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The quarterly newsletter for ZSFG Nursing



Summer 2021 - Issue 4

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A message from our CNO:

Summer is upon us, this year feels a bit different from last year, I see more people engaging in normal activities, attending sporting events, weddings, movies, extended family gatherings etc. This make me feel more at ease yet cautious, as we are now seeing cases surging in the San Francisco, California, The United States, and The World due to the Delta variant. The fight against COVID-19 is not over. We all need to continue to do our part, follow guidelines and health orders. We know that vaccination greatly decreases the likelihood of hospitalization and death from COVID-19.

Our staff has shown resilience and commitment while treating our patients and community with dignity and respect while facing many personal challenges of your own. Staff at ZSFG are an amazing asset to all we serve! While we had staff working their hardest at ZSFG many of you were deployed, to the testing sector, COVID Command Center, Moscone Center, City College Vaccination Clinic, and INQ hotels. You were flexible, dedicated, and unwavering in your work ethic to the City and County of San Francisco, and no words will be able to show enough thanks for what you have done. As we are starting to regain normalcy, I am so very happy to welcome you back on campus to your teams and departments as you have been greatly missed.



COVID-19 Updates at ZSFG

With the re-opening of California, the Bay Area, and San Francisco, we are seeing an increase in COVID-19 cases in our communities where we live and work, including on campus at ZSFG. The more infectious Delta variant is the dominant variant in San Francisco and is contributing to the increase. Fortunately, all available COVID-19 vaccines work and continue to provide excellent protection against both COVID-19 infection and serious disease. However, the vaccines are not 100% effective.

On the ZSFG campus, the following guidelines remain in place for our protection regardless of vaccination status:

- Patients, visitors, and staff will wear masks in all buildings on campus, unless alone in a private office. Isolation masks are the only approved masks to be worn in areas where patients or the public are served. These areas include: Buildings 25, 5, 9, 4, 100 (Outpatient Dialysis only), 80, 90, 10 (Billing Office only), CHN (HR staff who meet the public).
- 2. Eating together indoors is not permitted. Staff are reminded to use designated break areas, to pay attention to physical distancing when eating or drinking, and to stagger meal schedules.
- 3. Regardless of vaccinations status, stay home when sick and continue to self-monitor for symptoms and exposures before coming to work. If you are experiencing symptoms or had an exposure to COVID-19 in the household, with intimate contacts, or high-risk settings such carpooling, traveling and spending the weekend together, please contact Employee Health Services at 628-206-4100 during business hours, leave a message if we are unavailable. Our highly trained team is here to support you.

Click here for the Employee Health Screening

Vaccination is important to protect ourselves, our families, and our communities. If you are interested in scheduling, please call Occupational Health Services by dialing 628-206-5381.



Visitor Guidelines

Please review the following information for visitor guidelines.

VISITING RESPONSIBLY

A Safe Visit with Love

General visiting hours

M-F 11:00am-8:00pm Sat/Sun 9:00am-5:00pm

ICU visiting hours

M-F 11:00am-6:00pm Sat/Sun 9:00am-5:00pm

These hours are strictly enforced unless a compassionate exception applies

Here are ways we are keeping you, our patients and caregivers safe:



You must be fully vaccinated or provide a negative COVID-19 test within 72 hours of your visit. At home test not accepted.



You must pass the health screening to visit.



Wear a ZSFG provided mask at all times. Personal face coverings are not allowed.



Gloves may not be worn into the unit.



Sanitize your hands before and after entering the patient room.



Maintain a distance of 6 feet from others around you, including the patient.

Ensuring a successful visit:

- Check in at the nurse's station.
- Limit your visit to three-hours.
- You are not permitted to stay in public spaces (i.e. hallways, lobbies or waiting rooms).
- Stay in the patient's room until you plan to leave. Once you leave the unit, the visit is over.

We are happy to support your visit with your loved one today.

Your visit is important to their healing.

Thank you for complying with our visitor requirements





DHR Vaccination Requirement

To protect the City's workforce and the public that it serves, all City employees were required to report their vaccination status to the City by July 29, 2021 (with a subsequent extension to August 12, 2021), by providing the following information:

- Whether the employee is vaccinated (yes or no)
- For employees who are vaccinated or partly vaccinated:
 - The type of vaccine obtained (Moderna, Pfizer, or Johnson & Johnson, or other vaccine received in approved clinical trials)
 - · Date of first dose vaccine;
 - Date of second vaccine for a 2-dose vaccine;
 - Declaration under penalty of perjury that they have been fully vaccinated, and
 - Upload documentation verifying proof of vaccination status. Proof of vaccination can include a copy of the CDC COVID-19 Vaccination Record Card, documentation of vaccine from the employee's healthcare provider, or documentation issued by the State of California by going to:

https://myvaccinerecord.cdph.ca.gov/

To be fully vaccinated, 14 days must have passed since an employee received the final dose of a two-shot vaccine or a dose of a one-shot vaccine. All unvaccinated employees must continue to comply with masking, testing, and other safety requirements until they are fully vaccinated and have reported and documented that status to the City consistent with this Policy. Employees who previously reported that they were unvaccinated must update their status once they are fully vaccinated. Failure to comply with the reporting requirement may result in discipline, or non-disciplinary separation from employment with the City for failure to meet the minimum qualifications of the job.

Submit your COVID-19 Vaccination Status via the SF Employee Portal (Click on the button below for quick access)

https://sfgov.org/sfc/employee-gateway



Tips for Safe Traveling:

Courtesy of Mayo Clinic https://www.mayoclinic.org/diseases-conditions/coronavirus/indepth/coronavirus-safe-travel-advice/art-20486965



In the U.S., you must wear a face mask on planes, buses, trains and other forms of public transportation, even if you are fully vaccinated. The mask must fit snugly and cover both your mouth and nose.

If you haven't had the COVID-19 vaccine, follow these steps to protect yourself and others when you travel:

- Maintain a distance of 6 feet (2 meters) between you and others as much as possible.
- · Avoid contact with anyone who is sick.
- Limit contact with frequently touched surfaces, such as handrails, elevator buttons and kiosks. If you must touch these surfaces, use hand sanitizer or wash your hands afterward.
- Wear a face mask in indoor public spaces and outdoors where there is a high risk of COVID-19 transmission, such as at a crowded event or large gathering. Further mask guidance differs depending on whether you are fully vaccinated or unvaccinated.
- · Avoid touching your eyes, nose and mouth.
- · Cover coughs and sneezes.
- Clean your hands often. It's especially important after going to the bathroom, before eating, and after coughing, sneezing or blowing your nose.
 - Wash your hands often with soap and water for at least 20 seconds.
 - If soap and water aren't available, use a hand sanitizer that contains at least
 60% alcohol. Cover all surfaces of your hands and rub your hands together until

mask on the whole time.

Air travel

Because of how air circulates and is filtered on airplanes, most viruses don't spread easily on flights. However, crowded flights make social distancing difficult. Plus, air travel involves spending time in security lines and airport terminals, which can bring you in close contact with other people.

The Transportation Security Administration (TSA) has increased cleaning and disinfecting of surfaces and equipment, including bins, at screening checkpoints. TSA has also made changes to the screening process:

- Travelers must wear masks during screening. However, TSA employees may ask travelers to adjust masks for identification purposes.
- Instead of handing boarding passes to TSA officers, travelers should place passes (paper or electronic) directly on the scanner and then hold them up for inspection.
- Each traveler may have one container of hand sanitizer up to 12 ounces (about 350 milliliters) in a carry-on bag. These containers will need to be taken out for screening.
- Personal items such as keys, wallets and phones should be placed in carry-on bags instead of bins. This reduces the handling of these items during screening.
- Food items should be transported in a plastic bag and placed in a bin for screening.
 Separating food from carry-on bags lessens the likelihood that screeners will need to open bags for inspection.

Be sure to wash your hands with soap and water for at least 20 seconds directly before and after going through screening.



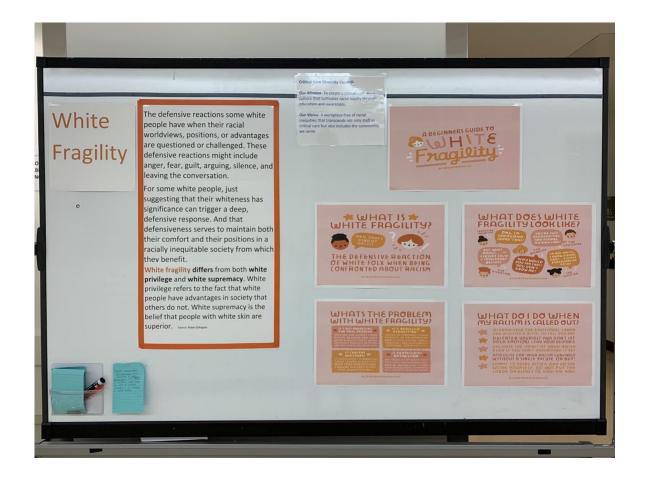
Equity Board Highlight: Critical Care:

Submitted by Christina Bloom, RN, MSOL, NEA-BC, Nursing Director, Critical Care

Critical Care is one of many departments that has created a Diversity Council and created an equity board to educate staff.

Vision of the Critical Care Diversity Council: to have a workplace free of racial inequities that transcends not only staff in critical care but also includes the community they serve.

Their equity board shown below has been featuring a list of definitions related to racism and anti-racist work for the past several months, with the goal of ensuring that we have a common language with common understanding. The current board has the last definition on it; white fragility. We will be heading into an educational timeline of racism on the board in the coming weeks.





<u>Equity Learning Series Presented by: Black/African</u> <u>American Health Initiative</u>



The BAAHI Equity Learning Series is a place for discussions about race, racism, and other topics relevant to Black/African American Health. You are invited view, read and/or listen to article/video/podcast and then meet to discuss highlights and findings from the article to determine how the findings can impact the work we do as the SFDPH. *For additional information email:BAAHI@sfdph.org*

August 19, 2021 Noon to 1:30: Race in Education with Dr. Beverly Daniel Tatum

In this conversation with Carol Jenkins, Dr. Tatum points out the importance of conversation with children on race and references a time when her son was in school and another child asked him if he was black from drinking chocolate milk. She believes that many are reluctant to talk about issues of race, and that we must begin to consider the psychological effects of racial identity development.

Click here to watch the video: Race in Education with Dr. Beverly Daniel Tatum

August 24, 2021 9:00 to 10:30 Let's Talk about Environmental Racism: How environmental justice started and where we are today

Aime Maggie talks about environmental justice and how what she has learned about how environmental racism works and how we got to this point in history. Ms. Maggie defines what environmental racism is and is not, who is most impacted and what are some strategies to combat the impacts on impacted communities.

Click here to watch the video: Let's Talk about Environmental Racism: How environmental justice started and where we are today

August 31, 2021 Noon to 1:30 Equity Currents: Topic TBD



Racial Equity Champions Program 2021-2022

San Francisco Department of Public Health, Office of Health Equity

Why we need Racial Equity Champions:

It is up to each staff person and each section to assist DPH realize our mission to protect and promote the health of all in San Francisco. To achieve our goal we must do more to advance racial equity within our department and in the communities we serve.

Although each DPH staff person is required to obtain 4 hours of equity learning per year, no one should be under the illusion that 4 hours of required equity work will be enough to transform the culture within DPH.

- Staff need time to learn in order to engage with equity work
- Advancing racial equity in DPH will require staff to be active participants in their learning and by turning their learnings into actions that will create more equitable environments in which to work and serve.
- All sections within DPH can benefit from new ideas, data, and thinking to define racial equity goals.

Structure

- Staff can apply to be a Racial Equity Champion through their supervisor and with the approval of their division director.
- Racial Equity Champions are required to invest a minimum of 5 hours of work per month.
- Equity Leads from each division assist in the coordination and development of racial equity learning and implementation goals
- · Limited to 1-year
- The number of Racial Equity Champion is determined by the Division Director and the Equity Lead of the division.
- Application released August 1, 2021 and due by August 27, 2021
- A Q&A session will be conducted Tuesday, August 24, 2021
- Sign off by Supervisor AND Director or designee (may be Equity Lead)
- Send applications to Equity@sfdph.org Orientation calls the week of August 30, 2021.

Applications are DUE by August 27, 2021 by End of Day

Click Here to Learn More and to Download the Racial Equity Champions Program Application



Meet the Medical-Surgical CPI Trainers!

Submitted by Elizabeth Adviento, BSN, RN; Clinical Nurse Educator-Medical Surgical Division

SFDPH utilizes the Crisis Prevention Institute (CPI) Nonviolent Crisis Intervention program to train our staff in decision-making skills and de-escalation techniques for responding to and managing difficult situations, disruptive behavior, and escalating events in the workplace. This evidence-based training was adopted by our organization in 2017. We have previously introduced you all to our ED and Psychiatry Trainers, now it is time to **Meet our Medical-Surgical Department CPI Certified Instructors!**



Ben has 5 years experience as a Registered Nurse on H54/56 with leadership experience as a Charge Nurse as well as Oncology and Chemotherapy. Ben provides excellent care to his patients as well as being a constant support for colleagues.

-Benjamin Schefers, RN

"At ZSFGH I have been a part of my Unit Based Leadership Team as well as the Med-Surg Practice Council and becoming a CPI instructor not only furthers my nursing career but it allows me to help contribute to my community in ways beyond my license."

-Lexi Hallgren, PCA H62/64





"I have been with ZSFG since my new grad days and have come to appreciate our diverse staff and patient populations. As a nurse, I am interested in ways to improve my nursing practice so that I can provide quality care and be a better advocate for all my patients. I believe that CPI will be a way to improve interactions between staff and patients through the use of dialogue to deescalate tense/crisis situations and minimize the use of security on campus. I appreciate the opportunity to serve, and to be a part of our organization's CPI instructors."

- Chinelo Amah, RN H66/68

"Hi all! I'm Vivian, a nurse on the 7th floor. I got involved with CPI because I wanted to expand on my role within ZSFGH. This experience has been rewarding since I got speak with you all and learning more about others experiences in our medsurg floors. My goal is to keep everyone safe!"

-Vivian Yung, RN H76/78

Selina Senel, RN





"I've worked here since I was a student nurse and I still find de-escalation challenging. Using the principles in CPI are important when serving our patients, working with colleagues, and even practicing in my personal life." Liz Adviento, RN Medsurg Clinical Education

Selina is a Medical-Surgical Oncology nurse on H54/56 and has been at ZSFG for the last 5 years. She currently works as a charge nurse leading her fellow colleagues with her experience and great communication skills. She is part of CPI to continue educating nurses on how to de-escalate difficult situations.





Wellness Corner: Breathing Exercises for Stress Relief

Submitted by: Natasha Hamilton, MPA., MS., MA. Director, Department of Care Coordination



Belly breathing

Belly breathing is easy to do and very relaxing. Try this basic exercise anytime you need to relax or relieve stress.

- 1. Sit or lie flat in a comfortable position.
- 2. Put one hand on your belly just below your ribs and the other hand on your chest.
- 3. Take a deep breath in through your nose, and let your belly push your hand out. Your chest should not move.
- 4. Breathe out through pursed lips as if you were whistling. Feel the hand on your belly go in, and use it to push all the air out.
- 5. Do this breathing 3 to 10 times. Take your time with each breath.
- 6. Notice how you feel at the end of the exercise.

After you have mastered belly breathing, you may want to try one of these more advanced breathing exercises. Try all three, and see which one works best for you:

- 4-7-8 breathing
- Roll breathing
- Morning breathing

4-7-8 breathing

This exercise also uses belly breathing to help you relax. You can do this exercise either sitting or lying down.

- 1. To start, put one hand on your belly and the other on your chest as in the belly breathing exercise.
- 2. Take a deep, slow breath from your belly, and silently count to 4 as you breathe in.
- 3. Hold your breath, and silently count from 1 to 7.
- 4. Breathe out completely as you silently count from 1 to 8. Try to get all the air out of your lungs by the time you count to 8.
- 5. Repeat 3 to 7 times or until you feel calm.
- 6. Notice how you feel at the end of the exercise.

Roll breathing helps you to develop full use of your lungs and to focus on the rhythm of your breathing. You can do it in any position. But while you are learning, it is best to lie on your back with your knees bent.

- 1. Put your left hand on your belly and your right hand on your chest. Notice how your hands move as you breathe in and out.
- 2. Practice filling your lower lungs by breathing so that your "belly" (left) hand goes up when you inhale and your "chest" (right) hand remains still. Always breathe in through your nose and breathe out through your mouth. Do this 8 to 10 times.
- 3. When you have filled and emptied your lower lungs 8 to 10 times, add the second step to your breathing: inhale first into your lower lungs as before, and then continue inhaling into your upper chest. Breathe slowly and regularly. As you do so, your right hand will rise and your left hand will fall a little as your belly falls.
- 4. As you exhale slowly through your mouth, make a quiet, whooshing sound as first your left hand and then your right hand fall. As you exhale, feel the tension leaving your body as you become more and more relaxed.
- 5. Practice breathing in and out in this way for 3 to 5 minutes. Notice that the movement of your belly and chest rises and falls like the motion of rolling waves.
- 6. Notice how you feel at the end of the exercise.

Practice roll breathing daily for several weeks until you can do it almost anywhere. You can use it as an instant relaxation tool anytime you need one.

Caution: Some people get dizzy the first few times they try roll breathing. If you begin to breathe too fast or feel lightheaded, slow your breathing. Get up slowly.

Morning breathing

Try this exercise when you first get up in the morning to relieve muscle stiffness and clear clogged breathing passages. Then use it throughout the day to relieve back tension.

- 1. From a standing position, bend forward from the waist with your knees slightly bent, letting your arms dangle close to the floor.
- 2. As you inhale slowly and deeply, return to a standing position by rolling up slowing, lifting your head last.
- 3. Hold your breath for just a few seconds in this standing position.
- 4. Exhale slowly as you return to the original position, bending forward from the waist.
- 5. Notice how you feel at the end of the exercise.



Staff Spotlight: Matthew Talmadge, MSN, FNP-BC, PHN

Many of our staff were deployed during the pandemic, here is the first hand account of Matthew Talmadge from the Emergency Department on his time in the COVID Command Center.



How long were you deployed to the COVID Command Center?

I was deployed from March 2020 thru June 2021 a total of 15 months.

What was your role prior to deployment?

· I was a staff RN in the Emergency Dept.

What role or duties were you assigned at the Command Center?

- My title was Clinical Coordinator. When I first arrived to the CCC I helped set up out ACS sites (southeast clinic, and the large ACS site in the presidio). I eventually was moved into the primary Clinical Coordinator for the Medical Branch of the CCC.
- My primary responsibilities were to help the healthcare unit leads (hospitals, SNF, Outpatient) with any clinical question they may have had. Being abreast of all the latest updated information coming from CDC, CDPH (in the form of AFL's) SFDPH (Health Orders, Directives, Memo's) and most importantly I&G updated guidance have been a big help to the unit leads especially since they are extremely busy disseminating the latest guidance and information to our Healthcare system partners. To put it simply the Clinical Coordinator role becomes a broker of information: And with their clinical experience can become and effective resource for the unit leads.

What is one thing you will not forget from your time in the Command Center?

• The great friends I made while I was there, but also the amazing talent that DPH has at its resources. So many hard working and committed people were there to make the City and County of San Francisco a Model globally. Everyone from the Mayor to our Health directors and our whole health care (first responders, Doctors, Nurses, Environmental services etc...) system made SF one of the safest and most compassionate places to be during this pandemic. I am truly proud to have served our city and our residents living and working in San Francisco.

Is there anything you wish you could have changed?

You know, the way the City responded to this crisis was truly amazing. Everything the
city did was transparent and inclusive for every single resident in the city. The
compassion showed towards our most marginalized sectors was a beacon to every
county in the Bay Area and beyond. So, there is really nothing I would like to have
changed except of course for this pandemic to end soon, and more lives could be
spared.



RN 2320 Reassignment Opportunities

The RN Reassignment Program at the Department of Public Health was created to gauge the response of current PCS 2320 RN Registered Nurses with regards to reassigning to a different unit. There are currently RN 2320 reassignment opportunities in Critical Care, Emergency, and Quality Management. Use the link below to learn more about the RN Reassignment Program.

Click here to see the current list



Barcode Medication Administration Compliance (BCMA) Rates for June 2021

Reanna Mourgos, BSN, RN, Performance Improvement Coordinator, Nursing Workforce Development, Quality & Clinical Education

Barcode medication administration was implemented with the rollout of Epic in August of 2019. Studies have shown that barcode medication administration can decrease medication errors up to 80% when utilized. It is compromised of two main steps:

- · Scanning the right patient
- · Scanning the right medication

We want to congratulate the *Emergency Department, Inpatient Dialysis, and Psychiatry* for the great work they have done to increase their compliance rates!

ZSFG has a hospital wide target of BCMA compliance of 90%. The following data table shows the compliance rate for June 2021. *If you have feedback or want to report barriers to completing barcode scanning*, please reach out to Reanna Mourgos at x6-3204 or reanna.mourgos@sfdph.org

	July 2021		
Target Compliance is 90%			
DEPARTMENT	Compliance rate when all BCMA steps completed	June 2021 Combined	% Increase/Decrease
ZSFG 4A SNF B5	97.2%	96.2%	1.00%
ZSFG 7B ACUTE PSYCHIATRIC	B5 87.3%	91.2%	-3.90%
ZSFG 7C ACUTE PSYCHIATRIC	B5 82.0%	83.4%	-1.40%
ZSFG 7L ACUTE PSYCHIATRIC	B5 87.0%	84.0%	3.00%
ZSFG EMERGENCY	49.8%	52.6%	-2.80%
ZSFG ENDOSCOPY PROCEDUR	RES 99.3%	99.1%	0.20%
ZSFG H22/25 L&D /PP MOTHE	R 90.4%	88.4%	2.00%
ZSFG H22/25 NURSERY	85.5%	73.3%	12.20%
ZSFG H24 NICU	98.5%	97.8%	0.70%
ZSFG H26 PEDIATRICS	95.7%	93.7%	2.00%
ZSFG H32/38 MEDICAL ICU	84.3%	86.0%	-1.70%
ZSFG H34/36 NEURO ICU	88.2%	82.6%	
ZSFG H42/44 MED SURG	89.6%	94.6%	
ZSFG H46/48 Overflow	N/A	N/A	N/A
ZSFG H47 DIALYSIS	92.6%	83.7%	8.90%
ZSFG H52 MED SURG FORENS	ICS 66.7%	71.4%	-4.70%
ZSFG H54/56 MED SURG	94.3%	92.6%	1.70%
ZSFG H58 MED SURG	N/A	N/A	N/A
ZSFG H62/64 MED SURG	89.9%	92.9%	-3.00%
ZSFG H66/68 MED SURG	95.3%	96.4%	-1.10%
ZSFG H76/78 MED SURG	97.0%	97.9%	
ZSFG L&D OR	80.8%	79.7%	
ZSFG PRE-OP	88.1%	86.9%	
ZSFG PACU	91.8%	91.4%	
ZSFG INFUSION CLINIC	97.9%	96.5%	
ZSFG PSYCH EMERGENCY	82.0%		
OVERALL COMPLIANCE	88.0%	87.3%	





Merjo Roca, Nurse Manager and Brent Lee,
RN for running a phenomenal COVID
Vaccine clinic! The patient flow and the
organization of having thousands of
patients pass through is exemplary of fine
leadership.

Click HERE to add input on what you would like to see in the next issue!

Have a topic you would like included? Want to contribute content for a future newsletter? An announcement or shout-out? Contact Reanna Mourgos (6-3204, reanna.mourgos@sfdph.org)

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