



San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

Laguna Honda Kaizen Promotion Office

Continuously improving how we align, improve, and enable

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KPO | Outline



Who We Are & Organizational Journey



Align | Strategic Priorities



Improve | Shared Problem Solving



Enable | Pilot Neighborhood



Kaizen = Continuous Improvement

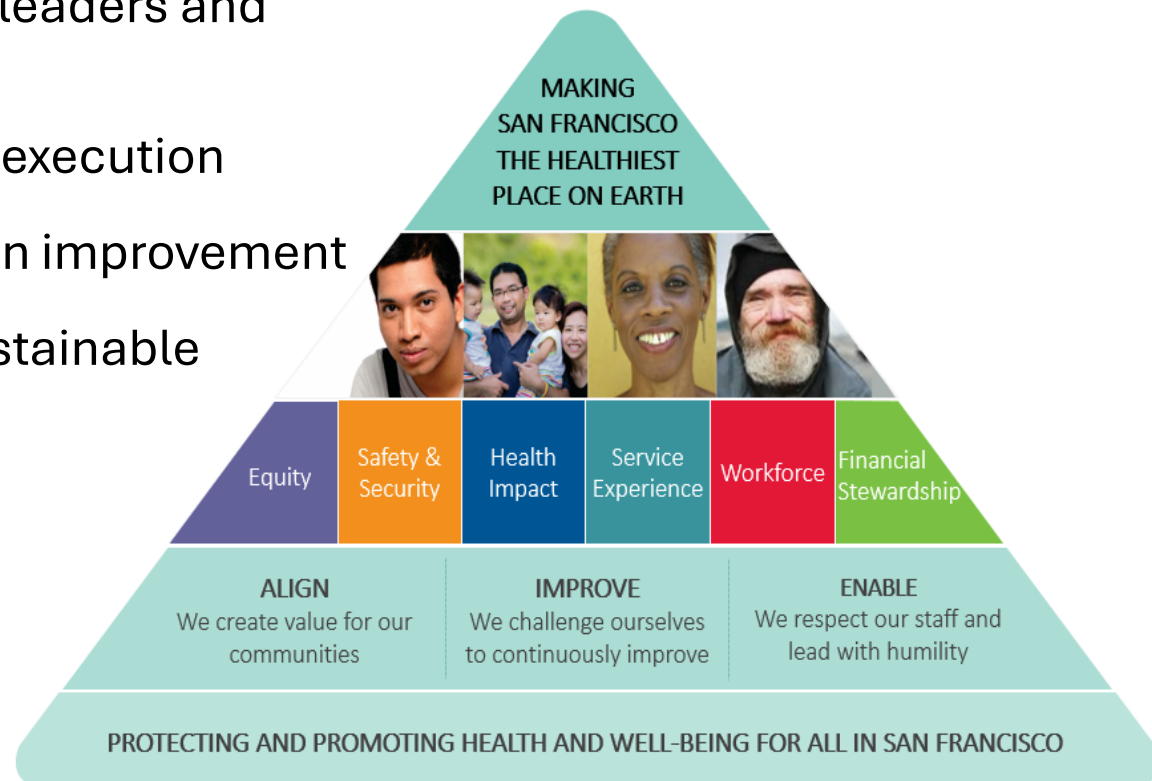


Lean Alignment Across DPH Divisions

Who We Are: The LHH Kaizen Promotion Office empowers Laguna Honda teams as critical thinkers & problem solvers, driving continuous improvement and organizational transformation.

What We Do: We support LHH leaders and teams through:

- Guide strategic planning and execution
- Lead and facilitate data-driven improvement
- Build internal capacity for sustainable change
- Coach & train staff in robust improvement methods

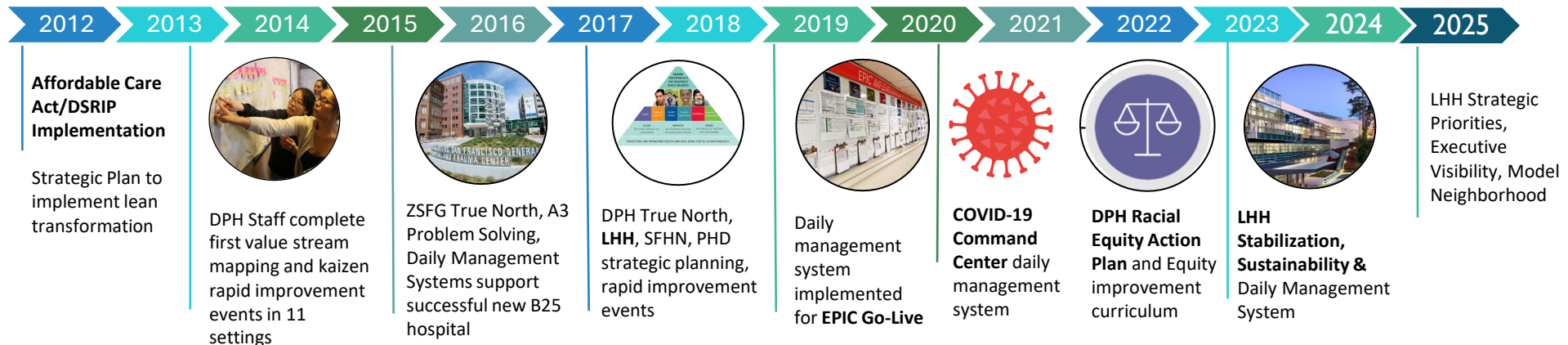


Organizational Journey | Challenges & Successes



Rooted in our mission to the community and our staff

- **Problem Statement:** As SFDPH, we recognize the problem and opportunity to improve organizational alignment, drive robust continuous improvement, and foster a culture of respect for staff and patients
- **Defining Lean in health care:** A systematic approach to improve quality, efficiency and experience by empowering staff at all levels to solve problems, eliminate waste, and deliver value to clients and patients.
- DPH has adapted and evolved Lean tools, systems, behaviors, and principles into our own approach – tackling significant challenges and opportunities over the years!



Key Terms

- Value Stream Maps & Kaizens: Team-based activities to understand and improve
- Daily Management Systems: Front-line huddles, coaching, improvement tools
- True North: Organizational goals to create long-term clarity and purpose
- Hoshin Kanri: Strategic planning and execution methodology
- A3 Thinking: Problem solving approach and tool

Align | Strategic Priorities



Executive Visibility Board

- The LHH Executive team uses the Visibility Board to highlight priority challenges, identify improvement opportunities, and track progress on initiatives aligned with the True North.

Key Results:

- ✓ Shifted from “everything at once” during recertification to a targeted, executive-level prioritization approach.
- ✓ Consolidated 25 projects into a focused set of strategic and tactical priorities
- ✓ Established sustainable process to prioritize, de-prioritize, sunset initiatives
- ✓ Implemented structured, data-driven weekly reporting for LHH Executive Sponsors to LHH and SF Health Network Leadership
- ✓ After 12 months: Nine active initiatives; Six initiatives completed or integrated into ongoing operations; One initiative added; All metrics trending positively



Align | LHH Strategic Priorities

True North	Initiative Name/ Strategic A3	Operational/ Problem Solving A3 Name	Exec Sponsor	Metrics
Quality & Safety	Care Plans: Foundation of Resident Care	Care Plans: foundation of resident care	M Antoc	Care plan quality & timeliness
	Aspiration Prevention	Aspiration prevention	M Antoc	Aspiration protocols are followed
	Preventing Falls	Preventing falls	N Zahir	Zero Falls with major injury
	Expired medications	Expired medications	E Ocampo	Zero administration of expired medications
Workforce	Improving Education Compliance	Improving education compliance for learner Group A	J Carton-Wade	Completion of required staff education
	Health Screening	Employee health screening	H Chen	Completion of required employee annual health screening
	Everyone Works (Nursing Workforce)	0) Everyone works	D Sidhu	All nursing shifts fully staffed
		1) Scheduling for success	D Sidhu	Per Diem schedules align with policy
		2) Supporting the team	D Sidhu	Non-Compliant warnings
		3) Returning to work	D Sidhu	Lost Days and leaves monitored and reduced
		4) Filling the gap	D Sidhu	FTEs recruited
		5) Safe reduction of coaches	D Sidhu	≤10 residents requiring coaches
	6) Safe reduction of escorts /visits	D Sidhu	Appropriate use of escorts for medical appointment visits	
Financial Stewardship	Achieving Full Occupancy	0) Achieving full occupancy	D Sidhu	≥95% occupancy with full census at 636
		1) Screening referrals	A Lam	95% of referrals < 1 day to decision
Equity	Organizational Transformation	Building an inclusive culture of success	A Fishman	Staff engagement and satisfaction

Improve | Medication Simplification



Innovation through Plan-Do-Study-Act (PDSA)

The Challenge



Aligning Strategic Goals

Strategic Priority: Med Simplification to improve Quality, Safety, & Experience:

- Reduce medications per patient by 7%
- Reduce nurse med administration per patient by 15%

The Improvement

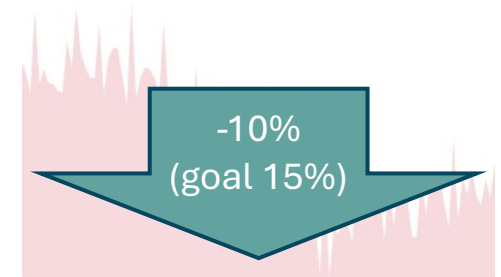


Innovation through PDSA

LHH interdisciplinary Medication Simplification Team implemented a series of PDSAs since May 2025:

- 1) Physician review of med lists
- 2) Pharmacy simplification of top 50 patients
- 3) Integrated into pharmacy drug review
- 4) Frontline nurse-driven review (now implemented hospital wide)

The Impact



Resilience and Empowerment

- Hospital wide reduced unneeded meds/patient by 5%, and nurse medication administrations by 10%
- South 4 has found success with frontline nurse-generated ideas:
 - “We went through every patient and lopped off 50% of the unnecessary ‘lotions and potions.’ It was amazing. One particular nurse was interested and became invested...”



It was a beautiful experience of collaborative work

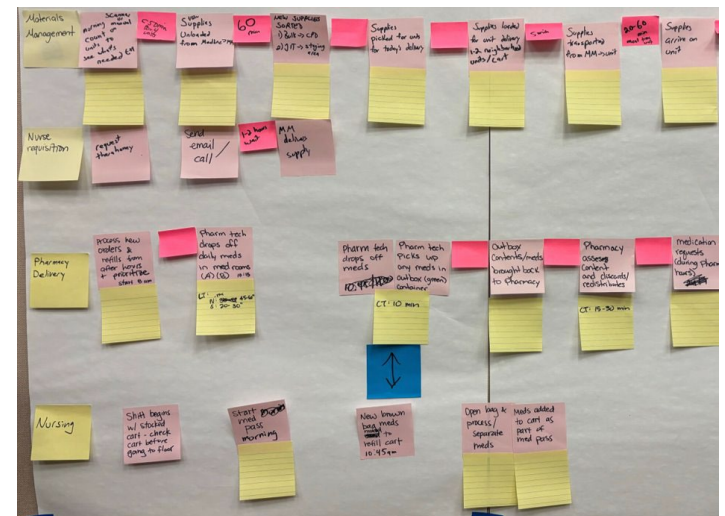
Dzovag Minassian, MD – Chief of Staff and South 4 Physician



Improve | Expired Medication

▶ Mapping the workflow & targeted interventions

- Challenge: Ensure no expired medication is administered to a resident.
- KPO led an interdisciplinary workshop to mapping how medication and supplies flow through the hospital
- Improvements:
 - ✓ Nursing Units use EHR reports to identify short dated expiration medications.
 - ✓ Prioritized high-risk areas, with special attention to refrigerated medications.
- Impact: significantly strengthened medication-management workflows, resulting in the near-elimination of expired medications found on units.



“ “ I appreciated learning other departments workflow

Workshop participant



Enable | Pilot Neighborhood



Supporting staff to lead and advance priority work

The Challenge



Organizational Culture:

This pilot creates a focused space to test new ways of strengthening care and improving the staff experience and resident care that will benefit the entire Laguna Honda community.

Interdisciplinary Collaboration:

- N3: Nurse Manager, Physicians, Charge Nurse, front line staff, hospital leadership and Union partners

The Improvement



Daily Management System

- Chartered new Neighborhood-Based Leadership Team on N3
- Developed N3 Scorecard with key initiative metrics
- Identified three unit-level priorities aligned with LHH strategic goals, along with 8–10 watch metrics
- Began implementing staff-generated ideas through PDSAs

The Impact



First 3 Months Results:

- **Staff Experience:** Implementing two staff ideas with the Care Experience Team
- **Medication Simplification:** Launching one new staff PDSA
- **Resident Appointments & Escorts:** Partnering with LHH leaders to analyze workflows, develop the A3, and implement aligned PDSAs



The different ideas from staff are great and promises good future for residents and staff.



Enable | Moving forward



Driving Change Through Leadership at All Levels

- Advance N3 Pilot Neighborhood improvements and prepare for hospital-wide scaling.
- Expand the N3 Daily Management System across all units to strengthen consistent practices and problem solving.
- Redesign Unit-Based QAPI with QM and interdisciplinary teams and align with CMS Quality Measures. Test on model neighborhood and spread hospital wide.
- Enhance LHH Executive leadership visibility and rounding with frontline teams
- Support Lean certification candidates leading Laguna-based improvement projects
- Collaborate with DPH KPOs to advance system-wide healthcare delivery excellence





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Questions?

