

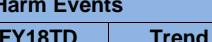
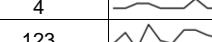
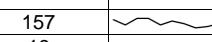
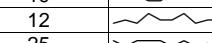
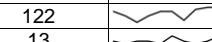
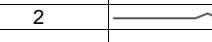
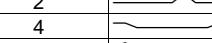
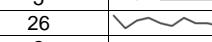
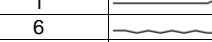
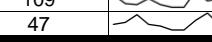
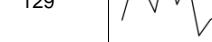
Patient Experience		Performance		FY18 Goals	Benchmark
		FY17	Current Period		
Would Recommend Hospital (% of units, practices, services improving)		62% (42/68)	61% (46/76)	Pending	*Detailed Experience Report on Back Page
Physician Communication (% of units, practices, services improving)		63% (44/70)	68% (51/75)		
Quality & Safety		Performance		FY18 Goals	Benchmark
		FY17	Month		
Clinical Outcomes	Inpatient Mortality (O/E index)	0.83	0.94 May-18	0.90	0.75 Vizient 1st decile
	Sepsis Mortality Index (O/E index)	1.11	1.41 May-18	1.16	0.96 Vizient 1st decile
Zero Harm	30-day All-Cause Readmissions (per monthly discharges)	11.4%	9.66% Apr-18	11.39%	< 11% 8.06% Vizient 1st decile
	Ambulatory Quality (% of metrics meeting benchmark)	5/9	NA	*8/9	9/9 NCQA/HRSA 1st decile * Detailed Report on Back Page
Staff	Harm Events (actual # of harm events)	89 (monthly) 1,070 (FY17)	84 Jun-18	1,000	Pending * Detailed Harm Report on Back Page
	Our People		Performance		FY18 Goals Benchmark
Provider	Gallup Engagement Survey (grand mean)	3.87	FY17		4.13 50th %ile Gallup Healthcare
			FY18		
Financial Strength	UCSF Place to Do Clinical Work: MDs (Net Promoter Score: -100 to 100)	-4	1	6	22 Bain Survey, Front Lines of Healthcare, 2017
	UCSF Place to Work: AHPs (Net Promoter Score: -100 to 100)	Mar-17	Mar-18		NA External Comparison
Strategic Growth		Performance		FY18 Goals	
FY17		Month	FY18TD	Month	YTD
Net Income UCSF Health West and East Bay		\$163.6M	Pending		
Net Income with actuarial adjustment for retirement benefits		(\$27.6M)			
Operating Cost per Case (Adjusted for outpatient activity and acuity)		\$23,336	Pending		
Strategic Growth		Performance		FY18 Goals	Benchmark
		FY17	Month		
Ambulatory Visits *Faculty Practices		1,412,110	125,998 Jun-18	1,492,918	132,887/1,508,990 *FYTD18 goal
Ambulatory Access (% of practices meeting unit goal)		55%	45% Jun-18	53%	80% *Strategic Access: >75% seen in 14d *All Practices: ↑ 4% from FY17
Inpatient Discharges		36,004	Pending		
Length of Stay (O/E index)		1.08	1.14 May-18	1.09	<1.00 0.93 Vizient 1st decile
Average Daily Bed Opportunity (# of beds created if LOS = 1.0)		46	80 May-18	51	0 -34 Vizient 1st decile
Learning Health System		Performance		FY18 Goals	Benchmark
		FY17	Current Period		
% of True North Boards with LHS Pillar populated		NA	54% (68/126)	80%	NA

Achieving Our True North Goals

Patient Experience		# of Improved / Total Groups	FY18TD vs. FY17 (Top Box/Mean Score)	FY18TD National Rank (%ile)
Would Recommend	Inpatient Adult	6/14	⬇️	93
	Inpatient Peds	1/3	⬇️	82
	ICN	1/1	⬆️	61
	Outpatient	31/44	⬆️	38
	ED/SACC	3/3	⬆️	49
	Outpatient Periop	1/4	⬇️	57
	Diagnostic & Treatment Svcs**	2/5	⬆️	50
	Behavioral Health	1/1	⬆️	51
	Outpatient	0/1	⬇️	19
Physician Communication	Inpatient Adult	11/17	⬆️	76
	Inpatient Peds	1/2	⬇️	48
	Neonatology	1/1	⬆️	82
	Outpatient	32/44	⬆️	35
	ED/SACC	2/3	⬆️	74
	Outpatient Periop	3/4	⬆️	37
	Diagnostic & Treatment Svcs**	1/2	⬆️	UCSF custom questions - no benchmark available
	Behavioral Health	0/1	⬆️	
	Outpatient	0/1	⬇️	12

** Diagnostic & Treatment Svcs represents performance for Cardiology Labs, Infusion, Radiology, Radiation Oncology & Rehabilitation for "Would Recommend" & Cardiology Labs, Radiation Oncology for "Provider Communication".

Ambulatory Quality Metrics		FY17 Baseline	FY18TD	1st Decile National Benchmark
Diabetes Care: HbA1c Poor Control (>9.0%)		* 22.39%	*20.79%	29.36%
Controlling Blood Pressure		* 72.90%	*74.68%	70.41%
Tobacco Assessment and Counseling		92.40%	*96.79%	96.19%
Breast Cancer Screening		* 80.14%	*78.42%	71.44%
Cervical Cancer Screening		* 75.25%	*72.20%	69.83%
Colorectal Cancer Screening		* 75.92%	*76.14%	65.71%
Depression Screening & Follow-Up		0.60%	*55.47%	84.54%
Sexual Orientation & Gender Identity Data Completeness		0.00%	0.39%	10.00%
Influenza Vaccination (6 months and older)		38.30%	*52.90%	46.00%
AMBULATORY QUALITY ROLL-UP		* 5/9	*8/9	*reflects Primary Care Services FY18 target rate

Category	Specific Harm Metrics	FY17 Baseline (# of harm events)	# of Harm Events			Rate	
			Jun-18	FY18TD	Trend	FY18TD	FY17
Adult Hospital	CLABSI (excl. CLAMBI)	42	7	61		1.03	0.73
	CAUTI	88	3	67		1.72	2.29
	PVAP (VAE)	4	0	4		0.41	0.52
	SSI	122	9	(Mar 2018) 123		0.84%	0.88%
	Hospital-Onset C. difficile	181	9			9.03	10.43
	HAPU	30	1				
	Falls with Serious Injury	10	0				
	Serious Safety Events	25	4				
	Workplace Injuries to Staff	163	12				
BCH-SF	Reportable Privacy Events	18	0	13			
	CLABSI (excl. CLAMBI)	30	5	37		1.62	1.31
	CAUTI	1	0	2		0.68	0.35
	VAP	3	0	2		0.34	0.53
	SSI	3	1	(Mar 2018) 7		0.55%	0.24%
	Codes Outside ICU	7	0				
	HAPU	2	0				
	Falls with Serious Injury	0	0				
	Serious Safety Events	4	0				
Ambulatory	Workplace Injuries to Staff	30	1	26			
	Reportable Privacy Events	5	0	2			
	Falls with Serious Injury	4	1	5			
	Serious Safety Events	3	0	1			
	Communicable Disease Exposures	19	0	6			
Unattributed	Workplace Injuries to Staff	127	16	129			
	Total Events	1070	84	1000	