VI. SECURITY MANAGEMENT

SCOPE

The scope of the Security Management Plan is to assure the ongoing provision of a safe, accessible, and secure environment for staff, patients, and visitors at Zuckerberg San Francisco General Hospital Campus. To that end, it is the overall intent of this plan to establish the framework, organization and processes for the development, implementation, maintenance, and continuous improvement of a comprehensive Security Management Program. This program is designed to provide protection through appropriate staffing, security technology, and physical barriers.

The scope of the Security Management Program includes:

- Continuous review of physical conditions, processes, operations, and applicable statistical data to anticipate, discern, assess, and control security risks, and vulnerabilities.
- Ensure timely and effective response to security emergencies.
- Ensure effective responses to service requests.
- Report and investigate incidents of theft, vehicle accidents, threats, and property damage.
- Promote security awareness and education.
- Enforce various hospital rules and policies.
- Establish and implement critical program elements to include measures to safeguard people, equipment, supplies, medications, and traffic control in and around the hospital and the outlying medical offices.

Each management objective is listed in the table below and is marked as met or not met. If an objective is not met, the DPH Director of Security will review the objective, and develop a corrective action plan.

ACCOMPLISHMENTS

- Use-of-force decreased 24% (18 incidents) from the previous fiscal year.
- Reductions in use-of-force ratios for both per 1K calls-for-service and ED visits.
- In response to nearly 7,000 calls-for-service.
- Confiscated 3,170 weapons and contraband through Emergency Department Security Weapons Screening.
- Implementation of x-ray screening technology to enhance the ED property screening.
- Investigated 23-moderate/high risk workplace violence threat incidents and developed security plans to address the threat and protect the individuals involved.
- Implementation of dedicated Behavioral Emergency Response Team services to the ED, which accounted for 73% (2,961) ED activations and 89% were without law enforcement presence.
- Since the implementation, BERT was called to 3,995 more events of risk-behavior than SFSO with 81% of BERT activations were without law enforcement presence.

PROGRAM OBJECTIVES

Objectives	Met / Not Met	Comments and Action Plans
An annual review of the physical conditions, processes, operations, and applicable statistical data is conducted to anticipate, discern, assess, and control security risks, and vulnerabilities. A security management plan is developed, and monitored, quarterly to address security vulnerabilities, and minimize risk.	Met	2022-2023 security risk assessments were completed, and the security risks, vulnerabilities, and sensitive areas were identified and assessed through an ongoing facility-wide processes, coordinated by the DPH Director of Security, and hospital leadership. These processes were designed to proactively evaluate facility grounds, periphery, behaviors, statistics, and physical systems.
Ensure timely and effective response to security emergencies, and service request, including the enforcement of hospital rules and policies.	Met	Security emergency response times are monitored weekly, and the outcomes are reported to the Security Leadership Committee. Service requests are responded to in accordance with the Security Response Standard Operating Procedures.
Report and investigate incidents of theft, vehicle accidents, threats, and property damage.	Met	SFSO quarterly call-for-service data, incident reports: Threat Management and SFSO Crime Report data supports that investigations are initiated for all crimes against persons and facility property.
Promote security awareness and education.	Met	Through Environment of Care Rounds, employees are provided security awareness training. Additionally, security awareness and education programs include Non-violent Crisis Intervention, Active Shooter Training and Security Alert publications.
Establish and implement critical program elements to include measures to safeguard people, equipment, supplies, medications, and traffic control in and around the hospital and the outlying medical offices.	Met	The Director of Security in partnership with the San Francisco Sheriff's Office collaboratively establishes, and maintains communication and mutual ownership for outcomes, identification and troubleshooting of emergent safety concerns.

PERFORMANCE

Performance Metrics #1	Performance Metrics #2	Performance Metrics #3	Significant Reporting Performance	Significant Reporting Performance
Code Green/At Risk (Patient Elopement)	**Customer Satisfaction**	**Electronic Security System Functionality**	**DPH and SFSO, MOU Performance**	**Employee Security Awareness**
Standard: The security provider will be measured on their performance during Patient Elopements, Patient "At Risk" and Missing Person incidents, including: • Initial Perimeter and Search • Notification of SFPD, BART, and MUNI • Documentation of Search Activity • Locate/Not Located Procedure	**Standard:** A monthly basis survey of 100 customers consisting of patients, visitors, employees, and physicians will be surveyed regarding their overall experience with Security Service/Sheriff's Office.	**Standard:** All electronic security equipment will be inspected monthly for functionality. Facilities, Security Services and the Sheriff's Operations Center will develop security plans to address vulnerabilities resulting from malfunctioning equipment.	**Standard:** A monthly security provider performance survey will be completed to assess the Sheriff's Office compliance with MOU obligations in the areas of operational performance, issue resolution, management responsibilities and finance provisions.	**Standard:** During Environment of Care Rounds, hospital staff be tested on 6 questions regarding security awareness (See Appendix B.) (Sample size: 300 employees per quarter)
Threshold – 80% **Target – 90%** **Stretch – 100%**	**Threshold - 80%** **Target - 90%** **Stretch – 98%**	**Target: 98%**	**Threshold – 3.0** **Target – 3.5** **Stretch – 4.5**	**Threshold - 80%** **Target - 90%** **Stretch – 98%**

Analysis of Performance Metrics Results and Corrective Action Plan

| FY 2022-2023, Annual Performance Metrics		
	Target	**Overall Performance**
Code Green Response (Patient Elopement)	90%	100%
Customer Satisfaction	90%	75%
Electronic Security Systems	98%	96%
San Francisco Sheriff Office MOU Compliance	3.5	2.9
Employee Security Awareness	90%	100%

EFFECTIVENESS

The 2021-2022 significant reporting metrics were developed to further demonstrate the security program's effectiveness. The metrics include Threat and Workplace Violence Investigations, Crimes against Persons and Property, Use-of-Force, and Campus Tunnel and Stairwell Patrols.

**Threats Management and Workplace Violence Prevention Investigations**

Standard:

Security will investigate reported moderate and high-risk threats where there is reasonable cause to believe that the personal safety of an individual or group of individuals may be at risk.

Moderate and High-Risk threats are incidents that required management and security intervention, where it is determined that without specific remedial action, the potential for escalating behavior or the imminent danger of injury or death to one or more individuals is highly probable.

FY 22-2023, Threat Management and Workplace Violence Investigations

FY 2022-23, Threat Management and Workplace Violence by Location

FY 2022-23, Threat Management and Workplace Violence by Type
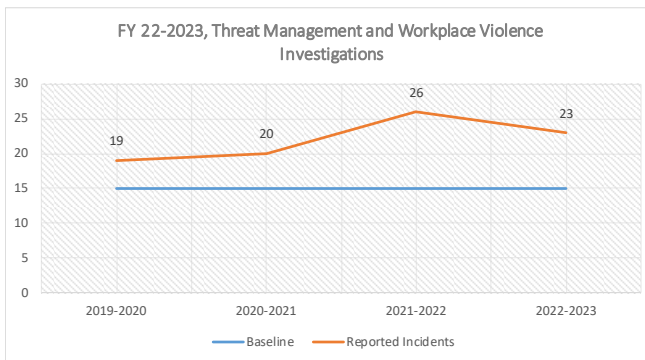
- Over a 4-year period, moderate and high-risk investigations increased 1%. There was a 11% decrease (3 reports) in investigations from the previous year.
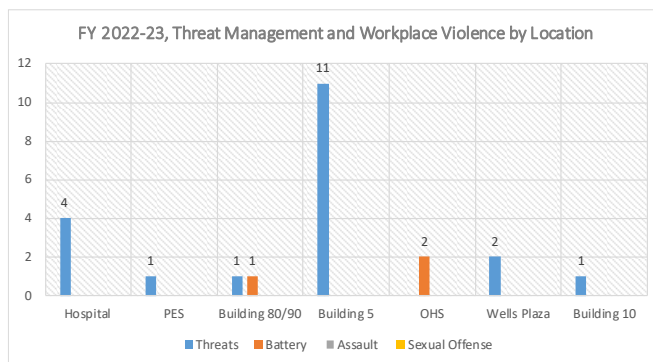
- Building 5 lobby accounted for 47% of investigations, and 55% (11 of 20) involving reports of threats.

- Employee-on-employee reports accounted for 60% of moderate and high-risk investigations.

- Security-plans to address threats and acts of violence, included:

Remedial Action Taken	
Behavioral Plan	2
Restraining Order	2
Arrest	1
Employee Disciplinary Action	2
SFSO Standby/Escort	3
HR Investigation	9
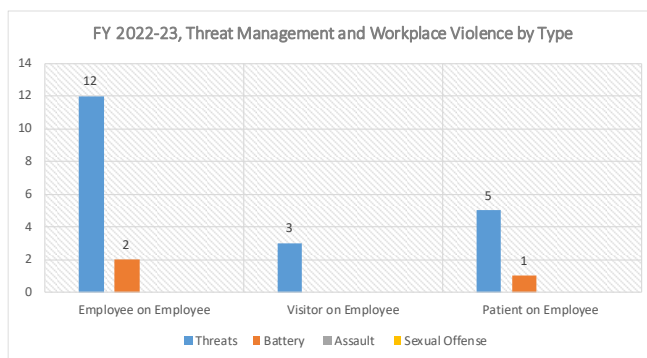
Crimes Against Persons and Property		
Yearly Comparison	**2021-2022**	**2022-2023**
SFSO - Facility Property Thefts Reports (>$900)	1	1
SFSO - Burglary Reports	4	6
SFSO - Battery Reports	41	31
SFSO - Sexual Offense Reports	3	7
SFSO - Assault Reports	7	7
SFSO - Robbery Reports		1
SFSO - Homicide Reports		
Total	**56**	**53**

FY 22-2023, Crimes Against Persons and Property Action Taken	
Deputy Arrest	5
Private Person Arrest	12
Citations Issued	5
Detention	5

FY 22-23, Crimes Against Persons and Property by Yearly Comparision

FY 22-23, Crimes Against Persons by Location

FY 22-23, Crimes Against Persons by Type
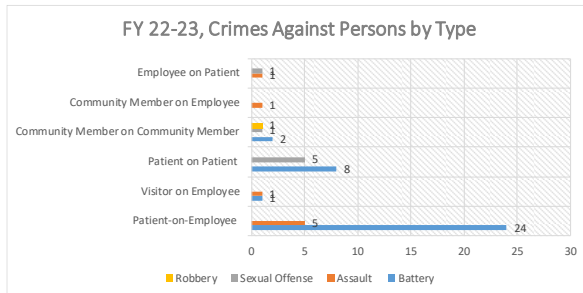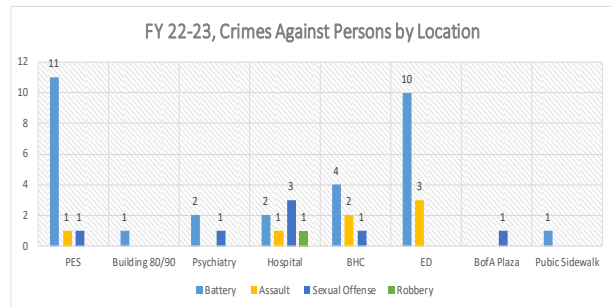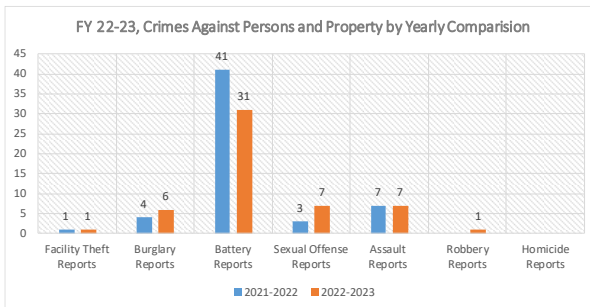
- Reported crimes decreased 5% (3 reports) from the previous year.
- Battery reports decreased 24% from FY 20-2021.
- Battery reports accounted for 58% of crimes against persons (31 of 53 reports)
- * Sex Offence reports increased 133%.
- Reports from the PES and ED accounted for 57% of person-crimes (26 of 46 reports)
- Patient-on-Employee reports accounted for 63% of crimes against person incidents (29 of 46 reports.)
- 26% of victims of physical attack, pressed charges against their assailant (12 of 46.)

* F*our of the sexual offense incidents occurred on different dates by the same individual that was receiving treatment in ED, and PES. The individual was unable to provide a description the attacker and each investigation were unfounded.*

| 2022-2023 Crimes Against Property by Location		
	Theft	**Burglary**
Building 5	1	1
UCSF Construction Site		1
BHC (Hummingbird)		1
Building 90		1
Building 80		2

2022-2023 Use of Force Statistics

Use-of-force data is tracked of all SFSO incidents occurring on ZSFG campus. In 2022-2023, there were 56 incidents of use-of-force. The data was stratified by the types of force, type of incidents, location, demographics, diagnosis, and reported acts by demographics.
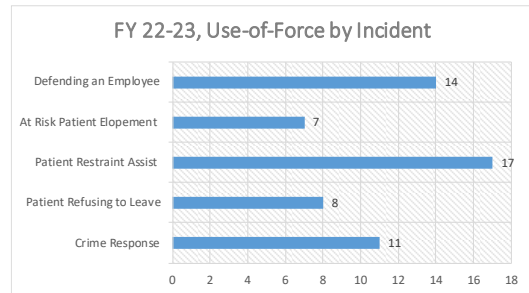

FY 21-22 – FY 22-23, Use of Force Incidents
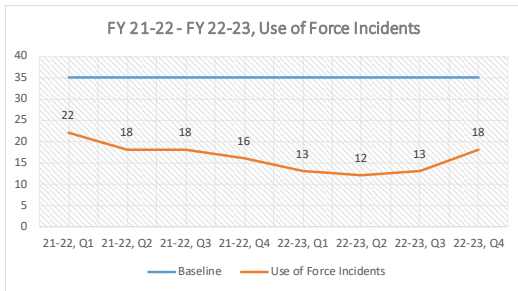
Use-of-force incidents continues to remain under the quarterly baseline and decreased 24% (18 incidents) from FY 21-22.


FY 22-23, Use-of-Force by Type
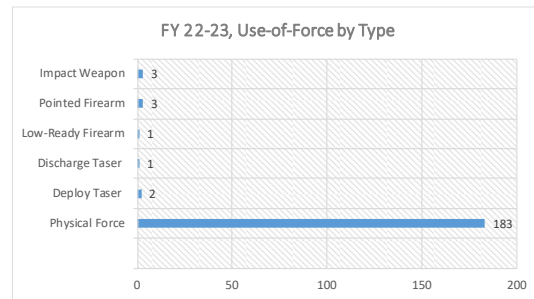
Of the 56 use-of-force incidents, there were 193 types of force used. Physical force accounted for 95% of the force used (183 of 193 types.)
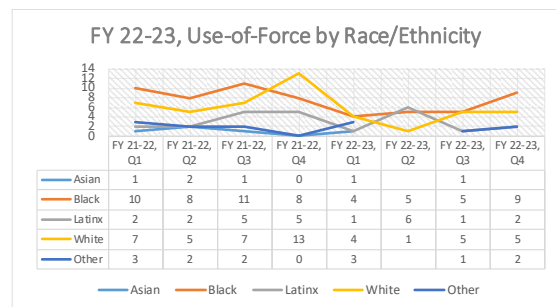

FY 22-23, Use-of-Force by Location
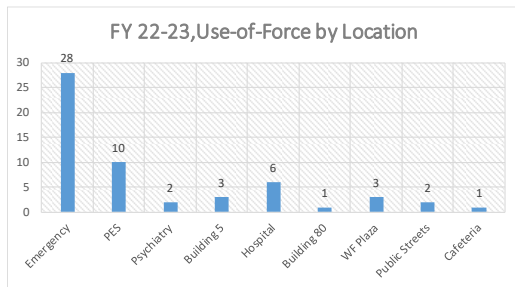
50% of use-of-force incidents occurred in the Emergency Department (28 of 56)

FY 22-23, Use-of-Force by Incident

Deputies assisting with patient restraints accounted for 30% of use-of-force incidents (17 of 57 incidents.)

FY 22-2023, Use-of-Force by Race by High-Risk Department
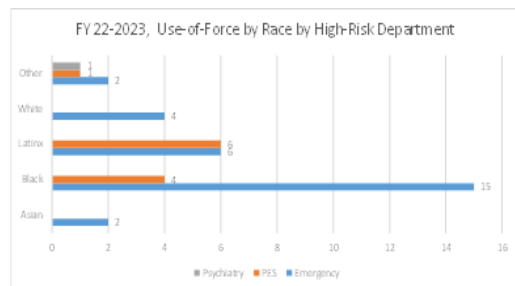
71% of force in high-risk departments occurred in the ED where Black/ African Americans were the subjects in 46% of the incidents.

FY 22-23, Use-of-Force by Race/Ethnicity

|	FY 21-22, Q1	FY 21-22, Q2	FY 21-22, Q3	FY 21-22, Q4	FY 22-23, Q1	FY 22-23, Q2	FY 22-23, Q3	FY 22-23, Q4
Asian	1	2	1	0	1		1	
Black	10	8	11	8	4	5	5	9
Latinx	2	2	5	5	1	6	1	2
White	7	5	7	13	4	1	5	5
Other	3	2	2	0	3		1	2

From FY 21-22, use-of-force decreased in all race/ethnicities. Use-of-force against Black/ African Americans continues to be the highest of all other race/ethnicities, being the subject of 41% of incidents (23 of 56 incidents.)
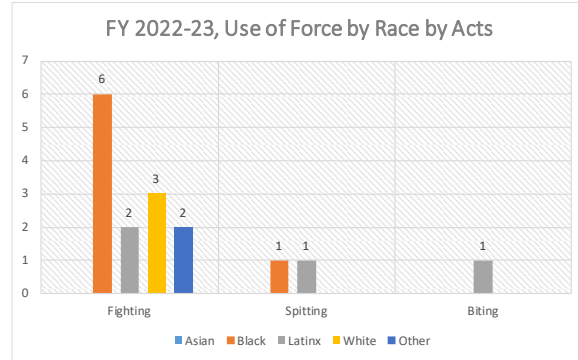
Use-of-Force by Patient Related Service calls and Clinical Data	
Per 1K Patient Related Service Calls	8
Per 1K ED Registrations	0
Per 1K PES Intakes	2
Per 100 Psychiatry Admissions	0

Use-of-Force (cont.)

FY 22-23, Use-of-Force by Age and Gender
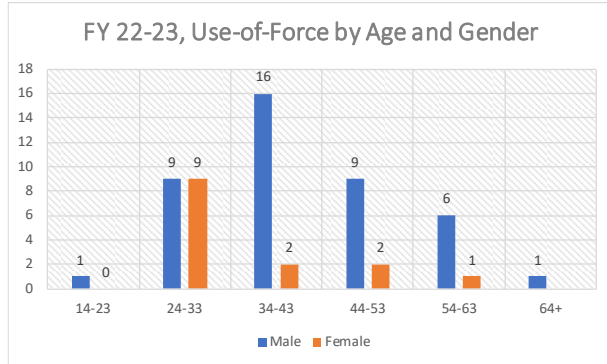
75% of use-of-force was against males and 64% against patients ages 24-33 and 34-43.

FY 2022-23, Use of Force by Race by Acts

- 81% of use-of-force was in response to reports of fighting.
- 44% of acts reported to the Sheriff's Office were committed by Black/African Americans.

SECURITY EQUITY COUNTERMEASURES

FY 21-22-22-23, BERT & SFSO Emergency Responses by Comparison

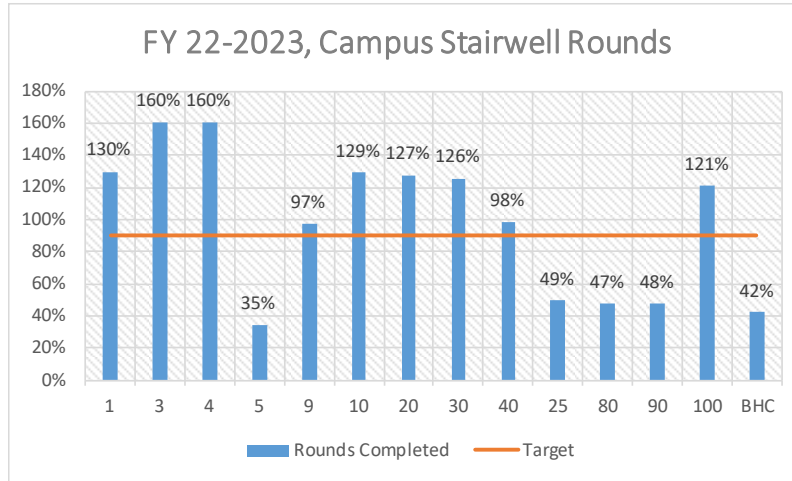|	Q1 21-22	Q2 21-22	Q3 21-22	Q4 21-22	Q1 22-23	Q2 22-23	Q3 22-23	Q4 22-23
BERT Activations	45	45	37	127	227	284	1512	2033
SFSO Emergency Responses	22	18	18	16	13	17	13	18
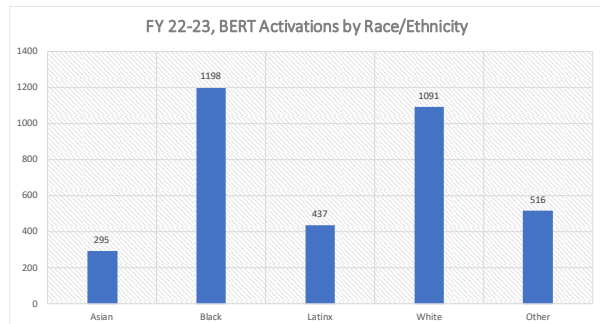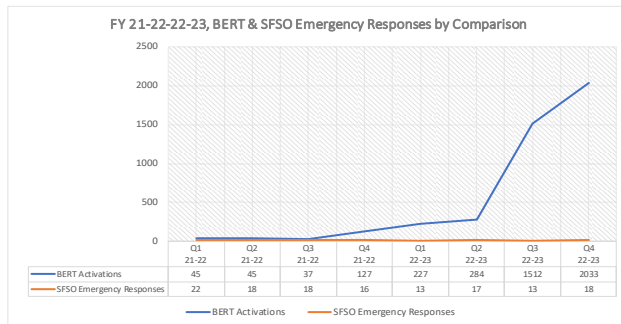
- The implementation of BERT has resulted in a shift in culture.
- Since 21-22, BERT was called to 3,995 more events of risk-behavior than SFSO.
- 81% of BERT activations were without law enforcement presence.
- In Febuary 2023, dedicated BERT staff were assigned 24/7 to the ED, which accounted for 73% (2,961) proactive ED activations and 89% were without law enforcement presence.

FY 22-23, BERT Activations by Race/Ethnicity

- BERT is transforming the way ZSFG delivers care to their patients.
- BERT conducted 2,799 rounding consultations that prevented escalating behavior through verbal de-escalation, staff support, patient assistance, patient safety escorts and safety planning.
- Proactive BERT activations to support patients experiencing distress were higher for Black/ African Americans, which accounted for 34% of BERT activations (1,198 out of 3537 activations.)

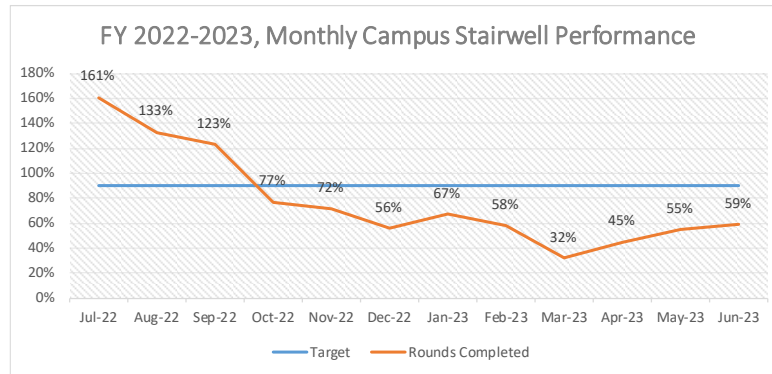| Campus Tunnel and Stairwell Rounding |
| --- |

Standard:

To demonstrate the effectiveness of the crime prevention through frequent patrols of campus tunnels and stairwells, there were 5,128 rounds conducted in 2022-2023

FY 22-2023, Campus Stairwell Rounds

Building	Rounds Completed
1	130%
3	160%
4	160%
5	35%
9	97%
10	129%
20	127%
30	126%
40	98%
25	49%
80	47%
90	48%
100	121%
BHC	42%

Target line shown at approximately 90%.

Numbers are based on supporting documentation provided by SFSO.

Stairwell Rounding Analysis

- Through FY 22-23, an overall 77% of the campus building stairwells were patrolled. Patrols in five buildings did not meet the patrol target of 90%.
- Based on SFSO Stairwell Reports, the primary driver for the lack of patrols were staffing shortages.

FY 2022-2023, Monthly Campus Stairwell Performance

Month	Rounds Completed
Jul-22	161%
Aug-22	133%
Sep-22	123%
Oct-22	77%
Nov-22	72%
Dec-22	56%
Jan-23	67%
Feb-23	58%
Mar-23	32%
Apr-23	45%
May-23	55%
Jun-23	59%

Target line shown at approximately 90%.

Other Campus and Tunnel Rounding Activity:

- Since October 2022, stairwell patrols have decreased 61%.
- There was no tunnel related activity.