Zuckerberg San Francisco General Hospital and Trauma Center

True North Scorecard FY 19/20
8/21/2020
Owner: ZSFG Executive Team
Unit/Dept: ZSFG-Wide

Purpose Statement: To track our performance in achieving True North, using focused driver metrics aligned with organization-wide strategies.

↑/↓ Desired direction of improvement
On-Target (green)
Off-Target (red)

True North Pillar Measure	Executive Owner	Measure Unit	FY Baseline	Dir	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	FYTD*	On-Off-Target	Target FY19/20 (unless otherwise noted)
EQUITY																			
Race, Ethnicity and Language (REAL) Data Completeness PRIME	Boyo	% unique patients seen at ZSFG	69%	↑	70.4%	86.6%	86.9%	87.0%	88.0%	88.3%	88.5%	89.3%	90.7%	90.7%	91.2%	90.3%	87.3%	On-Target	75%[A]
Sexual Orientation and Gender Identity (SOGI) Data Completeness	Boyo	% unique patients seen at ZSFG	20.7%	↑	35.9%	24.4%	24.9%	24.5%	24.5%	24.2%	23.6%	24.2%	26.2%	28.4%	27.4%	26.7%	26.2%	Off-Target	30%
Disparities Assessment	Boyo	% Departments Reporting to PIPS	56% CY 18	↑	66.7%	100.0%	50.0%	100.0%	66.7%	100.0%	40.0%	66.7%	100.0%	0.0%	66.7%	100.0%	76.2%	On-Target	70%
SAFETY																			
QIP Measure Reporting QIP	Safier	CY 2019: % of Metrics with data on Target	90%	↑	90.0%	90.0%	90.0%	90.0%	90.0%	100.0%	8.3%	8.3%	8.3%	8.3%	8.3%	16.7%	16.7%	Off-Target	QIP CY 2020: 100%
Colon SSI ★	Safier / Huen	# of Colon SSI	0	↓	1	1	2	2	0	1	1	3	1	0	1	0	13	Off-Target	5
PSI 90 ★	Safier / Huen	PSI 90 Composite (Medicare FFS; Weighted O/E)	1.47 (FY1618)	↓	1.17	0.95	0.95	0.92	1.20	1.23	0.93	0.92	0.91	0.95	0.94	PENDING	0.97	On-Target	1.37
QUALITY																			
Readmissions ★ RRP PRIME	Marks	% of PRIME population	16.72%	↓	17.28%	16.99%	15.70%	15.49%	15.80%	15.31%	15.05%	13.84%	13.96%	14.61%	14.53%	14.60%	14.60%	On-Target	16.5% PRIME
Time on Diversion	Marks	% time on diversion	46.9%	↓	35.2%	58.4%	54.7%	57.4%	48.6%	64.3%	66.6%	59.9%	34.1%	10.7%	7.4%	16.0%	42.8%	Off-Target	40.0%
CARE EXPERIENCE																			
Care Transitions Composite Score PRIME	Johnson	% of positive responses	52%	↑	51.5%	50.4%	49.6%	50.2%	45.1%	52.1%	48.9%	47.8%	47.3%	59.2%	59.7%	53.1%	51.2%	Off-Target	52%
Specialty Care CG CAHPS Courteous and Helpful Office Staff Composite Score	Johnson	% of positive responses	65%	↑	86.2%	85.7%	85.7%	86.3%	87.8%	94.1%	85.3%	90.2%	87.9%	86.4%	86.9%	87.6%	87.5%	On-Target	70%
DEVELOPING OUR PEOPLE																			
Daily Management System (DMS) Implementation	Marks, Bilinski	# departments at 100% components	4	↑	4	4	4	4	4	4	4	4	4	4	5	5	5	Off-Target	7[D]
PDP A3 Targets	Marks, Nguyen	% exp exec leaders CY19:% established targets CY20: % achieving targets	95%	↑	94.8%	94.8%	94.8%	94.8%	95.0%	95.0%	95.0%	Deferred	Deferred	Deferred	Deferred	Deferred	Deferred	Off-Target	85%
BTBPTW Project Milestones	Johnson, Woods	# of projects on target	0	↑	0	0	0	0	0	0	0	0	0	0	0	0	0	Off-Target	3
FINANCIAL STEWARDSHIP																			
Capital Projects Building 5	Boyo	# slippage days in construction per construction month	10.3	↓	7	0	0	20	0	44	39	0	26	6	31	30	30	Off-Target	10[F]
UCSF RAB	Damiano	# of Requirements Met	0	↑	0	0	0	0	1	1	1	1	1	1	1	1	1	Off-Target	3
Salary Variance	Boffi	$ in Millions Variance	-$9.221	↓	$0.429	-$1.162	-$1.477	-$1.719	-$2.655	-$2.689	-$2.779	-$3.376	-$3.300	-$4.381	-$4.672	-$2.783	-$2.783	On-Target	-$3.700
Improve CMI ★	Day	CMI (excludes normal newborns and psychiatry)	1.51	↑	1.49	1.45	1.48	1.52	1.51	1.53	1.51	1.53	1.58	1.56	1.57	PENDING	1.52	Off-Target	1.7
TRUE NORTH OUTCOME METRICS																			
Black/African-American Heart Failure (HF) Readmissions	Ehrlich	% B/AA HF discharges with 30-day readmission	30.4%[G]	↓	17.6%	26.7%[J]	28.6%	57.1%	35.0%	42.9%	35.0%	25.0%	28.6%	20.0%	28.6%	27.8%	31.1%[G]	On-Target	34.3%
CMS Star Rating ★	Ehrlich	# stars	1-star	↑	1-star						1-star						1-star	Off-Target	2-star
Likelihood to Recommend Hospital to Friends & Family ★	Ehrlich	% positive responses	75.7%	↑	61.7%	77.4%	83.3%	68.1%	73.3%	77.5%	80.0%	71.2%	74.2%	86.3%	77.3%	75.0%	75.4%	Off-Target	80%
Likelihood to Recommend Provider's Office to Friends & Family ★	Ehrlich	% positive responses	68.3%	↑	82.2%	84.1%	78.8%	82.4%	86.3%	87.0%	83.0%	84.4%	83.5%	88.9%	87.7%	85.6%	84.5%	On-Target	67%
Likelihood to Recommend ZSFG as a Workplace	Ehrlich	Weighted Avg.	NA	↑	3.66												3.66	Off-Target	3.76
General Fund Spend To Not Exceed Budgeted Amount	Ehrlich	$ in Millions	$104.97M	↓	$150.82M			$110.95M			$72.56M			$17.34M			$17.34M[H]	On-Target	$168.18M

★ = Included in CMS Star Ratings   HAC = Included in CMS Hospital-Acquired Conditions Reduction Program   RRP = Included in CMS Readmissions Reduction Program   PRIME = Included in PRIME   QIP = Included in QIP

Footnotes:
A = REAL Data Completeness metric includes the PRIME target for FY 18/19. The baseline, monthly, and YTD data presented here represents REAL data completeness for unique patients seen at ZSFG (including PRIME and non-PRIME patients).
D = DMS Implementation metric is on target with projected targets per the implementation schedule.
F = Capital Projects metric target is 10 construction slippage days per month per active project
G = Black/African Amercian Heart Failure Readmissions outcome metric is in coordination with DPH/SFHN, clinical experts and readmissions task force
H= General Fund values are not cumulative, but a projected estimate of GF fund spend through the end of the fiscal year based on actual revenues and expenditures at the end of each quarter
J= B/AA HF Readmissions August rate is between 08-03-2019 to 08-31-2019.