



ZUCKERBERG
SAN FRANCISCO GENERAL
Hospital and Trauma Center

ZSFG Strategic Planning & Deployment

April 2026



San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



San Francisco
Department of Public Health

ZSFG Strategic Planning

- High level review of our 2025 Hoshin
- Present updated Strategic Initiatives and annual Key Performance Indicators (KPI)
- Next steps



Terminology

- **Hoshin** – “Policy deployment” a method of strategic planning in which strategic goals are established, communicated, and put to action
- **Incubator** – tool to support strategic A3 development, ensure resources and completion of milestones, prior to deployment
- **Flow** – a continuous stream of work, one by one, non-stop
- **Key Performance Indicator (KPI)** – a metric used to measure success of strategic implementation (12-18 months)
- **True North Outcomes** – 3-5 year metrics that help us understand if we are achieving our True North
- **Catchball** – Structured sharing and conversation to support understanding, feedback and alignment
- **Gemba** – “where the work is done”

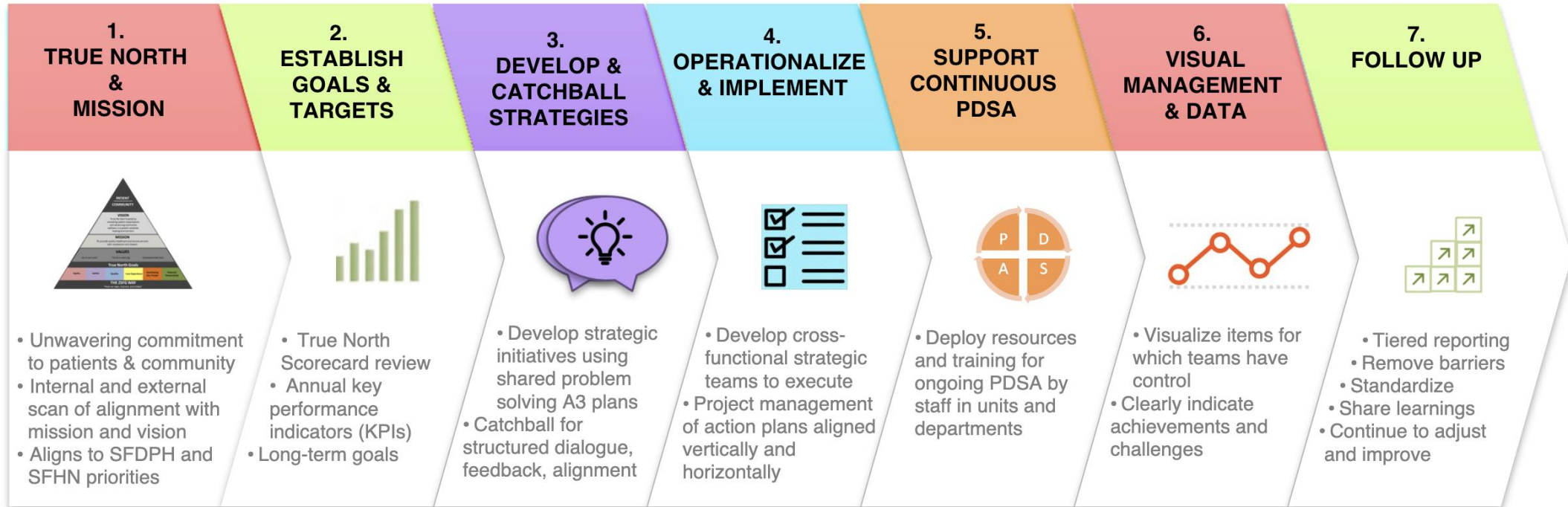
Recent Example – Strategic Outcomes

Dynamic hoshin led to updates of flow and revenue strategies, and focused attention on re-establishing a patient experience strategy.

Recent strategy-related successes include:

- **Med Surg** – LLOC days reduced by 27% since March 2025 (absolute drop 481 days)
- **ZSFG SNF** – Doubled average daily census from 12 in May 2025 to 24 in March 2026
- **Inpatient Psychiatry** – Rolling 12 month % acute psych days is at an all time high, 25% in March 2026 from 16.6% March 2024
- **Psychiatric Emergency** – Rolling 12 month boarding LOS fell 37% (86 to 54 hours) from Sept 2024 to March 2026
- **Emergency Department** – LWBS < 2% for 12 consecutive months; diversion down to 20-22% March 2026
- **Department of Care Coordination** – revamping the discharge planning process for timely patient discharges
- **Hospital Revenue** – Rolling 12 month for hospital billing denials rate and accounts receivable is the lowest it has ever been at 15.5% and 58.7 days respectively in March 2026
- **Patient Safety** – new Epic sepsis care build go-live mid April anticipated to improve documentation and compliance
- **Equity** – continued increase in departments driving equity, up 23% since March 2025 to 83% in March 2026
- **Data accessibility** – Project Phoenix go-live; validated dashboards provide single source of truth for operational leaders to monitor and track performance data
- **Operationalizing strategies** – leverage KPO Fellowship to resource and drive strategically aligned improvement projects; successful pilot of MD|RN dyad model

ZSFG Strategic Deployment Cycle



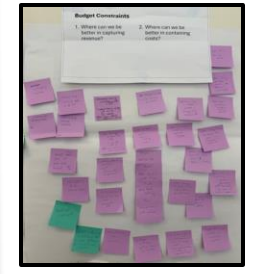
ZSFG Strategic Deployment Cycle – Scan



Scan - Input from:

- DPH/SFHN Priorities
- Patient & Staff Voice
- ZSFG-Specific SWOT Analysis
- True North Scorecard
- Strategic Teams
- Executive Leadership Weekly Meetings
- Expanded Executive Meetings

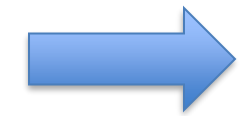
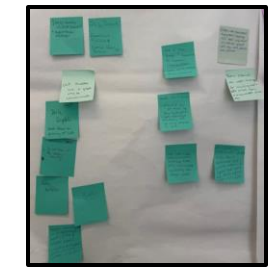
Budget



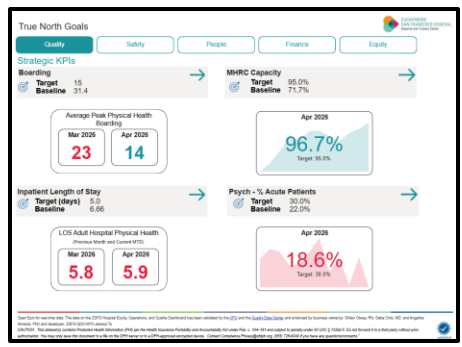
Strategic KPIs



Communication



A3-Intelligence



True North Goals Dashboard



Scan - Executive Team



Scan - Strategic Team & Expanded Executive Team



Overlap of DPH & SFHN Priorities



SFHN STRATEGIC IMPERATIVES			
	Accountability and Data	Population Health	Financial Sustainability
DEPARTMENT OVERALL PRIORITIES	Reducing health disparities		
	Being the best health care delivery system		
	Addressing behavioral health and homelessness		

ZSFG Strategic Deployment Cycle – Plan

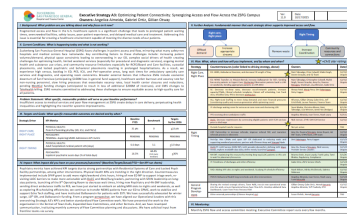


Plan – What to do:

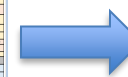
- Catchball revised A3s & KPIs
- Agreement on Strategic Plan
- Define 30, 60, 90 day goals
- Identify ways to align strategic initiatives within departments, PIPS, and KPO Fellowship



Hoshin



A3 + KPIs



30, 60, 90 Day Goals



Alignment

2026 - 5 True North Goals, 12 KPIs

True North Goals / Strategy	Key Performance Indicators (KPI)	Baseline CY 2025	Target December 2026
Equity	Departments Driving Equity Rate	70%	65%
Safety – Patient Safety	Sepsis Bundle Compliance (SEP-1)	42%	≥60%
	Percentage of Depts reporting to PIPS with ≥1 driver related to CMS Star Rating or Strategic KPIs *	TBD	50%
	Medication for Opioid Use Disorder (MOUD) Orders	19	≥22
Quality – Flow and Access	Adult Hospitalized – Operational Physical Health Length of Stay (Inpatient & Observation)	6.3	≤5
	Psychiatry – % Acute Inpatient Days	25%	≥30%
	Mental Health Rehab Center % Occupancy*	80%	≥95%
	Peak Boarding Physical Health Patients (ED, PACU, ICU)	29	≤15.0
Developing Our People – Workplace Safety	Hospital Wide Recordable Incidence Rate	15.4	≤12.2
Financial Stewardship – Rev Cycle	Accounts Receivable Days	64.2	≤63.0
	Gross Collection Ratio*	12.4%	≥13%
	Denial Rate - Hospital Billing	15.8%	≤15.4%

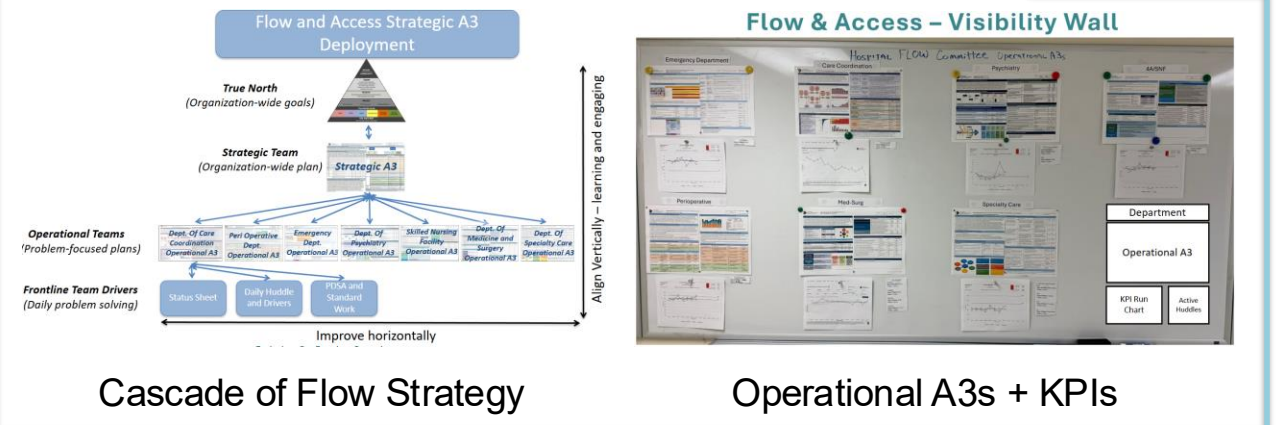
*New 2026 KPI

ZSFG Strategic Deployment Cycle – Do



Do – How to do:

- Develop cross-functional strategic teams
- Initiate and develop operational teams, with operational A3s
- Setup and manage project plans for strategic teams
- Begin tracking and visualizing KPIs monthly
- Executive Gemba Rounds to see/learn from those implementing



Next steps

1. **Draft** – Patient Experience Strategy A3 and catchball with ZSFG Executive Committee
2. **Assess improvement capabilities** – current state assessment of daily management system to help align teams on strategic goals, enable structured problem solving, and to improve hospital wide strategic priorities
3. **KPO Fellowship** – recruiting and aligning FY27 fellows to strategic priorities

Title: Every Patient, Every Time: Improving Care Experience by Centering Patient Voice
 Owner: Justin Dauterman, Marlene Martin

