



ZUCKERBERG
SAN FRANCISCO GENERAL
Hospital and Trauma Center



University of California
San Francisco

ZSFG Access and Flow Update for JCC

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07.28.25



San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



San Francisco
Department of Public Health

Agenda

1. Background
2. Flow strategy drivers schematic
3. Key Performance Indicators (KPIs) Table
4. Current Conditions - KPI Run Charts
5. Countermeasures
6. Recent Successes



ZSFG TRUE NORTH



Background

- Multiple factors contribute to ZSFG's patient flow and access challenges, such as
 - Increasing patient demand
 - Limited physical space
 - Rising mental health crises
 - Limited weekend services
 - Limited community resources – community partners
- This fragmented flow leads to safety/quality issues and poor patient experience.

Flow Strategy Drivers

RIGHT CARE, RIGHT PLACE

ED LWBS

Ambulance Diversion

Outside hospital transfer requests

No Shows, TNAA

Surge Units

DC Lounge

Winter surge funds

Staffing

Dalbavancin for SSTI

Arthroplasty Come and Go

Level-loading with CPMC and Chinese Hospital

LHH AMU

LLOC on admission/Social Medicine

Discharging short-stay patients from the ED

OON Specialty Care Referrals

ED to UCC

Readmissions

CLINICALLY APPROPRIATE LENGTH OF STAY

LLOC provider discomfort

LLOC cohorting

LLOC dispositions

9th OR expansion for decreasing Add-On LOS

Expected Discharge Date

Discharge before Noon

Discharge Order to Bed Ready

LHH partnership

4A SNF reopening

Chinese Hospital SNF?

Long-term Behavioral Health Beds

Avoidable Days analysis

KPI Table

| Strategic Driver | Selected KPI Metrics | Baseline FY24 | Benchmark | Targets by Dec 2025 |
|---|---|---------------|---|---------------------|
| <i>RIGHT CARE, RIGHT PLACE</i> | PHYSICAL HEALTH: Boarding patients/day in ED, ICU, and PACU | 39 patients | 0 | ≤15 patients |
| | PSYCHIATRY: Average LOS of boarding in PES | 72.2 hours | 0 | ≤57.8 hours |
| <i>CLINICALLY APPROPRIATE LENGTH OF STAY</i> <small>(RIGHT AMOUNT OF TIME)</small> | PHYSICAL HEALTH: Average LOS of adult hospitalized medical patients | 5.8 days | 5.1 days | ≤5.0 days |
| | PSYCHIATRY: Inpatient psychiatric acute patient days | 16.5% | 44.4% <small>(CA state median)</small> | ≥19.8% |

Current Conditions in KPIs

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Boarding – Medical Patients (ED, PACU, ICU)

2025 Scorecard:

True North:

Owner:

Goal Statement:

Boarding - Medical Patients (ED, PACU, ICU)

Quality

Ortiz, Otway

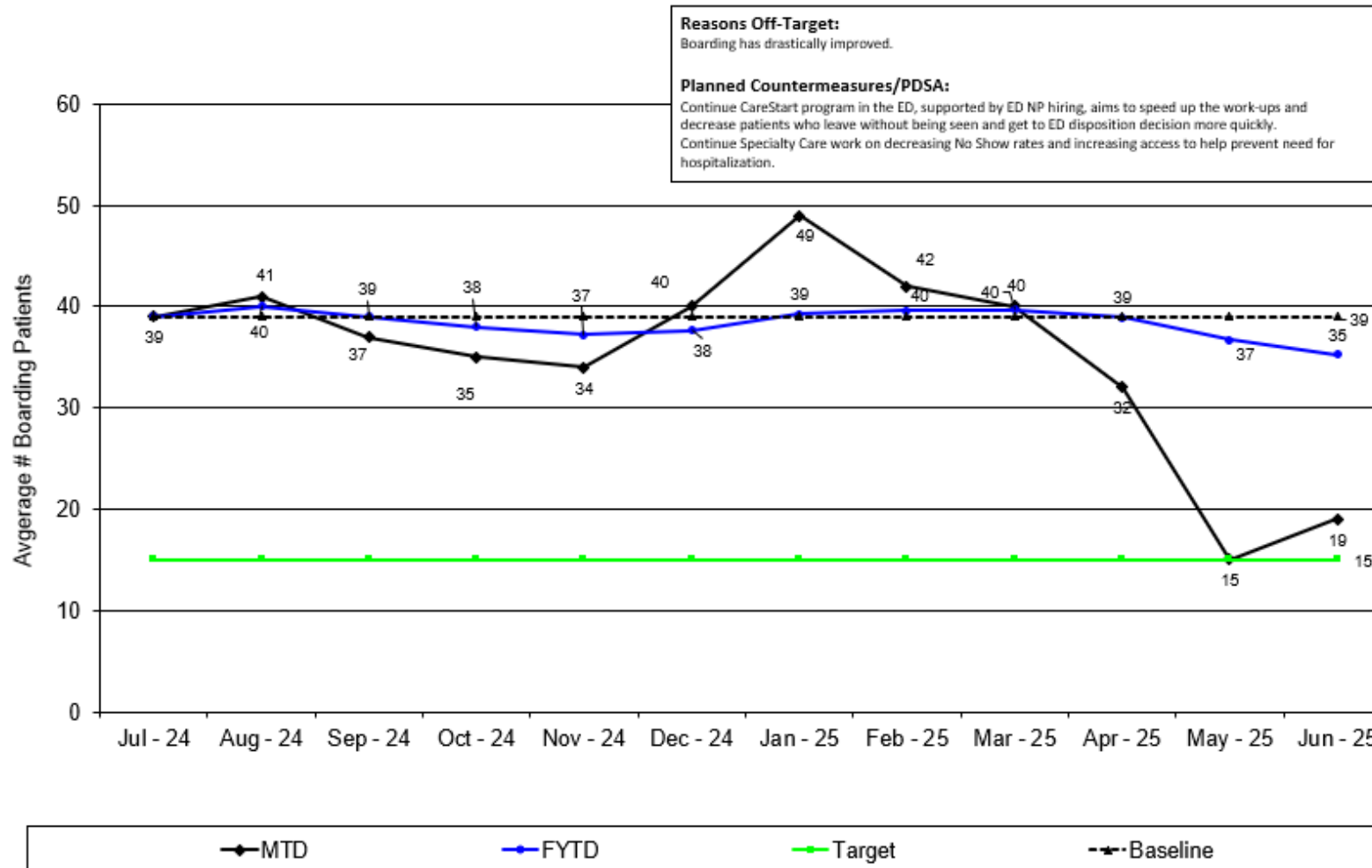
Reduce the average peak number of boarding patients in ED, PACU, and ICU from 39, to fewer than 15, by Dec 2025.

2025 FYTD: 35

2025 Target: 15

2024 Baseline: 39

% Change From Last Year: -9.62%



Right Care, Right Place:
of boarding medical patients/day in ED, ICU, and PACU (avg. Peak # of patients)

Boarding hours spent in PES

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.

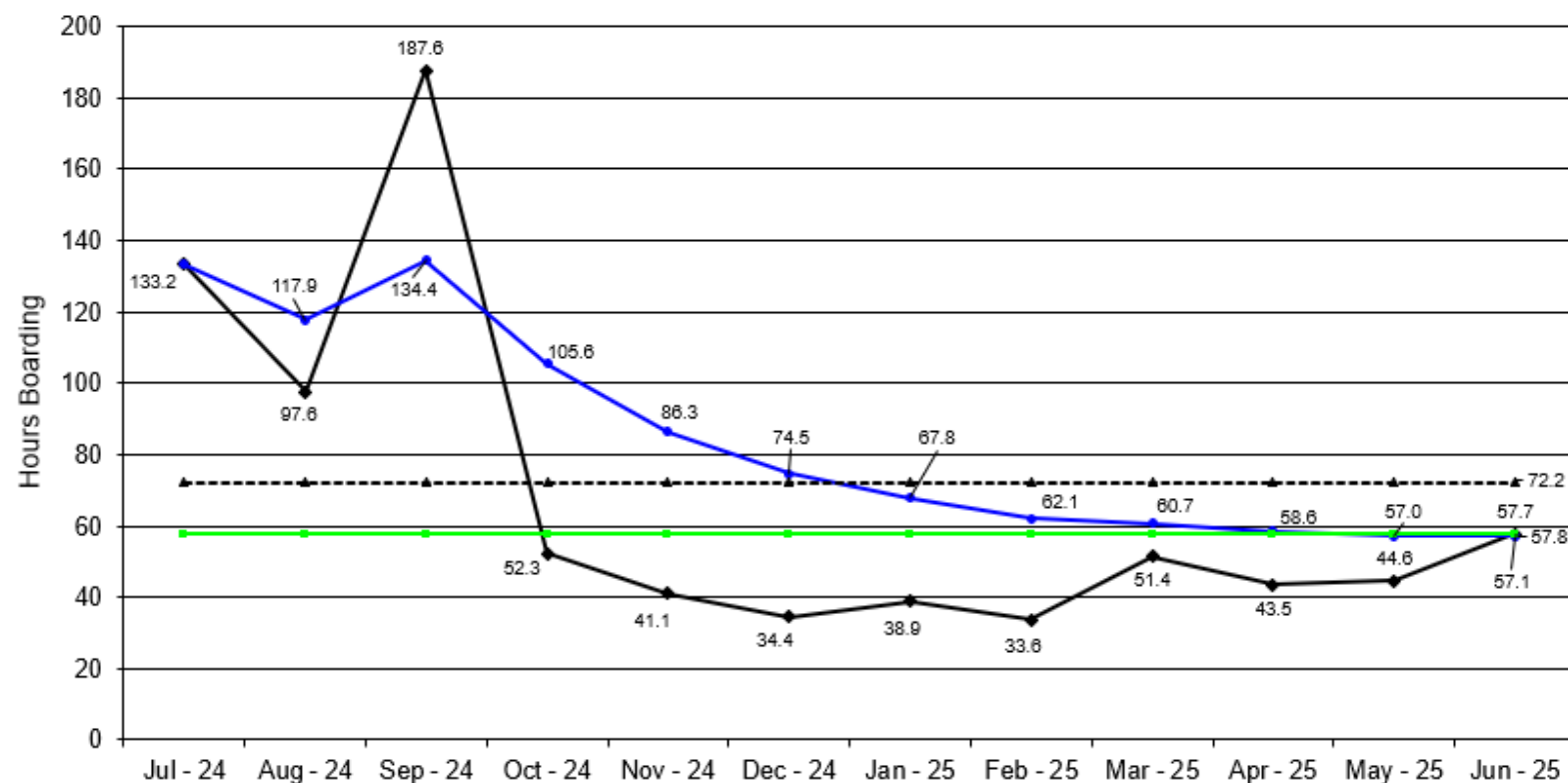


2025 FYTD: 57.1

2025 Target: 57.8

2024 Baseline: 72.2

% Change From Last Year: -20.92%



Right Care, Right Place:
Average LOS of boarding
psychiatric patients in
PES (hours)

MTD

FYTD

Target

Baseline

Adult Hospitalized Inpatient LOS

2025 Scorecard:

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

True North:

Quality

Owner:

Ortiz, Otway

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.

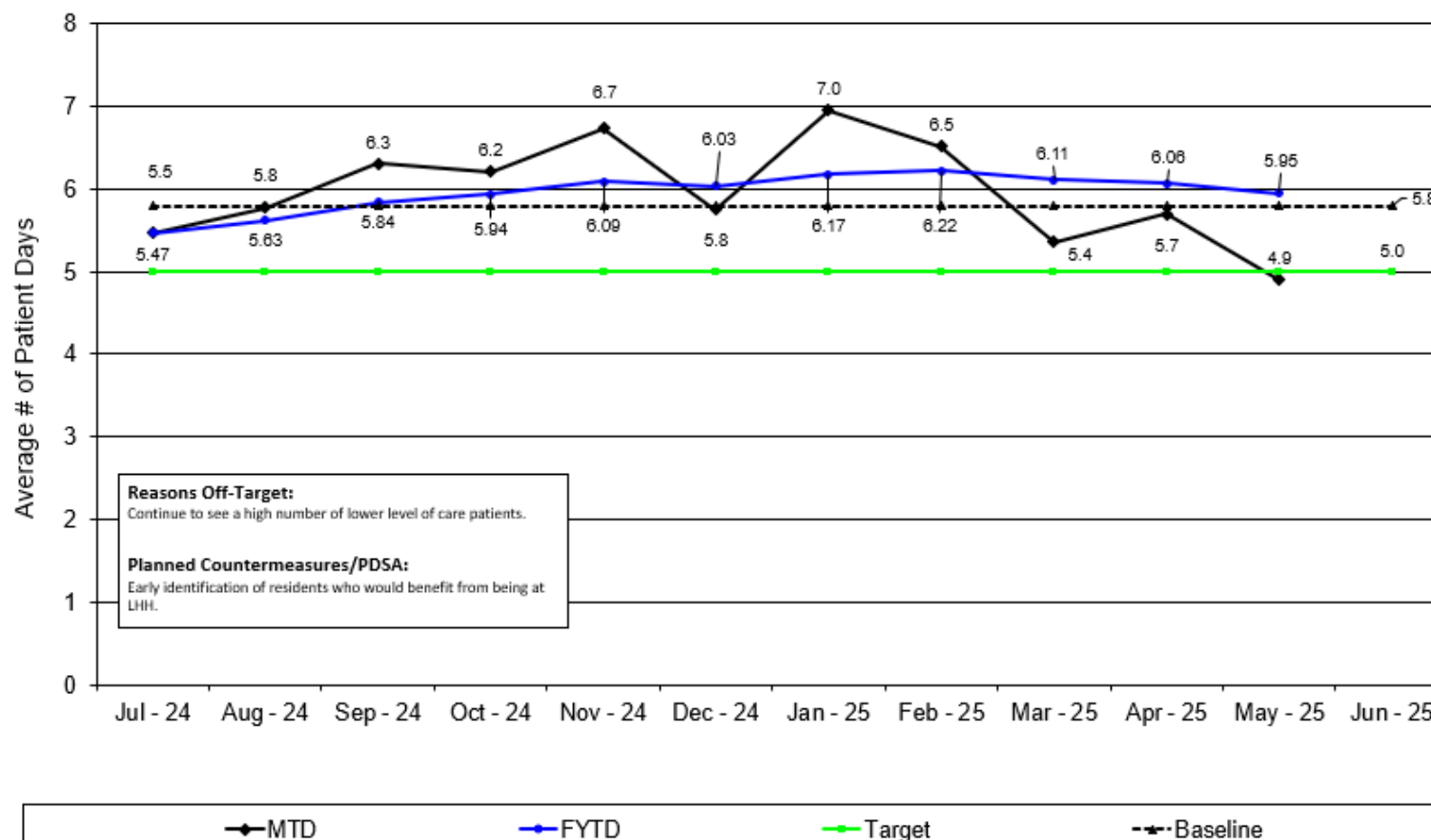


2025 FYTD: **6.0**

2025 Target: **5.0**

2024 Baseline: **5.8**

% Change From Last Year: **2.62%**



Clinically Appropriate LOS:
Average LOS of adult hospitalized medical patient (days)

Inpatient Psychiatry - % Acute Care Days

2025 Scorecard:

True North:

Owner:

Goal Statement:

Psych - % Acute Patients

Quality

Almeida

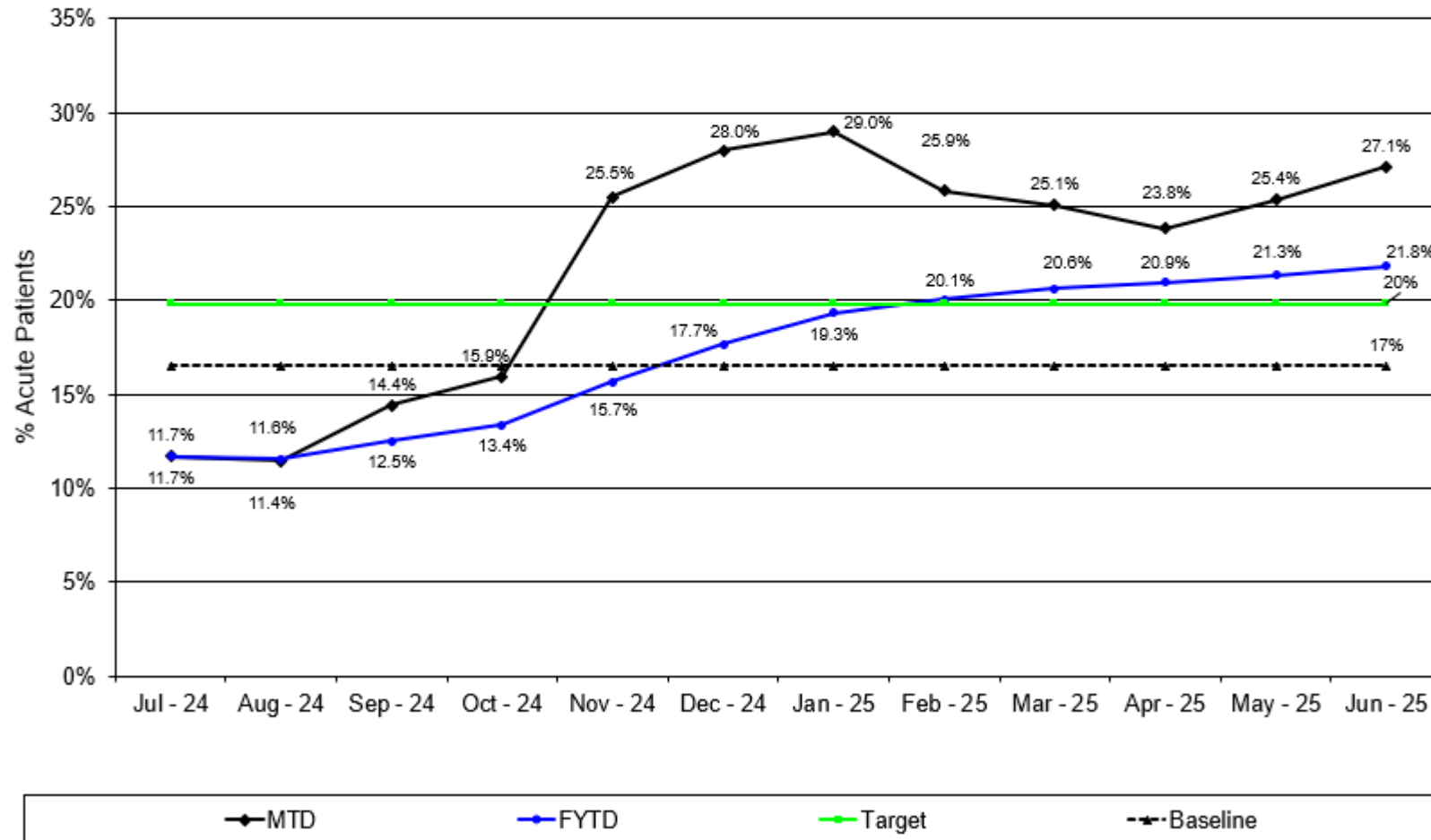
Increase % of inpatient psychiatric acute patients (% of total patient days) from 16.5% to greater than 19.8%, by Dec 2025.

2025 FYTD: 21.8%

2025 Target: 19.8%

2024 Baseline: 16.5%

% Change From Last Year: 32.26%

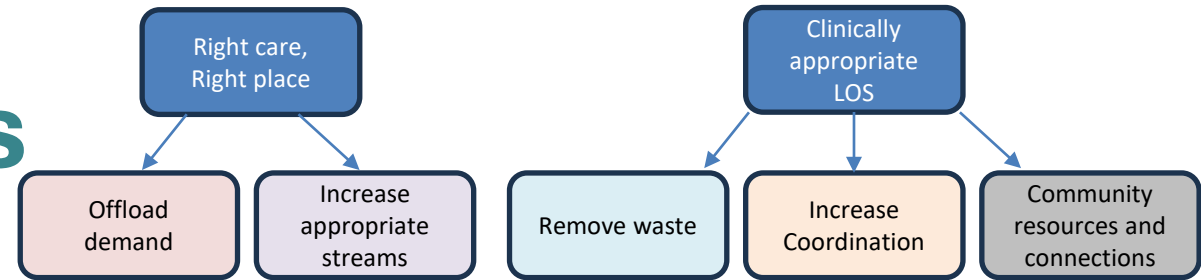


Clinically Appropriate LOS:
Inpatient psychiatric acute
patient days (% total days)

Problem Statement

Insufficient access to medical and psychiatric services and poor flow management hinder timely patient care in the right place, perpetuating health inequalities and underscoring the pressing need for a comprehensive approach to access and flow.

Countermeasures



| Strategy | Countermeasures | Owners | Date/Status |
|-------------------------|--|---|--|
| Right Care, Right Place | ED: LWBS and Ambulance Diversion | David Staconis, Chris Colwell, and ED Team | 12/31/25 / Ongoing |
| | ED: Transfers to Mission-Bernal; Dalbavancin for SSTI; Sending low acuity patients to Urgent Care; Sending appropriate patients to LHH AMU | David Staconis, Christopher Colwell, Malini Singh, Steven Straube, Amy Ou, Reanna Mourgos, Vivek Jain, Lisa Winston, Gabe Ortiz | 12/15/25 / Ongoing |
| | Decrease no-show rates, decrease out-of-network patients, and increase capacity/TNAA (Specialty Care, Peri-Op) | Shreya Patel, Merjo Roca, Dini Palaniappa, Patty Coggan | 12/31/25 / Ongoing |
| | Arthroplasty Come and Stay converting to Come and Go | Amy Ou, Shreya Patel, Becca Plevin, Reanna Mourgos, Michele, Lee, Rehab, Ted Miclau and Ortho Leaders | 12/1/25 / Ongoing |
| | Right-sized Staffing and surge staffing to meet rising demands | All areas, Gillian Otway, Gabe Ortiz | 12/31/25 / Ongoing |
| | Surge areas and creating more capacity (e.g., move discharge lounge to create extra room) | Tanvi Bhakta, Christina Bloom, David Staconis | 8/1/25 / Discharge lounge move completed |

Countermeasures

| Strategy | Countermeasures | Owners | Date/Status |
|----------------------------|---|--|---|
| Clinically appropriate LOS | Partner with LHH to streamline transfer process | Amy Ou, Reanna Mourgos, Jenee Bryant, 4A SNF Team, SFHN Team, LHH team | 12/15/25 / streamlined process, ongoing refinement |
| | Use 9th OR findings/learning to support potential 10th OR | Dini Palaniappa, Patty Coggan | 12/1/25 / Ongoing |
| | LLOC cohorting on H58, LLOC provider discomfort, defining LLOC dispo needs, explore avoidable days data; define needs | Amy Ou, Reanna Mourgos, Nick Iverson, Provider Service Leaders | 12/1/25 / Ongoing |
| | 4A-SNF reopening plan and maximizing this resource | Brianna Stein, Frank Ladra, Tanvi Bhakta, Facilities | 5/1/25 / Reopening completed, maximizing capacity ongoing |
| | Timeliness of discharges and other efficiency | Gabe Ortiz, ZSFG Service Chiefs | 12/1/25 / Ongoing |
| | Behavioral Health long term beds and other interventions | Angelica Almeida, Joan Torres, Mark Leary | 12/1/25 / Ongoing |

Recent Successes - some examples

- **Emergency Department:** LWBS rates have been halved from 5.8% to **1.8%** in comparison from January to June. We attribute this to the hiring of Nurse Practitioners and patients moving through triage faster. Peak boarding for physical health beds in ED, ICU, and PACU is down from 39 (our FY24 baseline) to 19 in the month of June of this year. We've already saved 150 hospital bed days by adopting Dalbavancin.
- **Inpatient Care Areas:** Have successfully discharged high numbers of patients, and we continue to learn the power of cohorting Lower Level of Care patients on our H58 unit.
- **Critical Care:** These teams have been working hard to meet census demands while maintaining safe and high-quality care.
- **Peri-Operative Services:** The 9th operating room block has allowed an additional **50 cases** to be cared for in the month of March alone. These teams are also working on efficient use of our procedural area, like room turnover and first case on-time starts.
- **The Redwoods (aka: 4A-SNF):** This care area re-opened on April 7th, allowing the movement of **40 + patients** and counting.
- **Specialty Care:** Goal is to maintain third next available appointments to < 15 days, an industry standard.
- **Inpatient Psychiatry:** PES is now receiving direct ambulance admissions, hence these patients are not stopping at the ED. The discharge rate has nearly doubled, improving flow from all parts of our campus, especially through PES, where boarding is down from 134 hours in September, 2024 to **57 hours** in June.
- **Department of Care Coordination:** This team works to support all of our care areas, especially with identifying plans for our most complex patients, and they continue to partner with LHH who has admitted **127 patients** from our hospital since August.

Communicating the work


One Pager – summarizing key initiatives and updates to build alignment and transparency across teams

Feedback.



What is working to improve flow?:
<https://forms.office.com/g/HA0Eh3wuzT>

June 2025

**FLOW COMMITTEE**

Departmental Key Flow Updates and Upcoming Priorities

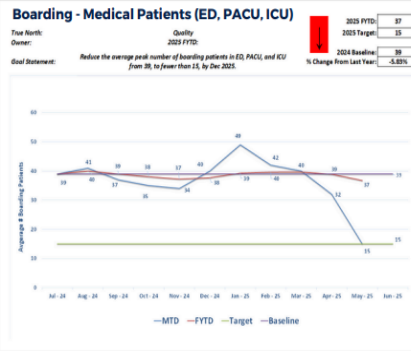
- Med/Surg: Working to optimize use of its new discharge waiting room
- DoCC: Leveraging cross-functional teams + closer integration with Cal-AIM ECM providers
- ED: Raising the bar on patient experience with consistent Net Promoter Scores in the 50s!
- Specialty Care: Building on Pediatrics' successes with MyChart sign-ups to boost self-scheduling
- Psychiatry: PES now receiving direct ambulance transportation
- Peri-Op: Enhancing utilization of 9th OR while exploring cost-saving + new revenue opportunities


Boarding Wins!

- Health-system alignment has led to recent reductions in patients boarding
- As a result, patients are able to receive the right care in the right place at the right time, evidenced by the lowest LWBS and diversion rates in a decade!
- Discharges to the Redwoods 4A and LHH, improvement efforts across several ZSFG units, and seasonal variation all contribute to this trend.

Boarding - Medical Patients (ED, PACU, ICU)

True North: 2025 FYTD
Owner: 2025 FYTD
Goal Statement: Reduce the average peak number of boarding patients in ED, PACU, and ICU from 38 to fewer than 15 by Dec 2025
2025 FYTD: 37
2025 Target: 15
2024 Baseline: 39
% Change from Last Year: -5.85%






What is working to improve flow?:
<https://forms.office.com/g/HA0Eh3wuzT>

| Metric Updates | | | |
|--|---|---|--|
| 15 | 44.6 | 5.7 | 25.4% |
| Boarding Patients (ED, PACU, ICU) 05/2025 | Boarding Time (hr) (PES Admit LOS) 05/2025 | Length Of Stay (day) (Adult Inpatient) 05/2025 | % Acute Patients (Psychiatry) 05/2025 |
| Baseline 39 pts Goal ≤15 pts | Baseline 72 hr Goal <58 hr | Baseline 6.1 days Goal ≤5 days | Baseline 16.5% Goal ≥19.8% |

The Flow Committee: Chaired by Chief Medical Officer Gabe Ortiz, MD, PhD and Chief Nursing Officer, Gillian Otway, RN, MSN is a multidisciplinary group focused on synergizing access and flow across the ZSFG campus. More [here](#).

 ZSFG KPO
Kaiser Permanente

Thank you!

