



**San Francisco General
Hospital Medical
Center**

**Annual Report
Fiscal Year 2006-2007**

San Francisco General Hospital Medical Center

San Francisco General Hospital Medical Center (SFGHMC) is a general acute care hospital within the Community Health Network, which is owned and operated by the City and County of San Francisco, Department of Public Health.

During its 150-year history, the San Francisco County Hospital, later to be renamed San Francisco General Hospital Medical Center, has been providing humanistic, cost-effective, and culturally competent health services to the residents of the City and County of San Francisco.

Since its establishment in 1854, providing care to 400 sick people that year, the Hospital has evolved into a major-academic tertiary care medical center. SFGHMC is the only trauma center (Level 1) in the City and County of San Francisco, serving 1.5 million residents of San Francisco and northern San Mateo County. The Medical Center also has a full complement of mental health care from psychiatric emergency services to in-patient psychiatric care and rehabilitation and post-hospitalization care. SFGHMC has gradually expanded and modernized its hospital facilities, providing the community with a complete range of emergency, trauma, inpatient, primary care, specialized medical and surgical services, diagnostic and rehabilitation services.

SFGHMC has a long history and strong commitment to healthcare education; physician, nurse and health worker training; and medical research. It takes pride in its longtime affiliation, since 1884, with the University of California, San Francisco serving as a major teaching hospital and home to a number of prominent research centers and institutes.

In the most recent development for the future of SFGHMC, the San Francisco Health Commission passed a resolution in January 2004, supporting the rebuild of the acute care facility.

San Francisco General Hospital Medical Center

Mission, Vision, Value and Goals

2006-2007

SFGHMC Mission: It is the mission of SFGHMC to deliver humanistic, cost-effective, and culturally competent health services as an integral part of the Department of Public Health for the City and County of San Francisco by:

- Providing access to all residents by eliminating financial, linguistic, physical and operational barriers;
- Providing quality services that treat illness, promoting and sustaining wellness, and preventing the spread of disease, injury and disability;
- Participating in and supporting training and research; and
- Serving the healthcare needs of the community.

Vision Statement: “To be the Best Public Hospital in the Country.”

Value Statement: To promote access to services, quality of care, patient safety, customer satisfaction, staff morale, resource management, effective partnerships, and academic excellence.

Goals:

1. Promote patient safety
2. Promote operational and staff cultural competency
3. Improve access to healthcare services
4. Improve staff retention and recruitment
5. Comply with all regulatory standards
6. Implement and support automated clinical, financial, and administrative initiatives
7. Plan and design air medical access for SFGHMC
8. Plan for the replacement hospital

SAN FRANCISCO GENERAL HOSPITAL MEDICAL CENTER
GOALS & ACCOMPLISHMENTS
FISCAL YEAR 2006 - 2007

1. PROMOTE PATIENT SAFETY.

- Implemented medication reconciliation processes and procedures for admitted patients. Currently expanding the process to include the Emergency Department
- Instituted a hard stop on medication orders written at the time of admission, transfer, and change in level of care unless orders are generated through the use of the medication reconciliation process
- Established the Adverse Drug Event task force to improve processes for reporting, monitoring, and preventing adverse drug events, defined as medication errors and adverse drug reactions (ADR)
- Implemented computer-generated printed medication administration records (MAR) on medical-surgical units to decrease medication errors related to nurse transcription errors
- Evaluated the use of an electronic Patient Discharge Plan and medication reconciliation software
- Implemented the Falling Star program to reduce incident of patient falls
- Developed and opened Acute Care for the Elderly (ACE) unit program
- Implemented a hospital-wide hand-washing campaign
- Implemented a violence reduction initiative to reduce seclusion and restraint episodes in Psychiatry
- Implemented a sentinel event review process with Risk Management taking an active leadership role in monitoring action plans and implementing systems changes
- Developed and implemented a critical results reporting procedure for Clinical Labs, Pathology, Radiology, and Cardiology
- Standardized the patient hand-off process using SBAR (Situation, Background, Assessment and Recommendation) to improve the effectiveness of communication among caregivers
- Instituted new training and practice for bundled consent, universal protocol, and moderate sedation
- Completed metrics based on the Institute for Healthcare Improvement initiatives sponsored by the Gordon and Betty Moore Foundation grant: Smoking Cessation, Medical Emergency Response Team and Medication Reconciliation

2. PROMOTE ORGANIZATIONAL AND STAFF CULTURAL COMPETENCY.

- Attended the March 2007 California Endowment sponsored: “Building Culturally Competent Health Systems in California Symposium”
- Established a task force to expand hospital-wide efforts to address language and cultural barriers identified in the informed consent process
- Expanded the Video Medical Interpretation Project to the Positive Health Clinic, Hematology/Oncology Clinic, Family Health Clinic, GI Clinic, and the Urgent Care Clinic

- Established a steering committee to evaluate the feasibility of expanding Psychiatry and Nursing Cultural Competence Programs to a hospital-wide program
- Received the American Medical Association Patient-Centered Communication Initiative award for cultural competency

<p>3. IMPROVE ACCESS TO HEALTHCARE SERVICES AND ACHIEVE THE GOALS OF THE HEALTH ACCESS PROGRAM.</p>
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- Participated in the development and implementation of Healthy San Francisco
- Expanded the role of the patient advocate to include the Healthy San Francisco program
- Implemented San Francisco Health Plan-sponsored eReferral Project in the Medical Specialty Clinics, reducing patient wait times for next available appointments and providing more appropriate triaging of patients: decreased wait times in Endocrine from 232 to 87 days, in Cardiology from 47 to 26 days, in Pulmonary from 148 to 3 days, and in Rheumatology from 141 to 72 days
- Began implementation of business initiatives to increase patient encounters:
 - Family Health Evening Clinic Expansion
 - 6,000 primary care encounters during the evening in the first year, and open 1,500 appointments for new HSF patients
 - GMC Evening Clinic Expansion
 - 5,000 provider encounters during the evening in the first year, with approximately 500 of these allotted for new HSF patient appointments
 - Medicine Specialty Wait Times Reduction
 - Add 1.0 FTE Physician in the following specialties: Gastroenterology, Endocrinology, Nephrology, Pulmonary, and Rheumatology
 - GMC Chronic Care Redesign & Continuity Redesign
 - GMC will implement a Continuity Project utilizing NPs as providers. GMC will also be the lead primary care clinic for two chronic care projects, heart failure and asthma/COPD (chronic obstructive pulmonary disease). The Continuity Project, heart failure and asthma initiatives will result in an additional 9,355 patient encounters.
 - Family Health Chronic Care Redesign
 - Family Health Center will be the lead primary care clinic for three chronic care initiatives, which bring specialty care to the patient in the primary care clinic setting: 1) Diabetes-Endocrine; 2) Back Pain-Orthopedics; 3) Mental Health-Primary Care Interface. The Chronic Care Redesign will result in 11,665 additional patient encounters.
 - HSF Hospital Ancillary & Diagnostic Improvement (Bi-Plane Interventional Radiology)
 - Surgical Specialty/Radiology Wait Times Reduction & eReferral Implementation (Nurse Practitioners)
 - This program provides for surgical specialists (MD's) to train Nurse Practitioners to review 100% of referrals as to their appropriateness and priority. The goal is to improve wait times in all surgical specialty clinics to 30 days or less for next available appointments.

4. IMPROVE STAFF RETENTION AND RECRUITMENT.

- Participated in the Shape Up San Francisco/Active for Life program to promote a healthy, active workforce
- Implemented sign-on bonuses and increased salaries to market rates for pharmacists and nurses
- Increased promotional opportunities for pharmacists
- Attended a nursing Magnet Recognition Program conference and drafted a grant proposal for Magnet status
- Implemented an expedited hiring process for nurses, health workers and other classifications
- Initiated a new manager training program
- Promoted awareness of the joint SEIU-Employer Education Trust Fund
- Participated in National Pharmacy Conference and the UCSF career fair to recruit pharmacists
- Promoted and trained new staff in Quality Management and Legal Affairs units
- Started RN BSN to MSN program in collaboration with USF at the SFGHMC campus with 10 participants
- Started RN Associate Degree to MSN program in collaboration with USF at the SFGHMC campus with 10 participants
- Trained 20 advanced practice nurses in principles of evidence based practice
- Started a staff nurse Evidence Based Practice Fellowship Program with five participants

5. COMPLY WITH ALL REGULATORY STANDARDS.

- Received American College of Surgeons Committee on Trauma Level 1 re-certification
- Received Joint Commission on the Accreditation of Hospitals and Health Care Facilities Stroke Center designation
- Completed Joint Commission Laboratory survey
- Completed San Francisco Health Plan survey of General Medicine Clinic
- Completed Commission on Accreditation of Rehabilitation Facilities survey of the outpatient opiate treatment program Enhanced radiation safety/dosimetry monitoring
- Completed successful Long Term Care survey and Department of Mental Health survey
- Obtained National Provider Identifiers (NPIs) for all billable providers
- Implemented CA Department of Public Health's new reporting requirements
- Trained pharmacy staff to use isolation barrier chambers to mix all IV solutions to comply with USP 797, Joint Commission, and Board of Pharmacy regulations
- Clarified organizational, licensing, and billing issues for outpatient mental health and substance abuse programs
- Achieved 100% compliance in Medical Staff audits conducted by the San Francisco Health Plan and Wellpoint/Blue Cross
- Developed new training tool for Universal Precautions and Moderate Sedation
- Implemented initiatives to fulfill Mayoral directive on waste diversion

6. IMPLEMENT AND SUPPORT ELECTRONIC CLINICAL, FINANCIAL, AND ADMINISTRATIVE INITIATIVES.

- Implemented e-Patient documentation pilot in medical-surgical inpatient units
- Implemented Healthy San Francisco and the centralized Eligibility Office
- Replaced physician dictation system
- Upgraded reporting capabilities of Omnicell automated medication dispensing devices to improve monitoring of medication storage, use and dispensing outside of the Pharmacy
- Implemented Siemens Decision Support System to improve financial reporting
- Implemented San Francisco Health Plan eReferral Project in the Medical Specialty Clinics, reducing patient wait times for next available appointments and providing more appropriate triaging of patients
- Installed wireless devices in the clinic M-Tower to assist in achieving Joint Commission goal of one location for display of medication orders
- Purchased Performance Logic software to create a hospital project management and performance measure dashboard tool
- Began process for replacing the DPH materials management system with new web-based system, Pathways
- Participated in the Department of Public Health ad hoc ambulatory care committee
- Instituted new medical staff IT steering committee
- Completed pilot unit for implementation of the Patient Assessment Tool in Invision.
- Upgraded Pharmacy computer system and Invision to Pharmacy computer system interface

7. PLAN AND DESIGN AIR MEDICAL ACCESS FOR SFGH.

- Submitted preliminary construction documents to Office of Statewide Health Planning and Development
- Continued to work on publication of the Draft Environmental Impact Report
- Revised noise and safety study
- Finalized project description
- Attended community meetings and worked closely with Mayor's office to address concerns

8. PLAN FOR THE REPLACEMENT HOSPITAL.

- Completed the SFGHMC Institutional Master Plan update in September 2006
- Held a town hall meeting in October 2006 to share with neighbors and interested community residents the proposed plan and schedule for the rebuild project
- Conducted site feasibility study, completed hazardous materials assessment and geotechnical analysis in December 2006
- Issued an RFQ in January 2007 for consultants to perform the Environmental Impact Report; initiated the EIR process in March 2007
- Selected the architect and engineering team in April 2007 after a competitive RFQ process

- Completed the Rebuild Space Program with input from interdisciplinary hospital user groups in May 2007. The final program calls for an expanded emergency department; state of the art surgical and diagnostic departments; and 284 patient beds that are designed to address the need for flexibility, provide for more critical care patients, and address the needs of an aging population.
- Presented Institutional Master Plan to the Planning Commission in May 2007
- Initiated campus facility master plan in June 2007

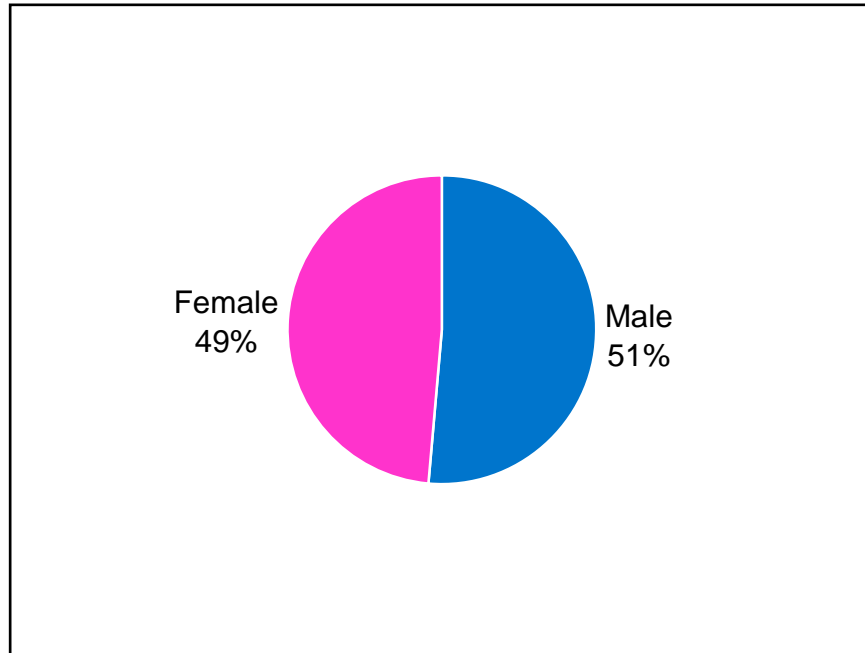
RECOGNITIONS AND OTHER ACCOMPLISHMENTS

- American Medical Association Patient-Centered Communication Initiative award for cultural competency
- California Association Public Hospitals – Safety Net Institute Quality Leader award honoring improvement in system-wide care integration for eReferral Spread Project in specialty clinics
- California Association of Public Hospitals and Health Systems Language Access Technology Leadership Award
- California Transplant Donor Network 2006 recognition award for dedication to improving the organ and tissue donation process
- 2007 Ambulatory Pediatric Association (APA) Health Care Delivery Award
- World Health Organization and UNICEF *Baby Friendly Hospital* Certification
- American Diabetes Association Diabetes Education Certification
- Named Chair of the National Association of Public Hospitals and Health Systems for fiscal year 2007-2008 - Gene Marie O’Connell
- Municipal Fiscal Advisory Committee (MFAC) 2006 Public Managerial Excellence Award – Sue Currin
- Several nurse managers and directors received Local 856 clinical nursing research awards
- UCSF John F. Murray Award for academic excellence and dedication to the humanitarian mission of San Francisco General Hospital - Dan Wlodarczyk

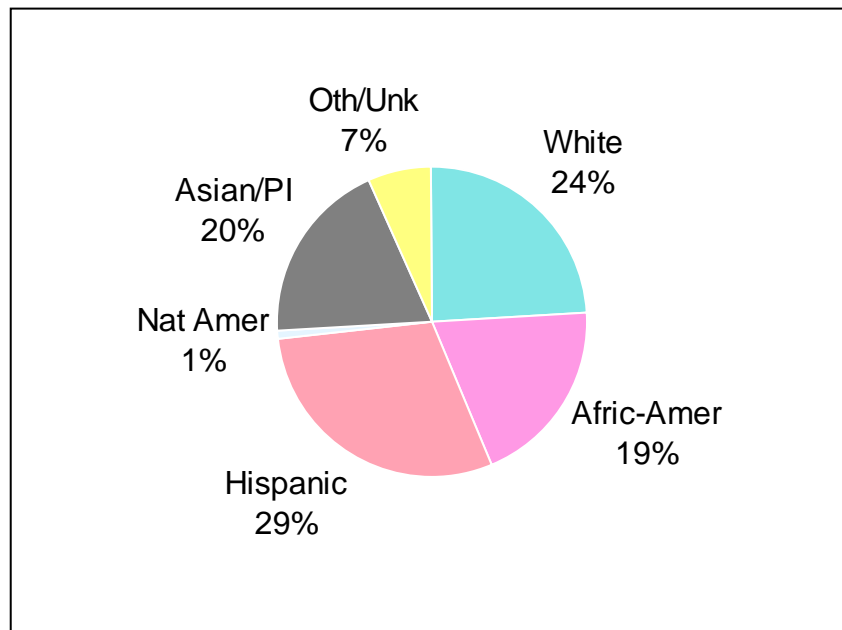
Population Characteristics

San Francisco General Hospital Medical Center treated 98,244 people in Fiscal Year 2006-2007.

Patients served were 51% males and 49% females. This is the same as the 2006 U.S. Census Bureau estimate for San Francisco. (American FactFinder, U.S. Census Bureau)

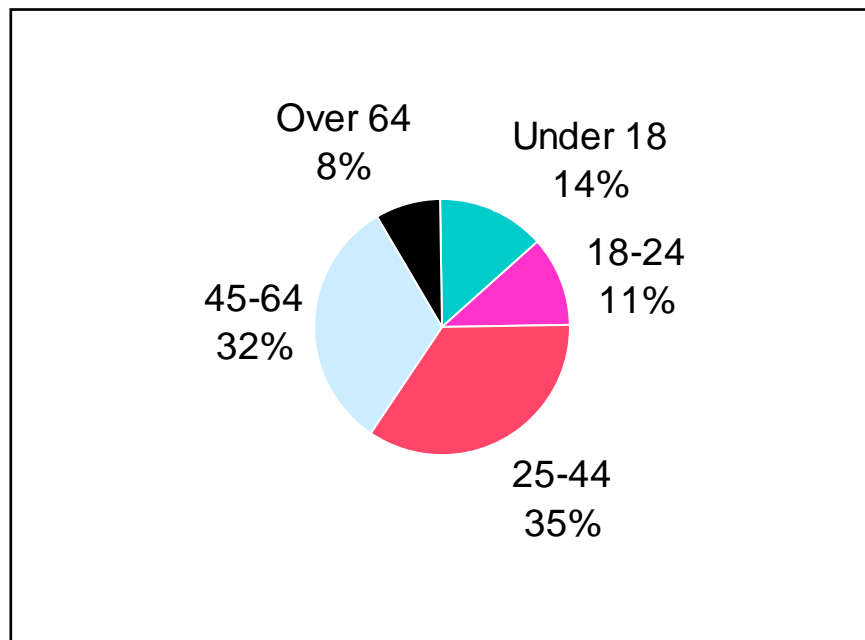


Like the City of San Francisco, the SFGHMC patient population consists of a large percentage of ethnic minorities. The ethnic breakdown, however, is different from that of the City, as estimated



by the U.S. Census Bureau for 2006. Whereas Caucasians make up 39% of the City’s population, they make up 24% of the hospital’s patient population. Hispanics make up 14% of the City’s population but make up 29% of the hospital’s population. African-Americans are estimated to be 7% of the City’s population; 19% of the patient population is African American. Asian/Pacific Islanders are estimated to be 32% of the City’s population; 20% of the patient population is Asian/Pacific Islander.

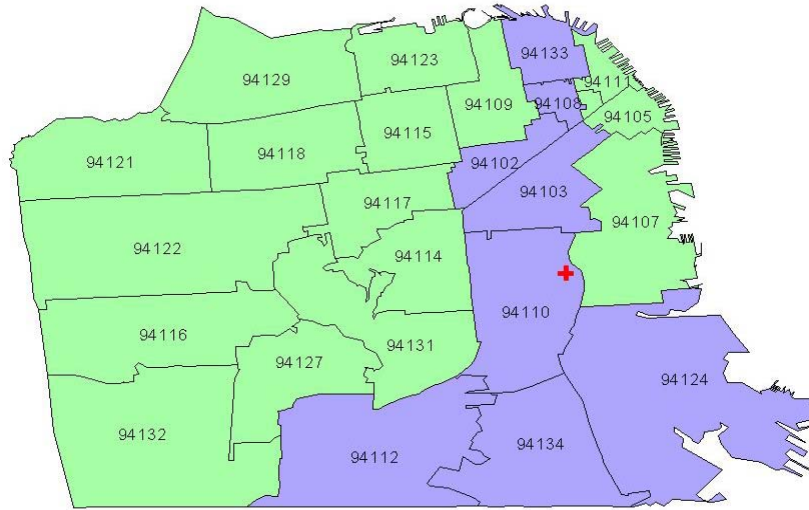
SFGHMC’s patient population is younger than the general population - 77% are between the ages of 18 and 64, whereas 70% of the City’s residents are in this age range. Fifteen percent of the City’s population is over age 65; this group makes up 9% of the hospital’s patient population.



In reviewing patients’ residences by zip code on the date of their encounters, 87% of the patient population resided in San Francisco at some point during the year. Fourteen percent of the hospital’s patients resided outside of San Francisco and 14% were homeless, on the street, sometime during the year. (The total equals more than 100% because patients’ residences may have changed during the year.)

The majority of SFGHMC’s patients resided in eight zip codes areas:

- North of Market (94102) 10%
- South of Market (94103) 10%
- Potrero Hill/Mission (94110) 20%
- Outer Mission (94112) 13%
- Bayview/Hunters Point (94124) 12%
- Visitacion Valley (94134) 8%
- Chinatown (94108/94133) 4%



The following table shows activities by payer type for fiscal year 2006-2007.

Payer Sources	Inpatient Days	Outpatient Encounters
Uninsured	28%	35%
Commercial	4%	2%
Medi-Cal	34%	26%
Medicare	26%	18%
Others (Healthy Families, Research, Jail, Workers' Comp)	8%	19%

Services Provided

Since its inception, SFGHMC has served as a community hospital with its primary goal to provide all San Franciscans with quality medical services. Today, SFGHMC is licensed by the State of California Department of Health Services as a 598-bed general acute care hospital, providing a full complement of inpatient, outpatient, emergency, skilled nursing, diagnostic, behavioral health and rehabilitation services for adults and children. In addition, SFGHMC is licensed by the California Department of Mental Health for 47 mental health rehabilitation beds and by the California Department of Social Services' Community Care Licensing Division for 41 residential care beds.

Clinical Service Groups at SFGHMC:

- Cardiology
- Dermatology
- Emergency Medicine
- Gastroenterology
- General Surgery
- Gynecology
- Hematology
- HIV Infection
- Internal Medicine
- Interventional Radiology
- Laboratory Medicine
- Maxilo-Facial/Plastic Surgery
- Neonatology
- Nephrology
- Neurology
- Family Practice
- Neurosurgery
- Normal Newborns
- Obstetrics
- Oncology
- Ophthalmology
- Orthopedic
- Otolaryngology
- Pediatrics
- Psychiatry
- Pulmonary
- Rehabilitation Medicine
- Substance Abuse
- Trauma
- Urology
- Vascular Surgery

The services provided at SFGHMC are grouped into the following major categories:

- Inpatient Services
- Ambulatory Services (Primary & Specialty Care)
- Emergency Services
- Trauma Services
- Diagnostic Services

Within each of these categories is a broad range of services, which define the complex level of care.

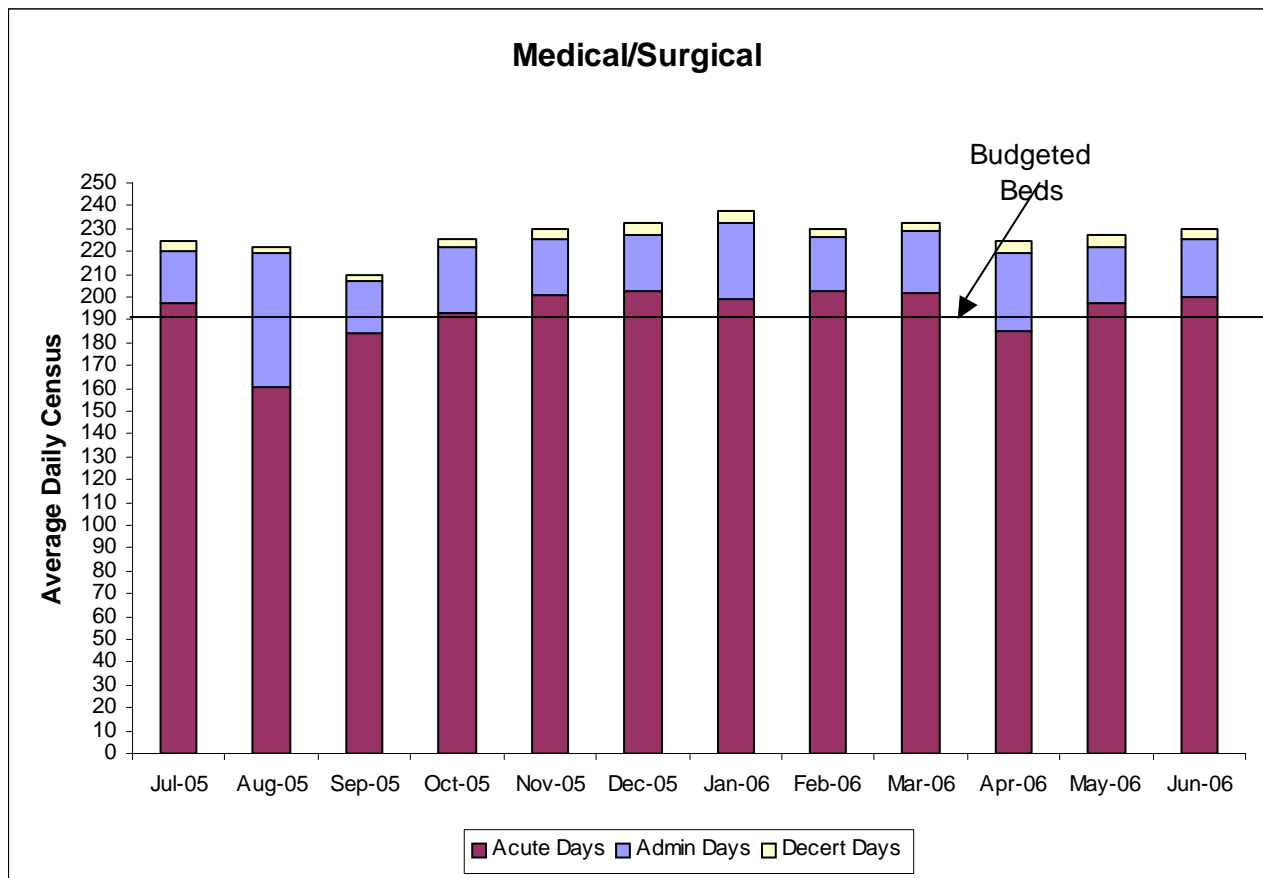
Inpatient Services

Currently SFGHMC is licensed for 403 general acute beds, 106 acute psychiatric beds, and 89 Skilled Nursing beds. It is the largest provider of acute psychiatric care in San Francisco.

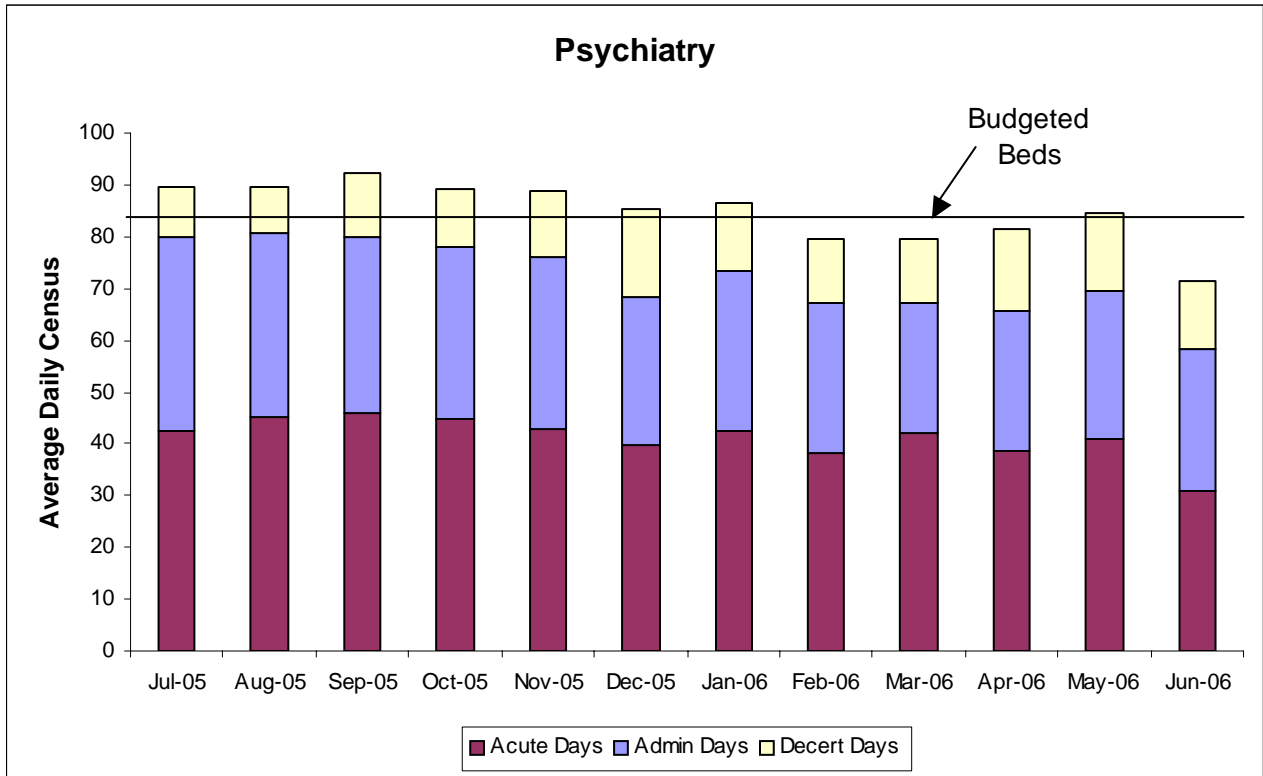
In Fiscal Year 2006-2007, there were 16,482 acute admissions, of which 16% were acute psychiatric. There were 114,582 patient days of which 27% were acute psychiatric. The ten most frequently occurring acute inpatient diagnoses were:

1. Hypertension
2. Normal Newborn Delivery
3. Congestive Heart Failure
4. Psychosis
5. Pneumonia
6. Viral Hepatitis
7. Diabetes
8. Schizo-Affective Schizophrenia
9. HIV Disease
10. Cocaine Abuse

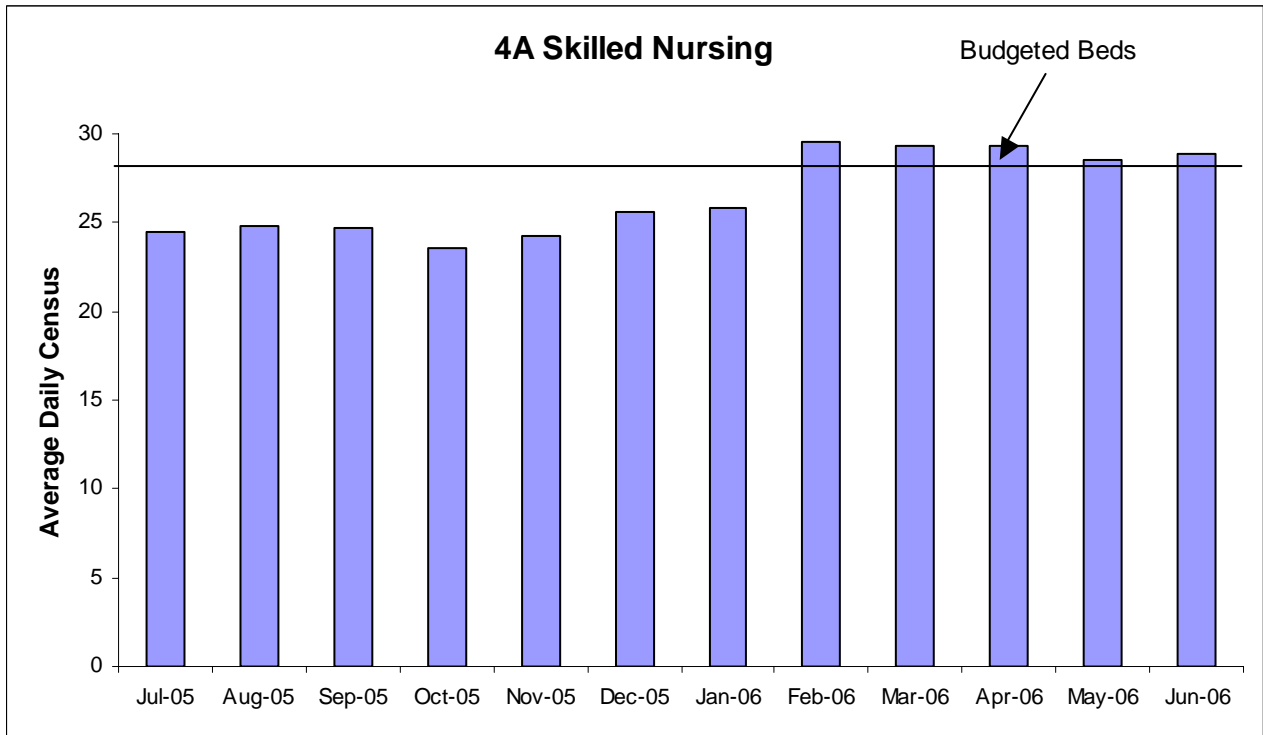
The average daily census for SFGHMC’s Medical/Surgical services was 227. This translates to 93% of its physical capacity, without accounting for the fact that certain beds are designated for specific populations (e.g., forensic patients, pediatric patients). The industry standard for occupied capacity is 80%.



The average daily census for Acute Psychiatry was 85. This translates to 87% of physical capacity. Non-acute days continue to be an issue for Psychiatry. The primary reason for these non-acute days is lack of appropriate placement for patients awaiting discharge.



SFGHMC maintains a 30 bed short-term Medical/Surgical Skilled Nursing unit. This unit provides short-term non-acute care for patients awaiting or recovering from a procedure, patients requiring aftercare that is unable to be administered at home, and patients awaiting placement. The average length of stay is 29 days.



In addition, SFGHMC is home to the **San Francisco Behavioral Health Center (SFBHC)**. SFBHC serves the sub-acute psychiatric population of the City and County of San Francisco, providing diagnostic evaluation and treatment services, with a rehabilitation focus that promotes improved independence and enables residents to achieve their highest level of functioning, for residents with severe and persistent mental illness. The SFBHC is designed to help residents move along the continuum of care and to transition to the most appropriate community setting.

SFBHC has three levels of care:

- **Mental Health Rehabilitation:** licensed by the California Department of Mental Health (DMH), the Mental Health Rehabilitation Program has 47 beds and focuses on psychosocial rehabilitation of clients with severe and persistent mental illness. The average daily census is 42.
- **Skilled Nursing Facility:** licensed by the Department of Health Services (DHS), the Skilled Nursing Facility has 59 beds and provides for continued care of psychiatric patients with medically complex needs. The average daily census is 57.
- **Adult Residential Care Facility:** licensed under the California Department of Social Services' (DSS) Community Care Licensing Division, the Adult Residential Care Facility has 41 beds and helps clients transition back into the community. The average daily census is 40.

Ambulatory Services

In Fiscal Year 2006-2007, over 94,000 people were treated in the hospital's clinics. There were 506,000 documented visits, of which 25% were primary care, 28% were specialty care, 10% were Emergency, 4% were urgent care, 20% were diagnostic and 13% were for other services. Ambulatory clinic services are organized and provided under 6 major centers:

The Adult Medical Center provides comprehensive primary care services through its General Medicine Clinic and specialty services to persons over 18 years of age.

Specialty services include:

- Chest
- Diabetes
- Oncology
- Endocrinology
- Gastrointestinal
- Hepatomegaly
- Cardiac
- Dermatology
- Renal
- Rheumatology
- Hematology
- Hypertension

The Adult Surgery Center provides a full-range of ambulatory surgical specialties, where comprehensive consultation, surgical procedures and recovery are provided in the hospital setting.

Surgical Specialty Services includes:

- Trauma
- General Surgery
- Vascular
- Orthopedic
- Otolaryngology
- Ophthalmology

- Proctology
- Plastic/Maxilo-Facial
- Hand
- Foot
- Breast
- Neurology
- Neurosurgery
- Optometry
- Urology
- Oral Surgery

The Children’s Health Center provides culturally competent and sensitive medical services to children and young people up to the age of 21. It serves children requiring evaluation of health status, diagnosis and treatment of acute illness. In addition to primary and specialty care services, off-hours pediatric urgent care services are available for patients of the Community Health Network and its affiliated partners.

Specialty services include:

- Asthma
- Cardiac
- Hematology
- Neurology
- Dermatology
- Urology
- Renal
- Nutrition

The Women’s Health Center provides general obstetrical and primary women’s health care for women of adolescent to geriatric age.

Specialty services include:

- Infertility treatment
- Prenatal education and exercise programs
- Teen obstetrics programs

Extensive family planning services, including therapeutic abortions, and counseling services are provided within the Family Planning Clinic.

The Family Health Center provides comprehensive primary care to all family members of all ages, including culturally competent care for the diverse population of the community served by SFGHMC. Using a Family Practice model, staff incorporates patient education, counseling, diagnostic, screening and therapeutic services in the patients’ care and emphasis is on prevention, health maintenance and early diagnosis and treatment of illness.

Services include:

- Prenatal care
- Perinatal case management
- Well child care
- Pharmacist consultation
- Mental health services
- Nutritional assessment and education
- Substance abuse counseling
- Family therapy
- HIV family clinic
- Social services
- Minor surgery
- Health education

- Diabetes education and case management

The Positive Health Program is a multidisciplinary service that provides specialized care to HIV-infected patients. The program delivers compassionate care with a focus on continuity and quality provided by an enabled, committed, and expert staff. Research is focused to improve care, and maintain adequate resources for meeting the care demands of its service population.

Services include:

- Primary Care
- Dermatology
- Pulmonary
- Endocrinology
- Neurology
- Mental health services
- Lymphoma
- Women's Health
- Oncology
- Health education

Emergency Services

The SFGHMC Emergency Department (ED) is a 24-hour, 7-day a week service licensed by the State of California for comprehensive emergency services. The ED provides resuscitation care for the Trauma Center (Level 1) and is the primary receiving facility for mass casualty events. In Fiscal Year 2006-2007, 53,000 Emergency Room visits occurred, of which 22% resulted in an admission.

The most common diagnoses for non-admit patients are:

1. Abdominal Pain
2. Alcohol Abuse
3. Chest Pain
4. Hypertension
5. Convulsion
6. Contusion to Head
7. Abrasion Head without Infection
8. Headache
9. Open Wound Of Forehead
10. Acute Upper Respiratory Infection

Of the non-admit patients, 38% were females and 62% were males. This varies from the overall SFGHMC population of 49% females and 51% males. Emergency Department patients' race also varies as compared to the overall hospital population, with lower ED use by Hispanics (24% vs. 30%) and Asians/Pacific Islanders (11% vs. 20%) and higher use by Caucasians (30% vs. 24%) and African-Americans (29% vs. 19%).

Of visits to the ED, 72% were by San Francisco residents, 12% by out-of-county residents, and 16% by people who were homeless. Of the San Francisco residents, 66% were from 6 zip code

areas: 94110 Mission (17%), 94124 Bayview/Hunters Point (13%), 94112 Outer Mission (10%), 94102 Tenderloin (9%), 94103 South of Market (9%) and 94134 Visitacion Valley (8%).

Psychiatry Emergency Services (PES) provides 24-hour, 7-day a week emergency assessment, stabilization and disposition for acute psychiatric patients. Last year, over 7,500 people were treated, of which 25% were admitted.

Even more so than the ED, the gender of non-admit PES patients varies from the overall SFGHMC population, with 34% females and 66% males. Patients' race also varies as compared to the overall hospital population, with lower ED use by Hispanics (11% vs. 30%) and Asians/Pacific Islanders (9% vs. 20%) and higher use by Caucasians (50% vs. 24%) and African-Americans (26% vs. 19%).

Of the PES encounters, 61% were by San Francisco residents, 2% by out-of-county residents, and 28% by people who were homeless. Of the San Francisco residents, 62% were from 6 zip code areas: 94110 Mission (16%), 94102 Tenderloin (14%), 94103 South of Market (12%), 94109 City Hall/Polk Gulch (8%), 94124 Bayview/Hunters Point (6%), and 94112 Outer Mission (5%).

The SFGHMC Trauma Center was one of the first programs organized in the United States to combat death and disability due to injury. It has also been designated as the Level I Trauma Center for both adults and children by the Emergency Medical Service Agency [EMSA] of both San Francisco and San Mateo Counties.

A designated Level I Trauma Center is defined as a specialized hospital facility that has an adequate depth of personnel, resources, services, equipment and supplies to provide care for the injured patient throughout all phases of the patient's care from resuscitation through discharge. This continuum of care includes the Emergency Department, Radiology/Imaging Services, Laboratory and Blood Bank, Operating Room, Intensive Care Nursing, Medical-Surgical Nursing, Physical Therapy, Social Services and psychological support for the patient and family. This level of comprehensive care is immediately available 24 hours/day every day of the year.

As San Francisco's only Trauma Center, SFGHMC provides resuscitation, diagnosis, treatment and rehabilitation for complex injuries affecting all areas of the human body. Nearly 3,300 adults and children are treated each year for injuries requiring activation of a multi-disciplinary team of surgeons, nurses, technicians and therapists.

SFGHMC is the home for the **Poison Control Center** in northern California, where information about poisonings and treatment is provided around the clock to healthcare providers and the general public over a telephone network.

The Adult Urgent Care Service provides evaluation and treatment to patients with non-emergent conditions, who, in the past, would have been diagnosed and treated in the Emergency Department. The clinic is open 7 days per week, including holidays, for 80 hours of service coverage. Adult Urgent Care documented almost 22,000 medical encounters in the last fiscal year.

The most common diagnoses are:

1. Backache
2. Hypertension

3. Acute Upper Respiratory Infection
4. Generalized Abdominal Pain
5. Joint Pain-Lower Leg
6. Acute Pharyngitis
7. Urinary Tract Infection
8. Joint Pain-Ankle
9. Cough
10. Open Wound

The patient demographic of patients using the Urgent Care Clinic (by visits) is similar to the overall hospital population, with 45% females and 55% male; and 27% Caucasians, 24% African-Americans, 30% Hispanics, and 14% Asian/Pacific Islanders.

Of visits to Urgent Care, 86% were by San Francisco residents, 6% by out-of-county residents, and 8% by people who were homeless. Of the San Francisco residents, 54% were from 6 zip code areas: 94110 Mission (16%), 94112 Outer Mission (10%), 94124 Bayview/Hunters Point (9%), 94134 Visitacion Valley (6%), 94102 Tenderloin (6%), and 94103 South of Market (6%).

Diagnostic Services & Ancillary Services

- Clinical Laboratories
- Food and Nutrition
- Infection Control
- Nursing
- Pastoral Care
- Rehabilitation
- Respiratory Therapy
- Pharmaceutical
- Medical/Psychiatric Social
- Radiology
- Interpreter
- Material Management
- Messengers
- Medical Staff Office
- Parking
- Patient/Visitor Center
- Utilization Management
- Admitting
- Biomedical Engineering
- Business
- Education and Training
- Environmental
- Facilities Management
- Human Resources
- Health and Safety
- Hospital Administration
- Health Information System
- Information System
- Quality Management
- Risk Management
- Security
- Telecommunications
- Volunteers

Academics and Research

Through its long-standing affiliation with the **University of California, San Francisco (UCSF)**, SFGHMC serves as a major teaching hospital for Medicine, Nursing, Pharmacy and Dentistry. All of the physicians at SFGHMC are UCSF faculty. Approximately 1,500 UCSF physicians, specialty nurses, health care professionals and other professionals work side-by-side with 3,500 City employees at SFGHMC. The City and County of San Francisco pays UCSF for the patient care services through an affiliation agreement. Each year, over 350 third or fourth year medical students, 800 residents and 60 clinical fellows are trained at SFGHMC. Thirty-two percent of all the UCSF

interns training in 17 academic departments and 35% of all UCSF medical students' clinical training are conducted at SFGHMC.

In addition, SFGHMC provides approximately 200 clinical nursing placements at the Associate, Baccalaureate and Masters level for students from UCSF, the California State University System, local community colleges, and Bay Area private universities and colleges each year.

The hospital is also home to more than 20 research centers and major laboratories. Over 160 principal investigators conduct research through programs based at the hospital campus.

Research work and studies in the following areas are currently being carried out at the SFGHMC:

Trauma related research:

- Rapid response improvement
- Emergency Department management
- Violence prevention
- Surgical techniques and wound care
- Brain spinal cord injury management
- Bone regeneration

Bioterrorism and Mass Casualty:

- Development of treatment for botulism toxin
- Decontamination methods for exposures
- Drug and antibody delivery systems
- Predictive models of needed resources

AIDS related research:

- Treatment to the homeless
- Adherence to treatment
- Outcomes in the urban poor
- Treatment and prevention of drug resistant HIV
- Immunology of AIDS
- Drug trials
- Management of illness to preserve productivity
- Reducing sexual risk behavior
- Post exposure prophylaxis (needle stick, prenatal, sexual, etc.)

Cancer related research:

- Treatment of mesothelioma
- Medical marijuana use
- Breast cancer treatment and preventions
- Ovarian cancer drug delivery system
- Prevention of basal cell carcinomas

Cardiovascular related research:

- Heart attack prevention and treatment
- Stroke prevention and treatment
- Vascular malformations and aneurysms prevention and treatment

Pulmonary related research:

- Asthma-treatment, prevention, and genetics
- Interstitial lung disease-management and causes
- Chronic lung disease-pathology and preventions
- TB-prevention, control, and treatment
- Pneumonia-genetic risk factors, treatment

Health Disparities:

- Racial and ethnic disparities in adults, children and newborns
- Genetic differences
- Health care delivery systems, literacy and cultural effects
- Comparisons of the SFGHMC system to other systems

Utilization Statistics

The following summary describes the hospital activity during Fiscal Year 2006-2007.

Inpatient Services

- The number of acute patient days for Fiscal Year 2006-2007 was 114,582, of which 27% were related to acute psychiatry.
- There were 16,482 acute admissions, of which 16% were related to acute psychiatry.
- There were a total of 43,700 skilled nursing days; 77% were at the SFBHC.

	Licensed Beds	Discharges	Patient Days
Acute	403	14,411	83,589
Acute Psychiatric	106	3,464	30,993
Skilled Nursing	30	374	9,691
SFBHC	147	276	36,009

Surgery:

- 6,612 surgical procedures were performed in 10 operating rooms, of which 49% were emergent.
- 1,089,390 surgical minutes were performed.

Obstetric/Gynecology:

- 1,232 babies were born at SFGHMC.
- Over 3,000 women received prenatal care, of which 30% were high-risk cases.

Outpatient/Emergency Services

- 94,266 individuals were seen.
- Total of 506,150 visits, of which 25% were primary care, 28% were specialty care, 10% were emergency care, 4% were urgent care visits, 20% were diagnostic and 13% were for other services.
- Of the 51,538 Emergency Department visits, 22% resulted in an admission.
- Of the 7,545 Psychiatry Emergency encounters, 25% resulted in an admission.
- 29% of all ambulance traffic in San Francisco was received by SFGHMC.

Trauma Center

- 3,279 adults and children are treated for injuries requiring activation of the trauma team.

Employees

SFGHMC has approximately 2,700 City and County of San Francisco (CCSF) fulltime equivalent employees and approximately 1,300 University of California, San Francisco (UCSF) full-time equivalent employees including physicians and house staff.

SFGHMC is formally affiliated with UCSF by contract to provide medical care, medical students and residents for teaching and research. There are over 437 active (over 50% time) and 514 courtesy (under 50% time) members of the Medical Staff and approximately 951 interns, residents and fellows each year. Additionally, SFGHMC employs advanced practice nurses, nurse practitioners and physician assistants to provide care in the inpatient and clinic settings, as part of the overall healthcare delivery team.