

# JCC CEO Data Report

## January 2026

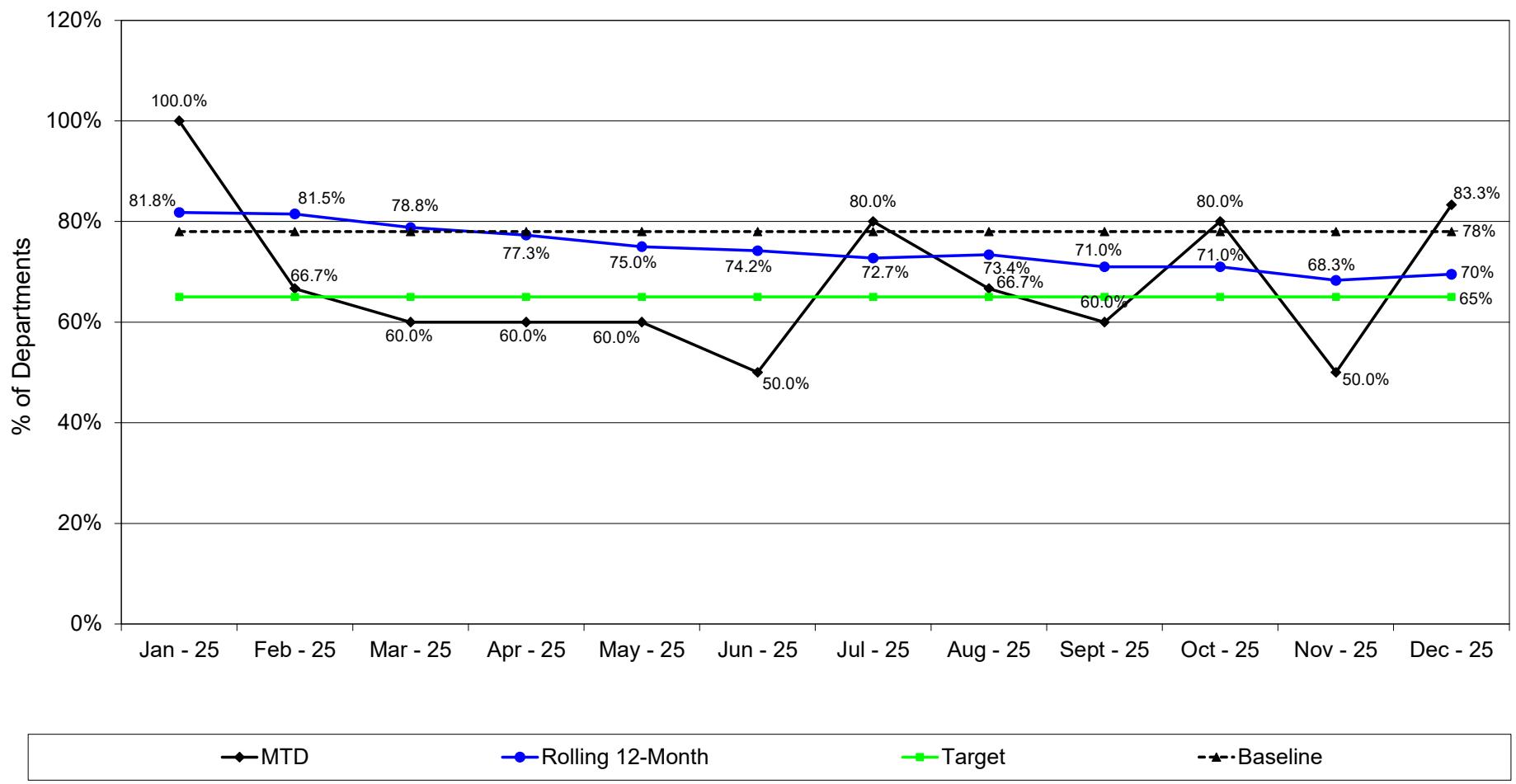
**Part 1:** True North Scorecard Key Performance Indicators

**Part 2:** Flow Data

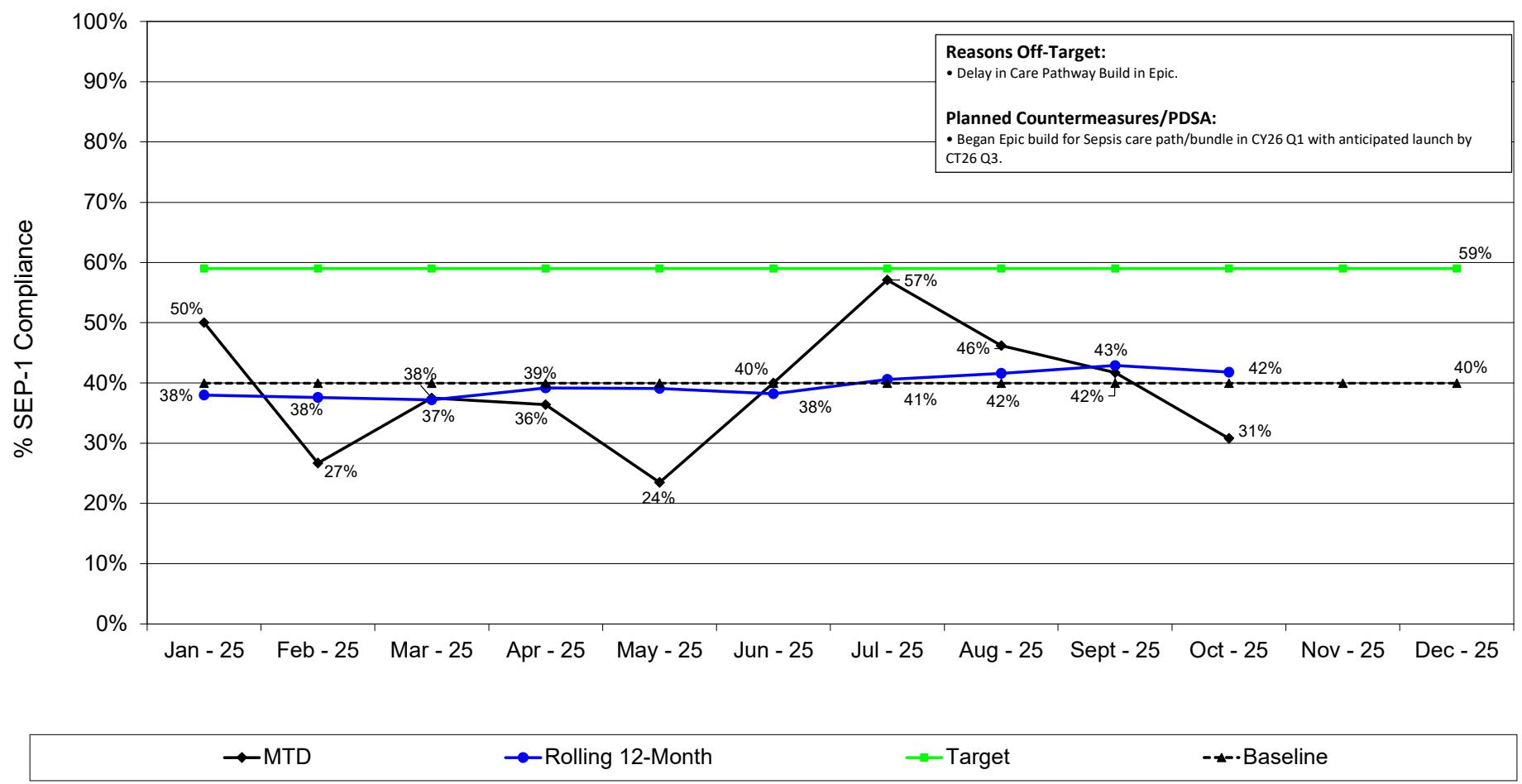
# Part 1: True North Scorecard

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

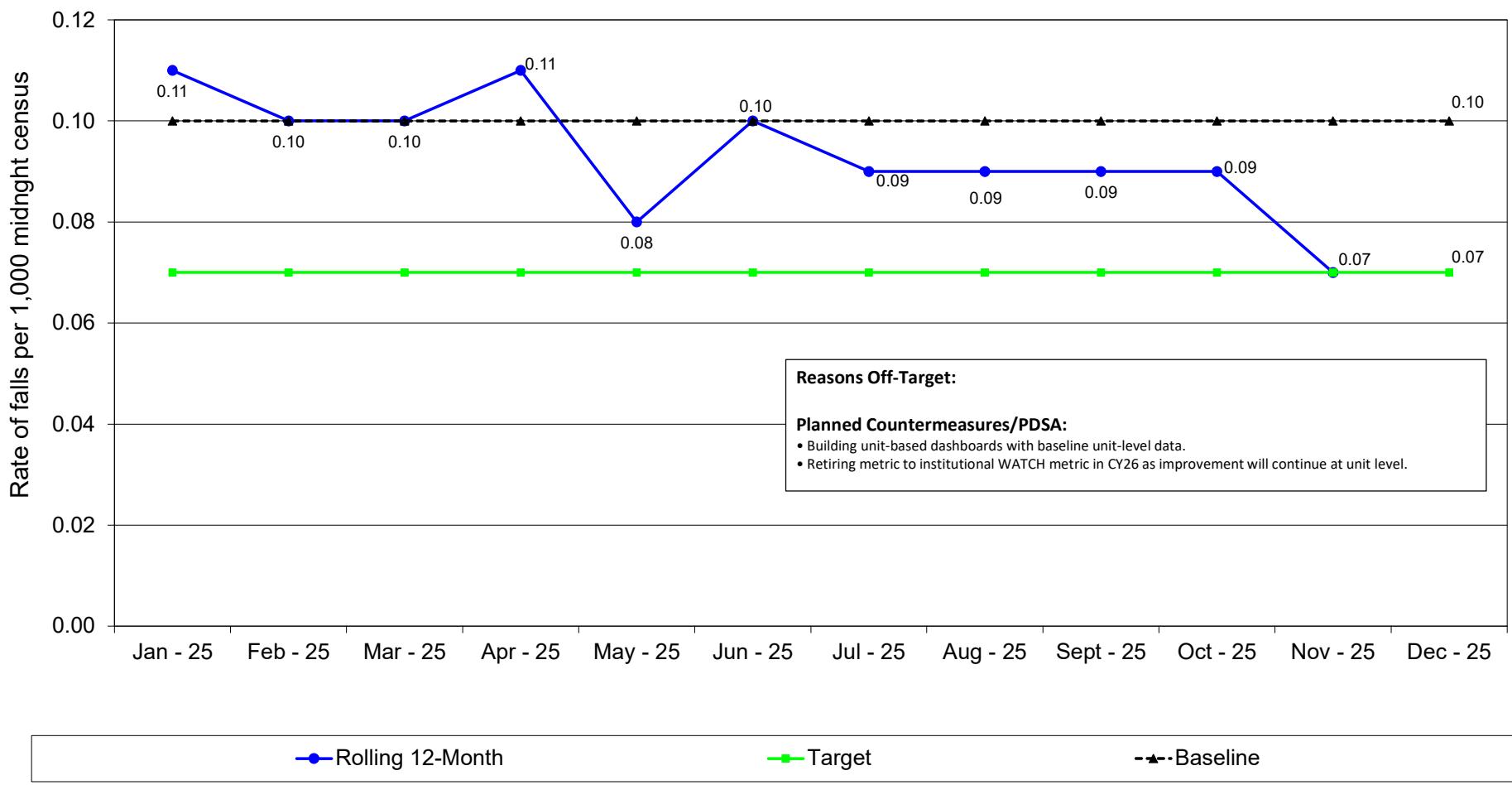
<b>2025 Scorecard:</b>	<b>Departments Driving Equity</b>		Rolling 12-Month	<b>69.5%</b>
True North:	Equity		2025 Target:	<b>65%</b>
Owner:	Ehrlich		2024 Baseline:	<b>78%</b>
Goal Statement:	Maintain % of departments with an active equity driver $\geq 65\%$ , through Dec 2025.		% Change From Last Year:	<b>-10.91%</b>



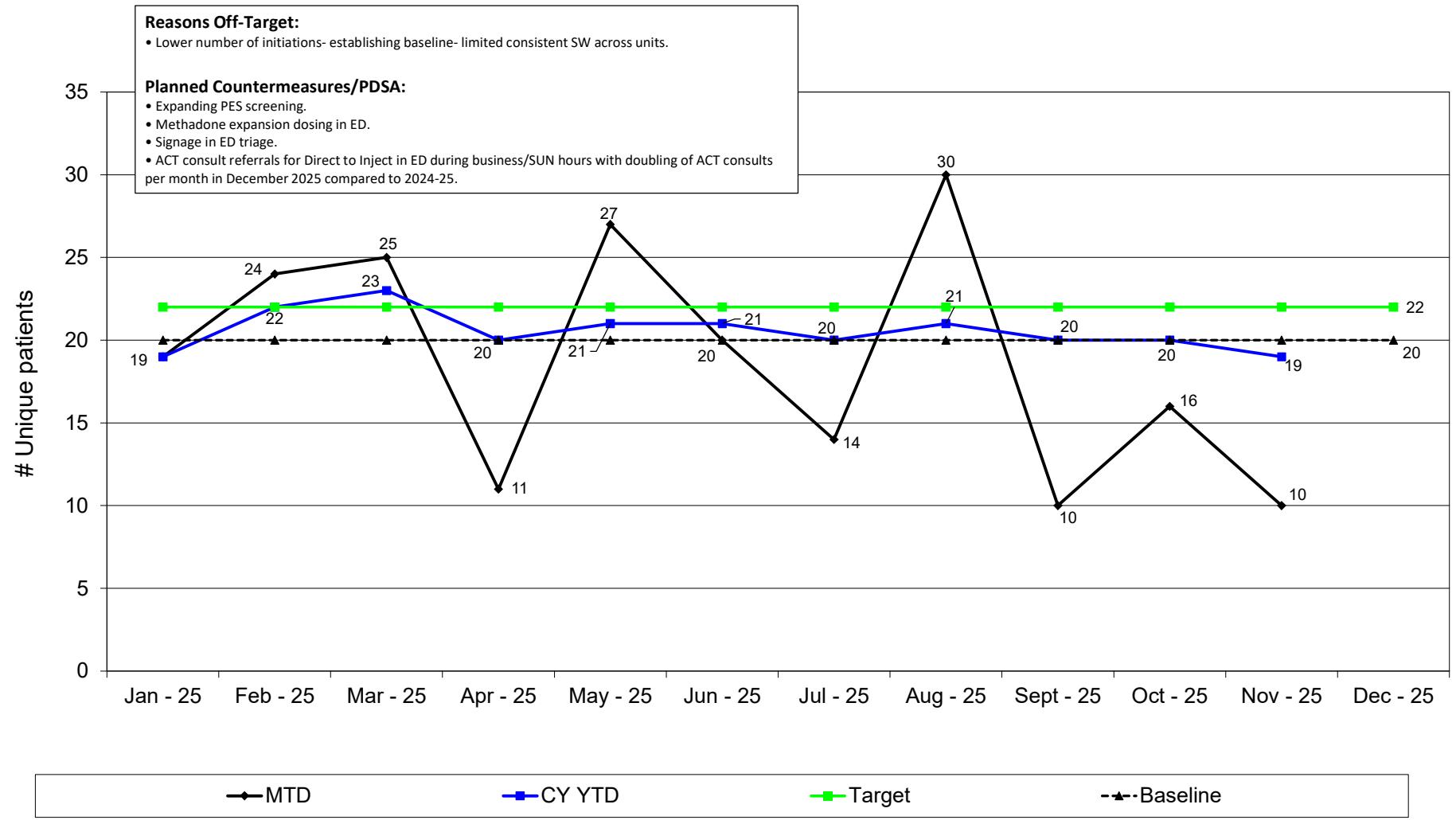
<b>2025 Scorecard:</b>	<b>Sepsis Bundle Compliance (SEP-1)</b>		
<i>True North:</i>	Safety	Rolling 12-Month	42%
<i>Owner:</i>	Smith, Mercer	2025 Target:	59%
<i>Goal Statement:</i>	Increase % of Sepsis Bundle Compliance (SEP-1) $\geq 59\%$ , by Dec 2025.		
	2024 Baseline: 40% % Change From Last Year: 5%		

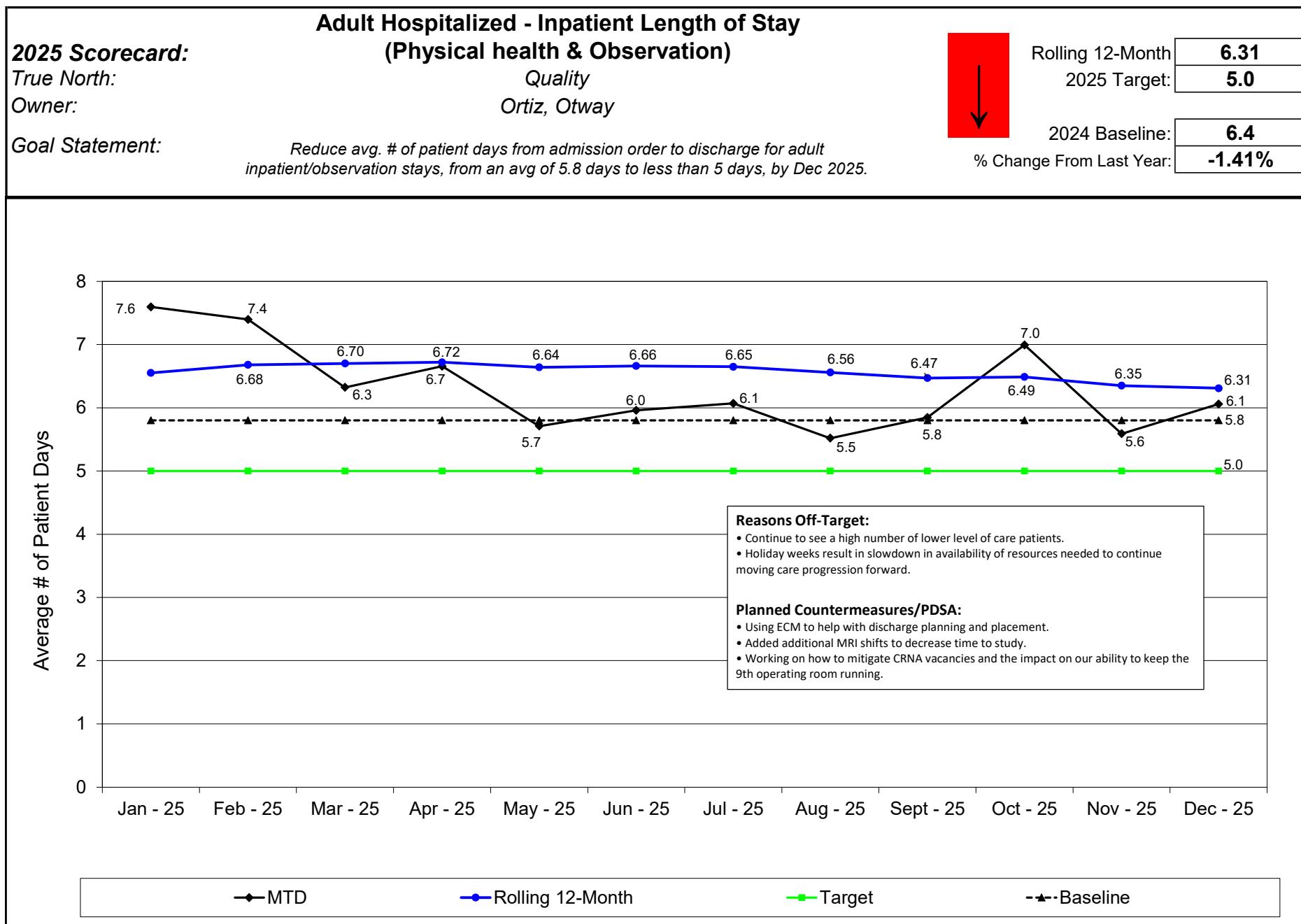


<b>2025 Scorecard:</b>	<b>Falls with Moderate or Major Injury</b>	<b>Safety</b>	<b>Smith, Mercer</b>		<b>Rolling 12-Month</b>	<b>0.07</b>
<i>True North:</i>					<b>2025 Target:</b>	<b>0.07</b>
<i>Owner:</i>					<b>2024 Baseline:</b>	<b>0.10</b>
<i>Goal Statement:</i>	<i>Reduce rate of patient falls with moderate or major injury per 1,000 midnight census &lt;= 0.07, across Med Surg, 4A, ED, and Inpatient Psych, by Dec 2025.</i>				<i>% Change From Last Year:</i> <b>-30.00%</b>	

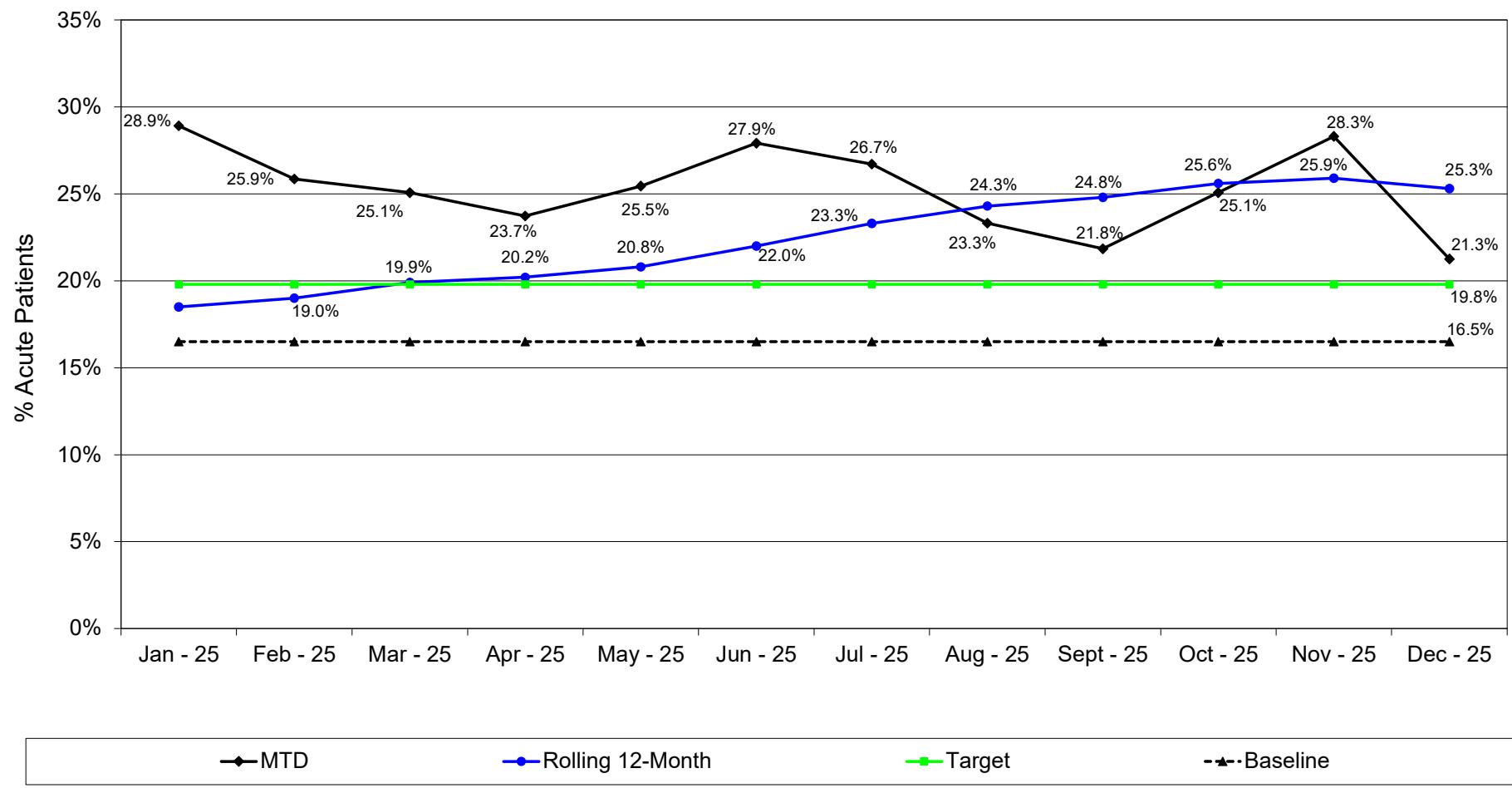


<b>2025 Scorecard:</b>	<b>Medication for Opioid Use Disorder (MOUD)</b>		Rolling 12-Month	<b>19</b>
<i>True North:</i>	<i>Safety</i>		2025 Target:	<b>22</b>
<i>Owner:</i>	<i>Smith, Mercer</i>		2024 Baseline:	<b>20</b>
<i>Goal Statement:</i>	<i>Increase # of unique patients who received a D/C prescription for Buprenorphine from 20, to 22, by Dec 2025.</i>		% Change From Last Year:	<b>-5.00%</b>

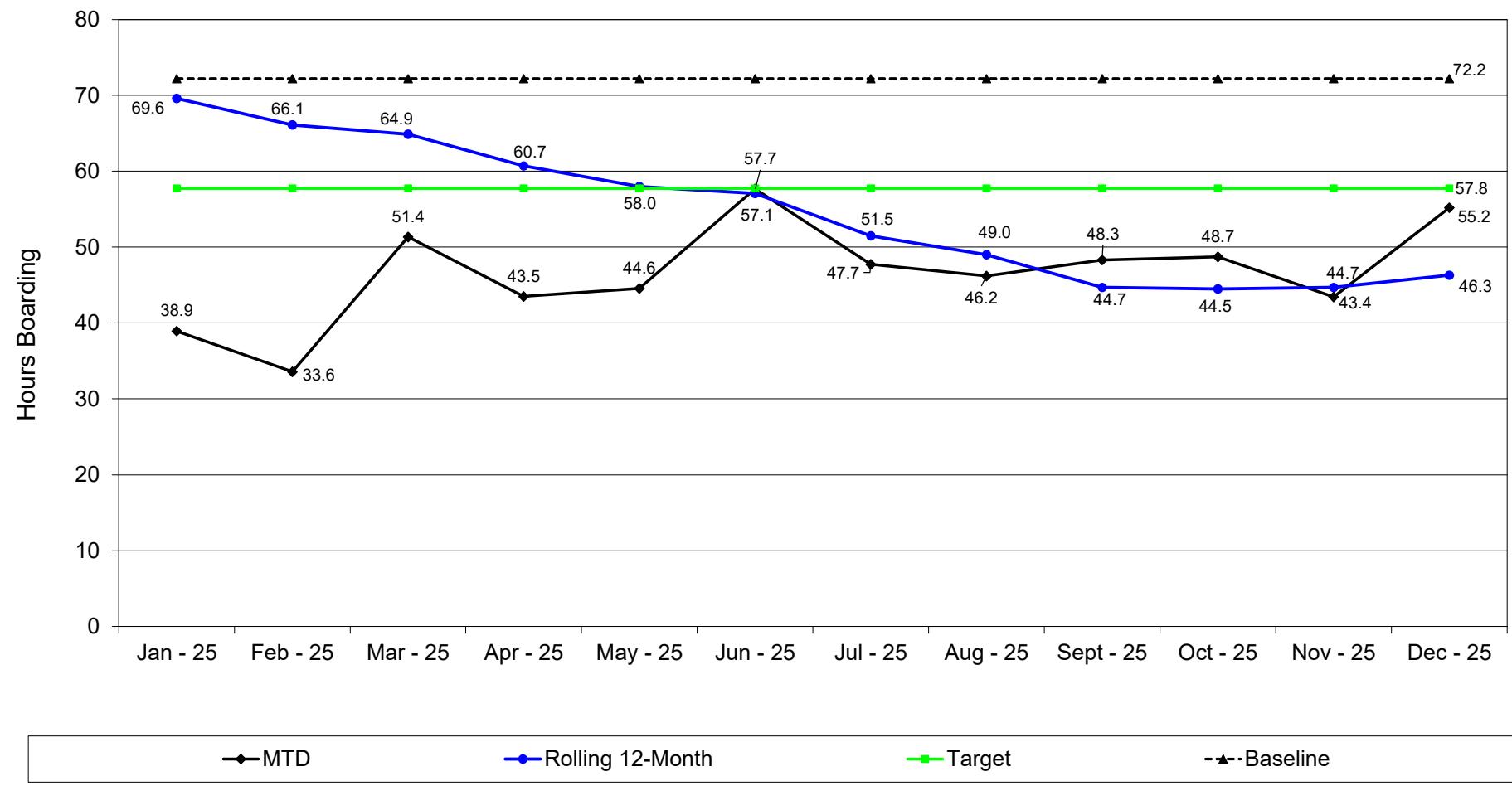




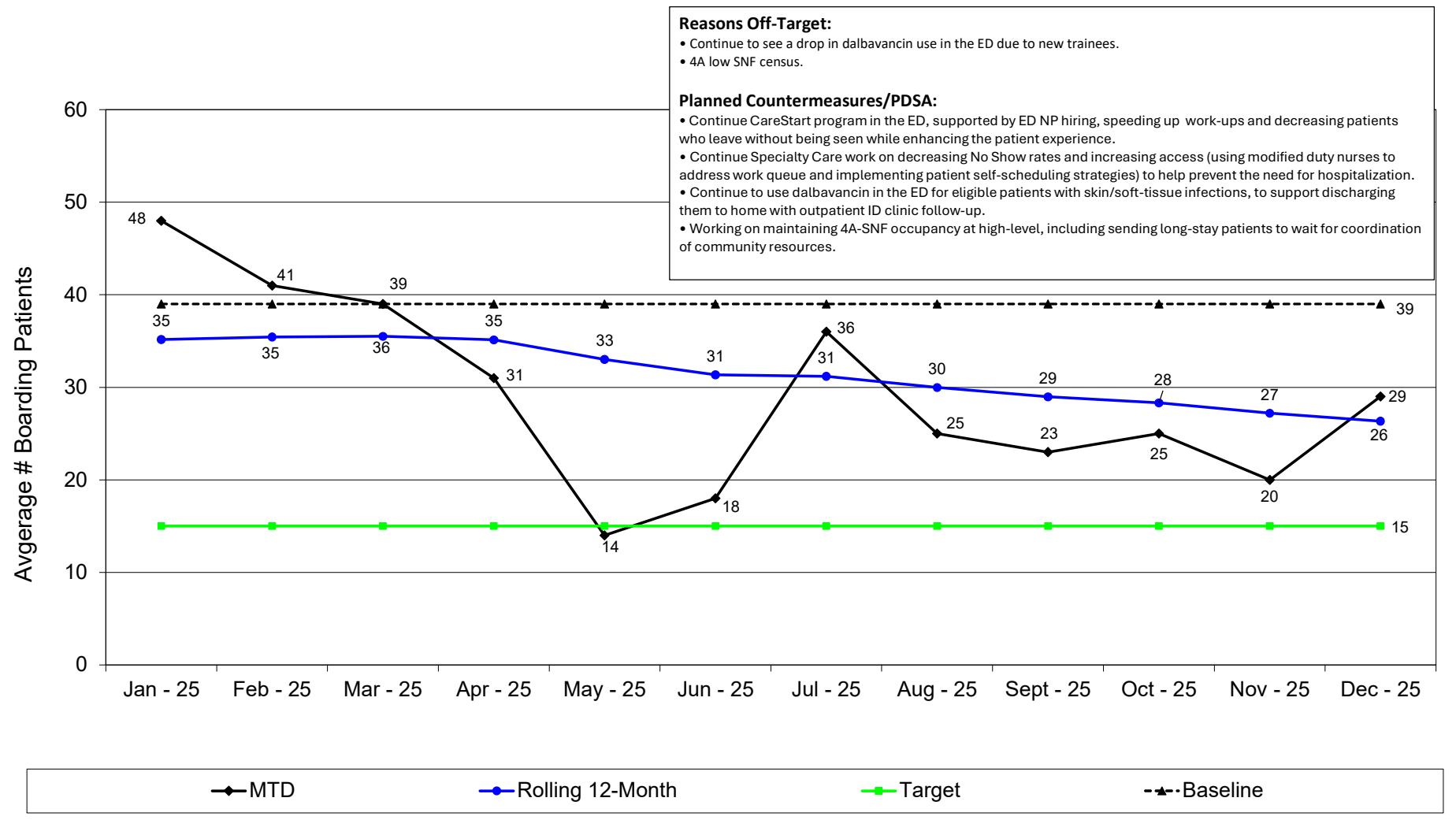
<b>2025 Scorecard:</b>	<b>Psych - % Acute Patients</b>		Rolling 12-Month	<b>25.3%</b>
True North:	Quality		2025 Target:	<b>19.8%</b>
Owner:	Almeida		2024 Baseline:	<b>16.5%</b>
Goal Statement:	<i>Increase % of inpatient psychiatric acute patients (% of total patient days) from 16.5% to greater than 19.8%, by Dec 2025.</i>		% Change From Last Year:	<b>53.23%</b>



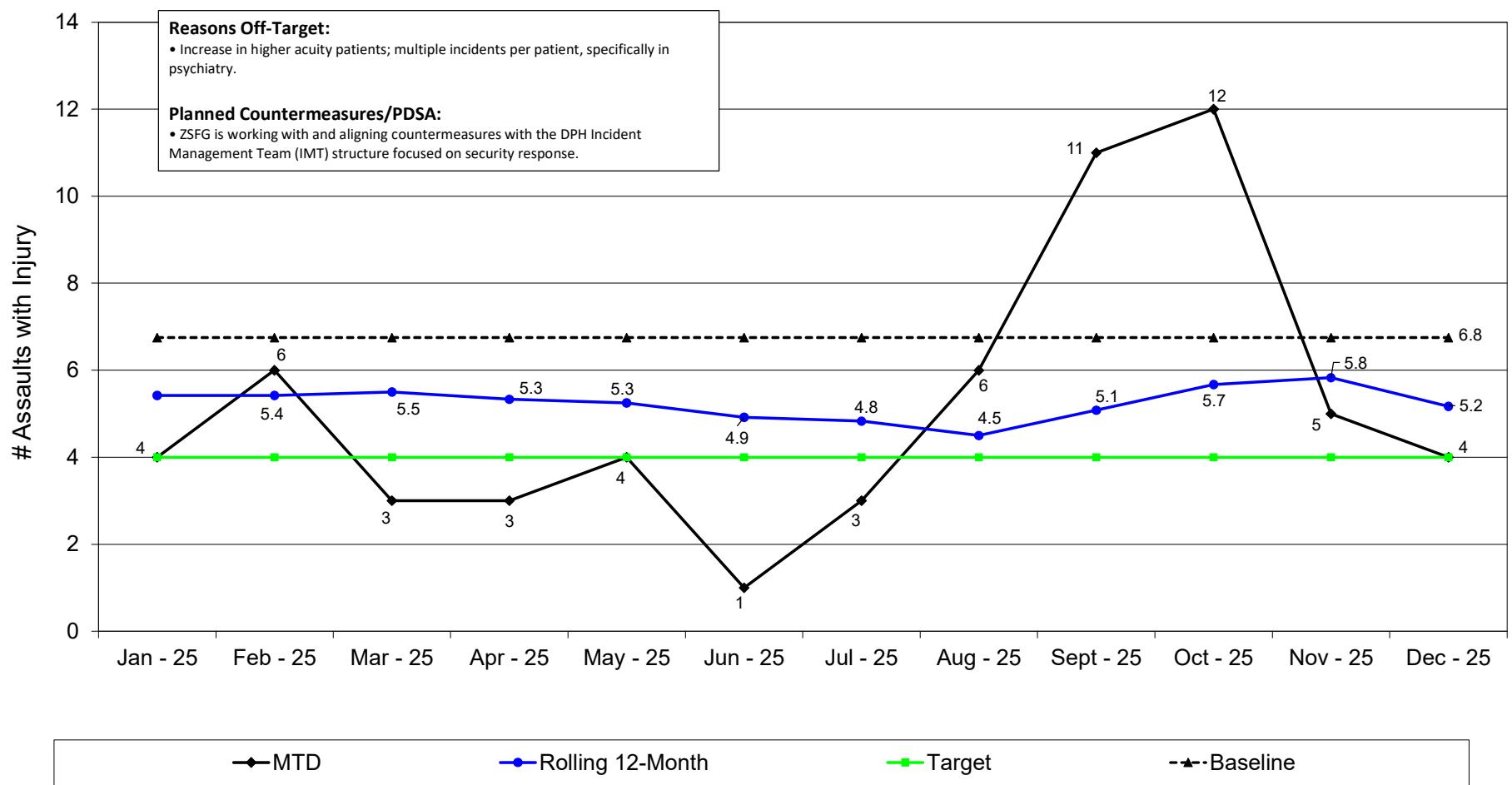
<b>2025 Scorecard:</b>	<b>Boarding - PES Patients (PES)</b>		Rolling 12-Month	<b>46.3</b>
True North:	Quality	2025 Target:	<b>57.8</b>	
Owner:	Almeida	2024 Baseline:	<b>72.2</b>	
Goal Statement:	Reduce LOS of PES patients waiting for an inpatient psychiatric bed by 20%, from baseline of 72.2 hours to 57.8 hours, by Dec 2025.	% Change From Last Year:	<b>-35.86%</b>	



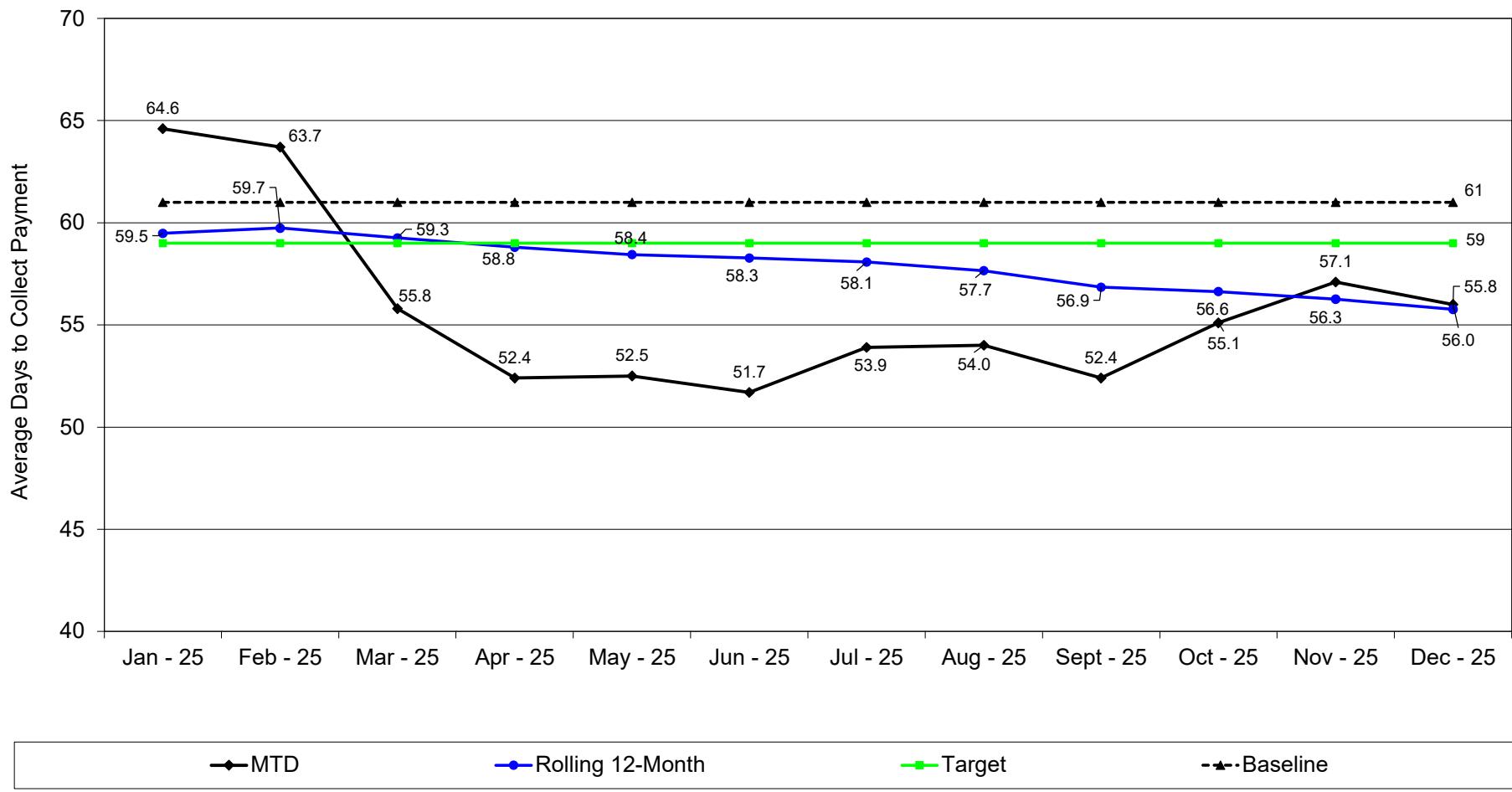
<b>2025 Scorecard:</b>	<b>Boarding - Physical Health (ED, PACU, ICU)</b>		<b>Rolling 12-Month</b>	<b>29</b>
<b>True North:</b>	<b>Quality</b>		<b>2025 Target:</b>	<b>15</b>
<b>Owner:</b>	<b>Ortiz, Otway</b>		<b>2024 Baseline:</b>	<b>39</b>
<b>Goal Statement:</b>	<i>Reduce the average peak number of boarding patients in ED, PACU, and ICU from 39, to fewer than 15, by Dec 2025.</i>		<b>% Change From Last Year:</b>	<b>-25.43%</b>



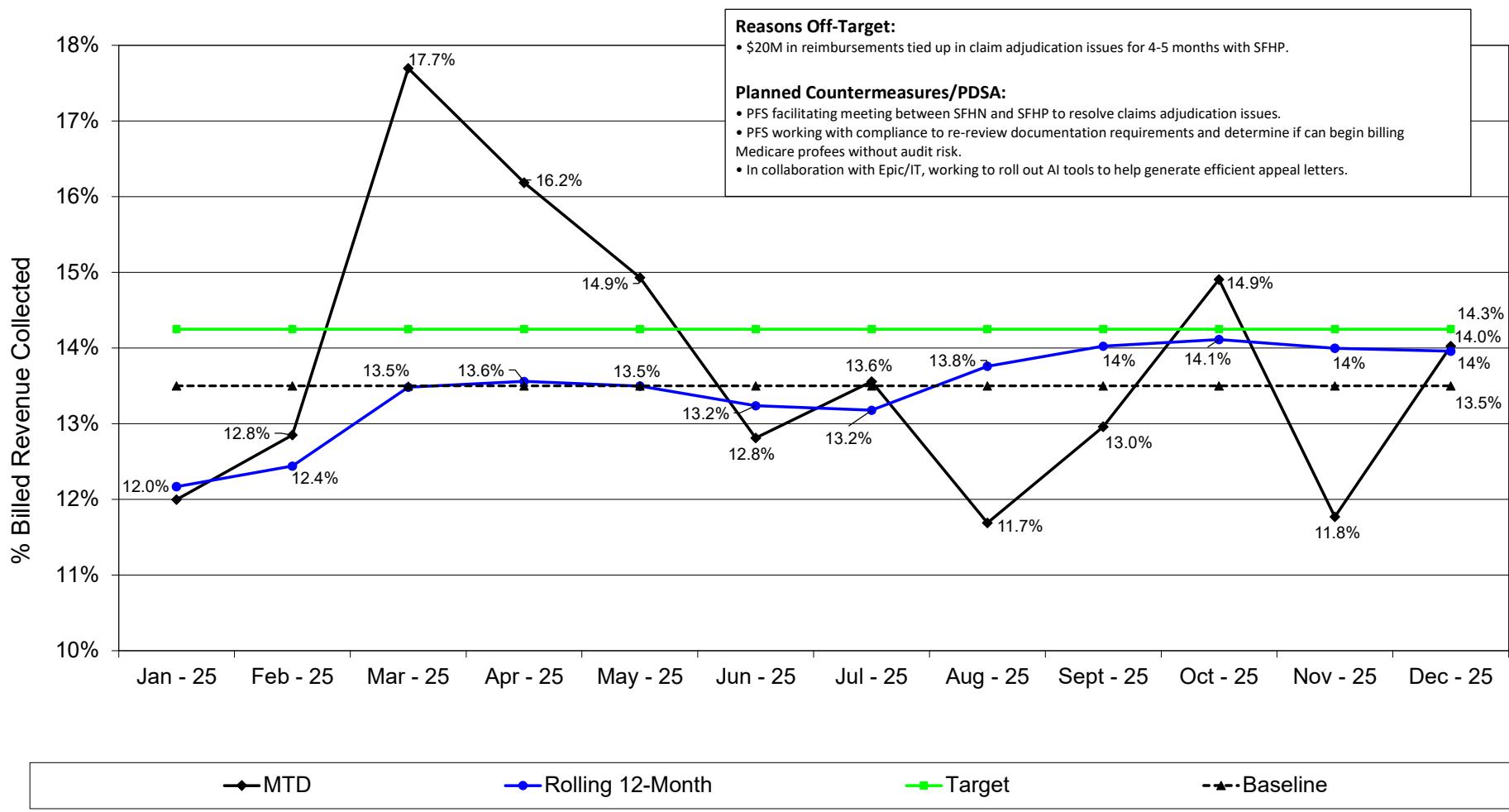
<b>2025 Scorecard:</b>	<b>Physical Assaults with Injury</b>	<b>Developing Our People</b>	<b>Rolling 12-Month</b>	<b>5.2</b>
<b>True North:</b>	<i>Developing Our People</i>		<b>2025 Target:</b>	<b>4.0</b>
<b>Owner:</b>	<i>Robinson</i>			
<b>Goal Statement:</b>	Reduce the # of physical assaults with injury 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)		<b>2024 Baseline:</b>	<b>6.8</b>
			<b>% Change From Last Year:</b>	<b>-23.46%</b>



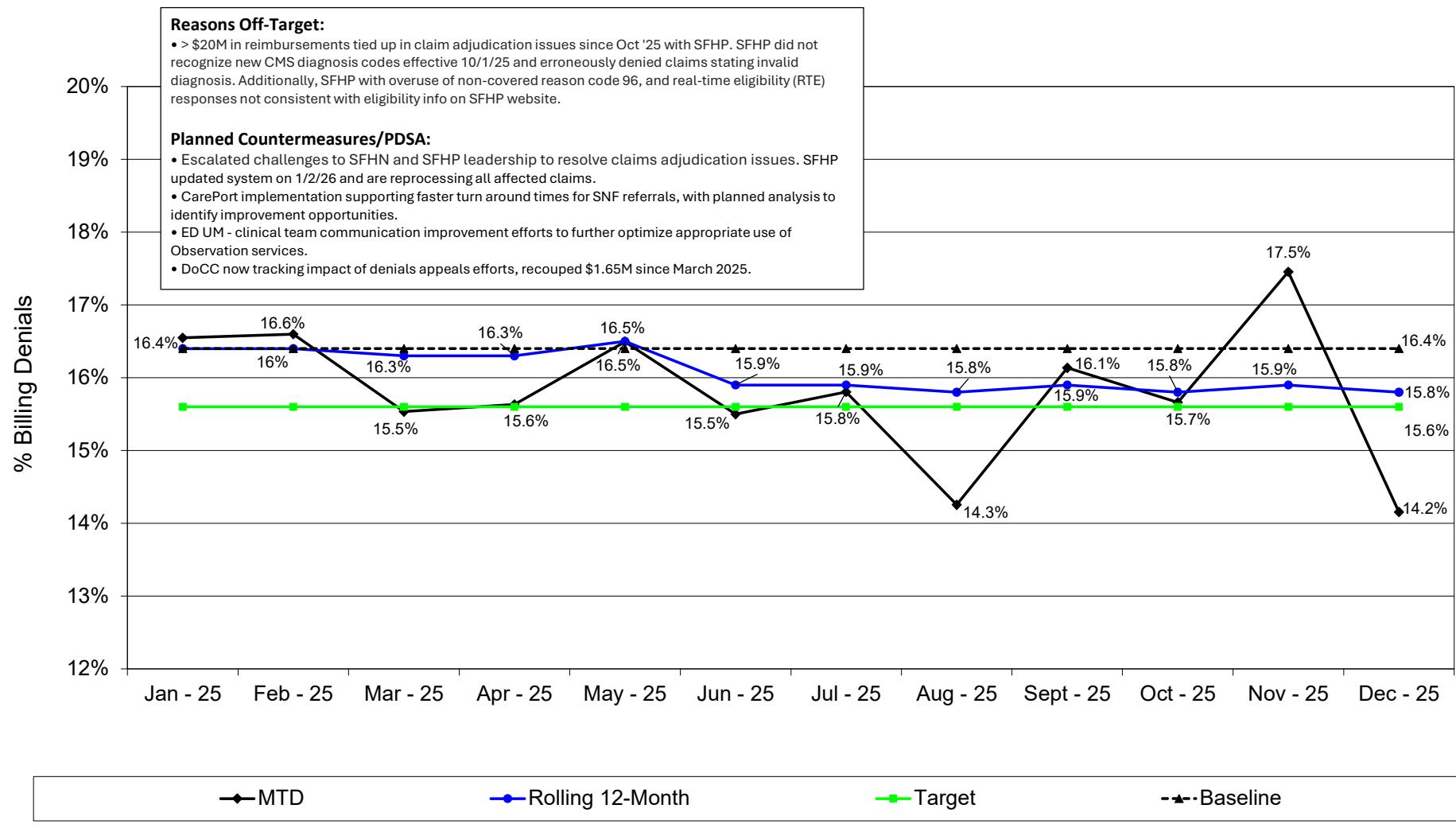
<b>2025 Scorecard:</b>	<b>Accounts Receivable Days</b>		<b>Rolling 12-Month</b>	<b>55.8</b>
<i>True North:</i>	<i>Financial Stewardship</i>		<b>2025 Target:</b>	<b>59</b>
<i>Owner:</i>	<i>Wu, Kanzaria</i>		<b>2024 Baseline:</b>	<b>61</b>
<i>Goal Statement:</i>	<i>Reduce average # of days it takes to collect payments owed from patients and insurance companies from 61 days to 59 days, by Dec 2025.</i>		<b>% Change From Last Year:</b>	<b>-8.58%</b>



<b>2025 Scorecard:</b>	<b>% Realized Revenue</b>		Rolling 12-Month	<b>14%</b>
<i>True North:</i>	<i>Financial Stewardship</i>		2025 Target:	<b>14.25%</b>
<i>Owner:</i>	<i>Wu, Kanzaria</i>		2024 Baseline:	<b>13.50%</b>
<i>Goal Statement:</i>	<i>Increase % of billed revenue that is successfully collected and posted from 13.5% to 14.25%, by Dec 2025.</i>		% Change From Last Year:	<b>2.23%</b>



<b>2025 Scorecard:</b>	<b>Denial Rate - Hospital Billing</b>	<b>Rolling 12-Month</b>	<b>15.8%</b>
<i>True North:</i>	<i>Financial Stewardship</i>	<i>2025 Target:</i>	<i>15.6%</i>
<i>Owner:</i>	<i>Wu, Kanzaria</i>		
<i>Goal Statement:</i>	<i>Reduce Hospital Billing Denial rate for primary payers from 16.4% to 15.6%, by Dec 2025.</i>		
		<b>2024 Baseline:</b>	<b>16.4%</b>
		<b>% Change From Last Year:</b>	<b>-3.96%</b>



# Part 2: Flow Data

## 1. Input (Emergency Volume)

- ED, ED Diversion, PES

## 2. Input and Output (Admissions and Discharges)

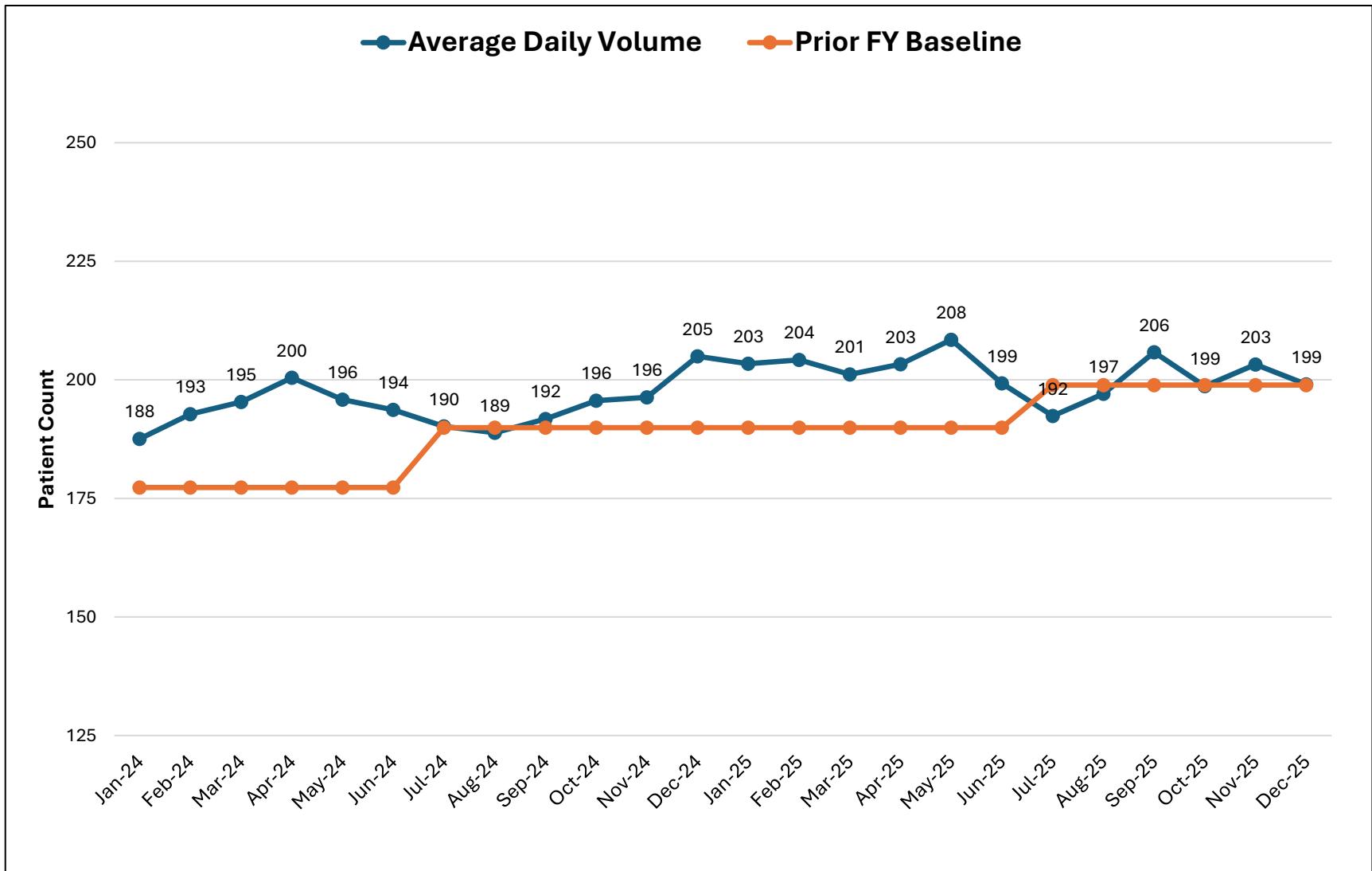
- Physical Health (Med/Surg, ICU, OR, PACU), Maternal Child, Psychiatry

## 3. Throughput

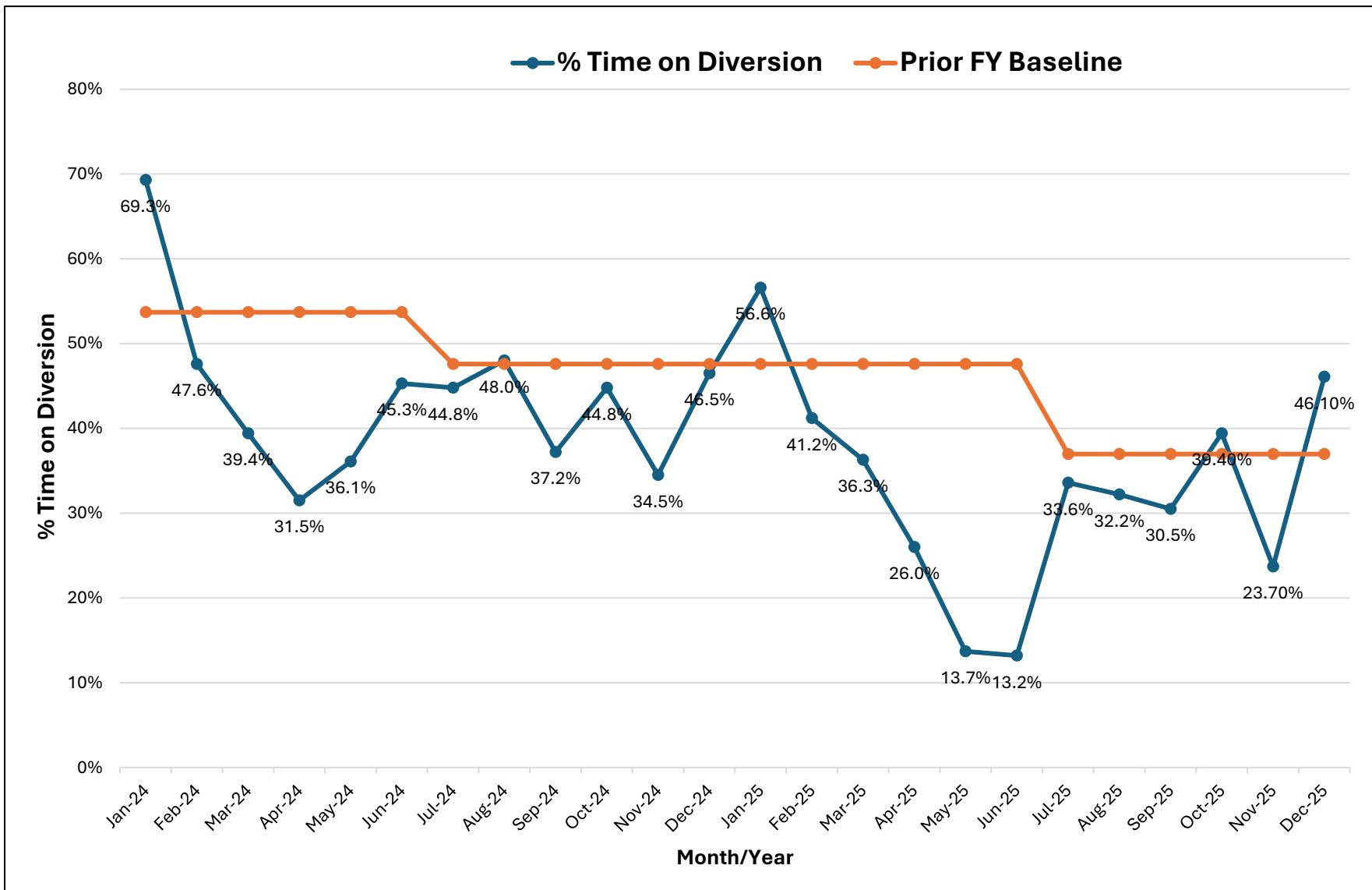
- Regulatory Length of Stay – Physical Health, Psychiatry, Maternal Child
- Operational Length of Stay – Physical Health, Physical Health and Observation, Observation
- LLOC – Physical Health and Psychiatry

## 4. Weekly ZSFG to LHH Transfers

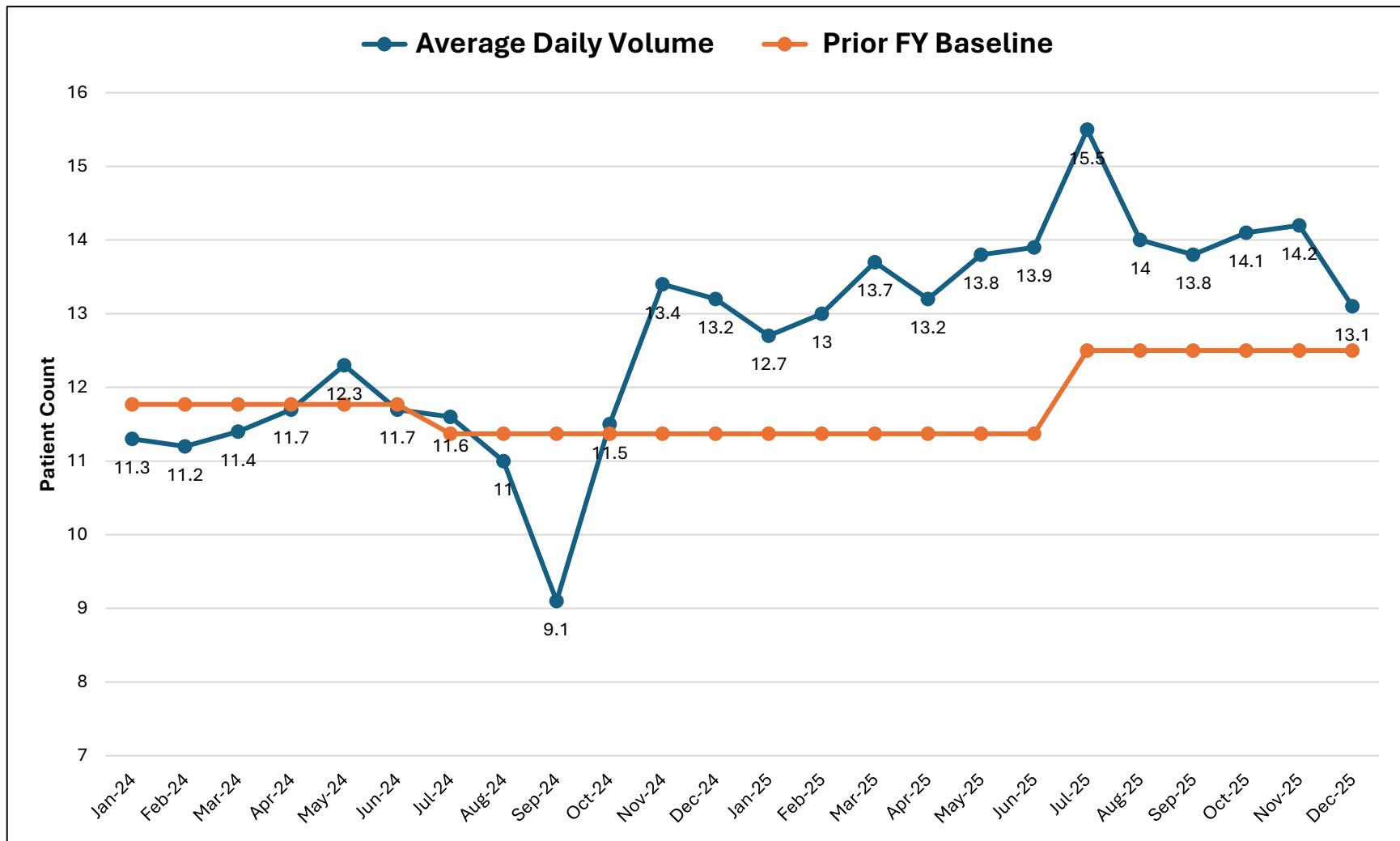
# Input - Medical ED Avg Daily Volume



# Input – Percent of Time on ED Diversion

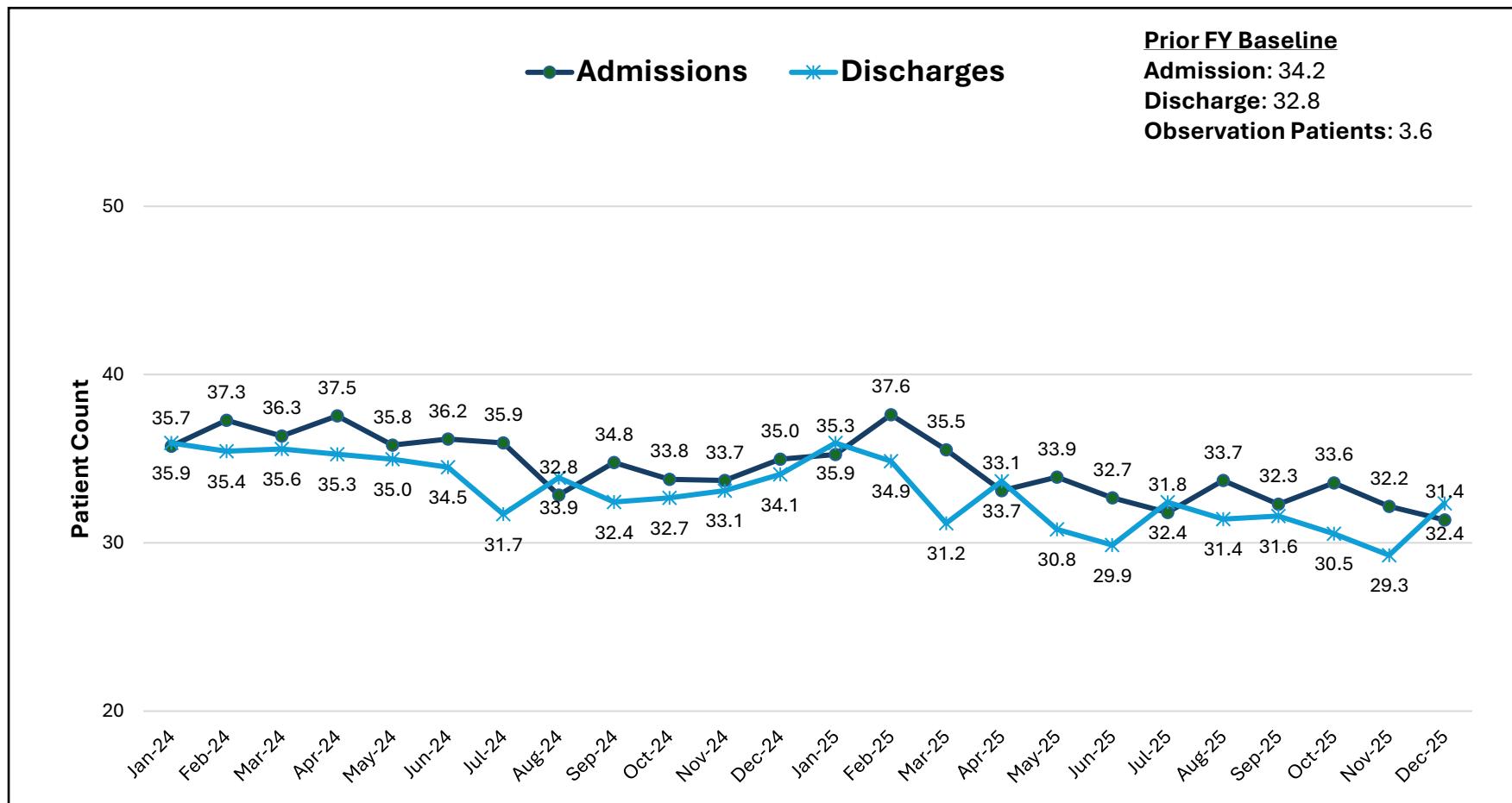


# Input - Psychiatric ED Avg Daily Volume



# Inpatient Avg Daily Admissions & Discharges

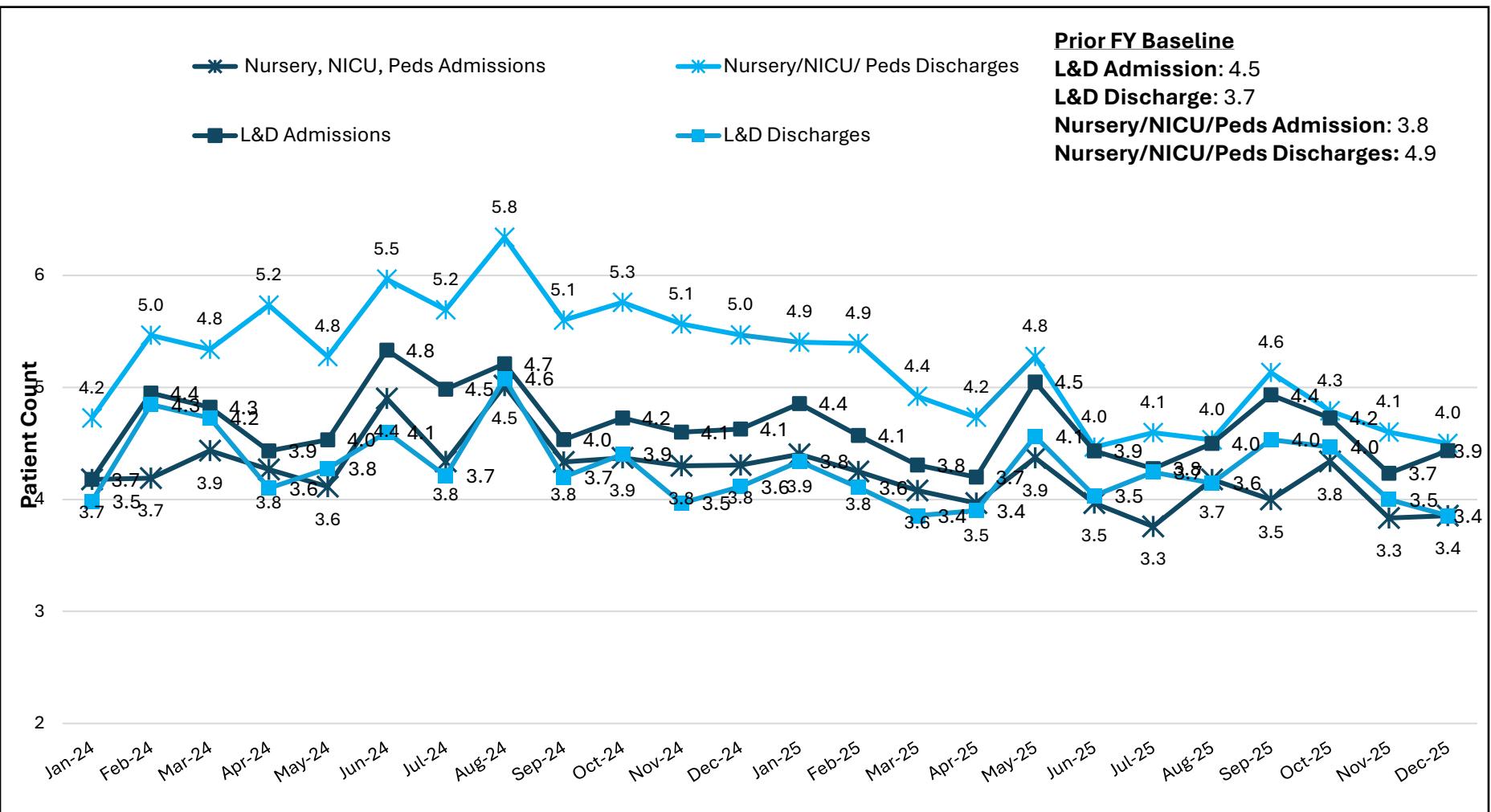
## (Physical Health - MedSurg/ICU/Emergency/OR/PACU)



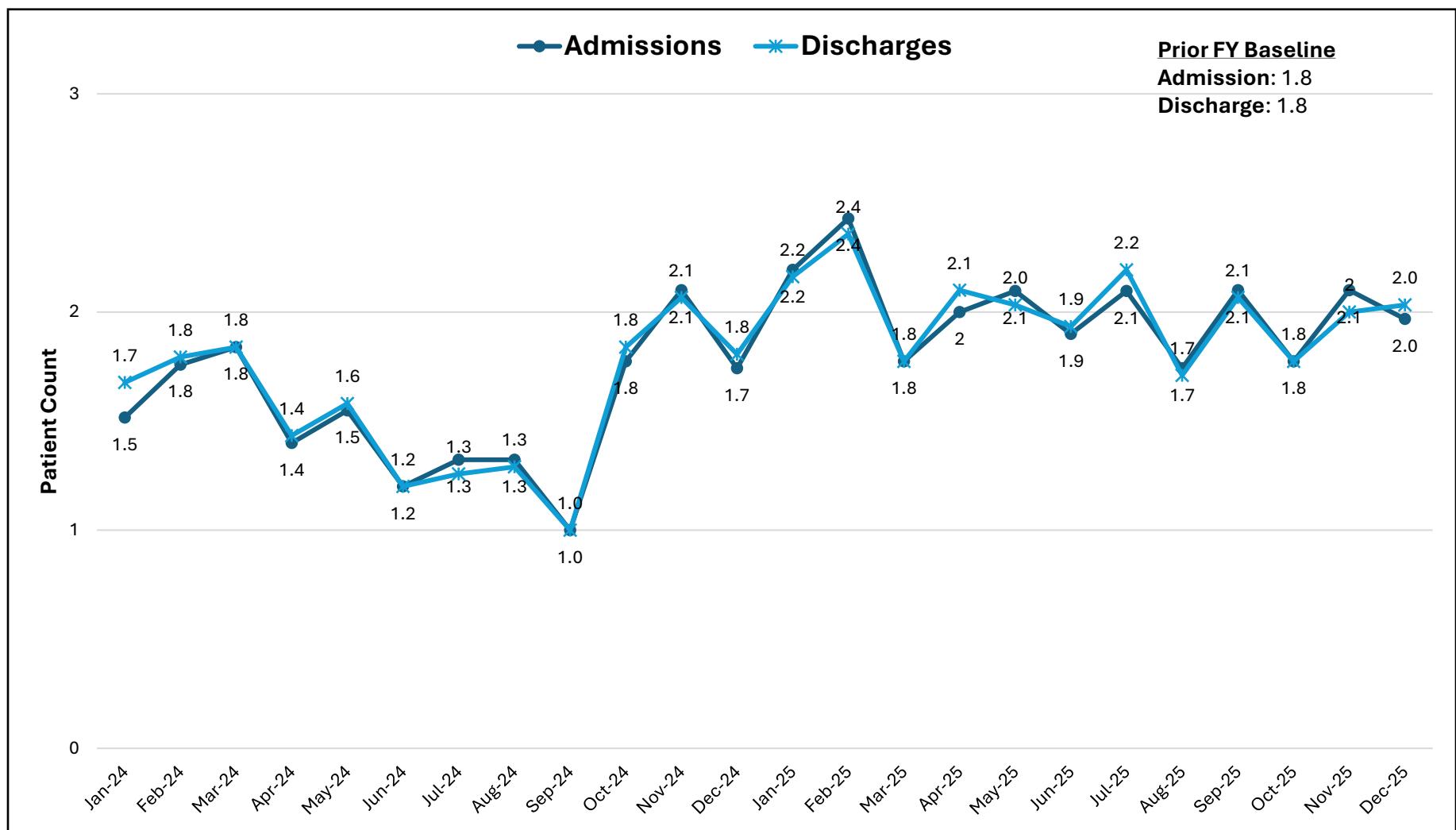
**Notes** – Hospitalized Observation Patients that are subsequently discharged (3.6 patients/day) not shown above

– 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.

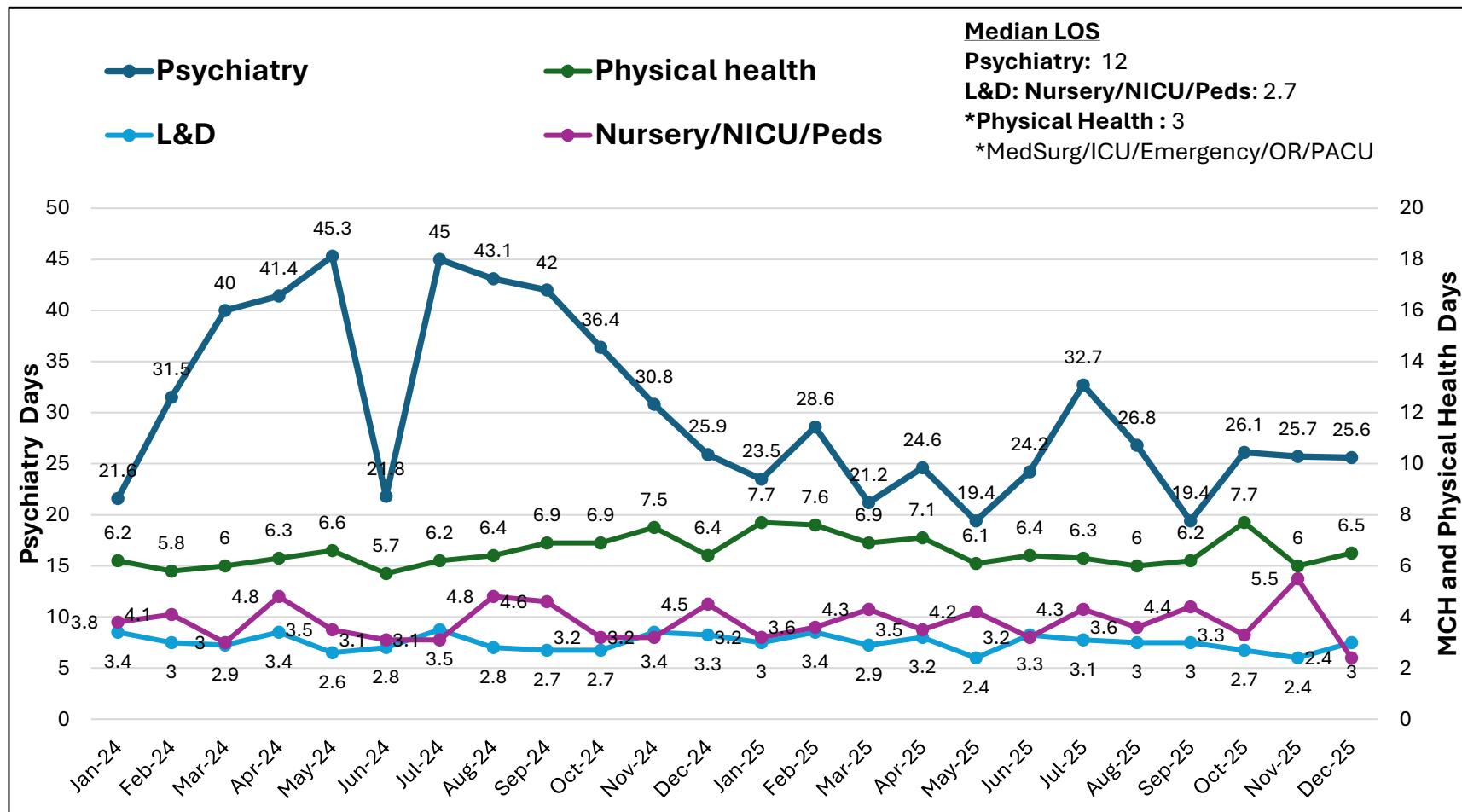
# Inpatient Avg Daily Admissions & Discharges (Maternal & Child Health)



# Inpatient Avg Daily Admissions & Discharges (Psychiatry)

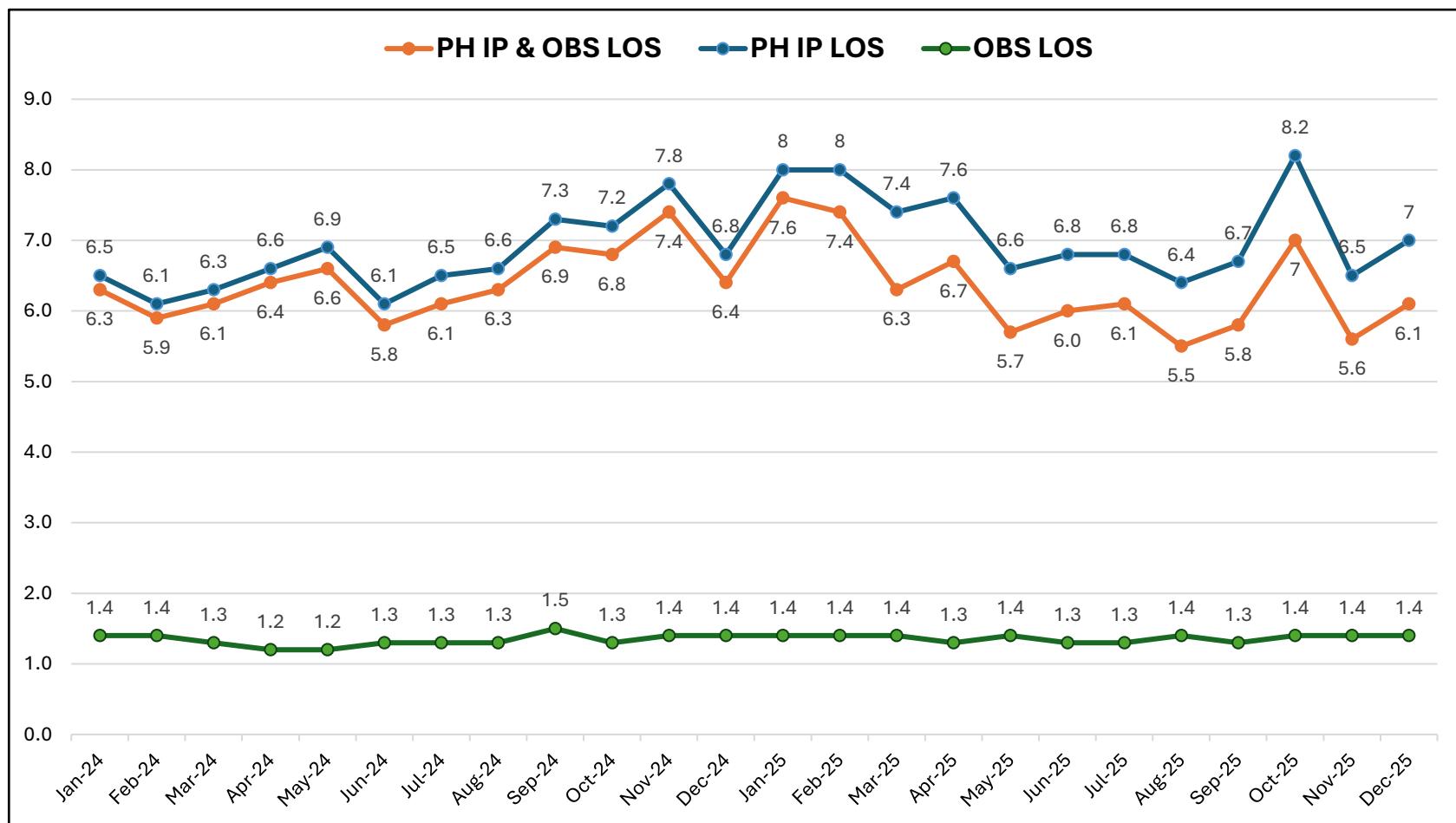


# Throughput – Regulatory Inpatient Avg Length of Stay (in Days)



\* Regulatory inpatient length of stay follows CMS definitions. Length of stay only includes inpatient stays with the start time beginning at the time of inpatient admission order.

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



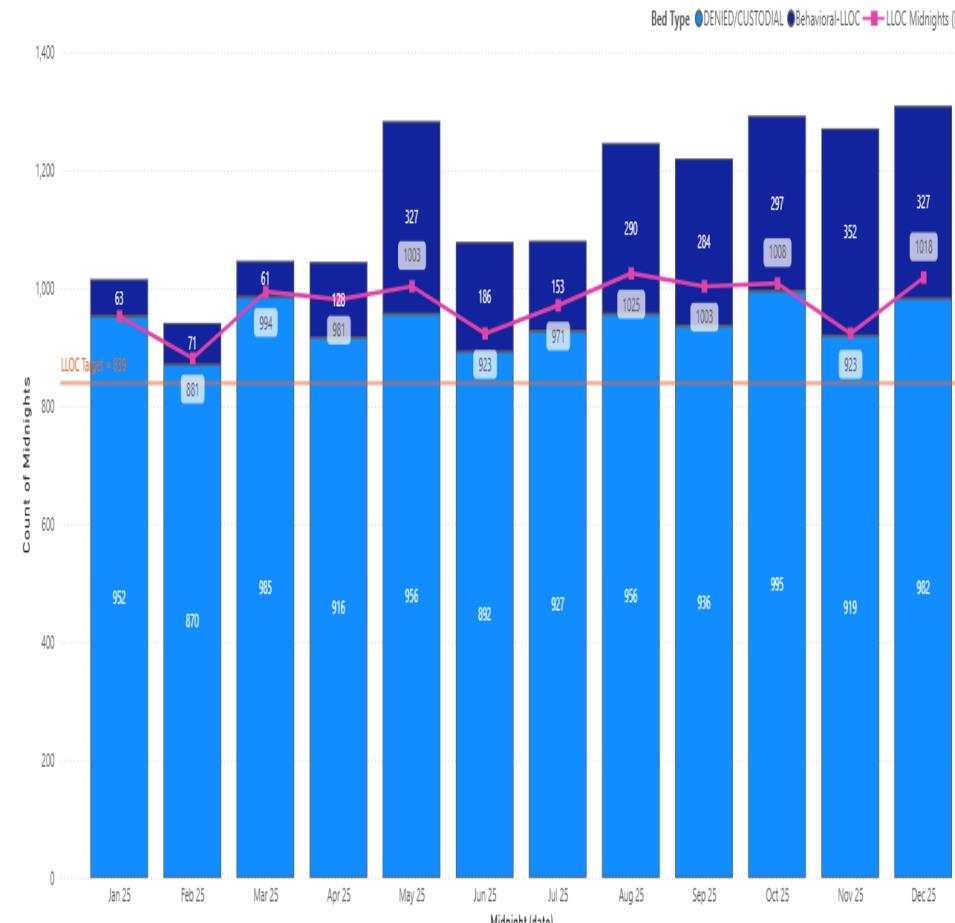
\*Operational patient length of stay includes both inpatient and observation patient stays with the start time beginning at the first event of inpatient or observation orders.

# Throughput – Lower Level of Care

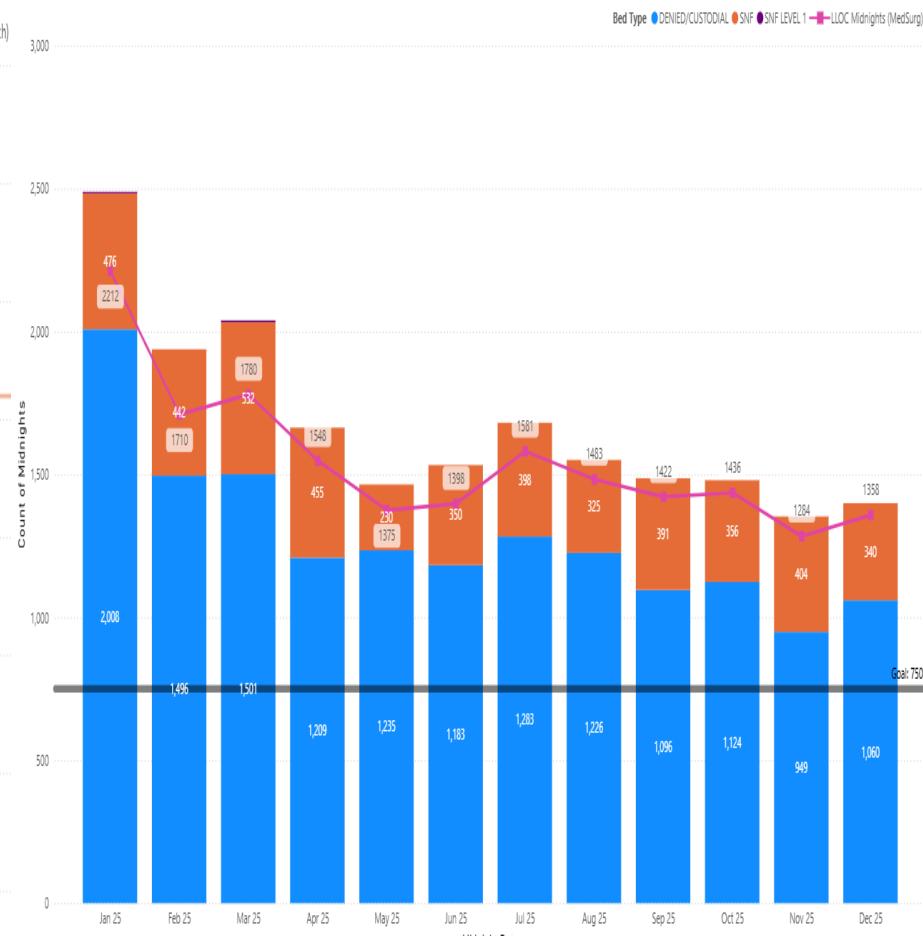
Bed Type ● DENIED/CUSTODIAL ● Behavioral-LLOC ■ LLOC Midnights (Psych)

Bed Type ● DENIED/CUSTODIAL ● SNF ● SNF LEVEL 1 ■ LLOC Midnights (MedSurg)

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

