DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

Reporting Form Instructions

Dates Reports are Due

DPH systems submit this report to the State twice a year:

DY 6 (6-month)	March 2, 2011
DY 6 (year-end)	May 15, 2011
DY 7 (6-month)	March 31, 2012
DY 7 (year-end)	September 30, 2012
DY 8 (6-month)	March 31, 2013
DY 8 (year-end)	September 30, 2013
DY 9 (6-month)	March 31, 2014
DY 9 (year-end)	September 30, 2014
DY 10 (6-month)	March 31, 2015
DY 10 (year-end)	September 30, 2015

Use of This Reporting Form

All DPH systems must use this reporting form template for reports starting May 15, 2011.
For the year-end report, DPH systems will include the year-end narrative, the year-end report, and reattach the previously submitted 6-month report.
DPH systems should follow the instructions at the top of each tab for completing the form. DPH systems should complete information for items marked "*" for each project tab and milestone being reported.

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

* **DPH SYSTEM:**	The University of California, San Francisco Medical Center
* **REPORTING YEAR:**	DY 6
* **DATE OF SUBMISSION:**	5/15/2011

Total Payment Amount

This table sums the eligible incentive funding amounts. Please see the following pages for the specifics.
* Instructions for DPH systems: Please input the DPH System Name, Reporting DY & Date. Everything else on this tab will automatically populate.

Category 1 Projects - Incentive Funding Amounts	
Expand Primary Care Capacity	$ -
Increase Training of Primary Care Workforce	
Implement and Utilize Disease Management Registry Functionality	$ -
Enhance Interpretation Services and Culturally Competent Care	
Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities	
Enhance Urgent Medical Advice	
Introduce Telemedicine	
Enhance Coding and Documentation for Quality Data	
Develop Risk Stratification Capabilities/Functionalities	
Expand Capacity to Provide Specialty Care Access in the Primary Care Setting	
Expand Specialty Care Capacity	
Enhance Performance Improvement and Reporting Capacity	$ -
TOTAL CATEGORY 1 INCENTIVE PAYMENT:	$ -
Category 2 Projects	
Expand Medical Homes	$ -
Expand Chronic Care Management Models	
Redesign Primary Care	
Redesign to Improve Patient Experience	
Redesign for Cost Containment	
Integrate Physical and Behavioral Health Care	
Increase Specialty Care Access/Redesign Referral Process	$ -
Establish/Expand a Patient Care Navigation Program	
Apply Process Improvement Methodology to Improve Quality/Efficiency	
Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation	
Use Palliative Care Programs	
Conduct Medication Management	
Implement/Expand Care Transitions Programs	$ -
Implement Real-Time Hospital-Acquired Infections (HAIs) System	
TOTAL CATEGORY 2 INCENTIVE PAYMENT:	$ -
Category 3 Domains	
Patient/Care Giver Experience *(required)*	
Care Coordination *(required)*	
Preventive Health *(required)*	
At-Risk Populations *(required)*	
TOTAL CATEGORY 3 INCENTIVE PAYMENT:	$ -
Category 4 Interventions	
Severe Sepsis Detection and Management *(required)*	$ -
Central Line Associated Blood Stream Infection Prevention *(required)*	$ -
Surgical Site Infection Prevention	$ -
Hospital-Acquired Pressure Ulcer Prevention	$ -
Stroke Management	
Venous Thromboembolism (VTE) Prevention and Treatment	
Falls with Injury Prevention	
TOTAL CATEGORY 4 INCENTIVE PAYMENT:	$ -
TOTAL INCENTIVE PAYMENT	$ -

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DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

Year-End Narrative

This narrative summarizes the DSRIP activities performed in the reporting demonstration year.
* Instructions for DPH systems: Please complete the narrative for year-end reports. The narrative must include a description of progress made, lessons learned, challenges faced, or other pertinent findings and participation in shared learning.

Summary of Demonstration Year Activities

In DY 6 (November 2010-May 2011), UCSF Medical Center (UCSFMC) achieved stated milestones (e.g., process and improvement goals) for our interventions. The following describes progress made, challenges faced and lessons learned.

(Category 1) Infrastructure Development:

Expanded Primary Care Capacity: A strategic planning group to steer and implement the expansion of primary care capacity was organized and UCSFMC's Department of General Internal Medicine relocation was completed. A total square footage increased from13,416 to 23,446, resulting in a capacity to increase visit volume by at least 10,000.
Challenges/Lessons Learned: Recruitment of primary care providers has been more challenging than anticipated because of the local and regional competition for a limited supply of these professionals. Traditional forms of advertising through journals has been ineffective. However, the use of social networks including Craigs List has helped generate a larger number of candidates. In addition, we have consolidated our primary care recruitment into a single process (rather than each clinic doing their own recruitment) which has allowed candidates more position choices.

Implement and Utilize Disease Management Registry Functionality: The implementation and rollout of a new EPIC Electronic Health Record (EHR) occurred in April 2011 at several UCSFMC primary care practices and the remaining primary care practices will be live on the on the EHR by June 2011. A review and assessment of diabetes and anticoagulation therapy registry functionality and panel management was conducted and ongoing assessment and development of EHR tools for registry and panel management continues throughout and after the period that all UCSFMC ambulatory clinics are activated on the EHR.
Challenges/Lessons Learned: The implementation and rollout of EPIC EHR in the ambulatory clinics is on track from a schedule perspective. Challenges remain in developing and evolving reports and tools for registry and panel management as we continue to struggle to appropriately identify and assign the correct primary care provider for each patient in our system.

Enhance Performance Improvement and Reporting Capacity: Continuous quality improvement reporting methodologies have been established to report transition in care metrics for Congestive Heart Failure (CHF) patients.
1) A dashboard reflecting key performance indicators in quality (e.g., follow up appointments, home care referrals, post discharge follow up, phone calls, 30 day readmissions) has been developed. Data are monitored and reported monthly to the UCSFMC Readmissions Taskforce.
2) Recruitment is underway to secure a position to lead business intelligence/data warehousing efforts.
Challenges/Lessons Learned: Timing of this initiative is a challenge, as the organization is concurrently implementing a new electronic health record for inpatient and ambulatory care. New reporting requirements from the state and federal government reinforce the need for an integrated data reporting system.

(Category 2) Innovation and Redesign:

Expand Medical Homes: In addition to increasing capacity, UCSFMC primary care clinics begin to redesign their model of care to transform themselves into high performing, Patient Centered Medical Homes (PCMHs). As a first step toward meeting the three key elements of PCMHs {1) proactive panel management, 2) primary-care embedded case managers for high risk patients, and 3) medical assistants and other staff trained for new team-based models of primary care}, UCSFMC Center for Excellence in Primary Care (CEPC) Department of Family and Community Medicine has developed training material for panel managers/health coaches and care managers that included a curriculum, "Training RNs to Provide Care Management for Complex Patients," and two online training modules for Panel Manager Training and Head Coach Training. Staff training has begun.
Challenges/Lessons Learned: In order to support this new model, UCSFMC will need to engage change management strategies to enable education, early adoption and sustainability.

Increase Specialty Care Access/Redesign Referral Process: A team of specialty practice leaders have been identified from Cardiology, Dermatology, Orthopedics and Neurology to manage and contribute to the redesign of the specialty referral process {for a subset of UCSFMC specialty clinics} in order to reduce the appointment scheduling lag and reduce available appointment time, thus improving access for new patients.
A consultant group has been retained to lead improvement efforts and metrics have been identified.

Challenges/Lessons Learned: Using outside consultants who have achieved these exact goals in other institutions has been a critical factor in generating both enthusiasm and persistence among our specialty care leaders.

Implement/Expand Care Transition Programs: UCSFMC's Readmissions Taskforce developed a standardized CHF protocol for effectively communicating with patients & families during and post discharge to improve patient adherence to discharge and follow-up instructions. This was part of an organization-wide care transitions program that aims to integrate the hospitalization with a safe transition to "home" as an episode of care and thus, reduce the rate of readmissions. Protocol components include: Heart Failure patient education (utilizing Teach Back methodology); post discharge phone call within 7 days of discharge; Home Health referrals at discharge; and follow up appointments within 7 days of discharge.

Challenges/Lessons Learned: Process monitoring has suggested the need for greater standardization and accountability of healthcare team members and reinforcement of patient education teach back methodology. Additional assessment is needed to determine the resources required to expand the program to additional populations. Case management support may be required in the ambulatory setting to address follow up needs and facilitate transition from hospital to outpatient (primacy care practice, referral) setting.

(Category 4) Urgent Improvement in Quality and Safety:

Improve Severe Sepsis Detection and Management: An indepth analysis of characteristics of our patients with sepsis was conducted, tracking mortality and evidence based interventions. Data were compared with national recommended practices and we established a sepsis mortality baseline using INLP definitions (27.97% for FY2010).

UCSF is establishing a comprehensive infrastructure to evaluate current practices, and implement and track compliance with the sepsis resuscitation "bundle of care" interventions. Allocation of new resources to support this interdisciplinary effort is underway.

Challenges/Lessons Learned:

1) Building consensus on optimal resuscitation and management bundles has been challenging as some elements of the IHI/SCCM Surviving Sepsis Campaign care bundles have been controversial and lack strong evidence. The 2008 guidelines update reported that for a number of elements the tradeoff between desirable and undesirable effects is less clear and the strength of evidence was low to very low.

2) Monitoring compliance with accepted resuscitation and management bundles will require significant resources for manual chart abstraction and/or development of an automated process for compliance monitoring. Significant resources will be required to support routine screening for and response to positive sepsis indicators.

3) Well calibrated benchmarking of sepsis mortality is complex and confounded by many variables such as patient population, transfers from other hospitals, present on admission when the opportunity for early resuscitation measures has passed, coding practice differences and attribution errors when sepsis is not the cause of death.

Central Line-Associated Bloodstream Infection (CLABSI) Prevention: As a method to reduce CLABSI, a neutral needleless connector device (infusion "cap") was implemented within inpatient & outpatient settings in February 2011. Training/education was completed over 8 consecutive days on all shifts, available to all inpatient and outpatient users (approximately 700 nurses and providers trained). Ongoing education continues and re-education has been instituted within Nursing Annual Review.

Patient care unit-specific and aggregate CLABSI rates for intensive care and acute care patients are calculated and reported monthly. Individual CLABSI cases are reviewed by an interdisciplinary team in order to identify variations in care and opportunities for improvement.

Challenges/Lessons Learned:

1) A variety of insertion caps exist in the marketplace. Literature provides conflicting results from studies and reported outbreaks associated with the devices, making evidence-based decision-making confounding.

2) Standardizing devices in a facility with both adult and children's hospitals is challenging in order to meet requirements from both populations. Identifying representatives from all user groups, gaining input and agreement is critical to high acceptance of a new product.

3) Internal data suggest CLABSI at UCSFMC are more frequently associated with CL care and maintenance. A validated maintenance "bundle" for CLABSI prevention has not been established in the literature. UCSFMC developed and implemented a "central line maintenance bundle" prior to the baseline timeframe for CLABSI. Monitoring compliance with the "bundle" is resource intensive, yet revealing of systemic improvement opportunities. Periodic review of compliance, analysis of findings, targeted improvement opportunities is one strategy to conserve resources and identify practices.

Surgical Site Infection (SSI) Prevention: An institutional surgical site infection (SSI) and complication profile baseline was established for general surgery, vascular surgery and selected specialty surgical cases using the American College of Surgeon's National Surgical Quality Improvement Program (NSQIP) and presented the data to UCSFMC quality committees. New and expanded methods for SSI surveillance are being developed.

Challenges/Lessons Learned: A side-by-side comparison of SSI identified via NSQUIP and SSI identified by existing surveillance methods by Infection Control revealed a 35% match. Efforts to understand differences in identifying SSI by the two methods continue.

Hospital Acquired Pressure Ulcer (HAPU) Prevention: Over 100 nurses received pressure ulcer prevention intensive training. Education included a pre-test, review of successful strategies and challenges, identify populations of patients at risk, staging review, and risk assessment. Ongoing education continues.

Challenges/Lessons Learned:

1) Staging of pressure ulcers and determination of accurate etiology of skin changes can be challenging to bedside nurses and the availability of expert resources is critical.

2)Trending and reviewing cases as cohorts can increase effectiveness of interventions (how do we treat patients on ECMO with open chests who cannot be turned.)

3)Encouraging all staff from pre-admission to post-discharge to integrate pressure ulcer prevention into their care.

Summary of DPH System's Participation in Shared Learning

UCSF is an active member of the University of California Healthcare Epidemiology Collaborative and Bay Area Patient Safety (BEACON) Collaborative, both of which have a specific focus on reducing CLABSI.

UCSF participates in both BEACON Collaborative and the Avoiding Readmissions Collaborative (ARC), focusing on reducing CHF readmissions.

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DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

Category 1 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*

The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 1 Projects

Expand Primary Care Capacity

Process Milestone: Appoint primary care strategic planning group to plan & implement UCSFMC primary	Yes
Achievement Value	*1.00*
Process Milestone: Relocate General Medical Clinic to larger space at UCSFMC Mt Zion Campus.	Yes
Achievement Value	*1.00*
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 4.20
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 4.20
Incentive Funding Already Received in DY:	$ 4.20
Incentive Payment Amount:	$ -

Category 1 Summary Page

Increase Training of Primary Care Workforce

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Implement and Utilize Disease Management Registry Functionality

Process Milestone: Review current registry capability and assess future needs.	Yes
Achievement Value	*1.00*
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 6.55
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 6.55
Incentive Funding Already Received in DY:	$ 6.55
Incentive Payment Amount:	$ -

Category 1 Summary Page

Enhance Interpretation Services and Culturally Competent Care

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Enhance Urgent Medical Advice

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Introduce Telemedicine

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Enhance Coding and Documentation for Quality Data

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Develop Risk Stratification Capabilities/Functionalities

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Expand Capacity to Provide Specialty Care Access in the Primary Care Setting

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Expand Specialty Care Capacity

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 1 Summary Page

Enhance Performance Improvement and Reporting Capacity

Process Milestone: Develop reporting methodologies that will enable continuous quality improvement.	Yes
Achievement Value	*1.00*
Process Milestone: Participate in a collaborative	Yes
Achievement Value	*1.00*
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 6.05
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 6.05
Incentive Funding Already Received in DY:	$ 6.05
Incentive Payment Amount:	$ -

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
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Category 2 Summary Page

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The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 2 Projects

Expand Medical Homes

Process Milestone: Develop training materials for panel managers/health coaches and care managers	Yes
Achievement Value	*1.00*
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 4.80
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 4.80
Incentive Funding Already Received in DY:	$ 4.80
Incentive Payment Amount:	$ -

Category 2 Summary Page

Expand Chronic Care Management Models

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Redesign Primary Care

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Redesign to Improve Patient Experience

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Redesign for Cost Containment

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Integrate Physical and Behavioral Health Care

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Increase Specialty Care Access/Redesign Referral Process

Process Milestone: Designate personal/team to support and manage the specialty access projec	Yes
Achievement Value	*1.00*
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 6.15
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 6.15
Incentive Funding Already Received in DY:	$ 6.15
Incentive Payment Amount:	$ -

Category 2 Summary Page

Establish/Expand a Patient Care Navigation Program

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Apply Process Improvement Methodology to Improve Quality/Efficiency

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Use Palliative Care Programs

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Conduct Medication Management

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 2 Summary Page

Implement/Expand Care Transitions Programs

Process Milestone: Develop protocols for effectively communicating with patients and families during ar	Yes
Achievement Value	*1.00*
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: Begin monthly data collection and reporting for chosen metrics.	1.00
Achievement Value	*1.00*
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 6.15
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 6.15
Incentive Funding Already Received in DY:	$ 6.15
Incentive Payment Amount:	$ -

Category 2 Summary Page

Implement Real-Time Hospital-Acquired Infections (HAIs) System

Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Process Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
Improvement Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

Category 3 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*

The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 3 Domains

Patient/Care Giver Experience (required)

Undertake the necessary planning, redesign, translation, training and contract negotiations in order to implement CG-CAHPS in DY8 (DY7 only)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Getting Timely Appointments, Care, and Information" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "How Well Doctors Communicate With Patients" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Helpful, Courteous, and Respectful Office Staff" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Patients' Rating of the Doctor" theme to the State (DY8-10)	N/A
Achievement Value	
Report results of CG CAHPS questions for "Shared Decisionmaking" theme to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 3 Summary Page

Care Coordination (required)

Report results of the Diabetes, short-term complications measure to the State (DY7-10)	N/A
Achievement Value	
Report results of the Uncontrolled Diabetes measure to the State (DY7-10)	N/A
Achievement Value	
Report results of the Congestive Heart Failure measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Chronic Obstructive Pulmonary Disease measure to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Preventive Health (required)

Report results of the Mammography Screening for Breast Cancer measure to the State (DY7-10)	N/A
Achievement Value	
Reports results of the Influenza Immunization measure to the State (DY7-10)	N/A
Achievement Value	
Report results of the Child Weight Screening measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Pediatrics Body Mass Index (BMI) measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Tobacco Cessation measure to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 3 Summary Page

At-Risk Populations (required)

Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State (DY7-10)	N/A
Achievement Value	
Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10)	N/A
Achievement Value	
Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Pediatrics Asthma Care measure to the State (DY8-10)	N/A
Achievement Value	
Report results of the Optimal Diabetes Care Composite to the State (DY8-10)	N/A
Achievement Value	
Report results of the Diabetes Composite to the State (DY8-10)	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

Category 4 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*

The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75. 0.5, 0.25 or 0.
The red boxes indicate Total Sums.

Category 4 Interventions

Severe Sepsis Detection and Management *(required)*

Compliance with Sepsis Resuscitation bundle (%)	N/A
Achievement Value	
Sepis Mortality (%)	N/A
Achievement Value	
Optional Milestone:Conduct sepsis management gap analysis comparing national recommended practi	Yes
Achievement Value	*1.00*
Optional Milestone: Establish UCSFMC sepsis mortality baseline using INLP definitions.	Yes
Achievement Value	*1.00*
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 0.76
Total Sum of Achievement Values:	2.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 0.76
Incentive Funding Already Received in DY:	$ 0.76
Incentive Payment Amount:	$ -

Category 4 Summary Page

Central Line Associated Blood Stream Infection Prevention *(required)*

Compliance with Central Line Insertion Practices (CLIP) (%)	N/A
Achievement Value	
Central Line Bloodstream Infection (Rate per 1,000 patient days)	N/A
Achievement Value	
Optional Milestone: Redesign a process of care to improve performance.	Yes
Achievement Value	*1.00*
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 1.14
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 1.14
Incentive Funding Already Received in DY:	$ 1.14
Incentive Payment Amount:	$ -

Category 4 Summary Page

Surgical Site Infection Prevention

Rate of surgical site infection for Class 1 and 2 wounds (%)	N/A
Achievement Value	
Optional Milestone: Based on NSQIP, establish an institutional SSI and complication profile baseline for	Yes
Achievement Value	*1.00*
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 1.14
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 1.14
Incentive Funding Already Received in DY:	$ 1.14
Incentive Payment Amount:	$ -

Hospital-Acquired Pressure Ulcer Prevention

Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)	N/A
Achievement Value	
Optional Milestone: Educate at least 100 nurses on pressure ulcer prevention and wound care.	Yes
Achievement Value	*1.00*
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ 0.76
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	1.00
Achievement Value Percentage:	100%
Eligible Incentive Funding Amount:	$ 0.76
Incentive Funding Already Received in DY:	$ 0.76
Incentive Payment Amount:	$ -

Category 4 Summary Page

Stroke Management

` Discharged on Antithrombotic Therapy	N/A
Achievement Value	
Anticoagulation Therapy for Atrial Fibrillation/Flutter	N/A
Achievement Value	
Thrombolytic Therapy	N/A
Achievement Value	
Antithrombotic Therapy by End of Hospital Day 2	N/A
Achievement Value	
Discharged on Statin Medication	N/A
Achievement Value	
Stroke Education	N/A
Achievement Value	
Assessed for Rehabilitation	N/A
Achievement Value	
` Stroke mortality rate	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Funding Already Received in DY:	$ -
Incentive Payment Amount:	

Category 4 Summary Page

Venous Thromboembolism (VTE) Prevention and Treatment

VTE Prophylaxis (%)	N/A
Achievement Value	
Intensive care unit VTE prophylaxis (%)	N/A
Achievement Value	
VTE patients with anticoagulation overlap therapy (%)	N/A
Achievement Value	
VTE patients receiving unfractionated heparin with dosages/platelet count monitoring (%)	N/A
Achievement Value	
VTE discharge instructions (%)	N/A
Achievement Value	
Incidence of potentially preventable VTE (%)	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Payment Already Received in DY:	$ -
Incentive Payment Amount:	

Category 4 Summary Page

Falls with Injury Prevention

Prevalence of patient falls with injuries (Rate per 1,000 patient days)	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
Optional Milestone: _____	N/A
Achievement Value	
DY Total Computable Incentive Amount:	$ -
Total Sum of Achievement Values:	-
Total Number of Milestones:	-
Achievement Value Percentage:	
Eligible Incentive Funding Amount:	
Incentive Payment Already Received in DY:	$ -
Incentive Payment Amount:	

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: * Yes

Category 1: Expand Primary Care Capacity

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
* The yellow boxes indicate where the DPH system should input data
The black boxes indicate Milestones and will automatically populate and flow to summary sheets
The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Expand Primary Care Capacity

DY Total Computable Incentive Amount: * $ 4.20

Incentive Funding Already Received in DY: *

Process Milestone: Appoint primary care strategic planning group to plan & implement UCSFMC primary care expa
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

On 12/22/2010, the Dean (UCSF School of Medicine), in conjunction with UCSFMC CEO, appointed a strategic planning group to plan and implement the expansion of primary care capacity.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: Relocate General Medical Clinic to larger space at UCSFMC Mt Zion Campus.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

UCSFMC Dept of General Internal Medicine relocation to UCSFMC Mt. Zion Campus (Post Street) was completed by December 2010. Total square footage increased from 13,416 to 23,446, resulting in a capacity to increase visit volume by at least 10,000.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 1: Expand Primary Care Capacity

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Primary Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Expand Primary Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 1: Implement and Utilize Disease Management Registry Functionality

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
* The yellow boxes indicate where the DPH system should input data
The black boxes indicate Milestones and will automatically populate and flow to summary sheets
The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Implement and Utilize Disease Management Registry Functionality

DY Total Computable Incentive Amount: * $ 6.55

Incentive Funding Already Received in DY: *

Process Milestone: Review current registry capability and assess future needs.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

Background: The implementation and rollout of a new EPIC Electronic Medical Record (EMR) at UCSFMC (known as APeX, Advancing Patient centered Excellence) will occur in April 2010 at several UCSFMC primary care practices.
Registry Assessment: In Feb 2011 a review and assessment of diabetes and anticoagulation therapy registry functionality and panel management was conducted. For Diabetes: APeX to provide real-time, clinician-specific reports on standard measures such as % patients with HbA1c < 7.0% or 8.0% or % patients with LDL < 100 or LDL <130 and SBP <140 mm Hg. For Anticoagulation Therapy: registry will allow for more sophisticated tracking and data management tools, and enables calculation of quality metrics such as time-in-therapeutic range. Registry to include all patients on anticoagulation seen in the practice.
Future Registry Capability: Effective April 2011, the primary care practices will utilize standard Epic registry reports to fulfill Physician Quality Reporting Initiatives (PQRI) reporting requirements. There will be a collection of reports available at go-live for the monitoring and management of patient populations based on a variety of criteria including diagnosis or therapy (e.g., Diabetes, Anticoagulation Therapy). APeX reports can act as registries and can be sorted by provider or clinic or can include a roll up of organization-wide data. They will include patient name, demographic information, Primary Care Provider, diagnosis, medications, and pertinent studies. The reports will also include best contact information including whether or not the patient is accessing the UCSFMC patient portal, MyChart. If they are, we can send individual or group messages with reminders to come into clinic or with hints on how better to improve their health.
Future Needs Assessment: Further assessment and development of APeX tools for registry and panel management will be achieved during and after the period that all UCSFMC ambulatory clinics are activated on APeX.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

Category 1: Implement and Utilize Disease Management Registry Functionality

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*
Achievement Value	

Category 1: Implement and Utilize Disease Management Registry Functionality

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Implement and Utilize Disease Management Registry Functionality

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Implement and Utilize Disease Management Registry Functionality

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 1: Enhance Performance Improvement and Reporting Capacity

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
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Enhance Performance Improvement and Reporting Capacity

DY Total Computable Incentive Amount: * $ 6.05

Incentive Funding Already Received in DY: *

Process Milestone: Develop reporting methodologies that will enable continuous quality improvement.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

A dashboard report for targeted population, patients with primary & secondary diagnosis of Congestive Heart Failure (CHF), was developed. Transitions in care quality improvement metrics reflect:
- follow up phone call within 7 days of discharge
- a home care referral upon discharge
- readmission within 30 days

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: Participate in a collaborative
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

Paticipation in the BEACON Collaborative: San Francisco/Bay Area patient safety collaborative consists of hospitals focusing on improving patient safety.
List of Participating Hospitals Link: www.beaconcollaborative.org
Participated within 3 events between Nov 2010-Feb 2011.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Category 1: Enhance Performance Improvement and Reporting Capacity

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Performance Improvement and Reporting Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 1: Enhance Performance Improvement and Reporting Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 2: Expand Medical Homes

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
* The yellow boxes indicate where the DPH system should input data
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The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Expand Medical Homes

DY Total Computable Incentive Amount: * $ 4.80

Incentive Funding Already Received in DY: *

Process Milestone: Develop training materials for panel managers/health coaches and care managers
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

In February 2011, a curriculum, "Training RNs to Provide Care Management for Complex Patients," was developed by UCSFMC Center for Excellence in Primary Care (CEPC) Department of Family and Community Medicine. It includes two online training modules for Panel Manager Training and Head Coach Training. Curriculum addresses: (1) Introduction to complex case management; (2) Introduction to head coaching; (3) Four Pilars of Care Management: (a) medication self management; (b) use of dynamic patient-centered record; (c) primary care and specialist follow up; and (d) knowledge of red flags; (4) Assessments; (5) Clinical Review; and (6) Care Plans.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Expand Medical Homes

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Expand Medical Homes

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Expand Medical Homes

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 2: Increase Specialty Care Access/Redesign Referral Process

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
* The yellow boxes indicate where the DPH system should input data
The black boxes indicate Milestones and will automatically populate and flow to summary sheets
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Increase Specialty Care Access/Redesign Referral Process

DY Total Computable Incentive Amount: * $ 6.15

Incentive Funding Already Received in DY: *

Process Milestone: Designate personal/team to support and manage the specialty access project
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

A team of specialty practice leaders were identified from Cardiology, Dermatology, Orthopedics and Neurology to manage and contribute to the specialty access project. A consultant group has been retained to lead improvement efforts. The metrics for improvement have been identified and a kick -off meeting took place in Jan 2011.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Increase Specialty Care Access/Redesign Referral Process

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Increase Specialty Care Access/Redesign Referral Process

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Increase Specialty Care Access/Redesign Referral Process

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 2: Implement/Expand Care Transitions Programs

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
* The yellow boxes indicate where the DPH system should input data
The black boxes indicate Milestones and will automatically populate and flow to summary sheets
The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Implement/Expand Care Transitions Programs

DY Total Computable Incentive Amount: * $ 6.15

Incentive Funding Already Received in DY: *

Process Milestone: Develop protocols for effectively communicating with patients and families during and post discharge to improve adherence to discharge and follow-up instructions.

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

A Heart Failure (HF) Program & Protocol was developed & approved by the CHF Readmissions Taskforce in Feb 2011. It consists of 4 components:
• HF Patient Education (utilizing Teach-Back methodology)
• Post discharge call within 7 days of discharge
• Home Health Referrals at discharge
• Follow up appt within 7 days of discharge
The patient population: patients with primary and secondary diagnosis of CHF.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value: 1.00

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement: N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement/Expand Care Transitions Programs

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 2: Implement/Expand Care Transitions Programs

Improvement Milestone: Begin monthly data collection and reporting for chosen metrics.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	1.00
Denominator (if absolute number, enter "1")	*	1.00
Achievement		1.00
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	

A CHF Readmission monthly dashboard was developed. It monitors the CHF patient population. The metrics include:
- follow up phone call within 7 days of discharge
- home care referral upon discharge
- 30 day readmission rates

November 2011 - current: data presented monthly to the CHF Readmissions Task Force.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	1.00
Achievement Value		1.00

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	
Achievement Value		

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	
Achievement Value		

Category 2: Implement/Expand Care Transitions Programs

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

Category 4: Severe Sepsis Detection and Management *(required)*

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

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Severe Sepsis Detection and Management

DY Total Computable Incentive Amount:	*	$ 0.76
Incentive Funding Already Received in DY:	*	

Compliance with Sepsis Resuscitation bundle (%)

Numerator	*	
Denominator	*	
% Compliance		N/A
DY Target (from the DPH system plan)	*	
Achievement Value		

Sepis Mortality (%)

Numerator	*	
Denominator	*	
% Mortality		N/A
DY Target (from the DPH system plan)	*	
Achievement Value		

Optional Milestone:Conduct sepsis management gap analysis comparing national recommended practices
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	Yes

A sepsis management gap analysis of recommended practices compared to UCSFMC practices was completed and reported to UCSFMC Quality Improvement Executive Committee (QIEC) on 11/20/2010.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Optional Milestone: Establish UCSFMC sepsis mortality baseline using INLP definitions.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes

Category 4: Severe Sepsis Detection and Management *(required)*

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * Yes

February 2011: established UCSFMC sepsis mortality baseline using the Integrated Nurse Leadership Program (INLP) = 27.97% (FY2010).

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * Yes

Achievement Value 1.00

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Severe Sepsis Detection and Management *(required)*

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

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Central Line Associated Blood Stream Infection

DY Total Computable Incentive Amount:	*	$ 1.14
Incentive Funding Already Received in DY:	*	
Compliance with Central Line Insertion Practices (CLIP) (%)		
Numerator	*	
Denominator	*	
% Compliance		N/A
DY Target (from the DPH system plan)	*	
Achievement Value		
Central Line Bloodstream Infection (Rate per 1,000 patient days)		
Numerator	*	
Denominator	*	
Infection Rate		N/A
DY Target (from the DPH system plan)	*	
Achievement Value		

Optional Milestone: Redesign a process of care to improve performance.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	Yes

A neutral needleless connector device (cap) was implemented in inpatient & outpatient settings at UCSF Medical Center and Benioff Children's Hospital in February 2011. Training/education was completed over 8 consecutive days on all shifts, available to all inpatient and outpatient users (approximately 700 nurses and providers trained). Ongoing education continues.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Central Line Associated Blood Stream Infection (CLABSI) *(required)*

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 4: Surgical Site Infection Prevention

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
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Surgical Site Infection Prevention

DY Total Computable Incentive Amount:	*	$ 1.14
Incentive Funding Already Received in DY:	*	
Rate of surgical site infection for Class 1 and 2 wounds (%)		
Numerator	*	
Denominator	*	
% Infection Rate		N/A
DY Target (from the DPH system plan)	*	
Achievement Value		

Optional Milestone: Based on NSQIP, establish an institutional SSI and complication profile baseline for general surgery, vascular surgery and selected specialty surgical cases

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	Yes

We established an institutional surgical site infection (SSI) and complication profile baseline for general surgery, vascular surgery and selected specialty surgical cases using the American College of Surgeon's National Surgical Quality Improvement Program (NSQIP) and presented the data to our Clinical Performance Improvement Committee (CPIC) on 12/26/2010.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 4: Surgical Site Infection Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Surgical Site Infection Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
DPH SYSTEM: The University of California, San Francisco Medical Center
REPORTING YEAR: DY 6
DATE OF SUBMISSION: 5/15/2011

REPORTING ON THIS PROJECT: *

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Below is the data reported for the DPH system.
* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*
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The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Hospital-Acquired Pressure Ulcer Prevention

DY Total Computable Incentive Amount:	*	$ 0.76
Incentive Funding Already Received in DY:	*	
Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)		
Numerator	*	
Denominator	*	
Prevalence (%)		N/A
DY Target (from the DPH system plan)	*	
Achievement Value		

Optional Milestone: Educate at least 100 nurses on pressure ulcer prevention and wound care.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*	
Denominator (if absolute number, enter "1")	*	
Achievement		Yes
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	*	Yes

During the period between November 2010 through March 2011: 105 nurses were educated on pressure ulcer prevention and wound care.
The course objectives focus on: Prevention, Identification, Treatment and Case Review Analysis.
The curriculum reviews: (a) Patient and family focused management; (b) Risk assessment; (c) Skin Assessment; (d) Risk factors; (e) Systems approach to pressure ulcer prevention; (f) Staging; and (g) Wound care. Ongoing education continues.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*	Yes
Achievement Value		1.00

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement N/A

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value