San Francisco Health Network 2013 – August 2024

September 17, 2024 Health Commission

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SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Overview

- Mission and vision
- Who we are and Who we serve
- Establishing the Network
- SFHN Development: Fulfilling the Original Vision for Integration and Alignment with Key Accomplishments
- Next steps



Mission and Vision

MISSION

We provide high quality health care that enables all San Franciscans to live vibrant, healthy lives.

Safety

Choice for healthcare and well-being

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Vision

To be every San Franciscan's first choice for health care and well-being.

Improve the health of the patients we serve

Quality

Care

Optimize access, operations, and cost-effectiveness

People Experience Development

Ensure excellent patient experience

Financial

Stewardship

Equity

Build a strong foundation of a healthy, engaged, and sustained workforce

We provide high quality health care that enables San Franciscans to live vibrant, healthy lives

Who We Are & Serve: Clinics and Programs Integrated Primary Care/Behavioral Health

Serving more than <u>**100,000**</u> individuals annually in the Network

primary care for adults and families

primary care for youth

primary care for adults

SPECIAL FOCUS CLINICS

Geriatric: Curry

Homeless or marginally housed: Tom Waddell Urban Health

HIV positive or at risk: PHP

Children and youth: CHPY, CHC



SF Health Network – FY 24/25 Expenditures

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	Sa	alaries & Fringe	1	Non-Personnel	Materials &		Projects &	F	acilities Maint &	S	ervices of Other	
Division		Benefits		Services	Supplies		Equipment		Debt Service		Depts	Total
San Francisco General Hospital	\$	711,993,516	\$	335,399,431	\$ 138,478,649	\$	10,587,501	\$	4,323,185	\$	72,106,156	\$ 1,272,888,438
Jail Health	\$	37,145,918	\$	2,415,043	\$ 6,011,324	\$	19,232	\$	-	\$	317,923	\$ 45,909,440
Laguna Honda Hospital	\$	260,336,987	\$	21,463,034	\$ 27,482,744	\$	9,852,459	\$	12,618,230	\$	24,687,035	\$ 356,440,489
Health Network Services	\$	160,790,825	\$	224,697,248	\$ 2,029,483	\$	10,976	\$	-	\$	4,005,599	\$ 391,534,131
Primary Care	\$	108,553,972	\$	26,531,997	\$ 5,481,793	\$	387,301	\$	-	\$	3,821,759	\$ 144,776,822
Total	\$	1,278,821,218	\$	610,506,753	\$ 179,483,993	\$	20,857,469	\$	16,941,415	\$	104,938,472	\$ 2,211,549,320
%		57.8%		27.6%	8.1%		0.9%		0.8%		4.7%	100%

Division	Total FTEs	Total Budget
San Francisco General Hospital	2986.0	\$1,272,888,438
Jail Health	158.3	\$45,909,440
Laguna Honda Hospital	1329.4	\$356,440,489
Health Network Services (Maternal Child and Adolescent Health, Health at Home, and Whole Person Integrated Care)	782.0	\$391,534,131
Primary Care	480.0	\$144,776,822
Total	5735.7	\$2,211,549,320



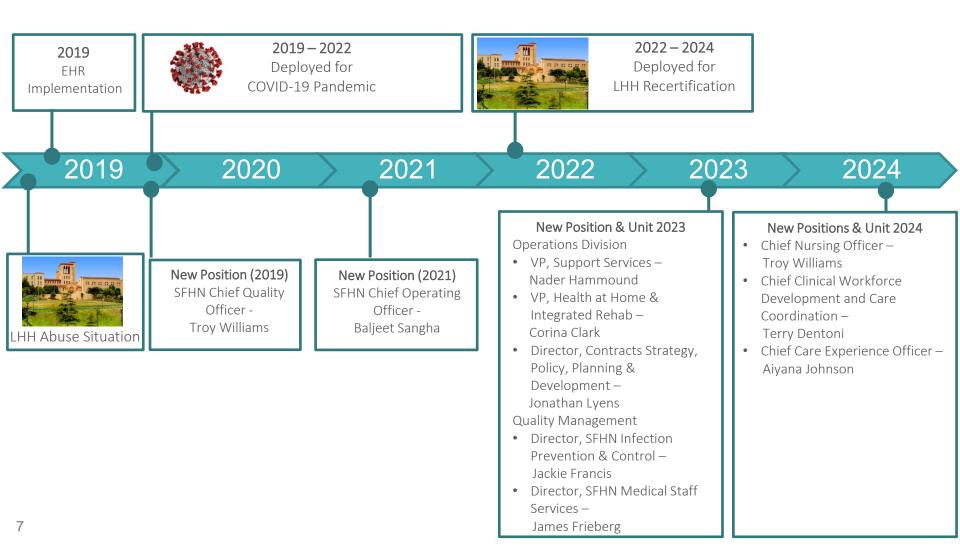
Forming the SF Health Network

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Recent Priority Efforts 2019 – 2023 (delayed many planned SFHN centralized/integration and infrastructure efforts) – Due to SFHN Leadership Deployments to Incident Commands for Covid-19 and LHH



SF Health Network - Key Accomplishments Nursing & Quality

Nursing

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- Data driven nursing registry oversight program new registry rates active & resulting in significant spending decrease along with decrease in registry use across SFHN.
 - o Partnership with Human Resources and Finance
 - o Overall nursing registry decrease of 60% RN, 47% LVN, 59% SW & 10% PCA since March. 2024
 - Nursing registry rates now aligned with industry standards
- o Developed standard Process for RN Hiring, reducing vacancy rate from 7% Jan 2024 to 0% July 2024.
 - o Partnership with Human resources twice monthly meetings
 - \circ Will take lessons learned and spread to other nursing classifications
- Assessment of Ambulatory Services nursing leadership structure (in progress) collaboration across 6 departments to assess & improve nursing structures (WPIC, JHS, PC, MCAH, HIV Services, Health at Home).
- Joined Northern California Hospital Council and Southern California Public Health System Chief Nursing Officer Collaboratives – focusing on advocacy efforts with CDPH and the BRN.

Quality

- Developed a centralized IPC program. Hired inaugural SFHN IPC Director & LHH Manger for IPC. Standardizing IPC practices to align with industry standards and best practice.
- Developed a centralized Medical Staff Services Program. Hired inaugural SFHN Medical Staff Services Director. Standardizing credentialing and privileging practices aligned industry standards and best practice.
- Cross QM collaboration Between ZSFG, LHH, & Ambulatory Services.
- o Implemented a network- wide incident reporting system Safety and Feedback Events System (SAFE)

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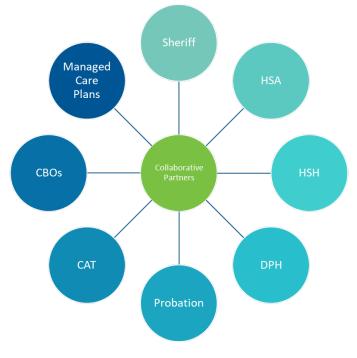
SF Health Network - Key Accomplishments Clinical Workforce Development & Care Coordination

- Leading SFHN's participation in the SF Health Plan Transition Stakeholder Task Force
 - Opportunities include working collaboratively with the other SNF's within SF to ensure we are approaching admissions and placements consistently.
- Working with SFHN Rehab leadership and LHH Medical and Nursing leadership to create enhancements for the acute rehab unit at LHH
- Creating Pathways for TBI and Acute Brain Injury Patients
 - Helping to find placement post-acute rehab for TBI/brain injured patients.
 - Developing structure to then elicit support for the program.
- SFHN formally partnering with University of San Francisco School of Nursing's Nurse Health Equities Scholars Program
 - 8 USF students per year will be selected yearly and will do all of their clinical rotations at SFHN sites with the ultimate goal of recruiting them to fill RN vacancies.
 - First cohort of NHES Scholars will be starting September 2024 at Zuckerberg SFG on unit 66 /68 Med Surg.
- Creating SFHN Clinical Pathways
 - Met with Hospital Councils CNO group to discuss pathways to clinical care in hospitals, first initiative is to review Licensed Psychiatric Tech Programs with the LVN Board.

SF Health Network - Key Accomplishments CalAIM: California Advancing and Innovating Medi-Cal

Goals:

- Implement a wholeperson care approach and address social drivers of health.
- Improve quality outcomes, reduce health disparities, and drive delivery system transformation
- Create a consistent, efficient, and seamless Medi-Cal system



Initiatives:

- Behavioral Health Delivery System Transformation
- California Children's
 Services and Foster Care
- Community Supports
- Enhanced Care
 Management (ECM)
- Justice-Involved
- Long Term Care Carve-In
- Population Health
 Management
- Providing Access and Transforming Health

Impact:

- >**\$9.4M** in revenue from Jan. '22 through July. '24
- SFHN ECM enrollment rate is **60%** compared to the 25% state average
- **1048 clients** enrolled through outreach from Jan. '22 through Apr. '24

SF Health Network - Key Accomplishments Quality Incentive Pool (QIP)

Key elements:

- DHCS-run incentive program that is part of MediCal reimbursement package
- Payment flows through health plans to the entity based on virtually nationally vetted metrics
- Total available funds depend on number of Medi-Cal enrollees (43K SFHP [85%], 8K Anthem BC [15%])

New focus:

- Largely MediCal-Managed Care (MCMC) patients, including Enrolled by Not Yet Seen (ENYS)
- Robust data sharing with health plans now required
- More measures incentivize preventive care, maternal-child health, substance use, and mental health disorders

Performance in 2023 (PY6)

	8/9 met or exceeded target
	30.5 / 31 met or exceeded target
<u>Results</u>	<u>100%</u> of QIP funds expected for ~\$65 Million

SF Health Network - Key Accomplishments Pharmacy

- Medication Oversight and technology: Omnicell upgrades
- Contract: Secured key contracts to ensure medication access for our patients
 - McKesson
 - Curascript
 - Vizient GPO extension
- **Covid Task Force:** Cost-effective transition to commercial/private supply of vaccine

CORE/SUD related

- Naloxone Expansion
- Legislative Leadership
- Clinical branch of BEAM (Bring Expanded Access to MOUD)
- LHH: Facilitated substantial and ongoing improvement

SF Health Network - Key Accomplishments Support Services

- Biomedical Engineering (Medical Equipment Management):
 - Comprehensive Biomedical Engineering support program for DPH (SFHN + PHD)
 - Ambulatory Care & PHD (Lab & Clinics) support
 - Standard of practice across SFDPH

• Supply Chain:

- Unified platform for all Supply Chain across SFDPH
- Competition and data analysis-based savings (~\$1M annually)
- Value Analysis Committee (VAC) for LHH
- Supported PHEPR planning

Capital Equipment:

- Digital request submission process via ServiceNow
- Highest CE budget approval in recent years for DPH (**>\$10M**)
- Improved workflow and related processes

SF Health Network - Key Accomplishments Care Experience

- Development of the SFHN Care Experience Unit:
 - Established the SFHN Care Experience Scope and Infrastructure
 - Designed to standardize experiences across the care continuum
- Creation of an Inclusive Care Experience Structure:
 - Six key sections
 - Dedicated to providing optimal experiences for both patients and staff
- Centralization of Support Functions:
 - Centralized essential Care Experience support services
 - Enhances the consistency and quality of services
- Alignment of Senior Leadership Scopes:
 - Realigned for improved coordination
 - Better allocation of resources support

SF Health Network - Key Accomplishments Health at Home & Rehabilitation Services

Health at Home:

- Increased to a 3-star rating from 1.5/2.0
- Inaugural Annual Interactive Staff Retreat
- Health at Home HIV epidemic initiative
- Grant for expansion (HIV Health Services Office)

Rehabilitation Services:

- **ZSFG**
 - Orthopedic Fast Track Discharge Project
 - Outpatient Physical Therapy
- \circ LHH
 - Restraint Free Journey Initiative
 - Falls Prevention Initiatives
 - New Admissions (SNF and Acute Rehab)
- SFHN
 - Integration of Services
 - Value Based care for Rehabilitation Services
 - Mentorship program for new hires

SF Health Network - Key Accomplishments Contracts Strategy, Policy, Planning, & Development

Contracts Strategy:

- Enhanced organization, cost controls, timelines and predictability
- Registry contracts, Interpreter services, & Infusion pumps

Contracts Policy:

- City procurement policy updates
- Root cause analysis of systematic contract challenges
- Developed potential policy and legislative countermeasures

Contracts Planning:

- SF Civil Service Commission and labor relations
- Increased communication to enhance predictability and monitoring
- Facilitated DPH-wide planning and communication of new and existing solicitations

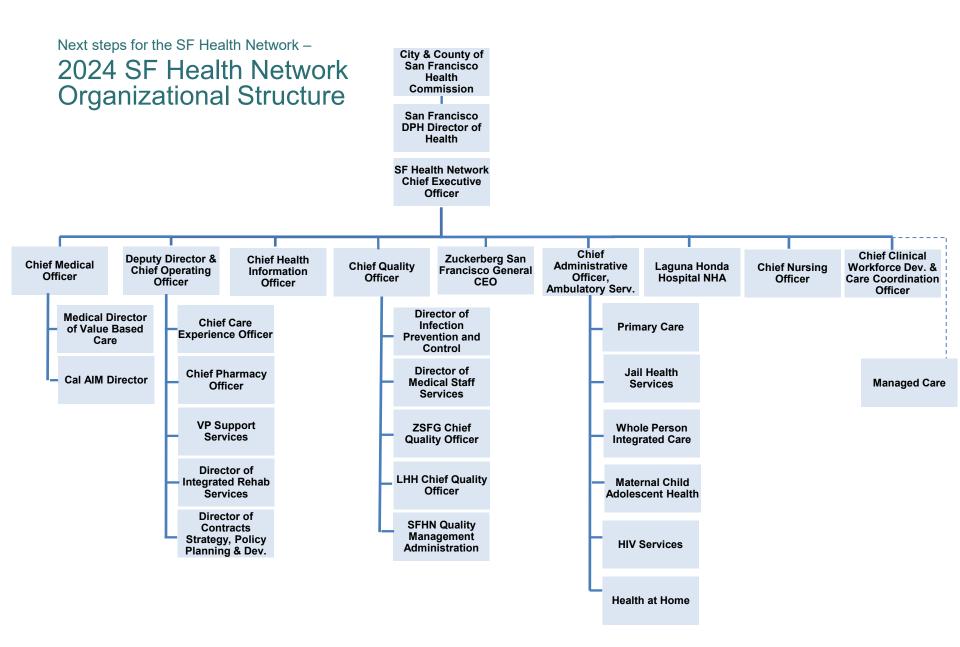
Contracts Development:

- New internal SFHN processes to streamline interdisciplinary workflows
- Dedicated contract monitoring meetings
- Led issue resolution and certification for several priority contracts

Next steps for the SF Health Network

Key initiatives:

- Strengthening our centralized integrated leadership infrastructure and functions
- Continuing Quality Incentive Pools (QIP)
- Strategic planning for the short, near, and long-term in alignment with DPH Hoshin Cascade Implementation



Next steps for the SF Health Network -

Continuing Quality Incentive Pools (QIP)

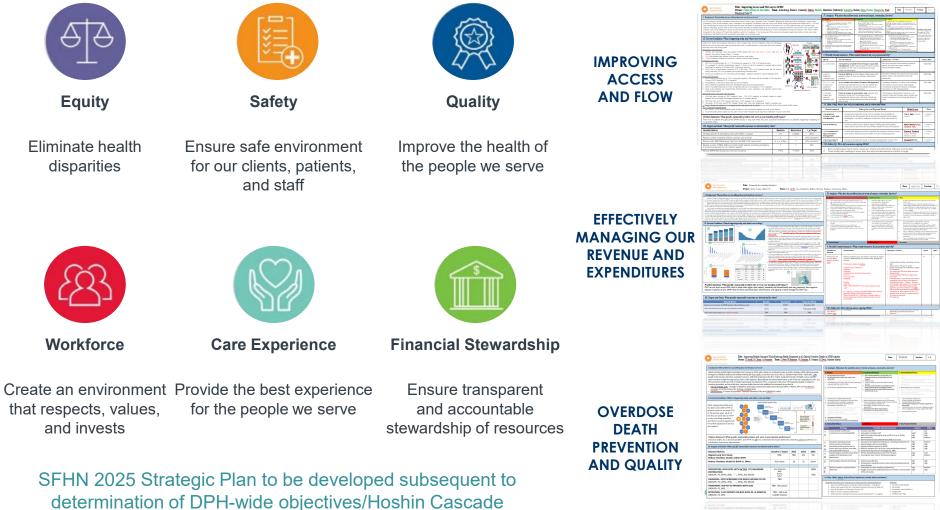
- Continuing the QIP program for Year 7 (CY2024)
- Required to report 20 priority metrics
- Projected to yield another ~\$65 million

Example Metrics								
Priority Metrics	Elective Metrics							
Immunizations for Adolescents	Asthma Medication Ratio							
Childhood Immunization Status	Controlling High Blood Pressure							
Prenatal and Postpartum Care	Breast Cancer Screening							
Developmental Screening	Colorectal Cancer Screening							
Well-Child Visits	Comprehensive Diabetes Care							



Next steps for the SF Health Network -

Strategic Planning for the Short, Near, and Long-term





Questions



Background Slides (For Reference Only)

Forming the SF Health Network

Driven by the reforms of the Affordable Care Act (ACA):

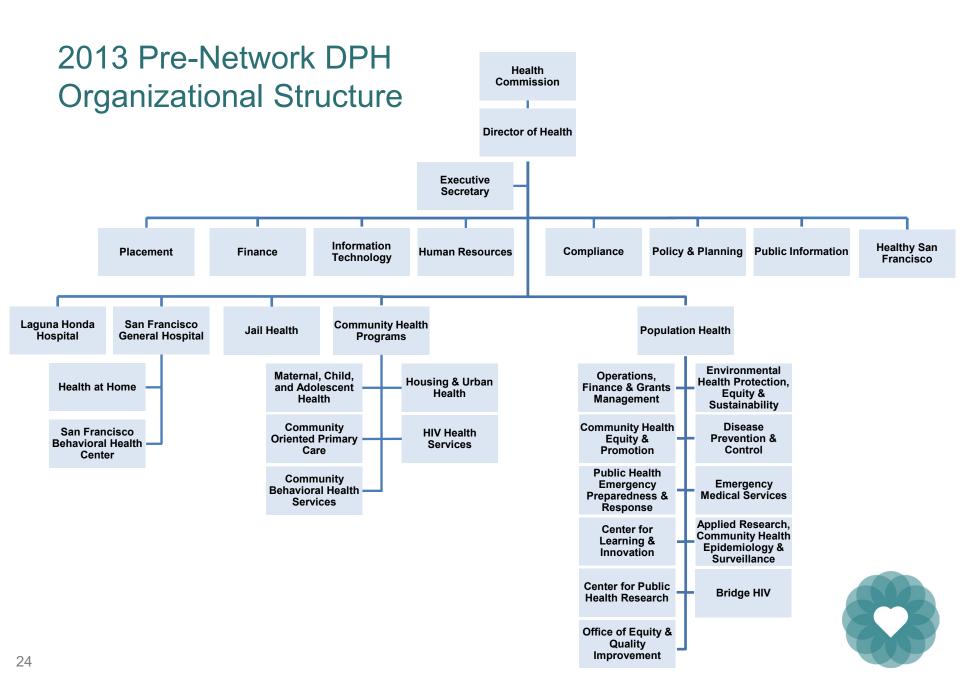
- Required individuals to have health insurance or MediCal coverage
- Expanded the number of people who qualify for MediCal
- Insurance available to nearly everyone else through Covered California

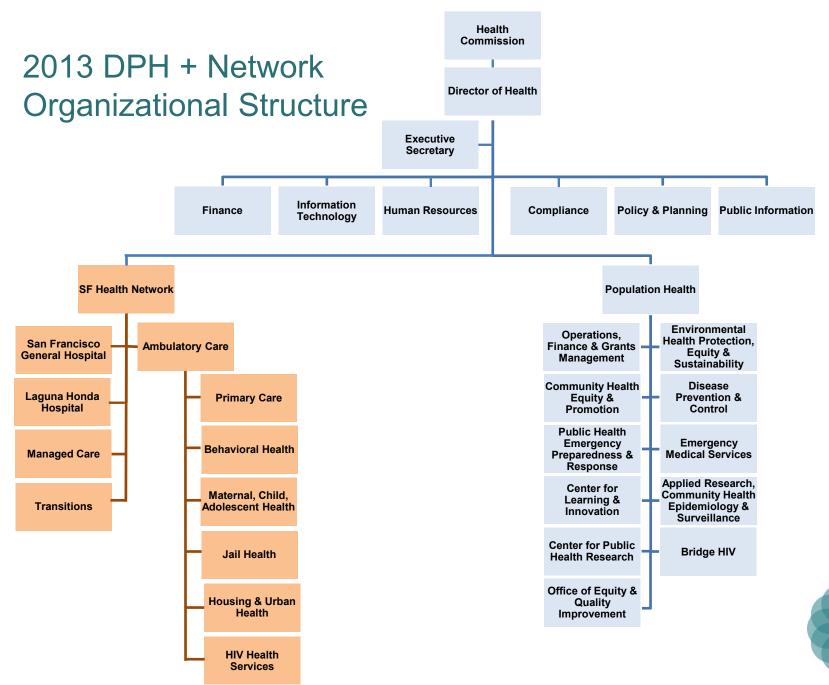
Health reform recommendations:

- Patient care access and quality improvement
- Managed care network development
- Financial sustainability



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SFHN Strategic Planning (Hoshin Kanri)

SFHN Strategic Plan

March 2016



SFHN Strategic Plan November 2017



- SFHN's 2nd iteration informed by DPH's visioning and strategic plan
- Maintaining SFHN Mission & Vision statements, and 6 True North dimensions
- Narrowed scope from 9 strategic initiatives to the following 3:
 - 1. EHR Readiness
 - 2. Develop our people through lean
 - 3. Aligning care, finances, and outcomes for Value-Based Payments



SFHN Strategic Planning – 2018 (For FY19/20)

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MISSION: We provide high quality health care that enables San Francisc	cans to live vibran	t, healthy lives.					VISIO	N: To be	e every	San Fra	incisca	n's fir	st cho	ice for	healt	h care	e and v	vell-b	eing.							
							со	rrelation	/ contril	bution			_		_	1	_	_	_				_			
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O □ O 3 Value-based care (revenue, cost/value op	ptimization)															•		0					0			
O D 2 Develop our people through lean																		_	\square	_	+					
C C I EHR readiness													0			00	0	0								
safety: Actionable knowledge anytime, anywhere Quality Care Experience: Actionable knowledge anytime, anywhere Workforce: Develop our people Financial Stewardship Equity	gic initiative	M	easures	1 100% of EHR "Design and Build" Ins are completed 0 nine (1/1/19) T5% of DPH & UCSF@25 For employee	DPH will be prepared & enabled to ef EH 75% of end-users & manager uper, and have the right information to a and npH (1/1/20)	 By S/2018, DPH has a defined model DMS and production Ine schedule plan By S/2019 all designated units going in the PIC are 	IS 3% of units in DMS achieving	7 By 12/2019, adherence to EPIC workflows is practice of the time through process observation	8 by 12/12/12/15/ units in UNS meeting 60% of KHS 9 by 6/30/19, maintain stable Medi-Cal enrollment of SFHN 9 PC enrollees from 48,000 to 50,000	¹⁰ By 6/30/19decrease % of enrolled but not yet seen (ENYS) to 25% from 28%	By 6/30/19, decrease PRIME CCM high risk subgroup Patient ED & Inpatient Utilization	nment of Medi-	Pickens (Director, SFHN) Alice Chen (Deputy Director, SFHN)	Albert Yu (CHIO, SFHN)	Valerie Inouye (Dir, Finance, SFHN)	Susan Ehrlich (CEO, ZSFG) Jim Marks (Chief Perf Exc. ZSFG)	Mivic Hirose (Exec Admin, LHH)	Kelly Hiramoto (Director, Transitions) Hali Hammer (Dir, Primary Care)	Lisa Golden (Dir, KPO, DPH)	Mary Hansell (Dir, MCAH) Kavoos Ghane Bassiri (Dir, Behavioral Health)	Lisa Pratt - Dir, Jail Health	Jernity Louie (JOFH Budget Diff, SFIN BIU) Rhonda Simmons (Dir, HR Wkforce Dvlpmt	Ayanna Bennett (Dir, Interdiv Initiatives) Reena Gupta (Med Dir, PRIME)			
Financial Stewardship: 70% of thets		70% TBD	TBD																							
Quality: 70% of targets	70%	70% TBD	TBD																							
□ Safety: 70% of targets	70%	70% TBD	TBD											= st	rong corr	elation	or team	leader			1	a re	na			
Care Experience: 70% of targets	70%	70% TBD	TBD										0	= in	portant	correlat	tion or co	ore tean	n memb	ber	,	C	ona onsi roup	ultin	g	
Workforce: 70% of targets	70%	70% TBD	TBD											= w	eakcorre	lation d	or rotatir	ngteam	membe	er		s g	roup	C	0	
Lotal measures that hit target: Equity: 70% of targets	27% 70%	3% TBD	TBD																							
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