



True North Scorecard CY 2023 Updated: 06/15/2023

Owner: ZSFG Executive Team Unit/Dept: ZSFG-Wide

Purpose Statement: To track our performance in achieving True North, using focused driver metrics aligned with organization-wide strategies.

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True North Strategy Measure	Executive Owner	Measure Unit	CY 22 Baseline ^A	Improvement direction	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	CY 23 Year To Date ^A	On- Off- Target	Target CY 23 (unless noted in footnote) A
Departments Driving Equity	Ehrlich, Turner	% of departments	63%	1	25%	60%	75%	67%	50%								56%		65%
Achieving Safe & Equitable Patient Care																			
Catheter Associated Urinary Tract Infections (CAUTI)	Smith, Winston	Count / 1,000 urinary catheter days	Rate = 1.78	1	Rate = 1.93 Count = 6	Rate = 1.80 Count = 0	Rate = 2.07 Count = 4	Rate = 2.27 Count = 4									Rate = 2.27 Count = 33		Rate = 2.26
Central Line Associated Bloodstream Infections (CLABSI)	Smith, Winston	Count / 1,000 central line days	Rate = 0.92	1	Rate = 0.91 Count = 1	Rate = 0.82 Count = 0	Rate = 0.91 Count = 1	Rate = 0.91 Count = 0									Rate = 0.91 Count = 10		Rate = 0.77
Colon Surgical Site Infections (COLO SSI)	Smith, Winston	Standardized Infection Ratio (Observed/Expected)	Rate = 0.96	\	Rate = 0.87 Count = 0	Rate = 0.81 Count = 0	Rate = 0.78 Count = 0										Rate = 0.78 Count = 9		Rate = 1.62
Hospital Acquired Pressure Injuries (HAPI)	Smith, Winston	Count / 1,000 midnight census	Rate = 0.28	\	Rate = 0.28 Count = 1	Rate = 0.29 Count = 3	Rate = 0.31 Count = 3	Rate = 0.32 Count = 1									Rate = 0.32 Count = 25		Rate = 0.20
Falls with injury (med surg, 4A, ED, inpatient psych)	Smith, Winston	Count / 1,000 midnight census	Rate = 0.71	1	Rate = 0.57 Count = 3	Rate = 0.50 Count = 2	Rate = 0.53 Count = 6	Rate = 0.57 Count = 8									Rate = 0.57 Count = 53		Rate = 0.45
Harmonizing and Synergizing Access and Flow Ac	ross the ZSFG Camp	ous																	
Emergency Department - Ambulance Diversion Rate	Day, Otway	% of time on diversion	63.9%	1	51.2%	45.1%	43.1%	47.8%	37.3%								44.9%		50.0%
Specialty Care Clinics - Third Next Available Appointment ≤ 21 days	Day, Otway	% of clinics ≤ 21 Days	82%	1	80%	87%	89%	76%	76%								82%		90%
Department of Care Coordination - Lower Level Of Care Patient Days	Day, Otway	# of patient days	1,315	\	1,914	1,489	1,534	1,522	1,554								1,603		1,100
Achieving Safe & Equitable Staff Experience																			
Physical Assaults with Injury	Turner	# per Month	3.1 ^B	1	0.0	5.0	8.0	6.0	4.0								4.6		2.0
Revenue Cycle Optimization																			
Denial Rate - Hospital Billing	Bilinski, Boffi	% of Claims Denied	18.6%	1	15.6%	20.0%	19.6%	18.1%	18.5%								18.5%		17.0%
TRUE NORTH OUTCOME METRICS																	_		
CMS Star Rating	Ehrlich	# of stars	1 - Star	1		1 - Star											1 - Star		2 - Star
ikelihood to Recommend Hospital to Friends & Family	Ehrlich	% positive responses	B/AA 71 Hispanic 86	1.5% 1.6% 1.6%	Asiar B/AA Hispanio White	72.9% A 87.5% C 88.9%	n = 153 n = 48 n = 16 n = 45 n = 41		Q2 CY 2023			Q3 CY 2023			Q4 CY 2023		77.8% 72.9% 87.5% 88.9% 65.9%		77.0%
Likelihood to Recommend Provider's Office to Friends & Family	Ehrlich	% positive responses	B/AA 75 Hispanic 80	1.1% 1.4% 1.0%	Asiar B/AA Hispanio White	79.3% A 77.2% c 81.5%	n = 7,186 n = 1,370 n = 892 n = 2,958 n = 1,564		Q2 CY 2023			Q3 CY 2023			Q4 CY 2023		79.8% 79.3% 77.2% 81.5% 78.6%		80.0%
kelihood to Recommend ZSFG as a Workplace	Ehrlich	Weighted Average	3.66 Asian 3.3 B/AA 3.5 Hispanic 3.3 White 3.5	70 54 79	The DPH Staff Engagement Survey (3/1/23 to 3/31/23) Results Expected June/July 2023											3.75			
General Fund Spend To Not Exceed Budgeted Amount	Ehrlich	\$ in Millions	\$78.11M	↓		\$146.47M			Q4 FY23			Q1 FY24			Q1 FY24		\$146.47M		\$174M
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★ = Included in CMS Star Ratings

Footnoites:

Patient Safety metrics are measured and reported on a rolling 12-month calendar, with 1-month lag (COLO SSI has a 2-month lag);

A = General Funds are measured and reported on Fiscal Year calendar;

All other metrics are measured and reported on Calendar Year start/end

B = High risk areas include: Psych (Inpatient and Psych Emergency), Med-Surg, Behavioral Health Center, Emergency Department, Urgent Care

C = General Fund values are not cumulative, but a projected estimate of GF fund spend through the end of the fiscal year based on actual revenues and expenditures at the end of each quarter