

Appendix A

Zuckerberg San Francisco General Hospital and Trauma Center

Department of Anatomic Pathology

2020 Scope of Service

Summary of Changes:

Page 2, Section II Patients: Specimen and test volumes made current.

Page 4, Section IV Care Providers: Titles made current.

Page 6, Section V Educational Requirements: Annual training made current.

Page 12, Section VIII Quality Improvement: Deleted 1 metric due to project completion.

Page 16, Section IX Accountability, Responsibility and Authority: Updated Org Chart

ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL AND TRAUMA CENTER

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| Department: UNIVERSITY OF CALIFORNIA, SAN FRANCISCO – ANATOMIC PATHOLOGY | Effective Date: 7/30/2020 | Page 1 of 17 |
| Section: DEPARTMENT ADMINISTRATIVE POLICIES | Policy Number: 1.2 | |
| Title: SCOPE OF SERVICE | Reviewed/Revised on: 7/30/2020 | |

SECTION I.2: SCOPE OF SERVICE

- I. General Statement**
- II. Patients**
- III. Support Services**
- IV. Care Providers**
- V. Educational Requirements**
- VI. Standards and Guidelines**
- VII. Staffing**
- VIII. Quality Improvement**
- IX. Accountability, Responsibility and Authority**

I. GENERAL STATEMENT

VISION: The Pathology Department seeks to provide the highest quality service to the citizens and visitors of the City and County of San Francisco. We serve a broad range of patients and services at ZSFG, including the Emergency Department, Operating Room, hospital and community-based primary care clinics, and specialty clinics. We also serve Laguna Honda Hospital, Community Health Centers, Community Consortium Clinics, and other DPH manage care-contracted partners. The department provides a vital teaching function as part of the Medical School of the University of California, San Francisco.

MISSION: The Department of Pathology at ZSFG aspires to be a leading pathology department based at a public hospital. The mission of the Department of Pathology at ZSFG is serving our patients, students and community through our commitment to:

- Delivering state of the art diagnostic services to our patients
- Providing outstanding education for our students
- Developing innovative research programs with the hope that new knowledge will yield more accurate diagnoses and improved therapies
- To support the clinical, educational and research missions of our ZSFG and UCSF colleagues

GOALS: The specific goals of the Pathology Department are the following:

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UPDATED BY: Mark Weinstein

ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL AND TRAUMA CENTER

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- To provide a wide range of pathology services in an accurate, timely and cost-effective manner.
- To facilitate completion of complex diagnostic tests not available at ZSFG through the use of outside diagnostic laboratories.
- To seek consultative reviews from outside experts as needed to establish and confirm accurate diagnoses.
- To maintain patient confidentiality and information security.
- To seamlessly integrate pathology reports into the electronic patient record.

HOURS OF OPERATION:

- Department is open: Monday to Friday 8:00AM to 5:00PM.
- On call consultation: Available 24 hours a day, 7 days a week.
- Fine needle aspiration services: Available Monday to Friday, 9:00AM-4:00PM.
- Morgue is staffed: Monday- Friday, 8:00AM to 8:00PM, Saturday and Sunday, 9:00AM to 4:00PM. After hours morgue activities can be arranged with the AOD.

II. PATIENTS:

Anatomic Pathology provides the following services to patients of all age groups and cultures.

| Service | Explanation | Approximate Annual Volumes: |
|---------------------------|---|--|
| Cytopathology | Gynecologic specimens (PAP smears), non-gynecologic specimens such as sputum or body fluid samples and fine needle aspirations (FNA's). | 6,840 gynecologic specimens received ; 600 non-gynecologic specimens received; 730 FNA procedures received and with a department pathologist present or performing the FNA procedure |
| Surgical Pathology | Specimens range from large multipart specimens received from surgery to small biopsies performed in clinical settings. | 8,350 surgical specimens received including 300 intraoperative frozen section consultations requiring a pathologist present in the OR |

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| Autopsy Pathology | Post-mortem examination. | 25 post-mortem examinations are performed annually. |
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III. SUPPORT SERVICES

To support the diagnostic process, Anatomic Pathology provides the following:

| Type | Explanation | Approximate Annual Volumes |
|--------------------|--|--|
| Special Procedures | Immunocytochemistry, special stains and electron microscopy. Special procedures are applied to selected cases in order to provide more accurate diagnoses. | 5,000 immunocytochemistry, 2,000 special stains; 40 electron microscopy; 150 flow cytometry and 250 molecular biology assays performed (last 3 categories performed at outside reference laboratories). Immunohistochemistry and special stains are completed within 1-working day or notification will be made to the ordering pathologist. Flow cytometry is completed within 72 hours of being submitted. Turnaround times for molecular tests and electron microscopy varies. |
| Consultation | Surgical inter-operative consultations (frozen section diagnosis), neuropathology, immunopathology, hematopathology, dermatopathology, and | Consultations are performed as needed. Intra-operative consultations are completed within 45 |

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| | nephropathology. | minutes of receiving notification the specimen is ready for examination. |
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IV. CARE PROVIDERS

Faculty

Chief of Service (Medical Director), Professor in Residence
Associate Professor of Clinical Pathology
Assistant Clinical Professor of Pathology
Clinical Instructor

Staff

Manager (1)
Cytotechnologists (2)
Hospital Laboratory Technician 1 (5)
Hospital Laboratory Technician 2 (1)
Histotechnologists (5)
Histotechnologist Supervisor IV (1)
Pathologists' Assistant (1)
Senior Morgue Attendant (1)
Morgue Attendants, Part-time (5)

Trainees

Cytopathology Fellow (1)
Pathology Residents (3)

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V. Educational Requirements

Chief of Service:

Board certification by American Board of Pathology, and meets the continuing medical education guidelines established by hospital policy.

Pathologists:

Certified or eligible for certification by American Board of Pathology, and meets the continuing medical education guidelines established by hospital policy.

Cytotechnologists:

1. Twelve months training in a cytotechnology training program accredited by the Committee on Allied Health Education Accreditation of American Medical Association.
2. Certified in cytotechnology by the Board of Registry of American Society of Pathologists, International Academy of Cytology, or by some agency acceptable to the Laboratory Accreditation Committee and meets the continuing medical education requirement of the certifying organization.
3. Licensed by State of California and meets required continuing medical education requirements.

Histotechnologists:

1. Two years of college coursework with an emphasis on biology, chemistry and mathematics.
2. One year of laboratory experience.

Morgue Attendants:

A degree in mortuary science or the equivalent training in a supervised setting.

Trainees:

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1. Pathology residents: physicians in the UCSF Department of Pathology Postgraduate Pathology training program.
2. Cytopathology fellows: physicians in the UCSF Department of Pathology Fellowship program.

Hospital Laboratory Assistants

Educational requirements vary according to position.

All Staff:

Receive ZSFG and department specific orientation and complete required annual on line Halogen training.

Required annual training and orientation:

| Course Number | Topic Area | Non-Clinical | Clinical Other | Provider | Nursing | Courtesy | Travelers | Students | Notes |
|---------------|--|--------------|----------------|----------|---------|----------|-----------|----------|----------------------------|
| DPH9 2000 | 2020 Core Course - All Staff: | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | Assigned to all ZSFG Staff |
| | • Bloodborne Pathogens | | | | | | | | |
| | • Emergency Management and Disaster Preparedness | | | | | | | | |
| | • Employee Health and Safety Training | | | | | | | | |
| | • Hazardous Communications | | | | | | | | |
| | • Identifying and Preventing Abuse | | | | | | | | |
| | • Infection Control | | | | | | | | |
| | • Workplace Violence Prevention | | | | | | | | |

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| Course Number | Topic Area | Non-Clinical | Clinical Other | Provider | Nursing | Courtesy | Travelers | Students | Notes |
|---------------|--|--------------|----------------|----------|---------|----------|-----------|----------|---|
| DPH9 2001 | 2020 Core Modules – Clinical Staff | | ✓ | ✓ | ✓ | ✓ | ✓ | | Assigned to All ZSFG Clinical Staff |
| | • National Patient Safety Goals - Clinical | | | | | | | | |
| | • Stroke Education - Clinical | | | | | | | | |
| | • Traumatic Brain Injury | | | | | | | | |
| DPH9 2002 | 2020 Core Modules – Non-Clinical Staff | ✓ | | | | | | ✓ | Assigned to All ZSFG Non-Staff |
| | • National Patient Safety Goals – Non-Clinical | | | | | | | | |
| | • Stroke Education – Non-Clinical | | | | | | | | |
| DPH9 2003 | 2020 O.R. Modules – Clinical Staff: | | | | ✓ | | | | Assigned to Nursing Staff working in the Operating Room. |
| | • Surgical Site Improvement Project | | | | | | | | |
| | • Transfusion Review | | | | | | | | |
| DPH9 2004 | EMTALA | | | ✓ | ✓ | | | | Assigned to providers and nursing staff in Emergency, Psych Emergency, Labor & Delivery, Pediatrics, & Urgent Care. |
| DPH9 2005 | 2020 Inpatient Modules – Clinical Staff: | | | | ✓ | | ✓ | | Assigned to inpatient nursing staff: Med/Surg, |
| | • Preventing Catheter Infections | | | | | | | | |

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| Course Number | Topic Area | Non-Clinical | Clinical Other | Provider | Nursing | Courtesy | Travelers | Students | Notes |
|---------------|--|--------------|----------------|----------|---------|----------|-----------|----------|--|
| | <ul style="list-style-type: none"> Radiation Safety Awareness | | | | | | | | Surgery and ICU |
| DPH9 2006 | Restraints Training | | | ✓ | ✓ | ✓ | ✓ | | Assigned to Providers and Nursing staff working in the ED, Med/Surg, Psych, ICU and PES |
| DPH9 2007 | MRI Safety | ✓ | | | ✓ | | ✓ | | Assigned to Engineering staff, OR staff, EVS, All inpatient Nursing staff, ED Staff, Sheriff department, Radiology staff, Anesthesia (all CRNAs, assistants and anesthesiologists) |
| DPH9 2008 | 2020 SF Learning Users Satisfaction Survey | ✓ | ✓ | ✓ | ✓ | | | | Optional user satisfaction survey assigned to all users. |

VI. STANDARDS AND GUIDELINES

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The following regulatory and professional organization standards guide the ZSFG Anatomic Pathology's departmental practice:

- Hospital and departmental policies, procedures and clinical guidelines.
- CLIA laboratory standards
- Joint Commission Standards
- College of American Pathologists standards and guidelines
- Association of Directors of Anatomic and Surgical Pathology

VII. STAFFING

A. Core staffing:

| Provider Type | Days Mon.-Fri. | Evenings Mon.-Fri. | Weekends |
|-----------------------------------|---|-------------------------------|-------------------------------|
| Chief of Service | 1 | On Call | On Call |
| Pathologists | 2 (Note: Staffing requires pathologist coverage for surgical and cytology services) | 1 On Call | 1 On Call |
| Manager | 1 | 1 On Call | 1 On Call |
| Cytotechnologist | 2 | | |
| Hospital Laboratory Technician I | 5 | | |
| Histotechnologist | 6 | | |
| Pathologists' Assistant | 1 | | |
| Hospital Laboratory Technician II | 1 | | |
| Morgue Attendants | 1 from 7:30 A.M. to 4:00 P.M. | 1 from 4:00 P.M. to 8:00 P.M. | 1 from 9:00 A.M. to 4:00 P.M. |

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B. Augmented staffing:

Pathologists Call Coverage

The regular laboratory hours are Monday through Friday, 6:00 a.m. to 5:00 p.m. Anatomic pathology resident and attending pathologists are on call at all times for preparation and interpretation of frozen sections and for handling specimens requiring immediate attention.

Contract workers:

Temporary staff needed to cover extended absences (Ex: a disability leave in excess of two months) may be contracted through the employment agency (Aerotek). Staff on boarding of contracted employment agency staff occurs through UCSF Pathology.

Contracted services:

A complete disruption of available staff or workplace (Example: strike or physical damage to the lab) will require contracting histology and cytology services to outside agencies. This is arranged through: Peninsula Pathology or the UCCSF Pathology Histology Laboratory.

C. Minimum staffing for disaster and/or work stoppage

| Provider Type | Required | Duties |
|---------------|----------|--|
| Pathologists | 1 | Diagnostic review, reporting and case triage. |
| Manager | 1 | Department contact, morgue backup support, technical backup. |

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| Cytotechnologist | 1 | Receive, process and screen cases. |
| Histotechnologist | 3 | Specimen receiving, general histology and immunocytochemistry testing |
| Morgue | 1 | Supervise morgue operations |

VIII. Quality Improvement

The Anatomic Pathology Clinical Service is committed to the maintenance of the highest standards of practice and dedicated to the continued quality improvement efforts. Performance Improvement and Patient Safety for the Anatomic Pathology Clinical Service includes ongoing monitoring and evaluation of the quality as it relates to patient care. The goal is to identify and resolve problems within the Clinical Service that impact patient care.

The Chief of Anatomic Pathology is responsible for the quality of service provided by the clinical service and its impact on patient care. The Chief of Anatomic Pathology reviews reports of performance improvement and patient safety activities in the clinical service or delegates responsibility for formulating, monitoring, reporting, and communicating PIPS projects to pathology attending staff. Performance Improvement and Patient Safety activities are discussed at the Anatomic Pathology monthly meetings. A quarterly Tissue Committee report is prepared and presented to the Hospital PIPS Committee. A Departmental Report is presented to Hospital PIPS Committee annually.

A full description of the Anatomic Pathology Clinical Service PIPS plan is provided in the document, Zuckerberg San Francisco General Hospital Anatomic Pathology Rules and Regulations PIPS Program (Appendix D). This document is revised annually.

Anatomic Pathology's Performance Improvement goals and performance measures for 2020 are:

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| Risk Area | Monitoring of Clinical Indicators |
| True North Category | Quality |
| Driver or Watch Metric | Watch metric |
| Background | <p>Anatomic Pathology monitors a large set of clinical indicators to determine strengths and weaknesses in departmental practices as they relate to patient care activities. These are ongoing monitors that are reported annually to the ZSFG Institutional PIPs Committee and discussed regularly in the department's monthly PIP meeting.</p> <p>These indicators include turnaround time for result reporting (all cases), timely reporting of critical value diagnosis to treating physicians (cases that meet critical value criteria), correlation of previous specimens with subsequent specimens (cytologic-surgical correlation) and preliminary results with final results (frozen section diagnosis versus final diagnosis, provisional autopsy report versus final autopsy report) .</p> |
| Problem Statement | Each patient case sent to pathology involves the work of multiple pathology department technical and medical staff. Data collection and analysis combined with a documented review is the only way to determine the success or weakness in the department's clinical practice. |
| Target | Each clinical indicator has a set range of acceptable performance (reference Anatomic Pathology's Rules and Regulations, Appendix D for ranges). Medical staff must be in compliance with these ranges to successfully meet their Ongoing Professional Performance Evaluation (OPPE) reviewed and approved by the department's Medical Director. The department must meet these indicators range of acceptable performance. |
| Metric/Target Details | <p>Turnaround times for Surgical and Cytology (FNA and non-Gyn): 60% cases complete within 5 days)</p> <p>Turnaround times for Gyn Cytology (PAP): 60% cases complete within 20 days; 100% cases complete within 20 days</p> <p>Turnaround times for Provisional Autopsy Reporting (PAD): 100% cases complete within 3 days</p> <p>Turnaround times for Final Autopsy Reporting (FAD): 50% cases complete within 30 days; 100% complete within 60 days</p> |

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| | <p>Critical Value Reporting reviews all cases meeting the criteria of critical values and the number of cases where direct contact reporting was documented in the pathology report. Our goal is 100% compliance.</p> <p>Cytology-Surgical Correlations: <10% discrepancy</p> <p>Frozen section versus Final Correlations: <3% discrepancy)</p> <p>FAD versus PAD Correlations: <10% discrepancy</p> |
| Measure definitions | <p>Measures determined by review of computer generated turnaround time reports or an analytic case review by a pathologist. Findings are aggregated to provide a department level indicator and are separated by pathologist as an indicator of individual performance. Performance ranges for the department and for the individual pathologist are determined by the medical director. Falling outside the determined range results in documenting this to the individual pathologist and or making changes to departmental practice.</p> |

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| Risk Area | Improving Diagnostic Accuracy |
| True North Category | Quality and Safety |
| Driver or Watch Metric | Driver Metric |
| Background | Diagnostic pathology errors can be reduced ~ 50% by obtaining one or more opinions. |
| Problem Statement | Obtaining second opinions is difficult because it delays work flow and there is a culture that does not encourage or reward second opinions. |
| Target | <p>Establish the utility of consensus conference as a tool to improve patient safety by reducing diagnostic error, as a skills development tool for faculty by reviewing challenging cases and analytic errors.</p> <p>2020 Target: Maintain consensus conference compliance to 90%.</p> <p>2020 Target: Assess and ensure satisfaction with consensus conference</p> <p>2020 Target: Reducing errors in pathology reports as reflected in analytical errors (as reflected in changes to final diagnosis by report amendments).</p> |
| Metric/Target | 1. Conferences 2X/week, excluding holidays. 90% compliance |

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| Details | <ul style="list-style-type: none"> goal. 2. Faculty survey for satisfaction. 3. Changes in reports (amendments, where there is a change in final diagnosis. |
| Measure definitions | <ul style="list-style-type: none"> 1. Annual tracking of consensus conferences held. 2. Annual faculty survey for consensus conference satisfaction. 3. Review of changes to final diagnosis through the amendment process. |

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| Risk Area | Reference lab costs in Anatomic Pathology |
| True North Category | Financial Stewardship |
| Driver or Watch Metric | Watch metric |
| Background | Laboratory tests to assist with therapeutic decision making or diagnostic accuracy are a rapidly increasing cost of standard of care practice in modern medicine. Many of the requested tests are not performed at ZSFG and must be sent to the City's approved reference laboratory, ARUP. |
| Problem Statement | <p>Anatomic Pathology reviewed the last 2 years of reference laboratory costs to identify areas of rapidly increasing costs. There has been a 64% increase in 2017 over 2016</p> <p>2016 \$119,712 ARUP costs 2017 \$195,366 ARUP costs 2018 \$200,555 ARUP costs 2019 \$177,841 ARUP costs</p> |
| Target | Four years of data was downloaded from ARUP and analyzed. |
| Metric/Target Details | Comparison of costs for major tests sent from our department to reference laboratories for 2016-2019. |
| Measure definitions | Watch metric with future analysis of increases in reference laboratory costs. |

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IX. ACCOUNTABILITY, RESPONSIBILITY AND AUTHORITY

The **Chief of Pathology** is responsible for the supervision of direct patient care within Pathology, determines the medical services available, insures the integration of Pathology services with those of other clinical departments and with the hospital as a whole, and is responsible for the education and research functions of the medical staff. The Chief oversees the credentialing and quality assurance of the medical staff. The Chief reports to the UCSF/ZSFG Vice, Dean and the Department Chair, UCSF Pathology.

With assistance from the Chief of Pathology, the Manager is responsible for the administration and evaluation of the technical and support staff. The Manager is responsible for ongoing review of health and safety practices with the medical, technical and support staff. The Manager provides the knowledge, skill and leadership to manage the department's resources, and coordinates the department's services with other clinical departments. The Manager investigates any Unusual Occurrences and reviews findings.

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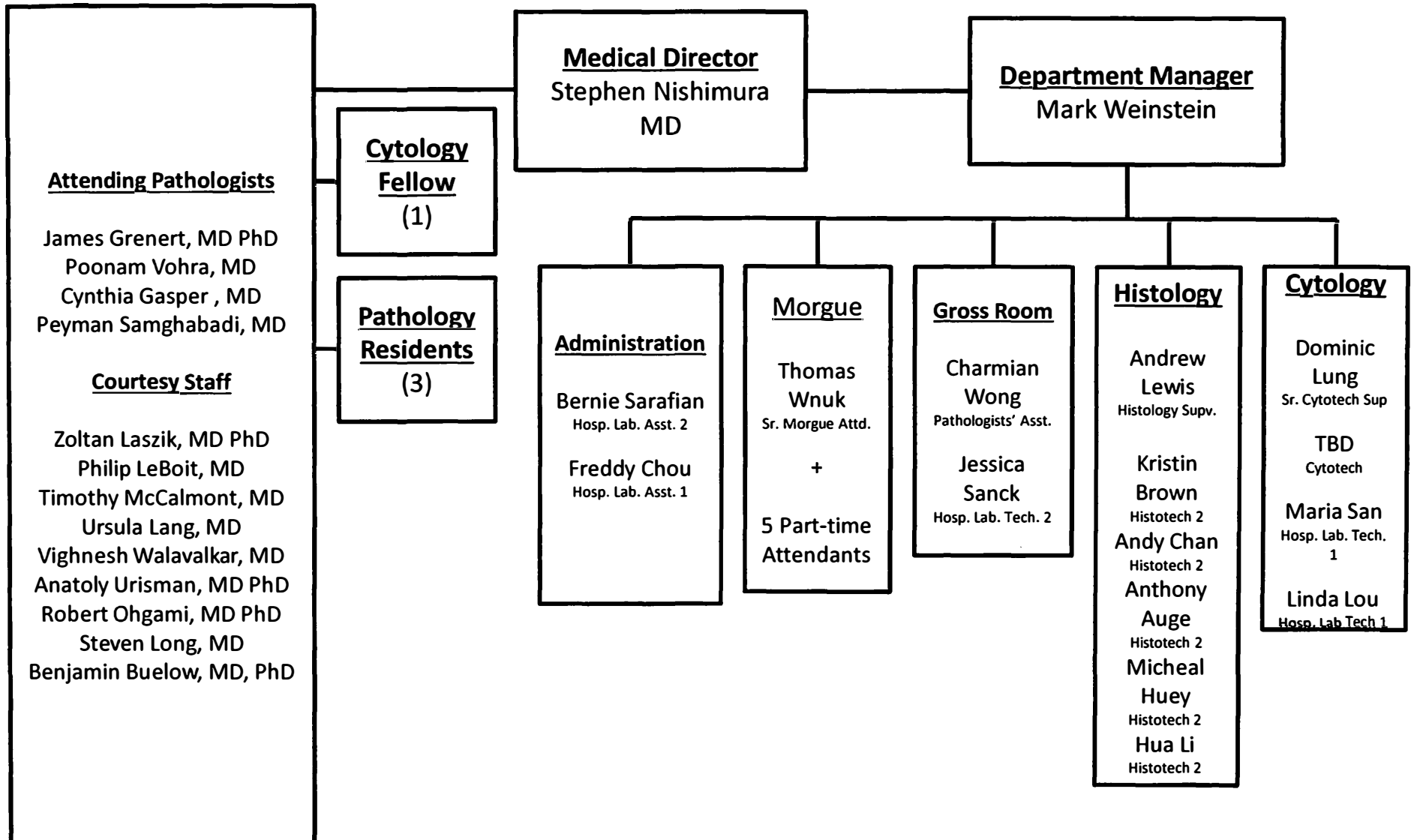
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ORGANIZATION CHART UCSF PATHOLOGY AT ZSFG EFFECTIVE 01/07/2021



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X. Dates of review and signatures of approving executive staff:

Reviewed and Approved by:

Mark Weinstein

Mark Weinstein

Department Manager, Anatomic Pathology

7/30/20

Date

[Signature]

Andrea Turner, JD, MBA, CNMT, ACHE

Acting Chief Operating Officer, ZSFG

8/3/2020

Date

[Signature]

Stephen L. Nishimura, MD

Chief of Service

Medical Director

7/30/20

Date

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