1. **Professional Nursing for the Month of May 2016**

**Transition Initiatives**

Nursing department Designated Transition Education Champions (DTECH) staff are transitioning to an Optimization role post move day. In this optimization role, they will collaborate and lead organizational and departmental nursing initiatives and will contribute to the clinical staff development using their expertise as educator, consultant, and leaders to optimize logistical operations, care delivery, and staff competency.

**Nursing Professional Development**

Leslie Holpit and Rosaly Ferrer are the nursing leaders that attended the 7th annual Lean Healthcare Transformation Summit June 14 and 15th. They will be networking and learning from the lean healthcare community that attend from around the world and will be learning, sharing, and connecting at this event that is known to be highly value-added, and will come back to ZSFG with actionable ideas and new connections for continued Lean journey ahead.

**Nursing Recruitment and Retention**

Karen Napitan, Nurse Manager Psychiatry, and Karen Hill, Departmental Personnel Officer SFDPH, attended the American Association of Critical Care Nurses National Teaching Institute (NTI) annual conference recruiting registered nurses for ZSFG from the over 8000 attendees.
2. **Emergency Department (ED) Data for the Month of June 2016**

![SFGH Emergency Department Activities](chart1.png)

![JCC Diversion Report 2016](chart2.png)

**May | 2016**

- **Diversion Rate:** 43%
  - *ED diversion* – hours 271 (35%) + *Trauma override* - hours 64 (9%)

- **ED Encounters:** 6063
- **ED Admissions:** 926
- **ED Admission Rate:** 15%
3. **Psychiatric Emergency Service (PES) Data for the Month of June 2016**

**ZSFG Psychiatric Emergency Service Activities**

- Admitted to 7B
- ADU
- Transferred to private hospital
- Discharged to Community

**ZSFG PES Condition Red**

<table>
<thead>
<tr>
<th>Year</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
<th>Jul</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>9%</td>
<td>7%</td>
<td>20%</td>
<td>11%</td>
<td>7%</td>
<td>14%</td>
<td>11%</td>
<td>25%</td>
<td>16%</td>
<td>18%</td>
<td>13%</td>
<td>16%</td>
</tr>
<tr>
<td>2015</td>
<td>10%</td>
<td>16%</td>
<td>16%</td>
<td>22%</td>
<td>26%</td>
<td>21%</td>
<td>27%</td>
<td>34%</td>
<td>46%</td>
<td>32%</td>
<td>47%</td>
<td>26%</td>
</tr>
<tr>
<td>2016</td>
<td>34%</td>
<td>36%</td>
<td>41%</td>
<td>49%</td>
<td>30%</td>
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4. **Request for Inter-Facility Transfer to PES from other Hospitals**

A priority of PES is to improve the timeliness and appropriateness of inter-facility transfers from referring hospitals. The following three types of PES referrals have been observed: Accepted and Arrived, Accepted and Cancelled, and Inappropriate Referral.

**Accepted and Arrived Referrals** refer to patients that have been approved by PES for admission and are transferred and admitted to PES. The transfer of these patients has been authorized by PES based on EMTALA regulations as well as the communication of clinical condition between the sending and the receiving physicians.

**Screened Appropriate but Cancelled Prior to Acceptance** refers to patients that have been screened by a triage nurse and have preliminary approval, but the paperwork has not been reviewed by a physician. Their transfer was then cancelled by the referring facility. This cancellation could be because the referring hospital has decided to place the patient on their own psychiatric unit or because the patient has cleared psychiatrically and the 5150 hold has been dropped.

**Inappropriate Referrals** refer to patients identified through the PES screening process to be inappropriate for transfer and admission to PES for evaluation and disposition. Common reasons for PES to decline transfer of a patient from a referring hospital are medical status (not medically stable for transfer) and insurance status (e.g., private insurance or out of county Medi-Cal).

<table>
<thead>
<tr>
<th>Disposition of PES Referrals from Other Hospitals</th>
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<tbody>
<tr>
<td><strong>June 2015</strong></td>
</tr>
<tr>
<td>N=88</td>
</tr>
<tr>
<td>Accepted &amp; Arrived</td>
</tr>
<tr>
<td>Screened Appropriate and Cancelled</td>
</tr>
<tr>
<td>Inappropriate Referral</td>
</tr>
</tbody>
</table>

**Analysis**

- No significant change over the past 12 months in the number of requests for transfer from other hospitals to PES.

- May showed little change in patients which were “Screened Appropriate but Cancelled” (formerly Accepted but Cancelled), up to 55% from 54% in April.

- This month showed an increase in proportion of requests which were “Accepted and Arrived”, 27%.

- There was a decrease in “Inappropriate Referrals” in May 2016 to 18%. These are requests for transfer of patients that are found to be medically unstable for transfer, or who are not residents of San Francisco. The factors causing this change are not clear.