

ZSFG CHIEF OF STAFF REPORT
Presented to the JCC-ZSFG on October 27, 2020

Clinical Service Report

A. Surgery Departmental Report: Deborah Stein, MD, Chief

Highlights of the report include:

- Mission Statement – The surgical faculty at ZSFG are dedicated to providing exceptional clinical care to the citizens of San Francisco and the surrounding areas, regardless of their social or financial status. The Service’s purpose is to deliver an outstanding training environment to students and residents, to make significant advances in scientific knowledge and clinical practice through basic and clinical research and to produce the next generation of leaders in surgery.
- Scope of Service – Trauma Surgery, Critical Care, Emergency General Surgery, Plastic Surgery, Vascular Surgery (Diagnostic Services – Vascular Lab), Community Support (Wraparound Program), Surgical Subspecialty Care (“Elective” General Surgery, Breast, Hepatobiliary, Surgical Oncology, Thoracic, Colorectal). New in Clinical Services:
 - Culture of “Yes” (how can the service help, patient centered responses)
 - Acute Care Surgery OR Time
 - Focus on Elective General Surgery
 - Cardiac referrals
 - Thoracic Surgery coverage
 - Outpatient Support – trauma navigator, new NP resources
 - Cancer Care
 - SICU reorganization and modernization
 - New Trauma Medical Director to join ZSFG in March 2021
 - Reorganization of Trauma Program
- Volume Statistics – Inpatient Volume and ED Volume, Operative Volumes, Operative Volumes for DOS, Trauma Surgery, Diagnostics, Ambulatory Services, Wraparound Client Demographics and Programmatic Impact
 - Overall, trauma volume has decreased, in line with what is seen nationally.
 - Elective Surgery Volume has gone down.
 - Trauma Program – ZSFG is the only Level 1 Trauma Center in San Francisco and northern San Mateo County. 2019 volume (3415 in trauma registry, 2119 Admissions), Activations (TTA-2998, 911-2310, 900 – 688), Mechanism (87% blunt, 12% penetrating), 68% male, 23% > 65 years old, and 4% < 15 years old.
- Faculty Members/Physician Leadership at ZSFG, UCSF and National Roles
- Surgical Education – Residency, Medical Students, Fellowship. New in Education include:
 - New Training Directors – Dr. Alseidi (UCSF Vice Chair for Education and Dr. Tesoriero (Residency Site Director)
 - Daily teaching
 - New Acute Care Surgery Fellowship
 - New Vascular Surgery fellows
 - R4 in SICU
 - Expanded of Trauma Educational Programs (ATLS, etc.)
 - Simulation
 - Regular meetings with ZSFG leadership and SOM leadership
- Performance Improvement: Two major achievements noted: Successful SF Emergency Medical Services Agency Trauma Center Designation Survey and successful ACS-VRC survey with no deficiencies and all requirements for re-designation as a Level One Trauma Center we met. New in PIPS:
 - New Physician Director and Associate Director
 - New Data Manager
 - Weekly Report

- New PIPS program for General Surgery
- Focus on OR metrics
- All data stratified by sex, ethnicity, etc.
- Research: New in research:
 - Departmental CRC
 - Monthly WIP
 - Reinvigoration of the Clinical Research Program
 - More cross-departmental collaboration
 - Multiple submissions in Process
- Financial Report

In summary, the Service's strengths are the following: Exceptional clinical care; Re-dedication to surgical education, New Faculty, Bright, motivated, resilient and engaged junior faculty. Challenges include: a lot of resistance to "Change", Collegiality and affability, Service vs Education balance, COVID (changing culture, office space, "electric" surgery, hiring freeze, research etc.).

Members commended Dr. Stein for her exceptional report, and her outstanding leadership with significant accomplishments in a short period of time.

Family and Community Medicine – Teresa Villela MD, Chief

Highlights of the report include:

- FCM's Vision - To provide patient care that will lead to Healthy Families and Vibrant Communities.
- Organizational Chart and Leadership – Dr. Villela pointed out four key people in the FCM Service: Dr. Lydia Leung, Vice Chair, Dr. Diane Coffa, Residency Director, Jill Thomas, Administrative, and Anthony Ababon, Operations and Finance Manager.
- Clinical Services:
 - Family Health Center- Largest primary care clinic in the SFDPH network, offering full scope primary care. New to the Center is Telehealth which started in April and has been very successful in ensuring access. In the area of practice improvement, Dr. Villela highlighted the Safety Committee and the work on safety in the workplace, equity, quality, and workforce development. Input from the FHC Patient Advisory Council has helped the team on this work. A 2019 Retreat that focused on equity led to identification of areas that needed attention. Monthly clinic meetings continue to include equity topics, covering safety issues intertwined with discussions related to race/racism and oppression that can be associated with armed police enforcement.
 - Family Medicine Inpatient Service – Staffing includes two FM attendings but a third attending has been added for surges. An NP was also added this month to the team. The additions are needed for the increased volume in admissions and daily census, as well as to enable compliance with resident duty hours.
 - Adult Urgent Care Center – The Urgent Care Center continues to work in collaboration with other departments to optimize patient flow in the hospital. Major accomplishments include: (1) the move to its new clinical space on Feb 13, 2019 in the area that used to be the west side of ED; (2) adoption of EPIC in August 2019 that has helped the team to improve patient care; (3) their key role in addressing COVID pandemic using Lean Methodology.
 - Skilled Nursing Facility (4A) – 4A is a 30-bed short term skilled nursing facility in Bldg. 5. The outstanding leadership in 4A has been able to maintain year after year stellar regulatory reviews while at the same time improving access. Admissions has increased while average length of stay has gone down. Average daily census is 29. 4A played a key role in the pandemic surge plan while maintaining a model of safety for patients and staff. The unit has had had no patient infections, even if a handful of staff tested positive (in couple of instances, falsely positive).
 - Prenatal Partnership Program
 - Primary Care for Patients at Behavioral Health Center.
- Educational Programs –
 - Medical Student Programs – 3rd and 4th year students prevented from coming in and doing their hospital rotations due to the pandemic were organized and deployed to make phone calls to FHC

patients. Over a thousand calls were made to check on patients' clinical needs and offer assistance/resources, which were very meaningful for patients, important to ensure adequate provision of service, and meaningful for the medical students who used their talent and patient advocacy to help during difficult times.

-Nurse Practitioners Students - 7 per year

-FCM Residency Program

-Collaborative (Primary Care Research Fellowship –DGIM, Family Planning Fellowship -OBG and RS, Primary Care Addiction Fellowship – IM).

-Fellowship in Integrated Medicine for Underserved Populations (Second Year)

-Faculty Development Fellowship for Northern California

-Support for Hospital Opioid Use Treatment

-Double Helix Practice Transformation guide for educators

-Clinician Consultation Center

- FCM Residency Program – The program is the gem of the FCM Department, with 90% of the residents' clinical experience based at ZSFG, some in the Family Medicine clinical services and some in the ED, the Birth Center, and the Children's Health Center.
- Community Engagement
- Research Programs- Focus this year is on Health Justice.
- New Leadership Roles, Recognitions, Academy of Medical Educators Excellence in Teaching Awards
- Financial Report – FY 2019-20 FCM ZSFG Clinical Funding Sources - \$10.54M, with a third tied to resident salaries and benefits.

In summary, challenges/opportunities include Family Health Center space (pending, possible move by end of 2022), Leadership Transitions, Electronic Health Record, and Collaborating on anti-racism at the structural level. The Service's strength lies on its collaborative and talented leadership team, Mission-Driven people (staff, faculty, administrators, residents) and Patients/Families (diverse, engaged)

Members thanked Dr. Villela for her outstanding leadership and inspiring report. Members also expressed appreciation of the FCM Clinical Service Leadership's approach to equity, including the work with the FCM Patient Advisory Committee.