



ZUCKERBERG
SAN FRANCISCO GENERAL
Hospital and Trauma Center

Fiscal Year 2017-2018 Environment of Care Annual Report



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
- Annual Review by Environment of Care Committee.
The overall program was deemed effective.

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 (Mike Harris – Senior Industrial Hygienist)
- Medical Equipment Management (Jose Sanchez – Director of Biomedical Engineering)
- Safety Management (Ed Ochi – 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 take action 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 EOC-related 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),
 - Patient Safety (Tom Holton), and
 - Pharmaceutical Services (Julie Russell)

Also Supporting EOC Activities Are:

- Annette Munoz, Security
- Cheryl Kalson, Regulatory Affairs (*Retired*)
- Eunice Santiago, Biomedical Engineering
- Gemma Cohen, Bloodborne Pathogen/Safe Device Committee
- Jessica Galens, Pharmaceutical Services
- Lalu Bourey, Quality Management / Regulatory Affairs
- Louis Moreno, Environmental Services
- Manuel Catam, Patient Safety
- Mariel Lontoc, Infection Prevention & Control
- Priyanka Karki, Dept. of Education & Training
- Reyland Manatan, Environmental Services
- Sandra Ladley, Quality Management
- Vilma Barrera, Infection Prevention & Control

Highlights and Findings by Chapter

Emergency Management

- Program Objectives: Met.
- Effectiveness: Program found to be effective
- Goals and Opportunities for 2018-2019 include:
 - Decreasing Everbridge “undeliverable” messages to <1%;
 - Train SFSD, additional AODs and Operators in sending Everbridge Emergency Notifications; and
 - Improve HICS Basics and FEMA ICS course completion by Managers and Supervisors to 90%.

Highlights and Findings by Chapter

Fire Life Safety

- Program Objectives: Partially Met (exceeded goal for false fire alarms).
- Effectiveness: Program found to be effective
- Goals and Opportunities for Improvement in FY 2018-19 include:
 - Monitor and manage false fire alarms for a quality and safe care experience in Bldg 25. This can be accomplished through staff education, training, and engagement.
 - Monitor on-going construction projects on the ZSFG Campus. File the appropriate Risk Assessments for a quality, and safe care experience.
 - Continue planning and implementing fire alarm upgrade funded by the 2016 bond.
 - Continue training hospital staff on safety equipment, the fire plan, and fire life safety systems in Bldg 25.
 - Engage staff and contractors to implement projects funded by the 2016 bond measure.

Highlights and Findings by Chapter

Hazardous Materials & Waste Management

- Summary: In FY2017-2018, we were able to reduce weekly pharmaceutical waste disposal costs by 20%, enhance our hazardous materials spill response procedures, and select a less hazardous epoxy flooring to utilize on ZSFG capital projects.
- Program Objectives: Met
- Effectiveness: Program found to be effective
- Goals and Opportunities for Improvement in FY 2018-19 include:
 - A 5% reduction in pharmaceutical waste costs.
 - Conduct a study of eyewash water quality to determine the efficacy of monthly flushing.
 - Reduce or eliminate exposure to a hazardous material currently used on campus.

Highlights and Findings by Chapter

Medical Equipment Management

- Summary: During FY17-18, the Biomedical Engineering Department utilized focused to help providing a safe environment for patient care. Below are the activities that helped support this effort:
 - Implementation of Universal Medical Device Nomenclature System (UMDNS) for 11,000 pieces of medical equipment.
 - Implementation of standardized preventive maintenance procedures from ECRI for 53 device types.
 - Medical device cyber security assessment performed on the medical devices in our inventory. We updated 1,200 medical device records with their relevant IT information.
- Program Objectives: Met.
- Effectiveness: Program found to be effective
- Goals and Opportunities for Improvement in FY 2018-19 include:
 - Form a collaboration group with the nursing department to look at training needs based on reported issues to Biomed.

Highlights and Findings by Chapter

Safety Management

- Summary: Injury reduction initiatives, particularly those targeting sharps injuries / blood & body fluid exposures and patient handling (musculoskeletal) injuries have started, but are not reflected in staff injury rates yet.
- Program Objectives: “Met”, “Partially Met”, and “Not Met”. “Partial Met” and “Not Met” Objectives reviewed by EOC and determined scope and priority changes justify objectives not being met.
- Effectiveness: Program found to be effective
- Goals and Opportunities for Improvement in FY 2018-19 include:
 - Continue to identify and develop countermeasures for activities and areas where significant numbers of staff injuries occur.
 - Working with the ZSFG Capital Projects, Facilities, and Infection Control, develop methods to more effectively review and control hazards posed by construction activities performed in close proximity to patients, staff, and visitors.
 - Working with Human Resources and Hospital Leadership, develop plan for both stabilizing the Ergonomics Program and expand capabilities of Environmental Health & Safety.

Highlights and Findings by Chapter

Utility Systems Management

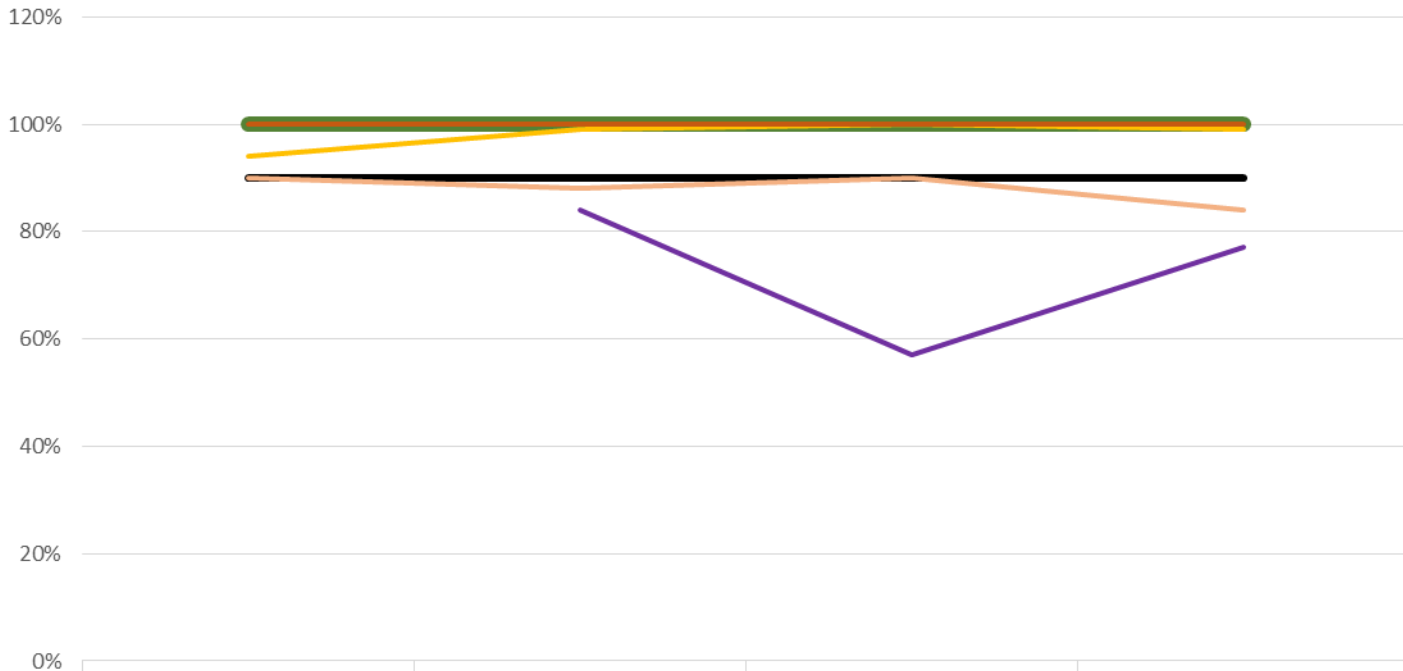
- Program Objectives: All Met
- Effectiveness: Program found to be effective
- Goals and Opportunities for Improvement in FY 2018-19 include:
 - Implement the chiller replacement project in Bldg 2.
 - Implement the cooling tower replacement project in Bldg 2.
 - Further develop with the assistance of the project management team the replacement project for the main switchgear, and electrical distribution system in Bldg 5.
 - 2 sections of Bldg 5 roofing were replaced in FY 2017-2018. Replace another section on Bldg 5 in FY 2018-2019.

Highlights and Findings by Chapter

Security Management

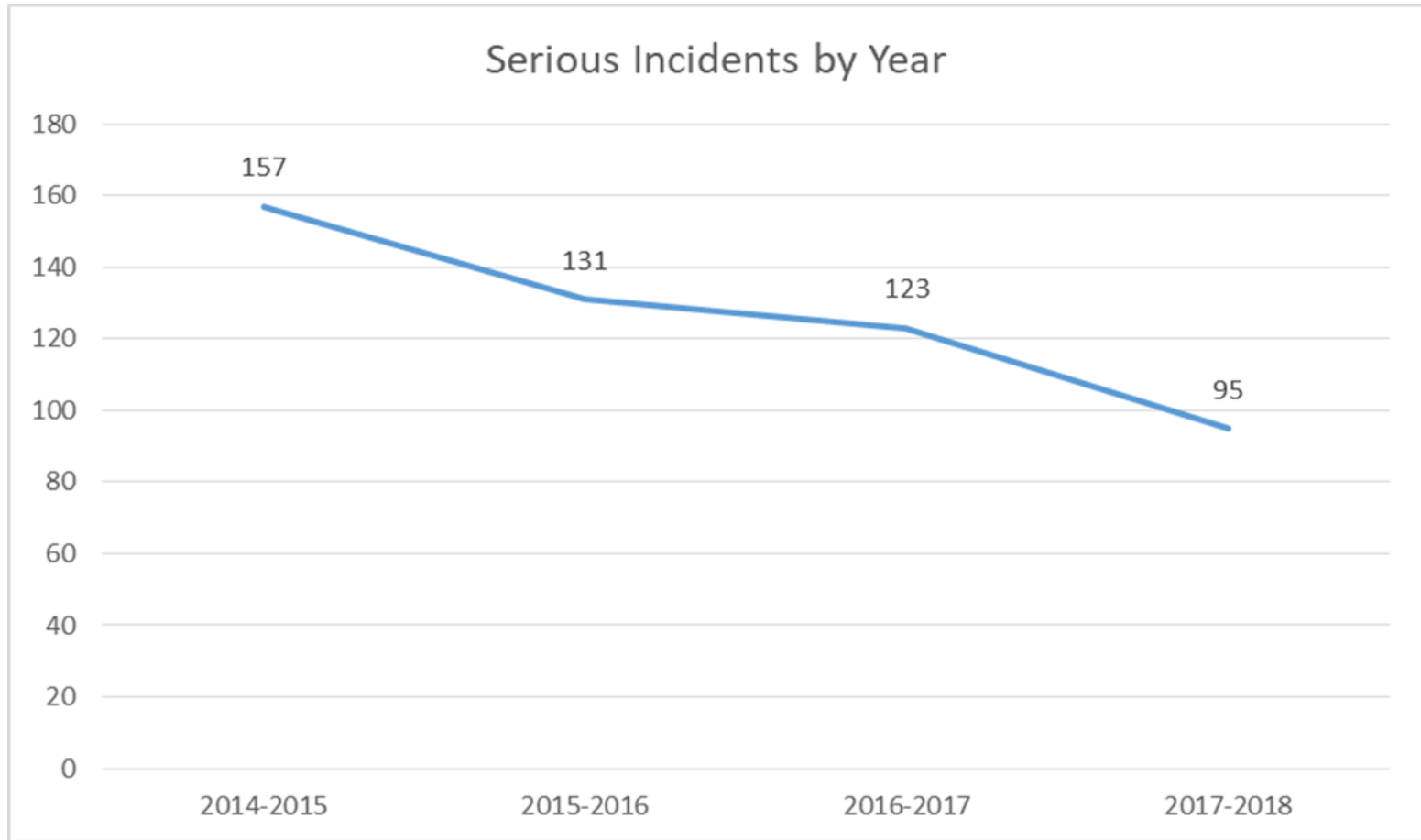
- Accomplishments: The 2017-2018 Security Program was successful in accomplishing 5-milestones in assuring the provision of a safe, accessible, and secure environment for staff, patients, and visitors, which included the following:
 - Installation of electronic security devices to monitor, and alarm all Building 5 stairwell exits.
 - Confiscation of 3,446 weapons and contraband through ED weapons screening
 - Responded to 19,150 calls for patient/medical assist, patient standby, and patient restraint/support incidents
 - Exceeded the overall performance target for Code Green Response, Electronic Security System Functionality, and SFDPH and SFSD MOU Compliance
 - Decrease in reported serious incident crimes by 23% from 2016-2017
- Program Objectives: All program objectives were met.
- Effectiveness: The functional effectiveness of the 2017-2018 Security Management Plan was reviewed and found to be effective. The 2017-2018 performance exceeded that of 2016-2017 in three of five performance metrics.
- Goals and Opportunities for Improvement in FY 2018-19:
 - Goals will remain unchanged in 2018-2019.

Performance Metrics

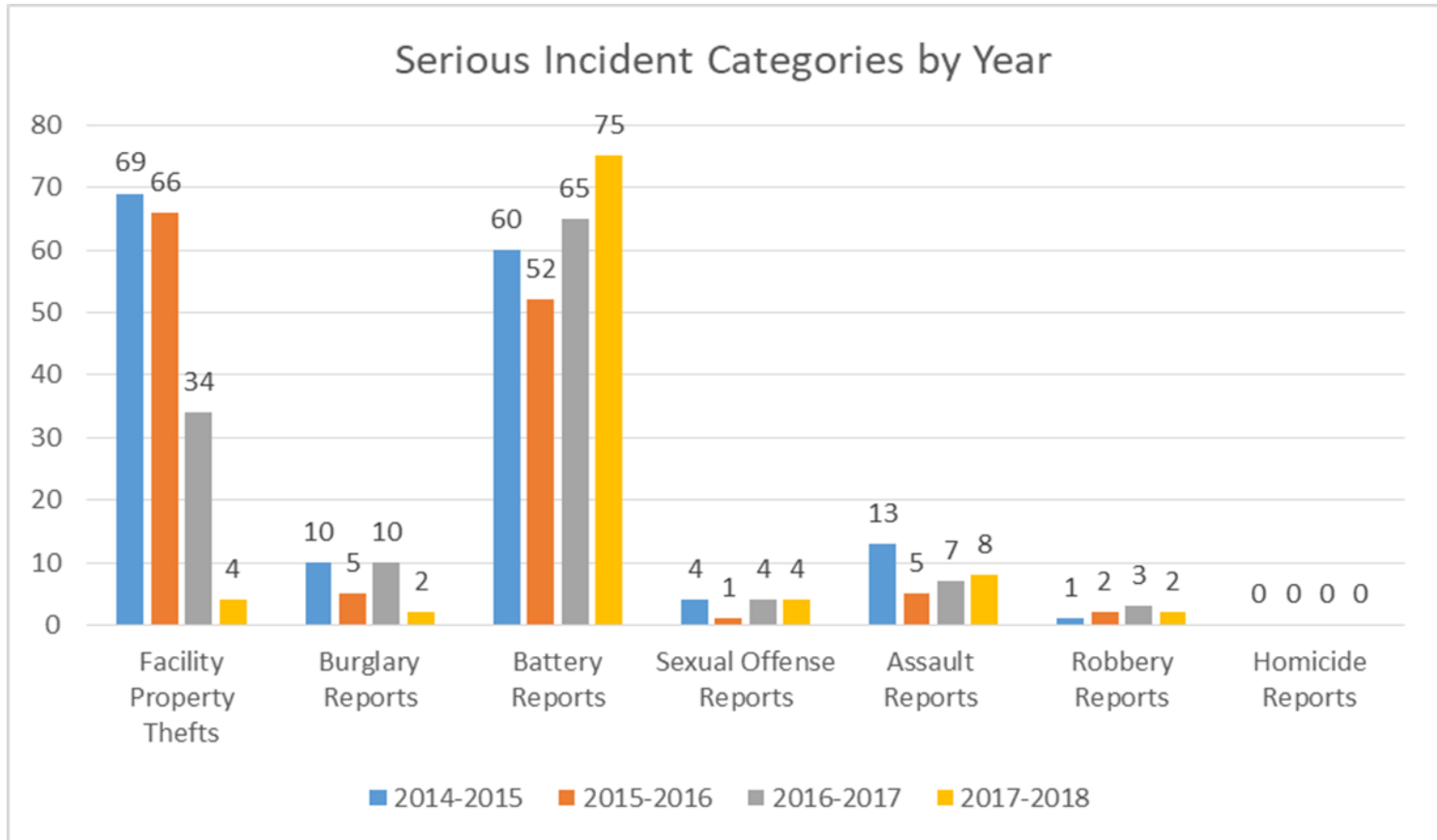


	Q1	Q2	Q3	Q4
Target	90%	90%	90%	90%
Code Green Response	100%	100%	100%	100%
Customer Satisfaction		84%	57%	77%
Electronic Security	94%	99%	100%	99%
MOU Compliance	100%	100%	100%	100%
Code Pink	90%	88%	90%	84%

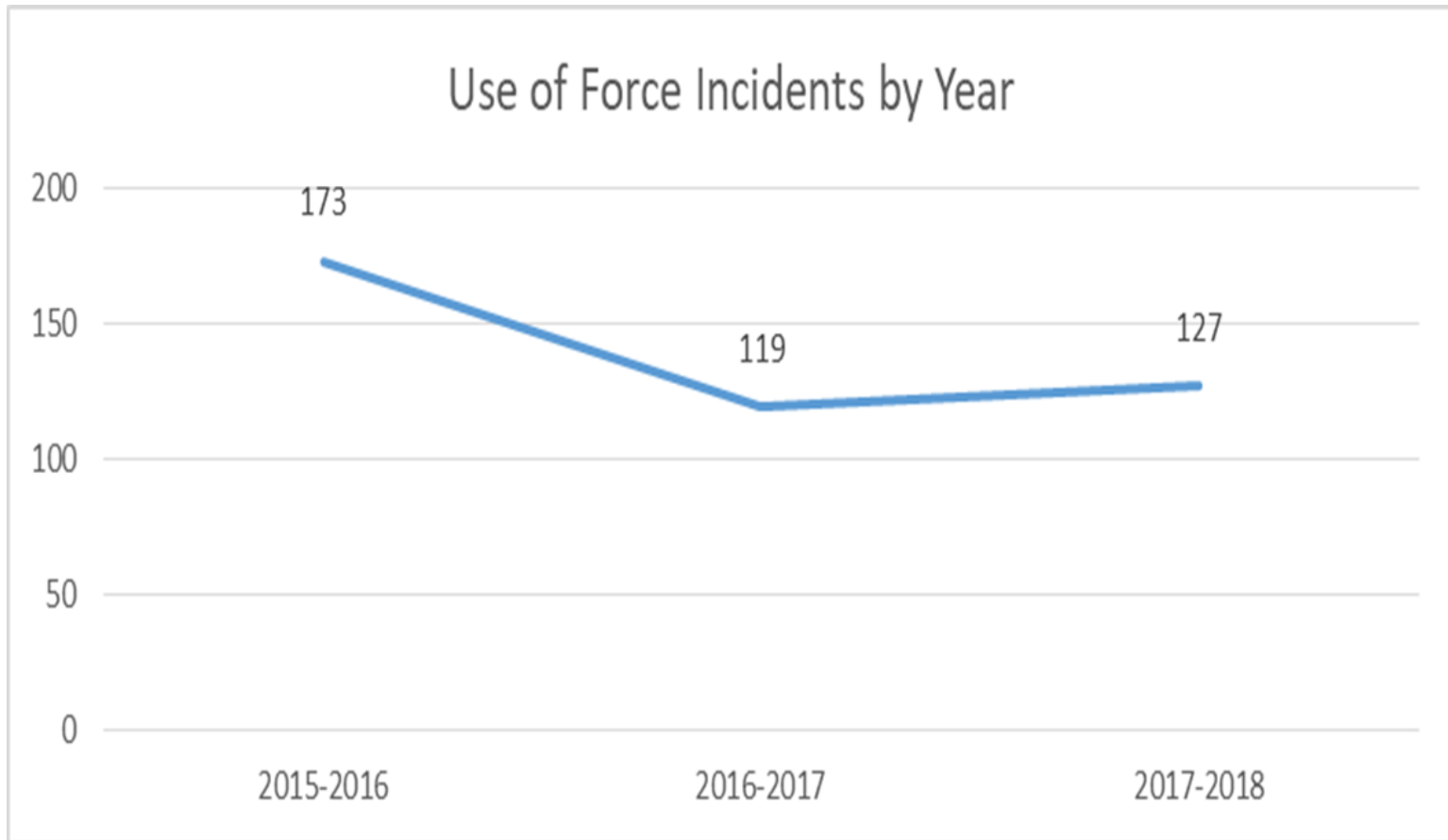
Serious Incidents by Year



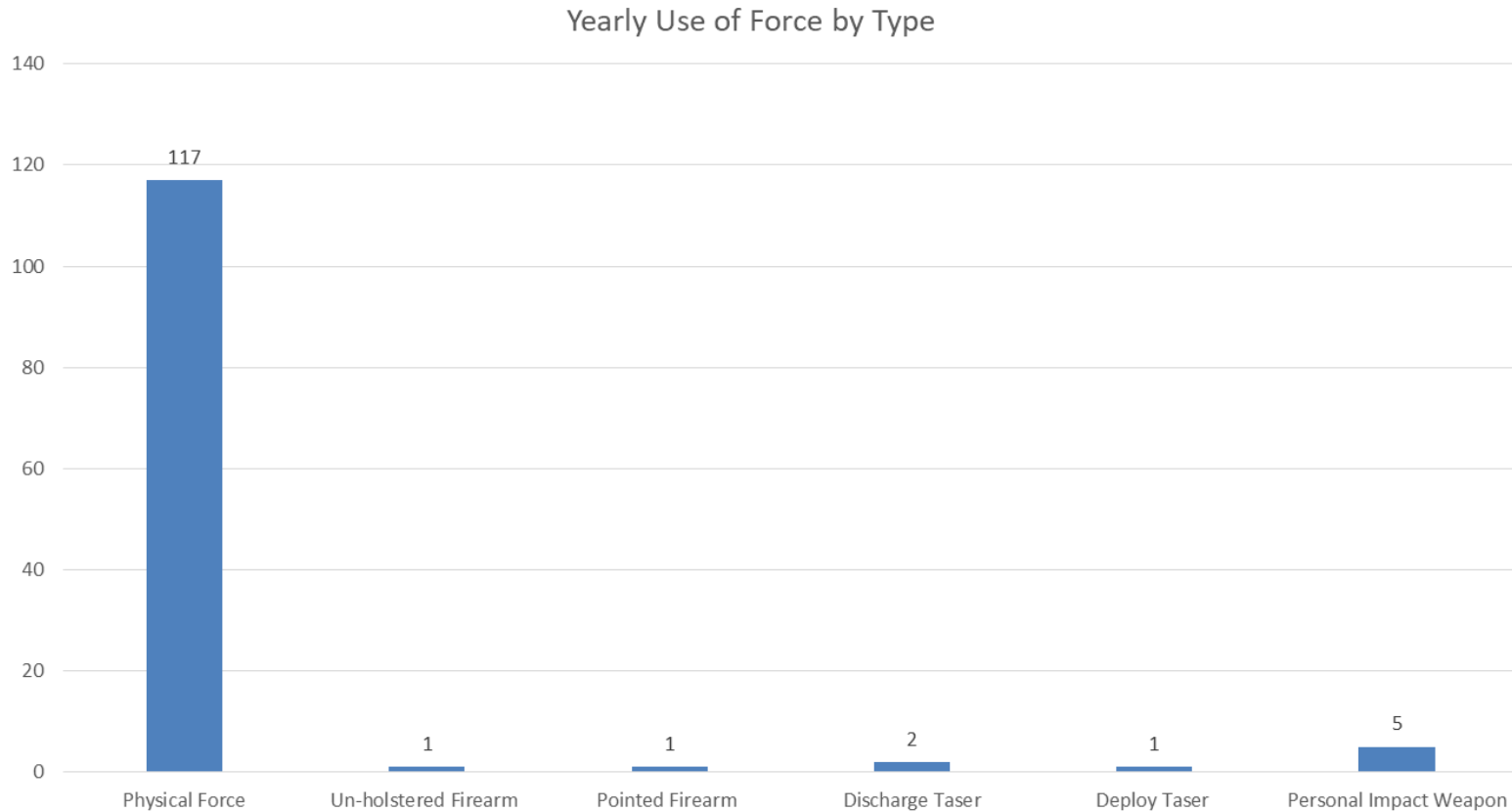
Serious Incident Categories by Year



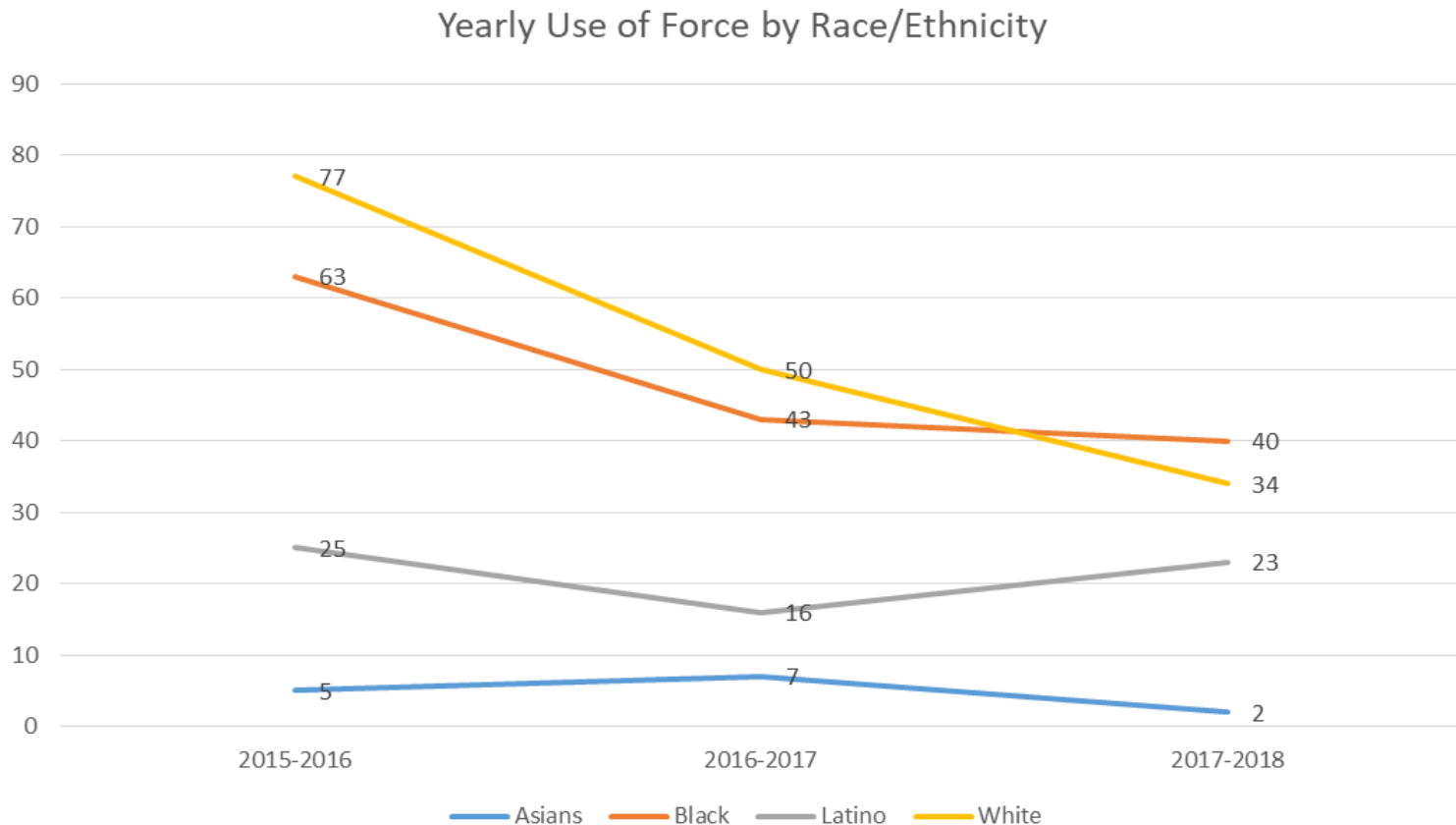
Use of Force by Year



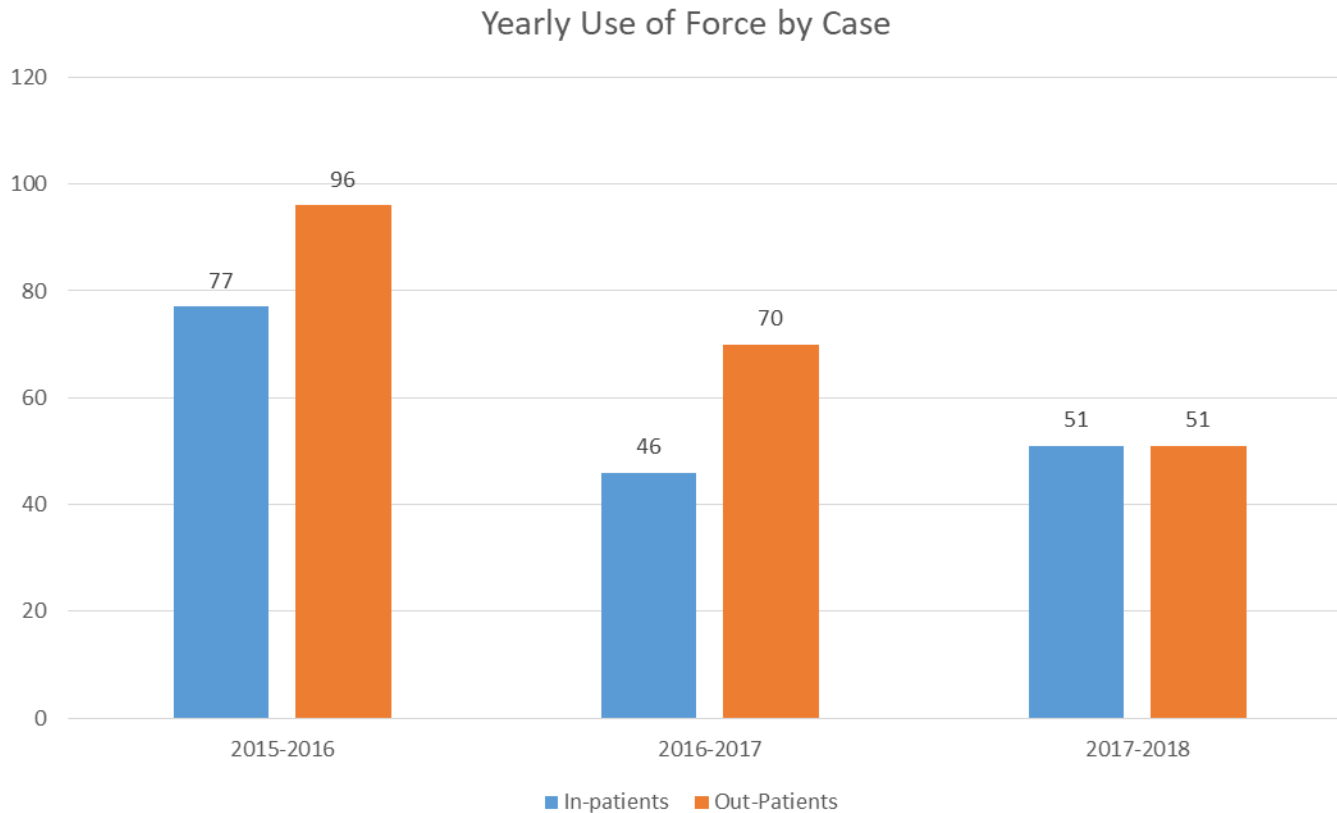
Use of Force by Type



Use of Force by Race/Ethnicity



Use of Force by Case



Use of Force by Location

