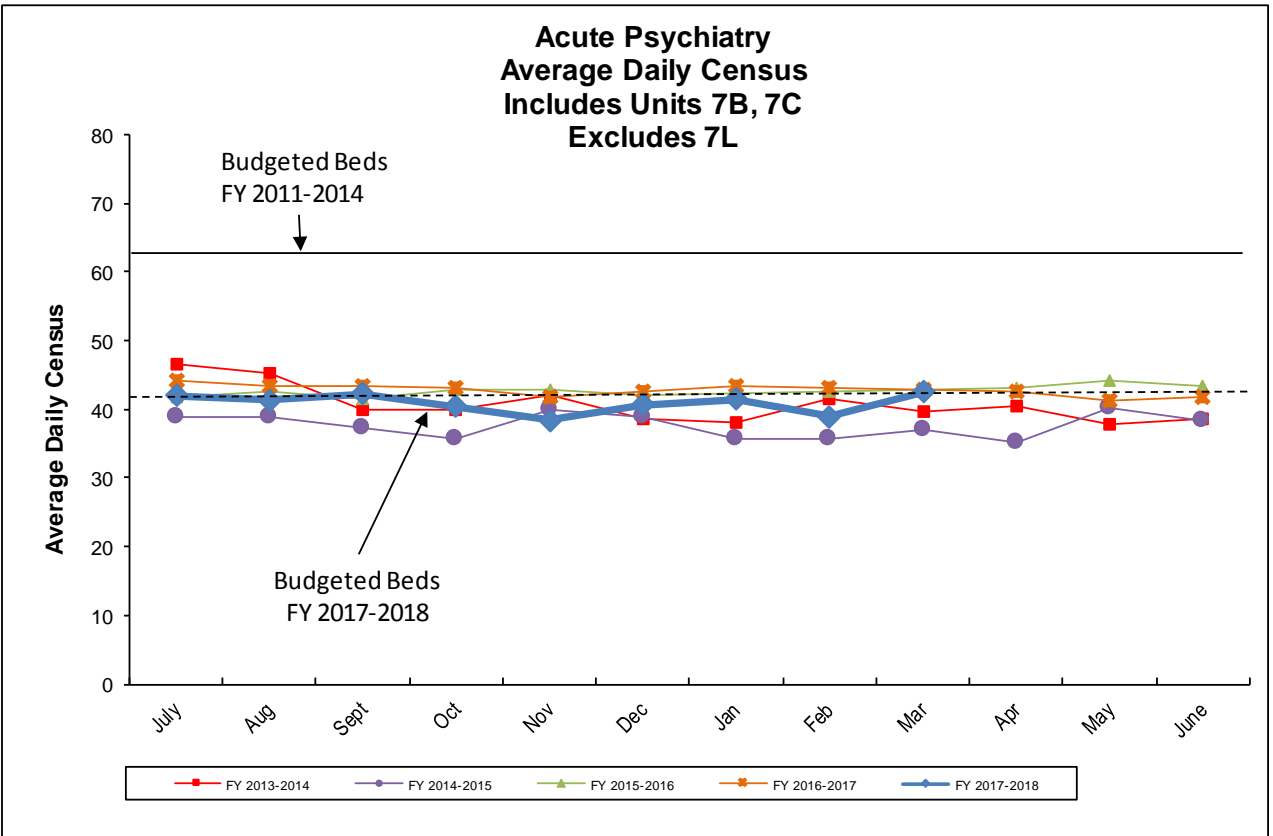
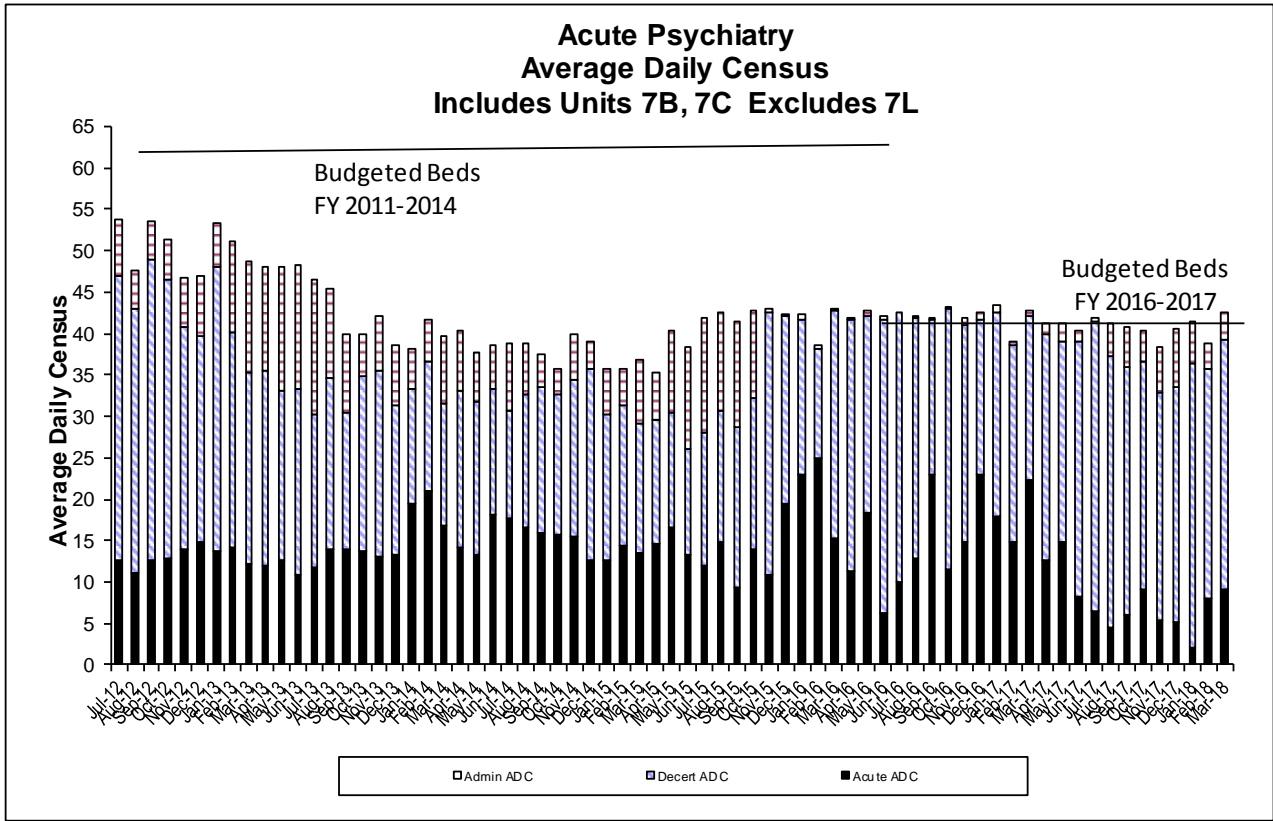
For Pay Period ending March 9, 2018, 2018, Zuckerberg San Francisco General recorded a 4.54% variance between Actual and Budgeted salary cost – actuals were \$667,890 over budget. For variance to budget year-to-date, ZSFG has a negative variance of \$8,193,303/3.1%.

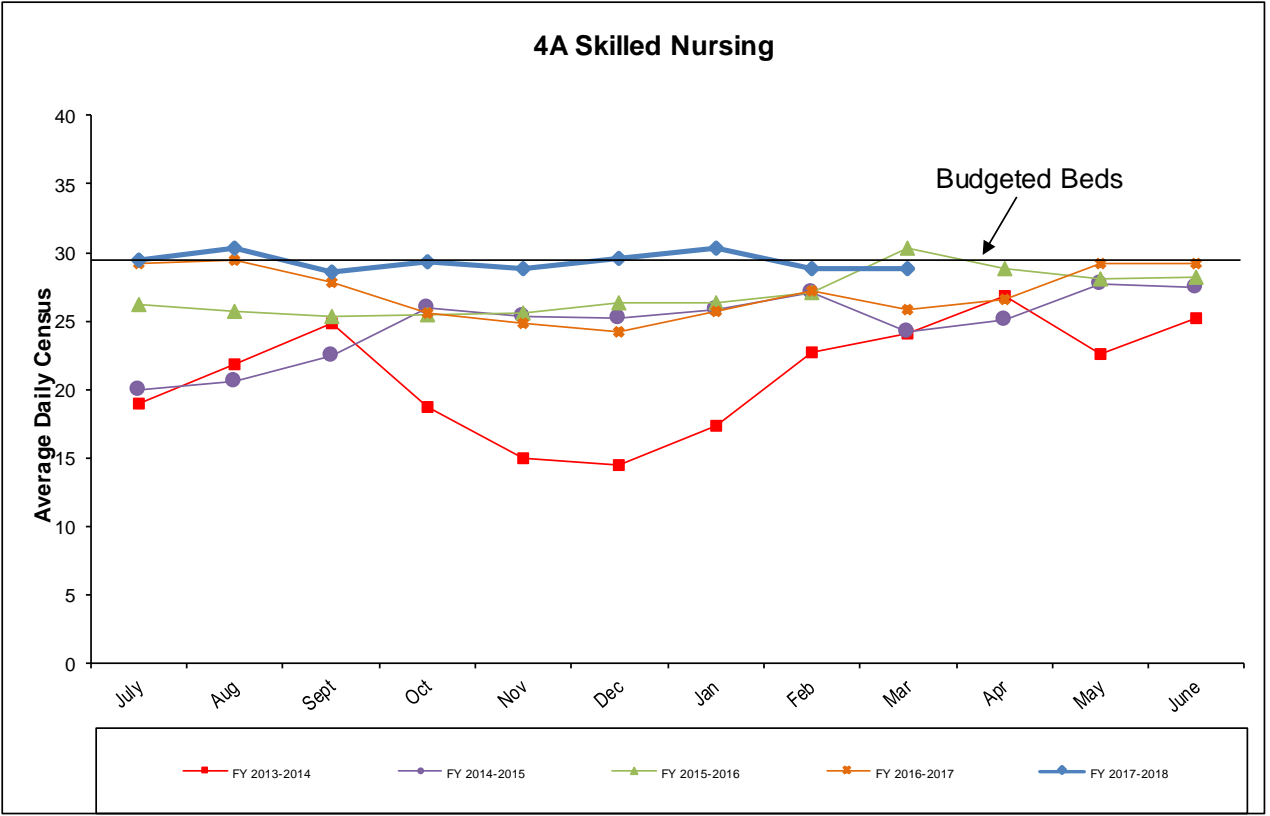
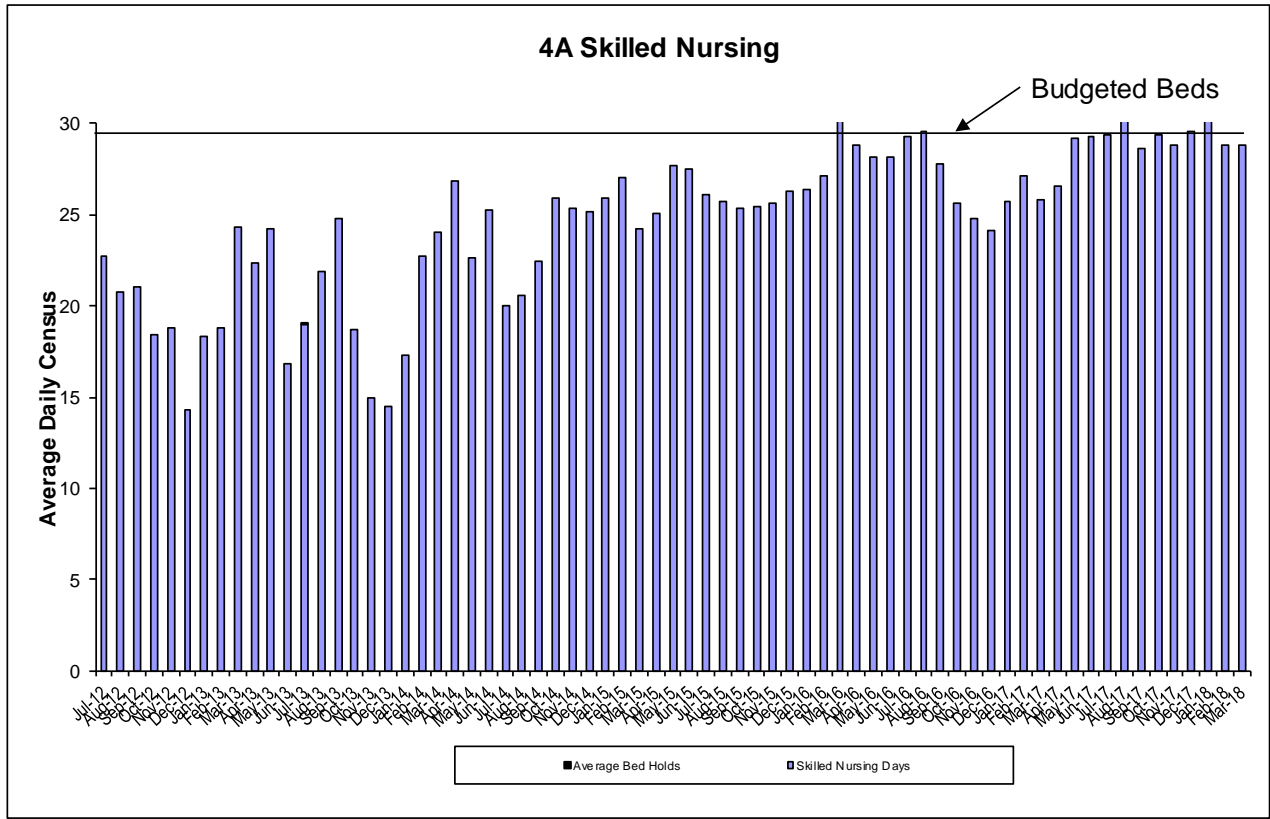
### Medical/Surgical



### Medical/Surgical







### Variance Between Salary Expenditure and Budget by Pay Period (PP) and Year To Date (YTD)

