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Co-Chair / ZSFG Chief Operating Officer

Monica Diaz
Co-Chair/ Team Leader RCFE
SEIU Miscellaneous

Linda Sims, RN
BHC Director

Adela Morales
RCFE Program Director

Jeffrey Schmidt
Director of ZSFG Clinical Operations

Adrian Smith
Director of Regulatory Affairs

Ingrid Thompson, RN
MHRC Director of Nursing

Kelly Morson
Team Leader ARF
Local 21

Sharifa Rahman
Mental Health Rehabilitation Worker
ARF
SEIU Miscellaneous

Karlyne Konczal, LVN
Team Leader RCFE
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Amy Wong
Mental Health Treatment Specialist
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San Francisco Behavioral Health Center Adult Residential Facility Working Group

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MINUTES

SF Behavioral Health Center Adult Residential Facility Working Group

Thursday, May 6, 2021, 9:30 a.m.

San Francisco Behavioral Health Center
Microsoft Teams Live Event

1) ROLL CALL & INTRODUCTIONS

Present: Monica Diaz, Co-Chair / Team Leader RCFE, SEIU Miscellaneous
Linda Sims, RN, Behavioral Health Center Director
Adela Morales, RCFE Program Director
Ingrid Thompson, RN, MHRC Director of Nursing
Kelly Morson, LVN, Team Leader, Local 21
Sharifa Rahman, Mental Health Rehabilitation Worker, ARF, SEIU Miscellaneous
Karlyne Konczal, Team Leader RCFE, SEIU Miscellaneous
Amy Wong, Mental Health Treatment Specialist, MHRC, Local 21
Sarah Larson, MS, Mental Health Treatment Specialist, RCFE, Local 21

Absent: Andrea Turner, Co-Chair / ZSFG Chief Operating Officer
Adrian Smith, Director of Regulatory Affairs

Other Attendees: Casie Aniya, SFBHC ARF Working Group Secretary.

The meeting was called to order at: 9:31AM.

Full materials are online here: <https://www.sfdph.org/dph/comupg/knowlcol/meetinggroups/agendasminutes.asp>
or by email request to casie.aniya@sfdph.org

2) REVIEW AND APPROVAL OF THE APRIL 1, 2021 MEETING MINUTES

Monica Diaz opened topic for discussion.

Public Comment:

There was no public comment on this item.

Discussion:

Mr. Schmidt requested that the following sentence on page 2 be deleted: "For the CPI and client abuse pieces, leadership is looking to integrate the psychiatric and community care licensing components which will be a longer process to develop those trainings."

Action:

The Working Group voted unanimously to amend and approve the April 1, 2021 minutes with changes outlined above.

3) CPI TRAINING UPDATE

Monica Diaz opened topic for discussion.

Public Comment:

There was no public comment on this item.

Discussion:

Mr. Schmidt confirmed that the organization is in a place in the pandemic where in-person CPI training has resumed. The hospital started with the Emergency Department, with the first cohort taking the training over the next three months. The BHC will be able to start their training soon.

Ms. Sims added that she has had a discussion with Mr. Price, and he is working on a plan to get the BHC's large number of staff trained. She confirmed that the ARF will be prioritized but she is waiting to hear Mr. Price's plan to ensure that the BHC can continue to provide care on the unit while training staff. Mr. Schmidt noted that the plan will be similar to the Emergency Department in that staff will receive training over a few months.

Ms. Larson asked when the trainings will start. Mr. Schmidt replied that he hopes it will begin this month but there is currently no exact date. He can follow up with Mr. Price and get back to the group. For now, they are excited that they are able to start planning as the pandemic situation improves.

4) SECURITY RISK ASSESSMENT IMPLEMENTATION UPDATE

Monica Diaz opened the floor.

Public Comment:

There was no public comment on this item.

Discussion:

Mr. Schmidt confirmed that work is being done out the outside of the building. So far, some of the lighting has been improved, the Sheriff's Department has increased bicycle patrols particularly around the Potrero Entrance, and Facilities is cleaning the stairwells and grounds around the BHC where people have left various items. Lastly, work orders have been submitted for panic buttons.

Ms. Sims stated that she has received feedback that the lighting has improved, and they will continue to add more. Ms. Sims is also conducting rounds at least once daily and can reach out to Facilities if something needs to be cleaned. She confirmed that Mr. Price is putting in the work orders and recommendations for the budget.

Ms. Wong stated that in the past there was a trash bin by the entrance between the two doors. She noted that there are pros and cons of having it there but asked if this would be brought back. Ms. Sims responded that Facilities recommended removing the bins because clients would empty the trash onto the stairwell overnight and they had to come to the BHC to clean it, daily. She agreed that there are pros and cons to having it there. Mr. Schmidt confirmed that leadership will discuss this with Greg Chase, the ZSFG Facilities Director, and determine if they can bring the trash bin back to test if this issue arises again.

Ms. Larson asked if the security cameras have been switched so that they can review when things occur there. Mr. Schmidt replied that he has not heard of the cameras being switched, but they were improving some. Ms. Sims added that at this time they will not be recording the comings and goings of clients.

Ms. Larson asked if there is a central area where staff are watching the cameras on campus? Mr. Schmidt confirmed that Ms. Larson is referring to the Lenel Security System which our hospital security cameras are connected to and monitored out of the Sheriff's Office. The BHC cameras need to be connected as well, but the budget has not yet been approved. Ms. Larson asked if there is a timeline for their connection. Mr. Schmidt replied that the budget cycle is currently in review and our budget comes out in July, which is when they will know what has been approved by the Mayor's Office. He agreed that this is important for staff safety.

Ms. Larson stated that Mr. Price recommended that the ARF have a procedure to monitor clients bringing in illicit items. Ms. Diaz added that this presents a safety issue as clients have brought in knives or other illicit items. Ms. Sims stated that she can follow up with Community Care Licensing to determine whether this will be allowed, as there are residents rights and things the facility is not allowed to do since it is not a treatment center. Mr. Schmidt confirmed that the clients have rights that the facility is not allowed to violate. Therefore, Ms. Sims can ask the regulatory bodies about this to ensure the ARF is not violating any patient rights. Ms. Wong added that the goal is to keep clients and staff safe. Mr. Schmidt agreed.

Ms. Diaz asked whether the panic buttons are going to be facilitated and if so, when they will be. Mr. Schmidt stated that this is a much easier installment than cameras as it is done locally by our Facilities Department. Mr. Price has mapped out where they will be installed, and Mr. Schmidt will get a projected timeline.

5) RESIDENT CARE IN THE ARF UPDATE – FURNITURE UPDATES

Monica Diaz opened the floor.

Public Comment:

There was no public comment on this item.

Discussion:

Ms. Sims shared that Ms. Rahman, Ms. Morson and the entire ARF team have done incredible work in the ARF and would like the WG to acknowledge that. She stated that there are many parts to the improvement plan, but the ARF team has identified three priority areas that they will tackle first, then look to move to phase 2 and 3. Phase 1 includes client ADLs, development of the activity program and offering of therapeutic groups, and needs and service plans.

Ms. Sims continued that for client ADLs, there are a couple of work tools that help track clients' activities such as room cleanup. They will be rolling out those tools soon.

Ms. Morson added that the ARF staff have already started communicating with clients about these tools. They have implemented the shower schedule that will help to remind clients who need extra support through a check-off system. This will be tracked monthly in the communications book. They also have a weekly ADL plan that will go into the report book to help track clients' showering, laundry, room cleaning, appointments, and

groups and activities attended. The staff help to ensure that clients are engaging in at least one of these activities every day. Ms. Morson continued that the ARF has community meetings every morning and asks clients for topic suggestions. Ms. Morson also recently co-facilitated a medication education group, in which clients were engaged and asking about the groups. They have made great progress so far.

Ms. Rahman added that the staff have made a daily schedule for clients, including medication needs, activities, coffee talks, games, gyms, etc. She also noted that most of their clients now participate in the recycle program and five or six clients are actively involved in the garden program. Ms. Sims appreciated how much the staff have pulled together and the wonderful work they are doing. It has been great watching how well the clients have responded. She and Mr. Schmidt both celebrated and thanked the staff for their great work.

Ms. Larson asked if they have a coordinator. Ms. Morson replied that the Team Leaders come together as a group, daily, to discuss whatever specific needs the clients have and come up with a plan for each shift. Ms. Larson believes that the ARF is required to have one person responsible. Ms. Rahman stated that it is the Team Leader. Ms. Sims confirmed that leadership will double check the regulations and thanks Ms. Larson for bringing that forward.

Ms. Wong thanked Ms. Rahman and Ms. Morson for spearheading this plan to ensure the ARF is active and client centered. She stated that in the last WG meeting, leadership would explore harm reduction models and get back to the group. She asked what the timeline for this would be. Mr. Schmidt thanked Ms. Wong for bringing this up and stated that the group can add this to next month's agenda.

Ms. Morson also thanked Ms. Morales for all her support with this work.

Ms. Larson stated that the facility is having trouble with the linens as they are running short on towels for the clients. Ms. Sims asked if staff could report the issue in real time, so they can review where there is a break in the system that is in place for this. She confirmed that leadership will follow up, as the process is for units to fill out a form that they can fax over and follow up with a phone call. They can then notify the house coordinator if they are not receiving a response. She stated that she and Ms. Morales were unaware of this issue and they will follow up with the Team Leaders. Perhaps this is a potentially area for additional funding as the group looks to de-institutionalize the building.

Ms. Wong asked for a furniture update. Ms. Sims confirmed that they recently conducted a survey of the furniture and requested new beds, outdoor furniture, bedside stands and furniture for the day room. She has reached out for a status update but has not yet heard back from Facilities.

Ms. Larson asked if there is a plan to replace the closets or install shelves and hooks for residents. Ms. Sims replied that they cannot install hooks as they are a ligature issue for clients. Therefore, they can look into what other renovations would include. Ms. Larson asked if the hooks would be an issue since the ARF is not an acute care facility. Mr. Schmidt confirmed that in any facility they look for ligature risks and how to mitigate them, whether that is in the hospital, skilled nursing facility, etc. Regulators look at these risks so hooks would not be safe for clients or patients.

Ms. Larson asked if there is a plan to replace the closets or renovate. Mr. Schmidt confirmed that they will have to look into this project and what funding is available, but they are first starting with replacing the furniture. The closets can be a possible future project.

6) STAFFING MODEL DRAFT

Monica Diaz opened the floor.

Public Comment:

Connie Truong, MHRC Activity Leader, SEIU: I am concerned about the mandatory overtime. This will be considered a change of condition and I will be consulting the union about this issue.

Discussion:

Ms. Sims provided an update on the ARF staff vacancies. Currently they have three new hires for the ARF evening shift, in training and orientation. These new hires are two Team Leaders and one LPT. Therefore, the remaining vacancies are one Team Leader on the night shift and two LPTs. However, Ms. Sims stated that they are closer to filling those positions, but those classifications are difficult to recruit for. They have done interviews in which LPTs have turned down the positions. They are currently trying to follow up with two LPTs to determine if they would be interested in any position here. Leadership has also conducted Team Leader interviews, so they are now waiting to hear back from one candidate to see if they are interested in the position in the ARF, as there is only a night shift position left. Ms. Sims confirmed that they will be posting the staffing model in the ARF for staff to view and they will update the vacancies as they are filled.

Ms. Diaz asked Ms. Sims what the staffing ratios are for morning, pm, and night shift. Ms. Sims replied that ratios are based on regulations and there are no required ratios for day or pm shift for board and care facilities. There are only ratios for the night shift and the ARF meets those requirements. They are working to have one Team Leader on each shift, one LPT on days and evenings, and two Mental Health Workers on each shift, which would be four staff on days and evenings and three on nights.

Ms. Diaz asked if those numbers are the minimum. Ms. Sims replied that they could drop below that if they have call-ins or staff request shifts off. The minimum is three staff on day shift, three staff on evening shift and two staff on night shift. The night shift staff have mentioned that two staff would be manageable. Ms. Diaz responded that she doesn't feel two staff on the night shift is safe because when one person goes on break, they are leaving one person on the floor, which could be a safety issue in case there is an emergency.

Ms. Konczal pointed out that every time there are three staff on the schedule, one person calls out. Ms. Diaz commented that the model needs to project for four staff instead of three and that people are willing to work over time. Ms. Morales added that as a manager, it is difficult to schedule when people call out. There is an issue in which staff find out how many staff are working and request a day off if they believe there are enough staff. There are also people on leave, but there is not much they can do about those staff.

Ms. Diaz asked that leadership replace the people who call out. Ms. Sims asked if Ms. Diaz is recommending that the ARF implement mandatory overtime. They have offered that before but were unable to have anyone work those shifts. Mr. Schmidt confirmed that that is the only option they are left with if management is unable to replace staff and there are safety issues. The hospital does the same thing in which they mandate staff to stay on based on the operational need. Mr. Schmidt confirmed that he will meet with Ms. Sims and Ms. Morales to discuss this and thanks the group for bringing up these issues.

Ms. Sims confirmed that she will have the staffing model posted in one of the bulletin boards in the nursing station by the end of the week.

Mr. Schmidt confirmed that from his experience working in operations, it is never easy to replace staff for sick calls, but they will work on it even if that means mandatory overtime.

7) TOPIC SUGGESTION FOR NEXT MEETING

Monica Diaz opened the floor for discussion.

Public Comment:

There was no public comment on this item.

Discussion:

Mr. Schmidt recommended that the CPI Training Update remains on the agenda. He also added that the Security Risk Assessment Implementation Update should remain on the agenda since panic buttons and cameras are the follow up items. Mr. Schmidt also recommended that Resident Care in the ARF remains so the WG can continue to hear about the incredible work being done.

Ms. Larson recommended that harm reduction and patient property be added to the agenda.

Ms. Larson also recommended an update on the Epic / HIPAA.

7) GENERAL PUBLIC COMMENT

Monica Diaz opened the floor for general public comments.

Public Comment:

There was no general public comment.

8) ANNOUNCEMENTS

Monica Diaz opened the floor to announcements.

Public Comment:

There was no public comment on this item.

Discussion:

Ms. Konczal notified the group that she will be exiting the WG next month and Connie Truong will be on board to take her place.

The BHC will have a representative on the Workplace Violence Prevention Committee. The decision for who the representative will be is outside of the purview of the ARF WG and will be decided by the BHC as a whole.

9) ADJOURNMENT

The meeting was adjourned at 10:35AM.