PATIENT CARE SERVICES REPORT

Submitted to the Joint Conference Committee, August 2017

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1. Professional Nursing for the Month of July 2017

Nursing Professional Development

Departmental Safe Patient Handling Plans will be adopted by all in-patient units this month. Safe Patient Handling Committee is coordinating training for identified departmental champions. These six hour classroom sessions will include education on safe body mechanics, roles and responsibilities, communication and coaching, and hands-on training with device vendors. Additional classes are projected for next year.

The Workplace Violence Prevention Plan education and training has been initiated, focusing on areas with higher risk - the Emergency Department, Psychiatric Emergency Services, Urgent Care, and Psychiatry. This education and training will widen throughout the year to encompass all ZSFG staff.

The Clinical Education Collective will have their premier meeting August 24. The purpose of these monthly meetings, attended by Clinical Nurse Specialists, Nurse Educators, and Performance Improvement Coordinators, is to share knowledge, expertise, and resources across nursing disciplines to contribute to department-wide professional development and educational initiatives in a manner that is collaborative and fosters teambuilding.

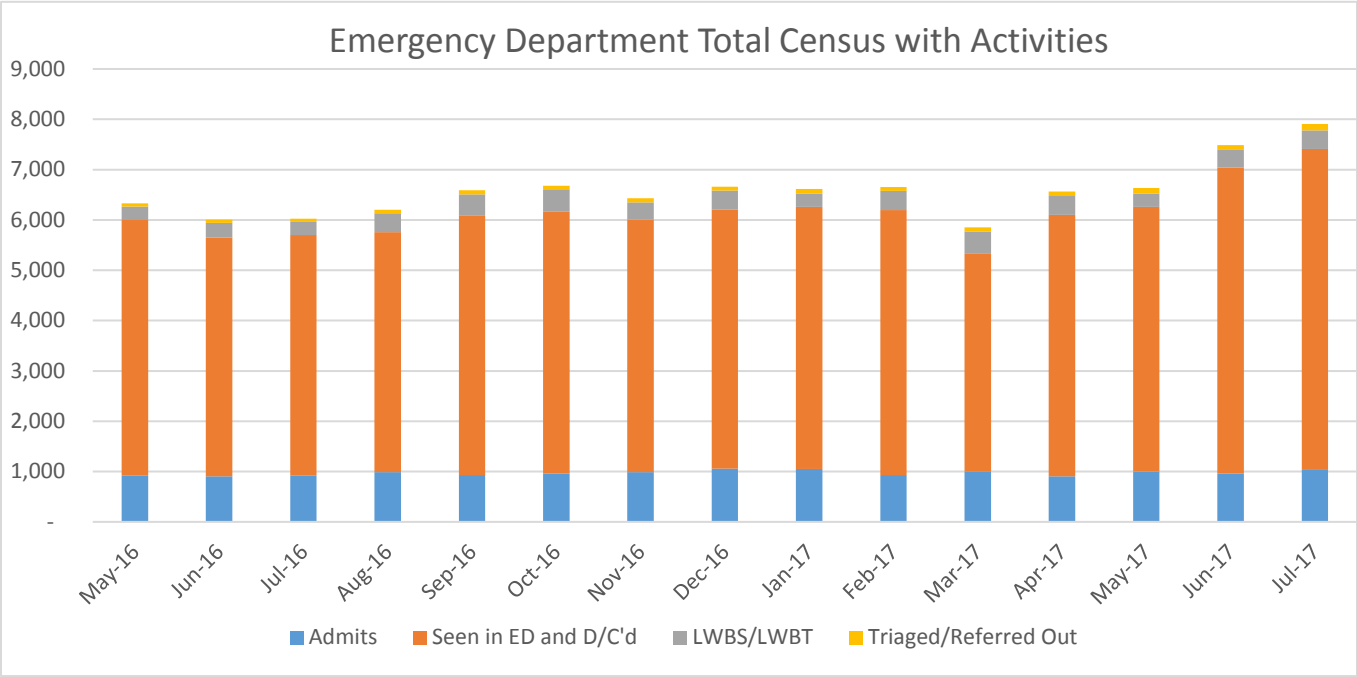
Nursing Recruitment and Retention

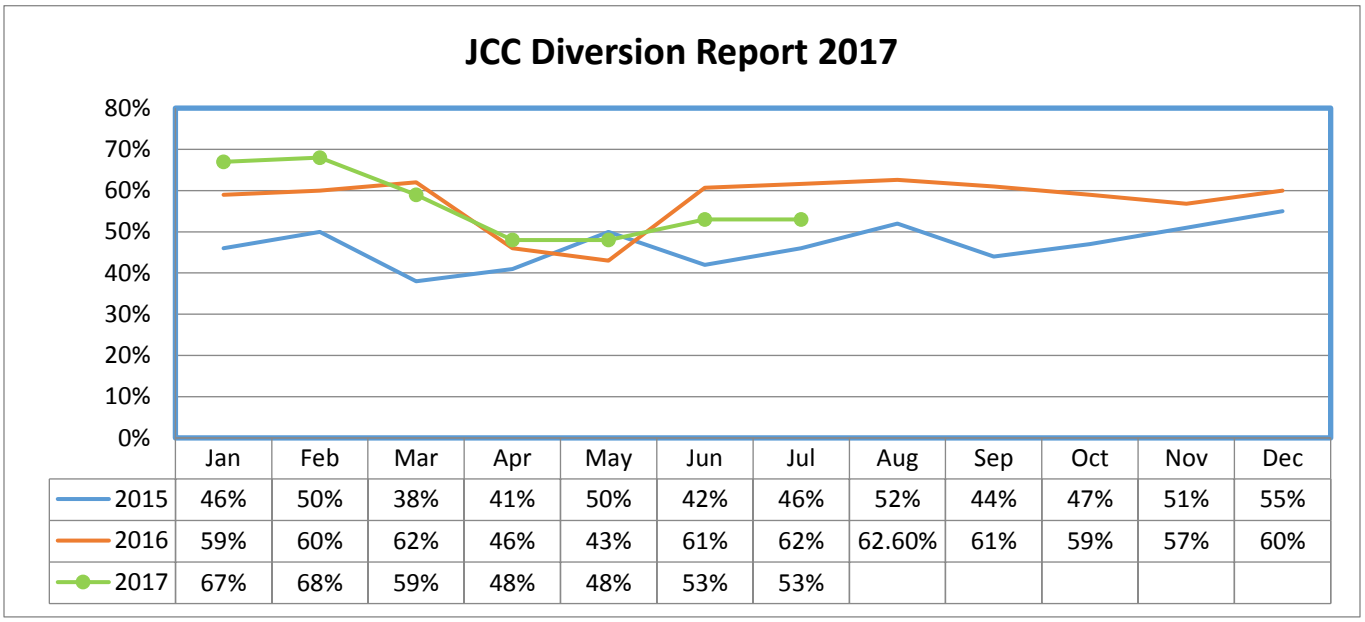
Medical-Surgical Six nurses are scheduled to begin orientation next week. The next Med-Surg Training Program is scheduled to begin in September.
Emergency Nursing Eight nurses are completing their training to the department. Fourteen float pool patient care assistants have been on-boarded.
Maternal Child Health Two nurses are successfully completing their training to Labor and Delivery. Three nurses to begin general orientation next week.
Peri-Operative The operating room is awaiting the training program start date for four nurses. One nurse begins general orientation next week.
Critical Care The Critical Care Training Program is currently underway with four nurses advancing in their training. One nurse to begin orientation next week.
Psychiatry One nurse begins orientation next week.
Outpatient Services Two nurses begin orientation next week.

Nursing Recognition

Patient Safety Zero Hero Awards will be announced next month. These quarterly awards are presented to nursing units with zero rates of falls with injury, catheter associated urinary tract infection, hospital acquired pressure injuries, and surgical site infections.

2. Emergency Department (ED) Data for the Month of July 2017





	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2015	46%	50%	38%	41%	50%	42%	46%	52%	44%	47%	51%	55%
2016	59%	60%	62%	46%	43%	61%	62%	62.60%	61%	59%	57%	60%
2017	67%	68%	59%	48%	48%	53%	53%					

July | 2017

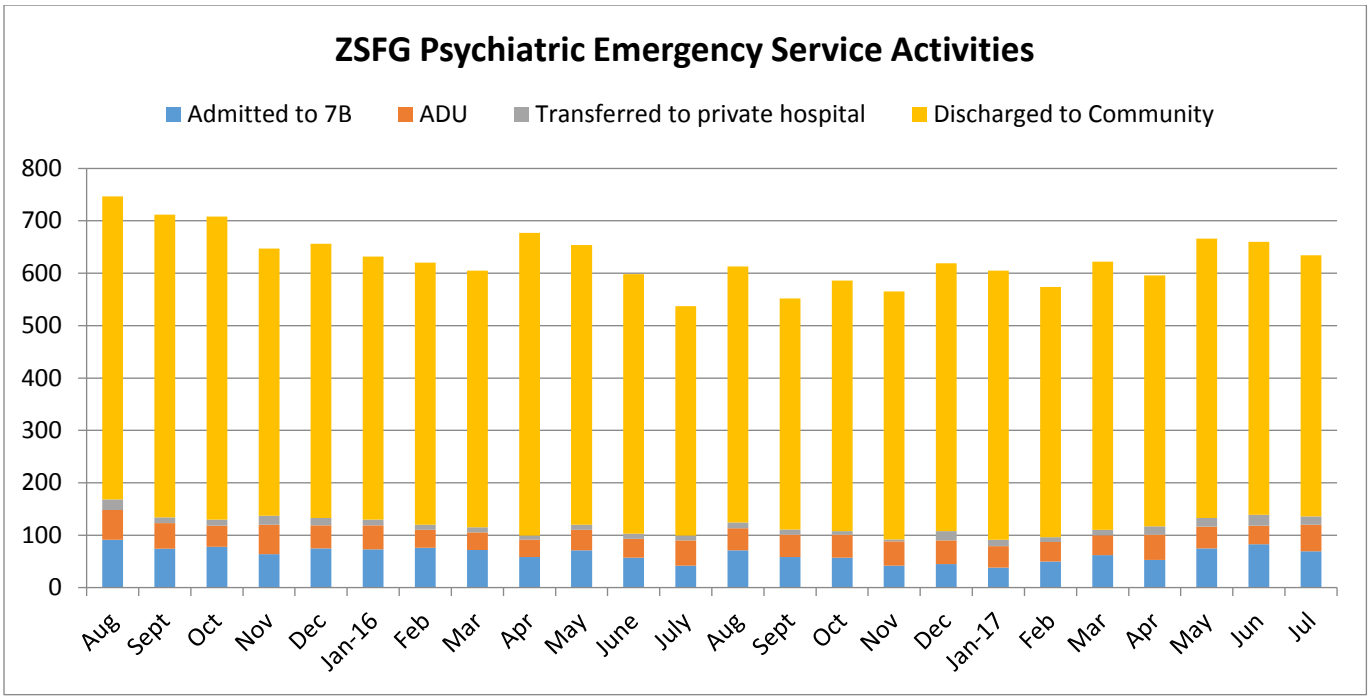
Diversion Rate: 53%
*ED Diversion = 311 hours **(42%)** + Trauma Override = 81 hours **(11%)***

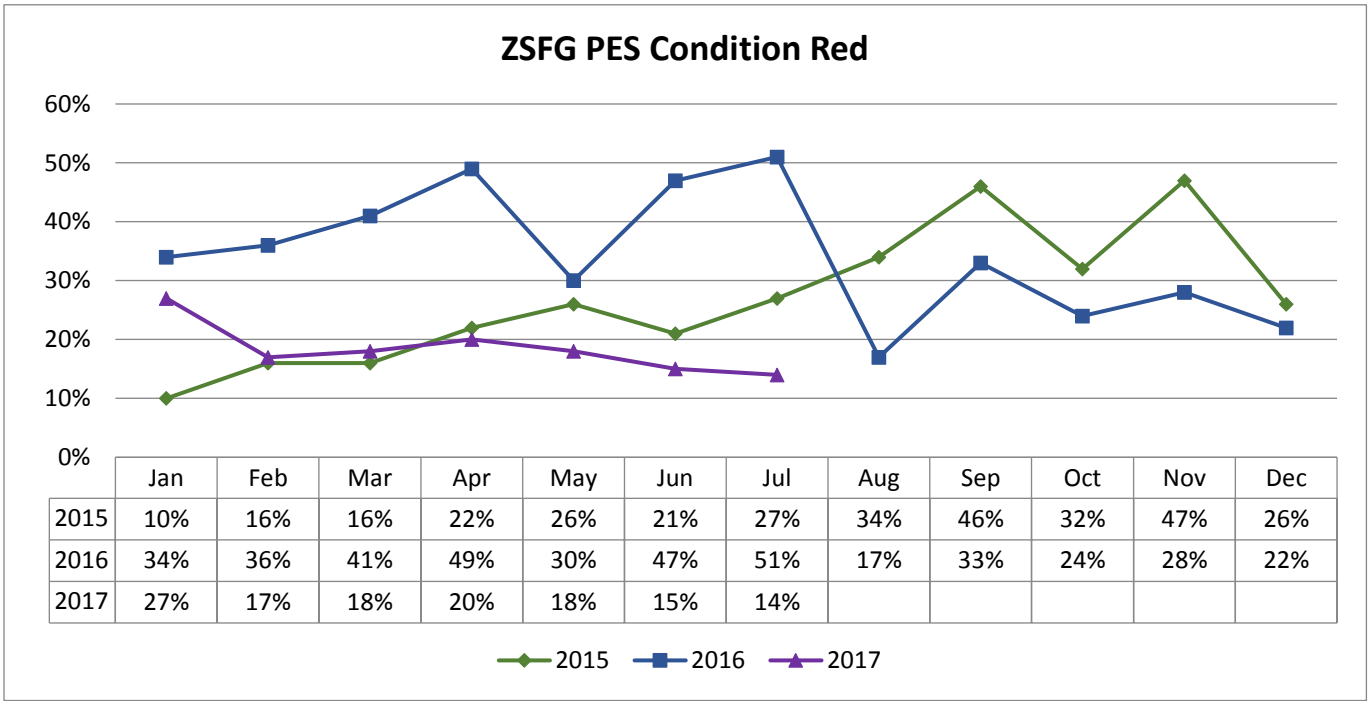
Total Ed Encounters: 6379

ED Admissions: 1034

ED Admission Rate: 16.2%

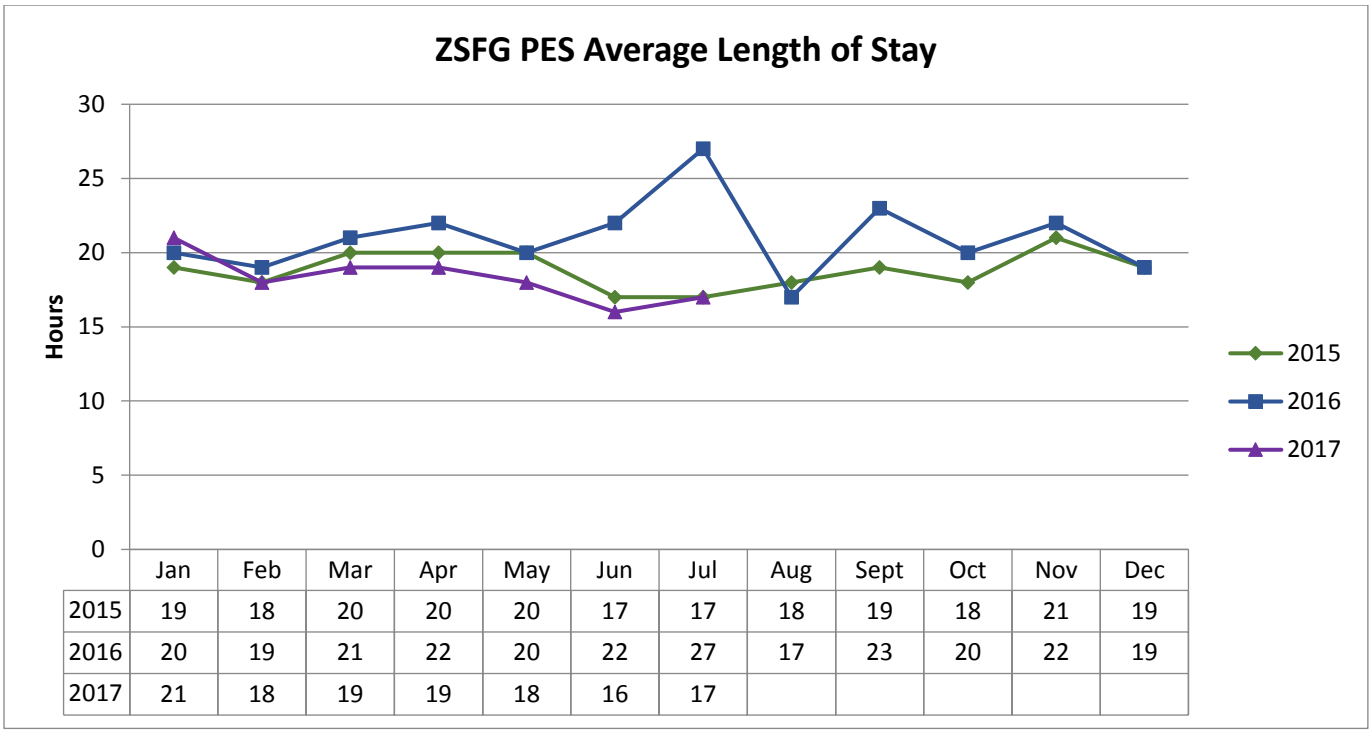
3. Psychiatric Emergency Service (PES) Data for the Month of July 2017



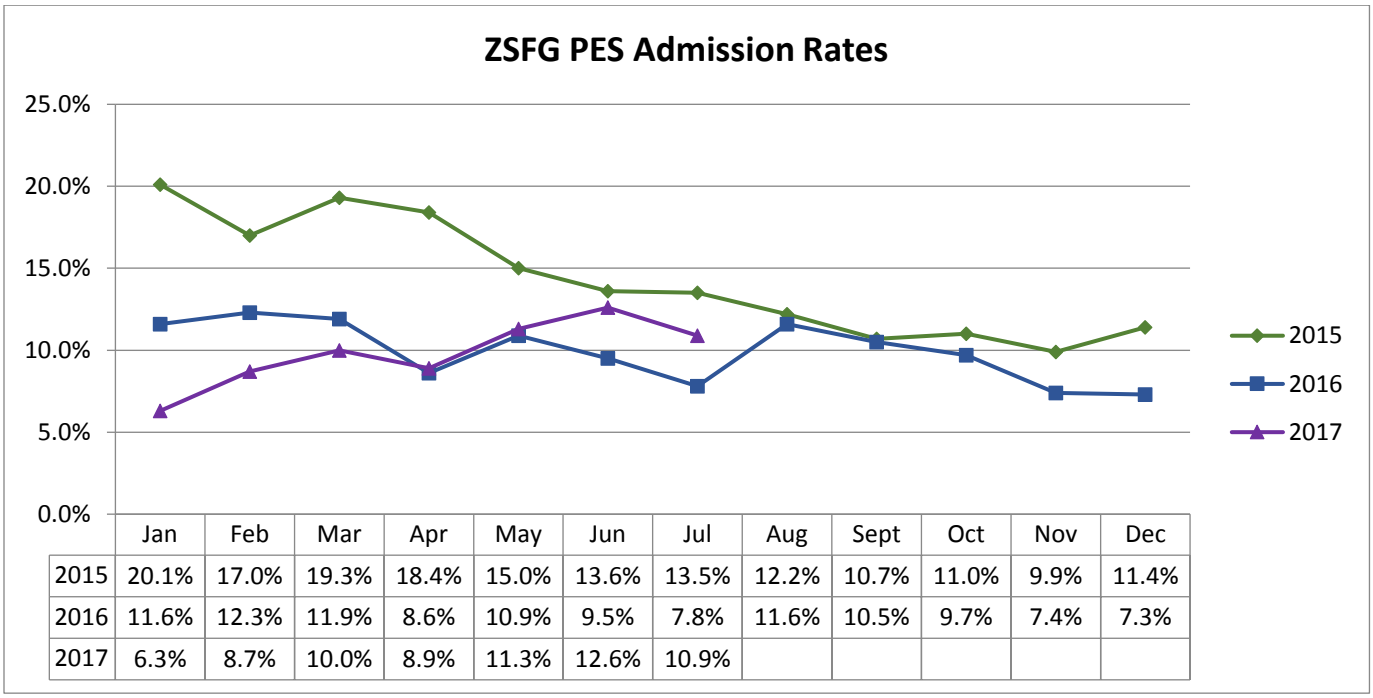


	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2015	10%	16%	16%	22%	26%	21%	27%	34%	46%	32%	47%	26%
2016	34%	36%	41%	49%	30%	47%	51%	17%	33%	24%	28%	22%
2017	27%	17%	18%	20%	18%	15%	14%					

Psychiatric Emergency Service (PES) Data for the Month of July 2017…continued



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
2015	19	18	20	20	20	17	17	18	19	18	21	19
2016	20	19	21	22	20	22	27	17	23	20	22	19
2017	21	18	19	19	18	16	17					



	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
2015	20.1%	17.0%	19.3%	18.4%	15.0%	13.6%	13.5%	12.2%	10.7%	11.0%	9.9%	11.4%
2016	11.6%	12.3%	11.9%	8.6%	10.9%	9.5%	7.8%	11.6%	10.5%	9.7%	7.4%	7.3%
2017	6.3%	8.7%	10.0%	8.9%	11.3%	12.6%	10.9%					

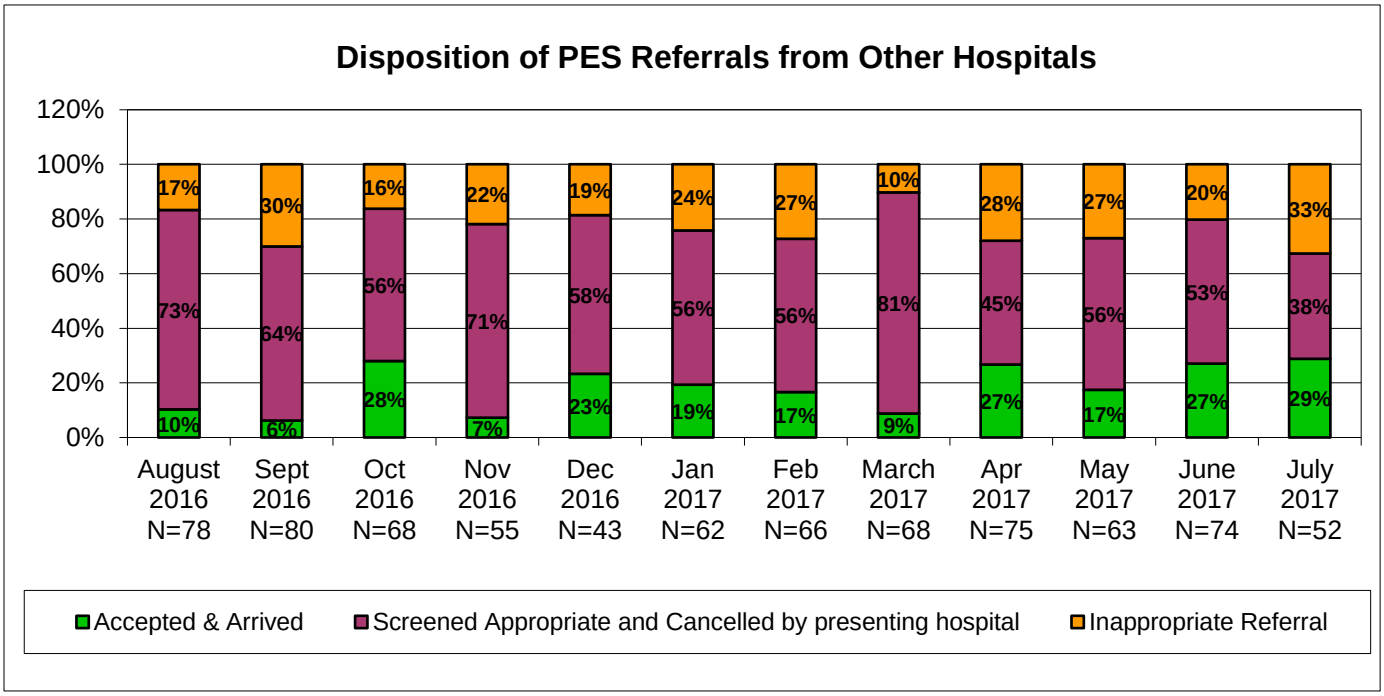
4. Request for Inter-Facility Transfer to PES from other Hospitals

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).



In July, the percentage of patients who were accepted and arrived from other hospitals increased slightly. Cancellations by the presenting hospital decreased this month. There were more inappropriate referrals- patients with private insurance or who are medically unstable, or do not have a psychiatric diagnosis.