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MINUTES

**JOINT CONFERENCE COMMITTEE FOR
ZUCKERBERG SAN FRANCISCO GENERAL
HOSPITAL AND TRAUMA CENTER
Tuesday, February 22, 2022 3:00 p.m.
REMOTE MEETING VIA WEBEX EVENT**

1) CALL TO ORDER

Present: Commissioner Edward A. Chow, M.D., Chair
Commissioner Laurie Green, M.D.

Excused: Commissioner Susan Belinda Christian, J.D.

Staff: Susan Ehrlich MD, Adrian Smith, Dan Schwager, Jennifer Boffi,
Karen Hill, Karrie Johnson, Kim Nguyen, Lisa Winston MD, Lukejohn
Day MD, Michael Gerchow, Sue Carlisle MD, Susan Brajkovic, Terry
Dentoni, Troy Williams, Daphne Nguyen, Andrea Turner, Basil Price, Christopher Ross,
Jeff Critchfield MD. Jennifer Boffi, Leslie Safier

The meeting was called to order at 3:02pm

2) APPROVAL OF THE MINUTES OF THE JANUARY 25, 2022 ZUCKERBERG FRANCISCO GENERAL JOINT CONFERENCE COMMITTEE MEETING

Action Taken: The Committee unanimously approved the January 25, 2022 meeting minutes.

3) REGULATORY AFFAIRS REPORT

Daphne Nguyen, Director of Regulatory Affairs, presented the item.

Commissioner Comments:

Commissioner Green noted that it is a credit to the ZSFG staff that there are only a small number of incidents. Dr. Ehrlich stated that ZSFG takes each event seriously and endeavors to learn what can be done to prevent similar incidents in the future.

4) TRUE NORTH SCORECARD PRESENTATION

Chris Ross, MSIE, Strategic Planning Manager, presented the item.

Commissioner Comments:

Commissioner Green asked for clarification regarding the impact of the COVID-19 pandemic on the current diversion rate. Dr. Ehrlich stated that in general the pandemic has impacted all areas of ZSFG. She also stated that ambulance diversion has been a struggle for ZSFG. She noted that diversion levels were lower earlier in the pandemic. At a city-level, EMS is sponsoring a city-wide work group to address diversion throughout the city. Within ZSFG, focused data-driven work is being conducted in this area.

Commissioner Green asked for more information regarding the current ZSFG star ratings. Dr. Ehrlich stated that there is a growing movement to better accommodate social determinants of health since public health hospitals serve patients who are much more complex and often have additional behavioral health and substance use issues. She noted that ZSFG chooses metrics which may impact its star ratings. She added that it takes several years to see an impact on start ratings.

5) ZSFG CHIEF EXECUTIVE OFFICER'S REPORT AND EMERGENCY DEPARTMENT NEWSLETTER

Susan Ehrlich, Chief Executive Officer, presented the item.

SAFETY **1. COVID-19 - Returning Safely Together**

San Francisco, similar to the rest of California, the U.S., and the world, is in a rapidly changing environment with respect to COVID-19. The following are the latest changes and updates in our COVID-related operations; we are continually assessing these policies and practices:

Omicron Coronavirus Variant Update

The Omicron variant remains the primary variant causing disease in S.F. In response, ZSFG activated surge level red on January 18th – with 27% of our inpatients having COVID-19. At this time, the hospital is not only concerned about caring for our patients but also managing the staff exposure and risk. Additional countermeasures have been implemented to combat the surge such as decreasing number of in-person specialty care visits, outpatient/elective procedures/surgeries and come and stay surgeries; updating return to work policy; and revisiting our visitor policy.

Fortunately over the past couple of weeks, ZSFG has seen a dramatic decline in the number of COVID-19 hospitalizations. In the course of 10 days, the hospital went from a surge level red to a level yellow on February 7th, with a nearly 50% decrease in COVID-19 hospitalizations. Many thanks to all staff for continuing to adapt to the constantly changing circumstances!

COVID-19 Contact Tracing and Healthcare Worker-to-Patient Exposures

On January 18th, Dr. Lisa Winston and Dr. Lukejohn Day announced that in order to effectively maintain the safety of our staff and patients, Infection Prevention & Control (IC) will concentrate contact tracing resources within areas of increased risk for severe disease in the primary patient population. IC will, however, continue to receive and review all new positive employee information.

As a result of this change, the team anticipated that there will be fewer quarantined patients, without sacrifice of safety because: (1) the majority of our patients are in a single rooms, so there is little concern for patient-to-patient transmission; and (2) all staff are wearing N95 respirators for patient encounters, so there is little concern for patient-to-staff transmission.

Nevertheless, to ensure patient safety in double-occupancy rooms, a separate protocol has been established and IC will initiate quarantine when appropriate. Additionally, to protect our patients, our staff were asked to observe the following:

- Patients must consistently wear isolation masks;
- Staff must wear N95 respirators;
- Staff must maintain distance from patients when possible and appropriate; and

- Staff must monitor all patients for any symptom change and test promptly should any occur.

QUALITY

2. Rehabilitation Department Opening

After a long planning, design, construction and licensing journey, our Department of Rehabilitation is moving to Building 5, 3rd floor. The location is a brand new, bright, open, and lovely new space, designed by our rehab team that honors their work and the patients they serve. They are departing from the ground floor space that they have occupied since the late 1970s.

The Rehabilitation Department provides Occupational, Physical, Speech Therapy and Psychiatric services to adult and pediatric patients of all ages in Acute Care, ICU, Short-Term Skilled Nursing, as well as outpatients. The Department's objective is to help restore functional abilities to individuals with physical, cognitive, communicative and/or sensori-perceptual impairments and facilitate their ability to achieve their maximal potential and their ability to function within the community.

Whether it is treatment for knee arthritis, assisting post-stroke recovery, making recommendations about swallowing function, or assessing for assistive devices like canes or walkers so patients can stay active and independent, this team provides essential services that keep our patients living safe and high-quality lives.

The Department performs about 150 inpatient evaluation and treatment sessions per day, and schedules about 120 outpatient evaluation and treatment sessions per day. This translates into 40,000 inpatient sessions and 20,000 outpatient sessions each year. In response to the COVID-19 pandemic, the team has creatively converted many of their services into telephone and telehealth visits. The sheer volume of work is a testament to the important function in the community.

Congratulations to the Rehab team for moving into their new space and our deepest appreciation for all that they do!



EQUITY

3. ZSFG's New Director of Diversity, Equity & Inclusion

On January 25th, Sophia Lai became ZSFG's new Director of Diversity, Equity and Inclusion! Sophia is a civil rights attorney who was recently employed with the Alameda Health System where she served as the Interim Privacy Officer and directed criminal justice reentry programs. Prior to serving in that role, Sophia was a consultant for homeless services across Northern California and a civil rights and labor attorney with the Bay Area public interest organizations. Sophia received her JD from Harvard Law School and her B.A. in Social Studies with a focus on Ethnic Studies from Harvard College. Additionally, Sophia is very passionate about making healthcare more equitable, efficient, and effective for all. Congratulations and many thanks to Sophia Lai for filling this incredibly important role!

DEVELOPING OUR PEOPLE

4. Celebrating Black History Month

In February, Black History Month is celebrated to honor the extraordinary contributions that Black Americans have made to our country since its inception.

Black Americans have achieved remarkable success in all domains, including healthcare; business; politics and social movements; and arts, sports and entertainment -- despite confronting many barriers due to individual, institutional, and structural racism. In spite of this success, all these types of racism continue to abound in our country. Collectively, we are indebted to Black American resiliency.

When reflecting on the history of Black Americans nationally and locally in San Francisco, we recognize that racism, both past and present, is still the direct cause of significant health inequities in our communities.

The first step to becoming an anti-racist individual and organization is to learn. ZSFG encourages members of our community to take advantage of the many opportunities available to learn more about both the historical struggles and achievements of Black Americans through programs such as the Equity Learning Series sponsored by the SFPDPH Office of Health Equity's Black African American Health Initiative (BAAHI).

All are welcome to also view the Black History Month display on the second floor of Building 25 – here's a sneak peek:



ZSFG is actively addressing these inequities through our Equity True North pillar. Our goal: in all our divisions and departments we identify health disparities, disparities in our workforce and in our staff and patient experience, and then eliminate them through data-driven improvement efforts. All staff are able to join in these efforts by speaking to their managers or supervisors.

As Omicron starts to recede from our community, it's a perfect time to renew our commitment as individuals and as an organization to become anti-racist. To do so, ZSFG must be committed to driving out structural racism and anti-Blackness wherever we encounter it. Our privilege as health care professionals gives us the opportunity and the obligation to foster a work environment that is inclusive, free from bias, and without structural racism.

Our deep gratitude to Sophia Lai, Director of Diversity, Equity and Inclusion, and Andrea Turner, COO, for leading these important efforts!

DEVELOPING OUR PEOPLE

5. Celebrating Lunar New Year

On February 1st, many members of our ZSFG community and billions of people throughout the world celebrated the Lunar New Year, also known as Spring Festival (Chinese), Tết (Vietnamese), Seollal (Korean), and other names, depending on tradition.

For many cultures, Lunar New Year is the most important holiday of the year, and a time when extended families gather to celebrate. Many families practice traditional customs to bring good luck into the next year, including giving out red envelopes (with money) to younger generations and eating "lucky" foods such as dumplings, whole fish, and noodles.

This year is the Year of the Tiger for the Chinese and Vietnamese zodiacs. To some, the tiger represents recovery and growth, important and powerful symbols for us as we begin recovery from two years of pandemic and a very difficult January, with our fifth and most challenging COVID surge. Moving out of this surge, it is a great symbol for all of us – that of recovery and hope, along with the opportunity to honor our Chinese, Vietnamese, Korean, and other communities who celebrate this holiday.



(Lunar New Year Celebration Feb. 2020)

DEVELOPING OUR PEOPLE

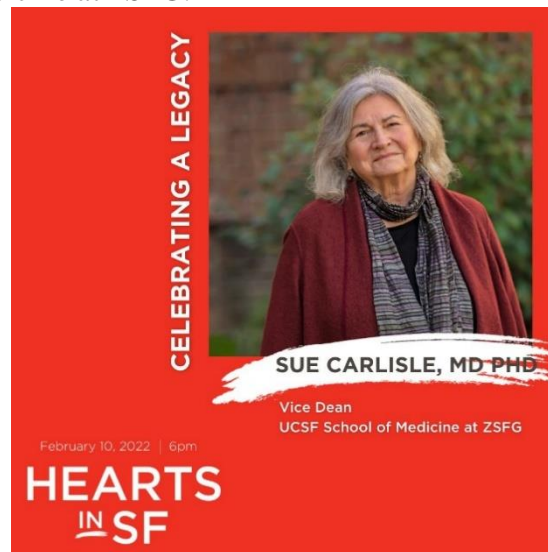
6. 2022 Hearts in SF

On February 10th, our remarkably supportive San Francisco General Hospital Foundation celebrated ZSFG in a beautifully produced hour plus long virtual event at the 2022 Hearts in SF event. Our celebrators included Mayor London Breed, Speaker Nancy Pelosi, and more than a thousand people who tuned in for this free event that raised more than \$1 million for the work we do here on campus.

The Foundation gave special awards to Drs. Neil Powe, Geoff Manley and Malini Singh. These incredible researchers, educators and care providers are truly exceptional and have contributed so much to our mission and vision here at ZSFG.

The Foundation's CEO, Kim Meredith, facilitated a powerful conversation with Dr. Priscilla Chan, who articulately and authentically spoke about her life's work and her experience with and devotion to ZSFG. Additionally, environmental service workers, facilities and engineering teams, Sojourn chaplains, and H66-68 nurses had the opportunity to share exactly how they've stepped up to serve our community during the past two years. Whether they are carefully cleaning an exam room, setting up a vaccination tent in a parking lot, holding hands and praying with a family member of a critically ill patient, or providing loving nursing care for a patient acutely ill with COVID, they were all extremely passionate about the work that they do. Although their scopes of work are very different, they are united by their devotion to our teams and our patients here at ZSFG.

Finally, Dr. Sue Carlisle was celebrated on the occasion of her upcoming retirement. With over 40 years of service to public health there is no better hero to spotlight at Hearts in SF this year than Dr. Sue Carlisle, Vice Dean of the UCSF School of Medicine at ZSFG.



Congratulations and many thanks to all our special heroes!

DEVELOPING OUR PEOPLE 7. ZSFG Healthcare Recognitions

This past month, ZSFG celebrated the following healthcare recognition in honor of our staff and the incredible work they do every single day!

Perianesthesia Nurse Week

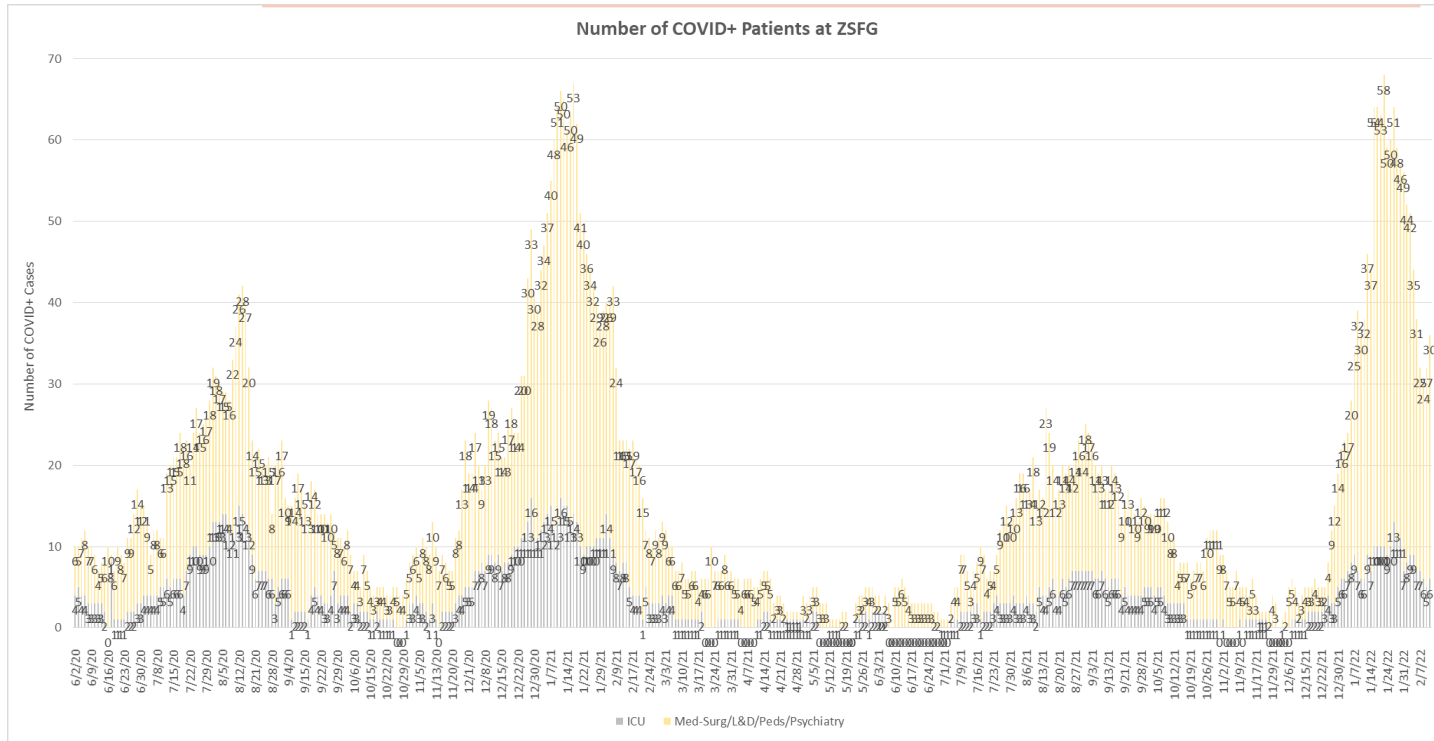
February 7-13 is Perianesthesia Nurses Week! This week celebrates the nurses in preanesthesia and postanesthesia care, ambulatory surgery, and pain management and provides an opportunity to educate nursing colleagues and the community about the professionalism and passionate care that is delivered by perianesthesia nurses.

Cardiovascular Professionals Week

February 13-19 is Cardiovascular Professionals Week! This week recognizes Cardiovascular Professionals' compassion, consistency, and commitment to delivering emergent and routine cardiology care, always and especially during the pandemic.

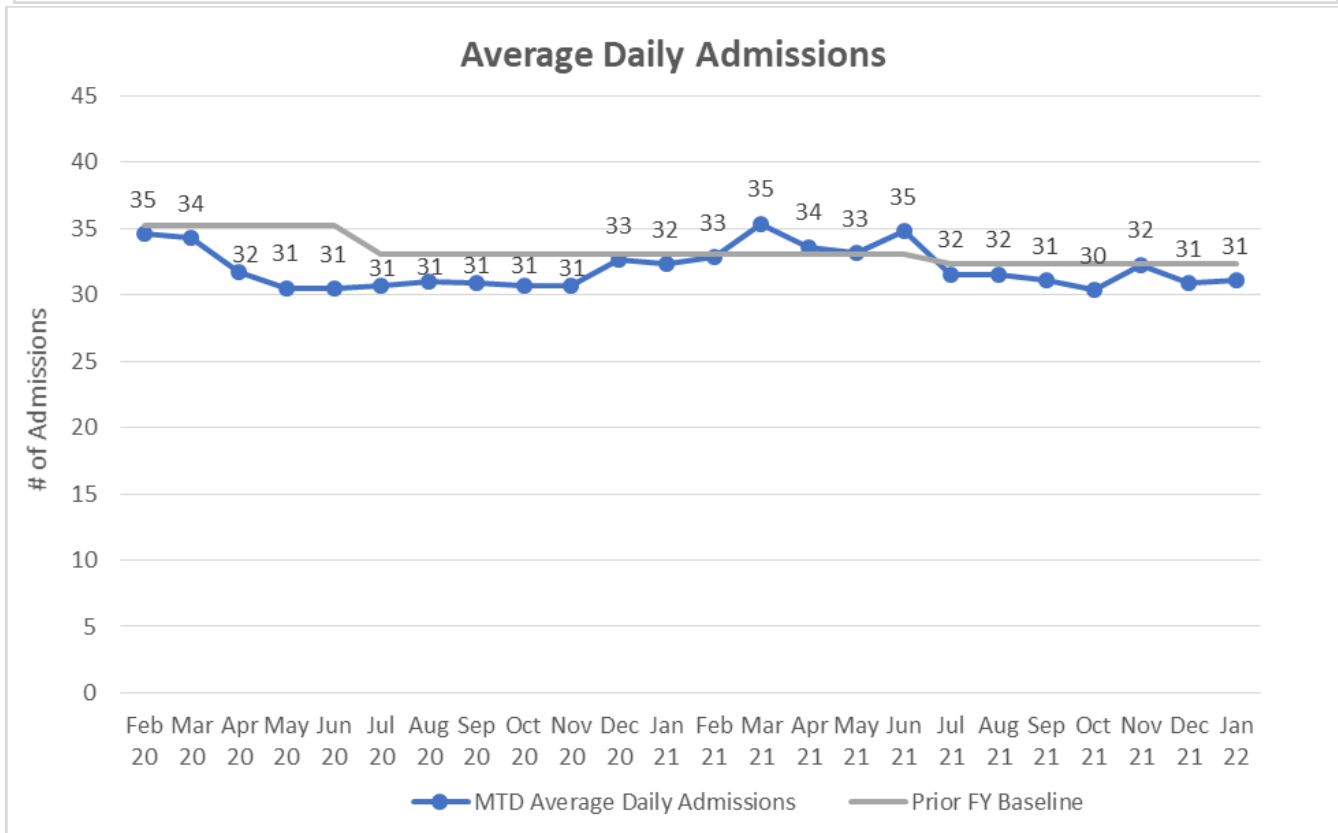
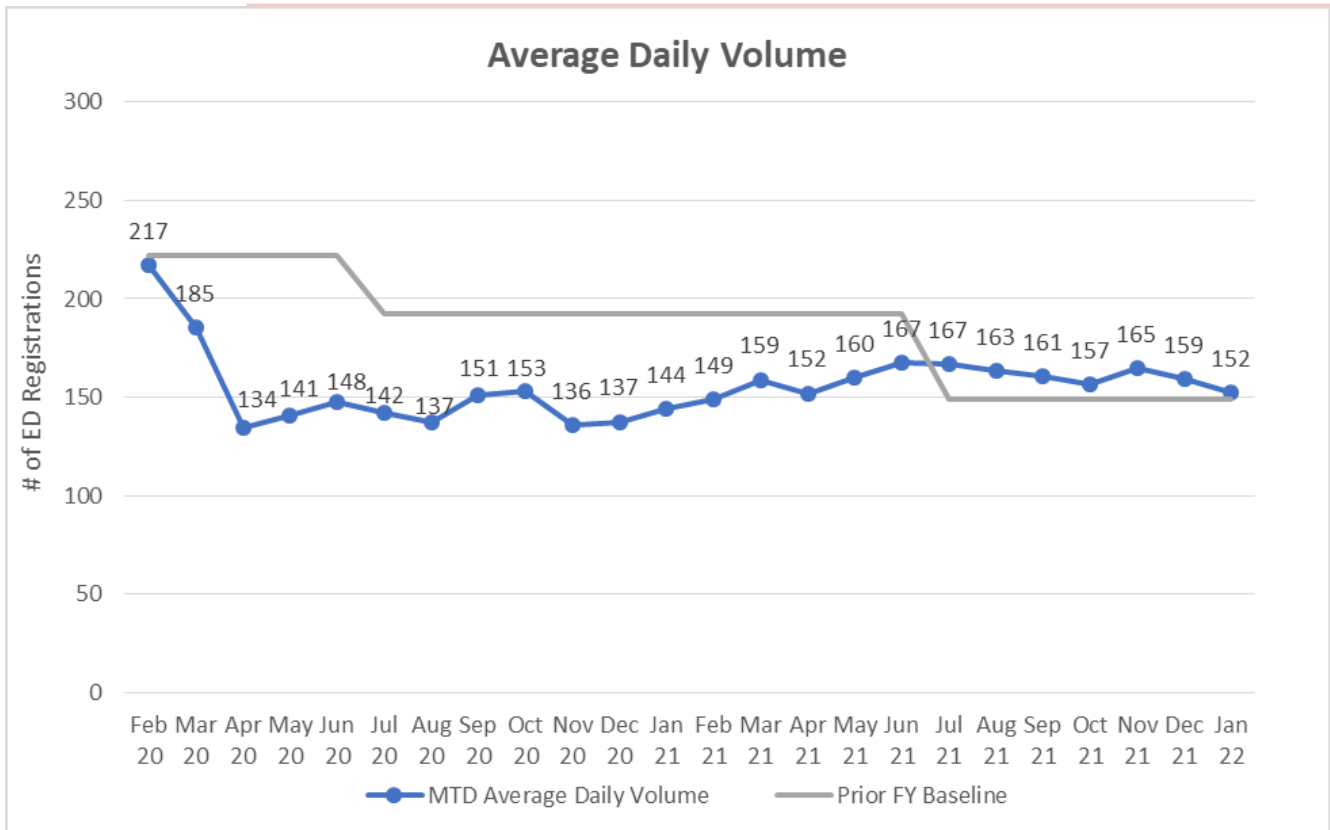
Many thanks to all our wonderful staff in all departments that go above and beyond to provide the highest level of care to our patients and community!

QUALITY ZSFG COVID+ Patients

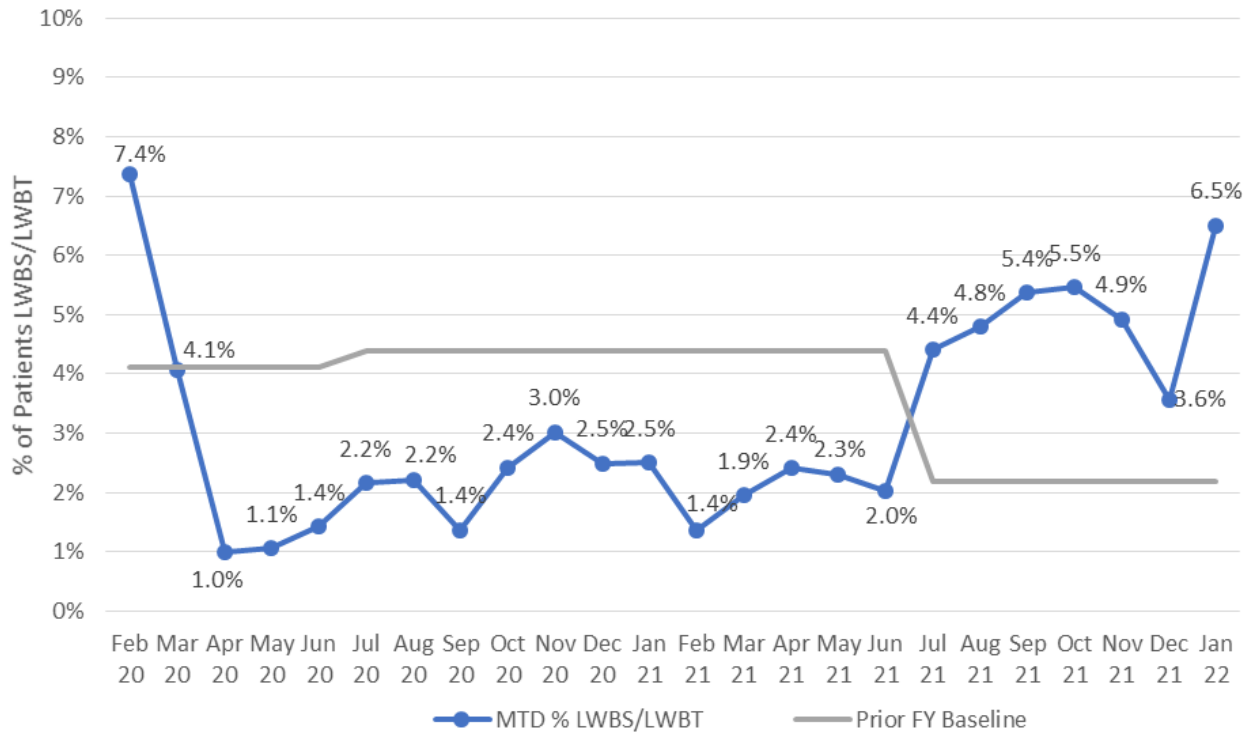


QUALITY

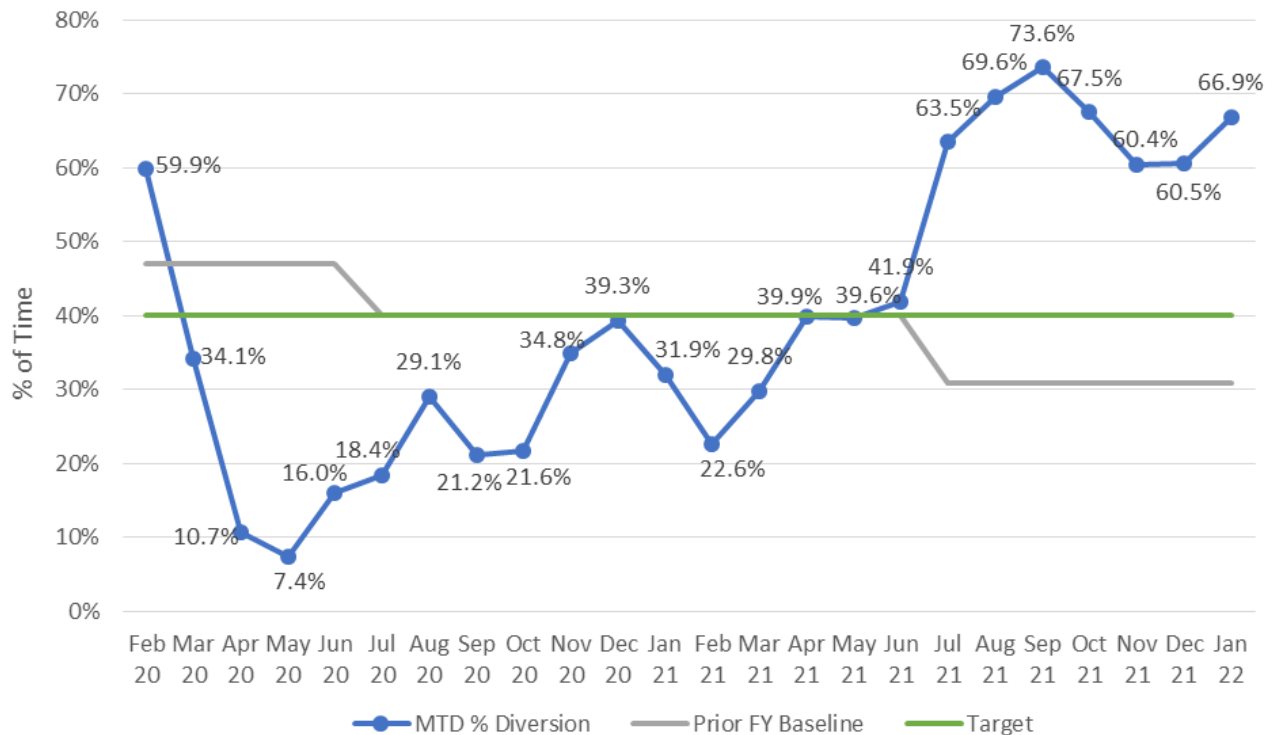
Emergency Department Activities



% LWBS/LWBT

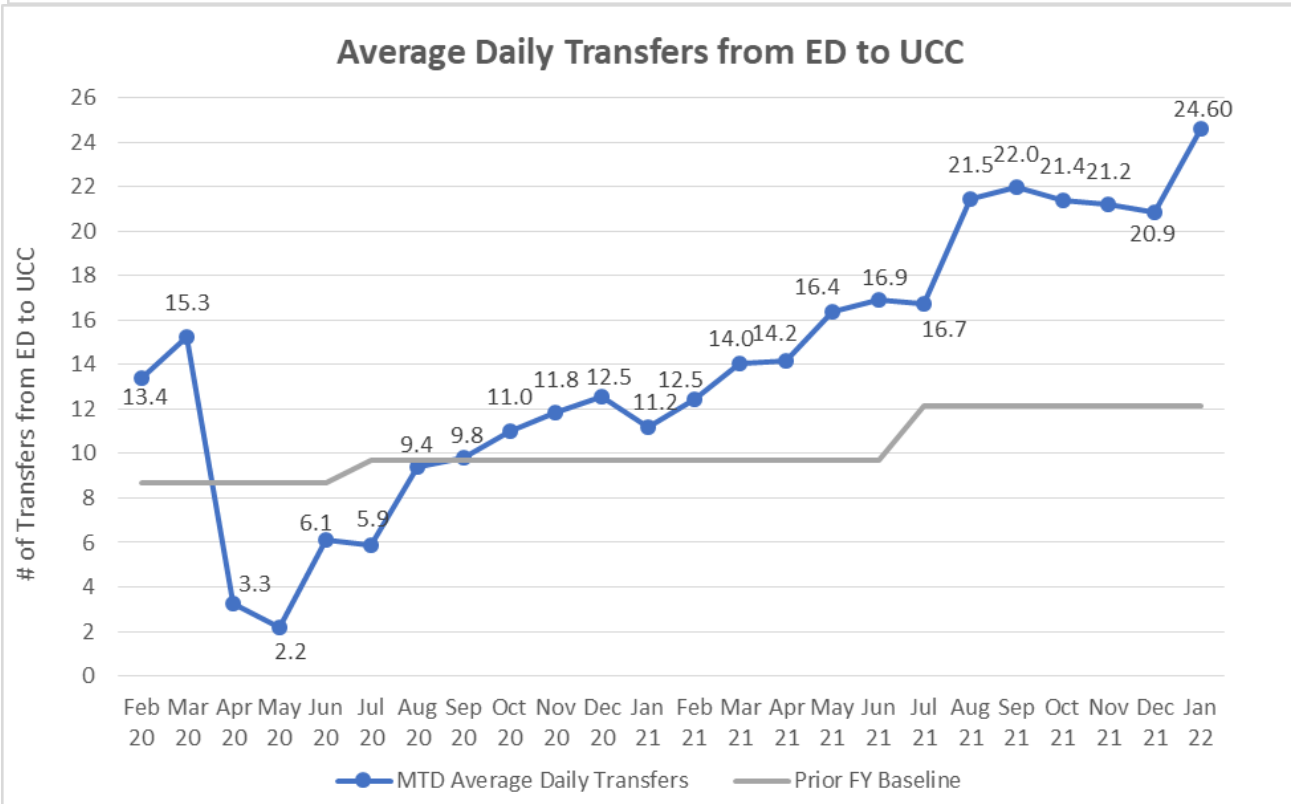
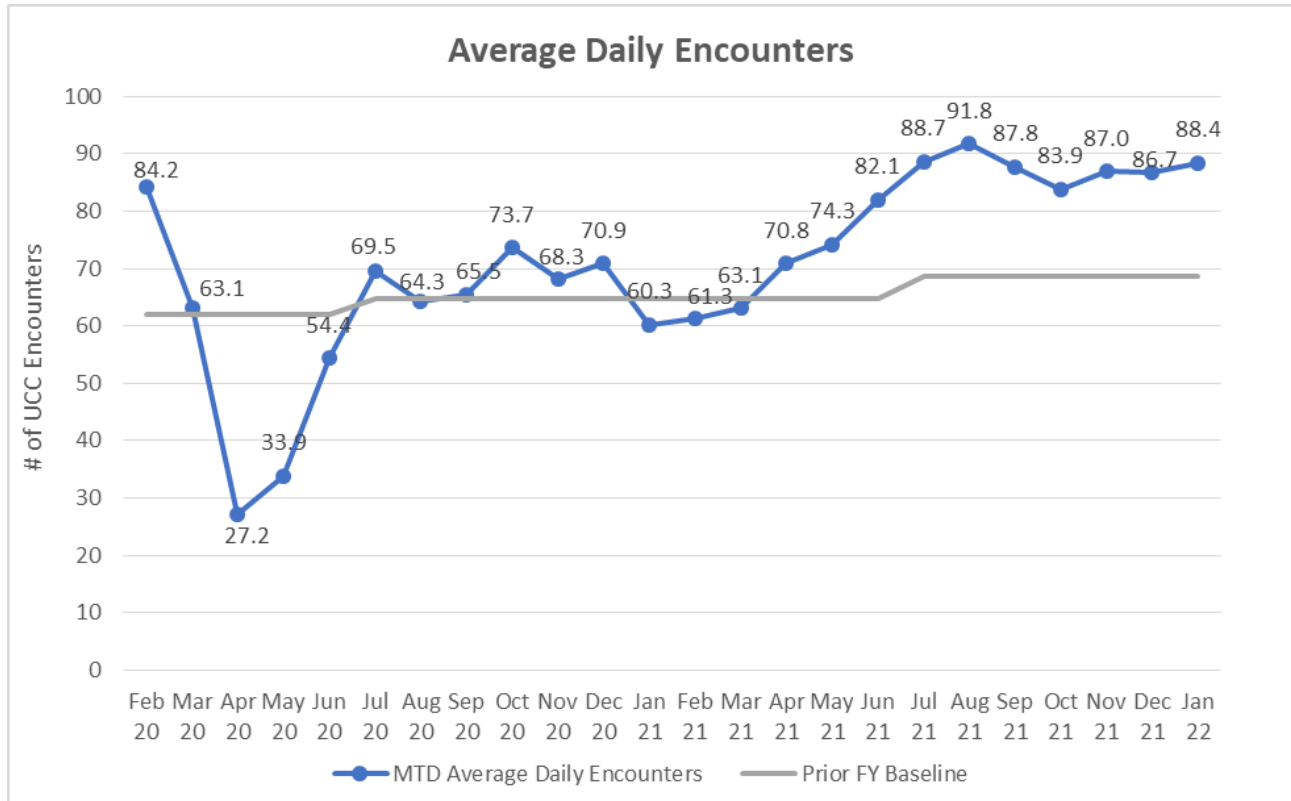


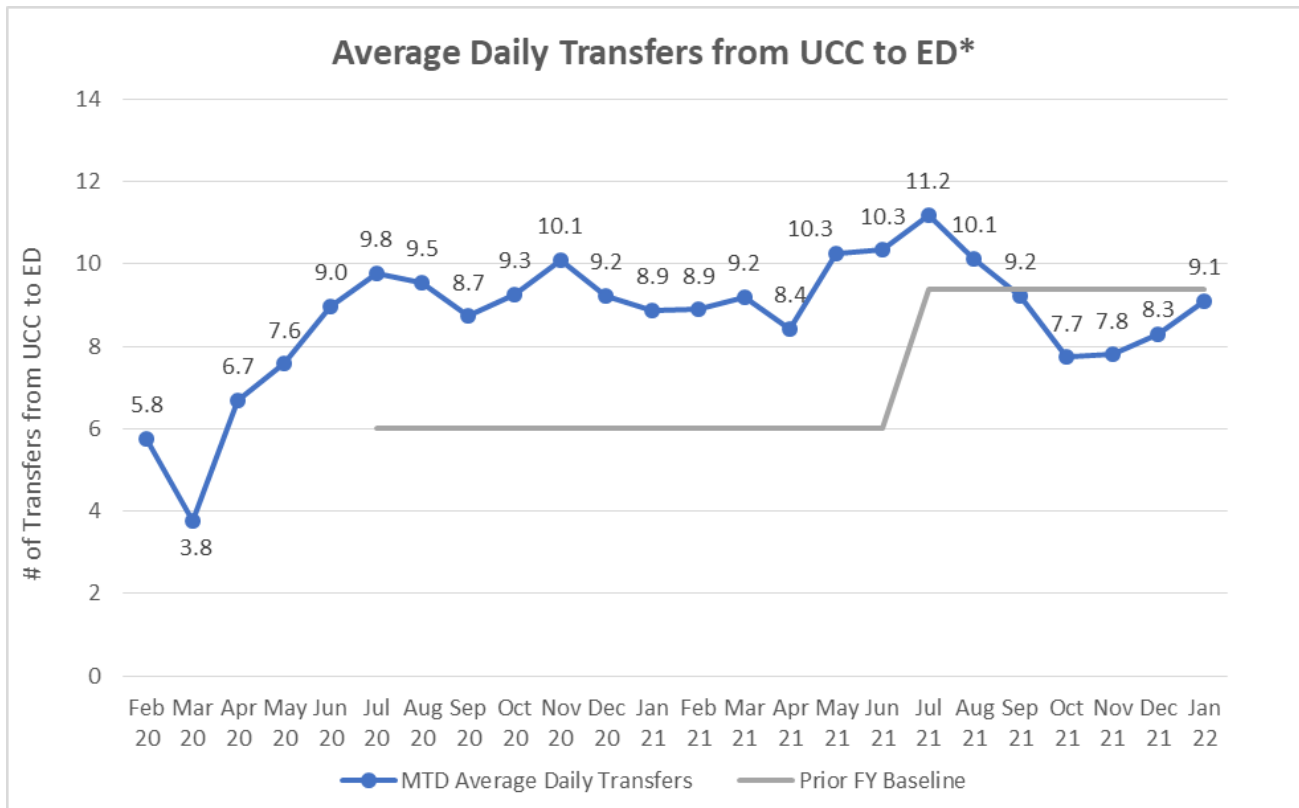
% Diversion



QUALITY

Urgent Care Clinic Activities

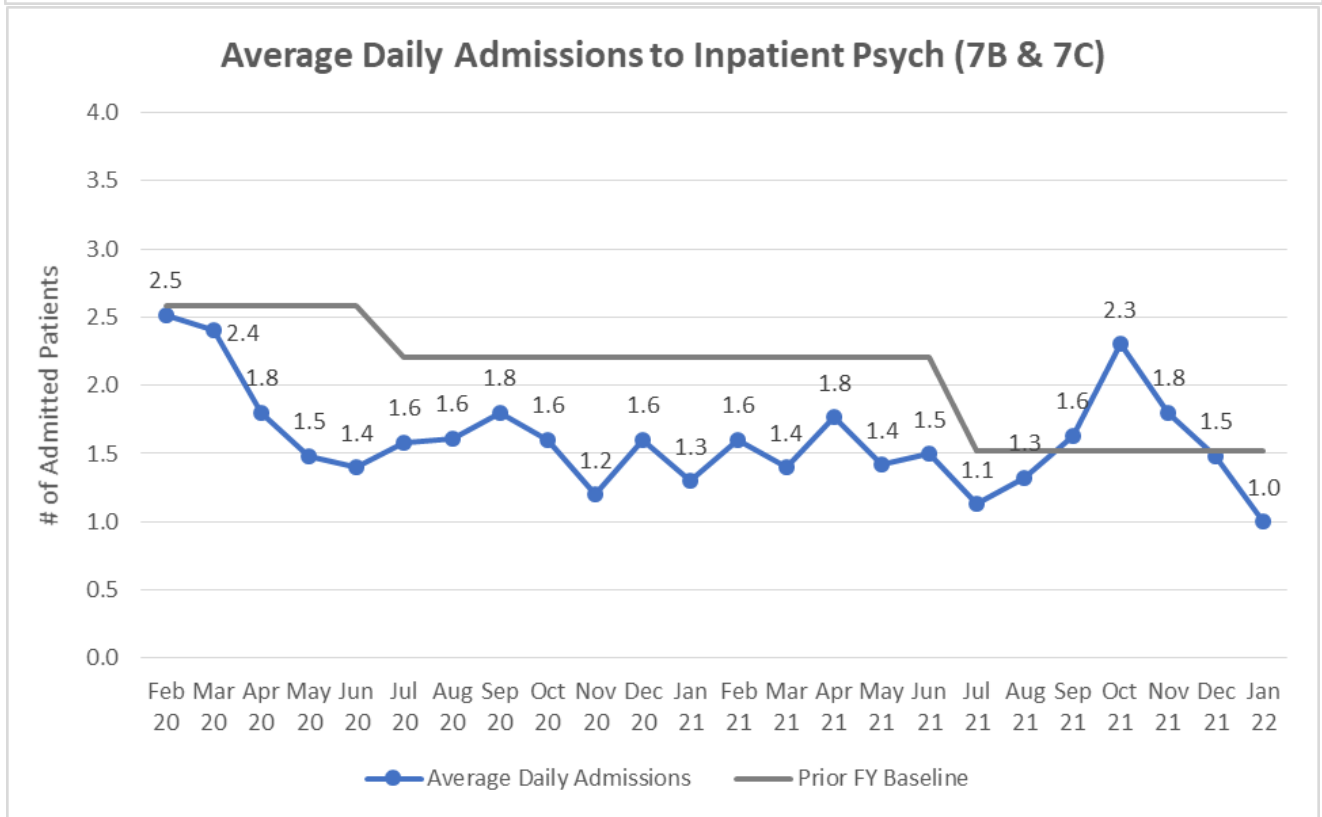
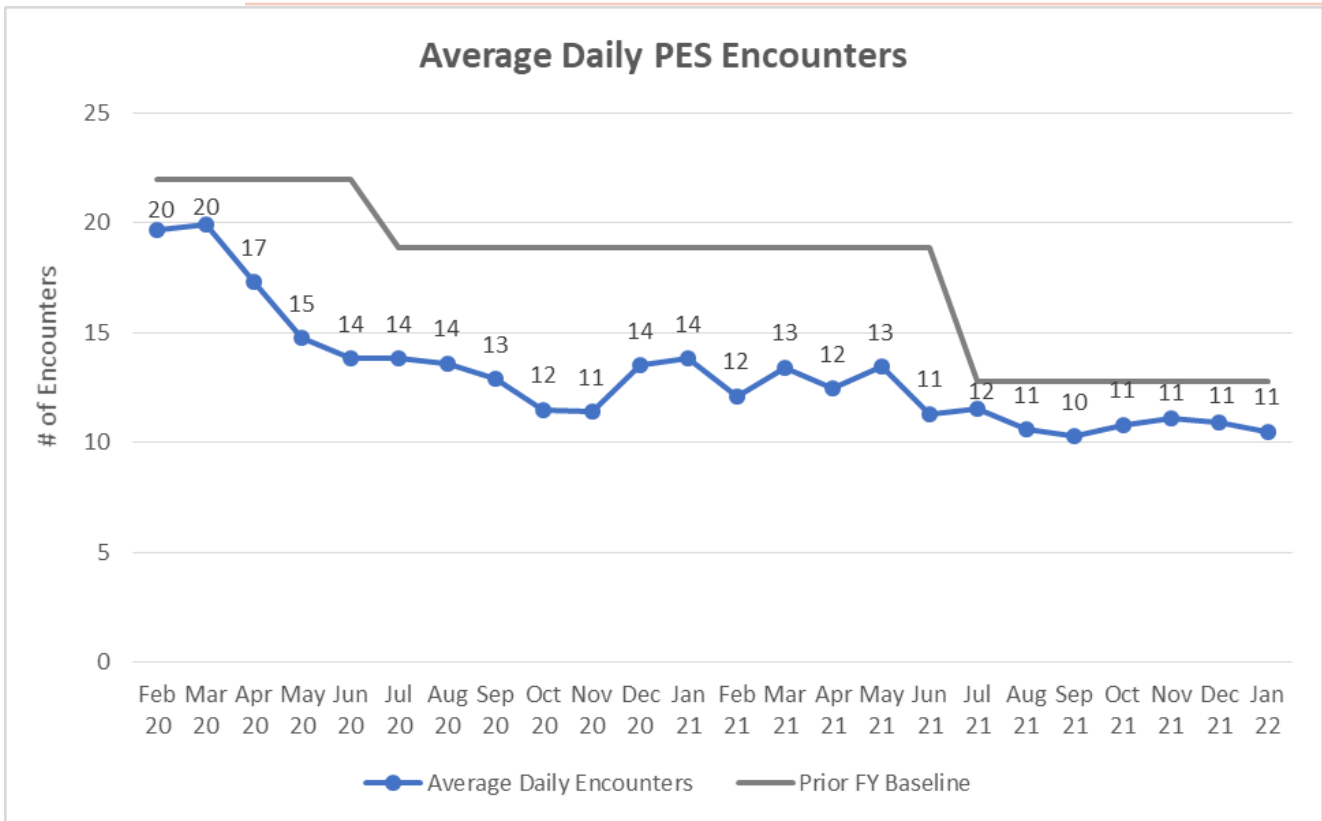




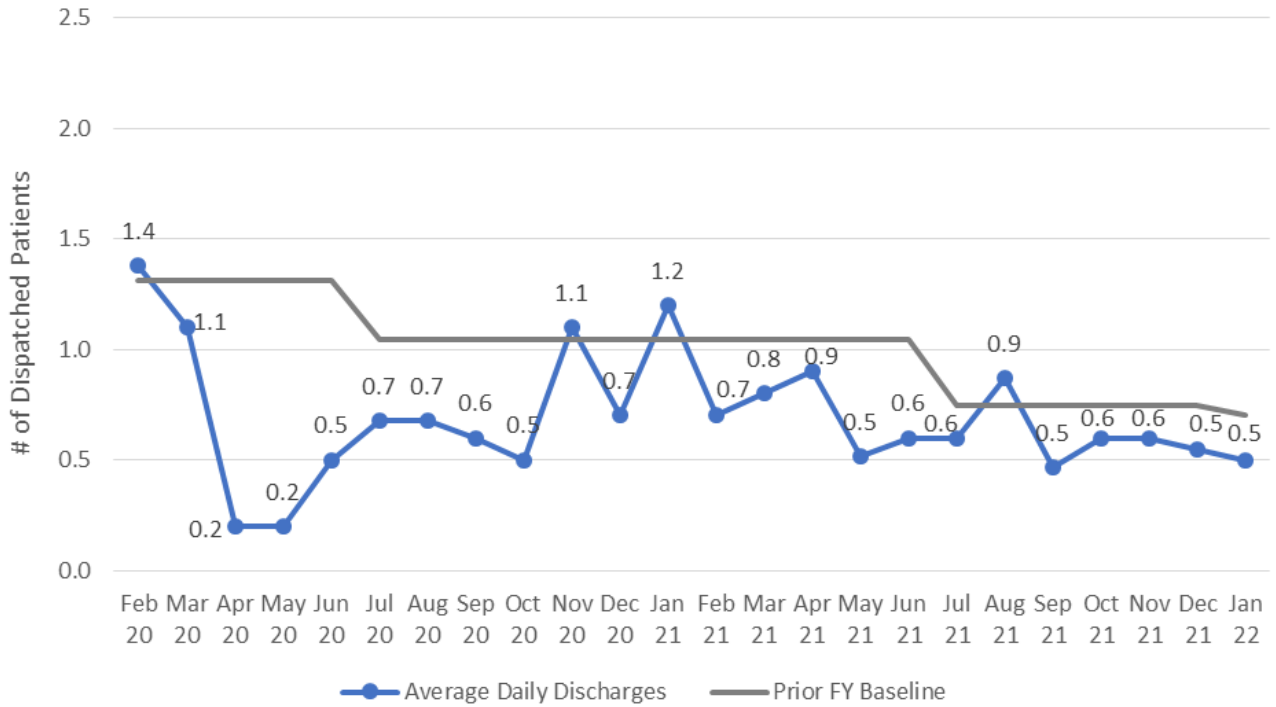
***As this is a new metric that ZSFG is tracking, data prior to Epic Implementation in August 2019 is not available.**

QUALITY

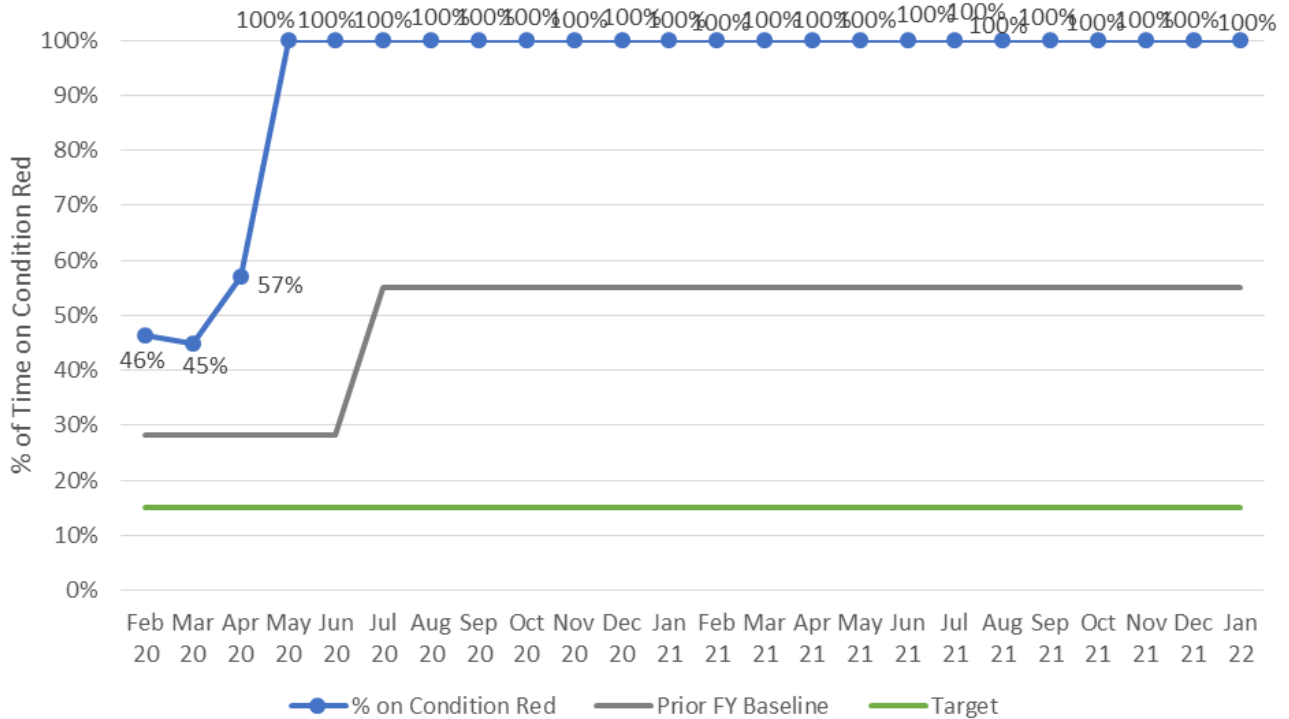
Psychiatric Emergency Services Activities



Average Daily Discharges to Dore Urgent Care Clinic (DUCC)



PES Condition Red*



***We are using condition red as an external communication tool to signal that patients can not directly come to PES. They must be cleared by ED first.**

QUALITY Average Daily Census

MEDICAL/SURGICAL

Average Daily Census of Medical/Surgical was 176.74 which is 113.30% of budgeted staffed beds and 98.74% of physical capacity. 17.92% of the Medical/Surgical days were lower level of care days: 6.97% administrative and 10.95% decertified/non-reimbursed days.

INTENSIVE CARE UNIT (ICU)

Average Daily Census of ICU was 34.10 which is 121.77% of budgeted staffed beds and 58.79% of physical capacity of the hospital.

MATERNAL CHILD HEALTH (MCH)

Average Daily Census of MCH was 25.13 which is 83.76% of budgeted staffed beds and 59.83% of physical capacity of the hospital.

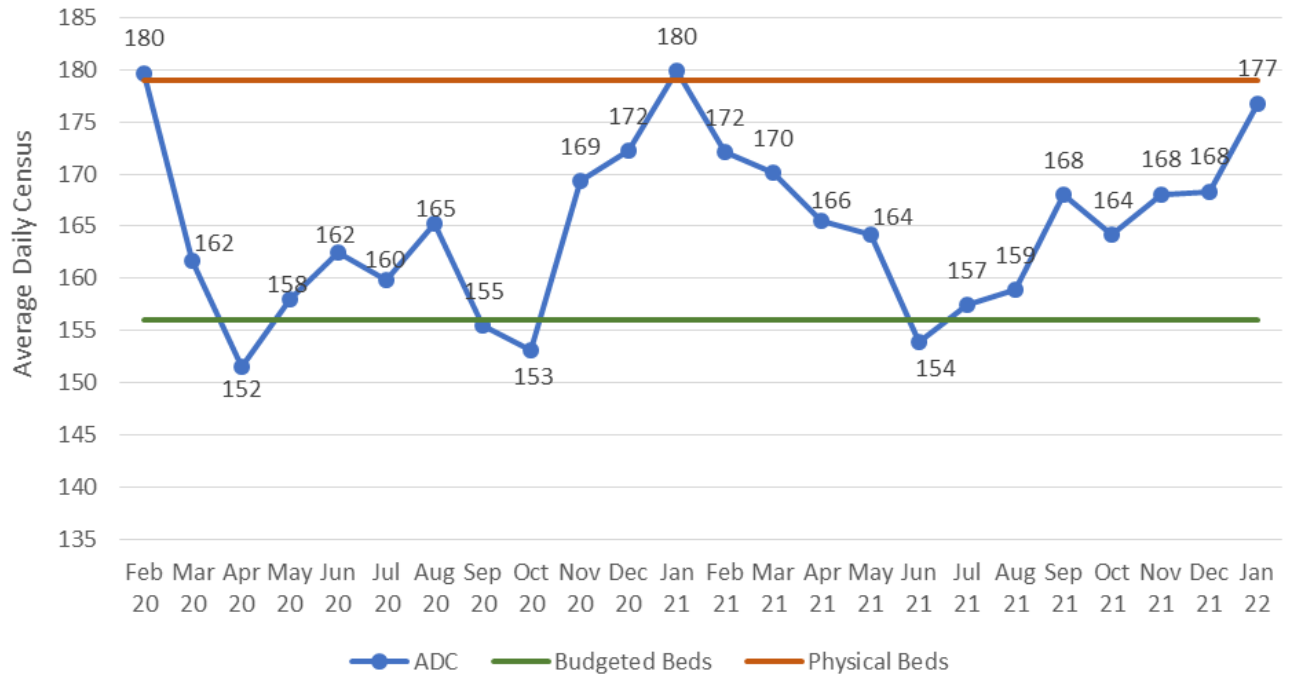
ACUTE PSYCHIATRY

Average Daily Census for Psychiatry beds, excluding 7L, was 38.74, which is 88.05% of budgeted staffed beds and 57.82% of physical capacity (7B & 7C). Average Daily Census for 7L was 5.97, which is 85.25% of budgeted staffed beds (n=7) and 49.73% of physical capacity (n=12). Utilization Review data shows 69.69% non-acute days (23.23% administrative and 46.46% non-reimbursed).

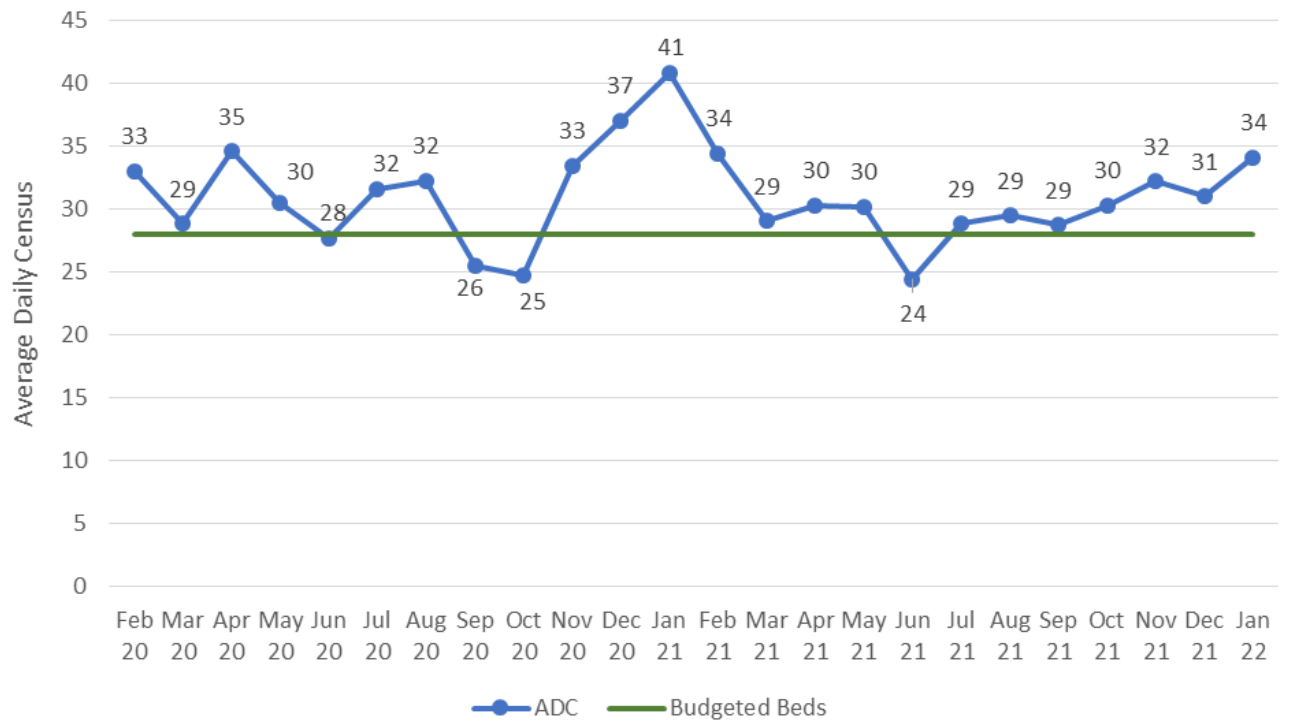
4A SKILLED NURSING UNIT

Average Daily Census for our skilled nursing unit was 25.55, which is 91.24% of our budgeted staffed beds and 85.16% of physical capacity.

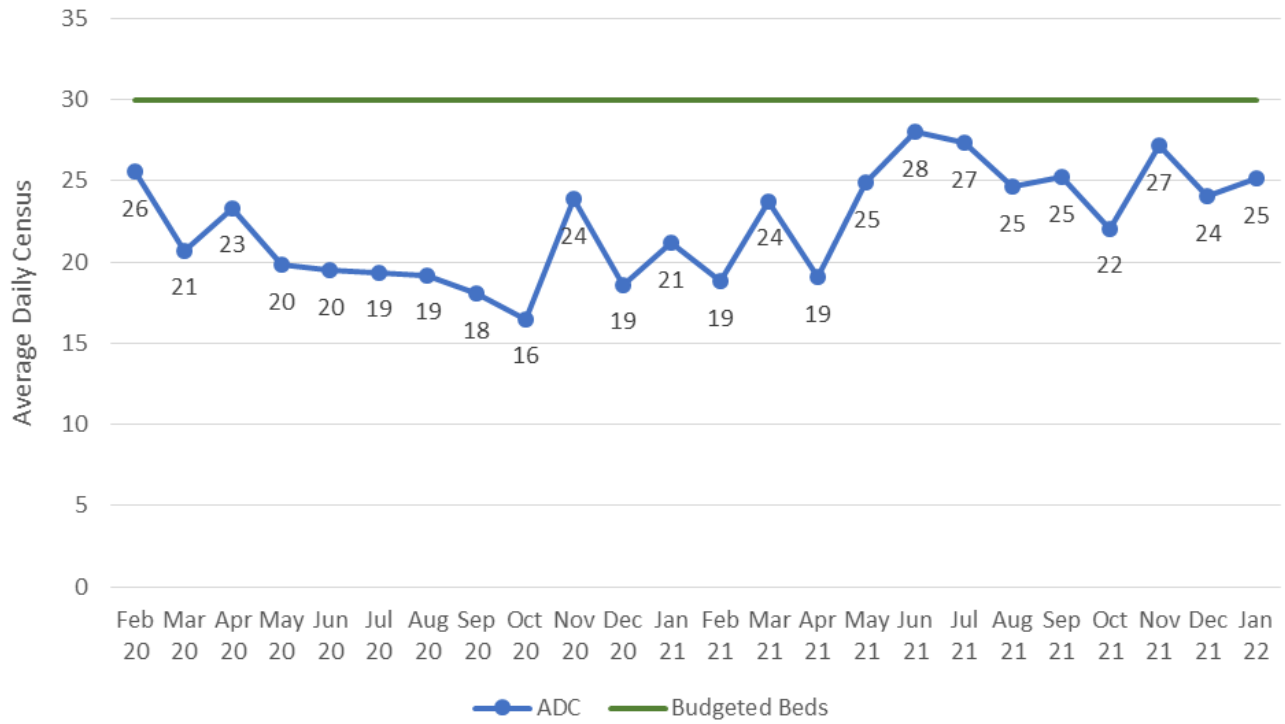
Medical Surgical (Incl. ED/PACU Overflow) Average Daily Census



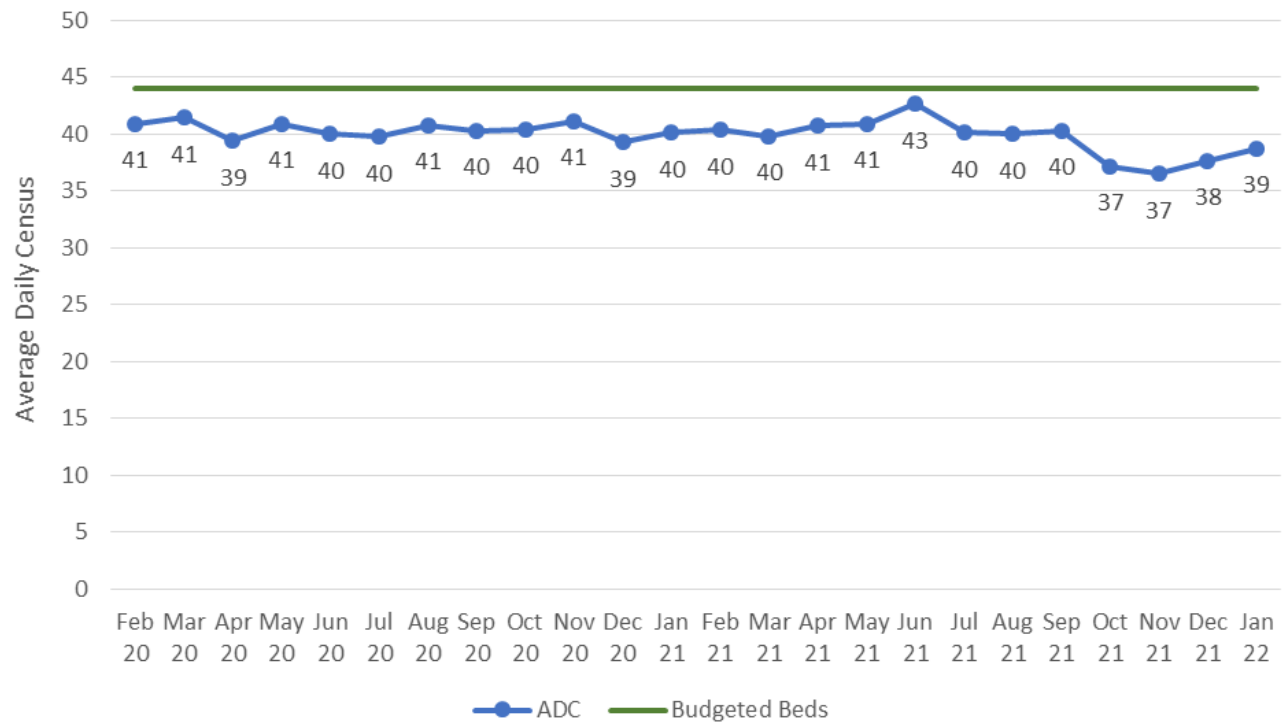
Intensive Care Unit Average Daily Census



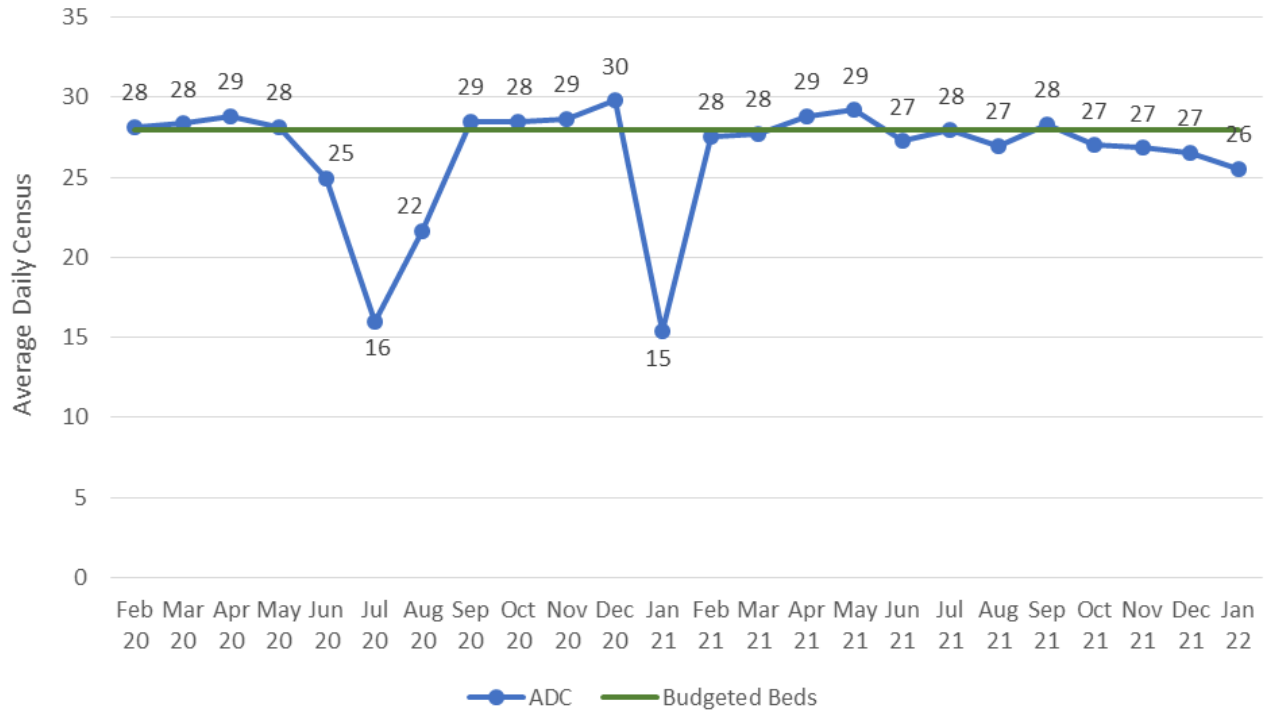
Maternal Child Health Average Daily Census



Acute Psychiatry (7B & 7C) Average Daily Census



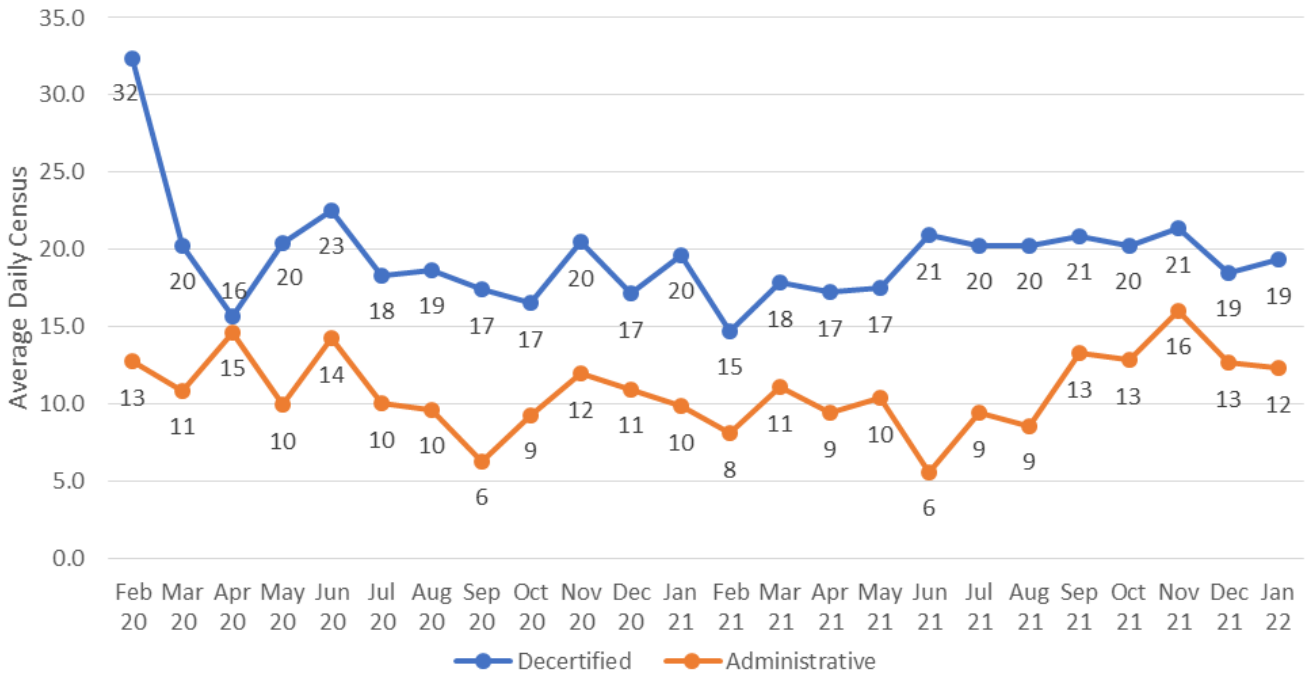
4A Skilled Nursing Facility Average Daily Census



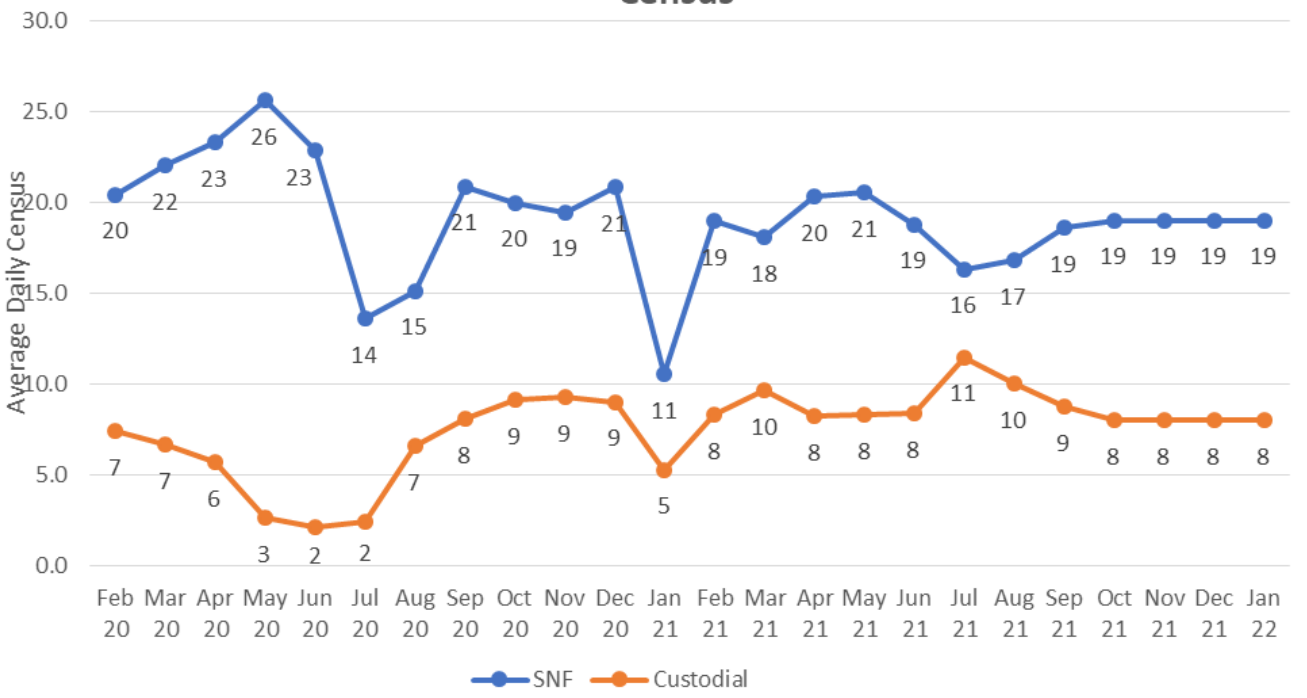
QUALITY

Lower Level of Care Average Daily Census

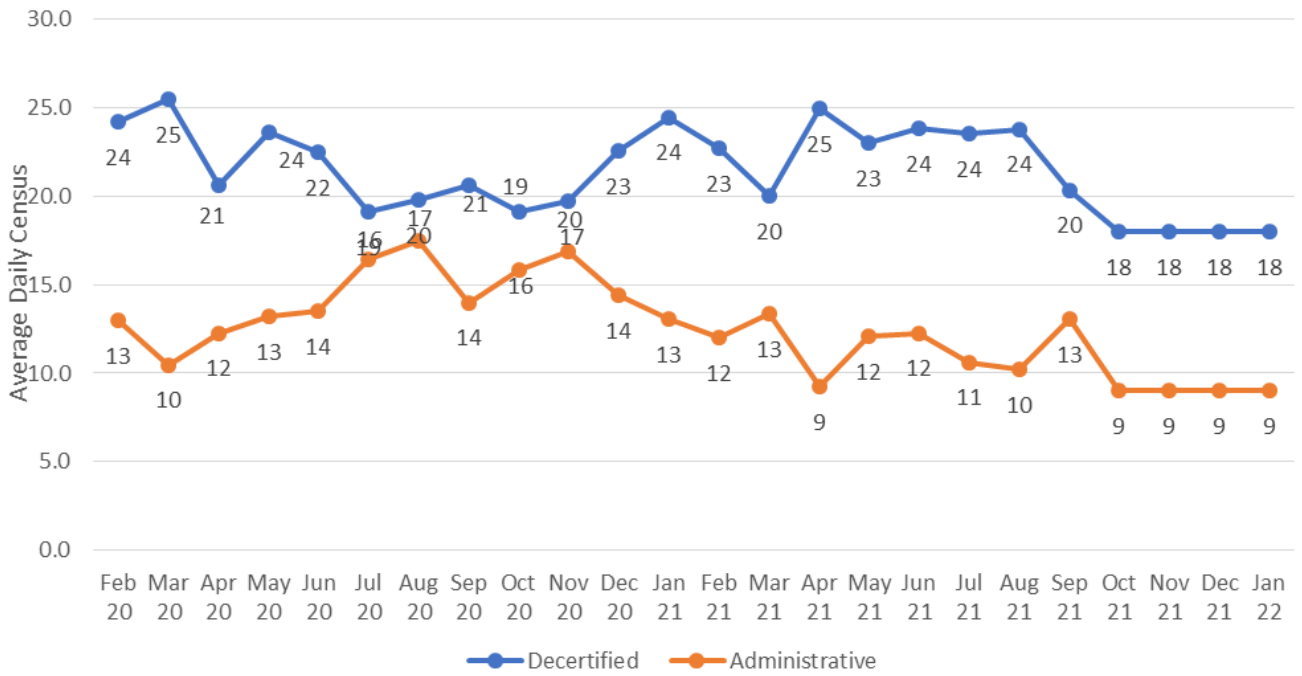
Medical Surgical Lower Level of Care Average Daily Census



4A Skilled Nursing Facility Lower Level of Care Average Daily Census

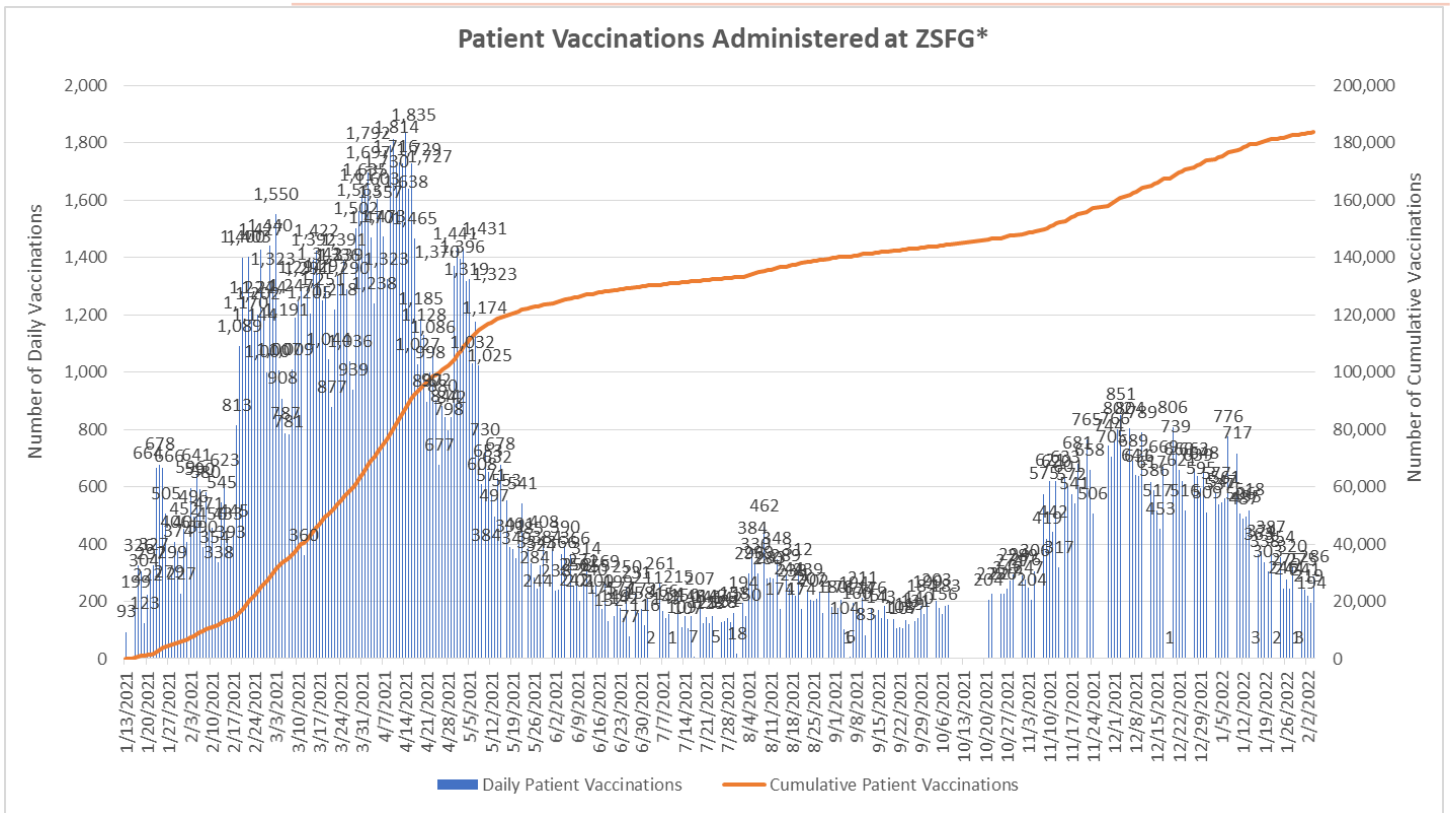


Acute Psych (7B & 7C) Lower Level of Care Average Daily Census

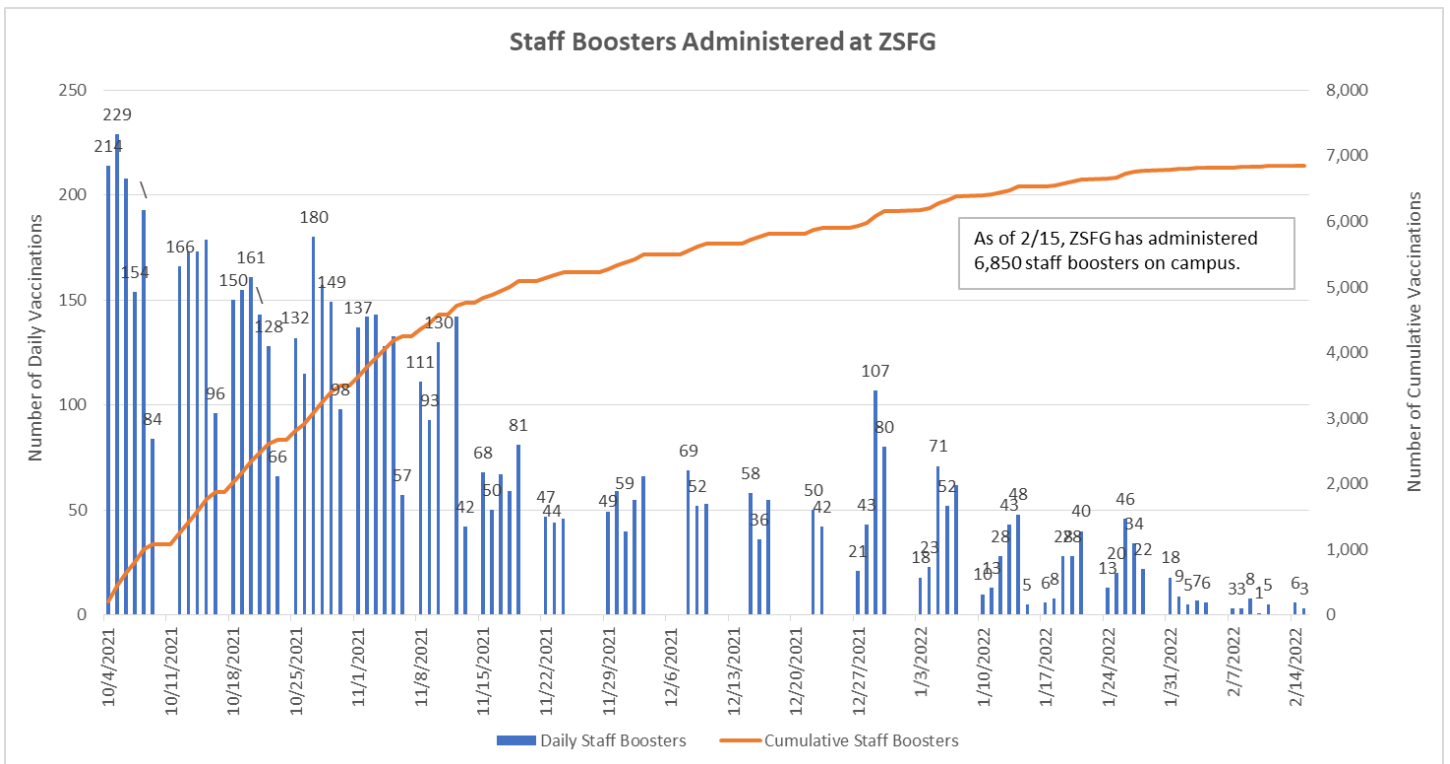


SAFETY

COVID-19 Vaccinations Administered at ZSFG



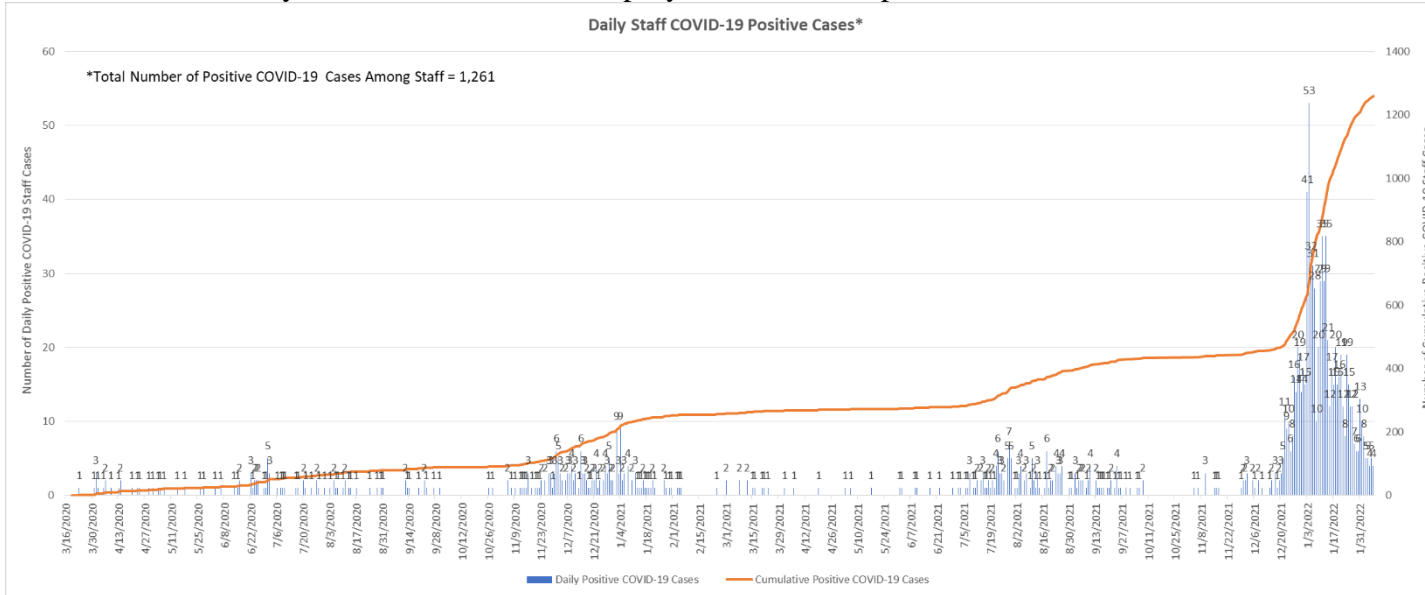
***Includes network-wide patients and members of the community.**



SAFETY

Occupational Health COVID+ Staff Cases

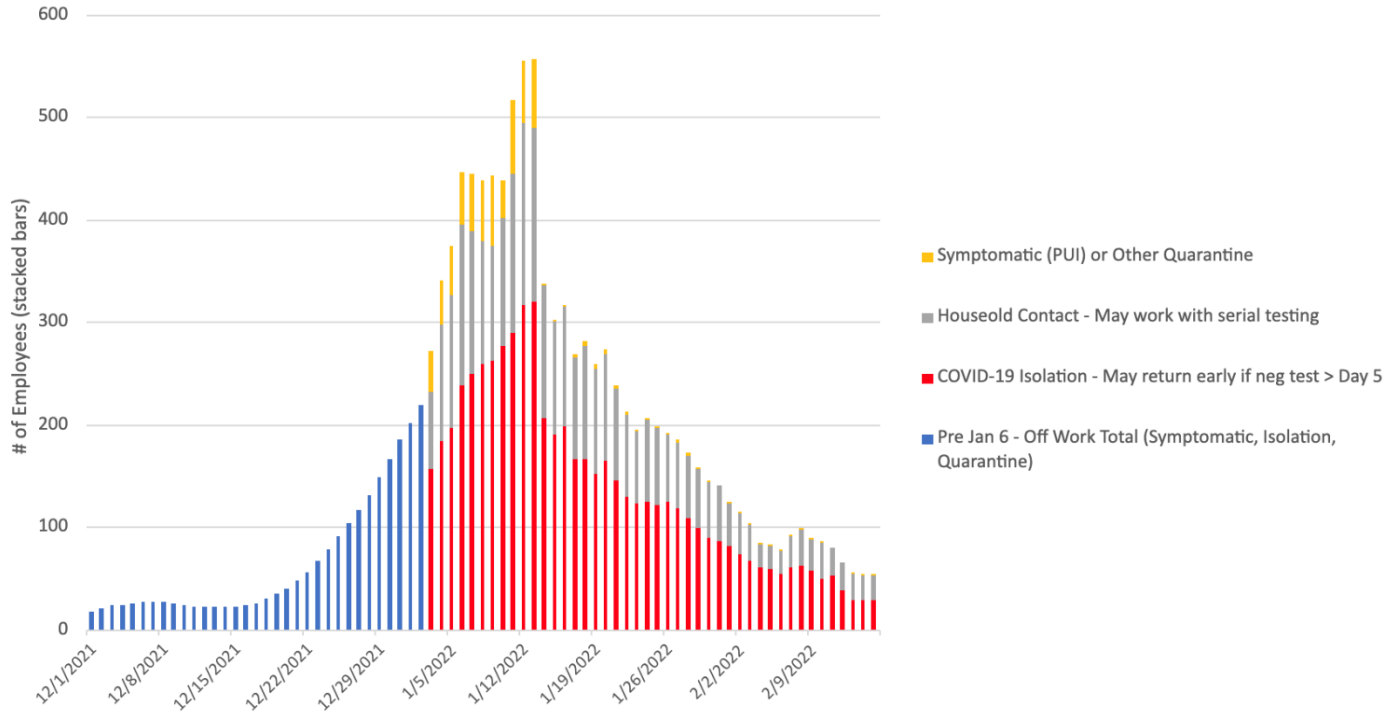
As of February 7, 2022, 1,261 ZSFG employees have tested positive for COVID-19.



SAFETY

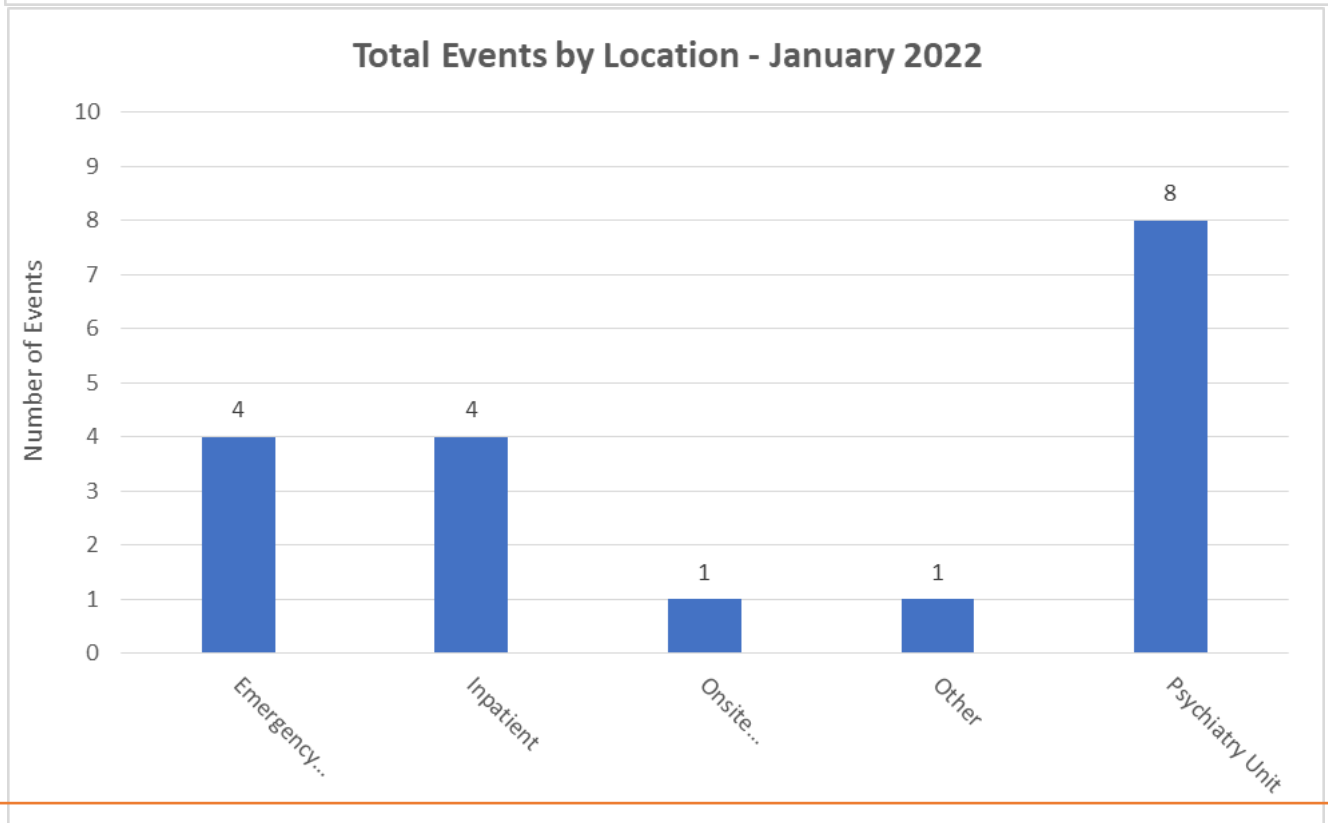
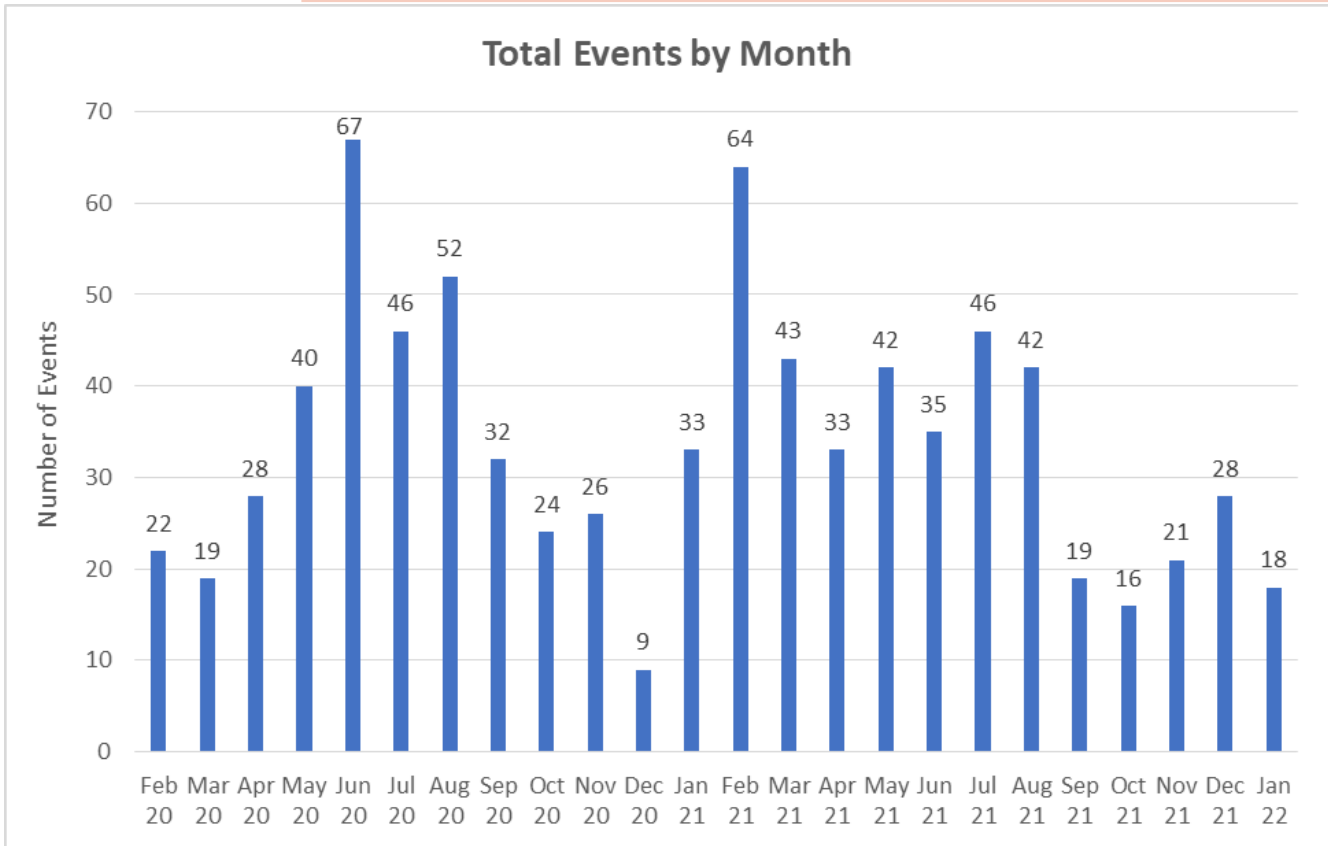
Occupational Health Work Status Restrictions

Employees in OHS Management: On 1/6/22, OHS implemented rapid walk-up triage, testing & guidance with conditional clearance. Robust early RTW testing supports early return from isolation after Day 5 and avoidance of quarantine w/Household Exposures.



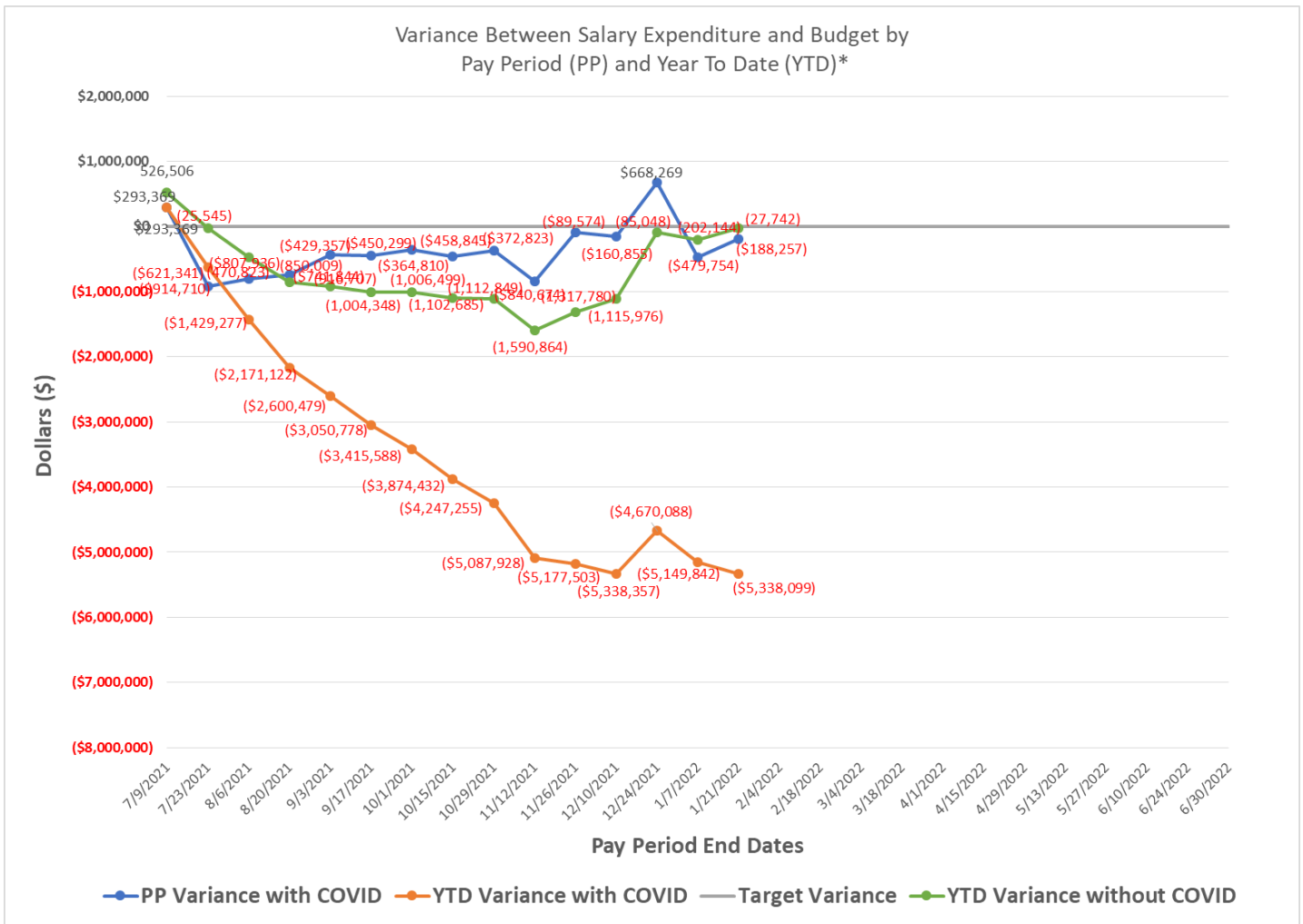
SAFETY

Workplace Violence Activity



FINANCIAL STEWARDSHIP

Salary Variance



***Please note that the COVID-19 and other labor costs have not yet been separated out of our operating fund to be charged to the COVID-19 budget. Therefore, these variances will appear inflated. Below are the rough estimates for the expenses contributing to the inflated variance. The green line (above) represents what our YTD salary variance would have been without the pandemic.**

No.	Cost	Amount
1	COVID Temp Hires (unbudgeted)	\$1,607,741
2	H48 COVID Staffing	\$292,800
3	H52	\$174,400
4	H58 (Non-COVID Census Project)	\$28,000
5	COVID Sick Time	\$2,482,099
	TOTAL	\$4,585,040

Commissioner Comments:
Commissioners Bernal and Green thanked Dr. Ehrlich for the report and expressed gratitude to the entire ZSFG team for their ongoing great work.

6) ZSFG HIRING AND VACANCY REPORT

Karrie Johnson, Departmental Personnel Officer, DPH, presented the item.

Commissioner Comments:

Commissioner Green asked if diversity data is known regarding nursing programs that partner with ZSFG for internship opportunities that may lead to ZSFG jobs. Ms. Dentoni stated that ZSFG has put in queries to its academic partners about demographic data on its student populations and will share the data once it is received.

Commissioner Green thanked Ms. Johnson for the helpful graphs. She asked if there is progress on hiring BERT team positions. Ms. Johnson stated that Ms. Dentoni and Nursing leadership prefers to give more time to recruiting nursing candidates for this team. The current BERT team is staffed enough to operationalize. Ms. Dentoni stated that 8 LVN staff have been hired and will be onboarded in the next two weeks; there are 6 licensed psychiatric technicians in the pipeline too.

7) MEDICAL STAFF REPORT

Lisa Winston, M.D., Chief of Medical Staff, presented the item.

Commissioner Comments:

Commissioner Green noted that all the Urology faculty are part-time. Dr. Winston stated that all Urology staff take their responsibilities seriously and part of their salaries are covered by UCSF through the Affiliation Agreement. These staff also take unpaid call to ZSFG when necessary.

Commissioner Green submitted a question regarding the language, "for house staff competencies contact the patient's attending physician," contained in the Urology privileges. Dr. Winston stated that all residents follow all the ECGM protocols and are regularly monitored.

Commissioner Green asked if there are different laws governing Nurse Practitioners and Physician Assistants. Dr. Winston stated that rules governing how trainees interact these two types of practitioners depends on the specific activity. She added that there has been no problem with the differentiation of these two types of practitioners in their interactions with trainees.

Action Taken: The ZSFG JCC unanimously approved the following:

- Urology Rules and Regulations
- NP/SP Standardized Procedures
- CPC Privileges List
- Radiology Privileges List

8) OTHER BUSINESS

This item was not discussed.

9) PUBLIC COMMENT

There was no public comment.

10) CLOSED SESSION

- A) Public comments on All Matters Pertaining to the Closed Session
- B) Vote on whether to hold a Closed Session (San Francisco Administrative Code Section 67.11)
- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5 and

1157.6: Health and Safety Code Section 1461; and California Constitution, Article I, Section 1.

CONSIDERATION OF CREDENTIALING MATTERS

CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

RECONVENE IN OPEN SESSION

1. Possible report on action taken in closed session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
2. *Vote to elect whether to disclose any or all discussions held in closed session (San Francisco Administrative Code Section 67.12(a).)*

Action Taken: The Committee approved February 2022 Credentialing Report and Performance Improvement and Patient Safety Report. The Committee voted not to disclose other discussions held in closed session.

11) ADJOURNMENT

The meeting was adjourned at 4:59pm.