ZUCKERBERG
SAN FRANCISCO GENERAL
Hospital and Trauma Center

Patient Safety Strategy Update

Joint Conference Committee of the
San Francisco Health Commission
Monday, July 27, 2026

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SF HEALTH NETWORK
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

San Francisco Department
of Public Health

Objectives

Define Patient Safety

Review Current Key Performance Indicators

Provide an update on our True North Vision and Strategic Planning for Patient Safety Initiatives

What Is Patient Safety?

"The freedom from accidental or preventable injuries produced by medical care." **Source: IOM & AHRQ**

"A discipline in the health care sector that applies safety science methods toward the goal of achieving a trustworthy system of health care delivery.“ **Source: IOM & AHRQ**

Current literature suggests that adverse events occur in nearly one in four inpatient admissions and approximately one fourth of the events were preventable (NEJM, 2023).

Overview

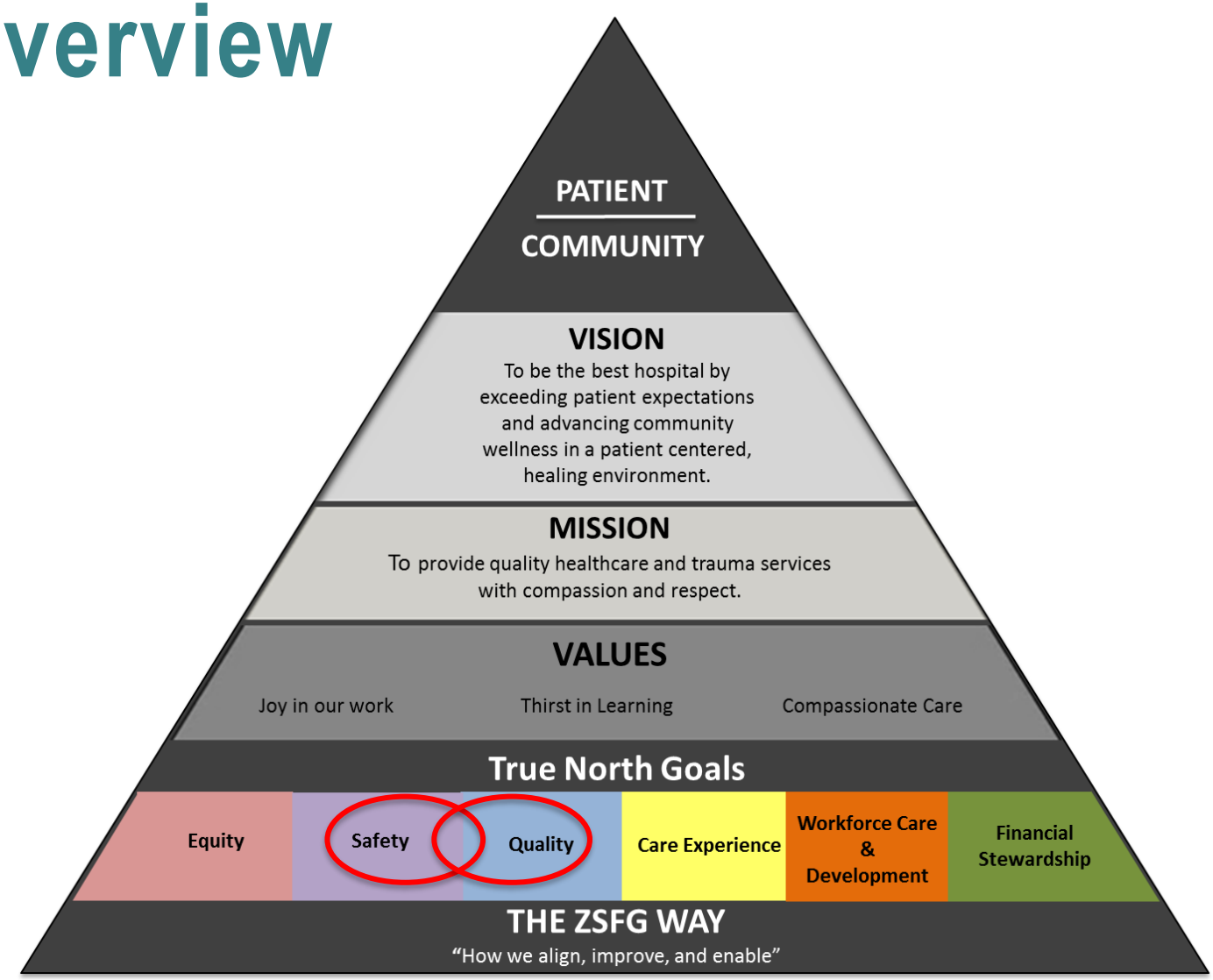


Image: ZSFG True North

The Team(s)


QM
Clinical & PI Teams
KPO
Patient Safety
Nurse Educators (& CNS)
Infection Control
Informatics
Fall Prevention Teams

SEPSIS (SEP-1)

Off Target

Sepsis Bundle Compliance

Target 59%
Baseline 38.2%

SEP-1*
(Sample Compliance Rate)

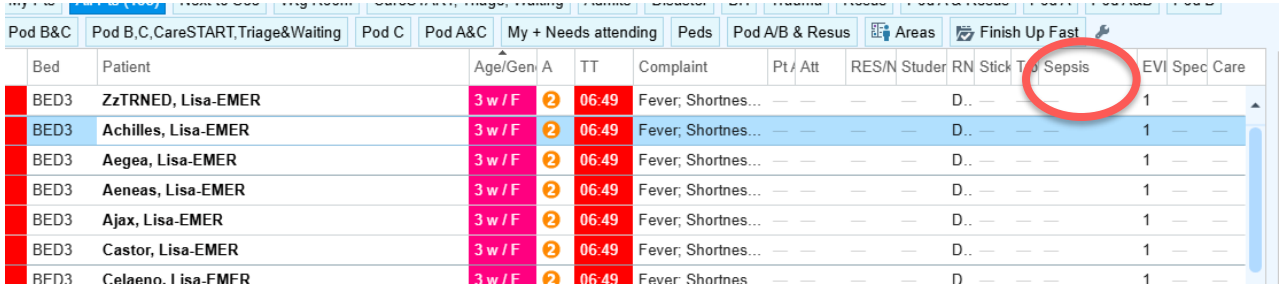
Last 12 Months	Apr 2026
32.9%	33.3%

Go live of Sepsis Pathway – 4/15/26

Only one case following go-live was included in sample

SEPSIS (SEP-1)

Highlights from *Sepsis Pathway Go Live: 4/15/2026*



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SEPSIS (SEP-1)

Highlights from *Sepsis Pathway Since Go Live*

01

ORDERSET USED >350 TIMES (97% ED)

02

~ 80% OF ICD-10 CODED CASES USED THE PATHWAY!

03

ABSTRACTOR TOOL AND PREDICTIVE MODEL BEING STUDIED

SEPSIS (SEP-1)


ACTIVATE THE
SEPSIS PATHWAY
Interprofessional
Collaboration Award
ZSFG Multidisci ary Sepsis Task Force

MOUD

Off Target

Unique Patient Discharged with Buprenorphine

Target 22
Baseline 18.50

Total Unique Patients

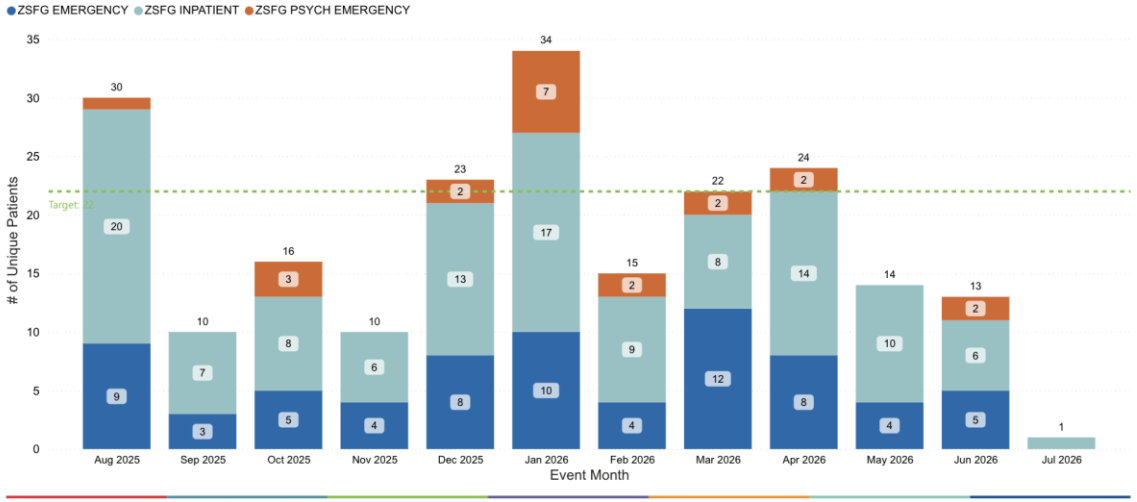
Last 12 Months	June 2026
15.7	13

Monthly Unique Patients Discharged with Buprenorphine (IP, ED, PES)
*Medications for Opioid Use Disorder (MOUD)

ZUCKERBERG SAN FRANCISCO GENERAL Hospital and Trauma Center

Hospital Area: All | RN Station: All | Hospital Service: All | Start of Month: Last 12 Months

7/9/2025 - 7/8/2026



MOUD

Highlights from ZSFG Campus Team: ACT, ED, PES, BRIDGE

01

ED ADMINISTERED 26 LAIs CY2026 TO DATE VS. 12 IN CY2025

02

OVER 80% OF PES PATIENTS ARE SCREENED FOR OPOID USE

03

ED SUN CONSULTS JUMPED FROM 28 (DEC'25) to 81 (APR'26)

04

MOUD SMARTSET FOR ED AND PES TO BE LAUNCHED 2026!

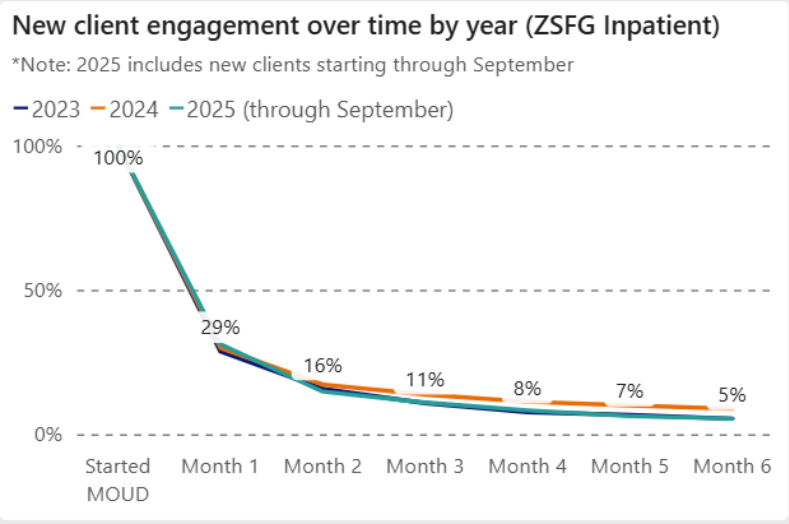
05

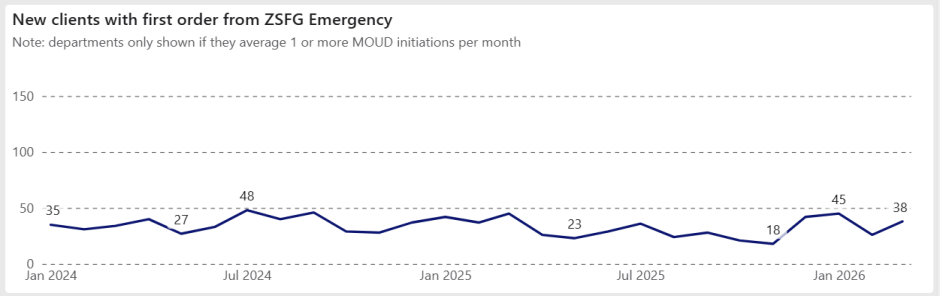
9 new ACT nurse liaisons trained from M/S, ED, PES

MOUD

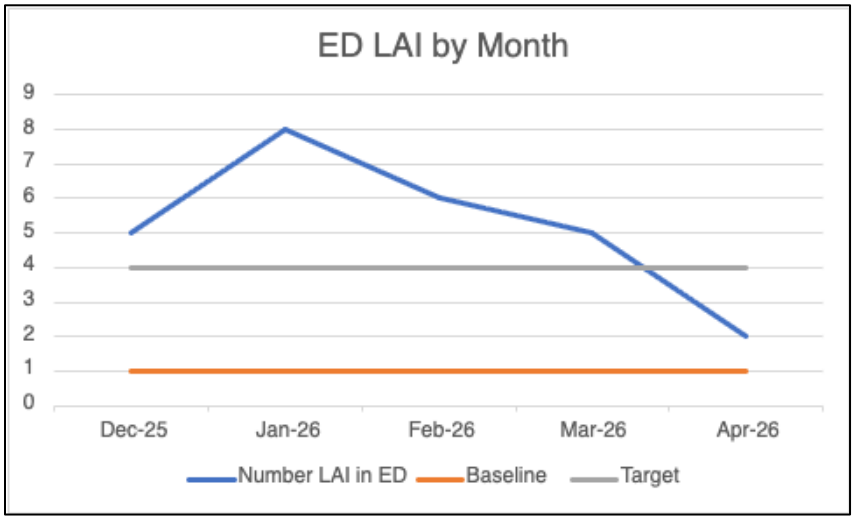
Additional Highlights from ZSFG Campus Team: ACT, ED, PES, BRIDGE

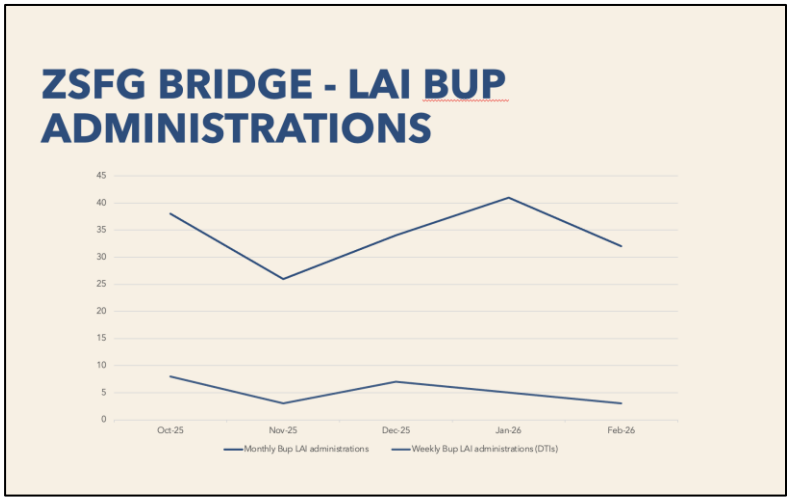
ZSFG CAMPUS MOUD DASHBOARD IN PROGRESS TO ALIGN WITH ”Breaking the Cycle” Dashboards

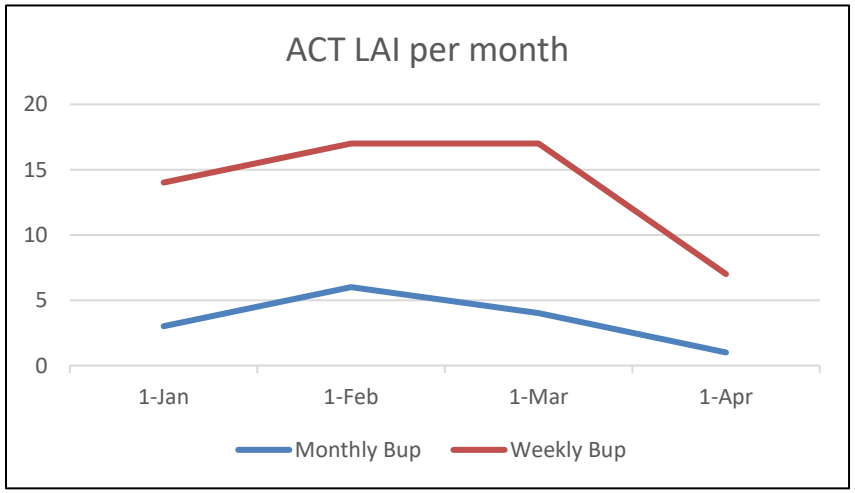




MOUD – Long-Acting Injectables (LAI)







- 80% of ED LAI have followed up in Bridge Clinic to date!
- All Bridge OUD patients are screened for LAI eligibility
- Treatment modality chosen based on shared decision-making and patient preferences
- Patients are often transitioned off of LAI after a period of time

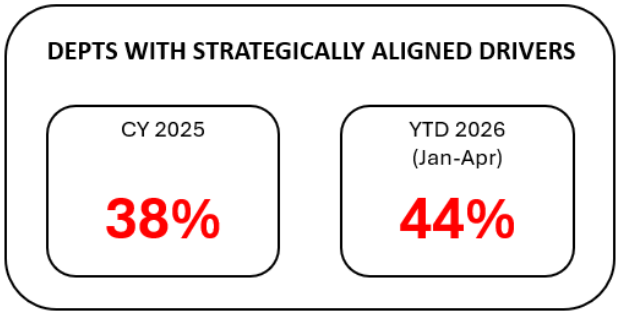
PIPS Alignment with True North

New KPI

% departments reporting to PIPS with 1 or more drivers aligned with ZSFG Strategic KPI or CMS STAR RATING Metric

% depts reporting to PIPS with strategically aligned drivers

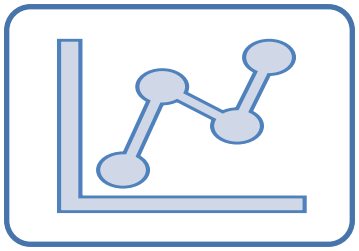
Target ≥50%



PIPS Alignment with True North (cont.)

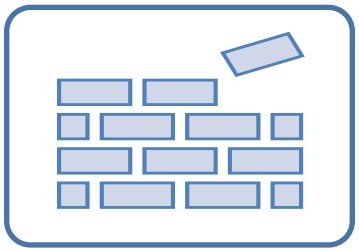
- **Working data definition**
  - **Denominator**: The total number of unique PIPS-reporting entities (departments, committees, subcommittees) that have a scorecard with driver metrics in their PIPS report.
  - **Numerator**: Number of departments that have 1 or more active driver metrics (watch metrics are excluded) on their PIPS scorecard that either are or directly drive the current year's hospital True North Strategic KPIs or CMS Star Rating measures.
- **Implementation plan**
  - Finalize data definition and begin tracking on Project Phoenix by 8/1/26
  - Leverage pre-PIPS coaching sessions to find opportunities to improve alignment
  - New monthly strategy update at PIPS to share information

Transforming Patient Safety Data Into Actionable Insights



Improved visibility of patient safety performance though interactive dashboards with unit level drill down

- Ex. Falls and Infection Control Metrics



Strengthened alignment / comparability of metrics through DPH-wide OUD definitions

Demonstrated feasibly of enhanced patient event analytics through PowerBI visualization of SAFE data

Next Steps for Hoshin (Strategic Planning)

- Environmental Scan
  - World Café Exercise Review In Progress
- Frontline Feedback & Self Assessment
  - AHRQ Culture of Safety Survey
  - IHI National Patient Safety Action Plan
  - Lean Daily Management System (team huddles)
- CMS Star, TQIP, and other High-impact reported metrics

Thank you!

- Questions?