Patient Experience: Deliver an Outstanding Patient Experience			
Would Recommend Hospital	% of units, practices, services improving	NA	Percentage of units, practices, and services that are improving over their FY16 performance on the likelihood to recommend and the physician communication domain. Source: Press Ganey.
Physician Communication			

Quality and Safety: Achieve Zero Harm and Improve Clinical Outcomes				
Clinical Outcomes	Inpatient Mortality	O/E index	Vizient 1st decile	Represents all inpatient cases that had a discharge status of "expired" (observed mortality rate divided by expected mortality rate). Data includes adults and peds. Denominator excludes: nonviable neonates, hospice, and normal newborns. Source: Academic Medical Center database (Vizient)
	Sepsis Mortality Index	O/E index	Vizient 1st decile	Observed sepsis mortality divided by expected sepsis mortality. Data includes adults and peds. Source: Academic Medical Center database (Vizient)
	30-day all-cause Readmissions	per monthly discharges	Vizient 1st decile	All readmissions excluding readmissions for chemotherapy, radiation therapy, rehabilitation, dialysis, delivery/ birth, mental diseases/alcohol & drug use. Data includes adults and peds. Source: Academic Medical Center database (Vizient)
	Ambulatory Quality			TBD
Harm Events	CLABSI (excluding CLAMBI)	per 1,000 device days	CDPH Report	Patients that meets the 2015 National Healthcare Safety Network (NHSN) criteria for laboratory confirmed bloodstream infection, who have a central line in place or removed within 1 calendar day of event and have been admitted > 3 days where date of admission is Day 1. Excludes the subset of patients who also meet the mucosal barrier injury criteria.
	CAUTI	per 1,000 device days	NHSN Report	Patients who meet 2015 NHSN criteria for urinary tract infection who have an indwelling urinary catheter in place or removed within 1 calendar day of event and have been admitted > 3 days where date of admission is Day 1.
	PVAP (VAE) - Adults	per 1,000 device days		Patients who meet NHSN criteria for possible ventilator-associated event.
	VAP - Peds	per 1,000 device days		Patients who meet NHSN criteria for ventilator-associated pneumonia after being admitted > 3 days where date of admission is Day 1.
	Hospital-onset *Clostridium difficile* Infection	per 10,000 patient days	CDPH Report	Patients with a reportable *Clostridium difficile* test result that is categorized by NHSN as a Hospital Onset, incident case.
	SSI	# of infections		Patients who meet NHSN criteria for deep or organ space surgical site infection (SSI). Baseline data reflects SSIs identified following surgeries performed between April 1, 2015-March 31, 2016 in the following NHSN defined categories of surgery: AAA, APPY, BILI, BRST, CARD, CBGB, CBGC, CHOL, COLO, CRAN, CSEC, FUSN, FX, GAST, HPRO, HTP, HYST, KPRO, KTP, LAM, LTP, NEPH, OVRY, PACE, REC, RFUSN, SB, SPLE, THOR, VHYS, VSHN, and XLAP.
	HAPU	# of reportable HAPUs		Patients with reportable HAPUs stage 3, 4, & unstageable.
	Falls with Injury	# of patient falls		Patient falls with moderate or severe injury (injury severity ranking is within the IR system and separate from the harm ranking).
	Serious Safety Events	# of events		Events rated through our IR system as moderate, severe harm, or unexpected death.
	Codes outside the ICU	# of activations		Code White team activations in BCH-SF, excluding ambulatory care clinics, critical care units, the emergency department, and the operating rooms.
	Workplace Injuries to Staff	# of employee injuries		Include "lost time" and "medical only" injuries. First Aid injuries are not included.
	Reportable Privacy Breaches	# of reportable privacy breaches		Any lawful or unauthorized access to a patient's medical information (in both hospital and ambulatory settings)
	Infection Exposures	# of encounters or events		An encounter or event that leads to potential transmission of a communicable disease to patients or healthcare workers. Each encounter or event is considered one exposure, regardless of number of individuals involved.
Harm Site Attribution	Adult Hospital			Includes all departments and services physically located in the Parnassus, Mt Zion, and Mission Bay adult hospitals and the off site location of China Basin diagnostic services. Also, all patients, inpatient and outpatient, and staff physically located in the adult hospitals at the time of the event including those BCH patients boarded in the MB adult hospital.
	Benioff Children's Hospital			Includes all patients, inpatient and outpatient, and staff physically located in Benioff Children's Hospital at the time of the event, also included are all departments and services physically located in Benioff Children's Hospital. For those departments that serve both Benioff Children's Hospital and the Adult Hospital the attribution will be based on the patient's original unit/location.
	Ambulatory			Includes all patients and staff physically located in an ambulatory clinic at the time of the event.
	Unattributed			Operational areas not captured in the above 3 categories.

Our People: Create an Optimal Work Experience			
Gallup Engagement Survey	Grand Mean	50th %ile Gallup Healthcare	Overall Workgroup Engagement is measured by the Grand Mean, which is an average of the 12 Workgroup Engagement items. The higher your score (with a maximum possible score of 5), the more engaged your employees are.
UCSF Place to Work	Score/Mean		NPS is calculated as the %Promoters - %Detractors = NPS. NPS can range from -100 to 100. Promoters = those that score 9 or 10. Detractors = those that score 0-6. NPM is calculated as the mean score on the 0-10 scale for all providers.

Financial Strength: Lower Our Costs			
Net Income	$	NA	Net Income = Revenues minus Expenses. Includes data from UCSF Health East and West Bay. Source: Office of the CFO.
Net Income with actuarial adjustment for retirement benefits	$	NA	Net Income with adjustments for retirement benefits. Includes data from UCSF Health East and West Bay. Source: Office of the CFO.
Operating Cost per Case	$	NA	Adjusted for outpatient activity and acuity. Source: Office of the CFO.

Strategic Growth: Expand Our Reach and Optimize Access			
Ambulatory Visits	# of visits	NA	Scheduled visits with an appointment status of "arrived", "completed" and scheduled". Source: Office of Faculty Practice.
Ambulatory Access	% of practices meeting unit goal	NA	Source: Office of the Ambulatory Access Team.
Inpatient Discharges	# of discharges	NA	Source: Office of the CFO.
Length of Stay	O/E index	Vizient 1st decile	Observed average length of stay over expected average length of stay. Exclusions: nonviable neonates, hospice, normal newborns, and bad data. Source: Vizient Data.
Average Daily Bed Opportunity	(# of days created if LOS = 1.0)	Vizient 1st decile	Average daily bed opportunity = the number of beds that would be available for new patients if the observed ALOS was equivalent to the Vizient ALOS benchmark. Source: Academic Medical Center database (Vizient)

Learning Health System: Advance, Apply, and Disseminate Knowledge
TBD