

# BEHAVIORAL EMERGENCY RESPONSE TEAM (BERT)

## Rounding Responder Team JULY 2024 REPORT

The Behavioral Emergency Response Team (BERT) are psychiatrically trained health care professionals that respond to any perceived or impending behavioral emergencies in various locations within Zuckerberg San Francisco General Hospital. BERT provides a trauma-informed approach and utilizes principles of Crisis Prevention Institute (CPI) to de-escalate behavioral emergencies.

### UPDATES & REMINDERS

- BERT Services Include:
  - BERT in-services and training for staff on topics including verbal de-escalation
  - BERT Monthly Safety Tips
    - Provided during rounding
    - Available on SharePoint



### EXAMPLE OF A ROUNDING CONSULTATION

During rounds, a charge nurse informed BERT about a patient who had recently been transferred to their unit and was of concern due to a recent history of suicide attempt. BERT discussed the risks associated with managing a potentially suicidal patient in a non-psychiatric setting and recommended implementing appropriate interventions to mitigate these risks. BERT consulted with the charge nurse to create a safe environment for both the patient and staff by removing potentially dangerous materials or belongings from the bedside, relocating the patient's room closer to the nurse's station, increasing patient observation, informing the primary team, consulting Psych CL, and considering a coach if necessary.

July **244** Cumulative\* **1681**

\*Cumulative counts are data since January 2024

### DEPARTMENT/LOCATIONS

BERT ACTIVATIONS/CALLS

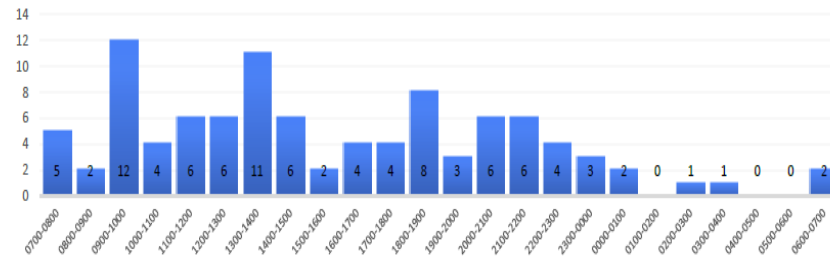
H22/26	H54/56	7
H32/38	H58	6
H34/36	H62/64	3
H42/44	H66/68	19
H52	H76/78	13

Outpatient Specialty Clinic	UCC: 7	5M: 1	5R: 2
Skilled Nursing Facility	4A: 3		
Additional Areas	PACU: 1		
	Bldg 5 Lobby: 3		
	Bldg 25 Lobby: 7		
	Cafeteria: 2		

\*Outside of the hospital and Psychiatric units, aside from H52, are not covered for BERT activations. BERT support was provided per the department's and/or AOD's request

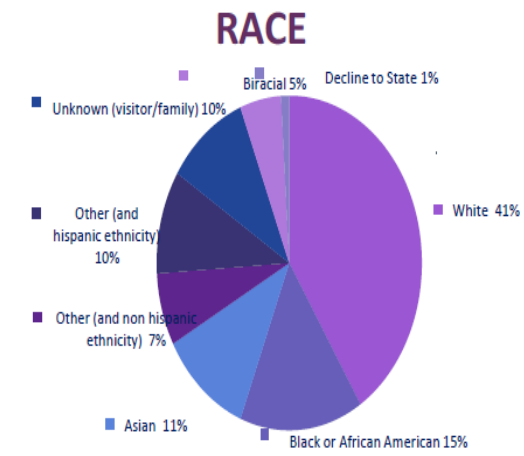
### TIME

BERT ACTIVATIONS/CALLS



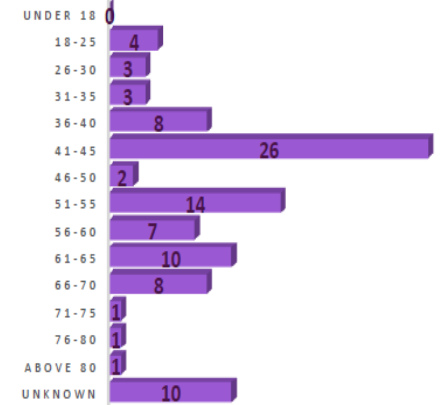
### PATIENT DEMOGRAPHICS

BERT ACTIVATIONS/CALLS



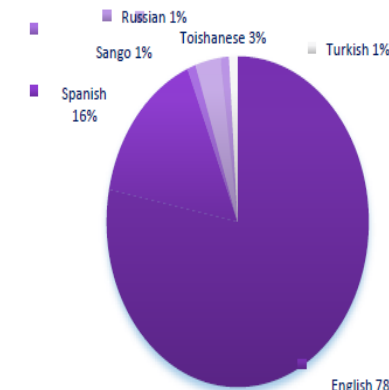
Black or African American, Decline to State, Native Hawaiian or Pacific Islander, Other, White. Unknown refers to BERT Activations/Calls involving visitors.

### AGE



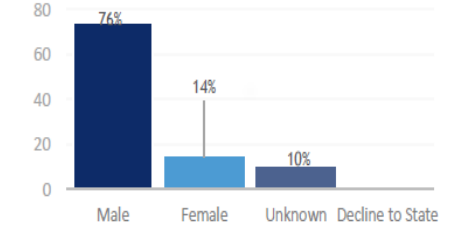
\*Unknown refers to BERT Activations/Calls involving visitors

### PREFERRED LANGUAGE

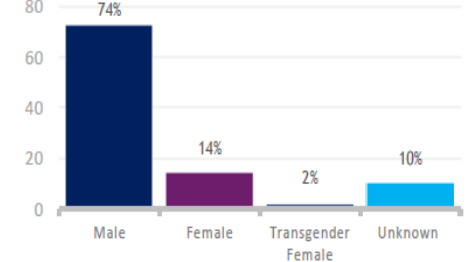


\*BERT currently has staff certified as proficient in Cantonese, Vietnamese and Burmese and has members that can communicate in Spanish and Tagalog

### SEX ASSIGNED AT BIRTH



### GENDER IDENTITY



\*Unknown refers to visitors and/or declined to state on EPIC

### KEY PERFORMANCE INDICATORS

BERT ACTIVATIONS/CALLS

July **98** Cumulative\* **647**

\*Cumulative counts are data since January 2024



#### Three Criteria for a Successful Intervention:

- Patient/visitor remained safe of injury
- Staff remained safe of injury
- BERT performed an intervention that:
  - de-escalated the challenging behavior/behavioral emergency
  - did not escalate a challenging behavior

Show of Support

Verbal Redirection

Assist with Escorts

Verbal De-escalation

### EXAMPLE OF A SUCCESSFUL BERT ACTIVATION

BERT was activated for a patient on a 5150 hold who was actively attempting to leave the hospital.

#### VERBAL REDIRECTION and Develop Safety Plan

Upon BERT arrival, the patient was by the elevator, insisting to leave the unit. The patient verbalized needing to go home and return to work. BERT engaged with the patient and reinforced the importance of staying at the hospital for continued treatment. The patient was initially difficult to redirect, but eventually amenable to return to room after multiple prompting. BERT assisted the patient in returning to bed, provided snacks, and turned on the television for distraction. BERT collaborated with the primary team and the MD to develop a safety plan in the case patient attempted to leave the hospital again. BERT remained for standby assist while the primary RN administered emergent oral medications for anxiety and agitation. The patient remained with a coach for safety.

### Education & Trainings

July Monthly Safety Tip Topic:  
Allow Time for Decisions

BERT

JULY 2024 REPORT

For further information about BERT, please contact:

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