NEWSLETTER E.D.



May 14, 2021 Issue # 66

Individual Highlights:	
COVID-19 SITREP	2
Greeter & Triage	3
Resus Training	4
Welcome to Zehna	4
NM Corner	5
PEM Pearl	6
Safety Tip	6
Nominations- Daisy	7
Celebrations	8

Cover Photo: ZSFG

ZSFG COVID-19 Situational Report

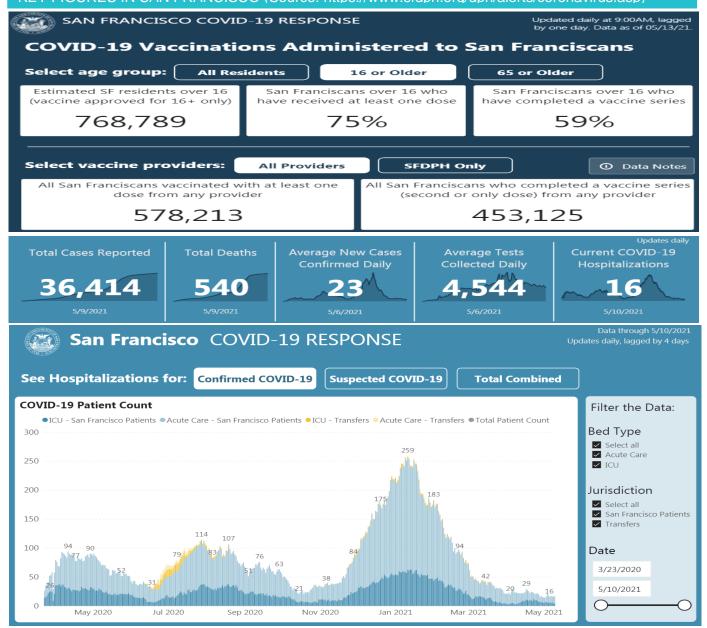
This week, cases and hospitalizations continue to decline in San Francisco. We remained at **Level Green** for our hospital surge plan throughout the week.

ZSFG has begun vaccinating 12–15-year-old individuals. Patients who are \geq 12 and are SFHN patients, uninsured or live in one of these 8 eight zip codes (94110, 94124, 94134, 94107, 94112, 94102, 94103, 94130) can receive their COVID-19 vaccine at ZSFG.

We must continue to double down and do everything we can to stop the spread of COVID-19. Please don't let your guard down. Continue to be diligent off campus as we are on campus with respect to masking, social distancing and good, consistent hand hygiene.



KEY FIGURES IN SAN FRANCISCO (Source: https://www.sfdph.org/dph/alerts/coronavirus.asp)



Greeter and Triage

By: Bebs Navarro, MSHA, RN

We received feedback from staff about many challenges when working at the greeter's desk. There is a long list of things that pulls away our triage nurses from the clinical work they do which range from screening visitors to checking belongings, obtaining vital signs, to triaging to name a few. To support this process, this week we trialed two important changes at the greeter's area.

The first change is implementing ED dedicated visitor screeners at the walk-in entrance, staffed by ZSFG screening team. The schedule of visitor screeners is mostly on night shift this week and we are looking to expand the schedule by next week.

The second change was the trial of transitioning the triage nurses to the main triage area during the ED busiest time from 11am-11pm with a Nurse Practitioner who will be conducting MSE. Infection control permitted the use the regular triage space with maximum of 6 people (combined staff and patient) while maintaining 6 feet social distancing.

The greeter desk will continue to be staffed with MEA and a Triage RN who will continue refer patient to UCC while we have the EMTALA waiver in effect, will determine PUIs, and determine who should be triaged in the main area. A small test of change (PDSA) for ED patient referral to UCC will happen soon to ensure we keep our current UCC referral workflow even after EMTALA waiver is lifted (tentatively scheduled in July).

There were also several EPIC optimization request to improve triage flow such as developing an icon to signal staff the patient has visitor and a click-box to indicate patient vaccination status.

Thank you to everyone for providing feedback, for raising concerns, and offering solutions to our challenging work every day.



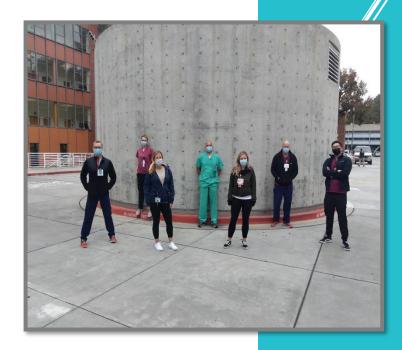
Resus Training Class

By: Brian McNally, MSN, RN

Two days of resus training classes occurred this week to prepare our seven nurses for their resus preceptorship in next 6-8 weeks. Please support their training when you see them in resus.

From left to right:

Nikolay Ivanov, RN Tatyana Wilson. RN Jordan Gunning, RN Luis Ortiz Gonzales, RN Danielle Collins, RN Scott Moller, RN Julian Roy, RN



Welcome to Zehna Gilliam

By: Sandra Hall



Zehna will be joining the ED team the week of May 17.

The ED Social Work Team is excited to introduce our newest As-Needed member, Zehna Gilliam. Zehna will be our second social worker 2 nights per week and filling in on day shifts, as needed.

Zehna earned her Bachelor of Arts in Psychology and Gender Studies from UCLA before pursuing her Master of Social Work from University of Southern California (USC). She is currently licensed by the California Board of Behavioral Sciences as an associate social worker (ASW), as she works towards her LCSW licensure. Her education and career have always focused on her passion for working with individuals as they navigate their needs and goals through the healthcare system. Zehna has been working in the field for over five years and has extensive experience providing individual and group counseling, as well as community resource linkage between individuals and agencies.

In her free time, she enjoys practicing ceramics, taking advantage of sunny days, and traveling as much as possible.

Please join me in welcoming Zehna!

NURSE MANAGER'S CORNER:

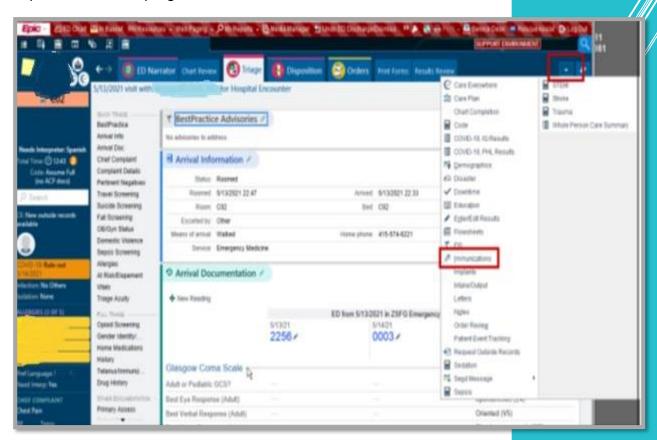
By: Dave Staconis, MSN, RN, FNP

<u>Broadened Criteria for Sending Behavioral Complaint Only</u> Patients to PES Directly From Triage

Happy to announce expanded eligibility to go to directly to PES for those arriving to the ED with a behavioral only complaint (no medical concerns and meeting the regular established criteria). Starting Monday, May 17th **fully** COVID vaccinated patients are being

- Starting Monday, May 17th **fully** COVID vaccinated patients are being added to the eligible criteria list.
 - The patient must have received a 2nd dose of Pfizer or Moderna SARS-CoV-2 vaccine at least 14 days ago
 OR-
 - Single dose of the J&J SARS Co-V-2 vaccine at least 14 days ago
 - -AND-
 - Be asymptomatic of COVID like illness
 -AND-
 - Have no known recent COVID exposure

Here is where to check a patient's Immunization Record in Epic: 1) Drop-down arrow top righthand side of the toolbar-→Immunizations



PEM PEARL

By: Dina Wallin, MD, FACEP, FAAP

Bronchiolitis is back in several areas of the country after a lockdown-induced absence. As a reminder, the AAP's recommended ED treatments for bronchiolitis consist mostly of supportive care:

- o Suction the nose with an olive tip aspirator and saline bullets
- Antipyretics as necessary
- Influenza and/or Covid-19 testing if indicated
- NO routine labs, imaging, or medications, including bronchodilators, corticosteroids, hypertonic saline, and antibiotics

A <u>recent study</u> in *Academic Emergency Medicine* unsurprisingly found **disparities in bronchiolitis care** among non-Hispanic Black (NHB), non-Hispanic white (NHW), and Hispanic patients, but these disparities were interesting-- NHB patients were significantly more likely to receive bronchodilators and corticosteroids than the other two groups, and NHW patients were more likely to receive chest X-rays and antibiotics. As the authors conclude, their findings "represent differing patterns of **overtreatment**". Care for Hispanic kids, who were *least* likely to get any medications or diagnostic tests, was actually the closest to AAP recommendations!

SAFETY TIP OF THE WEEK: CODE 50 REFRESHER

By: Katie Aschero, RN



A code 50 can be called by ANYONE who feels a situation is unsafe or that a situation is escalating. Code 50 is a way to quickly gather the team (Attending, RN, SFSD officer, Charge Nurse, MEA) to discuss the situation and come up with and implement a plan. "Code 50" and location should be announced overhead and call the Sheriff's office at 64911 stating "Code 50" and location. Once team is gathered a quick SBAR should be provided by primary RN or person aware of the situation, plan should be implemented as soon as possible or when safe to do so. Assign a role to each available staff member including each limb for restraints, someone to administer medications and someone to be "the one voice" to discuss the situation to patient, make sure everyone involved is aware of the plan prior to going into patients room. Once plan is implemented and the situation is safe fill out a UO about the situation and chart under the "code 50" tab in Epic. A debrief is highly recommended and should include the whole team to discuss what happened.



ED Nominations for Daisy Award

By: Bebs Navarro, MSHA, RN

The **DAISY Award** is a nationwide program that recognizes nurses and nursing teams for their commitment to patient care and clinical expertise. DAISY Award honorees personify ZSFG's True North commitment to Quality and Care Experience.

The DAISY Foundation was formed in January 2000 by the family of J. Patrick Barnes who died at age 33 of complications of Idiopathic Thrombocytopenic Purpura (ITP). The Barnes Family was awestruck by the clinical skills, caring and compassion of the nurses who cared for Patrick, so they created this award as a way to recognize nurses everywhere. Over 3,100 health care facilities in 19 countries grant DAISY Awards.

I would like to recognize and celebrate our ED nurses who were nominated for the Daisy Award:

Avel Ascencio, RN

Always does and documents above and beyond what is expected. His patients are always tucked. He does other tasks not in his job description to help the department. You want him to be your nurse should you need it.

Gretchen Arcia, RN

As a charge nurse she is an expert nurse and a resource to the staff always jumping in to help with critical patients. She is humble, she always makes time for the little things that sometimes get missed with the patients like putting on their socks. She is a model for our department, and we are so lucky to have her.

Rob Alvernaz, RN

With the ever-changing needs of this department, Rob has grown and developed graciously, becoming not only a role model, but a truly dependable leader that is greatly respected by his colleagues. Rob advocates for his patients to receive the care he knows they deserve, and he advocates for his fellow nurses to ensure they need to do their jobs to the best of their ability.

Santiago Tan, RN

Santi exemplifies the daisy compassion by always treating our behavioral patients respectfully and taking the time to listen to their needs. Even in the most difficult of situations, he makes a connection with the patient and calmly speaks to them to deescalate the situation. His compassionate care creates a safe environment for our patients and our staff.

Celebrations!!!

Kudos to the Resus RN team from night shift on Friday 5/7 for managing a hectic shift w multiple trauma activations and ICU pt's while maintaining grace and solid teamwork all around. RN Arcia as charge, RN Quiggle as TL, RN's Upton & Gherini as fellow primaries with **RN's Gleeson and Blee as Resus** backups. All of you did an amazing job in helping us get through a crazy night. Special thanks to RN Bailey Blee for being tremendous in her role as backup, assisting w multiple sick pt's and consistently providing excellent nursing care, assistance, break relief and support while never complaining, slowing down or missing a beat throughout the entire busy 12 hours. Additional Kudos to all RN's and MEA's on that night in the pods. Per usual, your hard work was indispensable and greatly appreciated.

~Kareem Carter, RN

Special thank you to **Eric Hamer and Dwayne Adams** for helping out with EMS triage since we did not have one tonight!

Kudos to Kelly Cain for completing her triage training! She did great on her own!

~ Juan Castaneda, RN

MEA Alma was incredible tonight. She was assigned to resus clerk, but really was the MVP of the dept on this very busy, short staffed night!

~Niki Ramirez, RN

Shout out to **Maria Morales, NP** for seeing and screening a waiting room full of patients yesterday evening!

~Malini

Triage was CRAZY all shift on Thursday. The line was out the door from 11am until I left shift last night with a waiting room (hallway!) bordering on 20 the whole time. Thank you to **Mags and Jenn Len** for helping in triage yesterday by jumping in at times, and sending a pod acuity (thanks Santi) and MEAs (Thanks Wendy) to do our breaks, the TLs for making room where they could when they could (**Annie**, **Ross**, **Aram**, and **Margaret**).

Mostly a thank you to **Sabrina**. We have worked really hard together side-by-side for a long time. We have the same work ethic and with just the two of us at triage yesterday it brought back old times when we are reminded to put our heads down and work, no use in complaining, no quitting, just work. I know administration and management is working hard to change triage for the better.

~Rachel Perry, RN

Thank you for all that you do! I wish you all a safe, happy and relaxing weekend.

~ Bebs Navarro

Wellness Corner

POEM READ BY CHAPLAIN MC AT THE DMS HUDDLE THIS MORNING



From *The Soul Is Here for Its Own Joy* (edited by Robert Bly)

Is my soul asleep?
Have those beehives that work
in the night stopped? And the waterwheel of thought, is it
going around now, cups
empty, carrying only shadows?
No, my soul is not asleep.
It is awake, wide awake.
It neither sleeps nor dreams, but watches,
its eyes wide open
far-off things, and listens
at the shores of the great silence.

Antonio Machado

