

EOC Annual Report Fiscal Year2021 - 2022





San Francisco Department of Public Health

Overview

- Scope of Report
 - Seven Joint Commission EOC Chapters
 - Emergency Management
 - Fire Life Safety
 - Hazardous Materials and Waste
 - Medical Equipment
 - Safety Management
 - Security Management
 - Utilities Management
- Annual Review by Environment of Care Committee. <u>The overall program was deemed effective.</u>

Who are the Program Managers?

- Emergency Management (Lann Wilder Director of Emergency Management)
- Fire & Life Safety Management (Greg Chase Director of Facilities Services)
- Hazardous Materials and Waste Management (Vacant
 Safety
 Officer)
- Medical Equipment Management (Elkin Lara-Mejia Director of Biomedical Engineering)
- Safety Management (Vacant

 Safety Officer)
- Security Management (Basil Price SF DPH Director of Security)
- Utility Systems Management (Greg Chase –Director of Facilities Services)

What does the EOC Committee do?

- Identifies risks and implements systems that support safe environments.
- Ensures that the hospital staff are trained to identify, report and act on environmental risks and hazards.
- Sets and prioritizes the hospital's EOC goals and performance standards.
- Assesses whether EOC goals are being met.
- Works to ensure the hospital is compliant with the EOCrelated requirements of all applicable regulatory bodies.

Membership of the EOC Committee is comprised of:

- Program managers for each of the seven EOC Management Programs (as previously listed).
- Representatives from:
 - Clinical Laboratories (Andy Yeh),
 - Dept. of Education & Training (Kala Garner),
 - Environmental Services (Francisco Saenz),
 - Infection Prevention & Control (Elaine Dekker),
 - Nursing (Andrea Chon),
 - Quality Management (Tom Holton, Susan Brajkovic, etc, al),
 - Food Nutrition Services (Katie Merriman),
 - Materials Management (David Lawlor),
 - Linen and Messenger Services (Vacant)
 - Pharmaceutical Services (Julie Russell, et al)

Also Supporting EOC Activities Are:

- Biomedical Engineering, (Eunice Santiago)
- Bloodborne Pathogen/Safe Device Committee, (Gemma Cohen)
- Environmental Services, (Louis Moreno)
- Environmental Services, (Reyland Manatan)
- Facilities Services, (Christina Rodriguez)
- Materials Management, (Joseph Nauer)

Emergency Management

Program Objectives: Met

Effectiveness: Program found to be effective.

Accomplishments:

- Exercises and planned events: departmental earthquake preparedness drills for the Great California ShakeOut, four scheduled computer system downtime planned server patch events, the Warriors NBA Championship Parade, and the 2022 Pride Parade and related events.
- Actual Emergencies: one brief partial power failure, two Security Alerts, as well as the ongoing COVID-19 Response with multiple patient surges.

Goals and Opportunities for Improvement in FY 2022-23 include:

- Develop and implement updated plans and procedures to ensure compliance with nine new Joint Commission Standards and 60 Elements of Performance.
- Develop and implement progressive Drills and Exercises for Security Emergencies
 Response, including Lockdown, Shelter in Place, and Active Assailant.
- Continue providing training on the Hospital Incident Command System (HICS) for Incident Management Team members, supervisors and managers.
- Ensure effective and efficient incident management and documentation.

Fire Life Safety Management

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Program Objectives: Partially Met (exceeded goal for false fire alarms).

Effectiveness: Program found to be effective.

Goals and Opportunities for Improvement in FY 2022-23 include:

- Manage false fire alarms for a quality and safe care experience in Building 25.
- Continue monitoring construction projects on the ZSFG Campus. Ensure that the appropriate Risk Assessments for a quality, and safe care experience are filed for the projects.
- Continue implementing fire alarm upgrade funded by the 2016 bond.
- Engage staff and contractors to implement projects funded by the 2016 bond measure.

Hazardous Materials & Waste Management

- Program Objectives: Partially Met
- Effectiveness: Program found to be effective.

Accomplishments:

- Continued to work with Capital Projects, ZSFG Facilities, and Infection Control to allow construction within operating hospital buildings as well as in very close proximity to staff, patients, and visitors without significant incidents or exposure concerns.
- Worked with Materials Management, Infection Control and DOC Logistics to identify alternate cleaning and disinfection products to address COVID-related supply shortages.

Goals and Opportunities for Improvement in FY 2022-23 include:

Conduct RFP for pharmaceutical waste disposal contract.

Medical Equipment Management

- Program Objectives: Met
- Effectiveness: Program found to be effective.

Accomplishments:

- Created a Biomedical Equipment Planning Committee which lead to the purchase of key capital medical equipment
- Replaced all Med-Surg bladder scanners (8x) with new bladder scanner medical technology
- · Hired a new Biomedical Technician with a dialysis background to prepare for Ward 17 Dialysis new location
- · Additional feeding pumps and aspirators were purchased
- An additional 100 infusion pumps were ordered during the peak of the COVID-19 pandemic
- Working with department leaders to purchase medical equipment under \$5K that are End of Life (EOL)

Goals and Opportunities for Improvement in FY 2021-22 include:

- Provide further training for all Biomedical Technicians in order to continue insourcing PM and repair services.
 - Reduce the total cost of ownership for each medical device
 - Reduce the service turnaround time
- Hire a Biomedical Technician with dialysis background to provide support when Outpatient Dialysis (Ward 17) moves to building 5 and expands its patient stations from 13 to 30.
 - The new area is expected to open in 2024
- Work with department leaders to develop a medical equipment lifecycle plan to replace medical devices/systems every 2-3 years.
 - Define a capital strategy that would involve communication with ZSFG senior/executive leadership as to when a device(s) will need to be replaced. Having a proper plan in place would help leadership in determining what device(s) should be included in their annual budget and if any requests need to be submitted to the capital equipment committee.
 - Met with department leaders in the Fall to prepare for their capital equipment submission in November.
- Continue developing a definite path to identify medical technology that will bring ZSFG to the forefront of health care and overall to improve the rate of change at ZSFG when it comes to medical equipment technology.

Security Management

- Program Objectives: All program objectives were met.
- Effectiveness: Program was found to be effective.

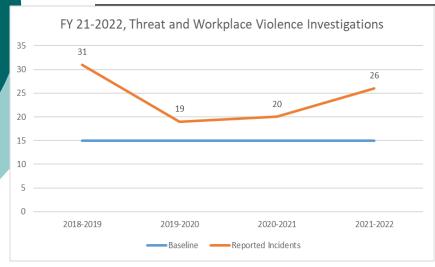
Accomplishments:

- The 2021-2022 Security Program was successful in assuring the provision of a safe, accessible, and secure environment for staff, patients, and visitors, which included the following:
 - 1. In response to 7,070 patient related service calls, 1% resulted in use-of-force.
 - 2. Confiscated 3,050 weapons and contraband through Emergency Department Security Weapons Screening.
 - 3. Investigated 26-moderate/high risk workplace violence threat incidents and developed security plans to address the threat and protect the individuals involved.
 - 4. Implementation of the Behavioral Emergency Response Team.
 - 5. Reduction of use-of-force incidents by 21%

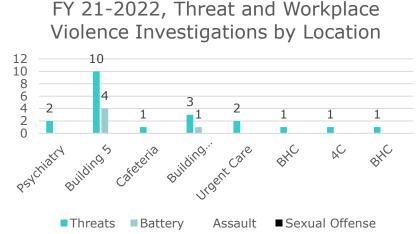
Performance Metrics

FY 2021-2022, Annual Performance Metrics				
	Target	Overall Performance		
Code Green Response (Patient Elopement)	90%	100%		
Customer Satisfaction	90%	66%		
Electronic Security Systems	98%	94%		
San Francisco Sheriff Office MOU Compliance	3.5	3.6		
Employee Security Awareness	90%	100%		

Threat and Workplace Violence Investigations

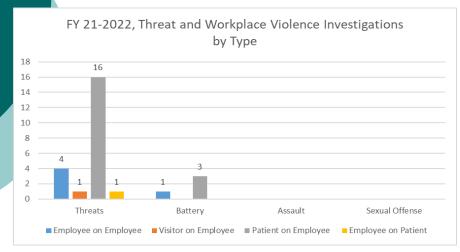


 Over a 4-year period, moderate and highrisk investigations increased 13%. There was a 30% increase in investigations from FY 21-2022.



- Building 5 accounted for 55% of investigations, and 85% (10 of 26) involved reports of threats.

Threat and Workplace Violence Investigations



Patient against employee reports accounted for 73% of moderate and high-risk investigations.

Security-response-plans to address threats and acts of violence, included:

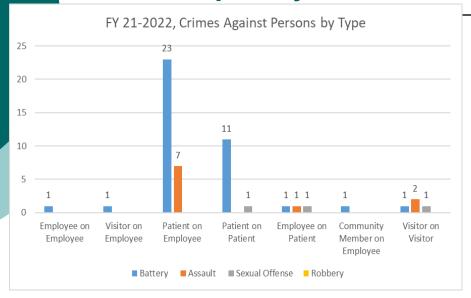
Remedial Action Taken		
Behavioral Plan	4	
Restraining Order	1	
Treatment Transferred	4	
Arrest	1	
Employee Disciplinary Action	4	
Suspension of Care	1	
SFSO Detention	1	
SFSO Standby	5	
HR Investigation	1	

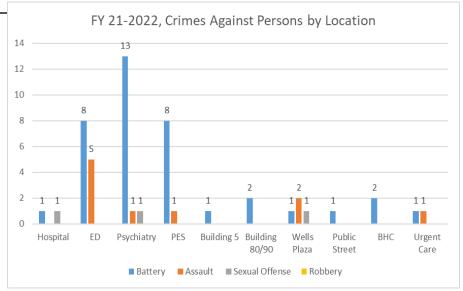
Crimes Against Persons and Property

Yearly Comparison	2020-2021	2021-2022
SFSD - Facility Property Thefts Reports (>\$900)	2	1
SFSD - Burglary Reports	2	4
SFSD - Battery Reports	47	41
SFSD - Sexual Offense Reports	4	3
SFSD - Assault Reports	1	7
SFSD - Robbery Reports	0	0
SFSD - Homicide Reports	0	0
Total	56	56

- Crimes against Persons and Property remained flat from FY 20-2021.
- Battery reports decreased 12% from FY 20-2021.
- Assault reports increased 600% (from 1 to 7 reports.)
- Battery reports accounted for 75% of crimes against persons (39 of 52 reports)

Crimes Against Persons and Property





- Patient against Employee reports accounted for 58% of crimes against person incidents (23 of 39 reports.)
- Reports from the Psychiatry Department accounted for 34% of person-crimes (13 of 38 reports)
- 42% of victims of physical attack, pressed charges against their assailant (18 of 31.)

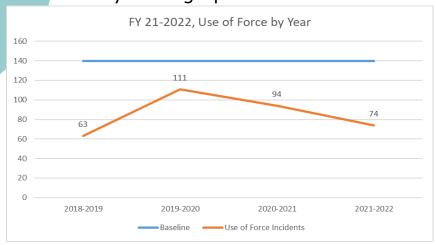
Crimes Against Property

2021-2022 Crimes Against Property by Location

Theft		Burglary
Building 40	1	
Building 80		1
CHN	1	1
Building 5	1	
UCSF Construction Site		3

Use of Force by Year

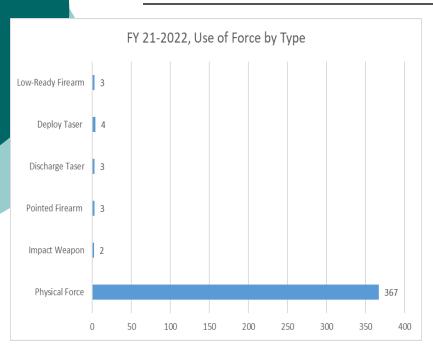
Use-of-force data is tracked of all SFSO incidents occurring on ZSFG campus. In 2021-2022, there were 74 incidents of use-of-force. The data was stratified by the types of force, type of incidents, location, demographics, diagnosis, and reported acts by demographics.



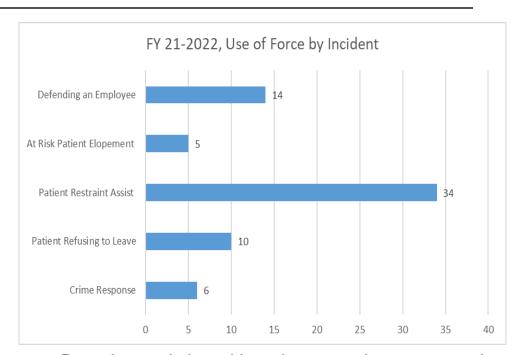
Use-of-Force by Patient Related Service calls and Clinical Data	
Per 1K Patient Related Service Calls	10
Per 1K ED Registrations	1
Per 1K PES Intakes	4
Per 100 Psychiatry Admissions	1

Use-of-force decreased 21% from FY 2020-2021

Use of Force by Type and Incident

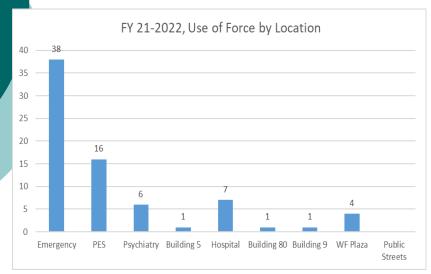


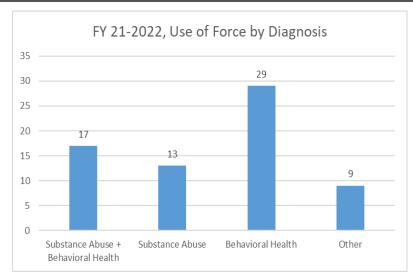
Of the 74 use-of-force incidents, there were 382 types of force used. Physical force accounted for 96% of the force used (367 of 382 types.)



Deputies assisting with patient restraints accounted for 45% of use-of-force incidents (34 of 74 incidents.)

Use of Force by Location and Diagnosis

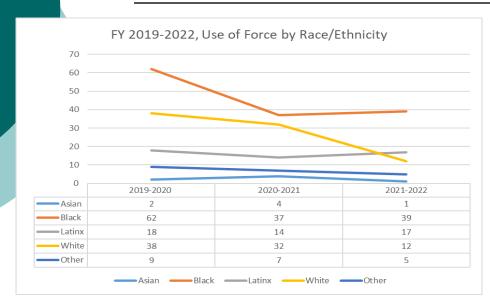




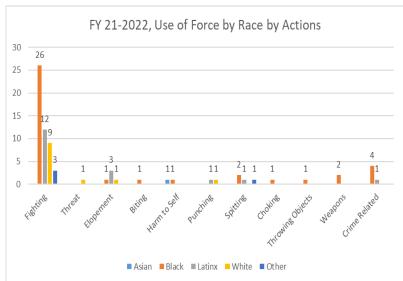
51% of use-of-force incidents occurred in the Emergency Department (38 of 74)

Sixty-seven percent of use-of-force was against patients that were diagnosis with behavioral health/substance abuse.

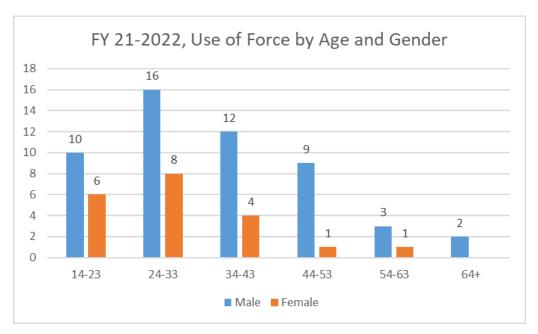
Use of Force by Demographics



Use-of-force decreased in every race/ethnicity except Black/African Americans and Latinx. Of the 74 incidents of force, Black/African Americans were subjected in 39 of the incidents



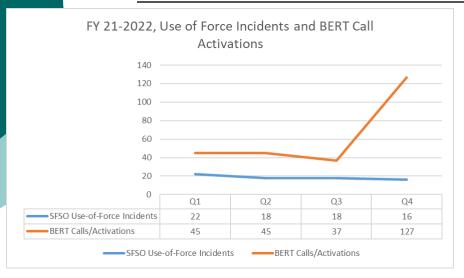
- Use-of-force, in response to reports of fighting, accounted for 67% of reported acts (50 of 74.)
- Acts committed by Black/African Americans accounted for 52% of the reports to the Sheriff's Office (39 of 74.)



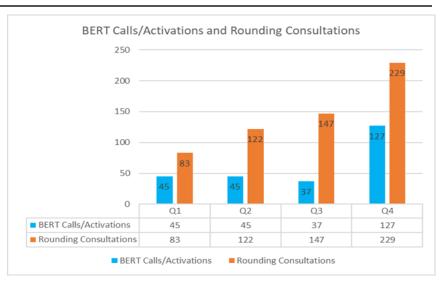
Use of Force by Demographics

72% of use-of-force is against males and 33% against patients ages 24-33.

Behavioral Emergency Response Team (BERT) FY 21-2022



In January 2022, BERT was implemented, by year-end, BERT responded to 71% (254 BERT calls v 74 SFSO calls) more calls of patients demonstrating risk behavior; 81% of the calls were without law enforcement presence.



BERT conducted 581 rounding consultations that prevented escalating behavior through verbal de-escalation, staff support, patient assistance, patient safety escorts and safety planning.

Utility Systems Management

Program Objectives: Met

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Effectiveness: Program found to be effective

Goals and Opportunities for Improvement in FY 2022-2023 include:

- Support the chiller & cooling tower replacement projects in Bldg 2.
- o Support the Bldg 2 Security project.
- Support the active 2016 bond funded projects in Bldg 5 (IT infrastructure, Seismic, Dialysis, and Public Health Lab).
- Further develop, with the assistance of the project management team, the replacement project for the main switchgear, and electrical distribution system in Bldg 5.

Safety Management

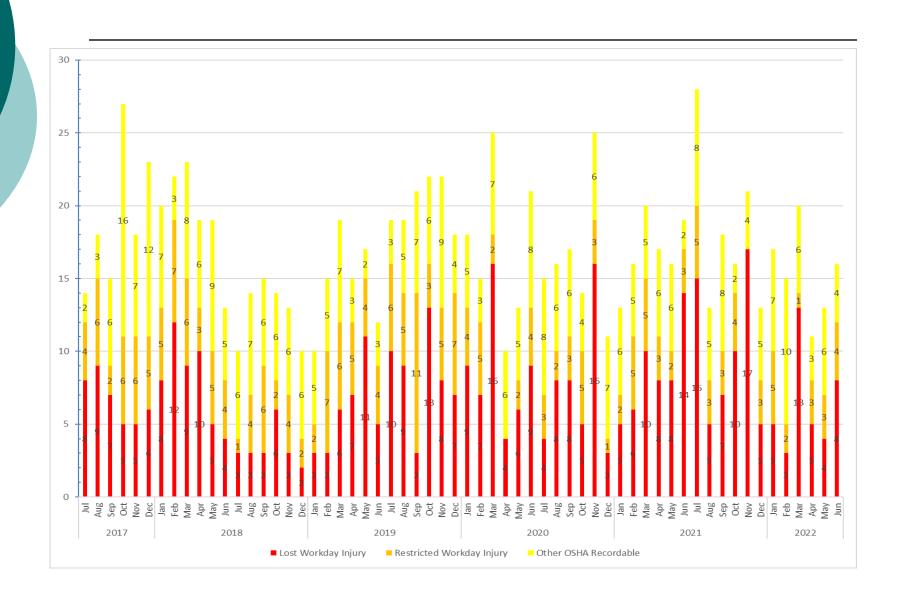
Program Objectives: Met.

Effectiveness: Program found to be effective

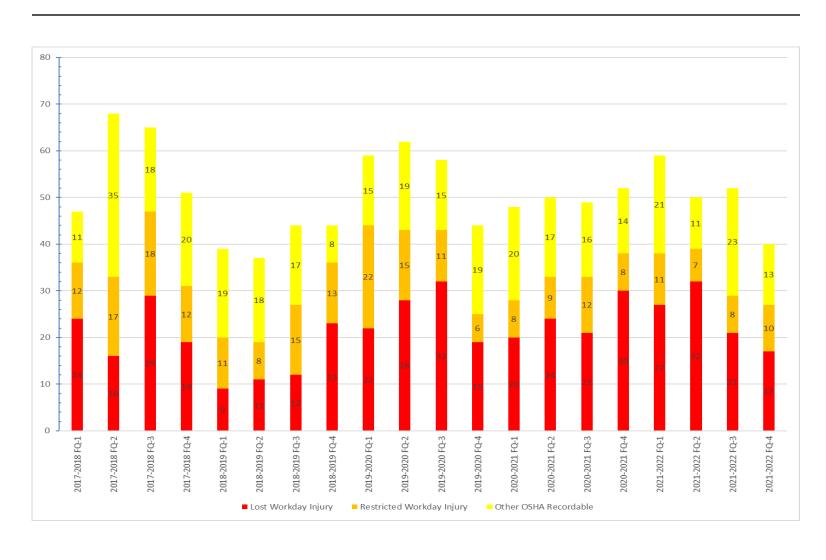
Goals and Opportunities for Improvement in FY 2021-2022 include:

 Show continued progress in reducing staff injuries and injury rates, measured by no increase in Recordable Injury Counts or Injury Rates from 2017 – 2022.

OSHA Recordable Injuries July 2017 – June 2022



OSHA Recordable Injuries July 2017 – June 2022





Questions?





San Francisco Department of Public Health