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Laurie Green, M.D. Vice President

Edward A. Chow, M.D. Commissioner

Susan Belinda Christian, J.D. Commissioner

Cecilia Chung Commissioner

Suzanne Giraudo ED.D Commissioner

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HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

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MINUTES

JOINT CONFERENCE COMMITTEE FOR ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL AND TRAUMA CENTER Tuesday, June 27, 2023 3:00 p.m. 101 Grove Street, Room 300 San Francisco, CA 94102 & via Webex

1) CALL TO ORDER

Present: Commissioner Edward A. Chow, M.D., Chair

Commissioner Laurie Green, M.D.

Commissioner Susan Belinda Christian, J.D.

Staff Present: Susan Ehrlich MD, Lisa Winston MD, William Huen MD, Emma Moore, Emma Perez, Gabriel

Ortiz MD, James Frieberg, Andrea Turner, Gillian Otway, Jennifer Boffi, Claire Horton MD, Angelica Journagin, Adrian Smith, Emma Moore, Basil Price, Jack Chase MD, LukeJohn Day MD, Hemal Kanzaria

MD, Melanie Thomas MD, Basil Price

The meeting was called to order at 3:02pm.

2) <u>APPROVAL OF THE MINUTES OF THE MAY 23, 2023 ZUCKERBERG FRANCISCO GENERAL JOINT CONFERENCE COMMITTEE MEETING</u>

Action Taken: The ZSFG JCC unanimously approved the minutes.

3) REGULATORY AFFAIRS REPORT

Emma Moore, Director of Regulatory Affairs, presented the item.

Commissioner Comments:

Commissioner Chow asked for clarification regarding the reason for the HAPI plan of correction. Ms. Moore stated that due to COVID deployments, the policy review process was interrupted. ZSFG has identified this gap and actively addressing it through formal policy review.

4) TRANSFORMING MENTAL AND BEHAVIORAL HEALTH OVERVIEW

Hemal Kanzaria, M.D., Medical Director, Department of Care Coordination; Jack Chase, M.D., Associate Professor, Family Community Medicine; & Melanie Thomas, M.D., Director, Solid Start Initiative at SFGH)

Commissioner Comments:

Commissioner Green asked for more information regarding what success would look like for the identified population. Dr. Kanzaria, stated that the team sees about 3-5 patients each day; approximately 8,000 patients have been seen since the program's inception. He noted that each patient's situation and treatment goals differ. Some may need services such as food or housing. Others have a broad range of service and practical needs. They utilize EPIC to track ongoing service needs. The team does not track community access of services. The team has kept approximately 1,000 people out of the hospital; the team has distributed gift cards, linkages to community mental health, and other services.

Commissioner Green asked if there is any inter-hospital coordination for unhoused patients who show up at a hospital and have not had prenatal care; she added that since Sutter moved its hospital to the Tenderloin, there are more pregnant patients showing up without prenatal care and with many service needs. She also noted that in her clinical experience, some pregnant patients test positive for drugs, and asked how ZSFG handles these situations in regard to Child Protective Services. Dr. Thomas stated that there is effort to coordinate across-hospitals in regard to pregnant patients; however there is no organized system. Team Lily is often the program who reaches out to provide case management for pregnant patients in need of services.

Commissioner Christian noted that some patients who are incarcerated may come through the ZSFG Emergency Department; she asked how these individuals may access additional services. Dr. Chase stated that when some incarcerated patients come through the Emergency Department, they can be given information regarding resources to access upon their release from jail. Dr. Thomas stated that the OB physician working with Team Lily spends part of one day per week providing care to incarcerated pregnant people in jail. This provides some service continuity for these individuals. She also noted that the program works closely with Children's Protective Services, The Homeless Prenatal Program, and Family Treatment Court.

Commissioner Christian asked if ZFSG programs assist people who are incarcerated and coming to ZSFG for care, in regard to housing or accessing a community treatment bed. Dr. Chase and Thomas stated that program staff often work with incarcerated individuals, parole/probation officers, and other jail officials on community discharge plans.

Commissioner Christian suggested that this group present to the Commission each year.

Commissioner Chow asked how patients access these programs. Dr. Kanzaria stated that for Social Medicine, clinicians or medical providers refer patients; patients also self-refer via the website. The programs assist with patient-self identified needs. The programs have developed deep partnerships with ZSFG Departments and community programs. He noted that food insecurity is a very common need, so the teams have developed pathways to help patients access these services.

5) TRUE NORTH SCORECARD PRESENTATION

Susan Ehrlich, M.D., Chief Executive Officer, presented the item.

Commissioner Comments:

Commissioner Chow asked for clarification regarding the timeline used for data collection of "Achieving Safe and Equitable Patient Care." Dr. Winston stated that the data represents a 12-month rolling average; this is different than the rest of the scorecard which is calendar-based. Commissioner Chow suggested that an asterisk be added to clarify the timeline for this dataset.

Commissioner Green asked how goals of "Achieving Safe and Equitable Patient Care," metrics relate to CMS standards. Mr. Smith stated that there are targets and goals associated with star-rating and targets and goals separately published by the National Healthcare Safety Network.

Commissioner Green asked for a reminder of the lag time between the data and star-ratings. Mr. Smith stated that the lag time varies between 2-4 years. The work being conducted now will have an impact on star ratings assigned in 2025.

Regarding the "Achieving Safe and Equitable Staff Experience" metrics, Commissioner Green asked when ZSFG will have data collected and analyzed. Mr. Turner stated that by the end of the year, ZSFG should have one year of data collected and analyzed.

Commissioner Chow asked how data being collected during this time is used to help motivate progress. Dr. Ehrlich stated that there will be reports out of the Safe system in the next few months, but it will take time for analysis to understand the patterns. She noted that reporting will likely increase due to the ease of the new reporting system.

Regarding "Revenue Cycle Optimization" metrics, Commissioner Green requested that lower-level-of-care data be separated to better understand the rest of the data.

Commissioner Chow suggested that the Task Force identify categories of denials for reports to the ZSFG JCC.

Commissioner Christian asked about the "Likelihood to recommend hospital to friends and family," metric. She noted that it is possible that the effort to increase this metric may in itself improve the results. She asked if it is possible to ask the reason why people score this metric as they do. Dr. Ehrlich stated that immediate feedback Emergency Department patients is very helpful via text, versus the mailed-in surveys for inpatients.

6) <u>ZSFG CHIEF EXECUTIVE OFFICER'S REPORT AND EMERGENCY DEPARTMENT NEWSLETTER</u>

Susan Ehrlich, M.D., Chief Executive Officer, presented the item.







On June 8th ZSFG participated in a Mass Casualty Incident (MCI) functional exercise with DPH, DEM, SFFD, EMSA, OCME and nine other local hospitals including UCSF, CPMC, KAISER, VA and others. The MCI exercise is part of an annual series of tabletop, functional and full-scale exercises done city-wide and with the city's Public Safety agencies and other local hospitals as needed.

An MCI functional exercise aims to help ZSFG practice handling a surge of trauma patients after a mass incident occurs. This month's particular drill centered around a fictional scenario that included a bombing and shooting during a city event that drew over 100,000 victims. Throughout the exercise, our hospital managed a surge of trauma patients; activated the Hospital Incident Command System (HICS); tracked and triaged patients by working with local hospitals and deploying resources such as staff and equipment; and identified various communication channels to provide information to staff and to the public such as media interviews, press conferences, press releases, Everbridge notifications and social media.

Practices like these will keep ZSFG ready and resilient in times of need. Many thanks to DPH's Public Health Emergency Preparedness and Response (PHEPR) for organizing this exercise and to Lann Wilder, Chauncey Jackson, and Jeff Schmidt, for leading and coordinating our emergency efforts at ZSFG.







QUALITY 2. 4A-SNF Re-certification Survey

From June 5th through June 8th, four surveyors from the California Department of Public Health conducted our annual 4A-Skilled Nursing Facility (SNF) re-certification survey! This survey allowed 4A-SNF to showcase the high-quality care they provide to their residents every day. Both the 4A-SNF and Food and Nutrition Services (FNS) teams demonstrated incredible collaboration and teamwork. The surveyors complimented the staff on their engagement and dedication to their patients.

Congratulations to all our 4A-SNF and FNS staff who participated in this annual re-certification survey! A special thanks to Brianna Stein, Edna Paredes, Kathy Ballou, Suzette DeJesus, Katie Jackson, Christine Struble and Michael Jenkins (along with their teams) for their partnership during this survey!

EQUITY 3. Celebrating AAPI Heritage Month

On May 31st, ZSFG hosted its first Asian American & Pacific Islander (AAPI) Heritage Month staff celebration at the Wellness Center, sponsored by the Department of Diversity, Equity, and Inclusion (DEI) and the Staff Experience team. Employees from across the hospital came together to celebrate the contributions of staff from diverse AAPI cultures. Rosaly Ferrer, Nursing Director for Specialty Clinics, hosted the program and provided opening remarks. Several staff from Asian American or Pacific Islander backgrounds shared their stories and passion for their work at ZSFG in prerecorded interviews.

The videos showcased the following diverse voices:

- Amanda Huynh, Medical Records Technician Quality Management
- Joy Kwong, Nurse Manager Operating Room
- Joseph Nauer, Stores & Equipment Asst Supervisor Materials Management
- Shilu Ramchand, Nurse Manager NICU and Pediatrics
- Jenny Tran, Healthcare Analyst Quality Management
- Maria Velasco, Nurse Practitioner Neurosurgery
- Song Yang, Senior Administrative Analyst Finance

Performances included Thai traditional dance by Pat Reynolds, IT Specialist, and Hawaiian songs from J.D. Puli from Hawaiian Royalty Music. Dr. Susan Ehrlich provided closing remarks, thanking staff for their rich contributions to ZSFG patients and community. Guests enjoyed a delicious spread of Vietnamese sandwiches and salads, Thai desserts, and fruit. Our deepest appreciation to Sophia Lai, Khadijah Grant, Eileen Conklin, and Gretel Chuquipul for organizing this fun and enriching event.







DEVELOPING OUR PEOPLE

4. ZSFG Healthcare Recognitions

This past month, ZSFG celebrated the following healthcare recognitions in honor of our staff and the incredible work they do every single day!

Annual Employee Celebration

On June 13th, ZSFG honored and recognized the employees who have been with the hospital from 10 to 45 years at the online 2022 Employee Celebration and Recognition Event and via the Building 25 mezzanine display. During the virtual celebration, members of our Executive Team including Dr. Susan Ehrlich, Chief Executive Officer, Dr. Elena Fuentes-Afflick, UCSF Vice Dean, Dr. Lisa Winston, Chief of Staff, Dr. Jim Marks, Chief of Performance Excellence, Andrea Turner, Chief Operating Officer, and Christine Falvey, Chief Communications Officer, honored and congratulated our 517 honorees whom together have served our community 8435 years!

Additionally, every year, the ZSFG Executive Team recognizes two individuals who have worked at ZSFG for 30 years or more with the Executive Administrator's award. This year those two individuals were Bilal Chaney and Dr. Paul Garcia.



Mr. Chaney has been a friendly face in Radiology for more than 30 years and is a champion for diversity efforts on our campus. He is kind, welcoming, and very constructive. He is persistent and persuasive and has a welcome smile for everyone he greets. Over the years, Bilal has supported our staff and patients, bringing in new programs and has taken on many roles in his position as Department of Equity and Inclusion Lead for Radiology. With his guidance, the Radiology Department is consistently supporting equity at ZSFG.



Dr. Garcia has been with the Department of Neurology and ZSFG for more than 30 years. A nationally recognized neurologist, he is the director of the Clinical Epilepsy Services at UCSF Medical Center. His university service is focused on assuring opportunity for students and faculty across the campus. He is the go-to person for complex seizures and there are many patients who have benefitted from his expertise. He is a humble, hard-working, and kind person. Dr. Garcia's tremendous leadership and commitment to ZSFG assures, year after year, that our Neurology Service continues to bring world-class medical care to those who need it most.

Our deepest gratitude to Mr. Chaney and Dr. Garcia for their many years of service! ZSFG would also like to thank and congratulate all the honorees for their incredible work and commitment to this organization, our patients and community. Our staff is our greatest asset, and we would not be the remarkable institution we are today without the amazing work they all do every day.

Congratulations Dr. Theodore Miclau!

Dr. Theodore Miclau, MD has been appointed as the Orthopedic Trauma Institute International Chair! As holder of the chair, Dr. Miclau will continue to support the research, teaching and clinical activities related to international orthopaedic trauma activities for the Department of Orthopaedic Surgery at ZSFG. Dr. Miclau is the first recipient of the Orthopaedic Trauma Institute International Chair, which is the first-of-its-kind in the United States, and the first endowed chair at the ZSFG Department of Orthopaedic Surgery.



National Infrastructure Week



The week of May 15th was National Infrastructure week! Led by Terry Saltz, the capital projects and facilities teams serve as the backbone of all our hospital operations. From opening a new, state-of-the-art main hospital building in 2016 to making all the necessary seismic upgrades and clinic renovations to our urgent care and outpatient services building, the capital team is preparing our hospital for a long-lasting future. Thanks to our top-notch team of project managers, engineers and inspectors for continually improving our hospital, which helps meet the growing needs of our community.

From maintaining our beautiful campus gardens to keeping the lights on and the water pumping, our on-call 24/7/365 facilities team makes sure that everything runs smoothly from day to day. Much appreciation goes to the maintenance crews, gardeners, artisans, carpenters, electricians, painters, locksmiths, plumbers, steamfitters, stationary engineers, utility workers and everyone else who maintains our incredible campus. Their work helps create a positive experience for our patients!

2023 EMS Week Awardee



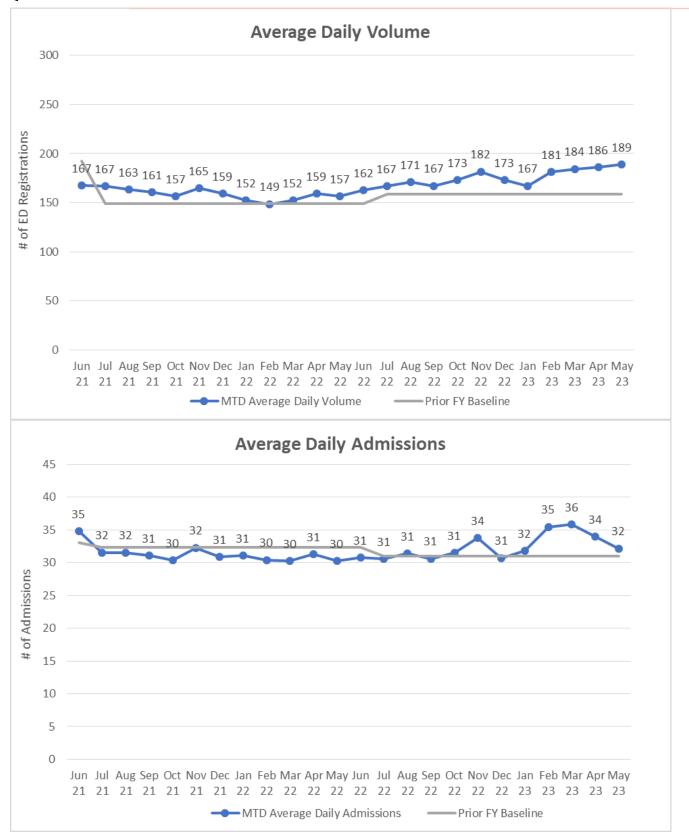
During 2023's #EMSWeek, the City's Department of Emergency Management (DEM) and Emergency Medical Services Agency (EMSA) awarded the 2023 EMS Hospital Provider Award to Dr. Curtis Geier, PharmD, BCCCP – an Emergency Medicine Clinical Pharmacist in the Emergency Department here at ZSFG.

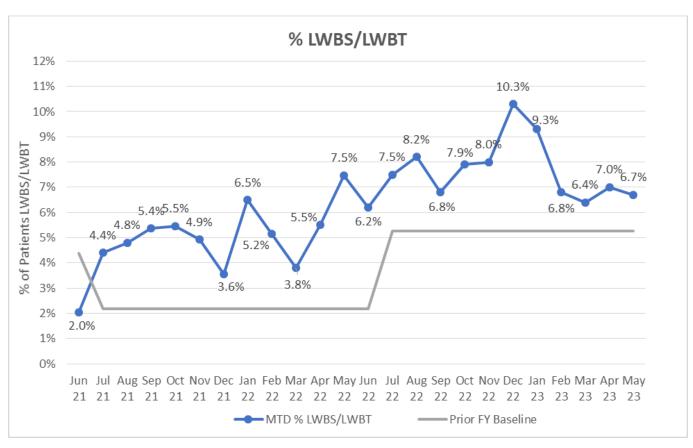
Dr. Geier was recognized for ensuring EMS initiatives, protocols, and medications are accurate and evidence based and for developing protocol changes related to medication shortages and formulary changes. Most recently, he helped develop a major overhaul of EMS epinephrine protocols, to ensure both epinephrine and midazolam were available to EMS, two essential medications they use in their EMS response.

He shares, "I love working collaboratively with our nurses, MEAs, social workers and physicians to care for our amazing patient population. It's rewarding to work as part of this

team truly focusing on not just the emergency that brought someone here, but also the whole patient and the other determinants that may impact their health outcomes both in the short and long term. I am honored to be involved in the training of our amazing pharmacy and physician residents and students. I mostly just appreciate all of the staff and leadership for their support and letting me work in this amazing ED."

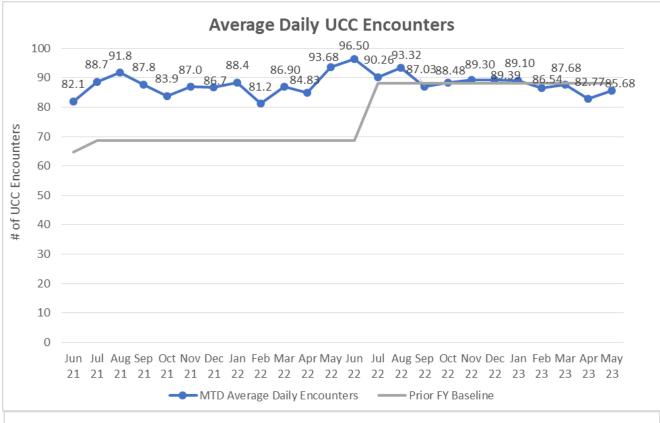
QUALITY Emergency Department Activities

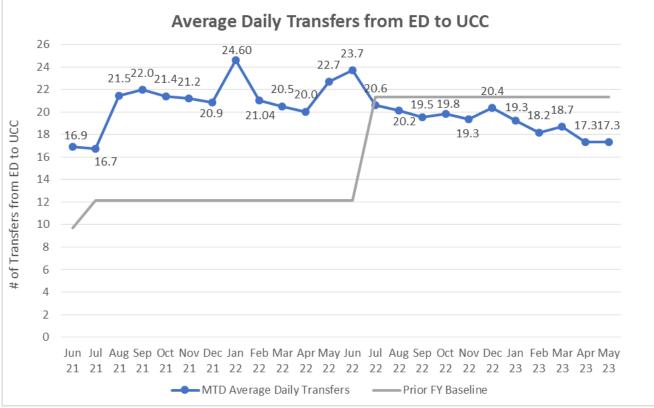


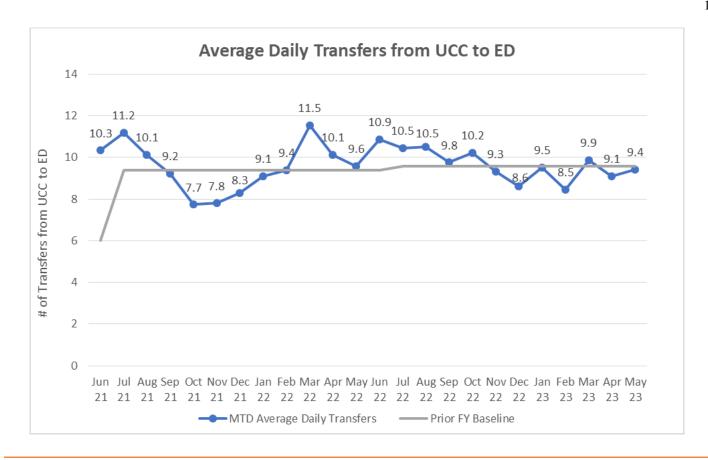




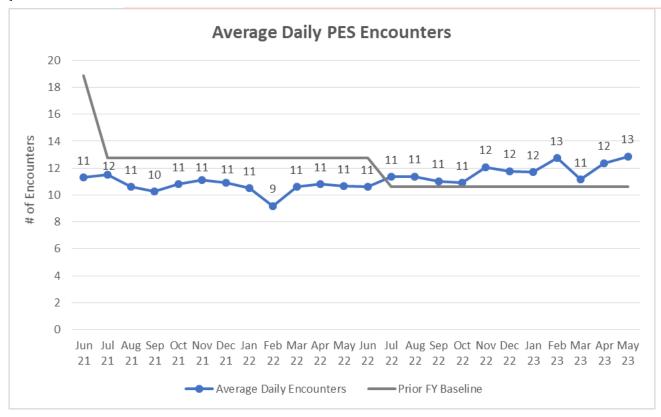
QUALITY Urgent Care Clinic Activities

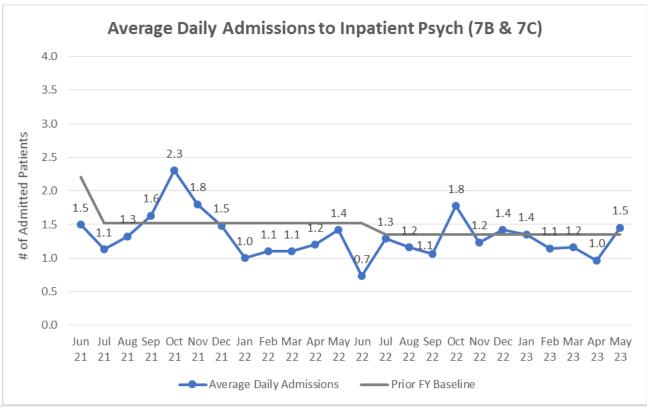


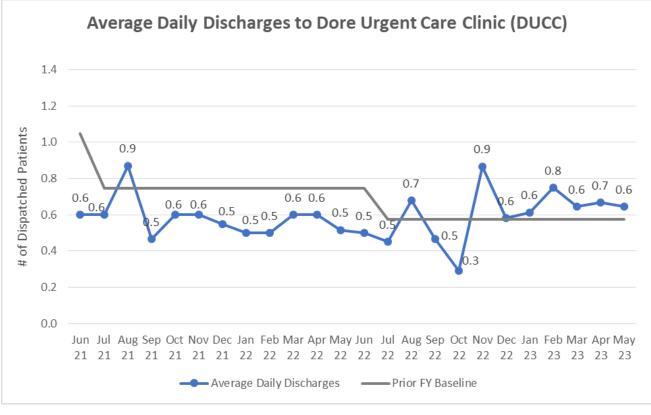


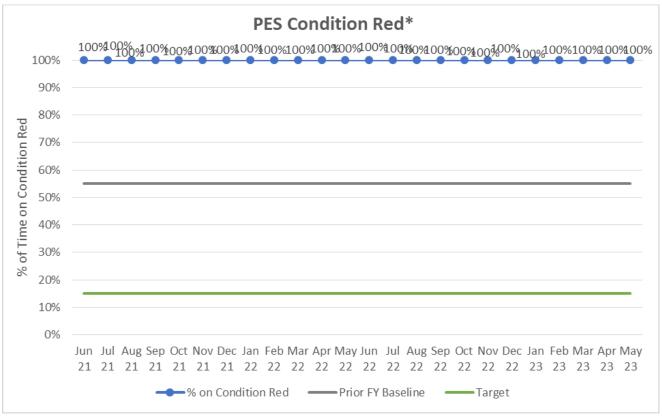


QUALITY Psychiatric Emergency Services Activities









^{*}We are using condition red as an external communication tool to signal that patients can not directly come to PES. They must be cleared by ED first.

QUALITY Average Daily Census

MEDICAL/SURGICAL

Average Daily Census of Medical/Surgical was 187.19 which is 109.47% of budgeted staffed beds and 101.74% of physical capacity. 34.50% of the Medical/Surgical days were lower level of care days: 8.91% administrative and 25.59% decertified/non-reimbursed days.

INTENSIVE CARE UNIT (ICU)

Average Daily Census of ICU was 30.55which is 109.10% of budgeted staffed beds and 52.67% of physical capacity of the hospital.

MATERNAL CHILD HEALTH (MCH)

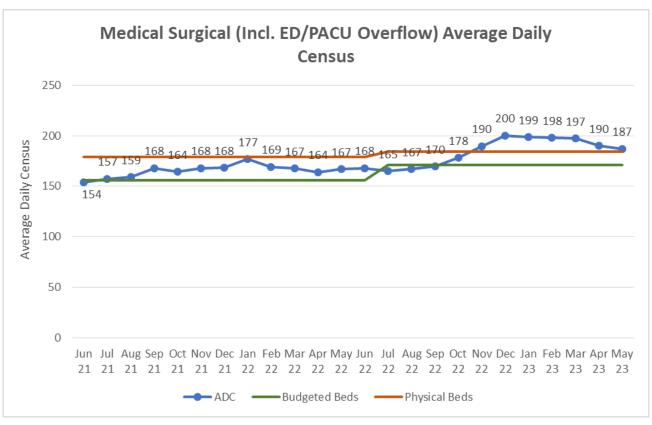
Average Daily Census of MCH was 29.39 which is 97.96% of budgeted staffed beds and 62.35% of physical capacity of the hospital.

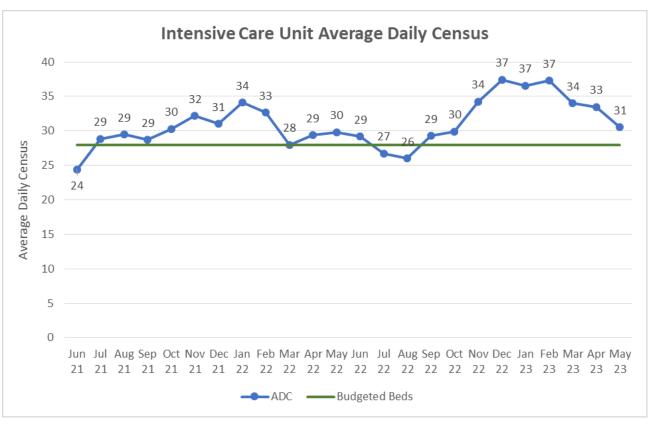
ACUTE PSYCHIATRY

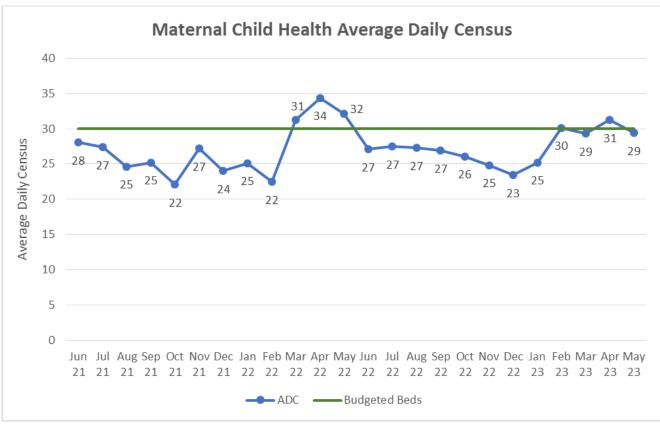
Average Daily Census for Psychiatry beds, excluding 7L, was 41.77, which is 94.94% of budgeted staffed beds and 62.35% of physical capacity (7B & 7C). Average Daily Census for 7L was 5.90, which is 84.33% of budgeted staffed beds (n=7) and 49.19% of physical capacity (n=12). Utilization Review data shows 100.39% non-acute days (23.01% administrative and 77.37% non-reimbursed).

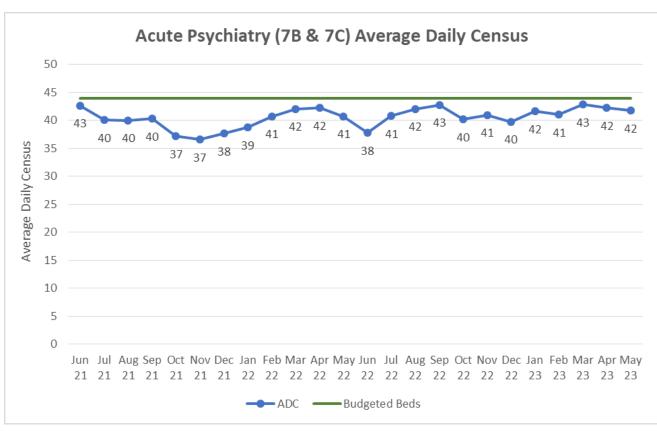
4A SKILLED NURSING UNIT

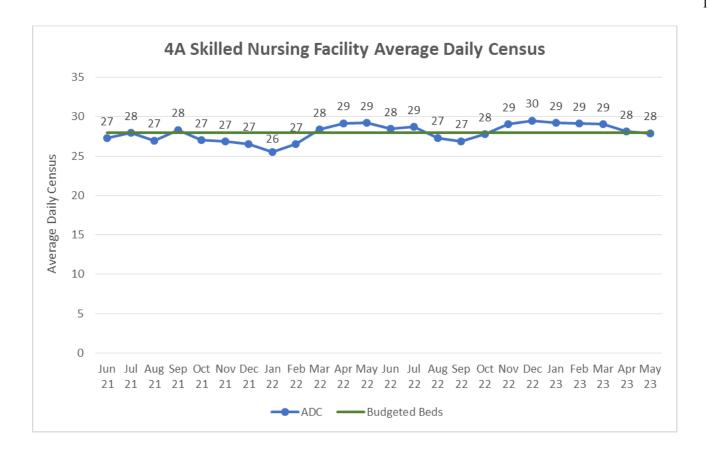
Average Daily Census for our skilled nursing unit was 27.90, which is 99.65% of our budgeted staffed beds and 93.01% of physical capacity.



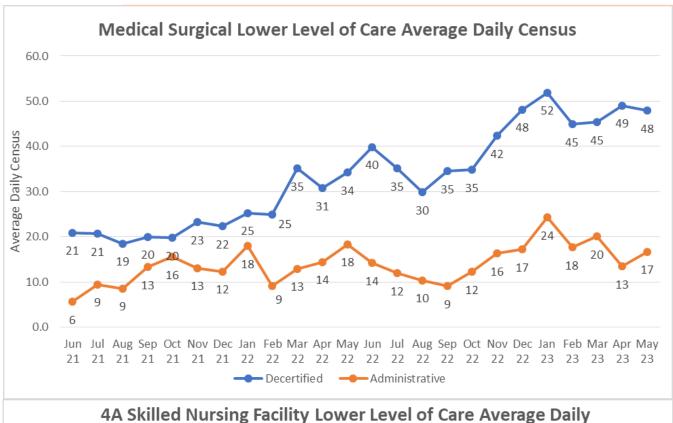


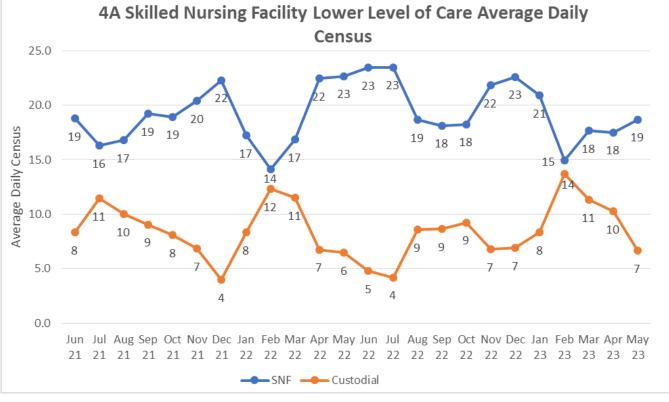


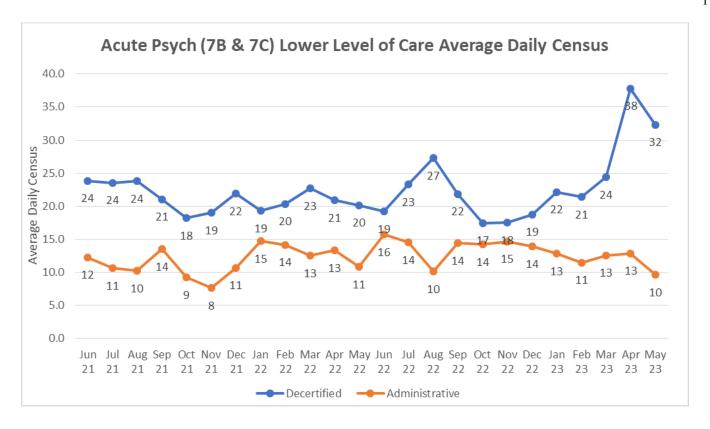




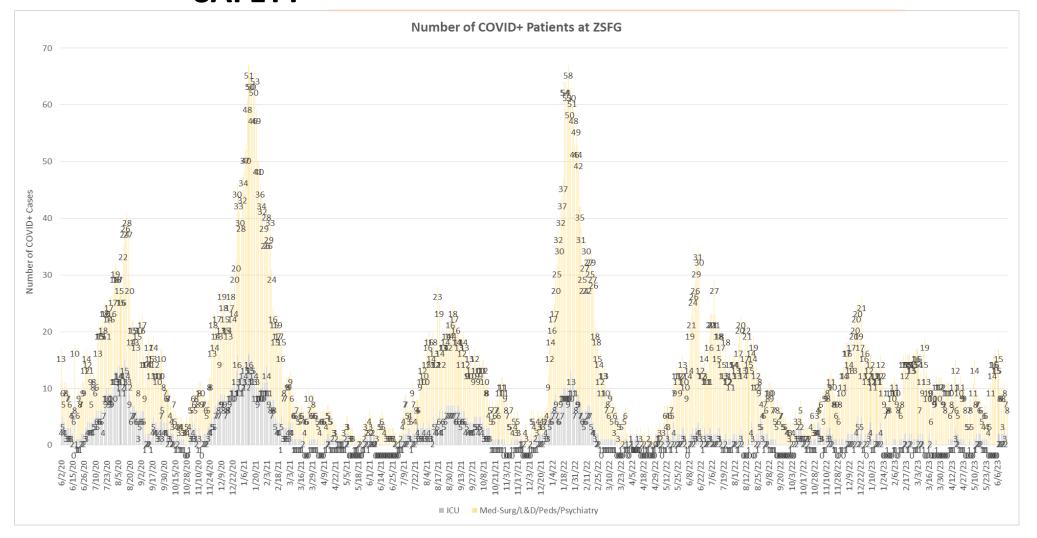
QUALITY Lower Level of Care Average Daily Census



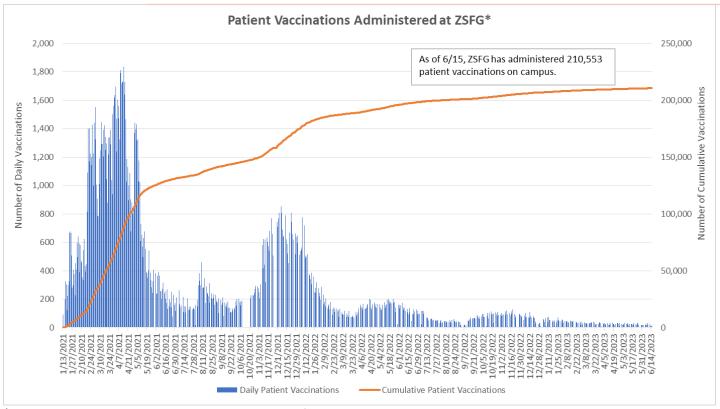




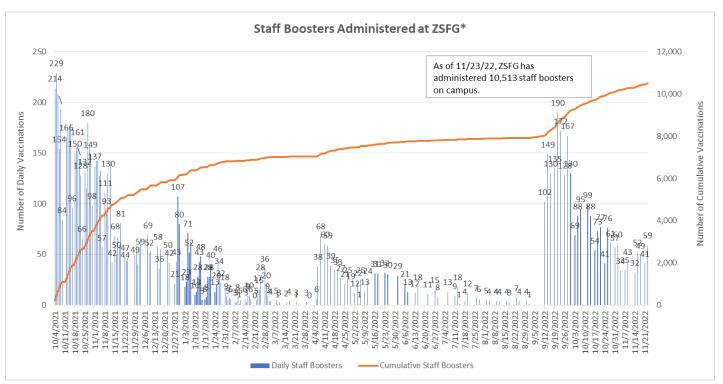
SAFETY ZSFG COVID+ Patients



SAFETY COVID-19 Vaccinations Administered at ZSFG



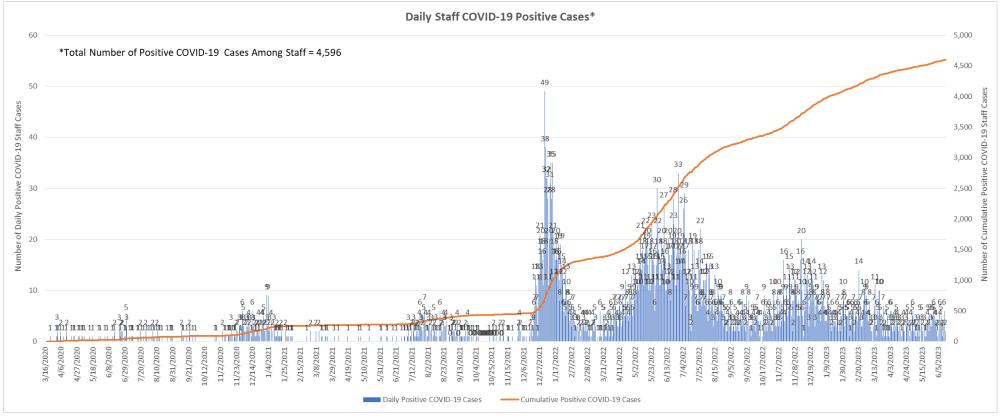
*Includes network-wide patients and members of the community.



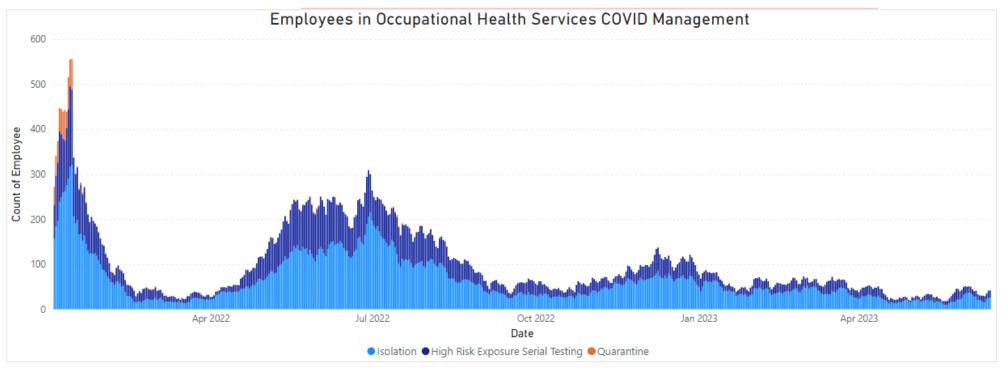
^{*}Staff Booster data is currently unavailable.

SAFETY Occupational Health COVID+ Staff Cases

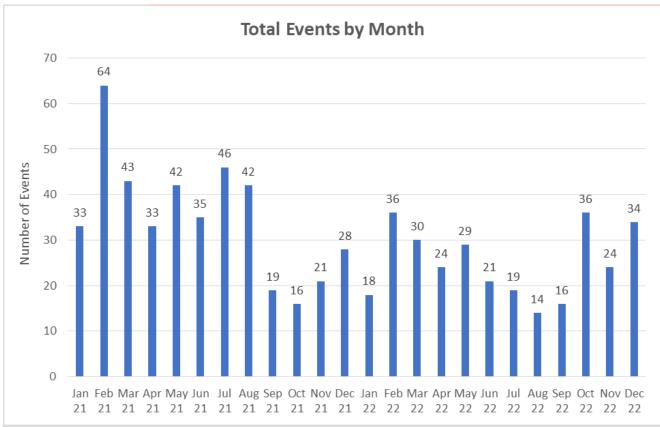
As of June 15, 2023, 4,596 ZSFG employees have tested positive for COVID-19.



SAFETY Occupational Health COVID-19 Staff Management



Workplace Violence Activity* **SAFETY**

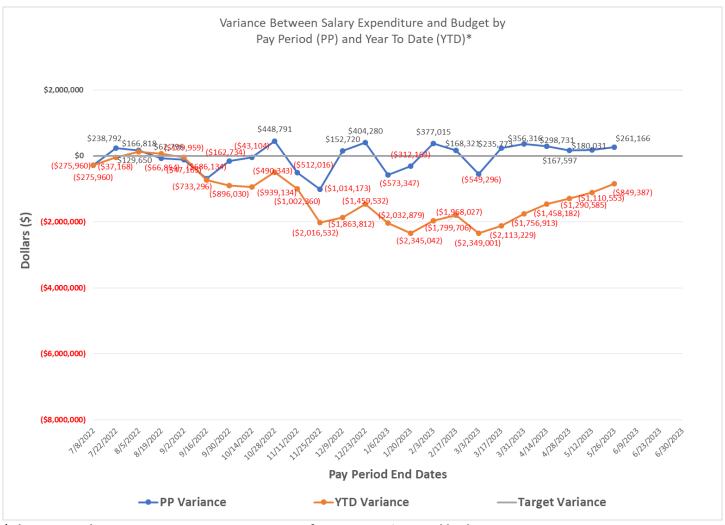




*Workplace Violence data is currently unavailable post-SAFE system go-live. FINANCIAL

STEWARDSHIP

Salary Variance



^{*}Please note that COVID-19 costs are now a part of ZSFG operations and budget.

Commissioner Comments:

Commissioner Chow commended ZSFG on its current diversion rate.

5) ZSFG HIRING AND VACANCY REPORT

Richard Ng, ZSFG HR Operations Manager, presented the item.

Commissioner Comments:

Regarding the RN training update, Commissioner Chow asked if people hired by ZSFG cannot go into Critical Care until October. Mr. Ng, stated that the training serves as training outside nurses for Critical Care and is meant to assist with the job pipeline for ZSFG.

Commissioner Chow noted that the bar graphs are difficult to read.

6) MEDICAL STAFF REPORT

Lisa Winston, M.D., Chief of Medical Staff, presented the item.

Action Taken: The Committee unanimously approved the following:

- Discharge Ambulatory Surgery RN Standard Procedures
- Management of Benign and Malignant Standard Procedures
- Neurosurgery Standard Procedures

7) OTHER BUSINESS

This item was not discussed.

8) PUBLIC COMMENT

There was no public comment.

9) CLOSED SESSION

- A) Public comments on All Matters Pertaining to the Closed Session
- B) Vote on whether to hold a Closed Session (San Francisco Administrative Code Section 67.11)
- C) <u>Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5 and 1157.6</u>: Health and Safety Code Section 1461; and California Constitution, Article I, Section 1.

CONSIDERATION OF CREDENTIALING MATTERS

CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

RECONVENE IN OPEN SESSION

- 1. Possible report on action taken in closed session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
- 2. Vote to elect whether to disclose any or all discussions held in closed session (San Francisco Administrative Code Section 67.12(a).)

Action Taken: The Committee voted unanimously to not disclose discussions held in closed session.

10) ADJOURNMENT

The meeting was adjourned at 5:56pm.