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

3. **IMPROVE ACCESS TO HEALTHCARE SERVICES AND ACHIEVE THE GOALS OF THE HEALTH ACCESS PROGRAM.**

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