## JCC CEO Data Report October 2024

**Part 1**: True North Scorecard Key Performance Indicators

Part 2: Flow Data

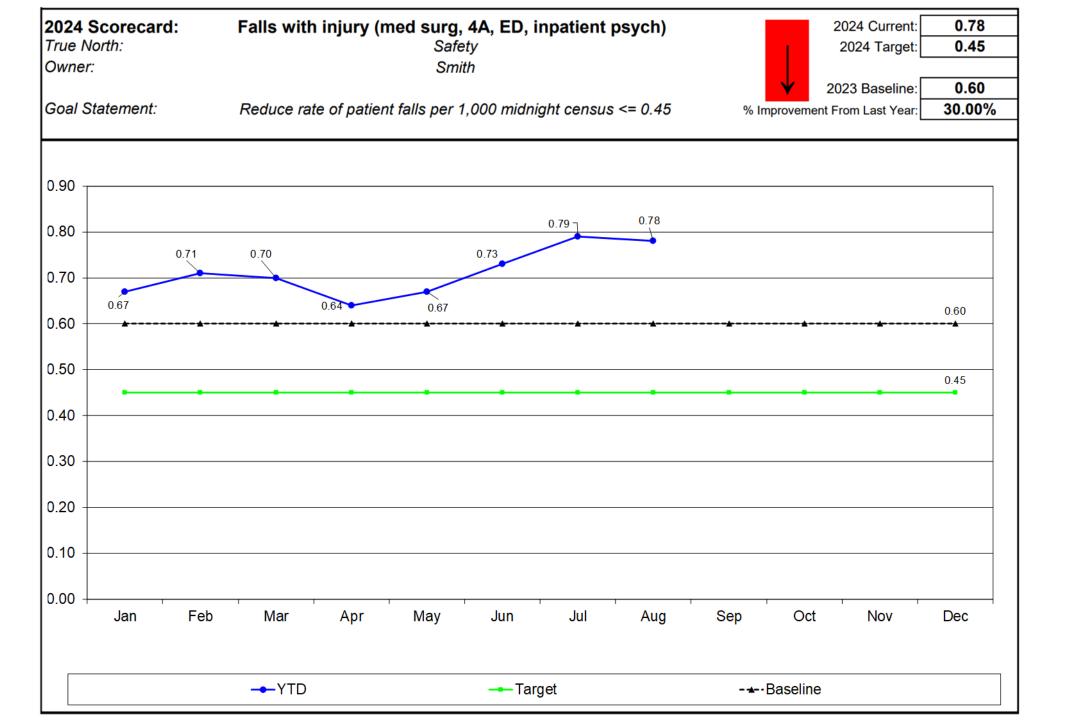
### Part 1: True North Scorecard

- 1. Departments Driving Equity
- 2. Achieving Safe & Equitable Patient Care
  - Sepsis Bundle Compliance
  - Hospital Acquired Pressure Injuries
  - Falls with Injury
- 3. Harmonizing and Synergizing Access and Flow Across the ZSFG Campus
  - Ambulance Diversion %
  - Left without Being Seen %
  - OR Add-on Case Completion %
  - Third Next Available Appointment Rate
  - Lower Level of Care Patient Days (Med/surg)
- 4. Achieving Safe & Equitable Staff Experience
  - Physical Assaults with Injury
- 5. Revenue Cycle Optimization
  - Denial Rate Hospital Billing

77.8% 2024 Scorecard: **Departments Driving Equity** 2024 Current: True North: 65.0% Equity 2024 Target: **Ehrlich** Owner: 74.0% 2023 Baseline: 5.11% Goal Statement: Increase % departments with an active equity driver >= 65% % Improvement From Last Year: 120.0% 100.0% 100.0% 100.0% 100.0% 100.0% 100.0 77.8% 79.2% 75.0% 77.8% 80.0% 82.8% 74% 80.0% 77.8% 60.0% 60.0% 40.0% 20.0% 0.0% Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec **→**MTD **→**YTD ---Target ---Baseline

2024 Current: 28% 2024 Scorecard: **Sepsis Bundle Compliance (SEP-1)** True North: Safety **59%** 2024 Target: Owner: Smith 40% 2023 Baseline: Goal Statement: Increase % of Sepsis Bundle Compliance (SEP-1) >= 59% % Improvement From Last Year: 70% 59% 60% 50% 50% 42% 40% 40% 28.1% 30% 25% 28.3% 27.1% 27.2% 25.7% 25.0% 25% 23.5% 20% 10% 0% -Feb Jan Mar Apr May Jun Jul Aug Sep Oct Nov Dec **→**MTD **→**YTD ---Target -**-**--Baseline

0.05 2024 Scorecard: **Hospital Acquired Pressure Injuries (HAPI)** 2024 Current: True North: 0.20 Safety 2024 Target: Owner: Smith 0.20 2023 Baseline: Reduce rate of patient hospital acquired pressure injuries per 1,000 Goal Statement: -75.00% % Improvement From Last Year: midnight census <= 0.2 0.25 0.20 0.20 0.19 0.15 0.15 0.10 0.10 0.09 0.05 0.05 0.05 0.05 0.00 Feb Oct Nov Dec Jan Mar Apr May Jun Jul Aug Sep **→**YTD ---Target ---Baseline

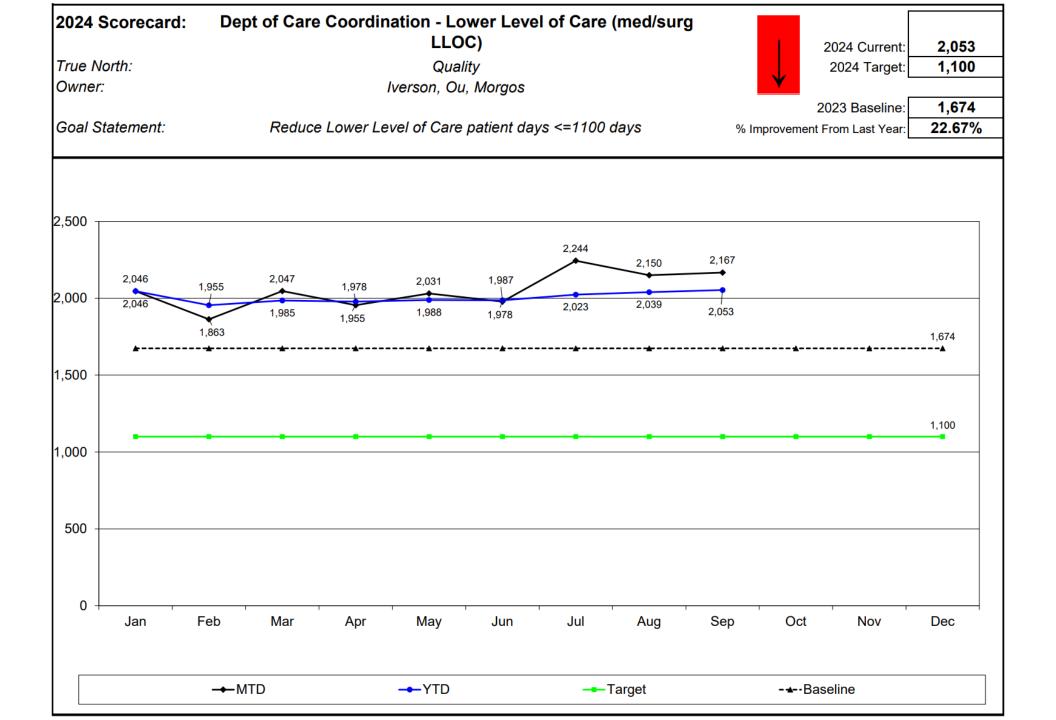


44.4% **Emergency Department - Diversion Rate** 2024 Current: 2024 Scorecard: True North: Quality 2024 Target: 35.0% Owner: Staconis, Colwell 46.9% 2023 Baseline: Reduce Emergency Department ambulance diversion rate = <35% Goal Statement: -5.33% % Improvement From Last Year: 80.0% 69.3% 70.0% 69.3 58.8% 60.0% 52.2% 44.9% 48.0% 44.4% 50.0% 44.9% 44.8% 45.3% 45.3% 44.8% 40.0% 37.2% 35% 39.4% 36.1% 30.0% 31.5% 20.0% 10.0% 0.0% Jan Feb Mar May Jun Jul Sep Oct Nov Dec Apr Aug **→**MTD **→**YTD ---Target ---Baseline

2024 Current: 6.7% 2024 Scorecard: **Emergency Department - Left Without Being Seen** True North: Quality 4.0% 2024 Target: Owner: Staconis, Colwell 6.8% 2023 Baseline: Goal Statement: Reduce Emergency Department Left Without Being Seen rate <=4% -1.22% % Improvement From Last Year: 10.0% 9.4% 9.0% 8.4% 8.0% 6.7% 7.0% 7.0% 6.8% 6.5% 5.8% 5.8% 6.0% 6.1% 6.2% 5.9% 5.8% 5.6% 5.5% 5.0% 4.0% 3.0% 2.0% 1.0% 0.0% Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec **→**MTD **→**YTD ---Target ---Baseline

2024 Current: 60.2% 2024 Scorecard: Perioperative - OR Add-on Case % True North: Quality 2024 Target: 95.0% Coggan, Palaniappa Owner: 58.0% 2023 Baseline: Goal Statement: 3.83% Completion rate of Urgent-24 hour OR add-ons within 24 hours >95% % Improvement From Last Year: 100% 95% 90% 80% 73% 70% 66% 65.2% 65.4% -62.9% 61.5% 60.2% 66.5% 60% 59.0% 50% 50% 52% 40% 30% 20% 10% 0% Feb Mar Jul Sep Oct Nov Dec Jan May Jun Apr Aug ---Target **→**MTD **→**YTD ---Baseline

2024 Current: 83.3% 2024 Scorecard: **Specialty Clinics - Third Next Available Appointment** True North: Quality 90.0% 2024 Target: Owner: Patel 2023 Baseline: 85.0% Increase % of outpatient adult clinics with Thrid Next Available Goal Statement: -2.05% % Improvement From Last Year: Appointment less than 21 days, >= 90% 120.0% 100.0% 95.8% 90.9% 90% 89.6% 92.7% 83.8% 83.6% 83.3% 83.3% 80.0% 83.0% 80.9% 80.9% 76.6% 72.3% 60.0% 40.0% 20.0% 0.0% Feb Sep Oct Nov Dec Jan Mar Apr May Jun Jul Aug **→**MTD **→**YTD ---Target ---Baseline



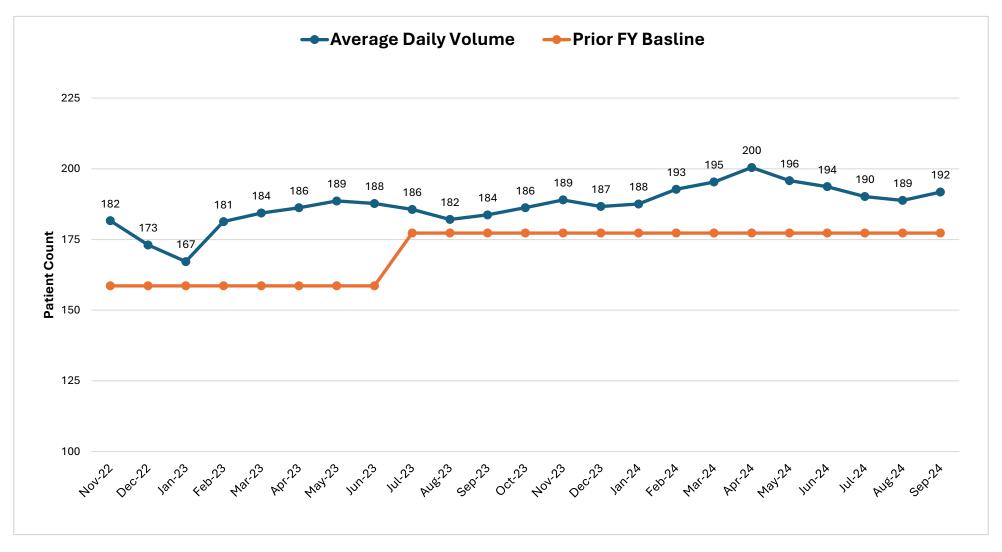
6.33 2024 Scorecard: **Physical Assaults with Injury** 2024 Current: True North: Developing Our People 4.00 2024 Target: Smith, Journagin Owner: 5.80 2023 Baseline: Reduce the # of physical assaults with injury to ZSFG staff from a rate of 5.8 per Goal Statement: month to less than 4.0 per month for the combined high risk areas 9.20% % Improvement From Last Year: (PSYCH, ED, BHC, UCC, M/S) 12.00 10.00 10.00 9.00 8.00 8.00 6.33 5.60 6.00 <sub>-</sub> 5.50 6.00 5.80 5.75 6.00 5.00 5.00 5.00 -5.00 4.00 4.00 2.00 0.00 Feb Jul Oct Nov Dec Jan Mar Apr May Jun Aug Sep **→**MTD **→**YTD ---Target ---Baseline

16.5% 2024 Scorecard: **Denial Rate - Hospital Billing** 2024 Current: True North: Financial Stewardship 15% 2024 Target: Wu, Kanzaria Owner: 18.6% 2023 Baseline: Reduce Hospital Billing Denial rate for primary payers from 18.6% to Goal Statement: -11.40% % Improvement From Last Year: 15.6% by July 2024. 25.0% 21.5% 20.0% 19% 17.0% 17.1% 17.0% 16.9% 18.2% 16.5% 16.7% 16.5% 16.0% 17.0% 15% 16.1% 15.0% 15.4% 15.1% 15.0% 14.5% 10.0% 5.0% 0.0% Feb Mar Jun Jul Aug Sep Oct Nov Dec Jan Apr May **→**MTD **→**YTD ---Target ---Baseline

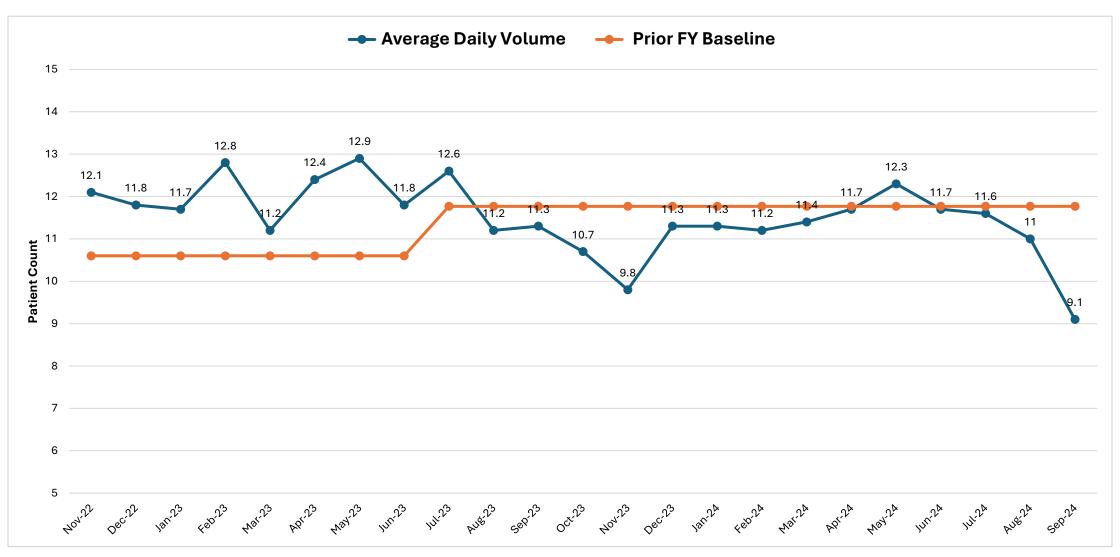
#### Part 2: Flow Data

- 1. Input (Emergency Volume)
  - Medical ED
  - Psychiatric Emergency Services
- 2. Input and Output (Admissions and Discharges)
  - Physical Health (includes Med/Surg, ICU, Emergency, OR, PACU)
  - Maternal & Child Health
  - Psychiatry
- 3. Throughput
  - ED Boarding
  - Length of Stay Physical Health, Maternal & Child Health, Psychiatry
  - LLOC Physical Health and Psychiatry

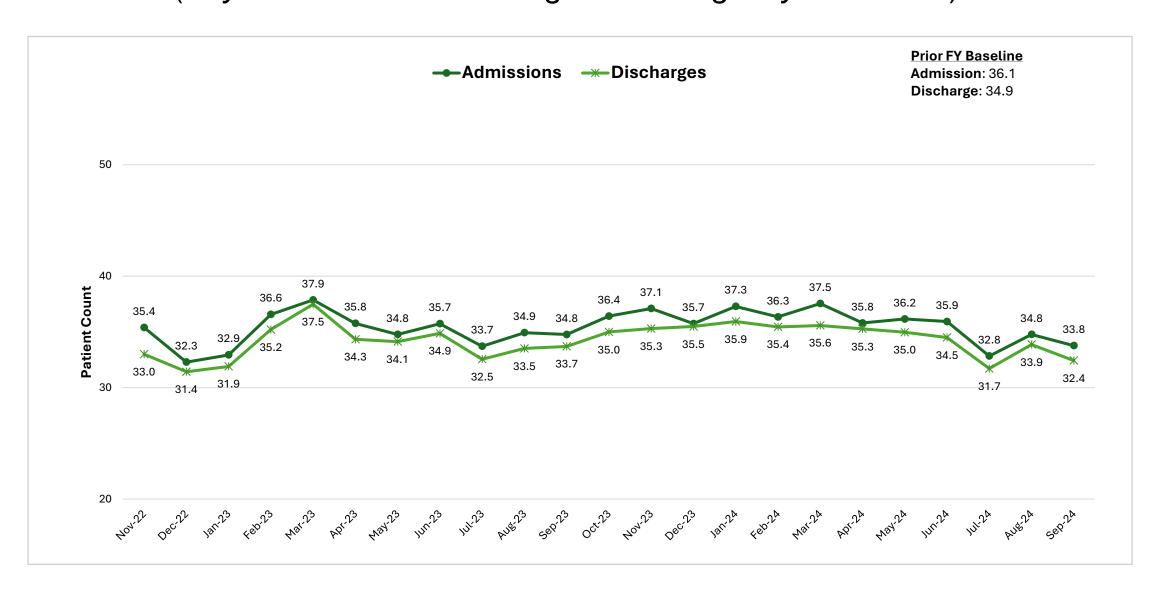
### Input - Medical ED Average Daily Volume



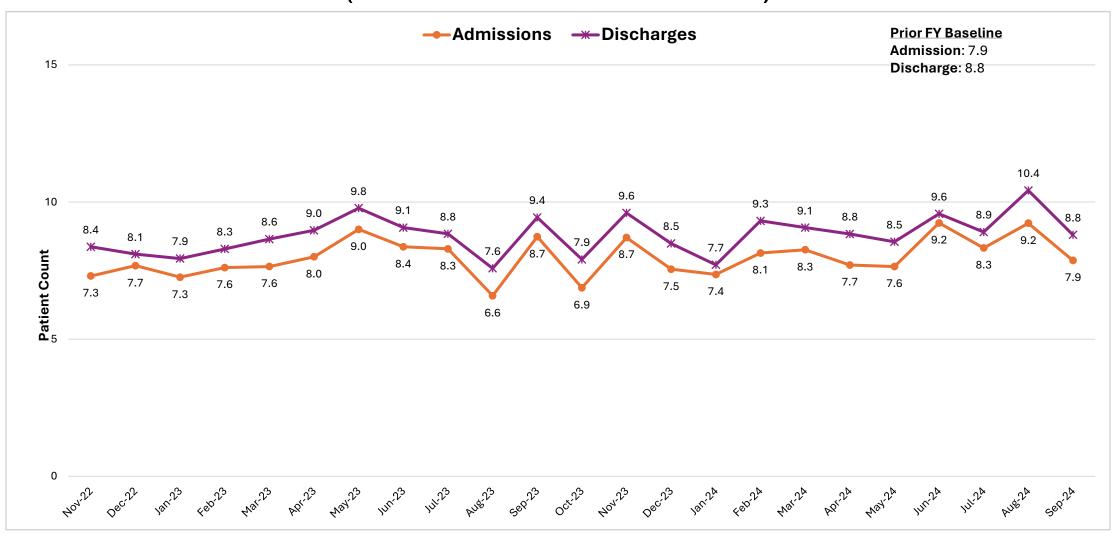
### Input - Psychiatric ED Average Daily Volume



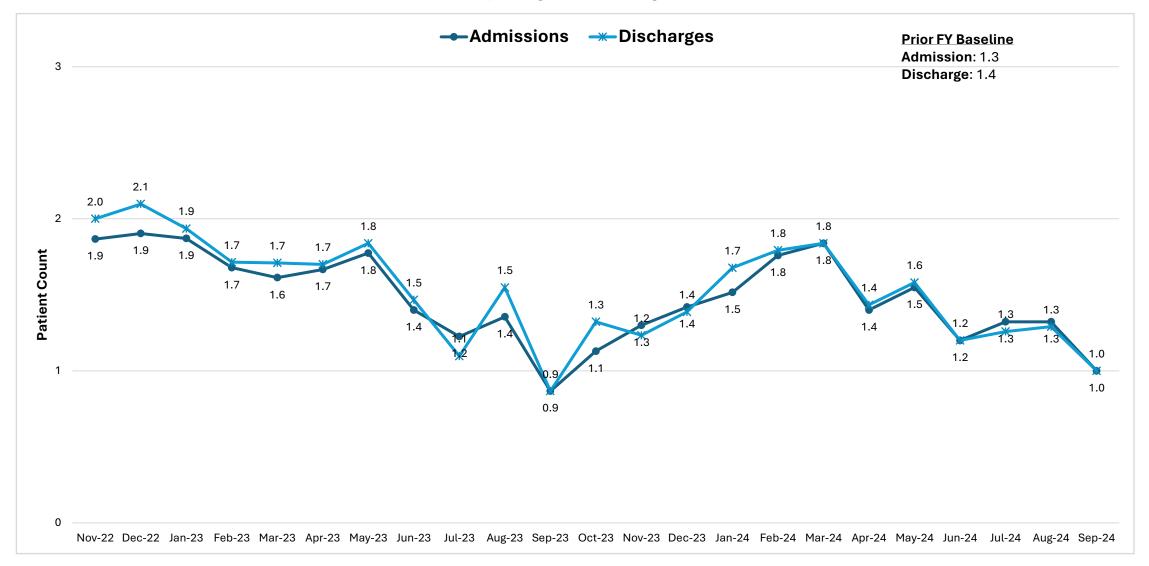
## Inpatient Average Daily Admissions & Discharges (Physical Health - MedSurg/ICU/Emergency/OR/PACU)



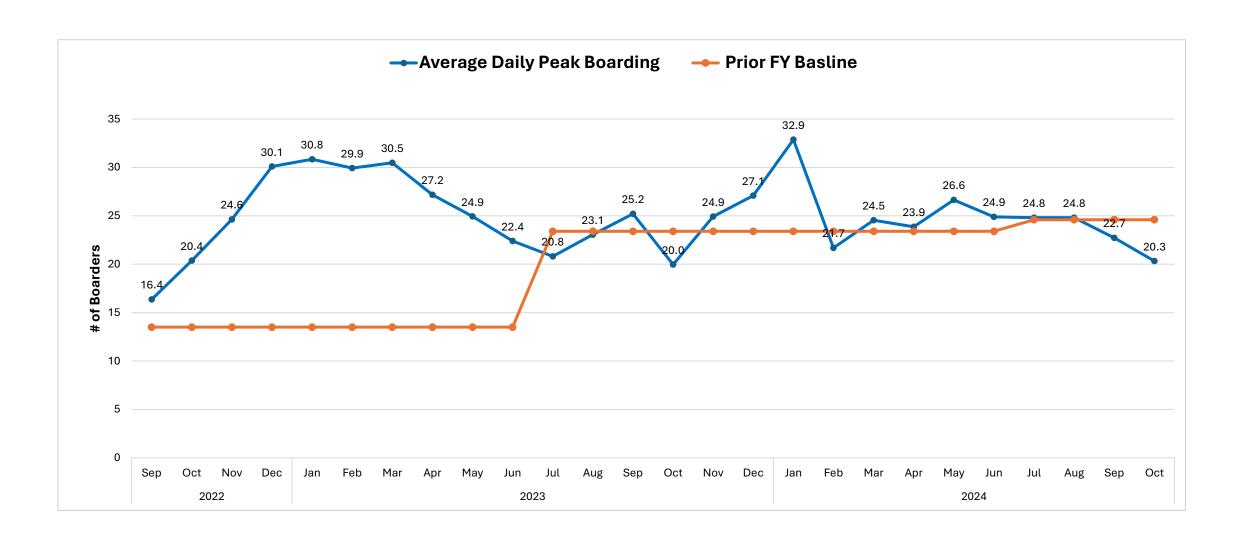
# Inpatient Average Daily Admissions & Discharges (Maternal & Child Health)



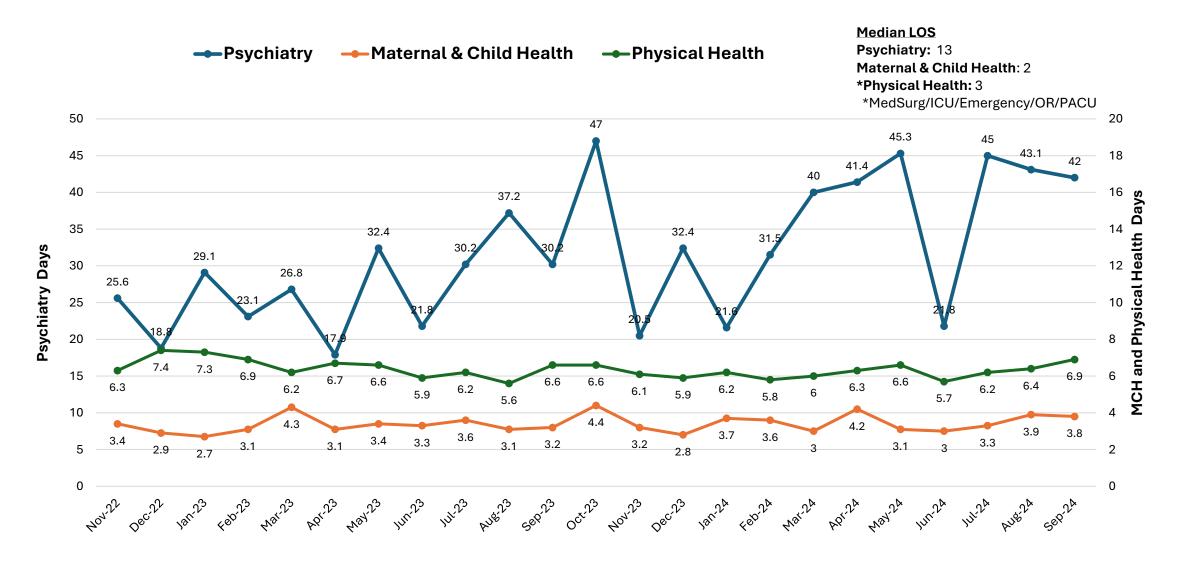
# Inpatient Average Daily Admissions & Discharges (*Psychiatry*)



## Throughput – Average Daily Peak Medical ED Boarding



### Throughput – Inpatient Average Length of Stay (in Days)



### Throughput – Lower Level of Care

