



ZUCKERBERG  
SAN FRANCISCO GENERAL  
Hospital and Trauma Center



University of California  
San Francisco

# Improving Workplace Safety at ZSFG

Sabrina Robinson, COO

Angelica Journagin, CAO



San Francisco  
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH



San Francisco  
Department of Public Health

# Agenda

- Background and Analysis
- Update KPI and Goal
- Current and Ongoing Countermeasures

A horizontal bar at the top of the page, divided into six equal-width segments of different colors: red, teal, green, purple, orange, and light blue.

**BACKGROUND**

# ZSFG TRUE NORTH



# Background

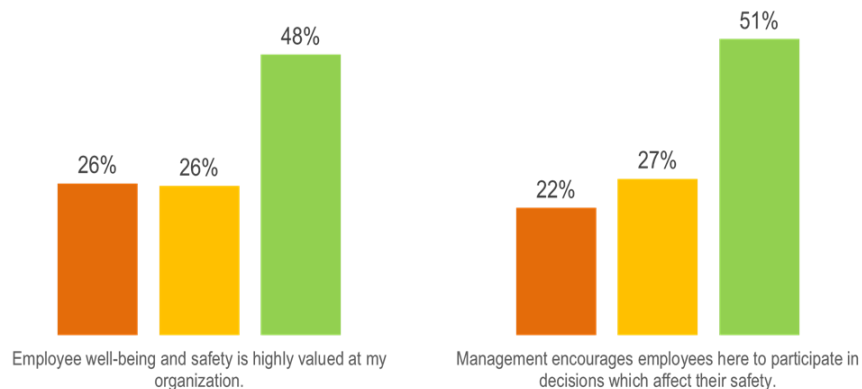
1. Healthcare workers are 4-5 times more likely to experience workplace violence
2. The 2024 SEIU Local 1021 (Nursing) MOU focus on workplace violence
3. 2024 California legislation increased penalties for assault or battery in emergency department
4. Department of Education and Training plans to expand scope of de-escalation training program
5. Limited departments focused solely on workplace violence prevention and turnover in positions focused on staff engagement and workplace violence
6. Opportunity to standardize work across departments

# Analysis

## IV. Analysis – Why is this problem happening?

A. People	B. Method
<ol style="list-style-type: none"> <li>1. Staff and leaders have variable knowledge, attitudes and skills in prevention of WPV</li> <li>2. No department to oversee or own the work comprehensively</li> <li>3. BERT team is highly successful, but still has limitations in scope</li> <li>4. Vacancies in crucial positions such as Sherriff's department and trainers</li> </ol>	<ol style="list-style-type: none"> <li>1. Threat management is perceived, implemented and documented inconsistently, preventing effectiveness of CPI</li> <li>2. Do not have a consistent method of communicating a patient is at risk for violence through Epic. Current identification of violent patients has resulted in bias due to lack of process and training.</li> </ol>
<ol style="list-style-type: none"> <li>1. Firefighting culture with lack of shared ownership, direction and transparency leads to more resources being directed towards responding to rather than preventing violence.</li> <li>2. Increased homelessness, substance use, behavioral health needs</li> </ol>	<ol style="list-style-type: none"> <li>1. Variable review and quantification of assaults, injury by departments, UO and SAFE system</li> </ol>
C. Environment	D. Data, Feedback, Monitoring

ZSFG 2023 Employee Engagement Survey: Safety Question Data



Since the 2023 survey where less than half of employees identified the organization as highly valuing safety, there have been few departments whose sole work is focused on workplace violence prevention and there has been turnover in positions focused on staff engagement and workplace violence. Anecdotally, it has been shared that employees fear discipline if they don't engage potentially violent patients and are skeptical of reporting.



# **UPDATED KPI AND GOALS**

# Current KPI & Goal: Physical Assaults with Injury

## 2025 Scorecard:

True North:

Owner:

## Physical Assaults with Injury

*Developing Our People*

*Robinson*

Goal Statement:

*Reduce the # of physical assaults with injury to ZSFG staff from a rate of 6.75 per month to less than 4.0 per month for the combined high risk areas, by Dec 2025.  
(PSYCH, ED, BHC, UCC, M/S)*



Rolling 12-Month

**6.5**

2025 Target:

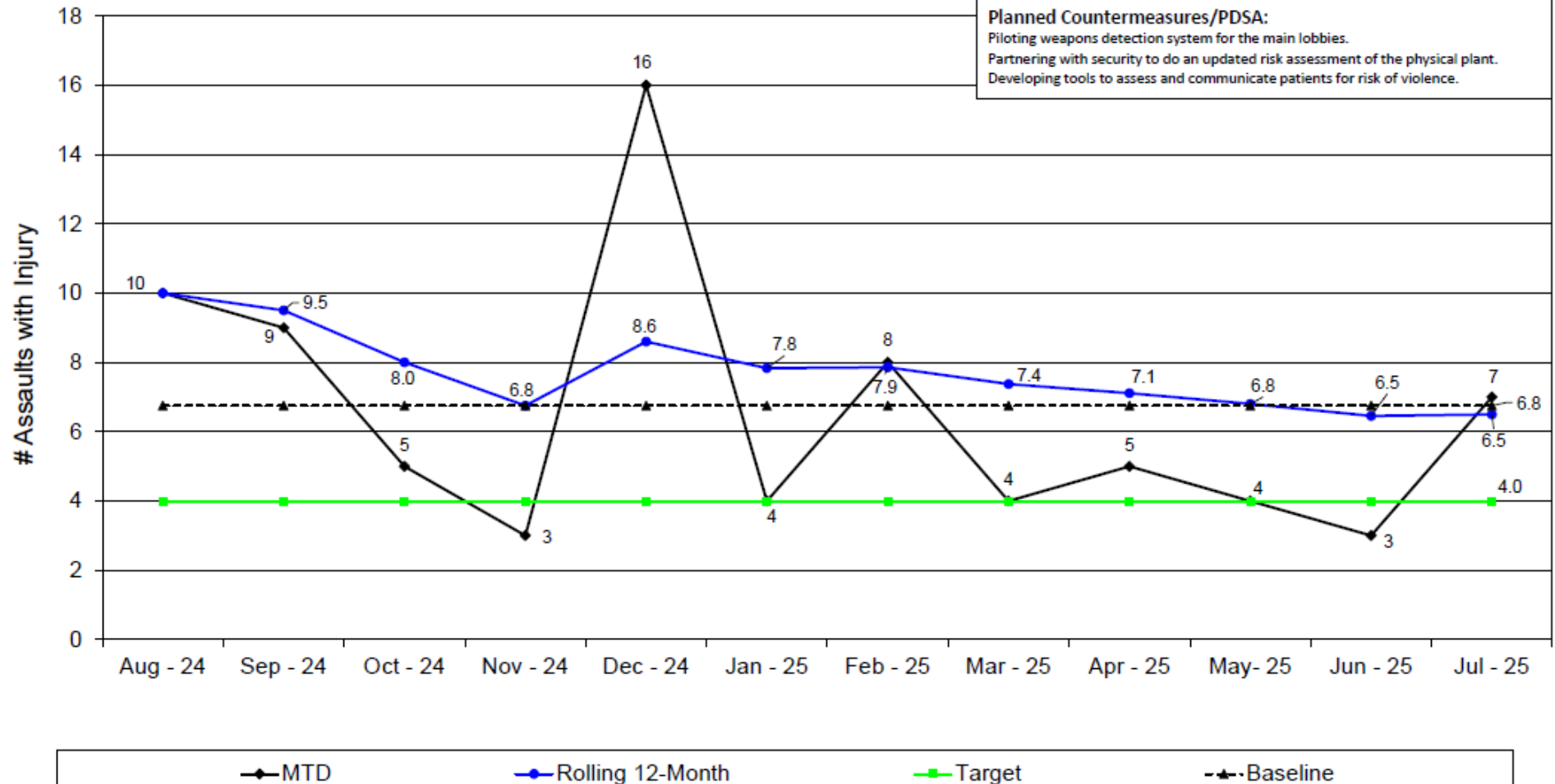
**4.0**

2024 Baseline:

**6.8**

% Change From Last Year:

**-3.70%**





# New KPI

- Move from distinct number to a rate, align with external methods of tracking workplace violence incidents
- Updated KPIs
  - Inpatient Physical Assaults to Admission (%)
  - Outpatient Physical Assaults to Visits (%)



# **CURRENT & ONGOING COUNTERMEASURES**

# Countermeasures – Partnerships

- Sherriff's Office
- IHI & External Hospital Partners
  - Align Data with National Metrics



## WPV Workgroup Metrics

*Data are intended to guide improvement and learning across the network and at individual hospitals*

	OSHA Total Recordable Incident Rate (TRIR)
	Lost Time Case Rate (LTCR)
	Days Away, Restricted, or Transferred (DART) Rate
	Total Workplace Violence Incidents

*We will collect totals and WPV specific totals, then convert to rates*

*\*All data submitted will be aggregate, non-identified data. No patient-level data will be collected.*



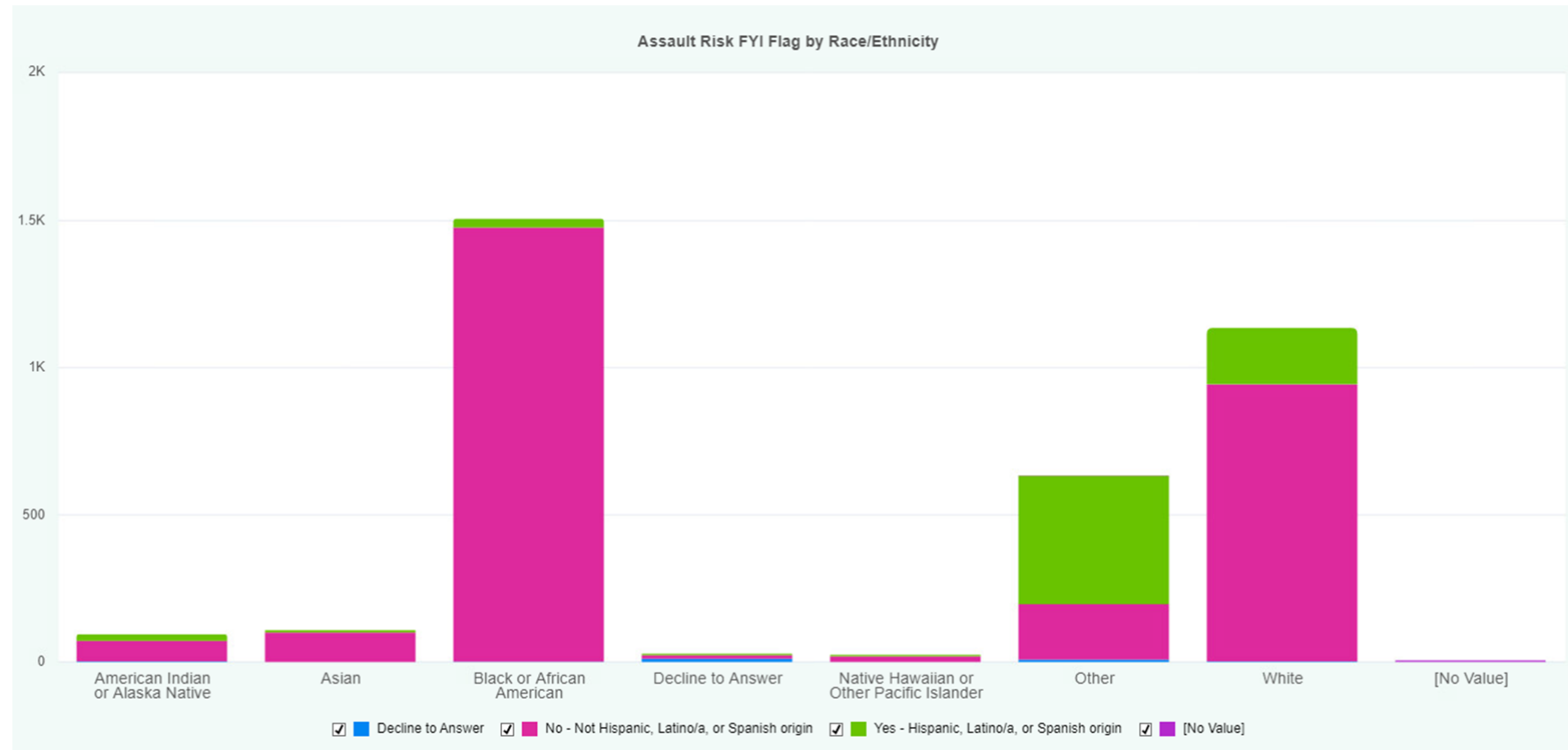
# Countermeasures – Physical Plant



- Security Assessment (ongoing)
- Weapons Detection System (complete)
- Badge Readers (upcoming)

# Countermeasures – Epic Opportunities

- FYI Assault Risk Flags (ongoing)
- Proactive Epic-Based Risk Assessment (upcoming)



# Countermeasures – Training and Policies

- Transferring Care/Outpatient (Ongoing)
- Revamping CPI Training/MVP (Complete)
- Closing the Loop on Safe Reports (Ongoing)





# QUESTIONS?