

# JCC CEO Data Report October 2025

**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
  - Falls with Moderate or Major Injury
  - Medication for Opioid Use Disorder (MOUD)
3. Optimizing Patient Connectivity: Synergizing Access and Flow Across the ZSFG Campus
  - Adult Hospitalized – Inpatient Length of Stay (LOS)
  - Psychiatry – % Acute Patients
  - Boarding – Psychiatric Emergency Services Patients (PES)
  - Boarding – Medical Patients (ED, PACU, ICU)
4. Achieving Safe & Equitable Staff Experience
  - Physical Assaults with Injury
5. Revving up Revenue to Improve our Care
  - Accounts Receivable Days
  - % Realized Revenue
  - Denial Rate – Hospital Billing

## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## Departments Driving Equity

Equity

Ehrlich

Maintain % of departments with an active equity driver  $\geq 65\%$ , through Dec 2025.



Rolling 12-Month

70.5%

2025 Target:

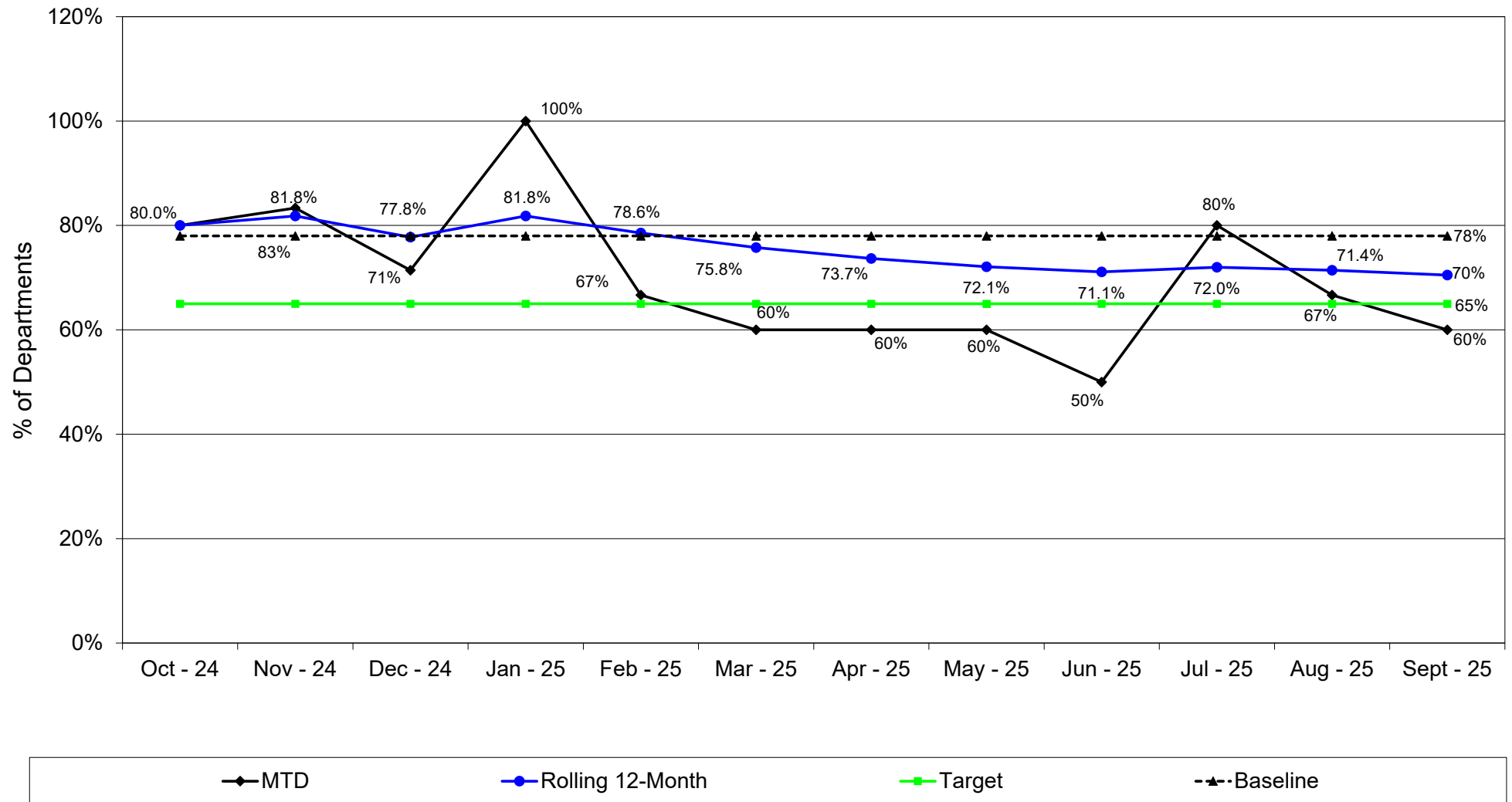
65%

2024 Baseline:

78%

% Change From Last Year:

-9.63%



## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## Sepsis Bundle Compliance (SEP-1)

Safety

Smith, Mercer

Increase % of Sepsis Bundle Compliance (SEP-1)  $\geq 59\%$ , by Dec 2025.

Rolling 12-Month

2025 Target:

39%

59%

2024 Baseline:

40%

% Change From Last Year:

-2%

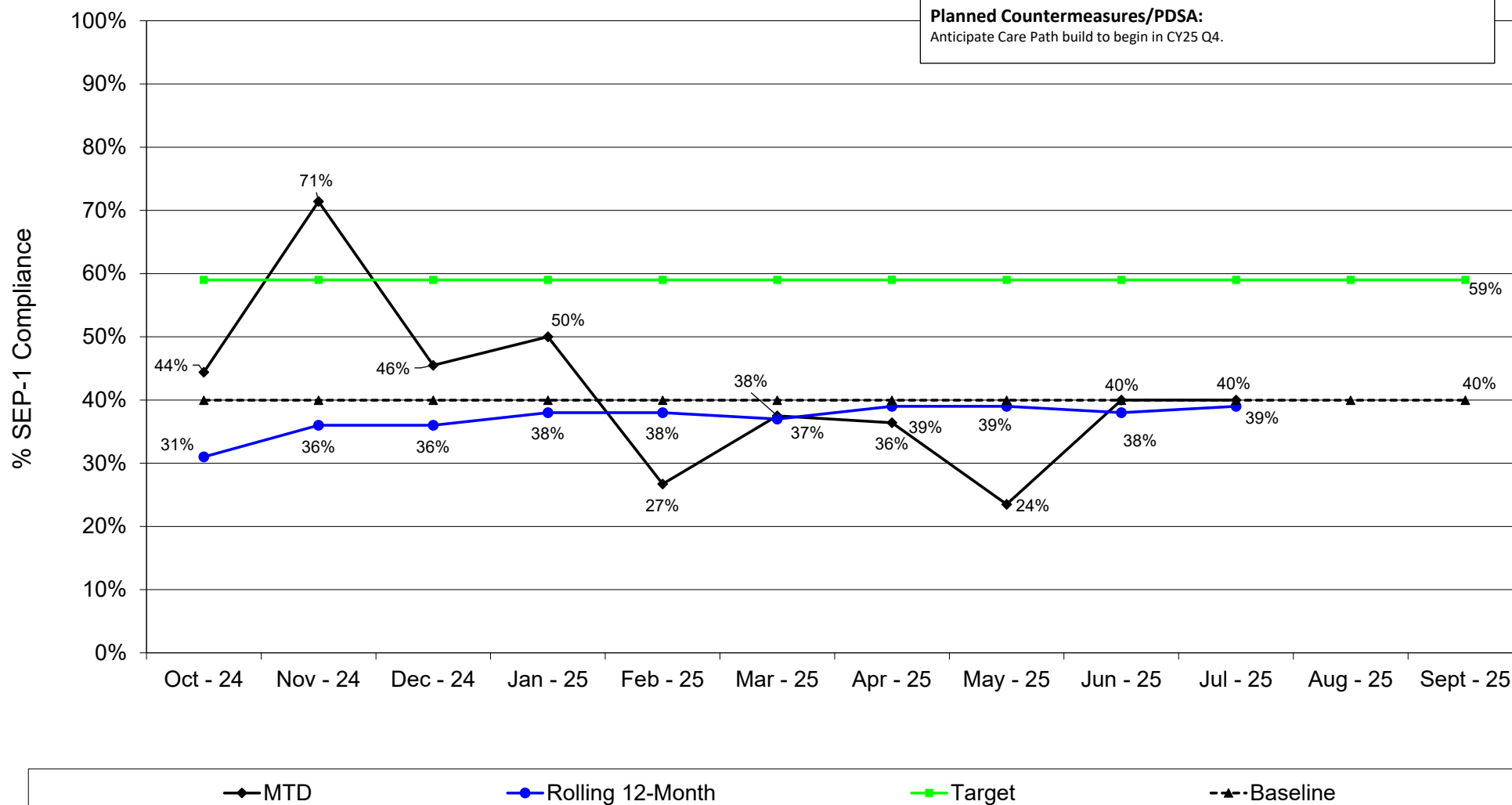


### Reasons Off-Target:

Delay in Care Pathway Build in Epic.

### Planned Countermeasures/PDSA:

Anticipate Care Path build to begin in CY25 Q4.



## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## Falls with Moderate or Major Injury

Safety

Smith, Mercer

Reduce rate of patient falls with moderate or major injury per 1,000 midnight census  
≤ 0.07, across Med Surg, 4A, ED, and Inpatient Psych, by Dec 2025.

Rolling 12-Month

0.09

2025 Target:

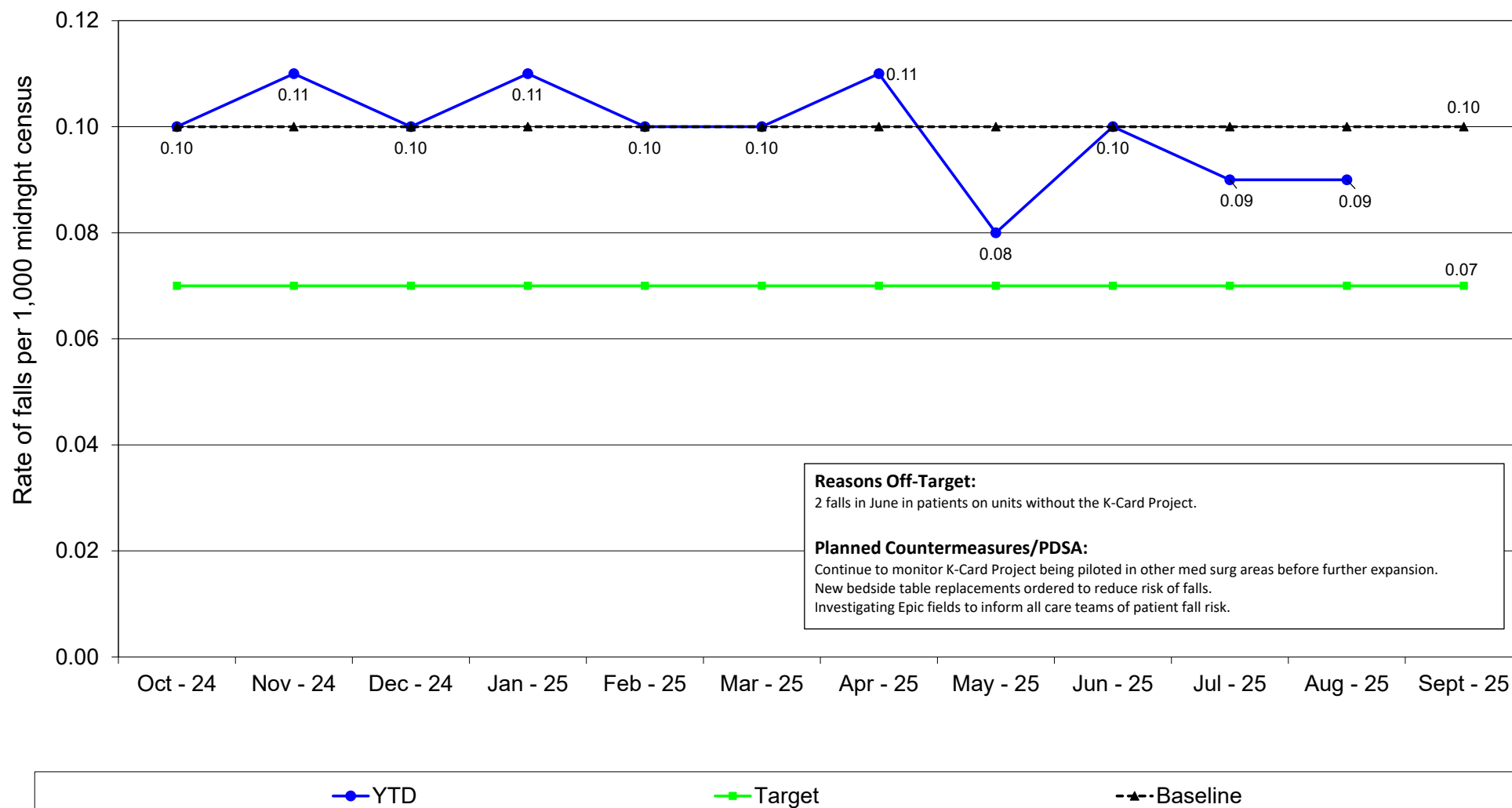
0.07

2024 Baseline:

0.10

% Change From Last Year:

-10.00%



**2025 Scorecard:**

True North:

Owner:

Goal Statement:

**Medication for Opioid Use Disorder (MOUD)**

Safety

Smith, Mercer

*Increase # of unique patients who received a D/C prescription for Buprenorphine from 20, to 22, by Dec 2025.*

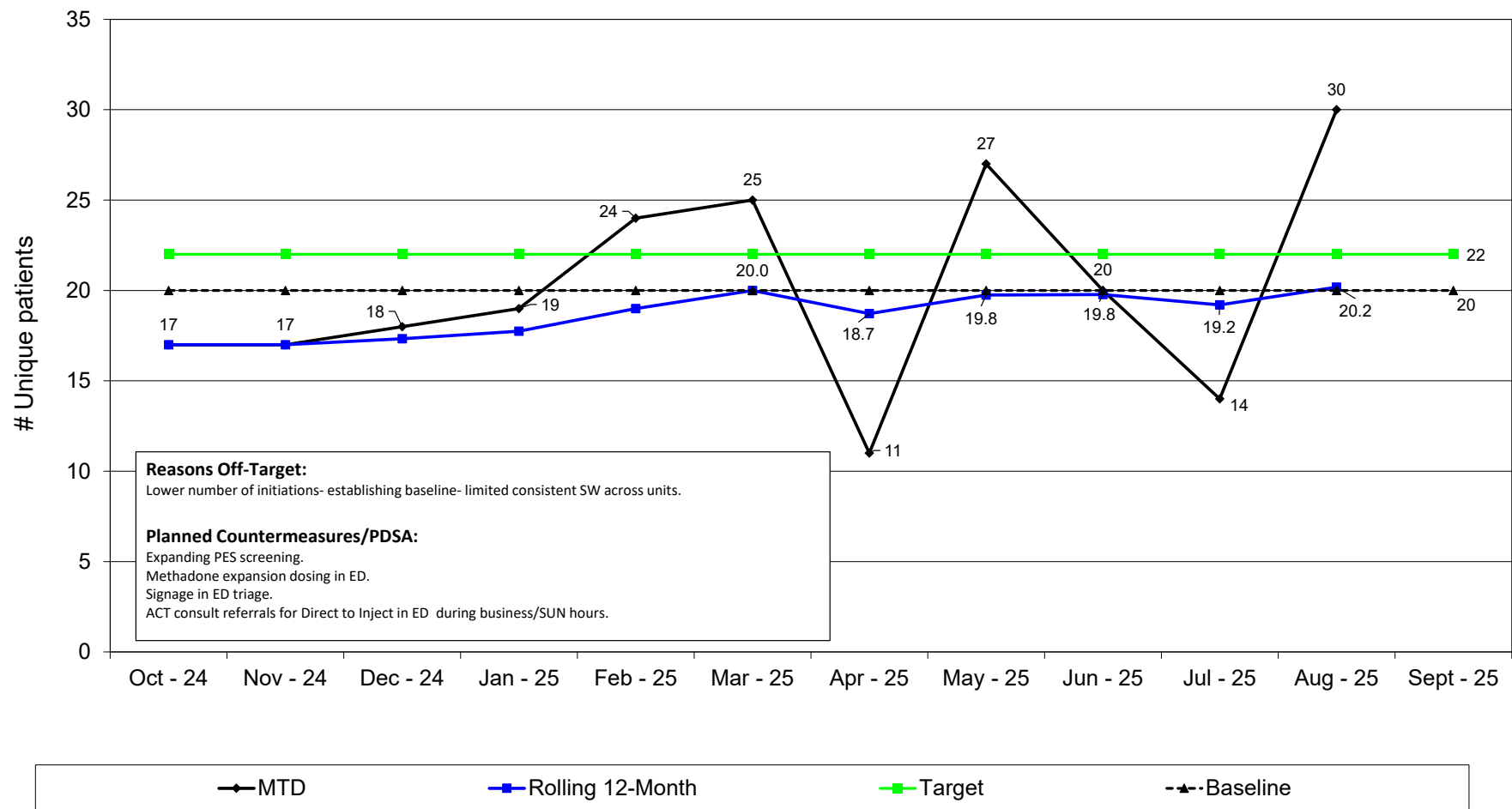


Rolling 12-Month

2025 Target:

2024 Baseline:

% Change From Last Year:

**20.2****22****20****0.91%**

## Adult Hospitalized - Inpatient Length of Stay (Physical health & Observation)

### 2025 Scorecard:

True North:

Owner:

### Goal Statement:

Reduce avg. # of patient days from admission order to discharge for adult inpatient/observation stays, from an avg of 5.8 days to less than 5 days, by Dec 2025.

Quality  
Ortiz, Otway

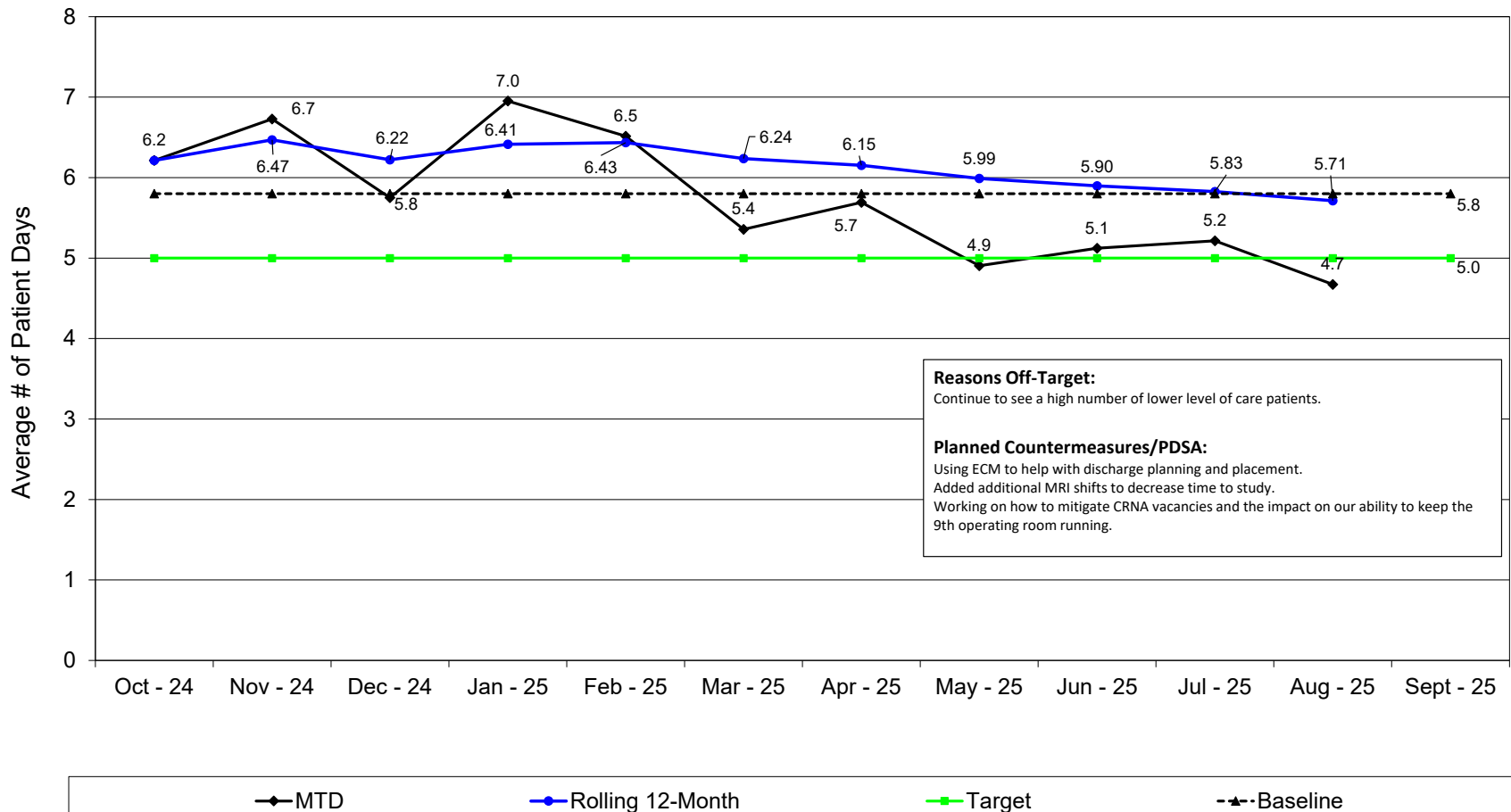


Rolling 12-Month

2025 Target: **5.0**

2024 Baseline: **5.8**

% Change From Last Year: **-1.50%**



## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## Psych - % Acute Patients

Quality

Almeida

*Increase % of inpatient psychiatric acute patients (% of total patient days) from 16.5% to greater than 19.8%, by Dec 2025.*



Rolling 12-Month

**24.8%**

2025 Target:

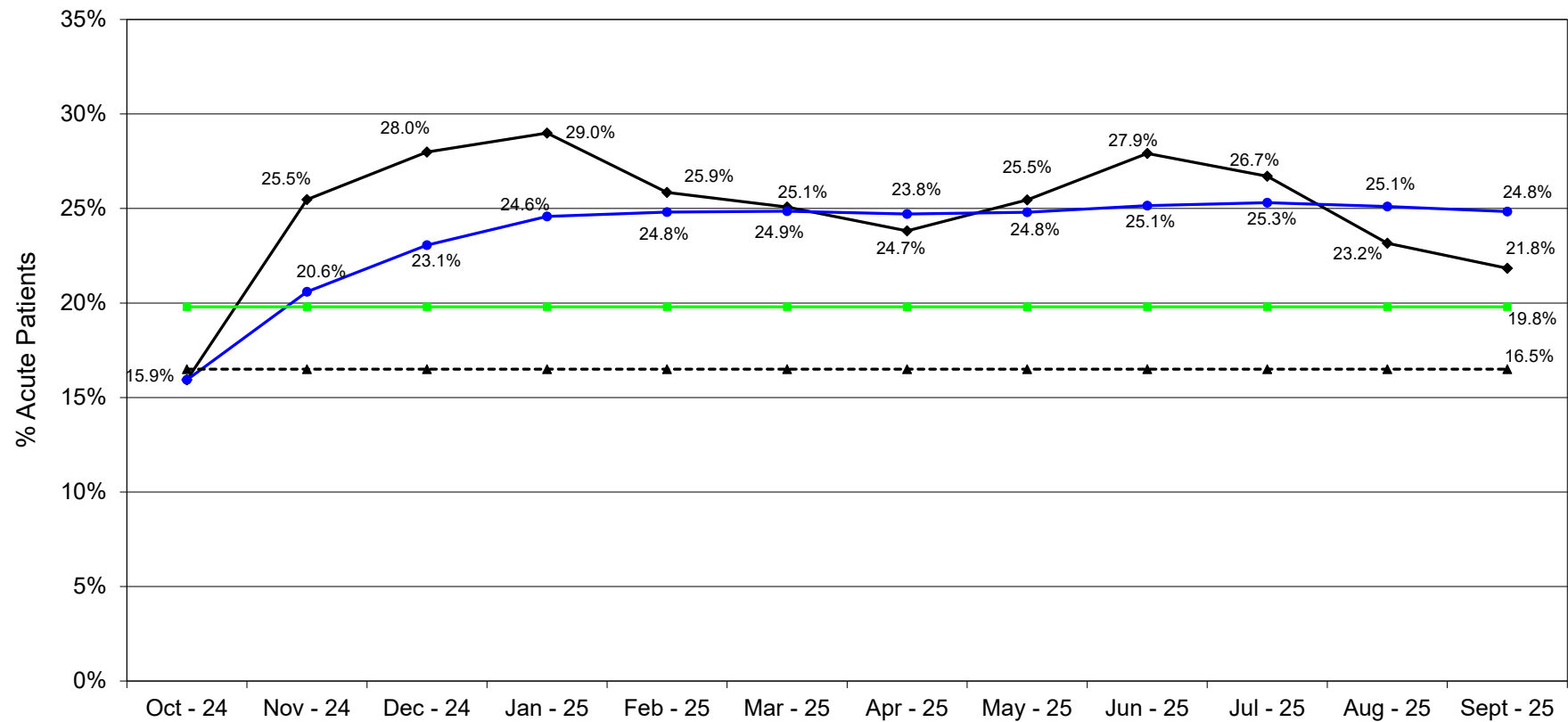
**19.8%**

2024 Baseline:

**16.5%**

% Change From Last Year:

**50.54%**



—◆— MTD

—●— Rolling 12-Month

—■— Target

—▲— Baseline



## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## Boarding - PES Patients (PES)

Quality

Almeida

Reduce LOS of PES patients waiting for an inpatient psychiatric bed by 20%,  
from baseline of 72.2 hours to 57.8 hours, by Dec 2025.



Rolling 12-Month

**44.7**

2025 Target:

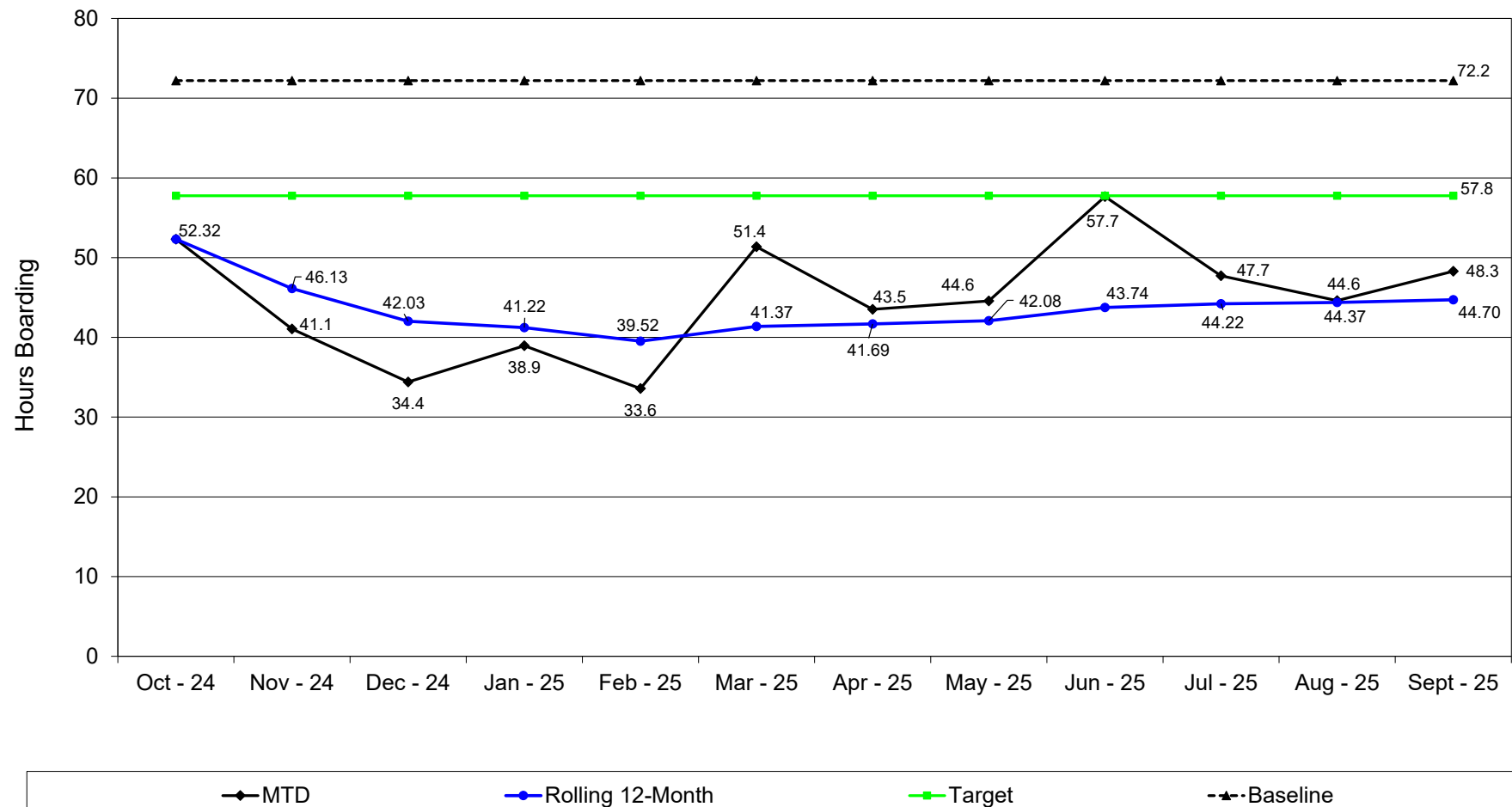
**57.8**

2024 Baseline:

**72.2**

% Change From Last Year:

**-38.08%**



**2025 Scorecard:**

True North:

Owner:

Goal Statement:

**Boarding - Physical Health (ED, PACU, ICU)**

Quality

Ortiz, Otway

Reduce the average peak number of boarding patients in ED, PACU, and ICU  
from 39, to fewer than 15, by Dec 2025.

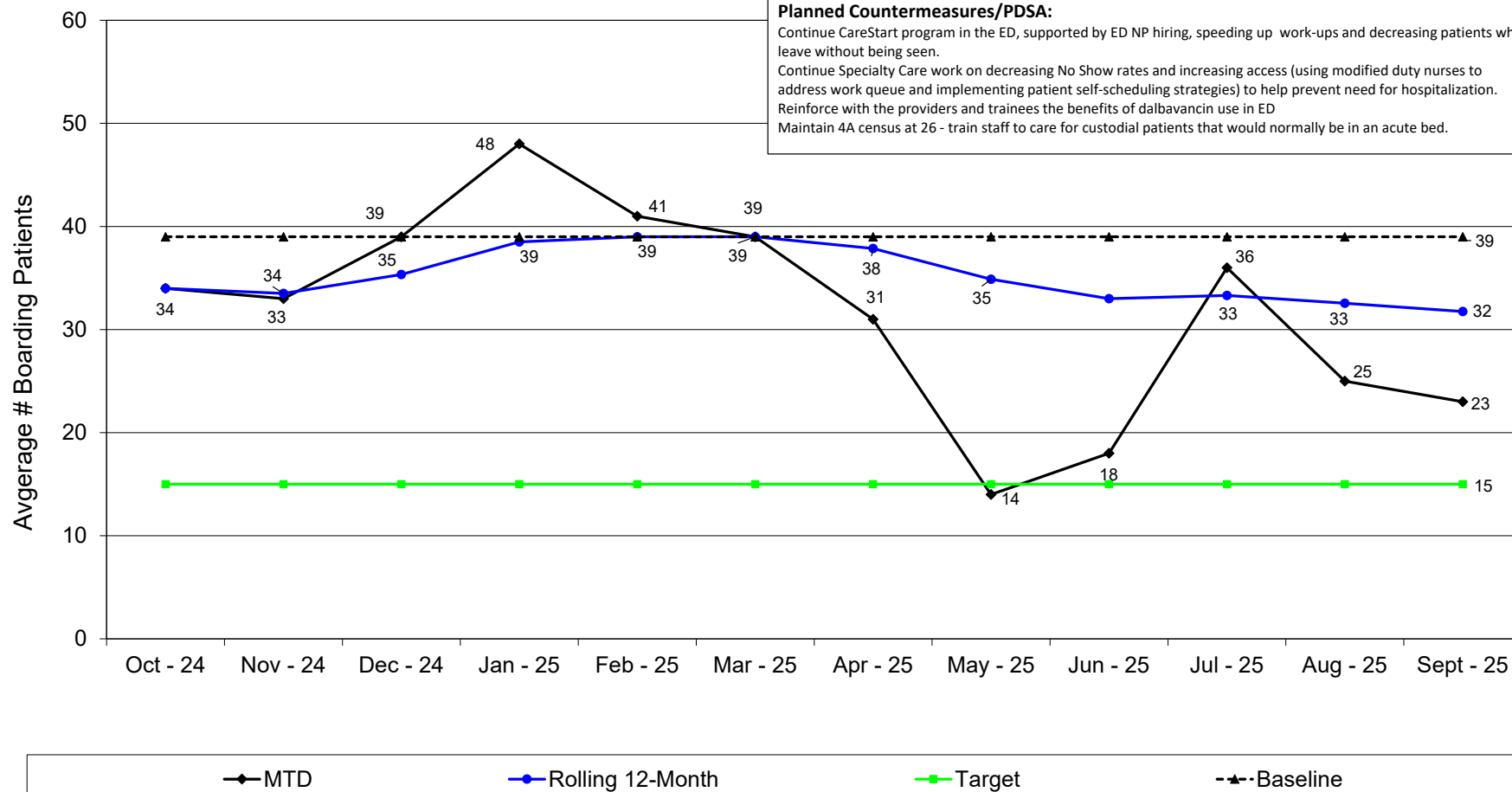


Rolling 12-Month

2025 Target:

2024 Baseline:

% Change From Last Year:

**32****15****39****-18.59%**

## 2025 Scorecard:

True North:

Owner:

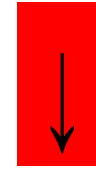
Goal Statement:

## Physical Assaults with Injury

*Developing Our People*

*Robinson*

*Reduce the # of physical assaults with injury to ZSFG staff from a rate of 6.75 per month to less than 4.0 per month for the combined high risk areas, by Dec 2025.  
(PSYCH, ED, BHC, UCC, M/S)*



Rolling 12-Month

**4.9**

2025 Target:

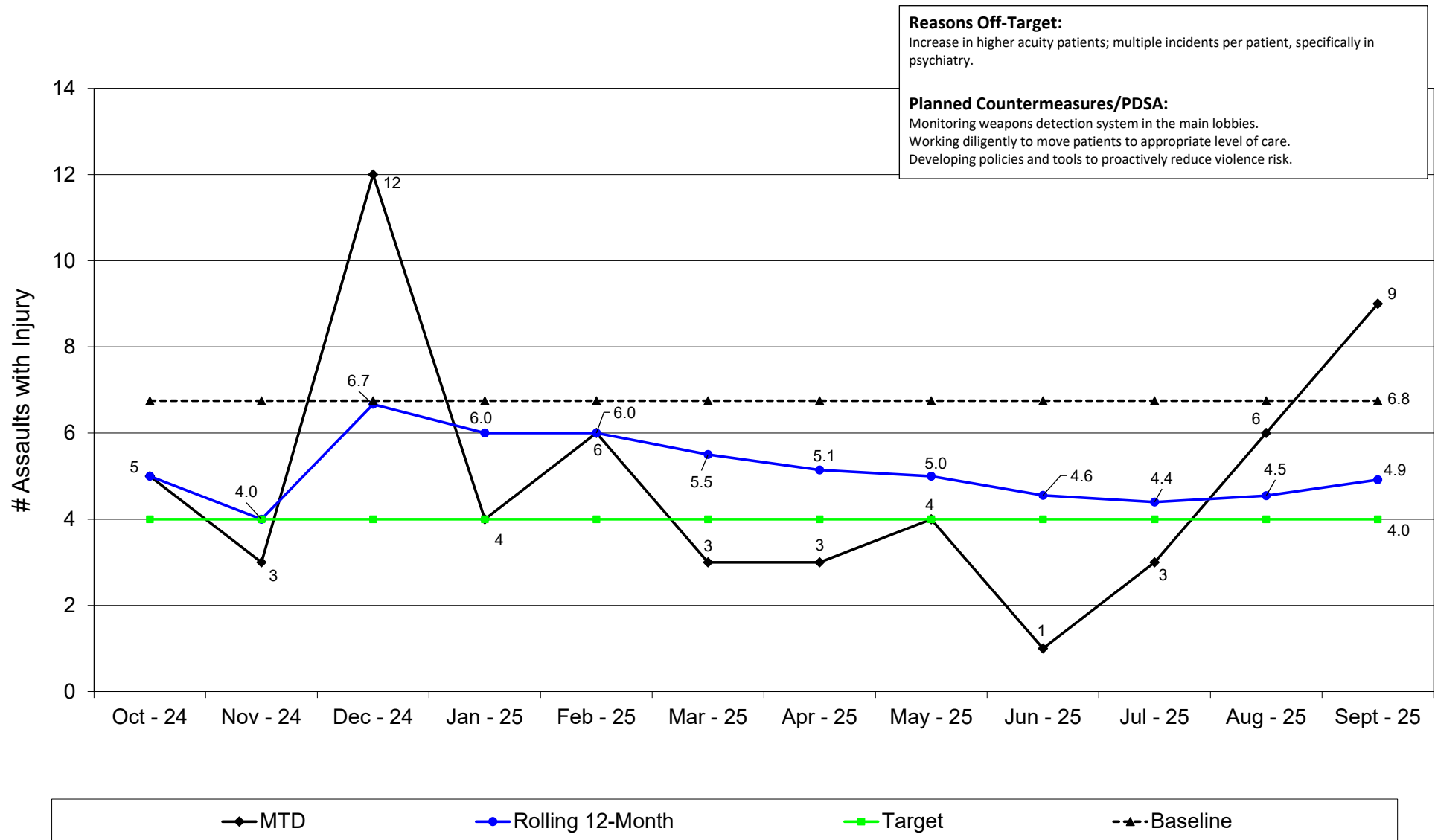
**4.0**

2024 Baseline:

**6.8**

% Change From Last Year:

**-27.16%**



2025 Scorecard:

True North:

Owner:

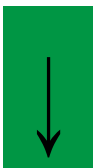
Goal Statement:

Accounts Receivable Days

Financial Stewardship

Wu, Kanzaria

Reduce average # of days it takes to collect payments owed from patients and insurance companies from 61 days to 59 days, by Dec 2025.



Rolling 12-Month

56.9

2025 Target:

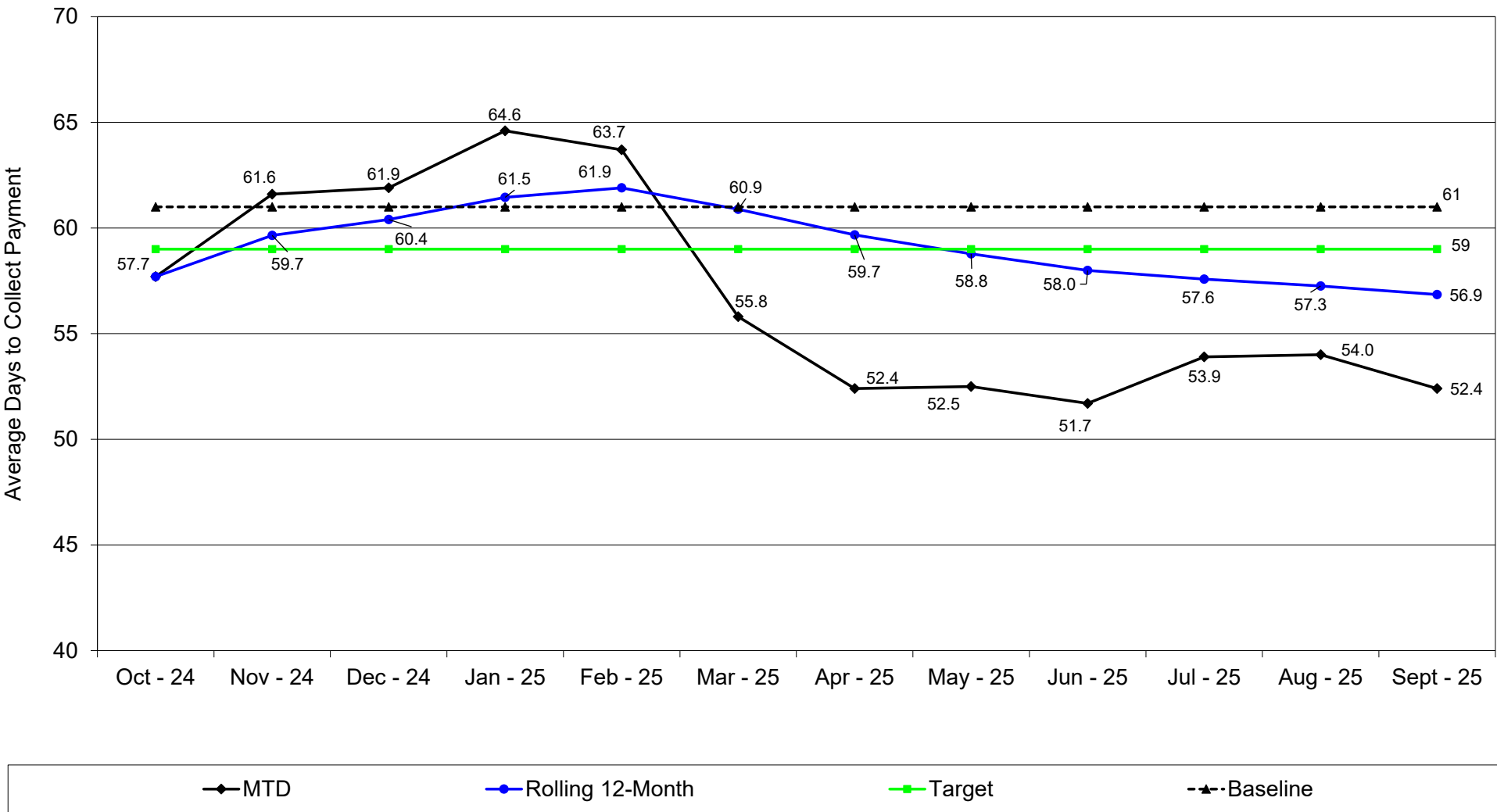
59

2024 Baseline:

61

% Change From Last Year:

-6.80%



## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## % Realized Revenue

Financial Stewardship

Wu, Kanzaria

Increase % of billed revenue that is successfully collected and posted from 13.5% to 14.25%, by Dec 2025.

Rolling 12-Month

2025 Target:

14%

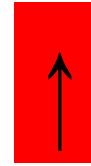
14.25%

2024 Baseline:

13.50%

% Change From Last Year:

3.32%

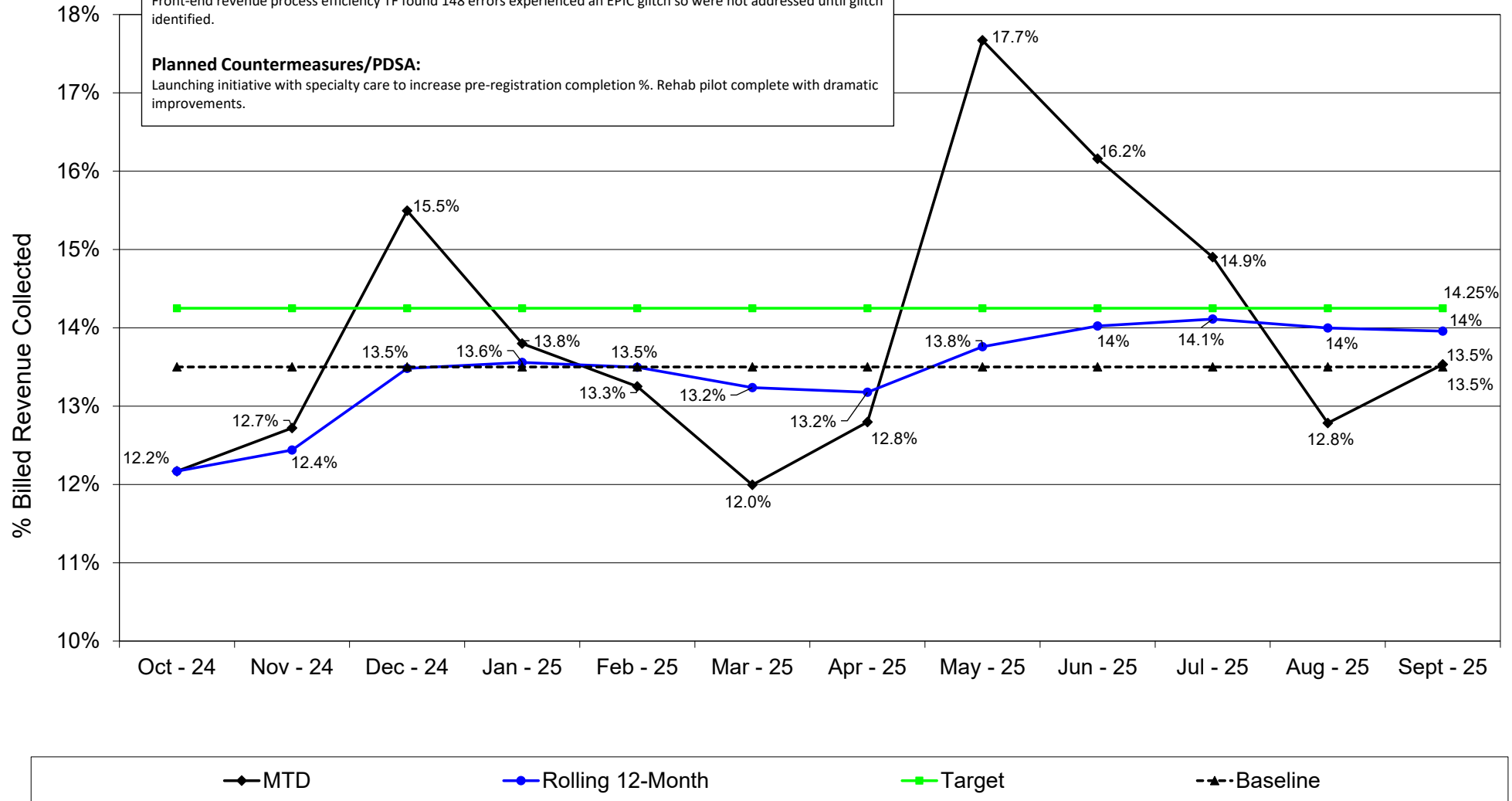


### Reasons Off-Target:

Gross Revenue lagged Aug with 34 more admissions but 2600 less days, though Net Revenue is up by \$2.5M. Front-end revenue process efficiency TF found 148 errors experienced an EPIC glitch so were not addressed until glitch identified.

### Planned Countermeasures/PDSA:

Launching initiative with specialty care to increase pre-registration completion %. Rehab pilot complete with dramatic improvements.



## 2025 Scorecard:

True North:

Owner:

Goal Statement:

## Denial Rate - Hospital Billing

Financial Stewardship

Wu, Kanzaria

Reduce Hospital Billing Denial rate for primary payers from 16.4% to 15.6%, by Dec 2025.

Rolling 12-Month

2025 Target:

15.9%

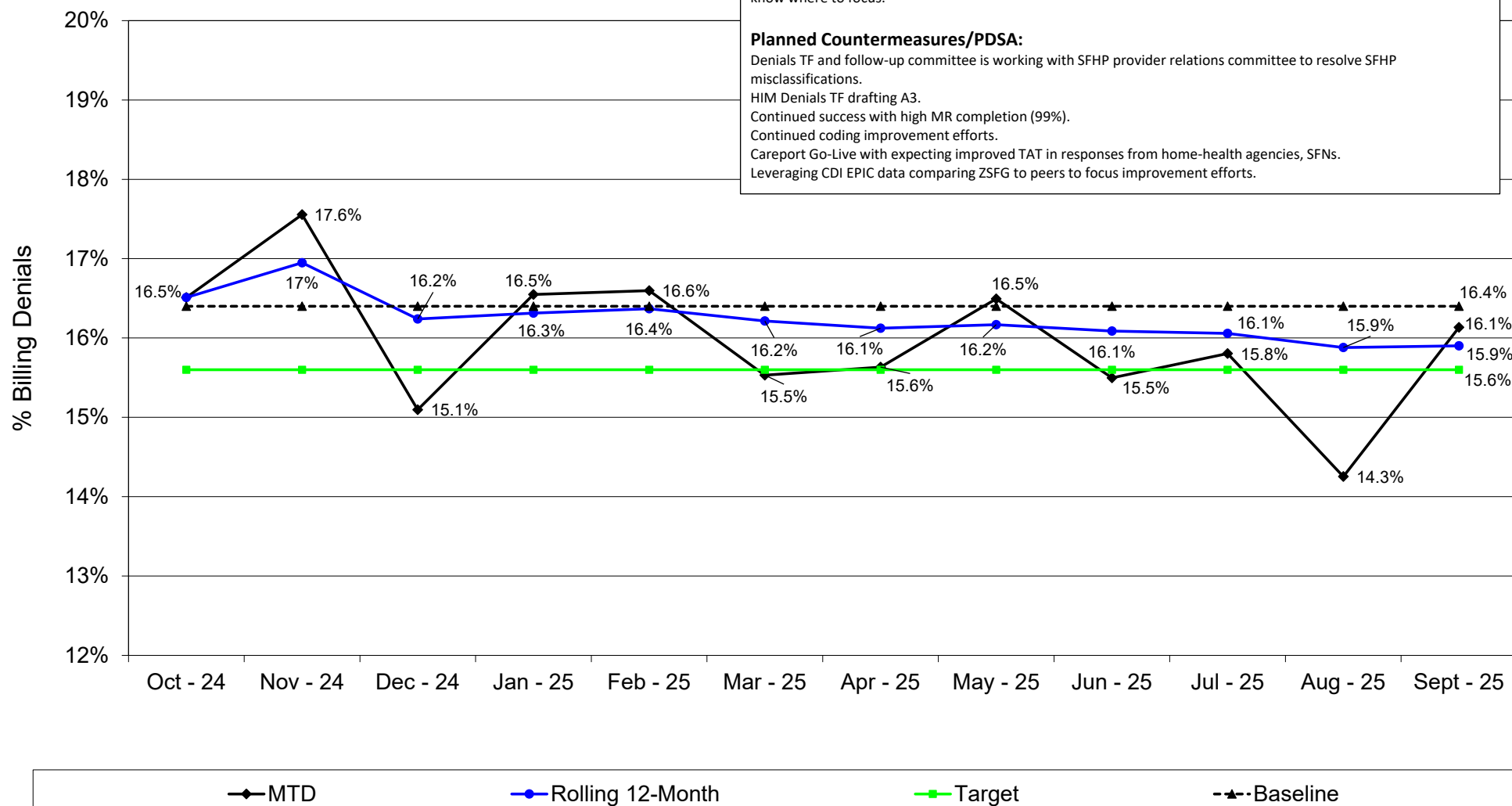
15.6%

2024 Baseline:

16.4%

% Change From Last Year:

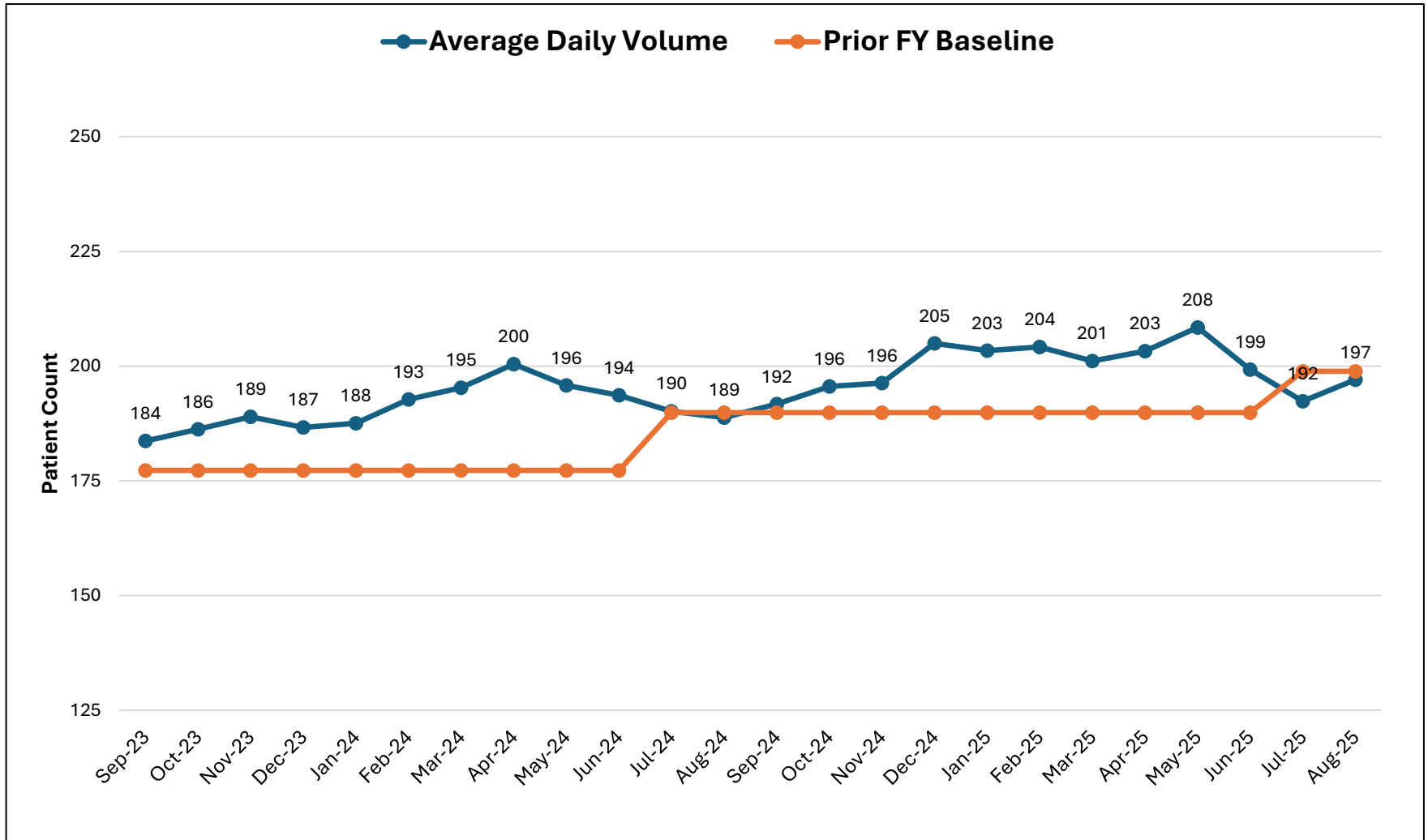
-3.04%



# Part 2: Flow Data

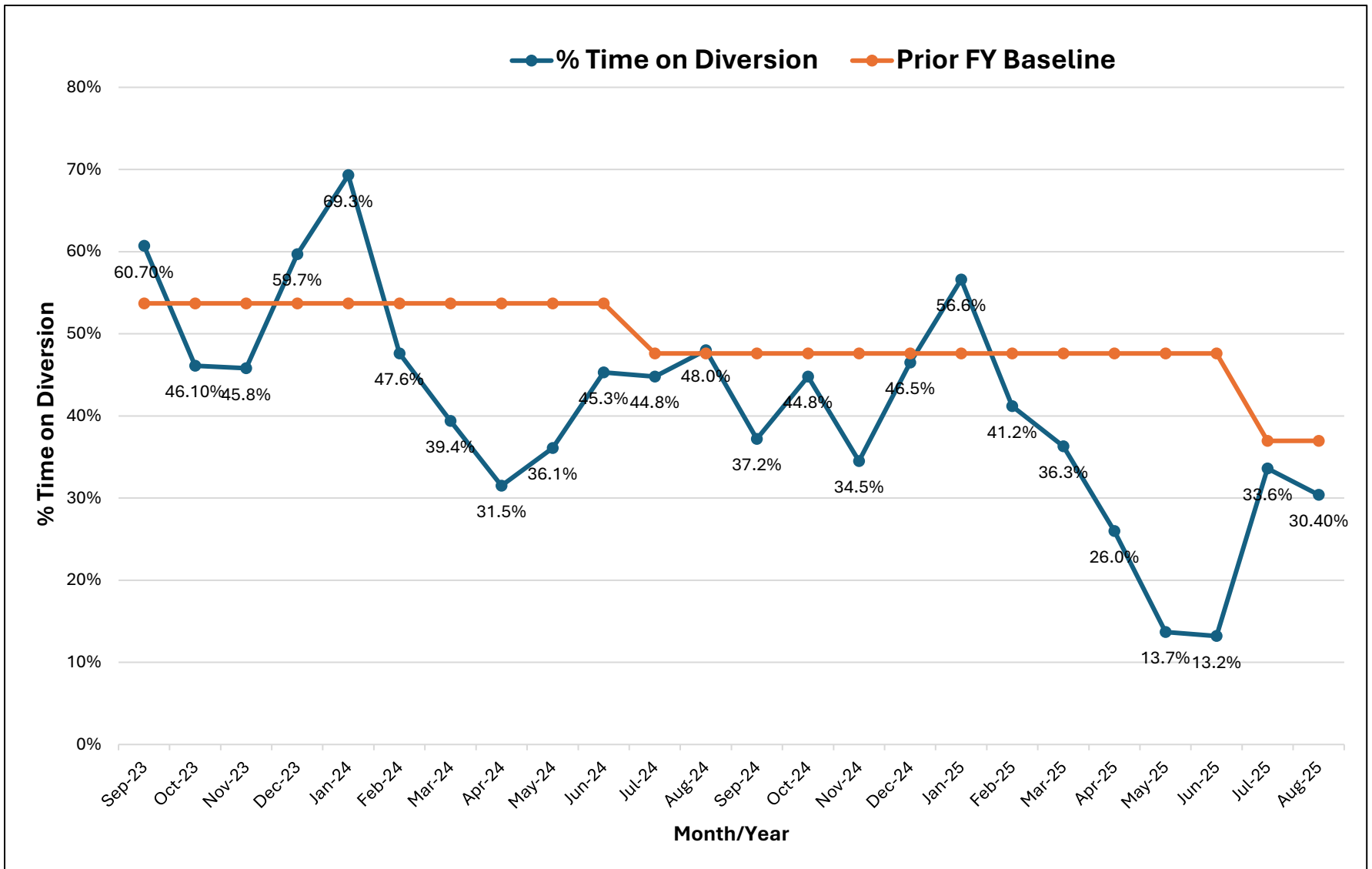
1. Input (Emergency Volume)
  - ED, ED Diversion, PES
2. Input and Output (Admissions and Discharges)
  - Physical Health (Med/Surg, ICU, OR, PACU), Maternal Child, Psychiatry
3. Throughput
  - Length of Stay – Physical Health and Observation, Psychiatry, Maternal Child
  - Length of Stay – Physical Health, Physical Health and Observation, Observation
  - LLOC – Physical Health and Psychiatry
4. Weekly ZSFG to LHH Transfers
5. Census Data
  - Physical Health (Med/Surg, ICU, OR, PACU), Maternal Child, Psychiatry
  - Demand for MedSurg Over Time

# Input - Medical ED Avg Daily Volume

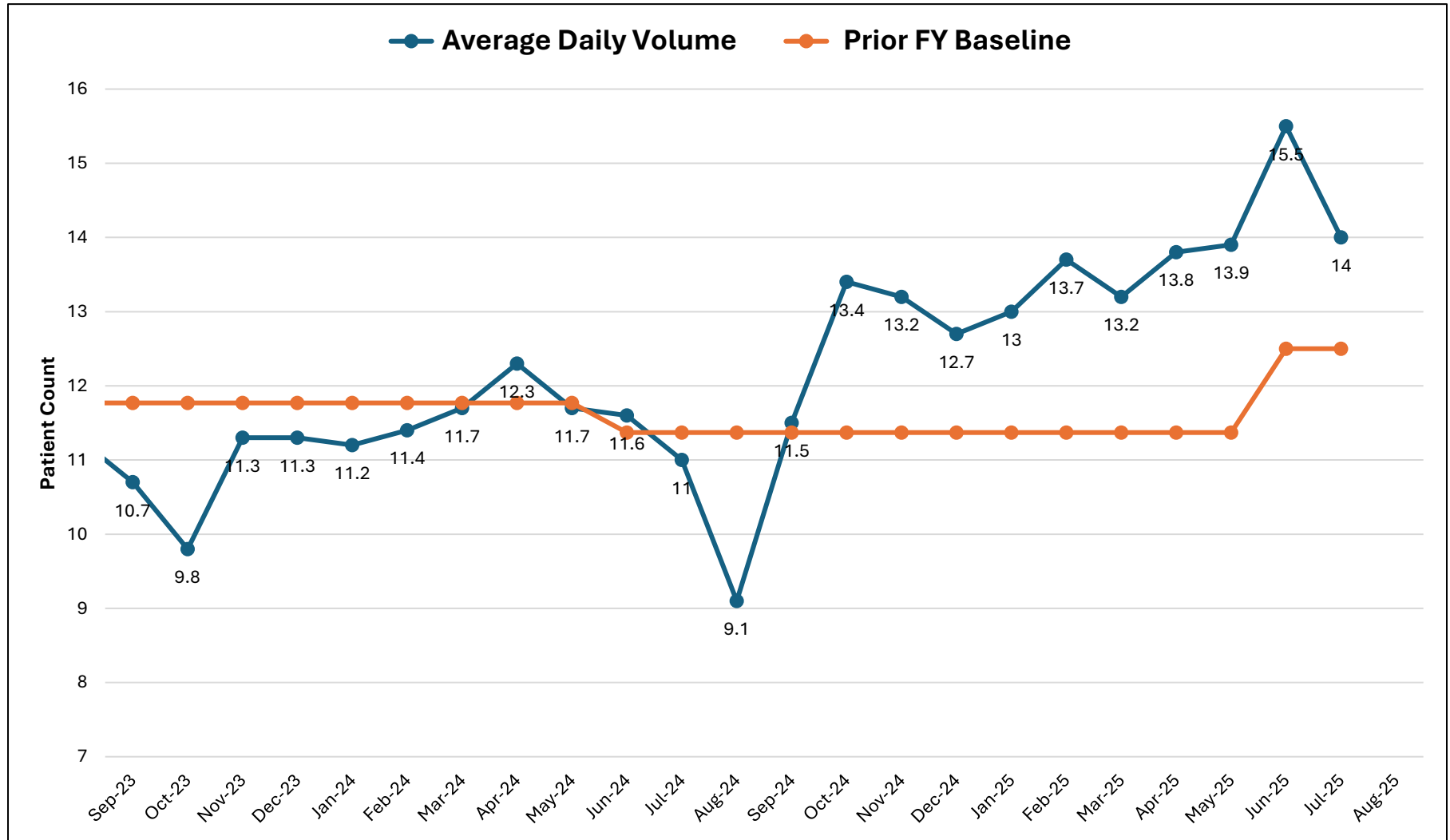




# Input – Percent of Time on ED Diversion

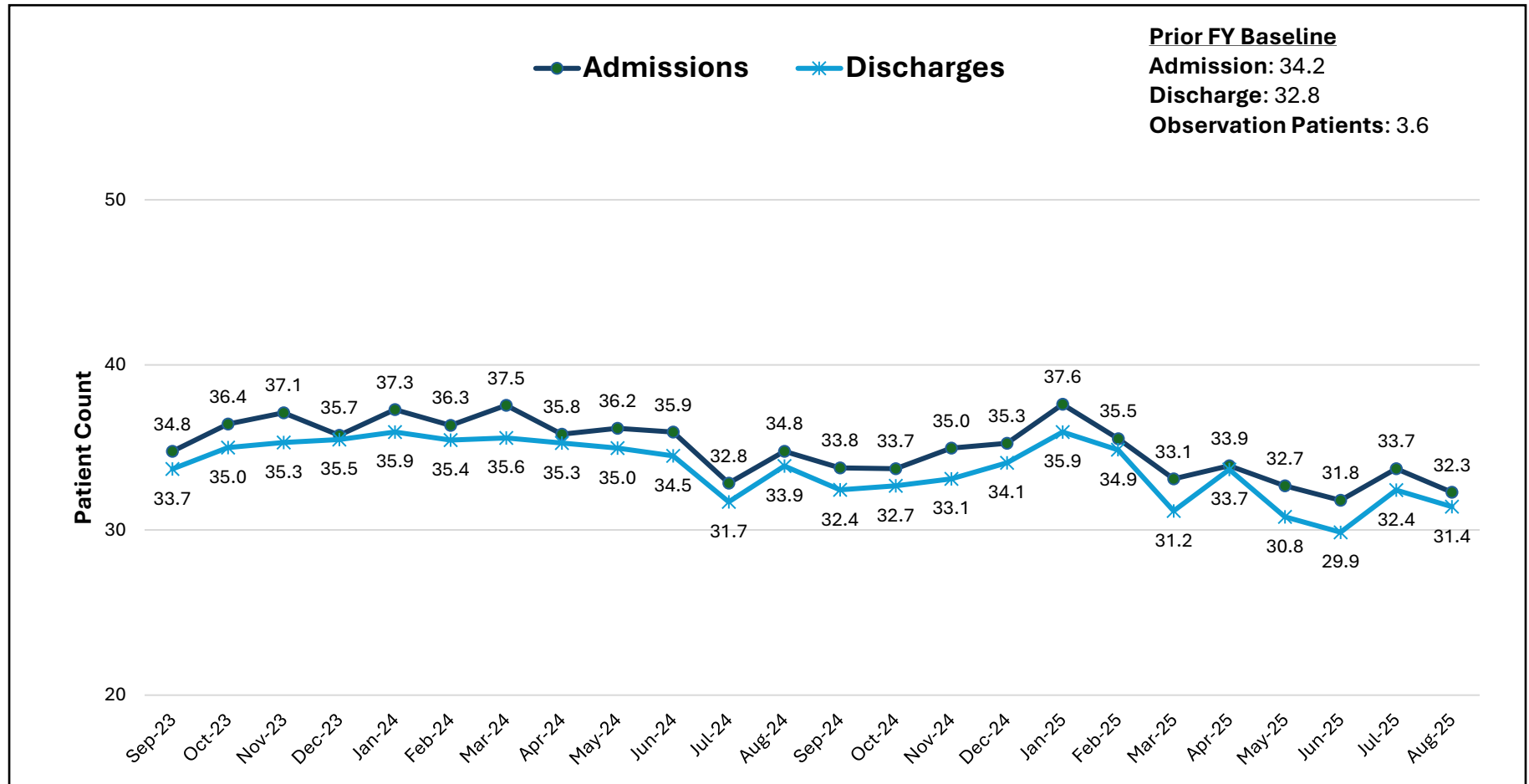


# Input - Psychiatric ED Avg Daily Volume



# Inpatient Avg Daily Admissions & Discharges

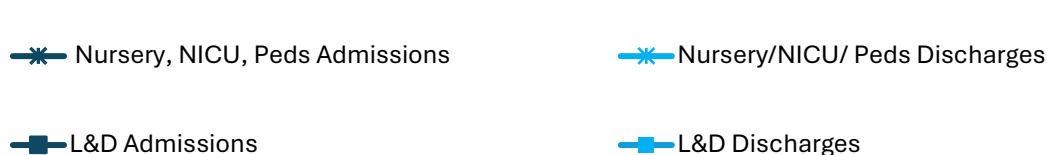
(Physical Health - MedSurg/ICU/Emergency/OR/PACU)



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

– 30% of the gap between admissions and discharges in above graph is due to patients being changed from inpatient to observation level of care prior to discharge.

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



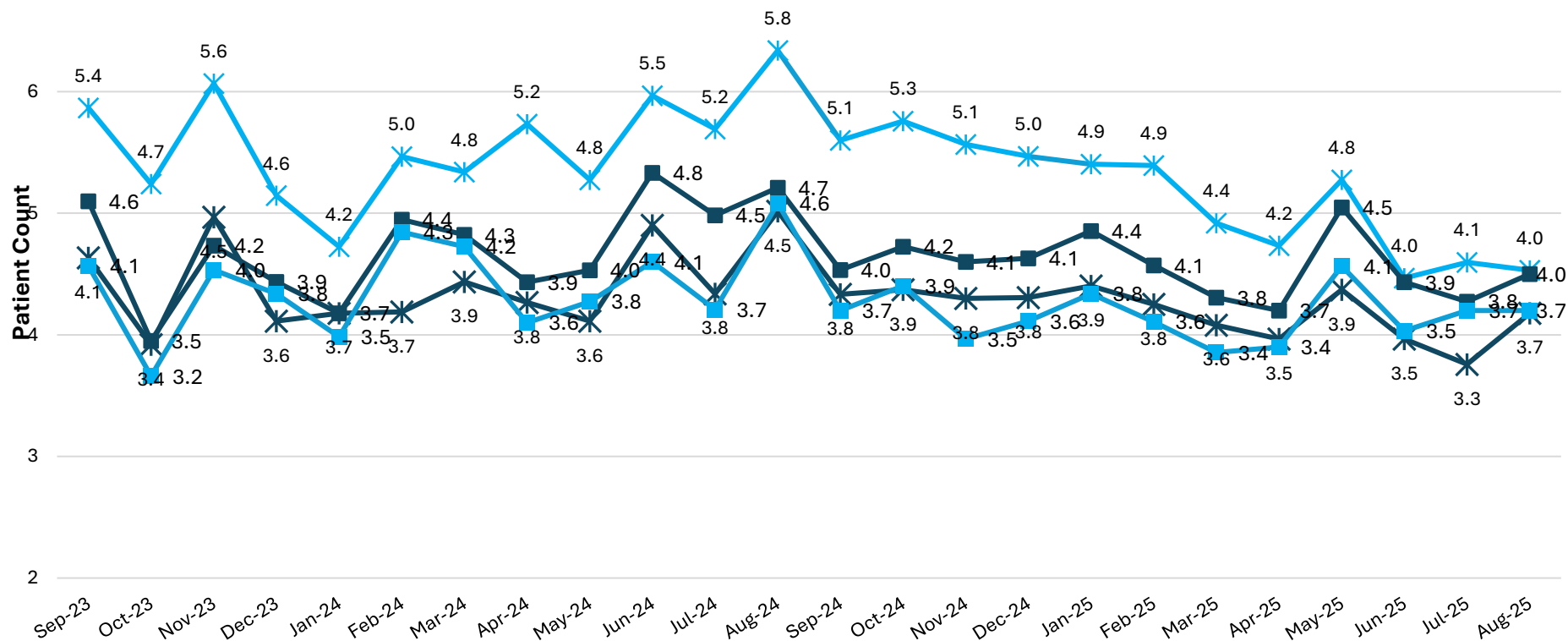
## Prior FY Baseline

**L&D Admission: 4.5**

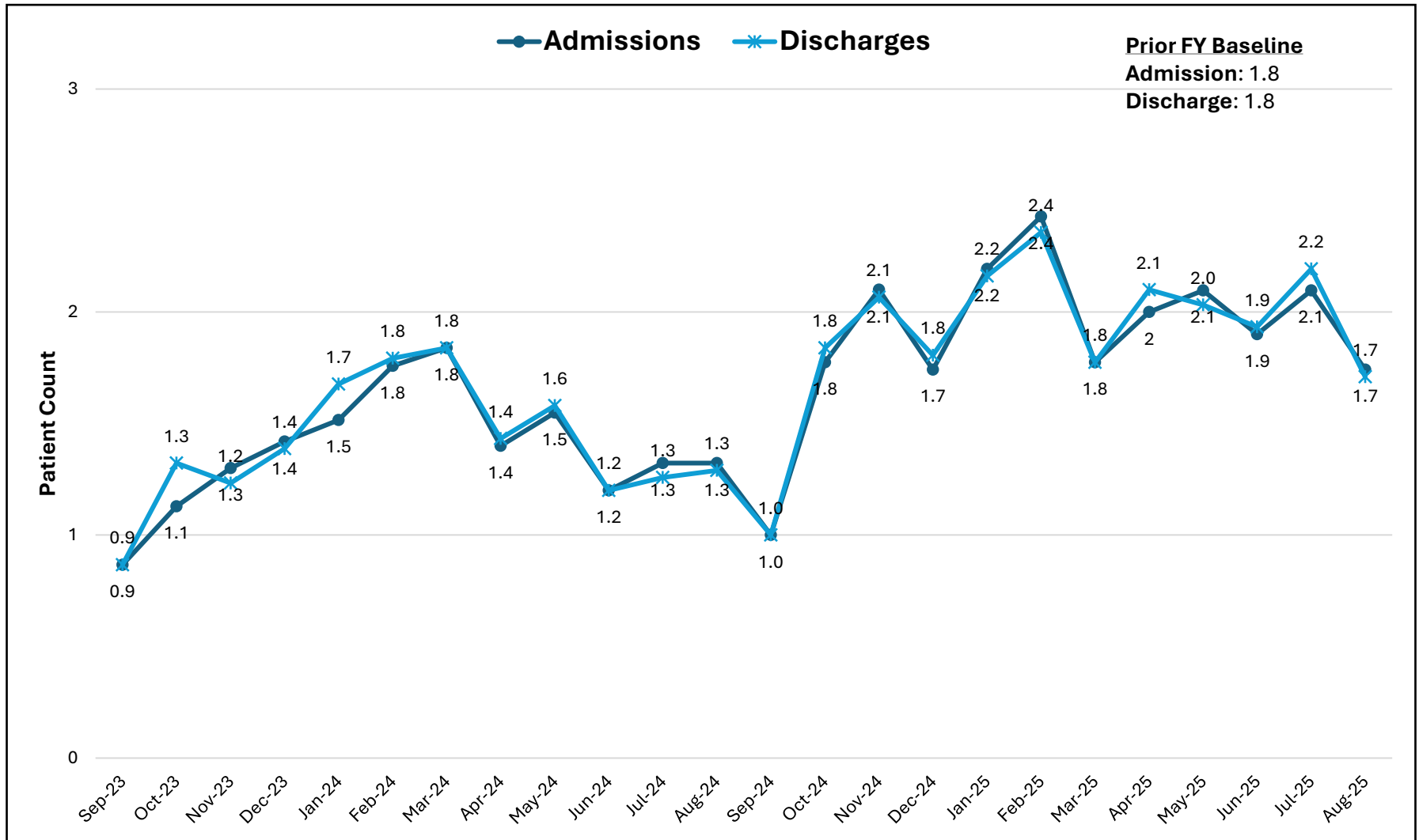
**L&D Discharge: 3.7**

**Nursery/NICU/Peds Admission: 3.8**

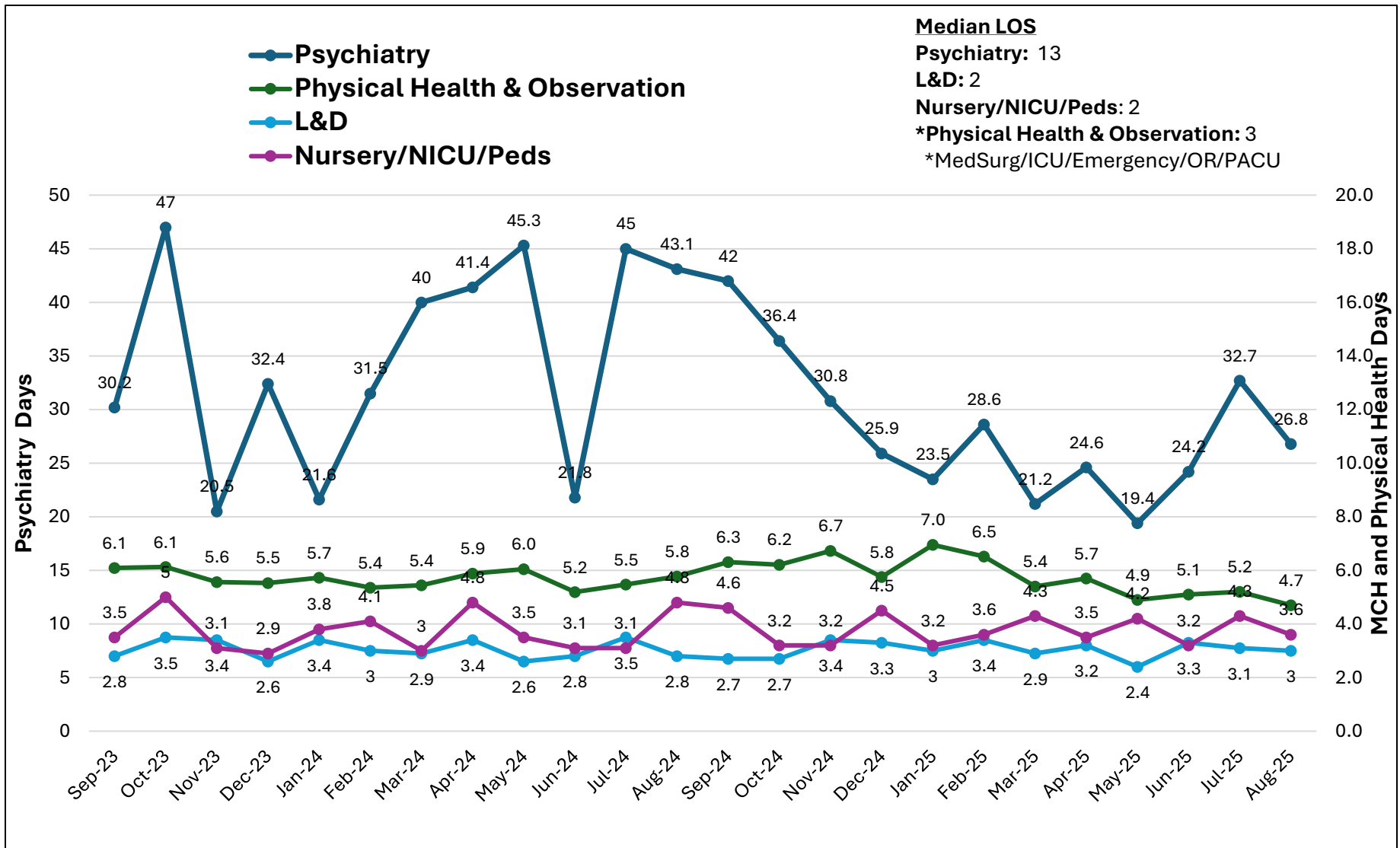
**Nursery/NICU/Peds Discharges: 4.9**



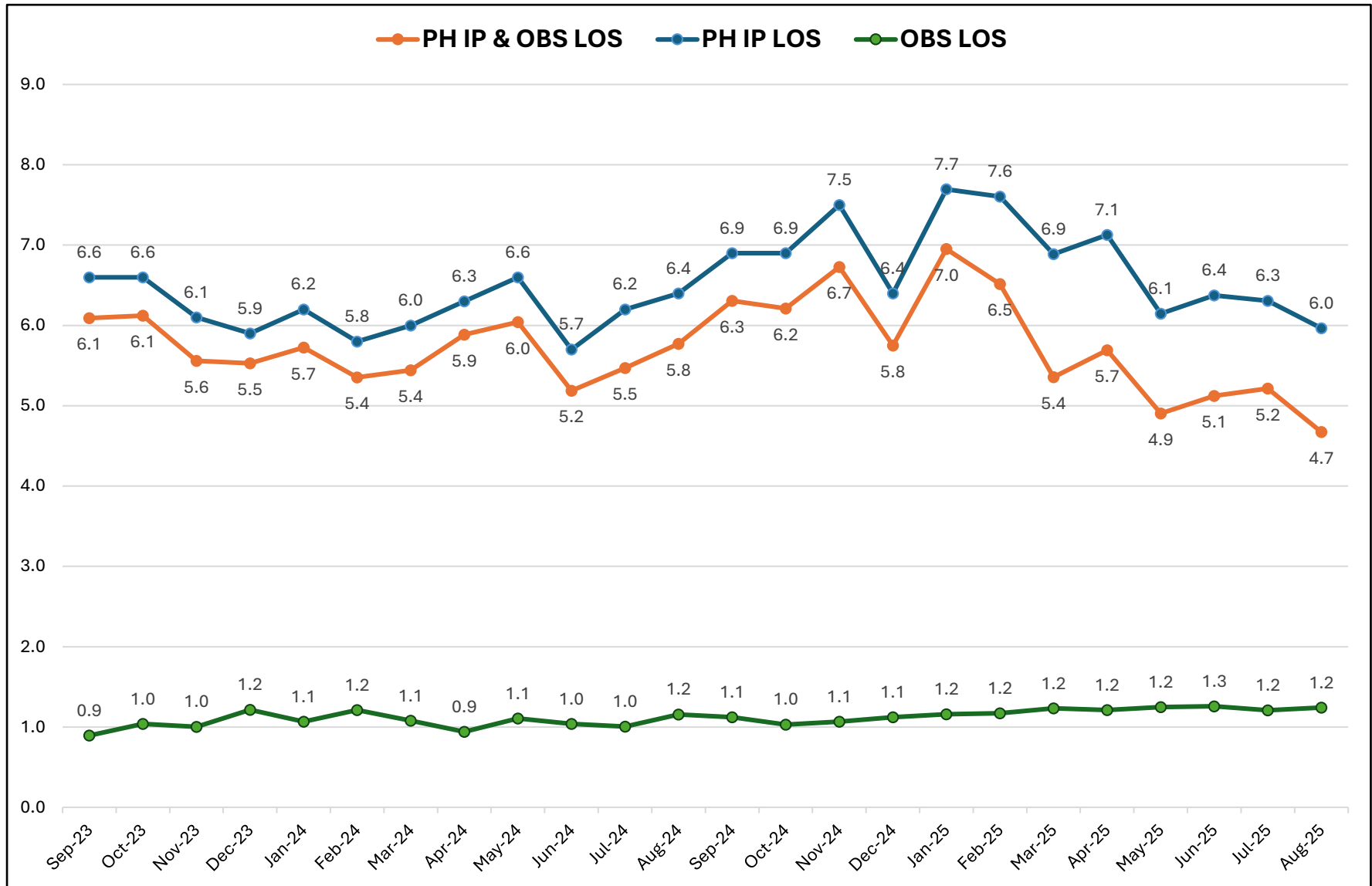
# Inpatient Avg Daily Admissions & Discharges (Psychiatry)



# Throughput – Inpatient Avg Length of Stay (in Days)



# Throughput - Physical Health Hospitalized Patient Length of Stay (in Days) Stratified by Observation Status



# Throughput – Lower Level of Care

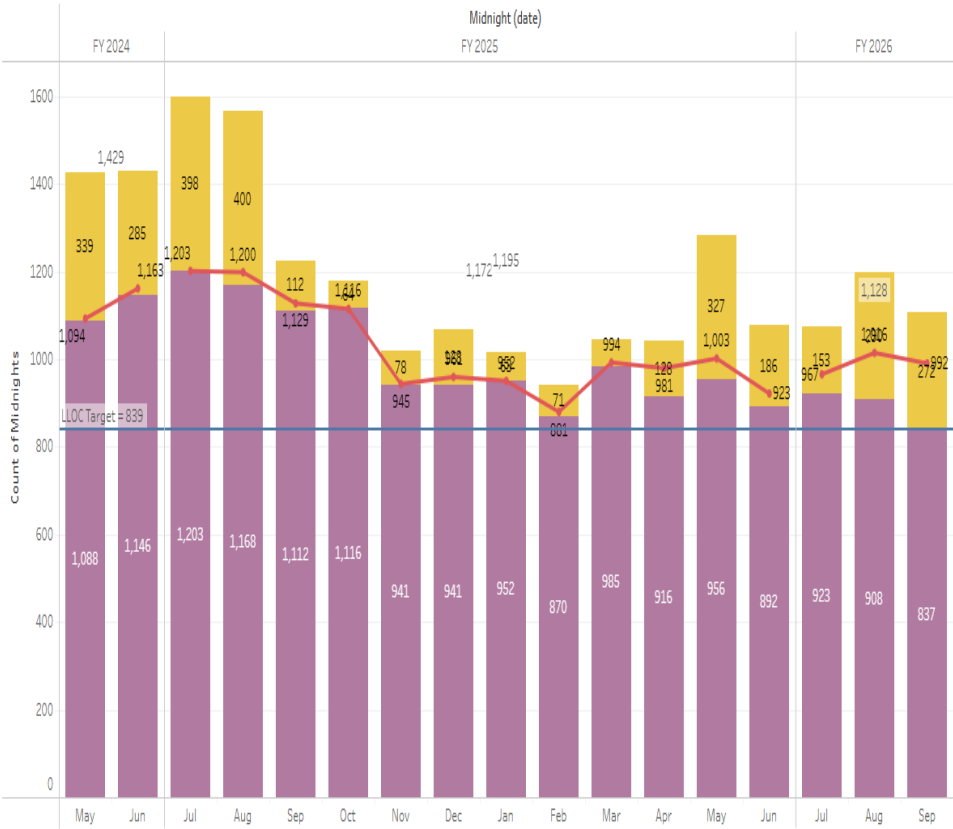
Bed Type (group)

- Behavioral-LLOC
- DENIED/CUSTODIAL

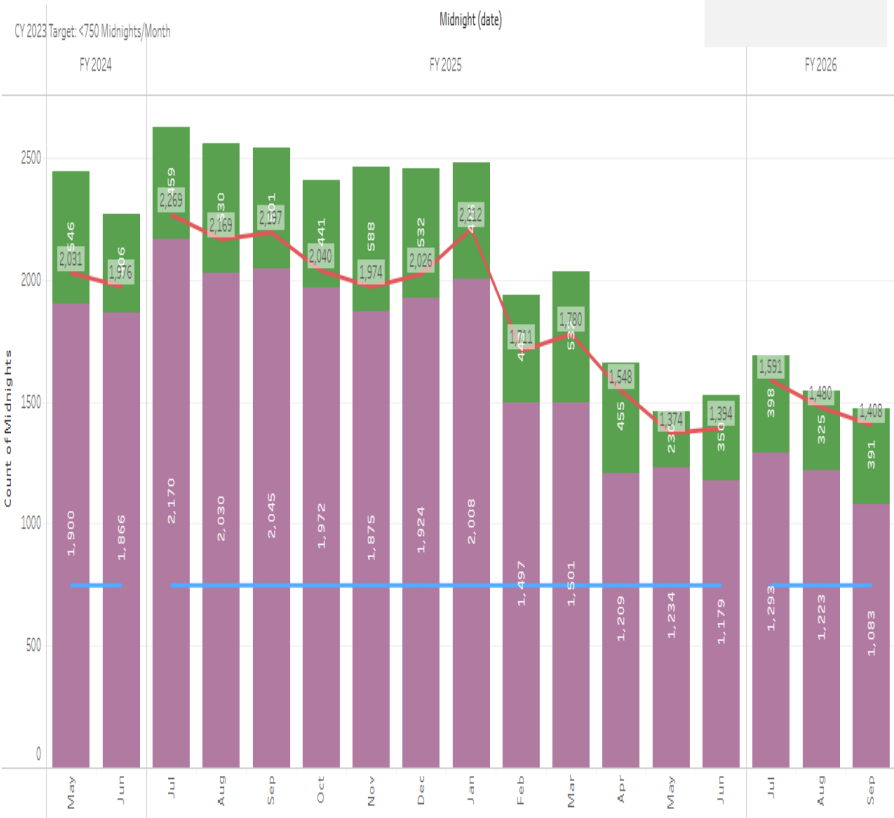
Bed Type (group)

- SNF
- DENIED/CUSTODIAL

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

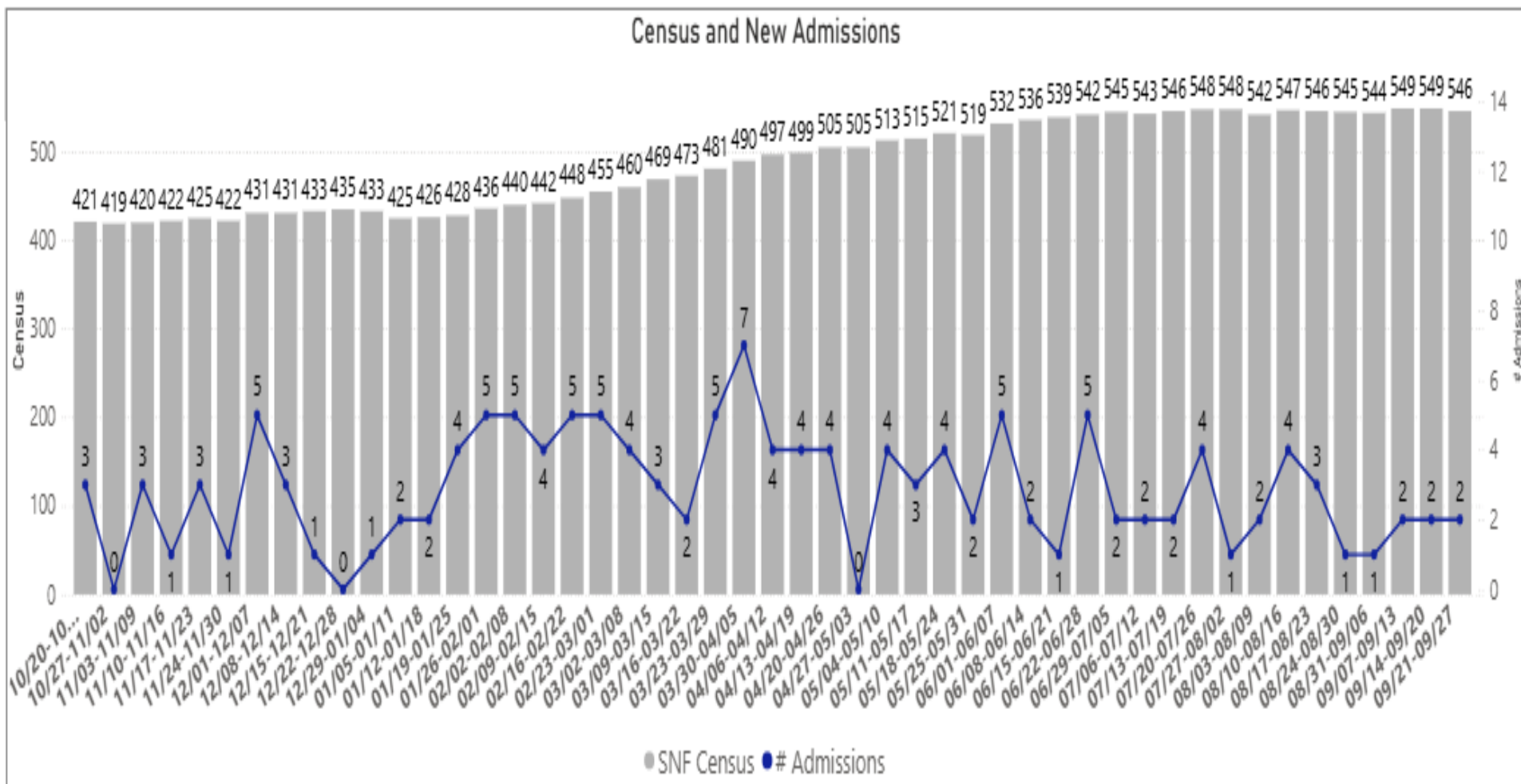


MedSurg LLOC (Bldg 25 except 2nd Floor and H52)





# Weekly ZSFG to LHH Transfers





# Demand for MedSurg Over Time

