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Edward A. Chow, M.D.
Commissioner

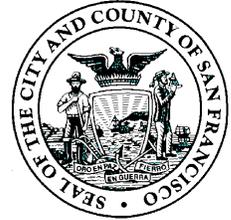
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Laurie Green, M.D.
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**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

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MINUTES

**JOINT CONFERENCE COMMITTEE FOR
ZUCKERBERG SAN FRANCISCO GENERAL
HOSPITAL AND TRAUMA CENTER**

Tuesday, October 22, 2019 3:00 p.m.

**1001 Potrero Avenue, Building 25, 7th Floor Conference Room H7124, H7125 and H7126
San Francisco, CA 94110**

1) CALL TO ORDER

Present: Commissioner Edward A. Chow, M.D., Chair
Commissioner Laurie Green, M.D.

Excused: Commissioner James Loyce, Jr.,

Staff Present: Susan Ehrlich, MD, Sue Carlisle MD, Greg Wagner, Karrie Johnson, Leslie Safier,
Tosan Boyo, Val Barnett, Greg Chase, Virginia Dario Elizondo,
Troy Williams, Dan Schwager, Terry Dentoni, Kim Nguyen, Julianne Bautista,
Casie Aniya, Claire Horton MD, Will Huen MD, Eric Wu, Jessica To, David Lawlor, Lann
Wilder, Mike Harris

The meeting was called to order at 3:11 pm.

**2) APPROVAL OF THE MINUTES OF THE SEPTEMBER 24, 2019 ZUCKERBERG
FRANCISCO GENERAL JOINT CONFERENCE COMMITTEE MEETING**

Action Taken: The Committee unanimously approved the September 24, 2019 meeting minutes.

3) REGULATORY AFFAIRS REPORT

Troy Williams, Chief Quality Officer, presented the item.

Commissioner Comments:

Commissioner Chow asked if there are plans to change workflow and working relationships with the Sherriff's staff. Mr. Boyo stated that for the past year, ZSFG has been developing a Workplace Violence Committee to better understand the drivers of workplace violence at ZSFG with a specific focus on PES, ED, Med/Surg, and Ambulatory Care. He added that the Committee will work on solutions that are a partnership between the line staff, administration, and Sheriff's Department.

Regarding workplace violence, Commissioner Green asked if ZSFG is reviewing short-term and long-term best practices. Mr. Boyo stated that ZSFG is working with Highland Hospital and Santa Clara County PES to learn from its peers.

Commissioner Chow asked if the Sheriff and Police Departments have been cooperative in this effort. Ms. Boyo stated that ZSFG meets regularly with the Sheriff's staff; the Police captain attends quarterly ZSFG meetings.

Commissioner Green asked how ZSFG staff are updated as changes in practice are made. Mr. Boyo stated that frontline staff are invited to the Workplace Violence Committee and staff town halls will be implemented. Ms. Dentoni stated that the ZSFG Emergency Department has its own Workforce Committee that communicates information from the campus-wide Workplace Violence Committee.

Commissioner Chow suggested that regular communication to staff regarding workplace violence issues would be beneficial to the situation. He added that morale for line staff working in the Emergency Department is important because of the innate intensity of any Emergency Department.

4) DRAFT ZSFG FY 18-19 ENVIRONMENT OF CARE ANNUAL REPORT

Val Barnett, Associate Hospital Administrator, Support Services, Greg Chase, Director, Facilities Services, Mike Harris, Interim Safety Officer, and Lann Wilder, Director of Emergency Management, presented the item.

Commissioner Comments:

Commissioner Chow noted the drop in use of force and asked for more information regarding this data. Mr. Boyo stated that a team meets after every incident to better understand the possible cause. Ms. Dentoni stated that the BERT team of psychiatric nurses are used to deescalate situations in inpatient units Monday through Friday from 8am to 5pm.

Commissioner Green noted that the report reflects great teamwork throughout ZSFG. She asked how the increase in reported threats interface with the lower use of force. Mr. Harris stated that OSEA added a requirement a few years ago mandating that all threats be logged; he noted that unions may be encouraging staff to regularly report threats too. Mr. Boyo stated that Basil Price, Director of SFDPH Security, utilizes a threat analysis tool to help with prevention efforts.

Commissioner Green asked how staff make reports of threats. Mr. Williams stated that the UO system is used; he added that EPIC added challenges to the UO system. ZSFG is in the process of developing an RFP to develop a new UO/grievance reporting system which should help with analysis of this data. Ms. Barnett stated that staff are able to contact Mr. Price, a supervisor, or Sheriff directly about any potential threat.

Action Taken: The Committee unanimously recommended that the full Health Commission approve the FY18-19 Environment of Care Annual Report.

5) DRAFT ZSFG FY18-19 ANNUAL REPORT

Susan Ehrlich, MD, Chief Executive Officer, presented the item.

Commissioner Comments:

Commissioner Green noted that SOGI data is not emphasized in the Equity Strategy. She also noted that the abbreviations listed on page 20 may not be known to readers.

Commissioner Chow stated that the annual report is an opportunity for ZSFG to report back to the City what it has done during the year. In the past, the Commission has requested demographic and

financial data. He also noted that patient stories can be powerful tools to communicate the quality of care at the hospital. He also encouraged highlighting ZSFG/UCSF research successes.

Dr. Colfax encouraged ZSFG to bring patients' voices and stories into the report.

6) POLICY 8.09 HOSPITAL PLAN FOR PROVISION OF PATIENT CARE

Terry Dentoni, Chief Nursing Officer, presented the item.

Commissioner Comments:

Commissioner Chow noted an increase in ZSFG patients residing in San Francisco. Dr. Carlisle stated that ZSFG has been more successful in the past year with providing care to San Francisco Health Network patients.

Commissioner Chow asked for more information regarding validation of EPIC data. Ms. To stated that PES data has been validated, Emergency Department data is being validated. She added that the lower level of care data is the most complex to validate.

Commissioner Green congratulated ZSFG for implementing EPIC without drastic reduction in the level of patient care.

Action Taken: The Committee unanimously recommended that the full Health Commission approve Policy 8.09 Hospital Plan for Provision of Patient Care.

7) POLICY 17.01 PERFORMANCE IMPROVEMENT AND PATIENT SAFETY PROGRAMS (PIPS)

Troy Williams, Chief Quality Officer, presented the item.

Commissioner Comments:

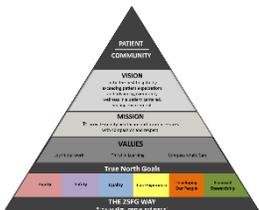
Commissioner Chow noted a change to the Risk Management Committee. Mr. Williams stated that the title has changed but it is still managed within the Risk Management division.

Action Taken: The Committee unanimously recommended that the full Health Commission approve the Policy 17.01 Performance Improvement and Patient Safety Programs.

8) ZSFG CHIEF EXECUTIVE OFFICER'S REPORT

Susan Ehrlich, MD, Chief Executive Officer, presented the item.

Report Updates



SAFETY

Page 2

- 1. 2018 HIV Progress Report

DEVELOPING OUR PEOPLE

Page 2

- 2. Nursing Professional Development Week
- 3. Nursing Workforce Development Hearts Grant Award
- 4. Fall Fest 2019
- 5. 10th Anniversary of the Institute of Global Orthopaedics and Traumatology

Data Updates



QUALITY Page 5

- Emergency Department Activities
- Psychiatric Emergency Services Activities
- Average Daily Census
- Lower Level of Care

FINANCIAL STEWARDSHIP Page 16

- Salary Variance

SAFETY

1. 2018 HIV Progress Report

On September 10, 2019, ZSFG's Ward 86 held a press conference that presented the 2018 HIV Progress Report, issued by SFDPH's Population Health Division. This report detailed that new HIV diagnoses declined 13% from 227 diagnoses in 2017 to 197 in 2018, dropping below 200 for the first time since the AIDS epidemic was documented in the 1980s. Furthermore, 94% of people living with HIV in SF are aware of their diagnosis and 91% of new diagnoses in 2018 were linked to care within one month of their diagnosis.

There is much more work to be done, but tremendous progress has already been made and the community's goal of achieving zero HIV infections appears to be within reach. Many thanks to the efforts of the entire community: political leaders, governmental and non-governmental agencies, and our academic partners at UCSF on this impactful work!

DEVELOPING OUR PEOPLE

2. Nursing Professional Development Week

Nursing Professional Development (NPD) Week, which took place on September 23-29, celebrated the NPD specialty and the roles that these practitioners assume in improving patient care outcomes through orienting and onboarding new nursing staff, role transition programs, competency management, continuing education, and supporting evidence-based practice, quality improvement, and research. This celebration recognized NPD practitioners for their critical role in health care.

At ZSFG, Clinical Nurse Educators and Specialists coordinate activities that support nursing units and specialties, while the Nursing Workforce Development team, led by a board-certified NPD Specialist, coordinates hospital wide educational programs and related initiatives. In addition to supporting the aforementioned activities, these Registered Nurses collaborate to address staff learning and training needs that have impacts across the hospital by meeting monthly in the Clinical Education Collective, providing Preceptor and Charge Nurse Development Series, and supporting Network educational programs like the Workplace Violence Prevention and Sexual Orientation and Gender Identity trainings at the ZSFG Department of Education and Training.

Thank you to all our incredibly hard-working NPD practitioners for the unwavering support they provide to all nursing staff at ZSFG!

DEVELOPING OUR PEOPLE

3. Nursing Workforce Development Hearts Grant Award

This year, Nursing Administration was awarded two Hearts Grants from the SFGH Foundation to support nursing workforce development. With this additional funding, Nursing Administration will develop engaging new training curriculum focused on leadership development and collaborative team communication for Nursing staff, Medical Evaluation Assistants (MEA), and Patient Care Assistants (PCA). Additionally, new materials and trainings have been created for educational, coaching sessions directed at other various divisions of the nursing workforce including Nurse Managers and the Charge Nurses.

Congratulations to Nursing Administration on receiving the two Hearts Grants! ZSFG looks forward to supporting these incredible development opportunities for its Nursing Staff.



DEVELOPING OUR PEOPLE

4. Fall Fest 2019

On Thursday, September 26, the Food and Nutrition team hosted the 3rd Annual Fall Fest at ZSFG's Building 2 Parking Lot. Fall Fest is a time to celebrate the incredible employees at ZSFG for their hard work and commitment to making our organization the best health-care destination possible for this community. Approximately 45 volunteers supported the event by serving food, manning the game booths and setting up and taking down the equipment and decorations. During the event, there were an estimated 2,000 guests! Staff had endless options of 1,200 pounds of Turkey Legs, 800 hamburgers, 800 pretzel dogs, 250 vegetable burgers, 500 candy apples and 700 funnel cakes. Also, they were able to participate in carnival games, rock climbing, and the dunk tank.

Thank you to Food and Nutrition Services for sponsoring the event and to Chef Mike for leading the event!



DEVELOPING OUR PEOPLE

5. 10th Anniversary of the Institute for Global Orthopaedics and Traumatology

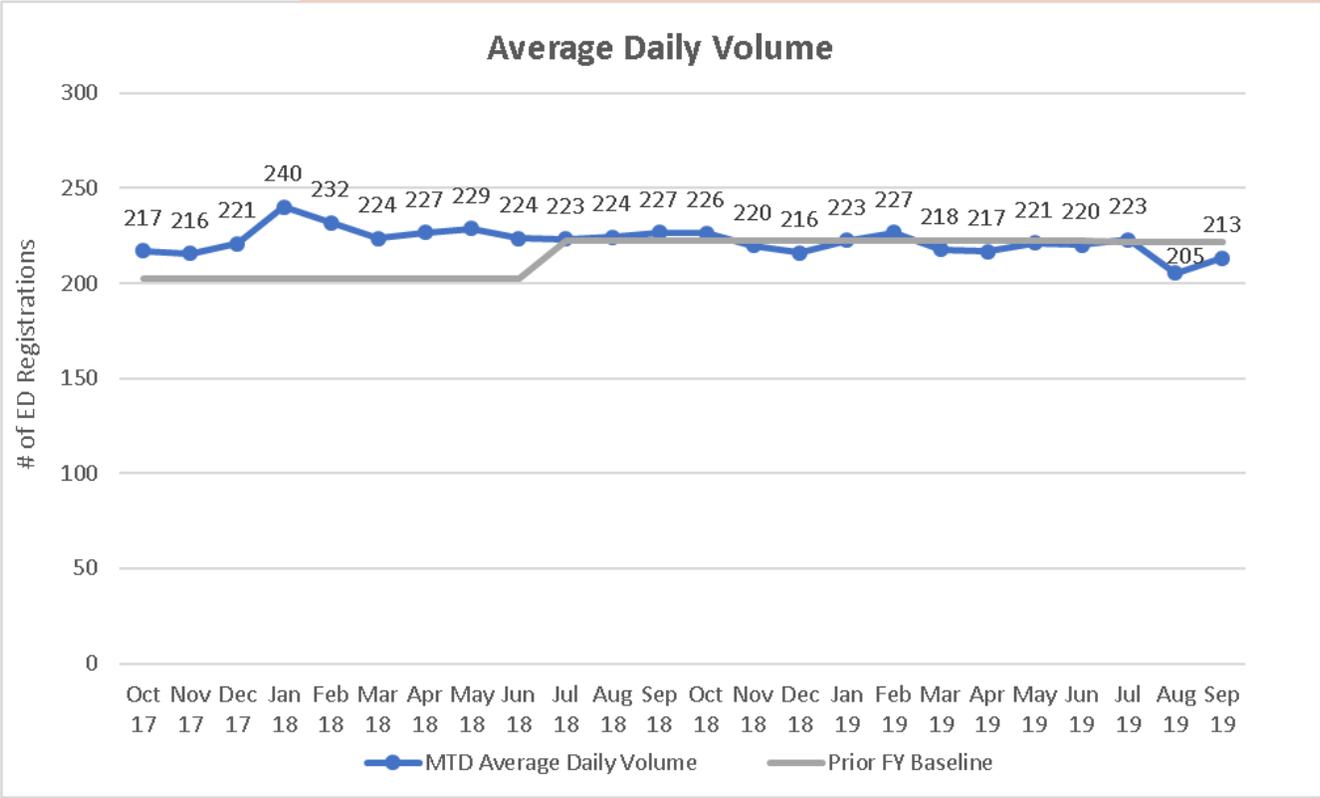
This year marks the 10th Anniversary of the Institute for Global Orthopaedics and Traumatology (IGOT), an exceptional international initiative of the Department of Orthopaedic Trauma Institute (OTI). This program's mission is to "mend the injured, inspire innovators, and empower leaders to restore lives and to do so through global partnerships."

IGOT was developed in order to address one of the most significant causes of global morbidity, traumatic injury. Throughout the world, and mostly in developing countries, injury kills 6 million people a year and permanently disables 20 – 50 million people per year, mostly young men, causing them to lose their ability to work and support their families, creating poverty and dependence. By educating surgeons and developing surgical leaders through its programs in San Francisco, Tanzania, Nepal and Mexico, IGOT helps ensure that traumatically injured individuals have the best chance of maintaining healthy and productive lives through limb saving and preservation.

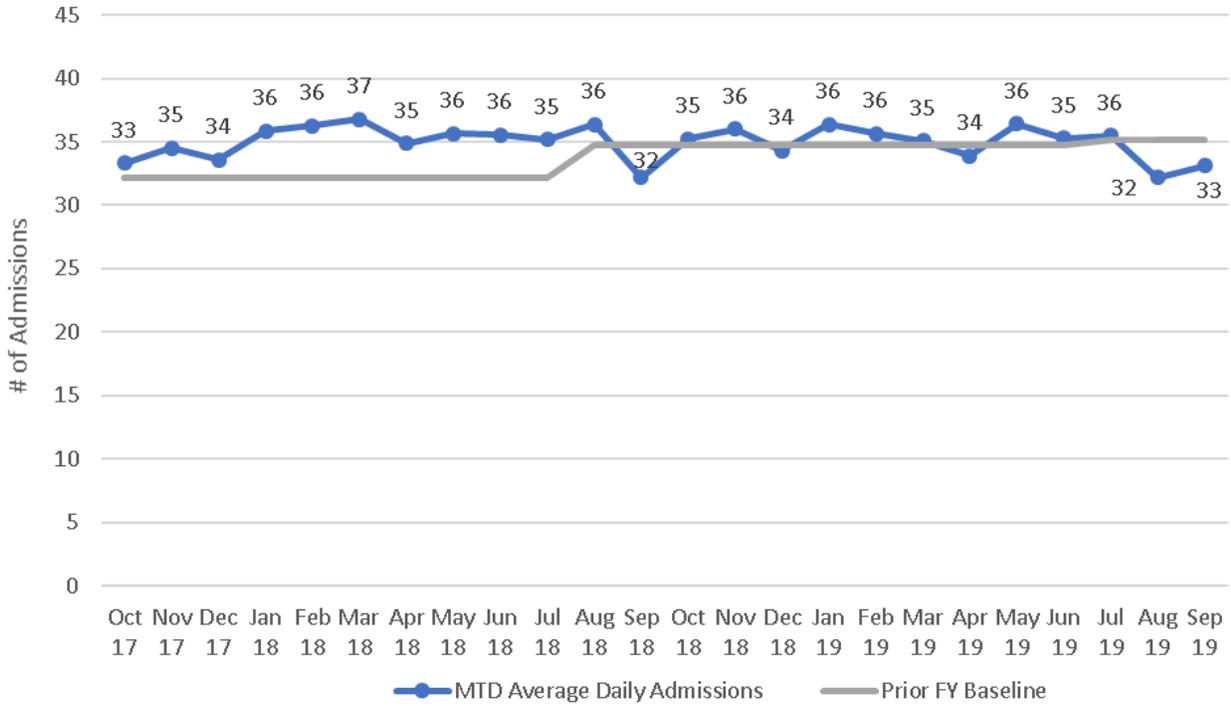
In early October, IGOT hosted its SMART Course at ZSFG, where more than 50 surgeons from 26 different middle-to-low income countries from all over the world came here to learn techniques in the surgical management and bone and soft-tissue reconstruction of severe limb injuries. Through its educational programs, IGOT creates sustainable improvement over time. Annually, the course is estimated to prevent over 1,100 amputations, train an additional 920 surgeons, and have a 93% surgical success rate in preventing amputations.

The OTI and IGOT are remarkable examples of what makes ZSFG so special: devotion to people and community, locally and internationally, dedication to science and data-driven improvement, and resilience in building excellence. Congratulations to these programs on all the amazing work they do and on this major milestone!

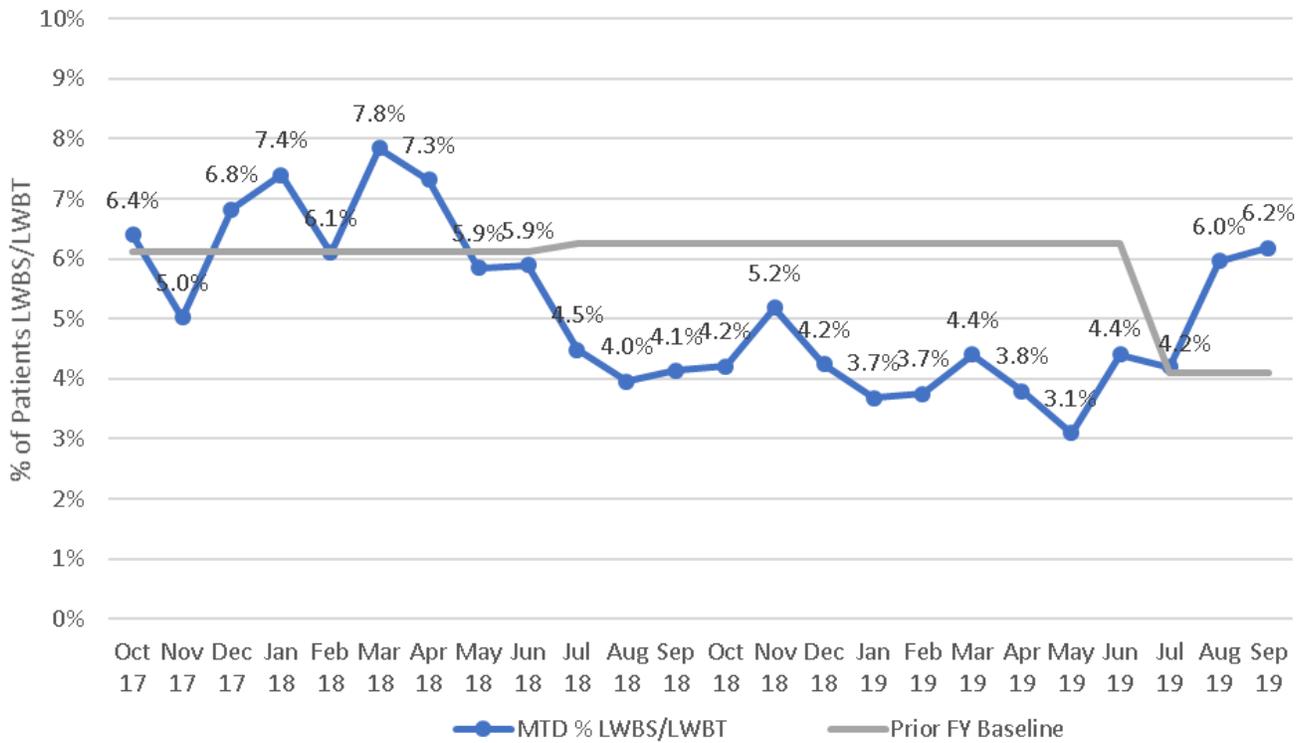
QUALITY Emergency Department Activities

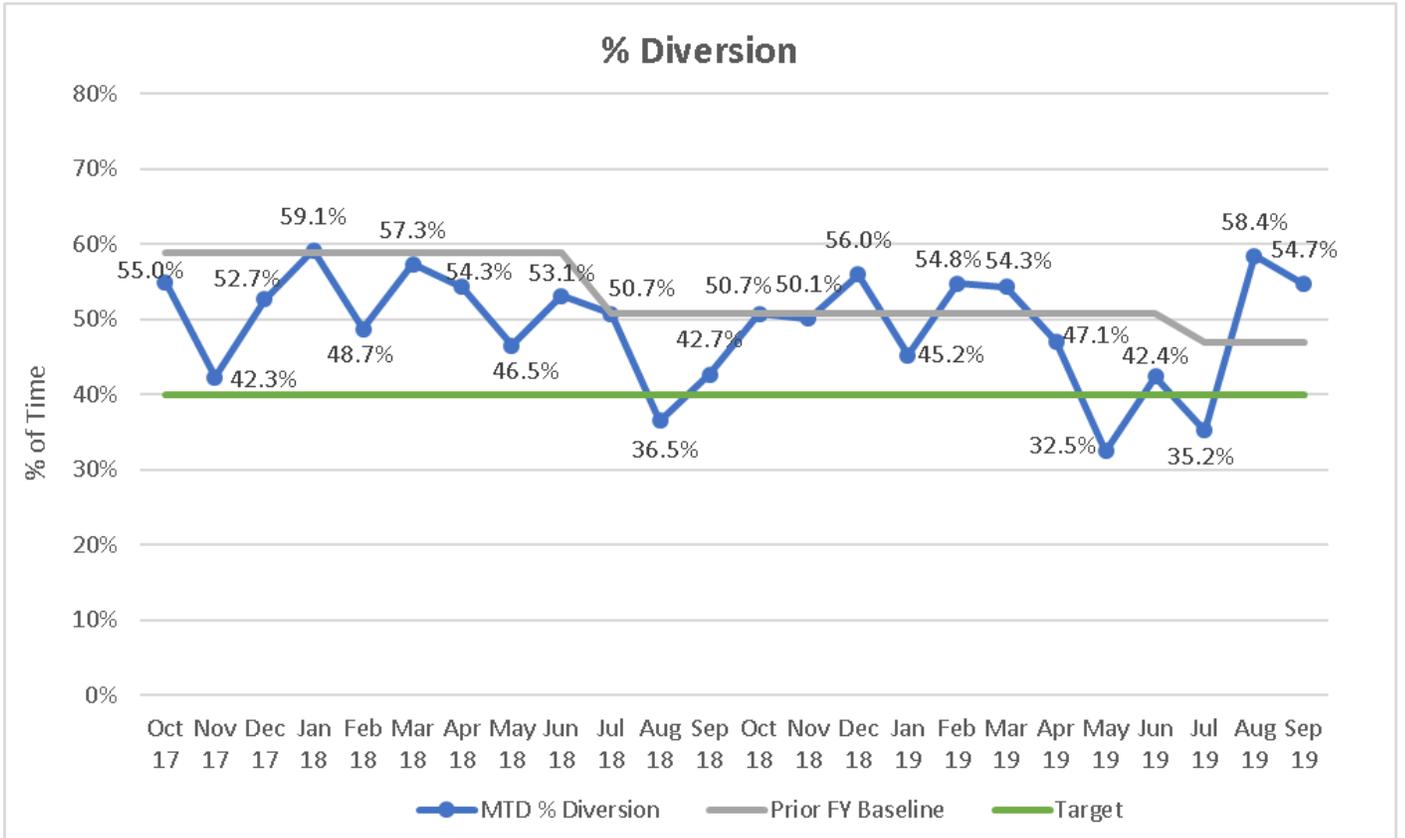


Average Daily Admissions

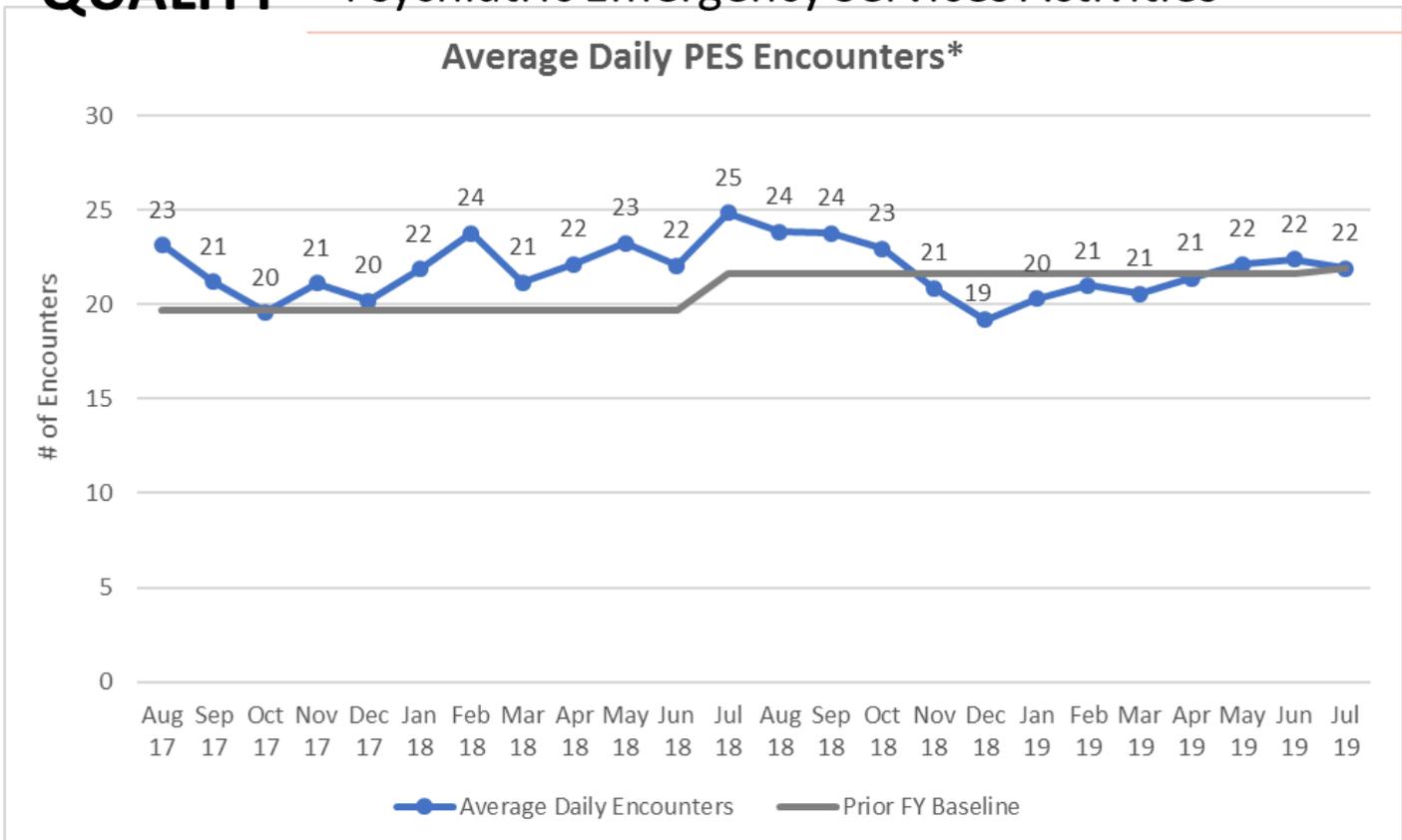


% LWBS/LWBT

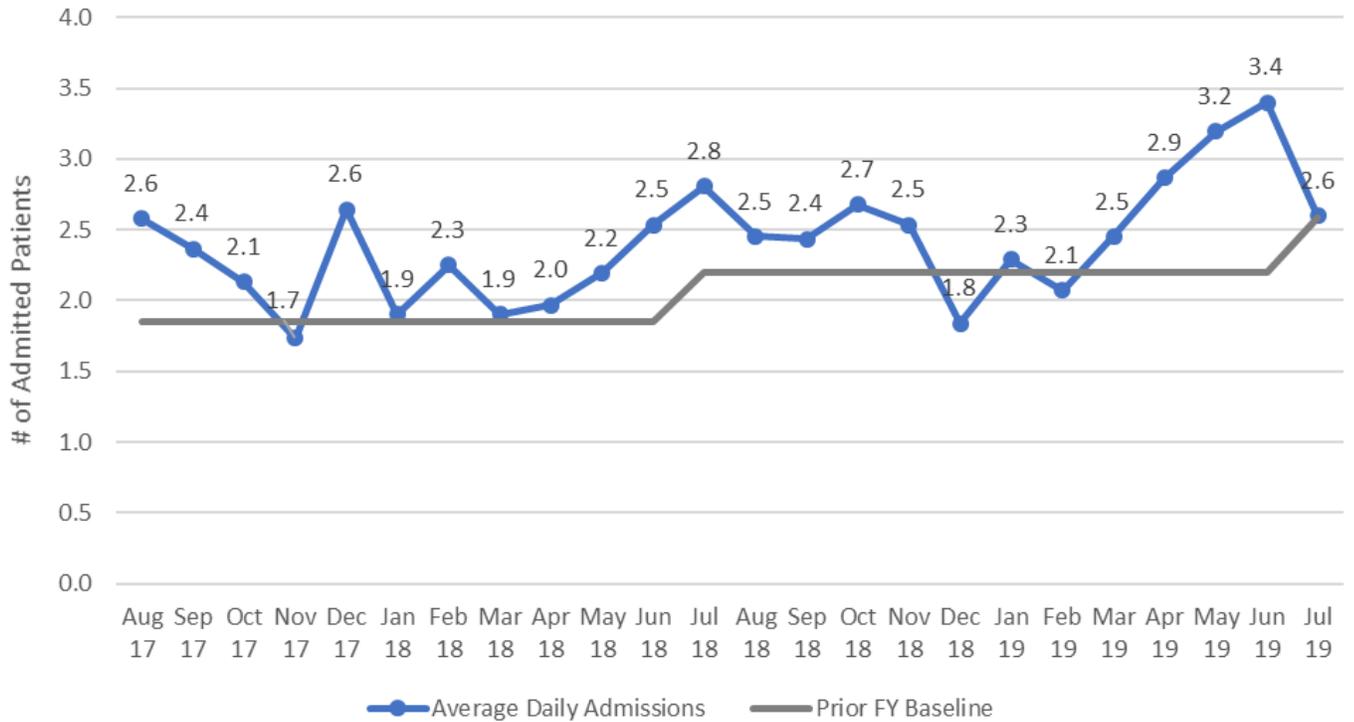




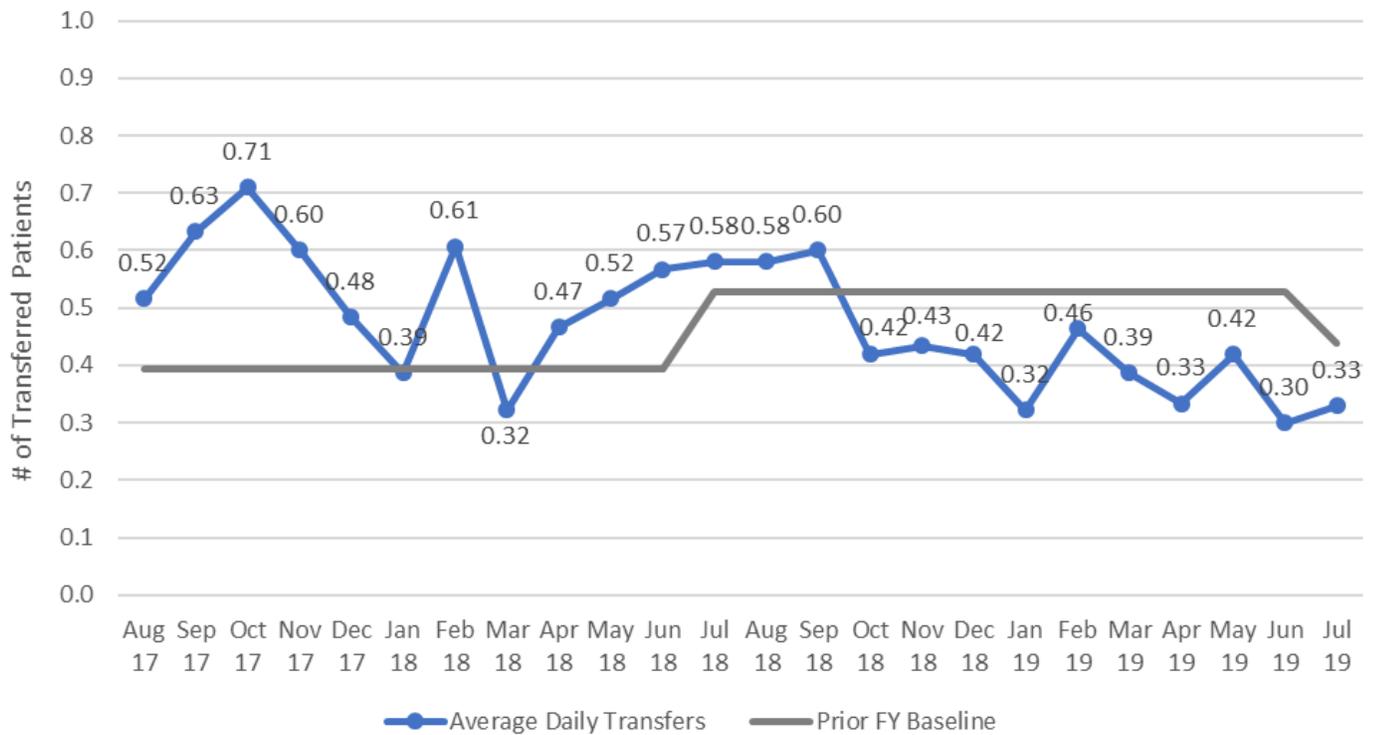
QUALITY Psychiatric Emergency Services Activities



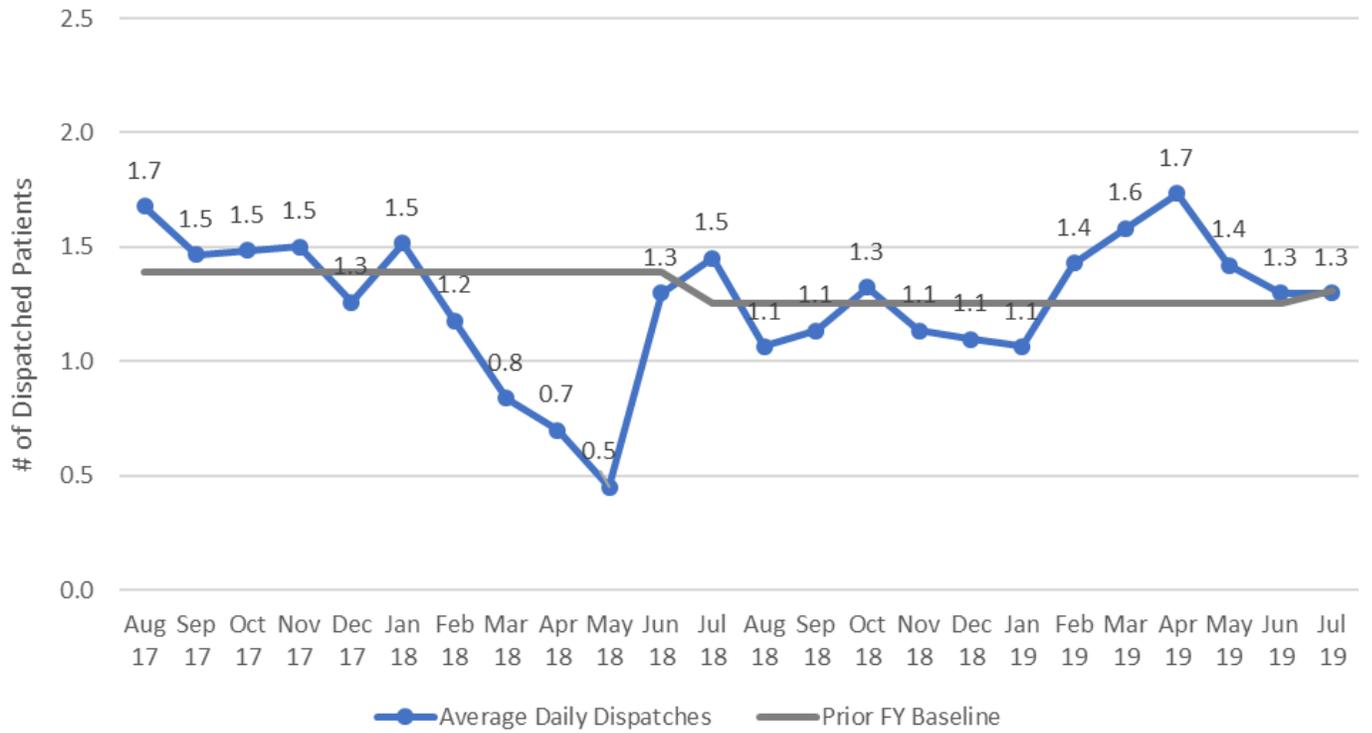
Average Daily Admissions to Inpatient Psych (7B, 7C, 7L)*



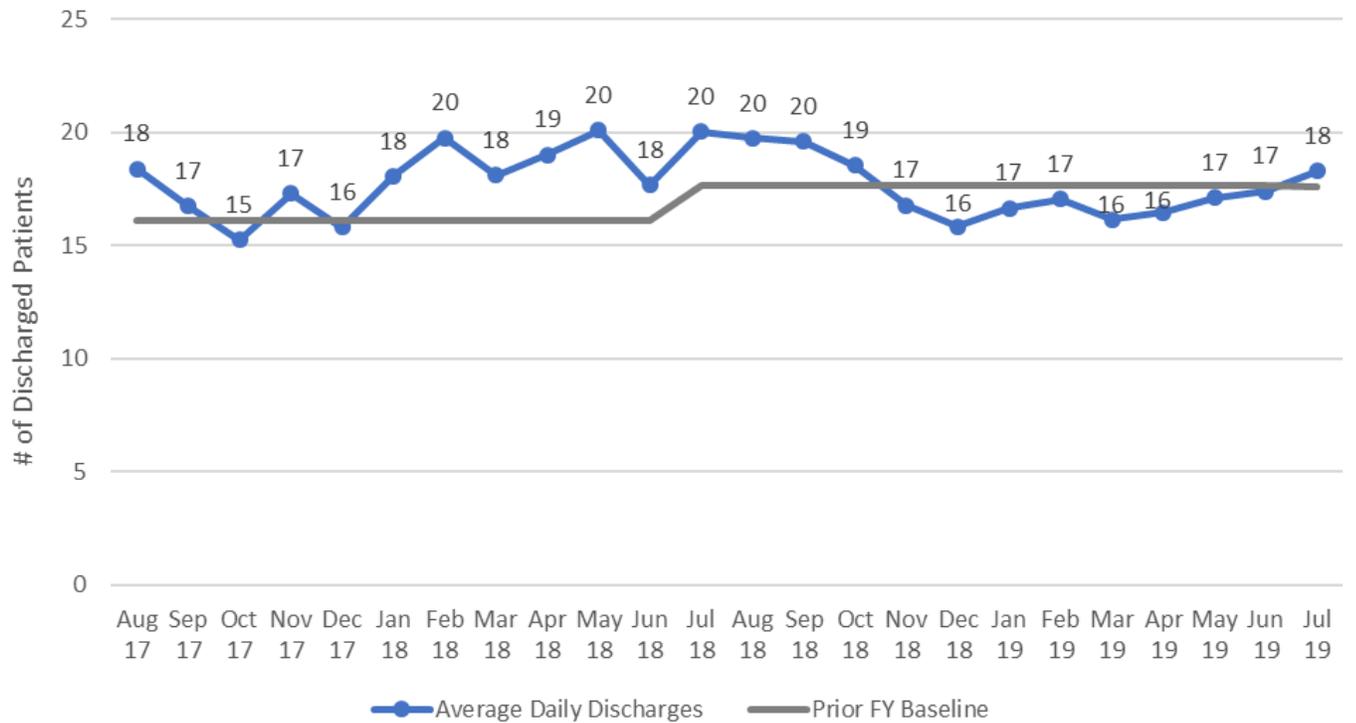
Average Daily Transfers to Private Hospital*

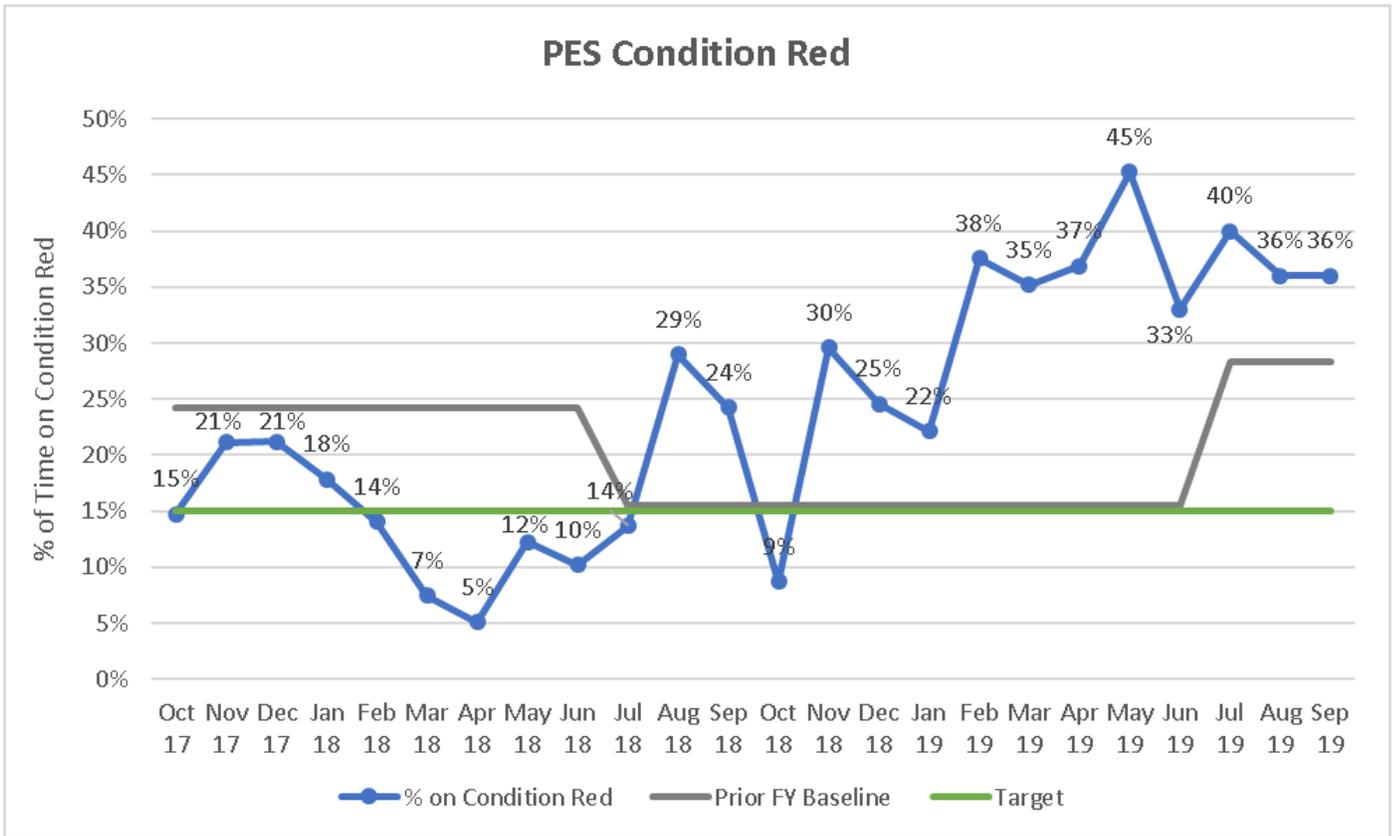


Average Daily Dispatches to Dore Urgent Care Clinic (DUCC)*



Average Daily Discharges to the Community*





QUALITY Average Daily Census

MEDICAL/SURGICAL

Average Daily Census of Medical/Surgical was 177.40 which is 113.72% of budgeted staffed beds and 99.11% of physical capacity.

INTENSIVE CARE UNIT (ICU)

Average Daily Census of ICU was 29.00 which is 103.57% of budgeted staffed beds and 50.00% of physical capacity of the hospital.

MATERNAL CHILD HEALTH (MCH)

Average Daily Census of MCH was 27.43 which is 91.43% of budgeted staffed beds and 65.31% of physical capacity of the hospital.

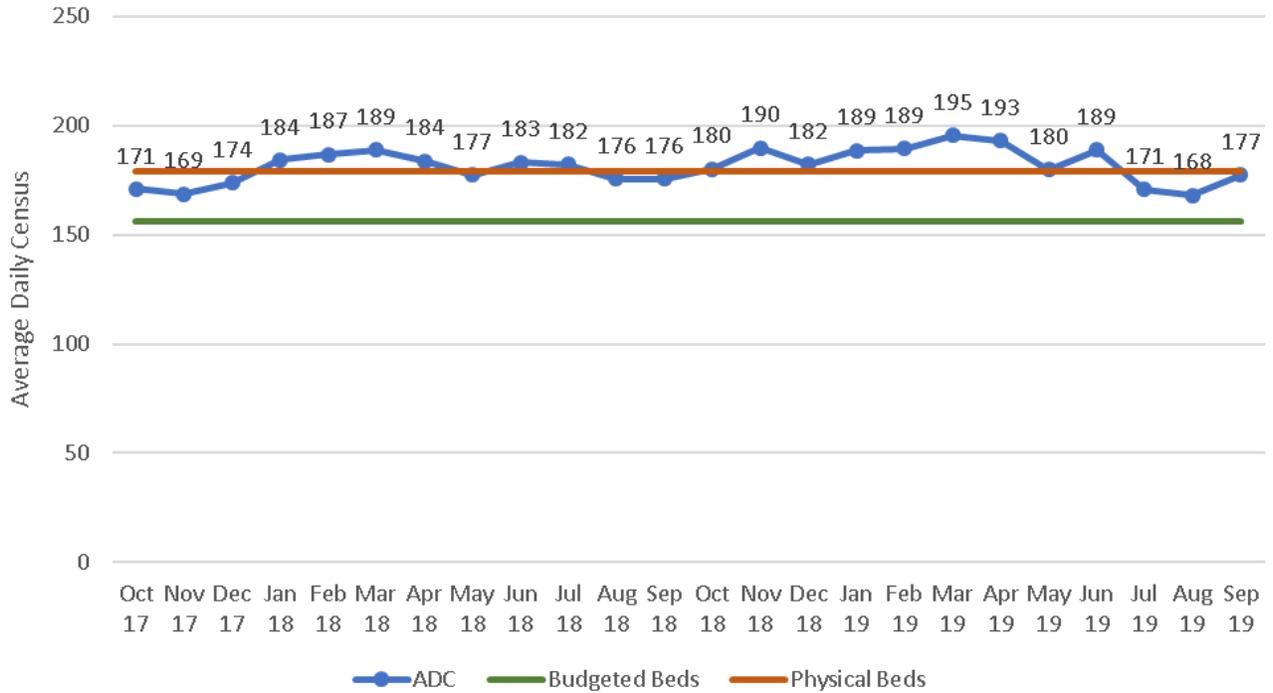
ACUTE PSYCHIATRY

Average Daily Census for Psychiatry beds, excluding 7L, was 41.67, which is 94.70% of budgeted staffed beds and 62.19% of physical capacity (7A, 7B, 7C). Average Daily Census for 7L was 5.57, which is 79.57% of budgeted staffed beds (n=7) and 46.42% of physical capacity (n=12).

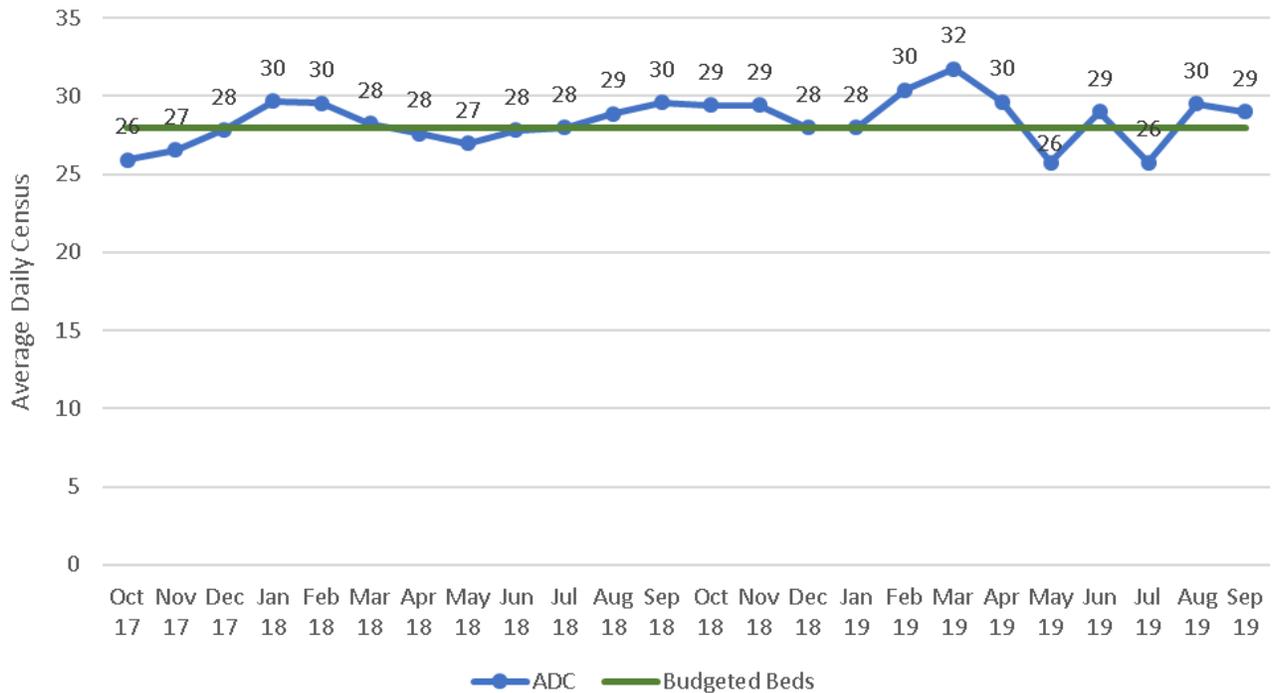
4A SKILLED NURSING UNIT

Average Daily Census for our skilled nursing unit was 29.23, which is 104.39% of our budgeted staffed beds and 97.43% of physical capacity.

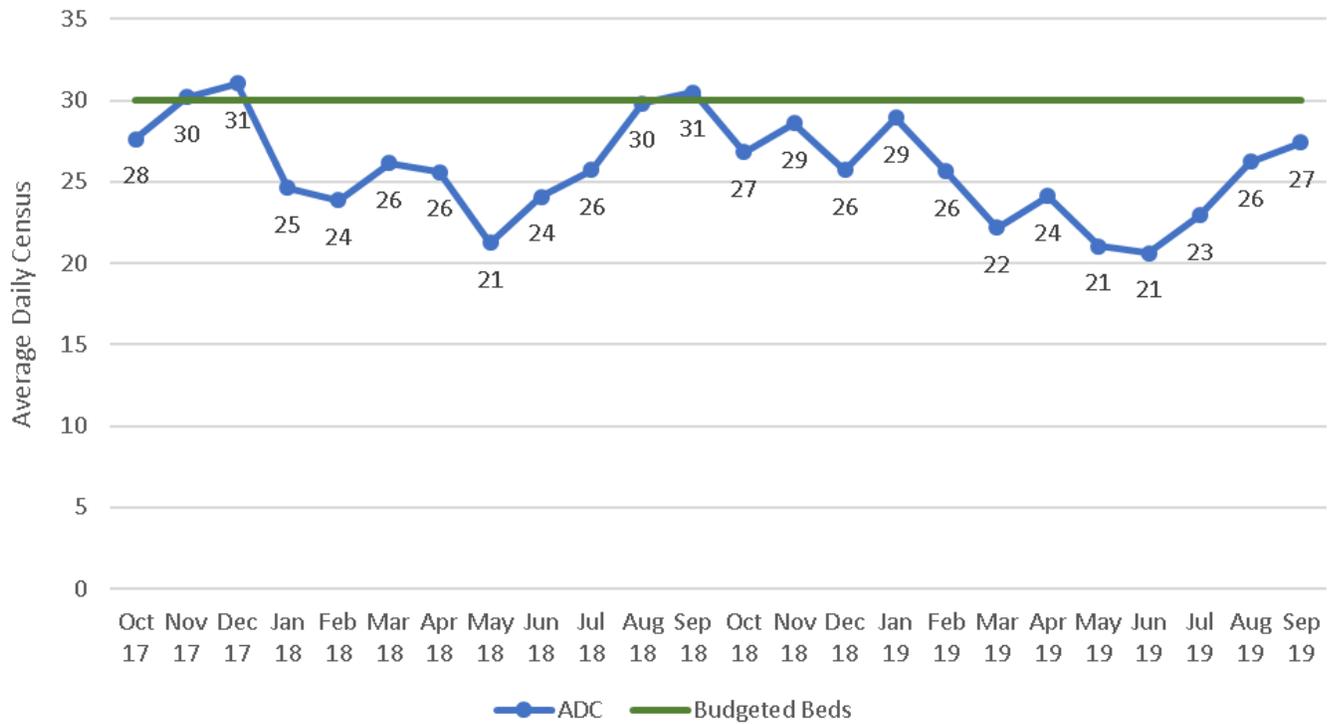
Medical Surgical (Incl. ED/PACU Overflow) Average Daily Census



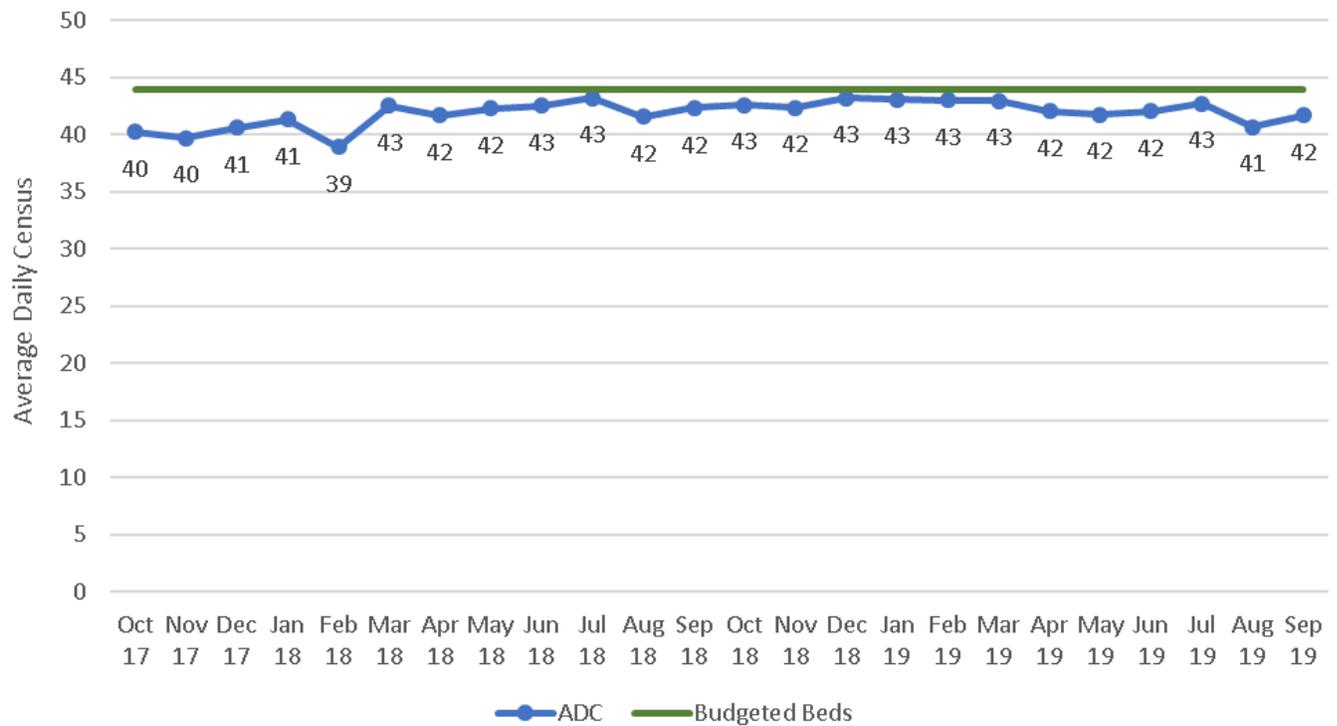
Intensive Care Unit Average Daily Census



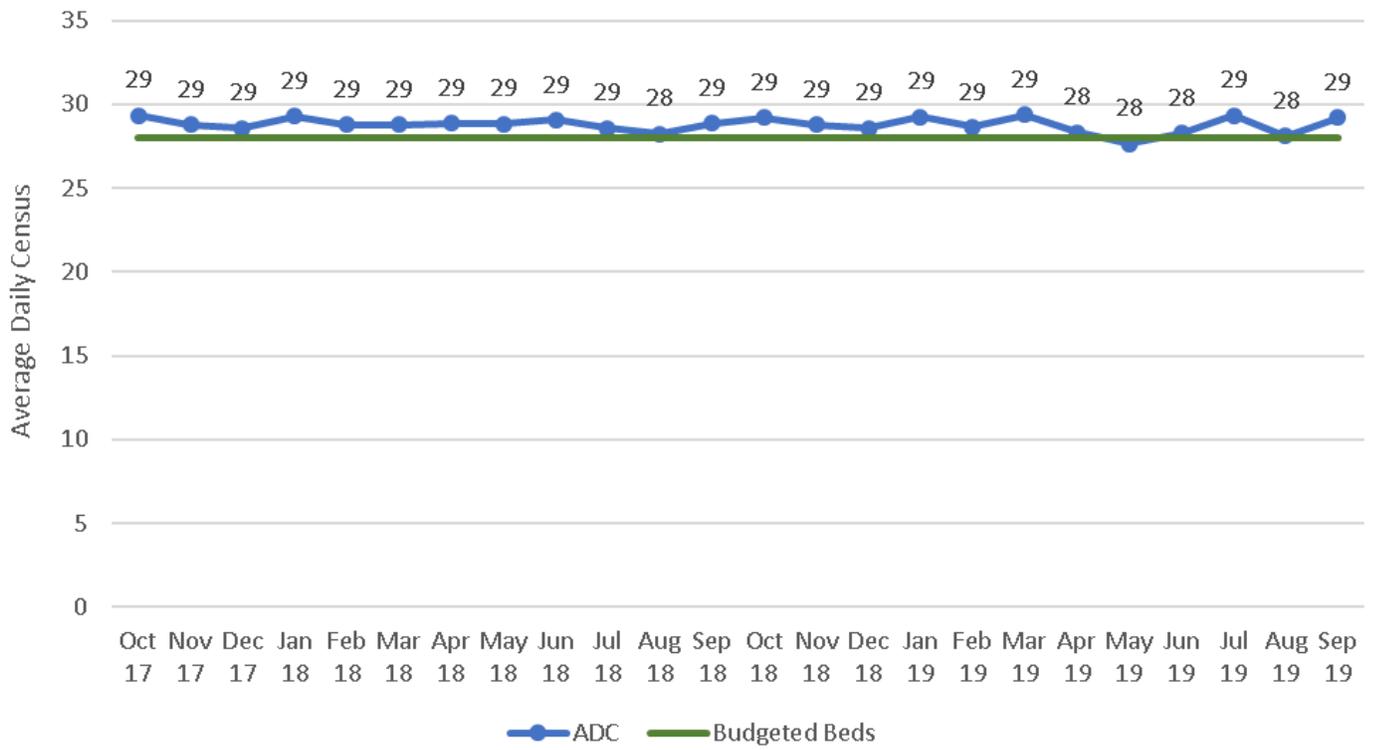
Maternal Child Health Average Daily Census



Acute Psychiatry (7B & 7C) Average Daily Census

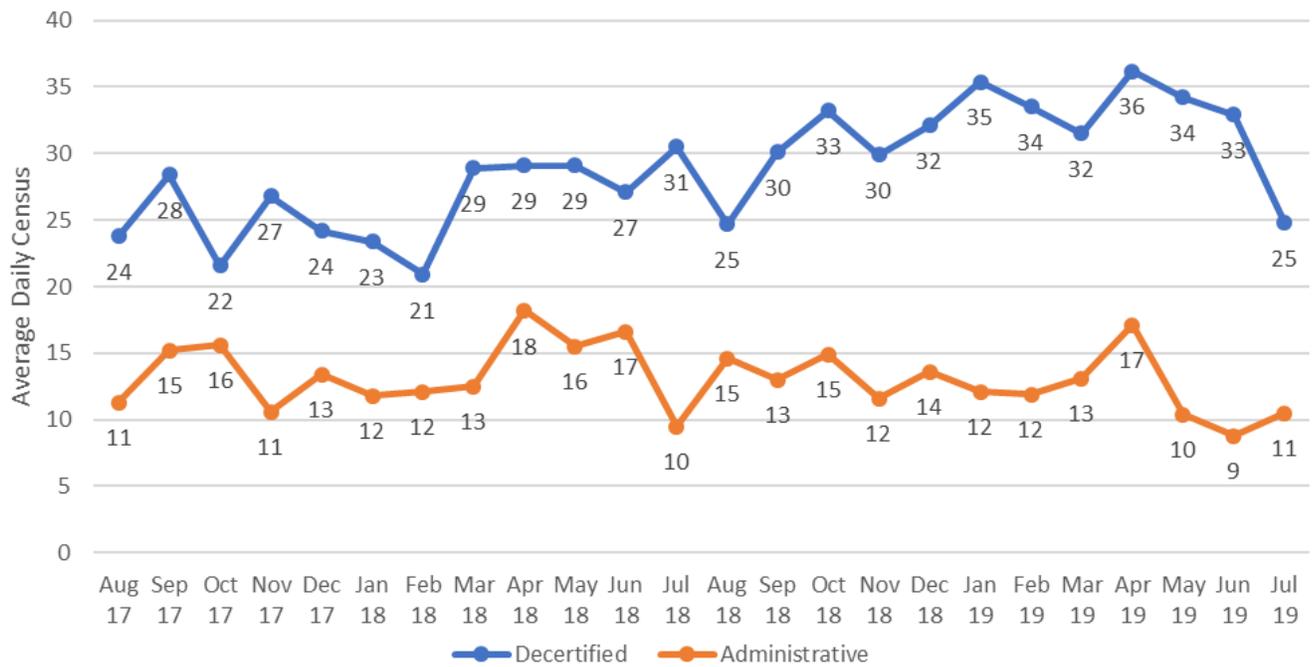


4A Skilled Nursing Facility Average Daily Census

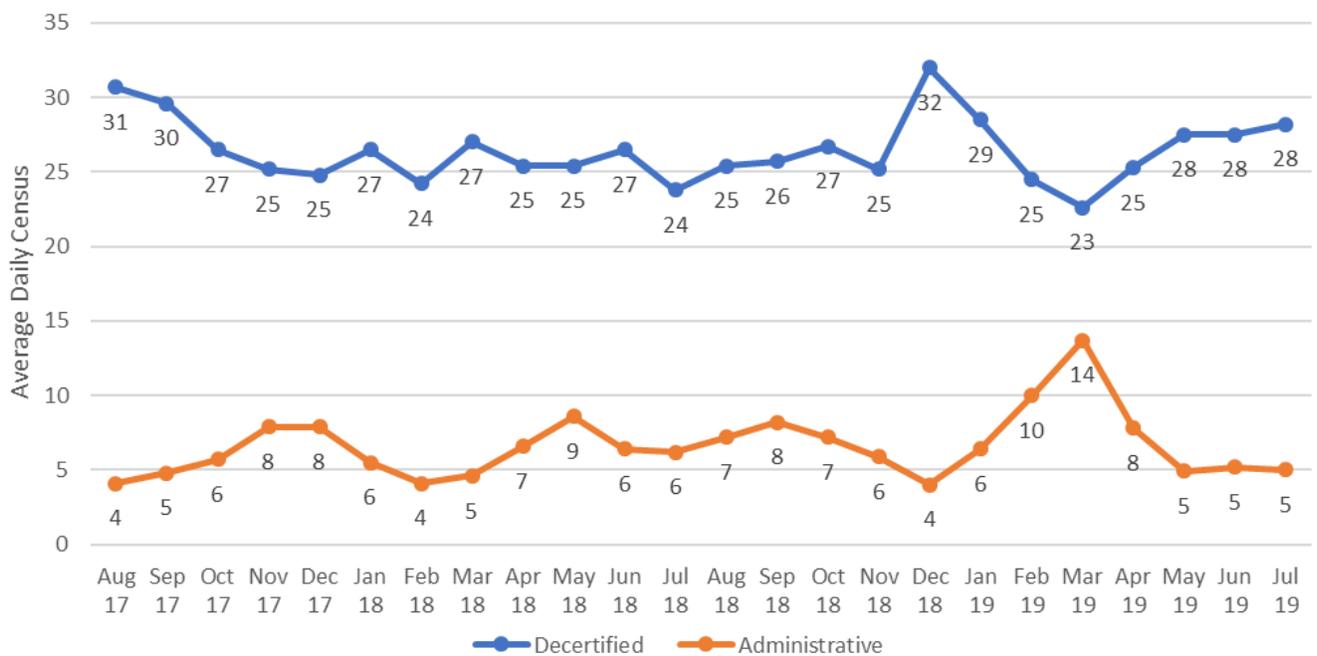


QUALITY Lower Level of Care Average Daily Census

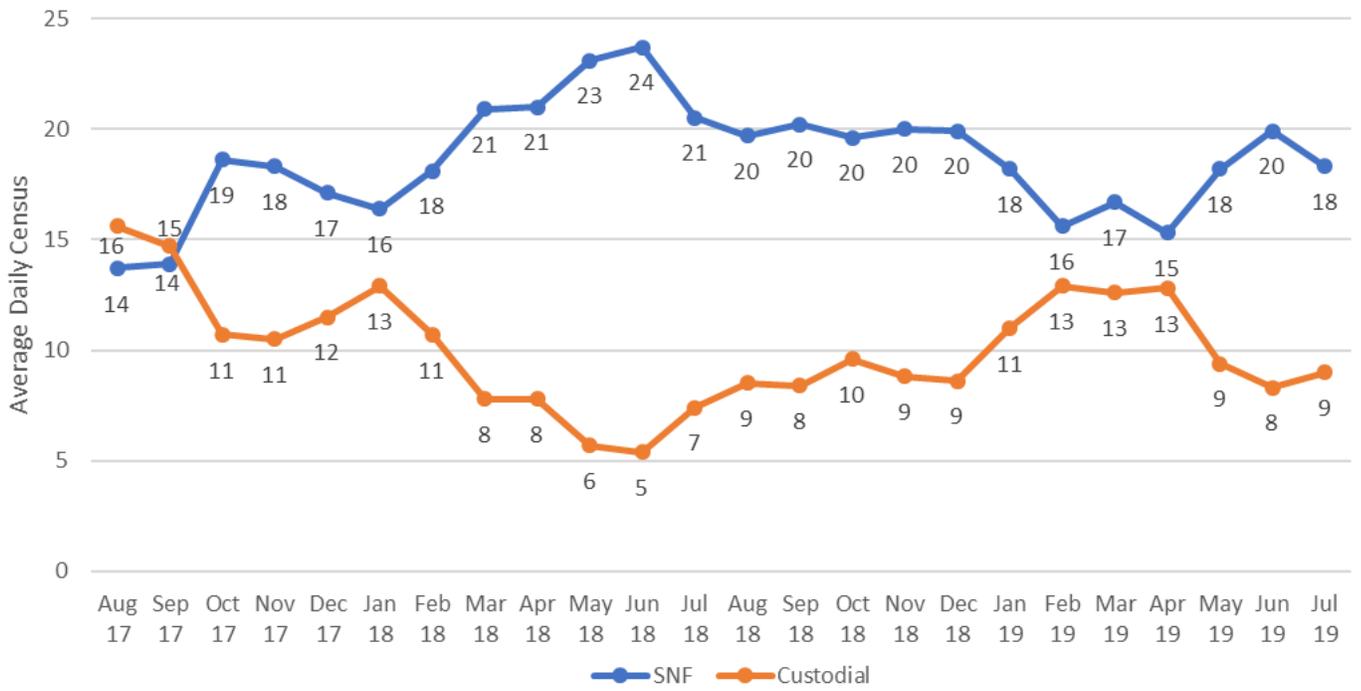
Medical Surgical Lower Level of Care Average Daily Census*



Acute Psych (7B & 7C) Lower Level of Care Average Daily Census*

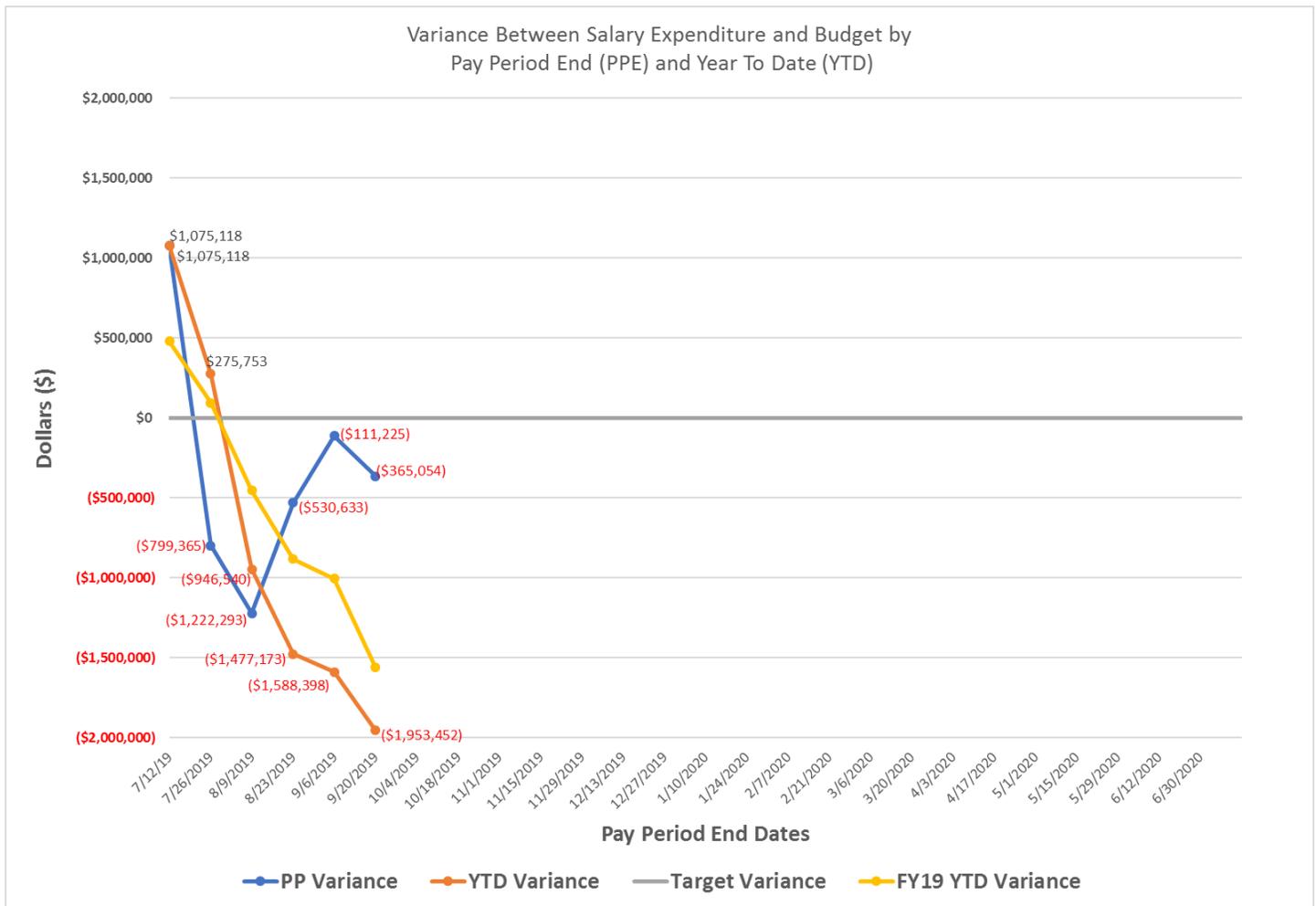


4A Skilled Nursing Facility Lower Level of Care Average Daily Census*



Financial Stewardship Salary Variance

For Pay Period Ending (PPE) September 20, 2019, Zuckerberg San Francisco General recorded an unfavorable 2.37% salary variance between Actuals and Budget – specifically, actuals were \$365,054 over budget. For Fiscal Year 2019-2020 year-to date variance through PPE September 20, 2019, ZSFG has an unfavorable variance of 209% / \$1,953,452 over budget.



Commissioner Comments:

Commissioner Chow thanked Dr. Ehrlich for the report.

9) ZSFG HIRING AND VACANCY REPORT

Karrie Johnson, Departmental Personnel Officer, DPH, presented the item.

Commissioner Comments:

Commissioner Green noted that individuals making public comment referred to possible under-staffing in the Emergency Department and asked if there is data to help understand the situation. Ms. Dentoni stated that there are large amount of staff on leave in the Emergency Department and there are approximately 18 traveling nurses. She noted that there are set staffing ratios that must be maintained.

Commissioner Chow noted that in the past, improvements were made in the time it takes to hire nurses and asked for more information regarding the current process. Ms. Johnson stated that it can take 90 days to hire a nurse. However, it can take 4-6 months to specialty nurses or nurse practitioners.

Dr. Colfax encouraged continued efforts to strengthen communication between leadership and line staff.

10) MEDICAL STAFF REPORT

Claire Horton, M.D., Chief of Medical Staff, gave the report.

ADMINISTRATIVE/LEAN MANAGEMENT/IMPROVEMENT WORK/EPIC STATUS:

EPIC Updates:

Updates to MEC provided by Dr. Neda Ratanawongsa include:

- Key Messages to Share:
 - Go-Live was successful because of operational leadership and cross-area collaboration via domains
 - People need ongoing support and communication. That is the focus of stabilization, led by domains
 - The Epic Leadership Team (ELT – Leadership of ZSFG, LHH, Ambulatory Care, Network) will help prioritize stabilization work, especially cross-domain
 - 4 high priority cross-domain topics identified to date, with substantial progress in patient access and patient movement. Stabilization is critical before any optimization work (enhance or add functionalities that we did not expect at go-live).
- Epic-Post Go-Live Timetable – We are now in the stabilization period (Sept to Dec 2020) where we understand and correct what should be working based on go-live build, i.e. patient access and movement.
- Stabilization Domain Groups: Sponsors and Areas – Dr. Ratanawongsa stated that there are less domains now but bigger in size, partly due to resourcing and efficiency considerations.
- Operational Ownership of Stabilization
 - Local leadership to service area leadership
 - Domain group to evaluate/prioritize tickets and issues, consider cross-domain impact, and categorize stabilization issues vs optimization issues.
 - Epic Leadership Team – Prioritization of resources to tackle complex cross-domain issues
- Top Stabilization Issues and Workflows
 - Patient Movement and Phases of Care
 - Patient Access
 - _Ambulatory Billing and Revenue Integrity
 - Analytics
- Domain Resources
 - IT- SFDPH IT Team, SFDPH Training Team, SFDPH Organizational Change Management, Epic Technical Services provides ongoing support for IT team
 - Office of Health Informatics
 - Operational leadership and KPO

Dr. Horton added that she and Mr. Greg Wagner are leading an A3 work on patient access (outpatient appointments and OR scheduling).

CLINICAL SERVICE REPORT:

Obstetrics and Gynecology

Dr. Eleanor Drey, Interim Service Chief presented the following highlights:

- Mission – To promote justice, quality, and equity in women’s health care, seeking to eliminate barriers to good health for women, in SF and around the world. The Service is able to deliver as much services as they can because the ZSFG OB GYN and Reproductive Sciences Division also encompasses the Bixby Center for Global Reproductive Health, a very large research center that leads national and international research and training programs to improve reproductive and sexual health.

- Scope of Services (Clinical):
 - Full Scope OB+GYN. Unusual OB services include breech deliveries, support to pregnant women with mental health and substance abuse issues, low-cost IVF for patients. Dr. Drey talked about a pilot project, Team Lily, which is a HOT team for pregnant patients struggling to engage in prenatal care. The project has been highly successful in treating women with opioid use disorder and in getting patients housed by time of delivery. Dr. Drey also highlighted the opening of the renovated New Generation Health Center inside Homeless Prenatal Program. In addition to its usual client population, the Center has enabled Homeless Prenatal clients to have easy access to OB-GYN services.
 - Research and advocacy highlights – During this increasingly controversial time in terms of abortion and contraception, the Service has actively engaged in advocacy and research work on these issues.
 - Volume Statistics – Family Birth Center, Women’s Option Center (6G), Women’s Health Center, Women’s Health Center TNAA Obstetrics, Women’s Health Center (5M) TNAA Gynecology, Decrease in the number of births at ZSFG noted, in part driven by the city demographics as well as the inability of the hospital to accept and accommodate as many patients they would like. Dr. Drey also noted that the number of abortions, pregnancies and unintended pregnancies has also been decreasing nationally.
- Clinical Faculty – MDs, Midwives, Consulting MD Faculty. ZSFG OB GYN Service stands out for its excellent and outstanding midwifery care. Dr. Drey noted that the Service’s amazing midwives have added to the culture and safety in Obstetrics, and are available 24/7 in the hospital.
- Residency – Ranked #4 OB GYN Residency Program in the US by Doximity/US News and World Report in 2018-19. The Service has focused on recruitment of UIM (Under Represented in Medicine) residents: 51%.
- PIPS.
 - PRIME Metrics:
 - a. Hemorrhage: Blood Product Unites Transfused per 1000 Delivery Cases
 - b. Exclusive Breast Milk Feeding
- ZSFG Committees –The Service is well represented in various Medical Staff and hospital committees.
- Awards and Honors – Dr. Drey highlighted some national awards:
 - Dr. Jody Steinauer – earned her PhD in Health Professions Education and named the Inaugural Distinguished Philip D Darney Professor of Family Planning and Reproductive Health
 - Dr. Philip Darney – “The Audacious” UCSF Alumni Inaugural Award
 - Monica McLemore, RN, PhD – Abortion Care Network Person of the Year, Thomas N Burbridge Public Service Award
- Scope of Service (Research) – The Service’s research arm is the Bixby Center for Global Reproductive Health founded by Dr. Philip Darney in 1999. Research activities on reproductive health including Family Planning, Reproductive Infectious Diseases, Obstetrics and Education.
- Budget FY 2018-19 – Total of \$66.6M.

Dr. Drey highlighted the Service strengths:

- Mission-driven faculty, staff and residents
- Diverse and outstanding residents
- National and International impact of research and advocacy
- Resilience, creativity, and even some good humor during the Epic transition.
- Broad and significant research funding
- Equity Focus

Challenges:

- Clinical – Decreasing Birth Center and abortion volume; No stable funding source to maintain Team Lily despite its successes; Winning the Epic Optimization battle.
- Diversity/Equity – Lack of diversity among relatively small and stable clinical faculty; Lack of funding for ongoing training.
- Education: Family Planning becoming ACFME subspecialty

- Research – No NIH funding for abortion research
- Large Division (50 faculty, 100 staff) so challenging geography – Space Challenges
- Extreme assaults on reproductive health

Goals:

- Clinical – Potential increase in OB volume, increase accessibility to managed care Medi-Cal, San Mateo Health Plan, Further strengthen high-risk OB services by hiring full time MFM (Maternal Fetal Medicine) specialist , optimize outside referrals to Women’s Option Center.
- Diversity and Equity – Hire MFM to reflect our patients’ diversity, Partner with Office of Diversity.
- Change UCSF Policies around allowing ACGME fellows to bill for core clinical duties/moonlighting
- Bixby strategic planning process
- Prepare for post-Roe era and respond to need for abortion services.

Members thanked Dr. Drey for her excellent and comprehensive report. Members also commended and thanked her valuable work and leadership in the OB-GYN Service while Dr. Jackson is on leave. Members praised the outstanding clinical care and professionalism of the residents and the care that Team Lily provides to patients.

Orthopaedic Surgery

Dr. Ted Miclau stated that Orthopaedic Trauma Institute, which is at ZFSG, is a trademark name owned by UCSF and is the umbrella organization and the overarching group that provides services throughout the Bay Area. Dr. Miclau highlighted the Service’s Mission (to mend the injured, inspire innovators, and empower leaders to restore lives) and Vision (to provide an interdisciplinary team of physicians, nurses and other health care professionals that deliver the highest level of care for its patients, to improve the outcomes and quality of life for patients in San Francisco and beyond, and to support education, research, and training efforts that improve the care of orthopaedic conditions, and to be a nationally recognized center of excellence for orthopaedic trauma care). Highlights include:

- Clinical – Scope of Practice includes the following areas: Orthopaedic Subspecialties (Trauma), Physical Medicine and Rehabilitation, Podiatry, and Orthotics and Prosthetics, with focus on the following: (Refer to slide presentation for details):
 - Faculty – Dr. Miclau noted that the Service has the largest number of trauma trained surgeons, 75% with another specialty.
 - Call Services
 - QA projects – Three Areas highlighted on report:
 - a. Drivers – Presence of Post-Operative Surgical Site Infections (SSI) (Superficial or Deep – Total Knee (TKA) and Total Hip (THA) Arthroplasties (Safely), Improved management of Hip Fractures (Quality), and Timely ED Consultations (Quality)
 - b. Watch – Days for Surgical Schedule (Care Experience) and Third Next Available Appt (TNAA) in Ortho Clinics (Care Experience)
 - c. Other- Functional Limb Service Organization/Amputee Support Groups, Patient Education Tutorial Video Series (Post-Amputation Rehabilitation- Completed; Total Joint Arthroplasty – Completed)
 - Faculty Committee Participation/Leadership Positions
 - The OTI’s Clinical Scope 2019 – provides additional volume and financial support to other institutions - UCSF Orthopaedic Institute/UCSF Parnassus Campus, San Jose Medical Center since 2013, and LHH.
- Finances (Ortho Service RVU Production, SFGH Payor Mix 2017, Collections per RVU).

Highlights include:

 - RVU Production remains stable
 - Payor mix has changed slightly but most patients have some type of coverage.
 - SFGH Implant Savings Program which started in 2008 continues to generate savings of approximately \$2M per year to the hospital.

- Education
 -Student, Resident and Fellow Training – Resident Rotation, Weekly Conferences, Medical Student Training. UCSF Residency program is in the “top ten” choice and the ZSFG Rotation is rated as the housestaff favorite. All anatomy sessions now run at ZSFG.
 -14th Annual International San Francisco Orthopaedic Trauma Course – The national and now international course is the crown jewel of the Service’s extramural outreach effort for education, and the largest in the nation. The course has had >400 attendees and participants from minimum of 33 States and 10 countries.
 -Surgical Training Facility – Dr. Miclau highlighted usage of the Training Center for academic courses offered by several UCSF/ZSFG Departments and as an outreach for the community like the OTI Jr. Academy. The Center offers the UCSF Orthopaedic Residency Core Surgical Curriculum, the only curriculum of its kind offered in the country.
- Research: The Department has been ranked 1 and 2 the past year in NIH funding in the country, and ZSFG has accounted for about 25% of the funding.
- Outreach – IGOT (Institute for Global Orthopaedics and Traumatology) is OTI’s main international outreach program, and is dedicated to developing sustainable programs in education and research to improve patient care in under-resourced environments.

Goals for 2019-2020 include:

- Develop and promote “UCSF/SFGH Orthopaedic Trauma Institute”, including programs for referrals, outreach, and fundraising,
- Optimization Epic Performance
- Faculty recruitments (Trauma/Spine, Sports) expansion of those services
- Combined Ortho/Neuro Spine Service

Members commended Dr. Miclau for his outstanding presentation and outstanding leadership.

Commissioner Comments:

Commissioner Green noted concern that funding for the Lily Team may be in jeopardy. Dr. Carlisle stated that the program was originally funded by a donor and new funding has not yet been identified.

- Action taken: The following item were unanimously approved:
- Credentialing Manual
 - Medical Emergency Response Team Registered Nurse Standardized Procedures

11) OTHER BUSINESS

This item was not discussed.

12) PUBLIC COMMENT

Krista Duran, ED nurse, stated that her role as a public servant is to alert the Commission when unsafe conditions hinder staff. Staff is being beat up and some are experiencing PTSD. She noted that there are 19 ED nurse vacancies and additional vacancies in trauma nurses.

Heather Bolinger, ED nurse, stated that ZSFG is the only level 1 trauma center in the area. The ZSFG Emergency Department services are not equipped for disasters. The ED population has increased 25% but staffing levels have not changed. Trauma rooms meant for 6 patients are filled by 17 patients and other patients are doubled up. This impacts the quality of patient care.

Katie Shriff, ED nurse, stated that she observed a patient punching a nurse and smashing her head to the ground. She does not want to come to work scared. She honors the work and wants to contribute to positive change; she asked for help.

Michelle, ED nurse, stated that the ED is understaffed and it is causing nurses to be “pitted” against patients. She is concerned that her license may be in jeopardy for working in these conditions. She added that the Lean process is not helping find solutions.

Margaret stated that she has worked at ZSFG for twenty years and the workplace violence is scary. She noted that when a patient brought a puppy into the unit, patients reacted with calm and joy.

Angela Van Zant stated that nurses are enduring extreme violence. Problems in the foundation of ZSFG must be corrected to stop disenfranchising nurses and patients. She asked that standards of staff safely be upheld.

Jennifer Esteen agreed with others who made comments about workplace violence not being tolerable. She noted that Human Resources has failed staff because there is no valid reason not to hire nurse.

Nato Green, SEIU, stated that there are more Sheriff’s deputies in the meeting room than are currently in the ED. The ongoing frustration is the political decision to base the budget on a target instead of census and acuity. He added that current staffing patterns do not fit. The census in the ED is 23% but the budget does not match. He requested investing upfront to save money and have better patient outcomes.

Commissioner Chow stated that staff are the most valuable asset and the Commission will continue to work with the ZSFG administration to respond to these important issues.

13) CLOSED SESSION

- A) Public comments on All Matters Pertaining to the Closed Session
- B) Vote on whether to hold a Closed Session (San Francisco Administrative Code Section 67.11)
- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5 and 1157.6; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1.

CONSIDERATION OF CREDENTIALING MATTERS

CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

RECONVENE IN OPEN SESSION

1. Possible report on action taken in closed session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
2. *Vote to elect whether to disclose any or all discussions held in closed session (San Francisco Administrative Code Section 67.12(a).)*

Action Taken: The Committee approved October 2019 Credentialing Report and Performance Improvement and Patient Safety Report. The Committee voted not to disclose other discussions held in closed session.

14) ADJOURNMENT

The meeting was adjourned at 6:10pm.