

JCC CEO Data Report December 2024

Part 1: True North Scorecard Key Performance Indicators

Part 2: Flow Data

Part 1: True North Scorecard

1. Departments Driving Equity
2. Achieving Safe & Equitable Patient Care
 - Sepsis Bundle Compliance
 - Hospital Acquired Pressure Injuries
 - Falls with Injury
3. Harmonizing and Synergizing Access and Flow Across the ZSFG Campus
 - Ambulance Diversion %
 - Left without Being Seen %
 - OR Add-on Case Completion %
 - Third Next Available Appointment Rate
 - Lower Level of Care Patient Days (Med/surg)
4. Achieving Safe & Equitable Staff Experience
 - Physical Assaults with Injury
5. Revenue Cycle Optimization
 - Denial Rate – Hospital Billing

2024 Scorecard:

True North:

Owner:

Goal Statement:

Departments Driving Equity

Equity

Ehrlich

Increase % departments with an active equity driver >= 65%

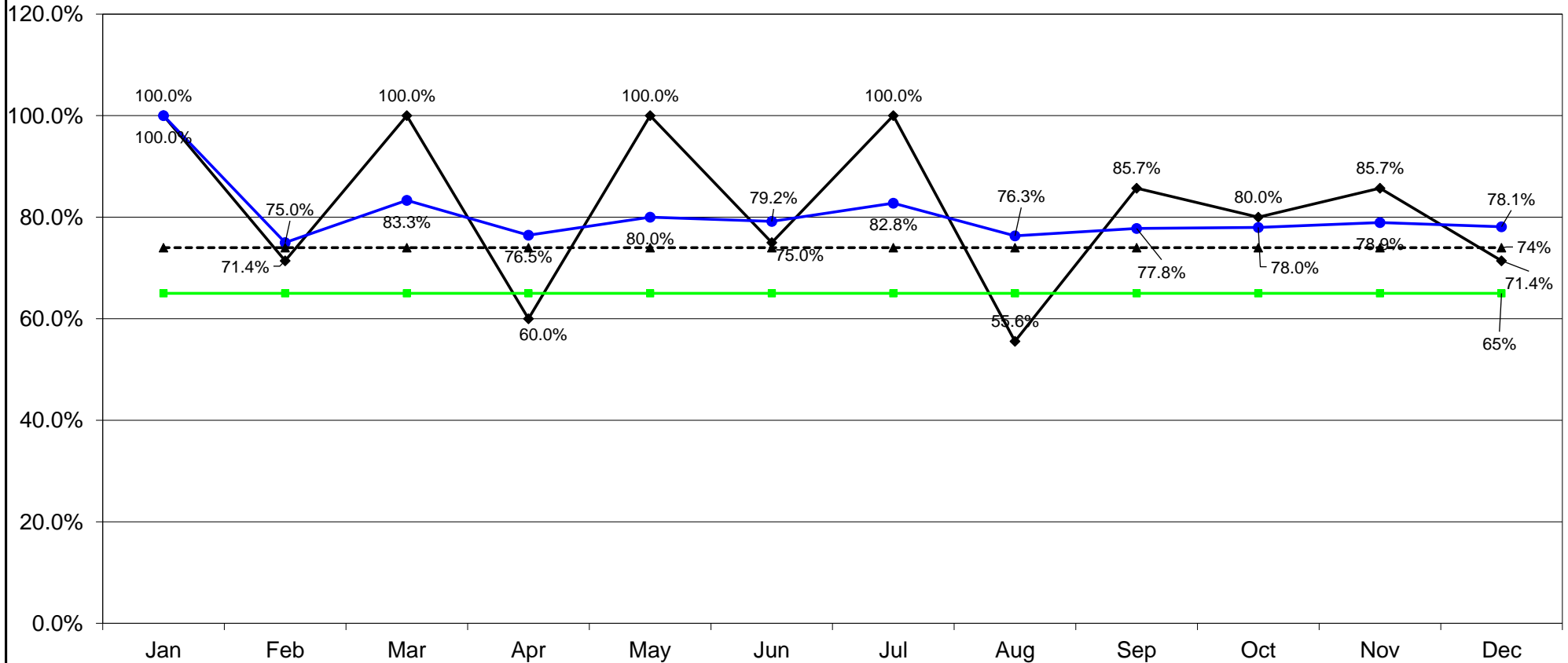


2024 YTD: **78.1%**

2024 Target: **65.0%**

2023 Baseline: **74.0%**

% Change From Last Year: **5.57%**



2024 Scorecard:

True North:

Owner:

Goal Statement:

Sepsis Bundle Compliance (SEP-1)

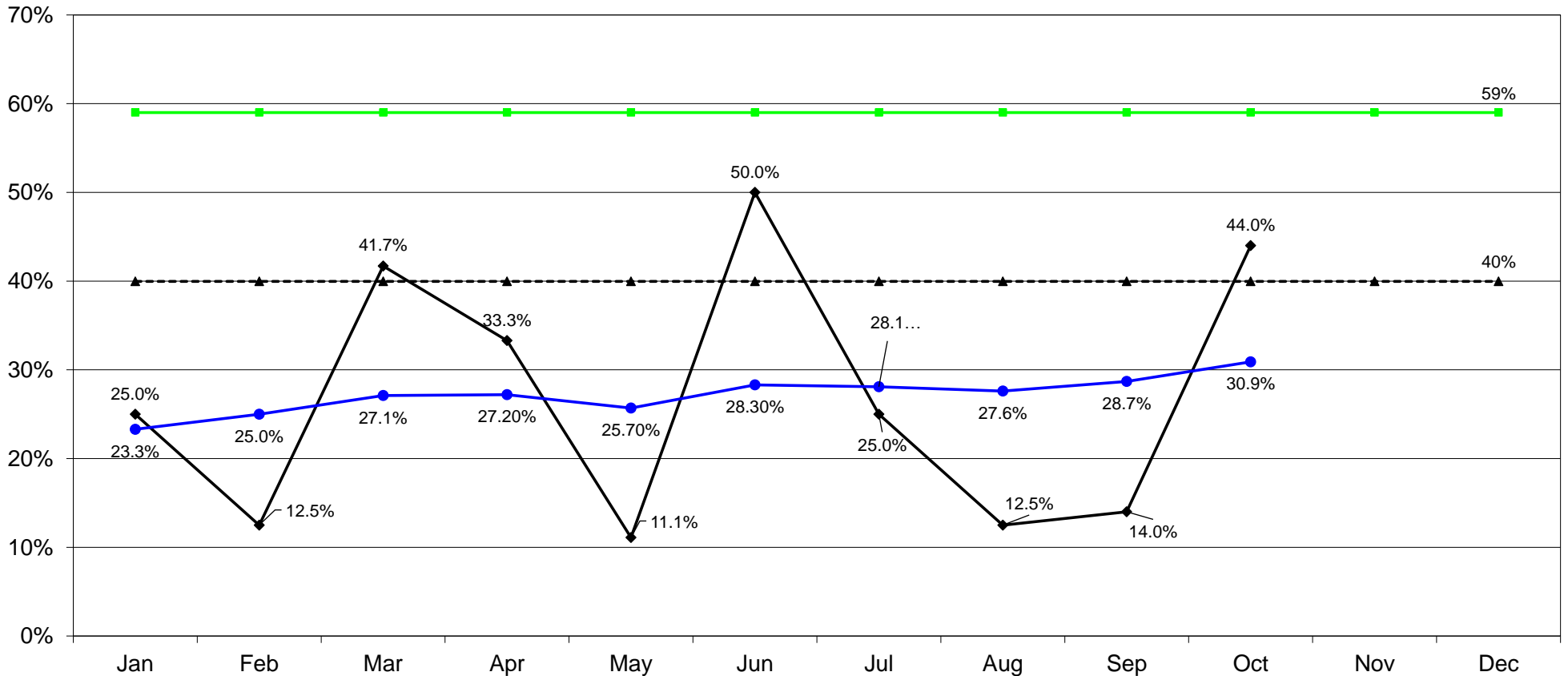
Safety

Smith

Increase % of Sepsis Bundle Compliance (SEP-1) >= 59%



2024 YTD:	31%
2024 Target:	59%
2023 Baseline:	40%
% Change From Last Year:	



2024 Scorecard:

Hospital Acquired Pressure Injuries (HAPI)

True North:

Safety

Owner:

Smith

Goal Statement:

Reduce rate of patient hospital acquired pressure injuries per 1,000 midnight census ≤ 0.2

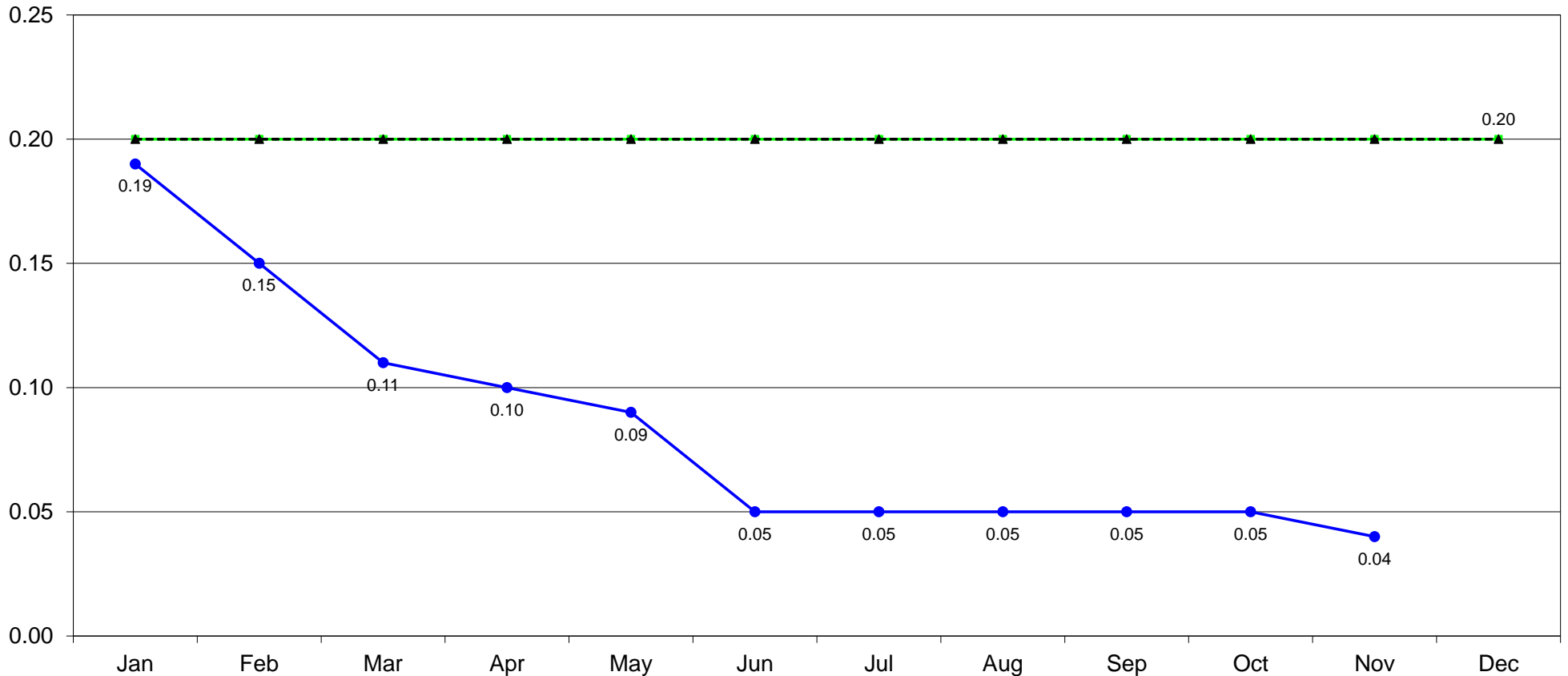


2024 YTD: **0.04**

2024 Target: **0.20**

2023 Baseline: **0.20**

% Change From Last Year: **-80.00%**



● YTD

—▲— Target

—▲— Baseline

2024 Scorecard:

Falls with injury (med surg, 4A, ED, inpatient psych)

True North:

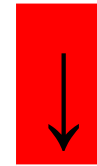
Safety

Owner:

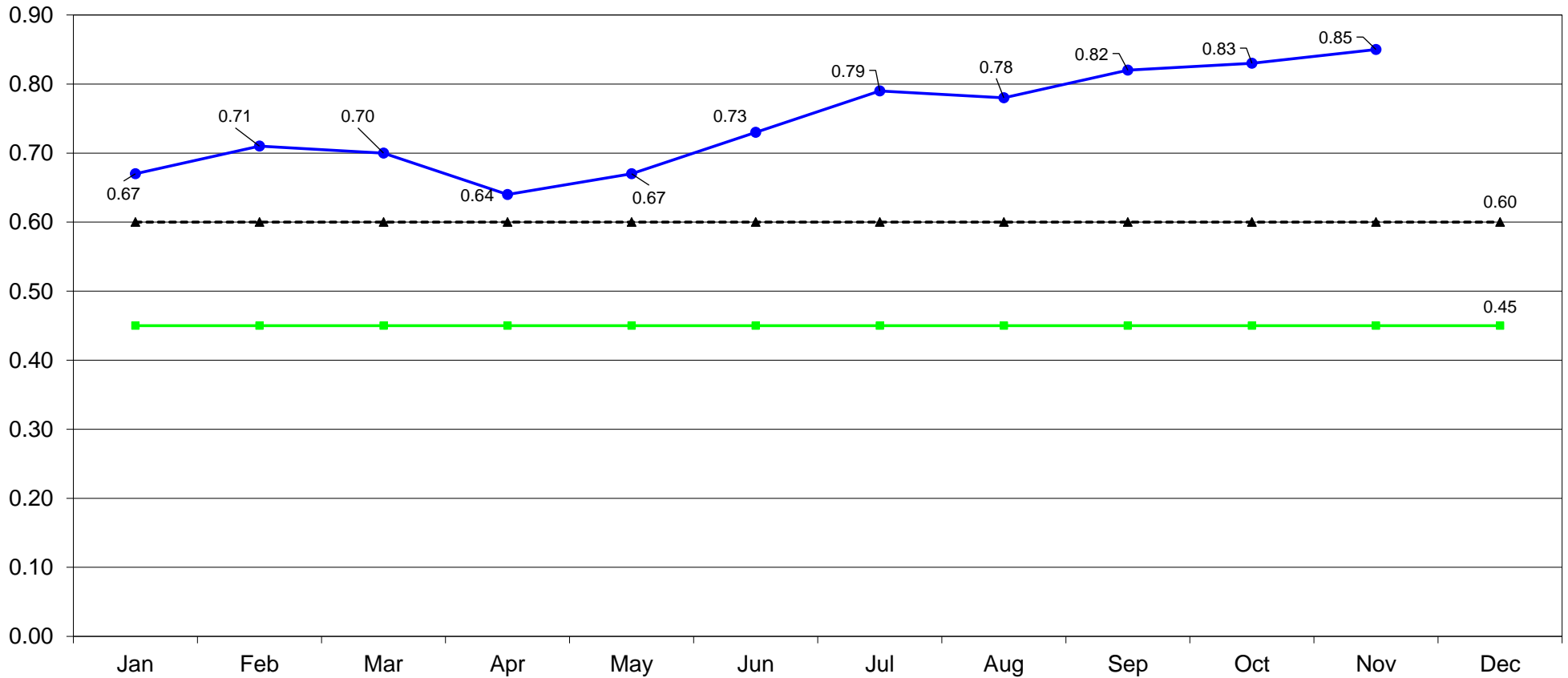
Smith

Goal Statement:

Reduce rate of patient falls per 1,000 midnight census <= 0.45



2024 YTD:	0.85
2024 Target:	0.45
2023 Baseline:	0.60
% Change From Last Year:	41.67%



2024 Scorecard:

Emergency Department - Diversion Rate

True North:

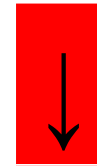
Quality

Owner:

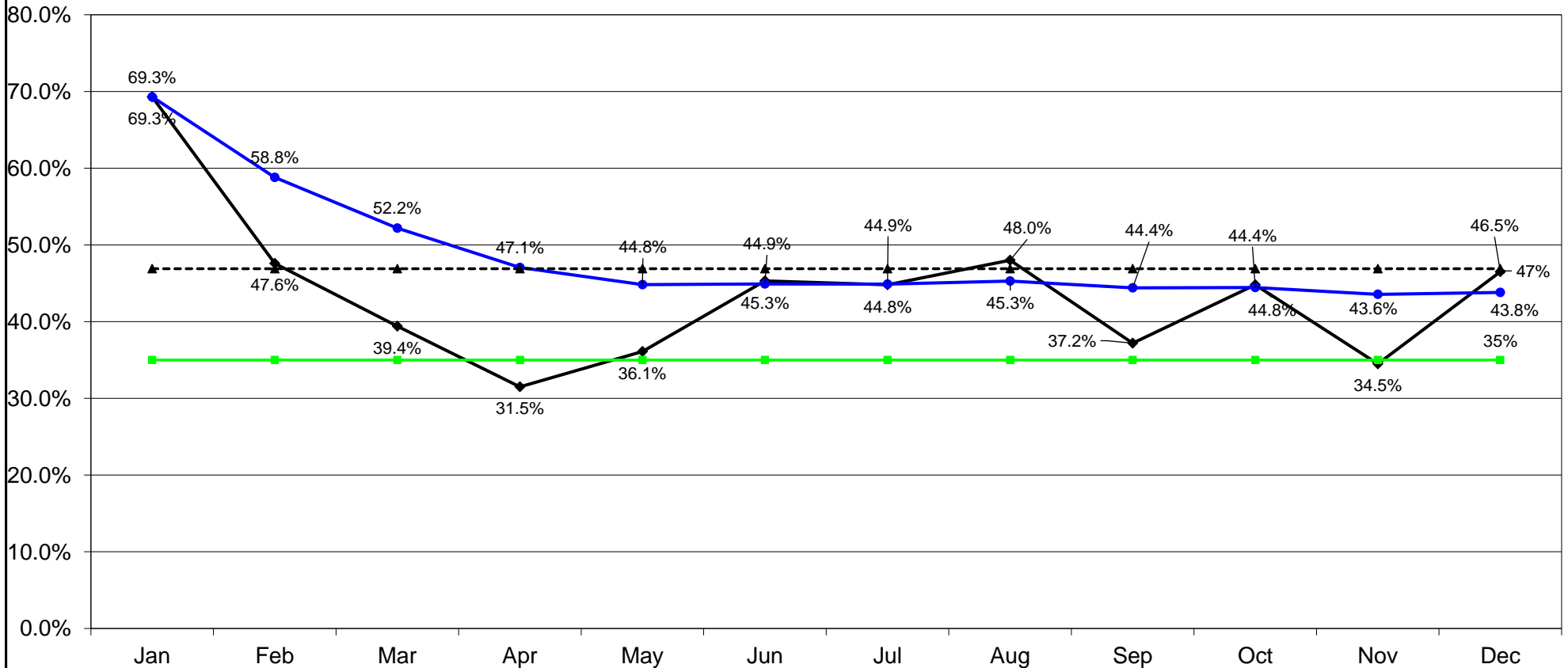
Staconis, Colwell

Goal Statement:

Reduce Emergency Department ambulance diversion rate = <35%



2024 YTD:	43.8%
2024 Target:	35.0%
2023 Baseline:	46.9%
% Change From Last Year:	-6.60%



2024 Scorecard:

Emergency Department - Left Without Being Seen

True North:

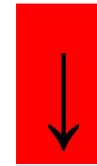
Quality

Owner:

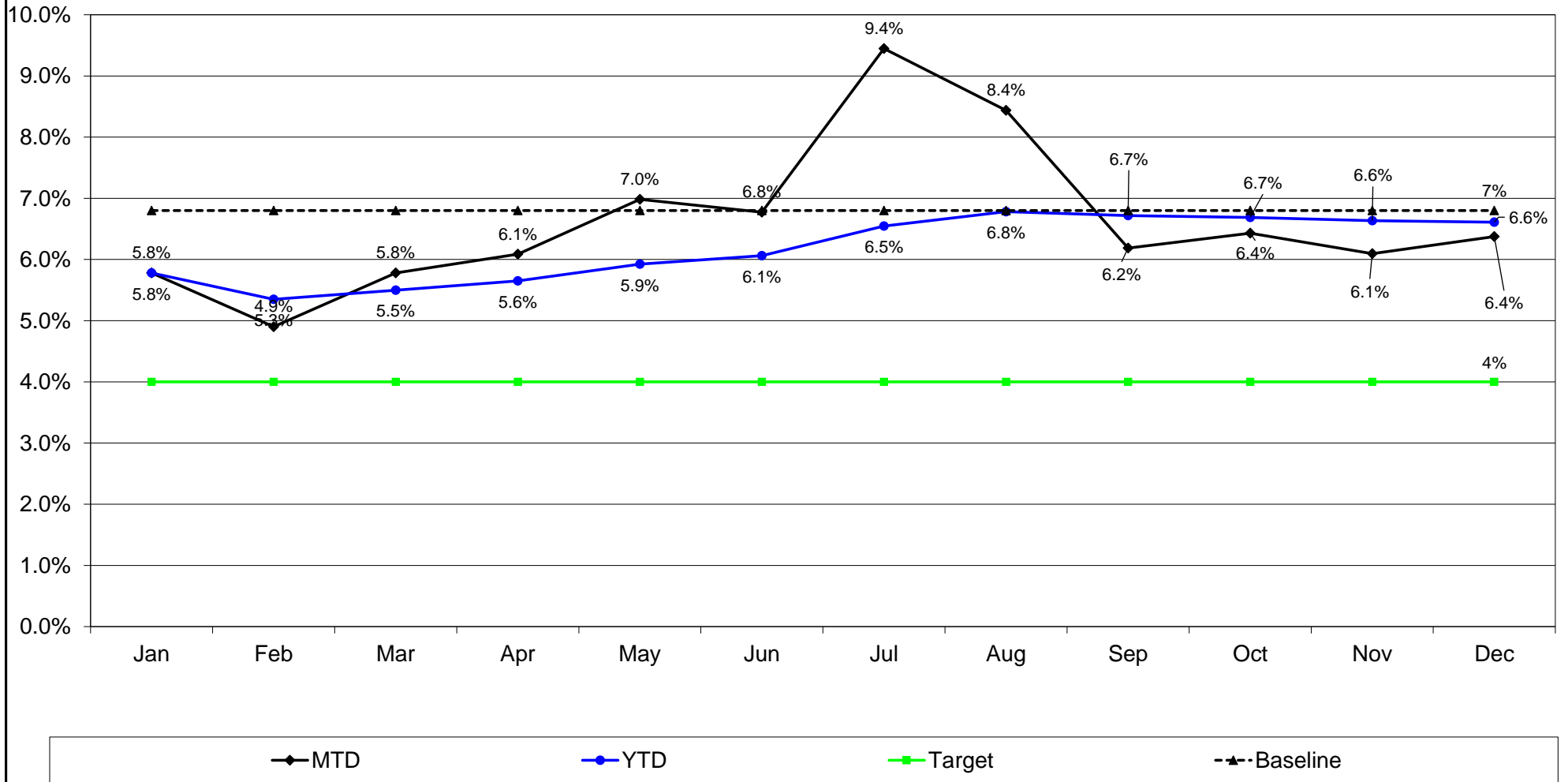
Staconis, Colwell

Goal Statement:

Reduce Emergency Department Left Without Being Seen rate <=4%



2024 YTD:	6.6%
2024 Target:	4.0%
2023 Baseline:	6.8%
% Change From Last Year:	-2.79%



2024 Scorecard:

True North:

Owner:

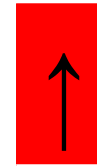
Goal Statement:

Perioperative - OR Add-on Case %

Quality

Coggan, Palaniappa

Completion rate of Urgent-24 hour OR add-ons within 24 hours >95%

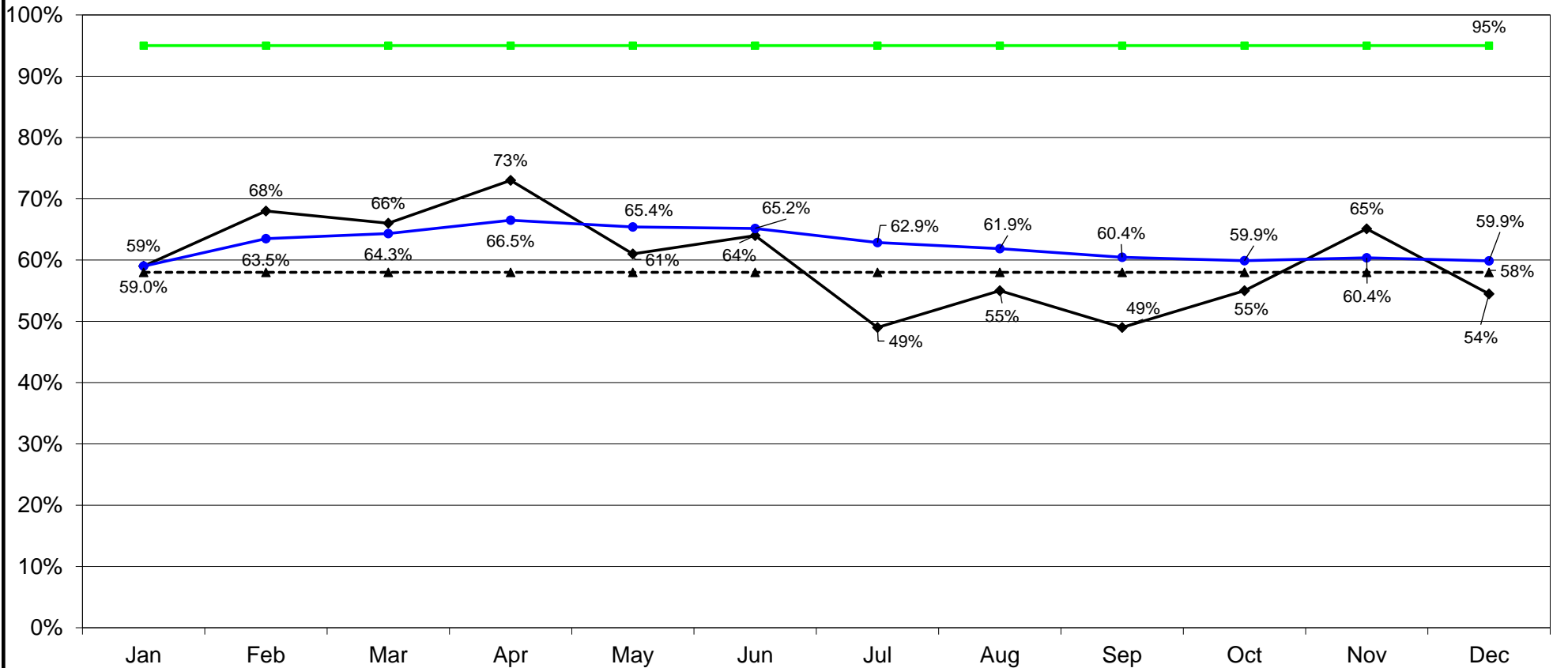


2024 YTD: **59.9%**

2024 Target: **95.0%**

2023 Baseline: **58.0%**

% Change From Last Year: **3.24%**



2024 Scorecard:

Specialty Clinics - Third Next Available Appointment

True North:

Quality

Owner:

Patel

Goal Statement:

Increase % of outpatient adult clinics with Thrid Next Available Appointment less than 21 days, >= 90%

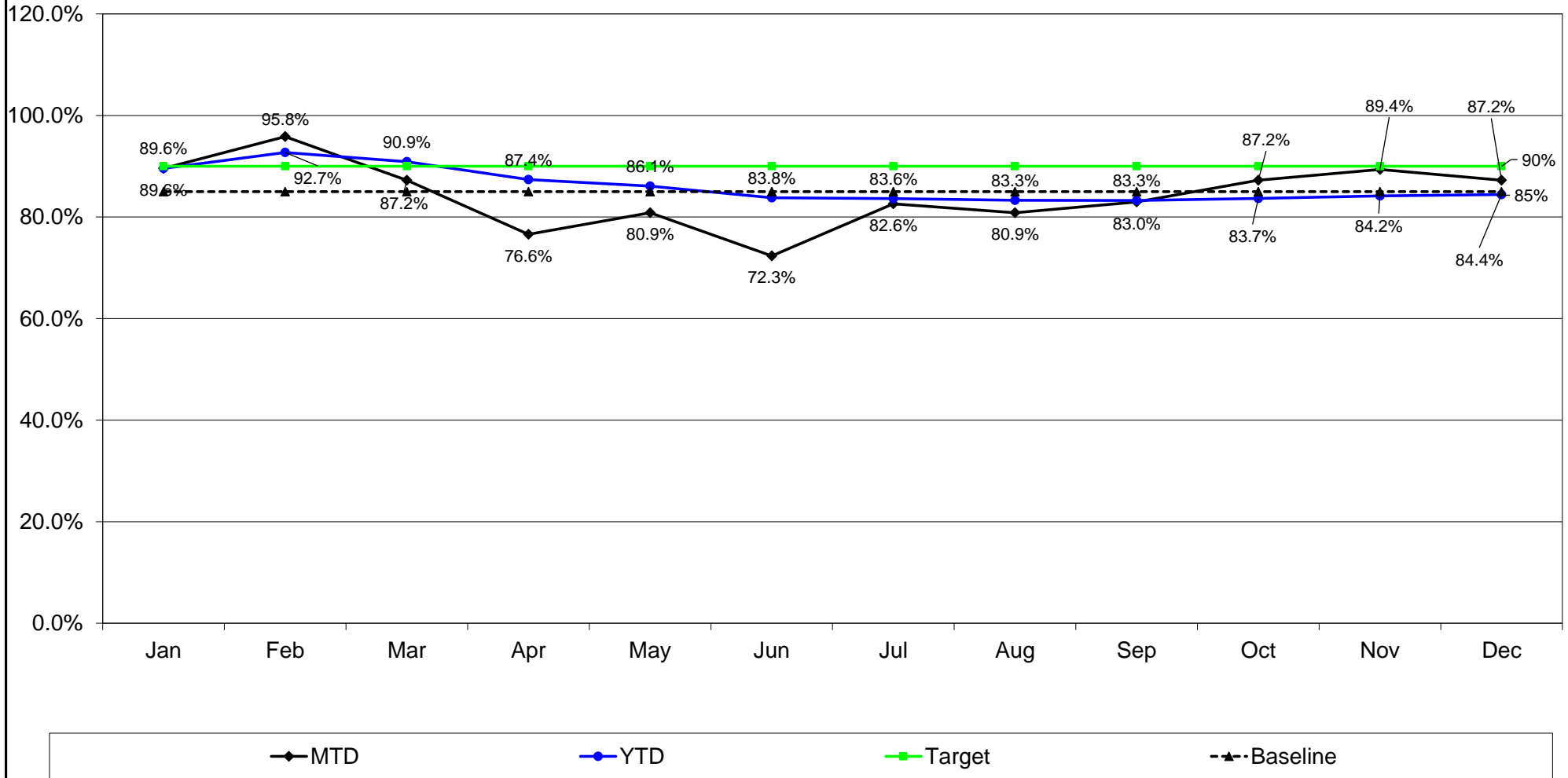


2024 YTD: **84.4%**

2024 Target: **90.0%**

2023 Baseline: **85.0%**

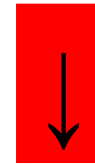
% Change From Last Year: **-0.68%**



2024 Scorecard: Dept of Care Coordination - Lower Level of Care (med/surg LLOC)

True North:
Owner:

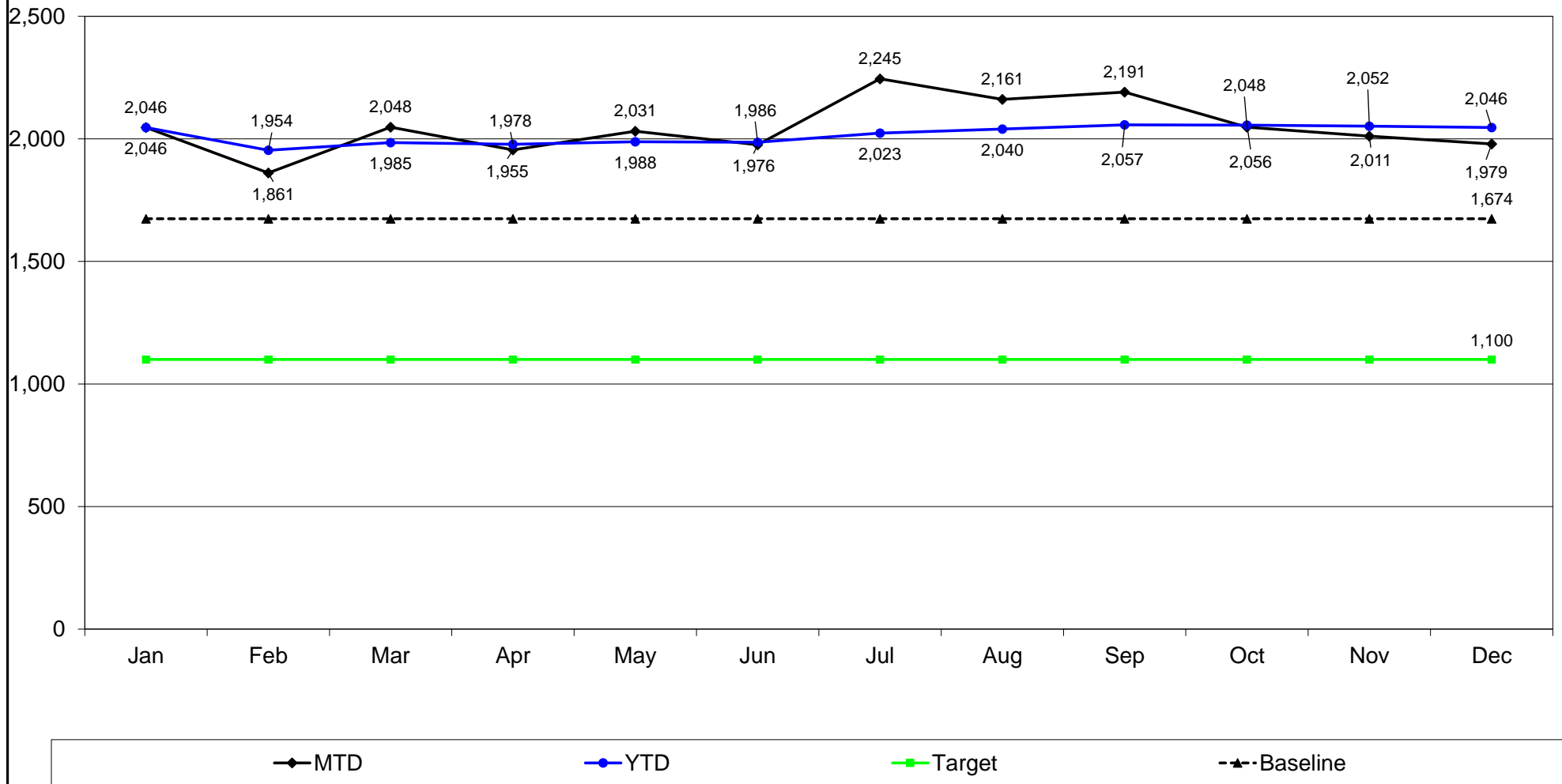
Quality
Iverson, Ou, Morgos



2024 YTD: **2,046**
2024 Target: **1,100**

2023 Baseline: **1,674**
% Change From Last Year: **22.22%**

Goal Statement: *Reduce Lower Level of Care patient days <=1100 days*



2024 Scorecard:

True North:

Owner:

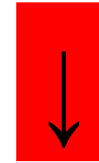
Goal Statement:

Physical Assaults with Injury

Developing Our People

Smith, Journagin

Reduce the # of physical assaults with injury to ZSFG staff from a rate of 5.8 per month to less than 4.0 per month for the combined high risk areas (PSYCH, ED, BHC, UCC, M/S)

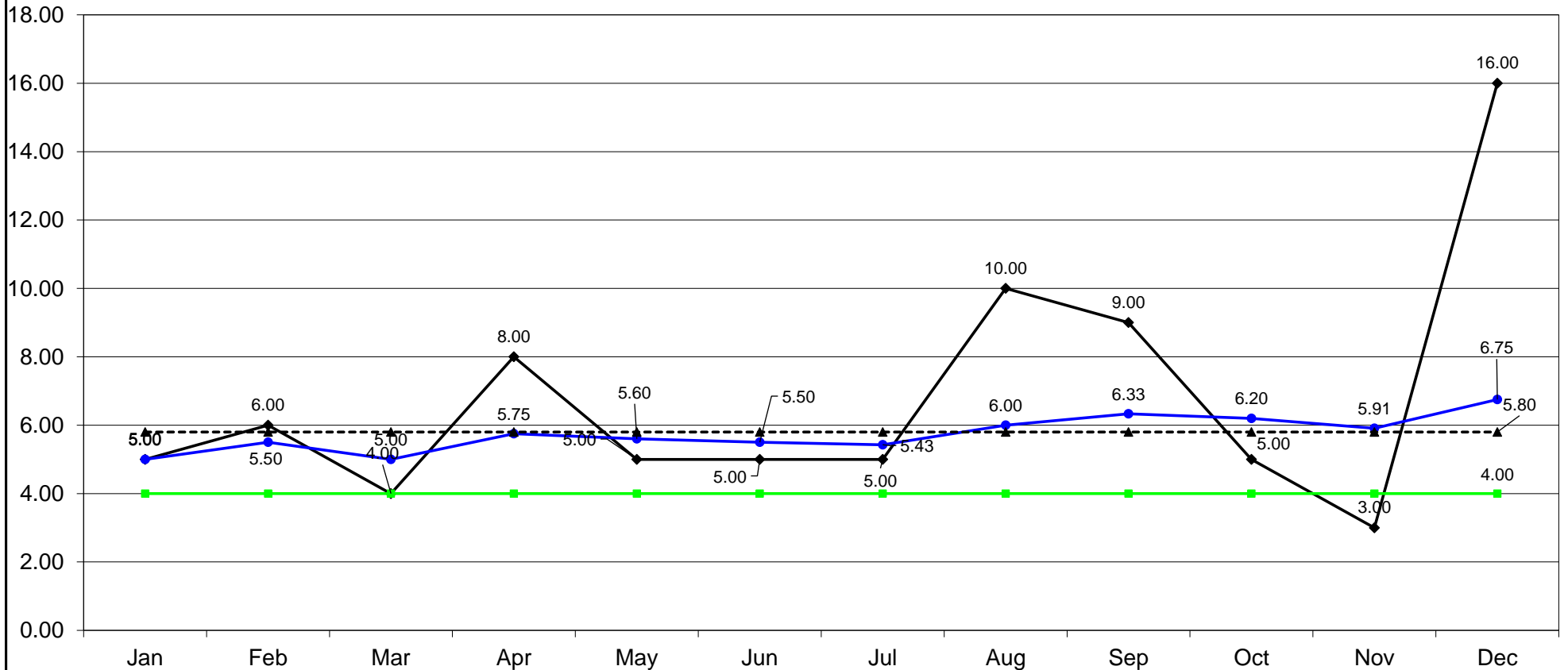


2024 YTD: **6.75**

2024 Target: **4.00**

2023 Baseline: **5.80**

% Change From Last Year: **16.38%**



2024 Scorecard:

True North:

Owner:

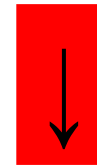
Goal Statement:

Denial Rate - Hospital Billing

Financial Stewardship

Wu, Kanzaria

Reduce Hospital Billing Denial rate for primary payers from 18.6% to 15.6% by July 2024.

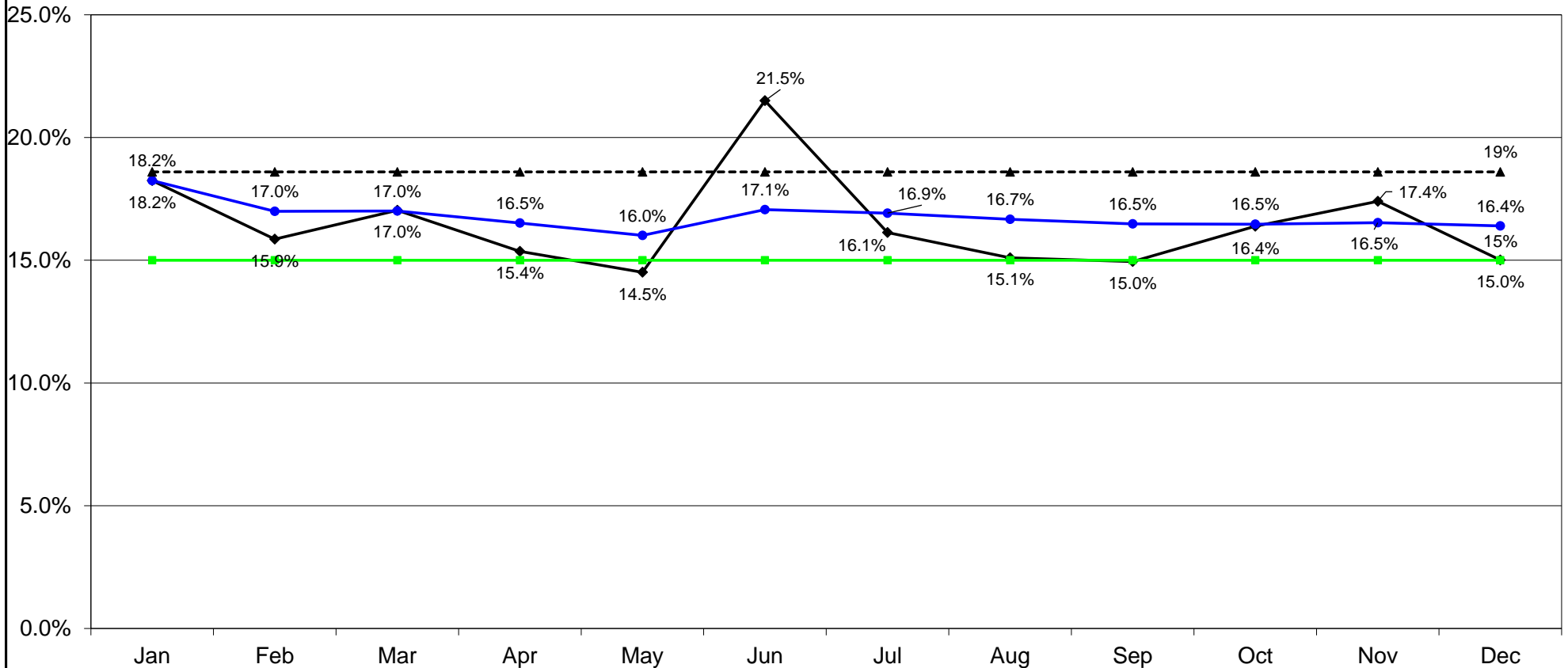


2024 YTD: **16.4%**

2024 Target: **15%**

2023 Baseline: **18.6%**

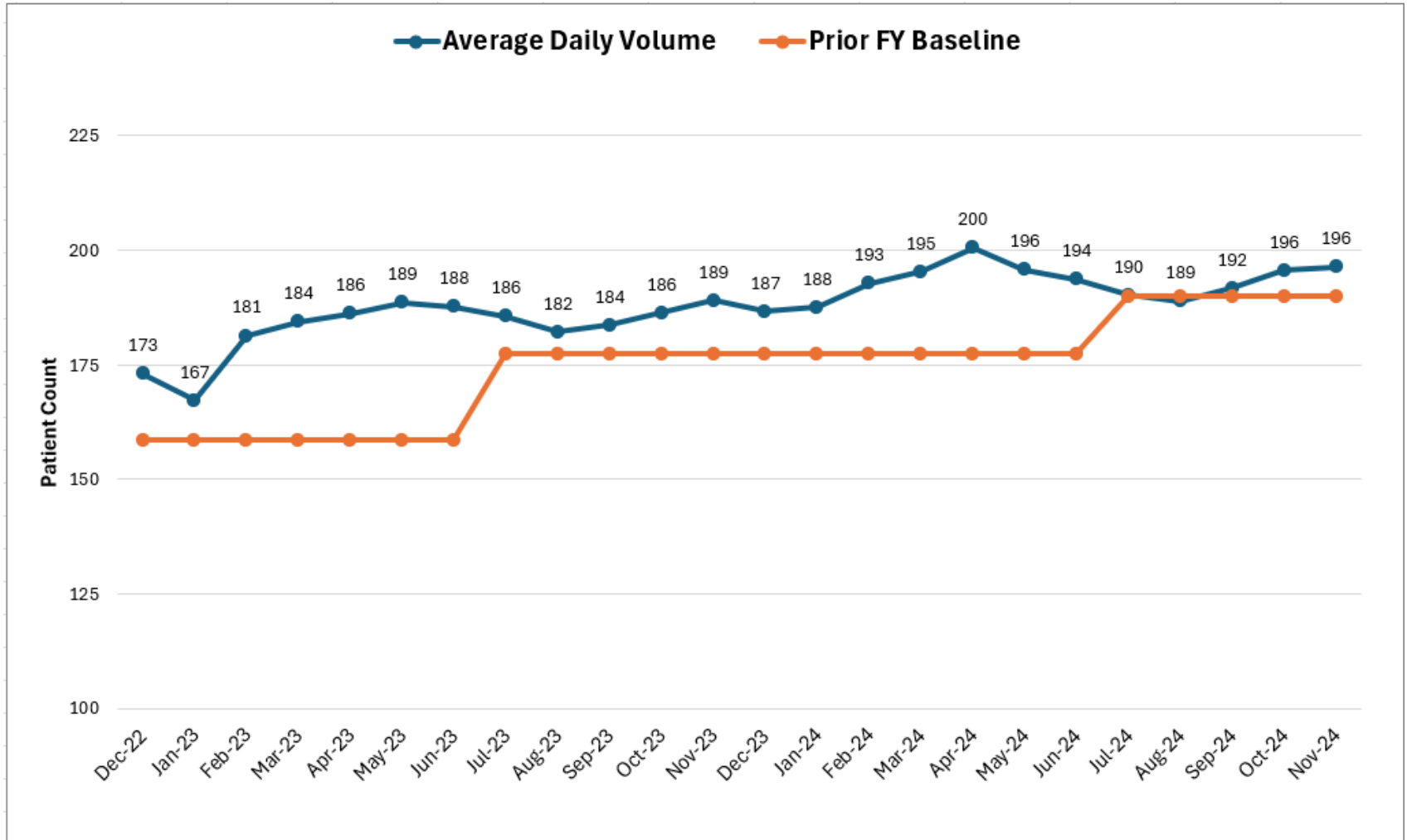
% Change From Last Year: **-11.85%**



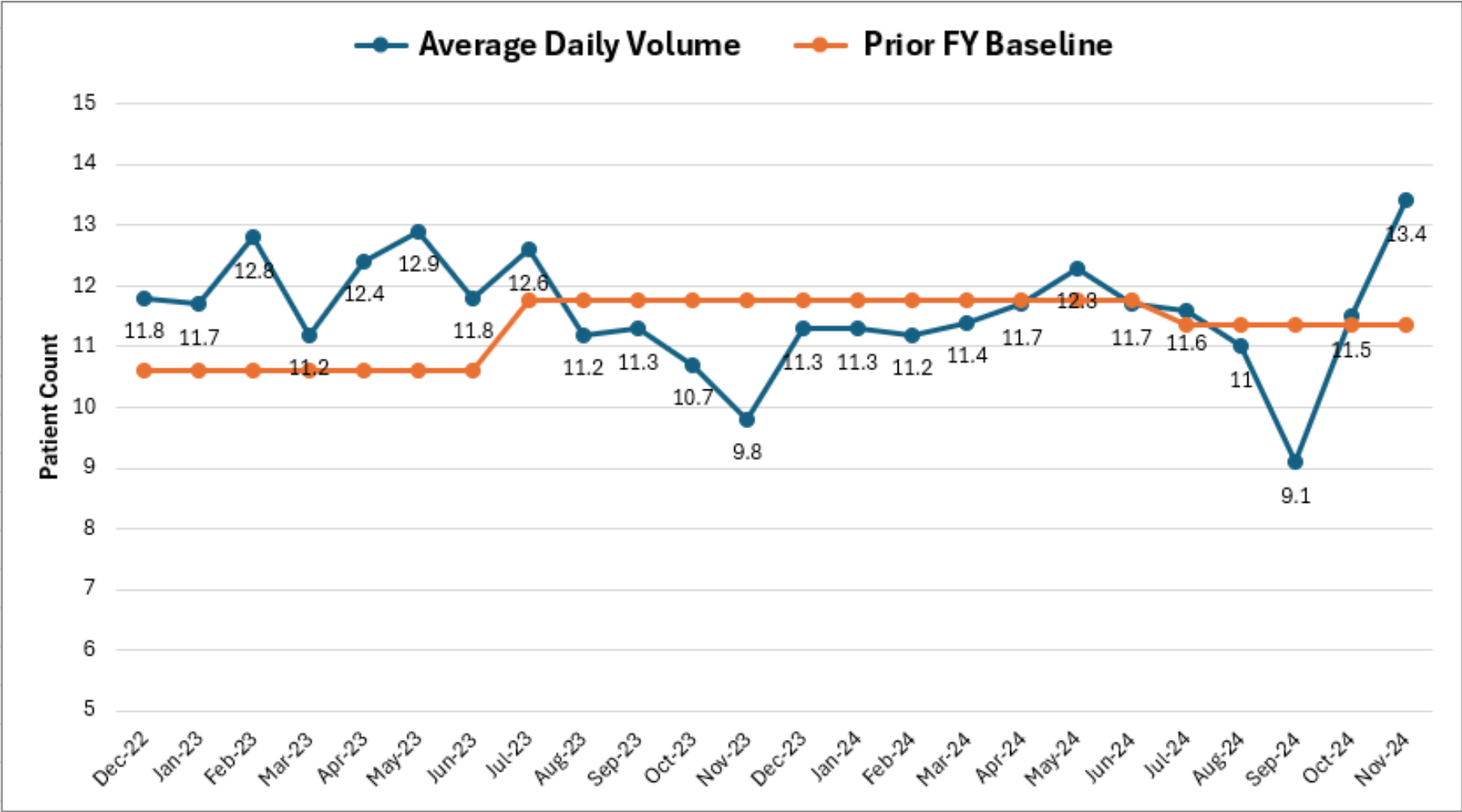
Part 2: Flow Data

1. Input (Emergency Volume)
 - ED, PES
2. Input and Output (Admissions and Discharges)
 - Physical Health (Med/Surg, ICU, OR, PACU), Maternal Child, Psychiatry
3. Throughput
 - ED Boarding
 - Length of Stay – Physical Health, Psychiatry, Maternal Child
 - LLOC – Physical Health and Psychiatry
4. Weekly ZSFG to LHH Transfers
5. Census Data
 - Physical Health (Med/Surg, ICU, OR, PACU), Maternal Child, Psychiatry
 - Increasing demand over time

Input - Medical ED Avg Daily Volume

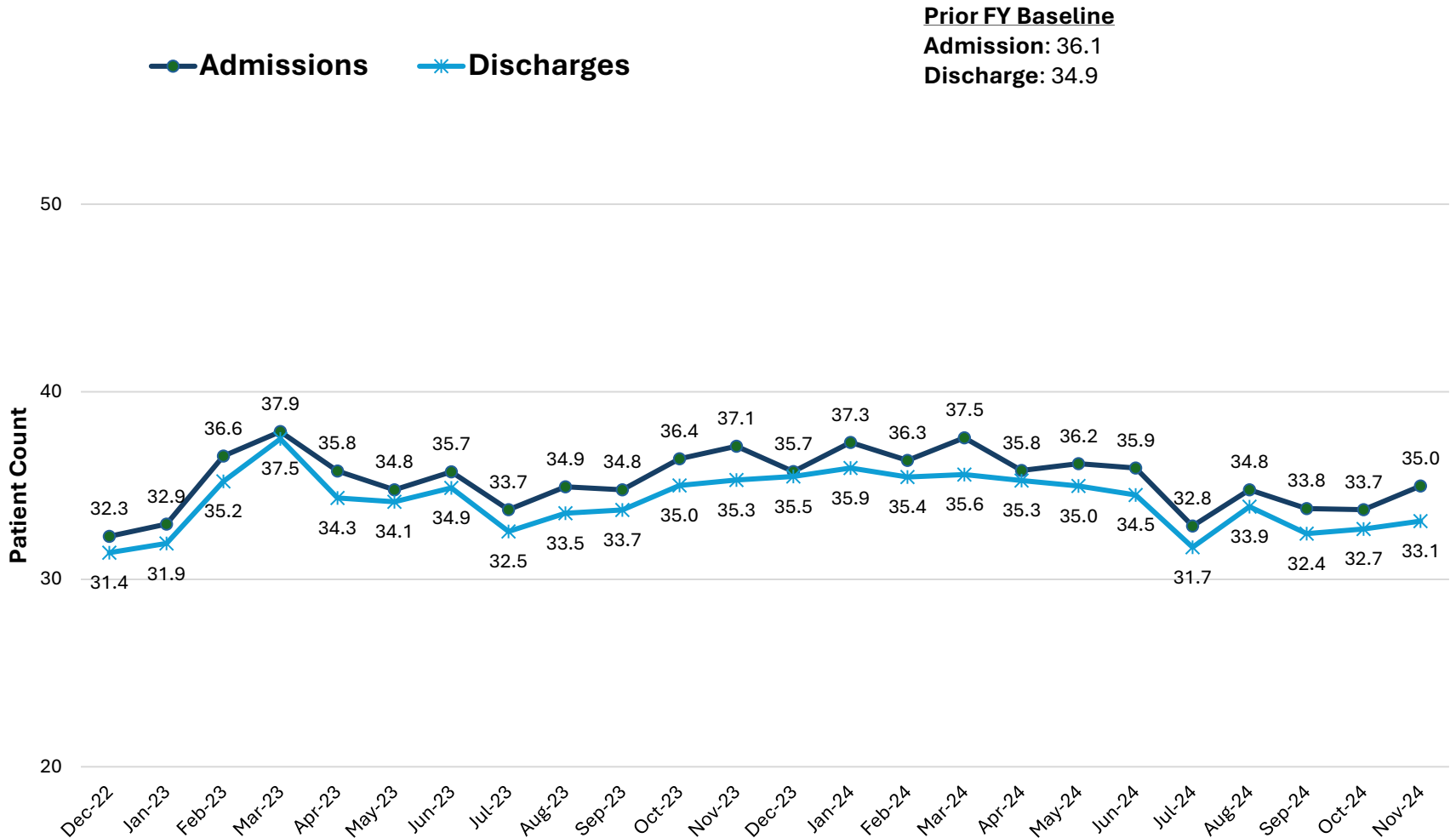


Input - Psychiatric ED Avg Daily Volume



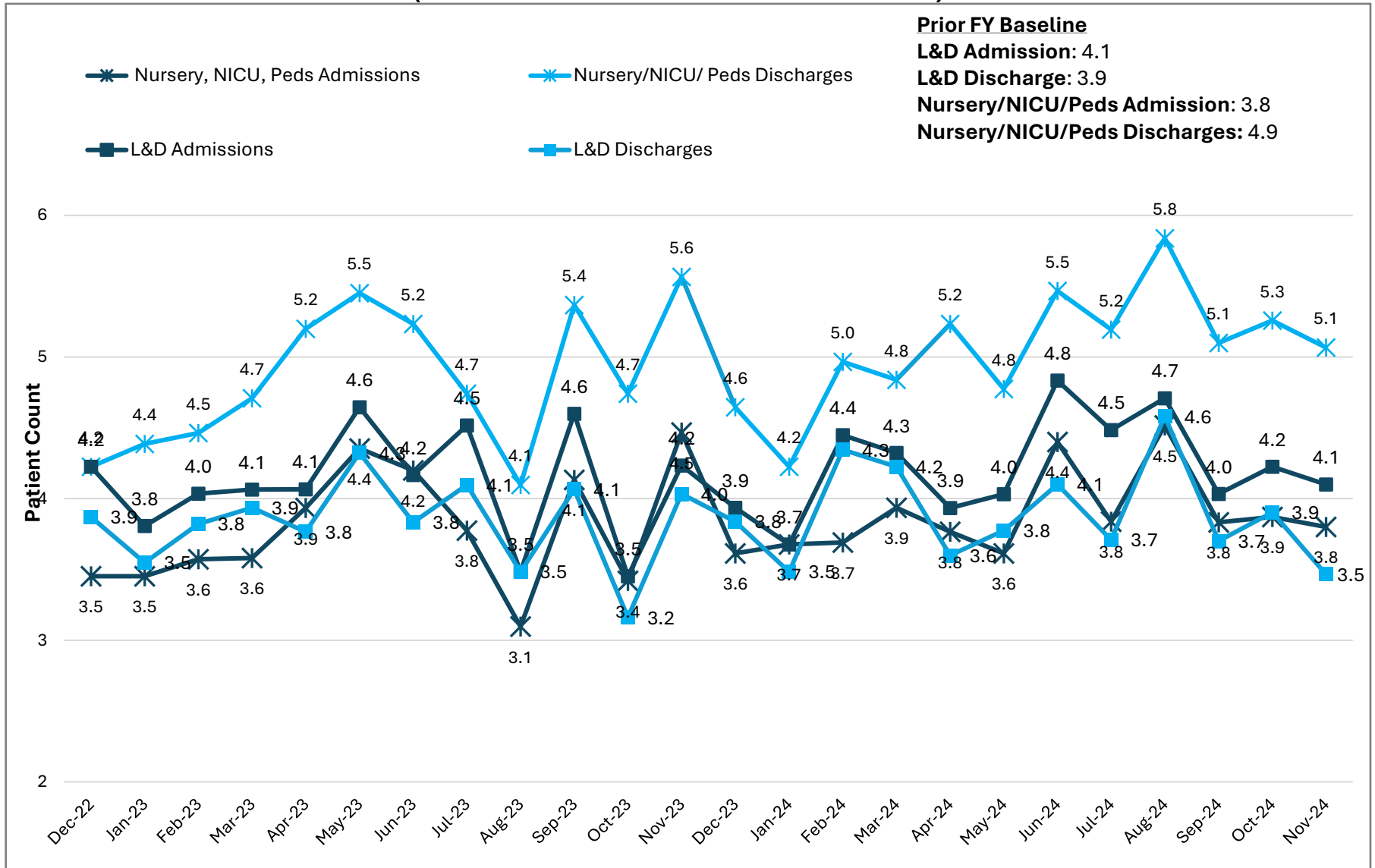
Inpatient Avg Daily Admissions & Discharges

(Physical Health - MedSurg/ICU/Emergency/OR/PACU)

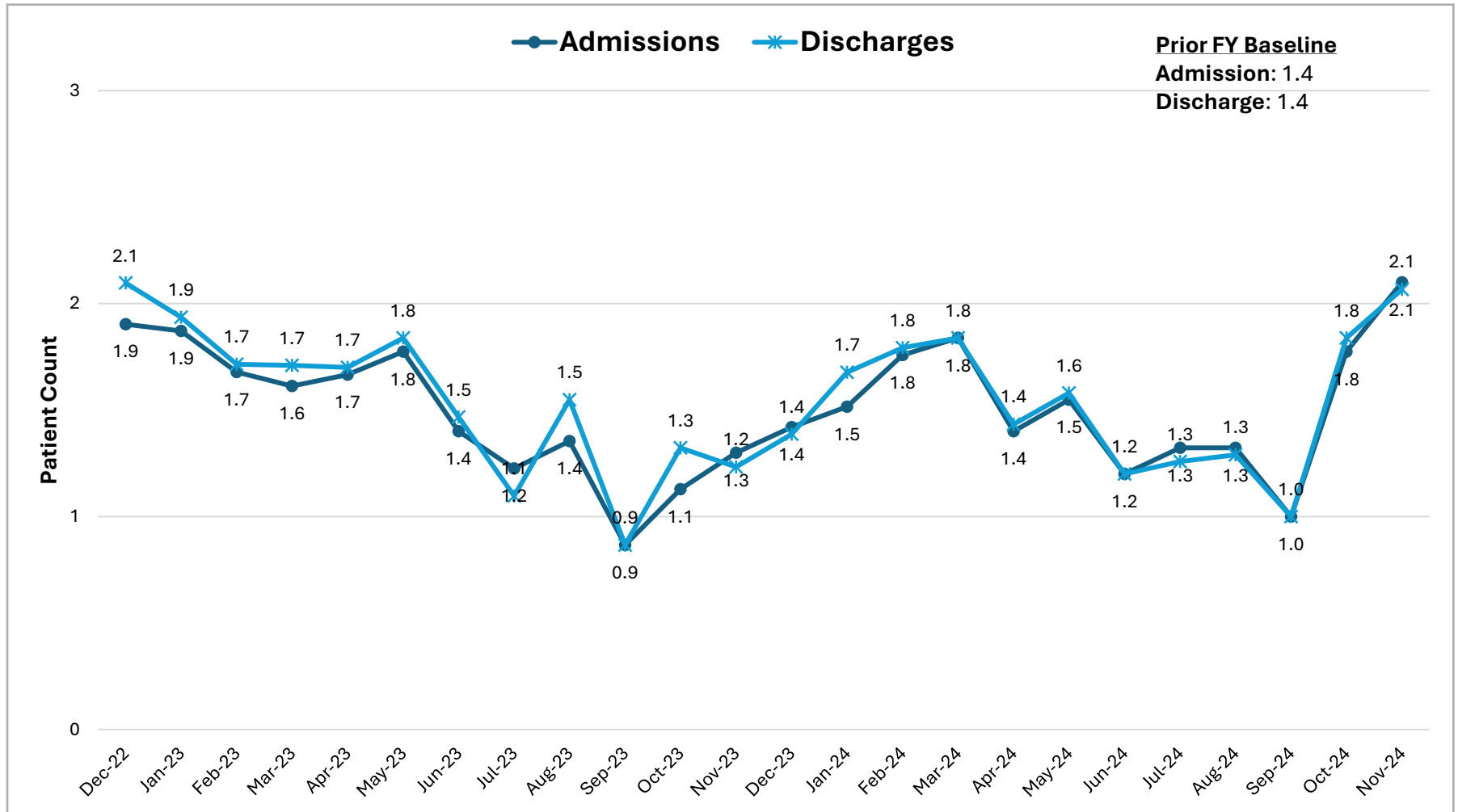


Note – Hospitalized Observation Patients that are subsequently discharged (1.6 patients/day) not shown above

Inpatient Avg Daily Admissions & Discharges (Maternal & Child Health)



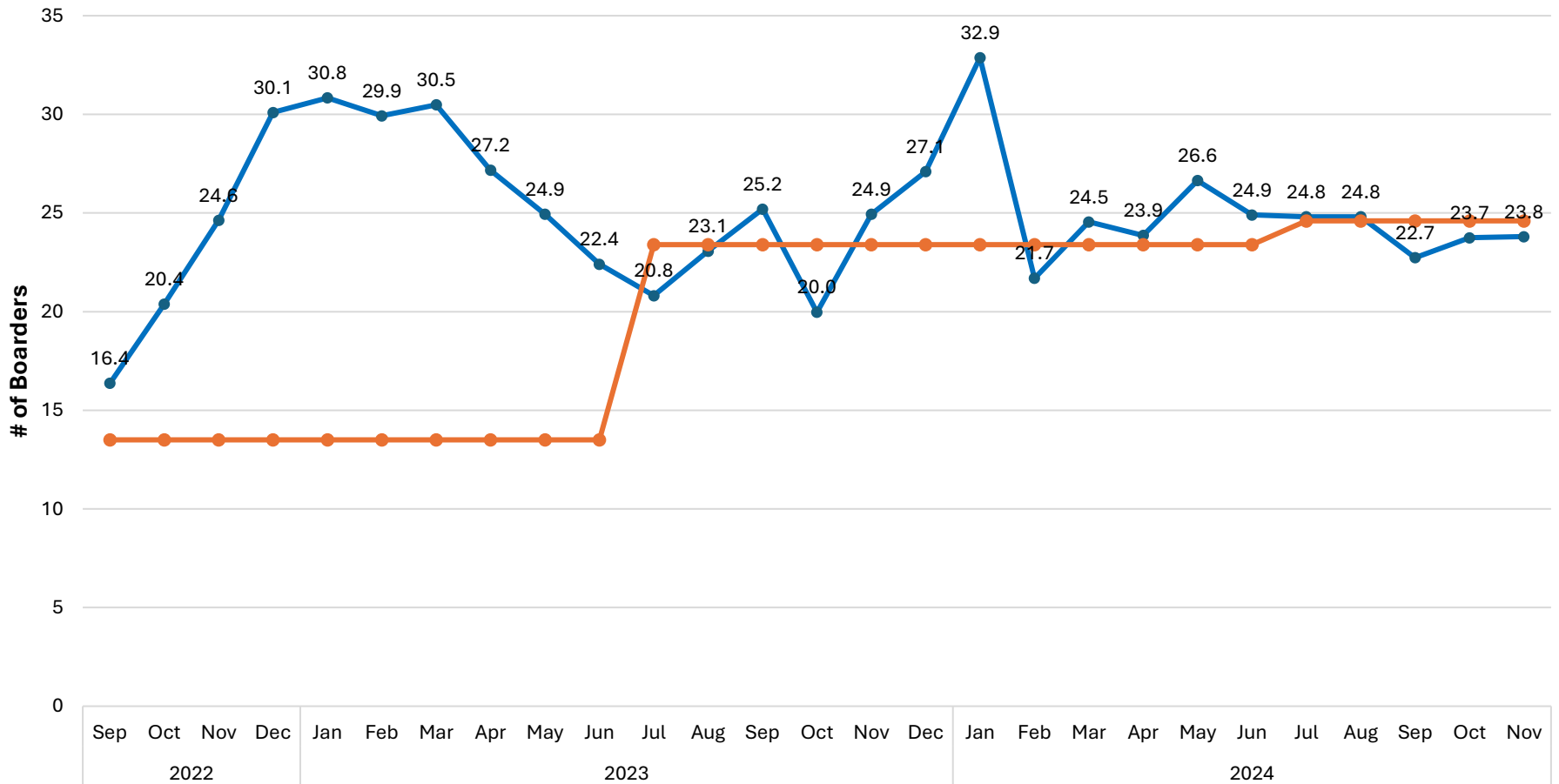
Inpatient Avg Daily Admissions & Discharges (Psychiatry)



Throughput – Avg Daily Peak Medical ED Boarding

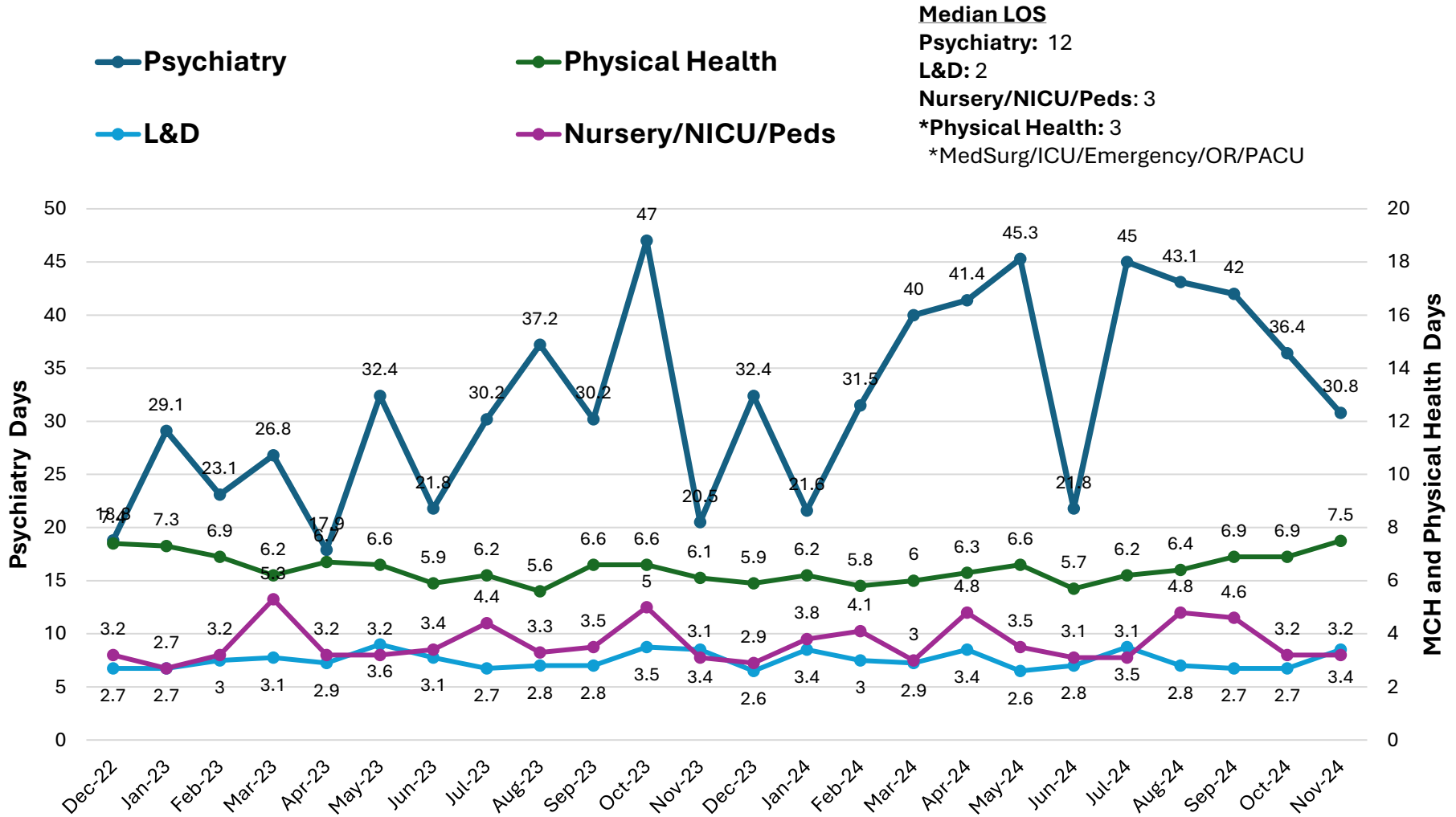
Average Daily Peak Boarding

● Average Daily Peak Boarding ● Prior FY Baseline



Note – Hospitalized observation patients that board in the ED and are subsequently discharged (1.6 patients/day) not shown above

Throughput – Inpatient Avg Length of Stay (in Days)



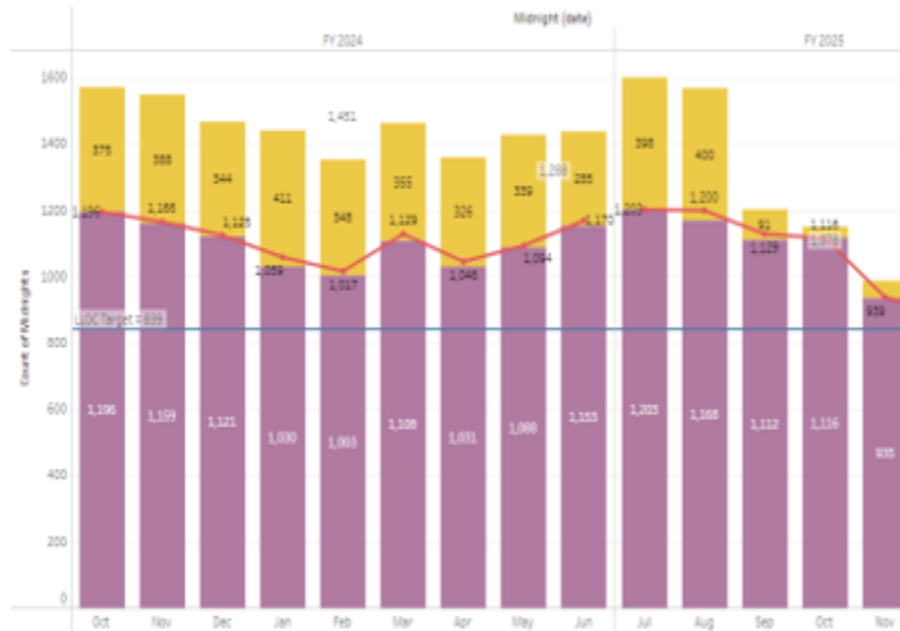
Note – Hospitalized Observation Patients that are subsequently discharged (1.6 patients/day) not shown above or included in length-of-stay

Throughput – Lower Level of Care

Bed Type (group)

- Behavioral-LLOC
- DENIED/CUSTODIAL

Psych LLOC (Bldg 5, PES/7B/7C plus H52, excludes 7L)



Bed Type (group)

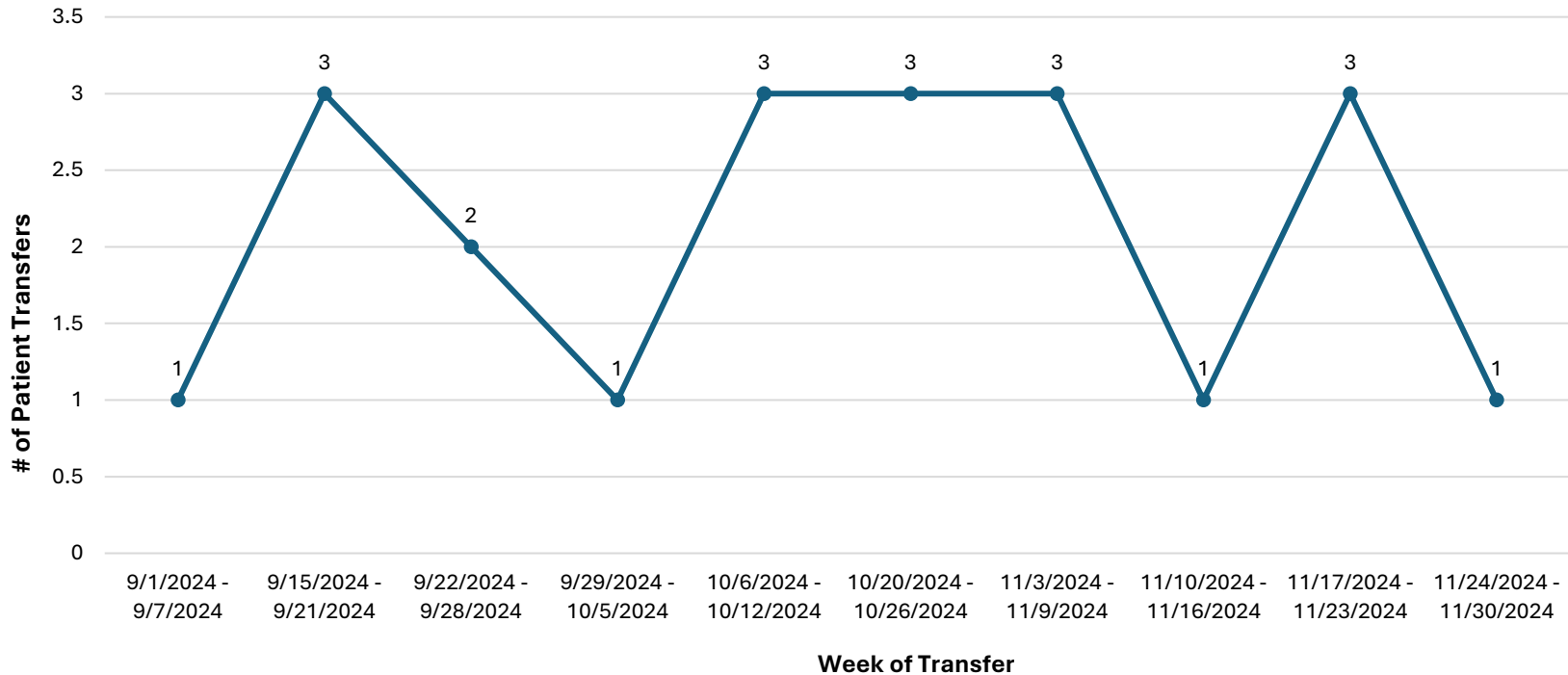
- SNF
- Behavioral-LLOC
- DENIED/CUSTODIAL

MedSurg LLOC (Bldg 25 except 2nd Floor and H52)



Weekly ZSFG to LHH Transfers

Week	Count of Patients
9/1/2024 - 9/7/2024	1
9/15/2024 - 9/21/2024	3
9/22/2024 - 9/28/2024	2
9/29/2024 - 10/5/2024	1
10/6/2024 - 10/12/2024	3
10/20/2024 - 10/26/2024	3
11/3/2024 - 11/9/2024	3
11/10/2024 - 11/16/2024	1
11/17/2024 - 11/23/2024	3
11/24/2024 - 11/30/2024	1
Grand Total	21



Physical Health Average Midnight Census											
	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24
EMERGENCY (Admitted/Boarding)	25.5	14	17.5	16.5	17.9	17.4	15.6	17.3	15.5	16.3	16.2
ICU	36.9	32.9	35.7	32.8	32.1	31.1	32.8	30.1	29.8	32.4	34.7
MedSurg	176.7	171.1	170.3	169.5	169.3	171.8	175.9	173.8	173.7	172.5	174.3
OR/PACU (Admitted/Boarding)	2	1.1	1.8	1.4	1.9	2	1.2	1.5	1.2	1.3	1.3
Average Observation Patients	1.2	1.7	1.5	1.5	1.9	2.2	2.4	2.1	2.2	2.1	2.0
Total Average Midnight Census	242.29	220.76	226.78	221.7	223.14	224.47	227.89	224.8	222.37	224.63	228.53
Prior FY Baseline	217	217	217	217	217	217	220	220	220	220	220

Maternal & Child Health Average Midnight Census											
	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24
L&D/PP MOTHER/L&D OR	12	12.7	13.4	11.7	11.2	12.2	13.6	13	10.5	11.2	14.1
NURSERY	4.1	5.3	4.8	5	4.5	5.3	5.1	5.5	5.2	4.8	4.2
NICU	9.6	10	9.7	9.6	10.1	10.5	12.5	13.6	11.7	7.6	9.7
PEDIATRICS	2.5	3.1	3.1	2.7	3.2	2.5	2.8	3.9	3	3	2.7
Total	28.2	31.1	31	29	29	30.5	34	36	30.4	26.6	30.7
Prior FY Baseline	27.8	27.8	27.8	27.8	27.8	27.8	29.5	29.5	29.5	29.5	29.5

Psychiatry Average Midnight Cesus											
	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24
7B ACUTE PSYCHIATRIC B5	21.5	21.4	20.8	21.5	21.6	21	21.2	21.8	21.8	20.7	20.4
7C ACUTE PSYCHIATRIC B5	21.9	21	21.8	21.8	21.8	21.1	21.6	20.8	22	21.8	21.5
7L ACUTE PSYCHIATRIC B5	5.5	6	5.9	5.8	5.8	5.9	5.9	5.7	5.9	5.8	5.8
Total	49	48.4	48.5	49.2	49.2	48	48.7	48.4	49.7	48.3	47.7
Prior FY Baseline	47.3	47.3	47.3	47.3	47.3	47.3	48.8	48.8	48.8	48.8	48.8

Increasing Demand for MedSurg Over Time

