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MINUTES

JOINT CONFERENCE COMMITTEE FOR SAN FRANCISCO GENERAL HOSPITAL

Tuesday, December 9, 2008
3:00 p.m.

1001 Potrero Avenue, Conference Room 2A6
San Francisco, CA 94110

1) CALL TO ORDER

Commissioner Chow called the meeting to order at 3:05 p.m.

Present: Commissioner Edward Chow, MD, Chair
Commissioner James Illig, Member
Commissioner Catherine Waters, RN, PhD, Member

Staff: Jeff Critchfield, M.D., Jim Dilley, M.D., Michael Drennan, M.D.,
Delvecchio Finley, Myra Garcia, Lisa Johnson, M.D., Janet Kosevic,
Sharon Kotabe, Pharm. D., Mark Leary, M.D., John Luce, M.D., Anson
Moon, Kathy Murphy, Gene O'Connell, Marti Paschal, Roland Pickens,
Dan Schwager, Sue Schwartz, Sharon McCole Wicher.

2) APPROVAL OF THE MINUTES OF THE NOVEMBER 10, 2008 SAN FRANCISCO GENERAL HOSPITAL JOINT CONFERENCE COMMITTEE MEETING

Action Taken: The Committee approved the minutes of the November 10, 2008 San
Francisco General Hospital Joint Conference Committee.

3) HOSPITAL ADMINISTRATOR'S REPORT

Gene O'Connell, Chief Executive Officer, presented her report.

Town Hall: Budget Update

A town hall brown bag has been scheduled for Tuesday, December 9 to provide staff with an update on the current fiscal year budget. Details will be provided at today's meeting.

Chief Operating Officer Appointment

Sue Currin, RN, MSN, has been appointed as the Chief Operating Officer of San Francisco General Hospital. Ms. Currin has significant experience overseeing all aspects of patient care services, including quality, risk and medical staff affairs programs. Over the past four years, she has received \$6.2 million in grants to fund a Nursing Internship Program for new graduates, the Medication Error Reduction Project, Patient Safety Initiatives, and a Transitional Care Program and her leadership has been recognized by the Municipal Fiscal Advisory Committee and the Association of California Nurse Leaders. During the many opportunities and challenges that lie ahead, SFGH is fortunate to have Ms. Currin as its Chief Operating Officer.

SFGH Rebuild Update

Exploratory work to locate underground utilities began the week of December 1. This work requires potholing and trenching in various areas of the campus and will occur over the next several weeks. Courtesy notices have been distributed throughout the neighborhood with a Rebuild Construction Hotline (206-4500) for the reporting of safety concerns. Site logistics, mobilization and preparations are scheduled to continue until May 2009. Phase 2 of the Civic Design Review will take place in January 2009.

World AIDS Day

SFGH observed World AIDS Day on Monday, December 1 with a 25 year commemoration of Ward 86, the HIV/AIDS Clinic of SFGH. Speakers at the community event included Dr. Mitch Katz, Gene O'Connell, and Dr. Diane Havlir, Chair of the SFGH HIV/AIDS Division. The commemoration included a provider and patient forum with segments on current topics including new testing technology, drug resistance, and pursuing a cure.

Patient Flow Report for November 2008

Medical/Surgical

Average Daily Census was 229.4, which is 9% over budgeted beds and 94% of physical capacity of the hospital. 8% of the Medical/Surgical days were lower level of care and 2% were decertified/non-reimbursed days.

Acute Psychiatry

ADC for Psychiatry beds, excluding 7L, was 56.7, which is 90% of budget and 89% of physical capacity (7A, 7B, 7C). ADC for 7L was 5.1, which is 2% over budget (n=5) and 43% of physical capacity (n=12). Latest Utilization Review data from the Mental Health billing system, month of September, shows 70% non-acute days (16% lower level of care and 54% non-reimbursed). This data is based on discharges, do not include our 7L Forensic patients or days where the patients have not been discharged.

4A Skilled Nursing Unit

ADC for our skilled nursing unit was 29.2, which is 4% over our budgeted beds and 97% of physical capacity.

San Francisco Behavior Health Center

ADC for the San Francisco Behavior Health Center was 101.3, which is 3% below both our budgeted beds and our physical capacity.

Quality Council Minutes

The Quality Council minutes for October 2008 were attached to the report.

Commissioners' Comments/Follow-Up Action

- Commissioner Chow requested an itemized list of the proposed midyear budget cuts, including the \$1.3 million cut in the Affiliation Agreement, and the effects of those cuts on SFGH programs. Commissioner Illig requested a summary of the ECG report.

4) PATIENT CARE SERVICES REPORT

Sharon McCole Wicher, R.N., Nursing Director – Behavioral Health Services, presented the Patient Care Services Report.

November 2008 2320 RN Vacancy Report

Overall 2320 RN vacancy rate for areas reported is 4.44 %

SFGH Ratio Staffing Data, By Number of Shifts – 11/01/08 to 11/30/08

SFGH was able to meet staffing ratios in all areas.

Recruitment/Retention/Training/Professional Development

RN Internship Program/New Graduate Training: SFGH Educators and CNS will be working together to re-evaluate training program standards and content under the direction of Leslie Holpit RN, MS, Retention, Recruitment and Training Coordinator. The educator group will develop consistent standards for a house-wide nursing orientation and begin to examine the role of the unit based preceptors in strengthening the clinical competencies of all staff.

Recruitment: On November 21, SFGH hosted a nursing job fair for 18 RN's from Laguna Honda Hospital. This full day event included breakfast and lunch as well as networking opportunities with key administrative nursing staff. Nursing managers presented overviews of their area; follow by tours of the clinical areas. The rest of the day included individual interviews and mandatory exams. At the close of the event, SFGH successfully placed 13 RNs in Medical- Surgical Units, 1 in the Emergency Department, 1 in Critical Care, and 1 in Labor & Delivery. These RNs will begin transitioning into SFGH positions as early as December 1st, starting with the Medical-Surgical training program.

Retention/Professional Development: Two SFGH CNSs (Sheryl Calson and Violeta Quiazon) attended the *Magic in Teaching* conference on November 13 in Burlingame. The conference examined current forces in nursing education, the need to reform the California nursing education system and the need for partnerships between academic and service organizations. New information regarding nursing education (particularly from Oregon) will be utilized in the development of clinical expertise in the SFGH RN staff.

Gordon and Betty Moore Foundation Grant Award

In September 2008, The Moore Foundation awarded SFGH a \$4,035,764.00 grant for the development of a transitional care program. The transitional care program targets the 65≥

hospitalized population with strategies to reduce readmissions, improve health outcomes and decrease associated cost. The grant application and research project oversight are lead by Sue Currin RN, COO/CNO and Dr. Jeff Critchfield, MD, Chief of Staff.

Numerous strategies and care models will be incorporated into the patient plan of care including: discharge planning, patient and family education, home visits by home health workers, and follow-up phone communication. The various modalities and combined strategies will be evaluated to determine the most effective plan of care in reducing readmission and improving outcomes.

PES – November 2008

PES had 478 patient encounters during October and 470 in November. PES admitted a total of 150 patients to SFGH inpatient psychiatric units in November 2008, which was up from 139 in October 2008. In November, a total of 320 patients were discharged from PES, with 30 to ADUs, 14 to other psychiatric hospitals and 276 to community/home.

In November, PES was on Condition Yellow for a total of 31.18 hours, which was up from 8.17 hours in October. The average length of Condition Yellow increased in the month of November to 15.59 hours from 8.17 hours in October.

There was a decrease in Condition Red from October to November. PES was on Condition Red for 109.4 hours during 17 episodes in November. The average length of Condition Red was 6.44 hours. In October, PES was on condition Red for 113.63 hours, during 11 episodes, averaging 10.33 hours. The Average length of stay in PES for the month of November was 23.23 hours, which was an increase from 22.45 hours in October.

ED Diversion Report - November 2008

The Emergency Department had a Diversion rate total of 23% (156 hours) for the month of November 2008. The ED had 3,897 patient encounters for the month of November.

During Diversion, the ED held 402 admitted patients waiting for inpatient bed assignment (ICU-10, 4B/5D-201, Med/Surgical-191). During November 2008, the hospital was on Condition Yellow 13% (96 hours).

Commissioners' Comments/Follow-Up Action

- Commissioner Illig recommended partnering with the Department of Aging & Adult Services (DAAS) in the development of a transitional care program. He noted that the Long-Term Care Coordinating Council has expressed an interest in a joint commission meeting with the Health Commission and DAAS.

5) MEDICAL STAFF REPORT

Jeff Critchfield, M.D., Chief of Staff, presented the Medical Staff Report.

Budget Update

The Medical staff leadership continue to work with the hospital executive team to identify strategies to mitigate the impact of budgetary constraints on patient services.

Restriction in Send-out Tests at SFGH/DPH

Dr. Eberhard Fiebig, Chief of Laboratory Medicine presented to MEC a cost reduction initiative to disallow 12 tests from being orderable from the SFGH Clin Lab for a trial period of at least three

months. This initiative is part of the Service's necessary cost savings in the send-out test program. During this period, ordering will only be allowed in special situations to be determined by the Service. Ordering of send-out tests from Emergency Medicine locations will also be disallowed. The initiative will be re-evaluated after three months regarding savings achieved (target of at least \$70,000 annualized or 10% of our current annualized send-out test costs) and unintended "collateral" impacts on clinical care, efficiency of clinic, hospital and laboratory operations.

Appointment of New Service Chief of SFGH Medicine Service

Dr. Critchfield informed MEC about the appointment of Neil R. Powe, MD, MPH, MBA, as the new Chief of Medical Services at SFGH, and the Constance B Wofsy Distinguished Professor and vice chairman of the Department of Medicine effective March 2009. Dr. Powe is currently the Distinguished University Service Professor of Medicine in the Department of Medicine at the John Hopkins University School of Medicine. Dr. Powe trained in internal medicine, epidemiology, and health services research, receiving his MD degree from Harvard Medical School, MPH degree from Harvard School of Public Health, and MBA from the University of Pennsylvania. He completed his residency and fellowship at the Hospital of the University of Pennsylvania where he was also a Robert Wood Johnson Clinical Scholar. The appointment will be presented to MEC and JCC for approval.

MEC thanked Hal Yee, MD, PhD for his outstanding performance as the Interim Chief of the Medical Service.

MEC thanked Ted Miclau, MD, Chief of Orthopedics Surgery for running a superb search process.

6) PATIENT PLACEMENT REPORT

Mark Leary, M.D., Deputy Chief, Psychiatry, presented the Psychiatry Patient Placement Report. A wide range of admission procedures and criteria with separate intake staff in different programs makes the discharge process a challenging one. In an effort to facilitate the process of discharging patients of the Acute Inpatient Service to lower levels of care, and to authorize and regulate the use of lower levels of treatment across the continuum of care, DPH established the Placement Team in 2002. The Placement Team reviews all inpatient admissions and authorizes post-hospital levels of care for all patients being discharged to a treatment or residential care bed (including locked sub-acute treatment). Daily Acuity Rounds on the three inpatient units are convened by the SFGH Psychiatry Deputy Chief and include the SFGH Psychiatry Director of Nursing Operations, the Director of Inpatient Social Work, the Coordinator of SFGH Psychiatry Utilization Review, and one or two members of the Placement Team. Acuity Rounds offers a forum to convey information between the SFGH treatment teams and the Placement Team regarding referrals, as well as an opportunity for the SFGH treatment teams to identify barriers to discharge that may be addressed by the Placement Team and SFGH Psychiatry leadership.

Gene O'Connell, Chief Executive Officer, presented the Medical-Surgical Patient Placement Report. The summary report on hard-to-place patients listed the patching range for SNF and board and care home; placement options, including residential care facilities and skilled nursing facilities; and barriers to timely discharge, including clinical complexity, financial issues, exclusion criteria, conservatorship, and housing.

Commissioners' Comments/Follow Up Actions

- Commissioner Chow requested an updated progress report on psychiatric placement issues at the March 2009 SFGH JCC meeting.

7) **COMMUNITY ORIENTED PRIMARY CARE UPDATE**

Michael Drennan, M.D., Director, COPC, and Lisa Johnson, M.D., Medical Director for Quality Improvement Programs, COPC, presented the COPC Quality Improvement Program 2008 Annual Report. The 2008 focus areas are: primary care data reporting on efficiency and quality; strengthening the QI infrastructure in COPC; innovative practices in primary care; encouraging data driven quality improvement efforts; and spreading the use of the Disease Registry (i2iTracks).

Commissioners' Comments/Follow Up Actions

- Commissioner Chow requested that the COPC QI Program present its QI outcomes report to the SFGH JCC on a yearly basis.

8) **CHART PATIENT EXPERIENCE**

Sue Schwartz, Performance Improvement Manager, Quality Management, presented the CHART Patient Experience report and the Hospital Consumer Assessment of Healthcare Providers and Systems. Results are publicly reported on www.calhospitalcompare.org. Patients are surveyed on their hospital experience and asked questions about how they would rate the hospital and would they recommend the hospital to friends and family. SFGH internally tracks patient survey data as well as performance measures related to improving the patient experience.

9) **PUBLIC COMMENT**

None.

10) **CLOSED SESSION:**

- A) Public comments on all matters pertaining to the closed session

None.

- B) Vote on whether to hold a closed session (San Francisco Administrative Code Section 67.11)

Action Taken: The Committee voted to hold a closed session.

The Committee went into closed session at 5:15 p.m. Present in the closed session were Commissioner Chow, Commissioner Illig, Commissioner Waters, Jeff Critchfield, M.D., Chief of Medical Staff, Delvecchio Finley, Associate Administrator, Support Services, Myra Garcia, Medical Staff Services, Janet Kosevic, National Patient Safety Goals Coordinator, Sharon Kotabe, Pharmacy Director., Mark Leary, M.D., Deputy Chief, Psychiatry, John Luce, M.D., Chief Medical Officer, Anson Moon, Senior Health Program Planner, Kathy Murphy, Deputy City Attorney, Gene O'Connell, Chief Executive Officer, Marti Paschal, Director of Administrative Operations, Roland Pickens, Associate Administrator,

Diagnostics & Specialty Care, Dan Schwager, Director, Medical Staff Services, Sue Schwartz, Performance Improvement Manager, Quality Management, and Sharon McCole Wicher, Nursing Director, Behavioral Health Services.

- C) Closed session pursuant to Evidence Code Sections 1157(a) and (b); 1157.7; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1

APPROVAL OF CLOSED SESSION MINUTES OF NOVEMBER 10, 2008

Action Taken: The Committee approved the November 10, 2008 closed session minutes.

CONSIDERATION OF CREDENTIALING MATTERS

Action Taken: The Committee approved the Credentials Report.

CONSIDERATION OF PEER REVIEW, QUALITY OF CARE AND PERFORMANCE IMPROVEMENT

CONSIDERATION OF NATIONAL PATIENT SAFETY GOALS QUARTERLY REPORT

- D) Reconvene in Open Session

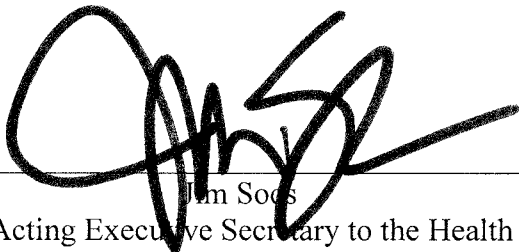
The committee reconvened in open session at 5:35 p.m.

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 voted not to disclose discussions held in closed session.

11) **ADJOURNMENT**

The meeting was adjourned at 5:35 p.m.



Jim Soos
Acting Executive Secretary to the Health Commission