



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

On-Target
Off-Target

True North Strategy Measure	Executive Owner	Measure Unit	CY 23 Baseline ^A	Improvement Direction	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	CY 24 Year To Date ^A	On-Off-Target	Target CY 24 (unless noted in footnote) ^A				
Departments Driving Equity	Ehrlich	% of departments	74%	↑	100%	71%											75%	On-Target	65%				
Achieving Safe & Equitable Patient Care																							
★ Sepsis Bundle Compliance (SEP-1)	Smith	% Sepsis bundle compliance	39.97%	↑	SEPSIS Task Force establishing metric (est. July 2024)														57%				
Hospital Acquired Pressure Injuries (HAPI)	Smith	Count / 1,000 midnight census	Rate = 0.20 Count = 16	↓	Rate = 0.19 Count = 0												Rate = 0.19 Count = 15	On-Target	Rate = 0.20				
Falls with injury (med surg, 4A, ED, inpatient psych)	Smith	Count / 1,000 midnight census	Rate = 0.60 Count = 58	↓	Rate = 0.67 Count = 9												Rate = 0.67 Count = 64	Off-Target	Rate = 0.45				
Harmonizing and Synergizing Access and Flow Across the ZSFG Campus																							
Emergency Department - Ambulance Diversion %	Ortiz, Otway	% of time on diversion	46.9%	↓	69.3%	47.6%											58.8%	Off-Target	35%				
Emergency Department - Left Without Being Seen %	Ortiz, Otway	% of patients	6.8%	↓	5.8%	4.9%											5.3%	Off-Target	4%				
Perioperative - OR Add-on Case Completion %	Ortiz, Otway	% of cases	58%	↑	59%	68%											64%	Off-Target	95%				
Specialty Care Clinics - Third Next Available Appointment ≤ 21 days % of clinics	Ortiz, Otway	% of clinics ≤ 21 Days	85%	↑	90%	96%											93%	On-Target	90%				
Department of Care Coordination - Lower Level Of Care Patient Days	Ortiz, Otway	# of patient days	1,674	↓	2,026	1,838											1,932	Off-Target	1,100				
Achieving Safe & Equitable Staff Experience																							
Departments Driving Staff Engagement	Johnson, Damiano	% of departments	Establishing baseline	↑	Establishing baseline & metric collection process																		
Physical Assaults with Injury	Smith, Journagin	# per month	5.8 ^B	↓	5	6											5.5	Off-Target	4				
Revenue Cycle Optimization																							
Denial Rate - Hospital Billing	Wu, Kanzaria	% of claims denied	18.6%	↓	18.2%	15.9%											17.0%	Off-Target	15.0%				
TRUE NORTH OUTCOME METRICS																							
★ CMS Star Rating	Ehrlich	# of stars	2 - Star	↑	2 - Star												2 - Star	On-Target	2 - Star				
★ Likelihood to Recommend Hospital to Friends & Family (NRC - HCAHPS Survey)	Ehrlich	% positive responses	Overall	↑	CY 24 Q1	CY 24 Q2	CY 24 Q3	CY 24 Q4	Overall	77.0%	76%	69%	72%	90%	68%	79%	76%	77%	81%	80%			
			Asian																				
			B/AA																				
			Hispanic																				
Likelihood to Recommend Provider's Office to Friends & Family (NRC - Real-time Survey)	Ehrlich	% positive responses	Overall	↑	79%	76%	77%	81%	80%	Overall	80.0%	79%	76%	77%	81%	80%	79%	76%	77%	81%	80%		
Likelihood to Recommend ZSFG as a Workplace (DPH Staff) ^D	Ehrlich	% positive responses	ZSFG Staff Engagement % Positive Responses (CY 2023)	↑	ZSFG Staff Engagement % Positive Responses (CY 2023) "Where 0 is the least likely and 10 is the most likely, how likely are you to recommend this organization to others as a place to work?"												Overall	33% ^D	33.0%	29.7%	37.0%	28.2%	25.1%
General Fund Spend To Not Exceed Budgeted Amount	Ehrlich	\$ in Millions	\$111.08M	↓	FY 24 Q3			FY 24 Q4			FY 24 Q1 \$137.74M			FY 24 Q2 \$95.83M			\$95.83M ^C	On-Target	\$143.69M				

★ = Included in CMS Star Ratings

Footnotes:

Patient Safety metrics are measured and reported on a rolling 12-month calendar, with 1-month lag in reporting

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

D = Staff Engagement: Overall % positive is combined ZSFG & UCSF data. Race/ethnicity is from ZSFG data.