

# BEHAVIORAL EMERGENCY RESPONSE TEAM (BERT)

## Rounding Responder Team OCTOBER 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



**ROUNDING CONSULTATIONS**

October **186** Cumulative\* **2313**

\*Cumulative counts are data since January 2024

### EXAMPLE OF A ROUNDING CONSULTATION

During rounds, a charge nurse (CN) brought up a patient known to BERT who had been agitated and demanding a charger to her electric wheelchair. The patient has a history of assaultive behavior and making false accusations against staff. BERT informed the CN of multiple previous incidents in which the patient had assaulted staff members. The social worker has been involved in the plan and has placed an order for the charger to address the patient's needs. In the meantime, BERT recommended that the CN and nursing staff always have a second staff member present for safety. BERT suggested to establish clear expectations for the patient's behavior and clinical care, as well as implementing a behavioral contract. Additionally, the CN was advised to ensure that staff leave the room if they feel unsafe providing care and to immediately call for additional support from BERT, the charge nurse, or the provider team.

### DEPARTMENT/LOCATIONS

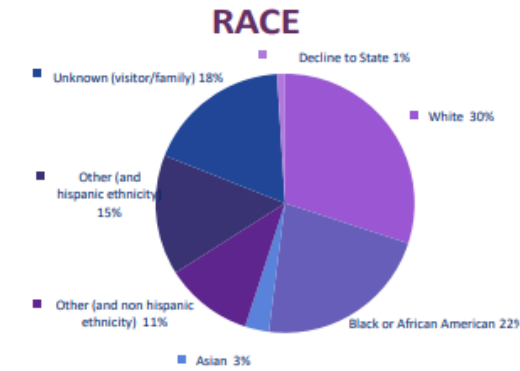
BERT ACTIVATIONS/CALLS

H24/25	1	H54/56	10
H26	5	H58	1
H32/38	3	H62/64	9
H34/36	4	H66/68	7
H42/44	8	H76/78	2

**Outpatient Specialty Clinic** UCC: 8 4C: 1  
5A: 3  
**Additional Areas** Café: 1 Outpt Rx: 2  
Bldg 25 Lobby: 4  
Bldg 5 Lobby: 3  
Endoscopy: 1

\*Outside of the hospital and Psychiatric units, aside from HS2, are not covered for BERT activations. BERT support was provided per the department's and/or AOD's request

### 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

### KEY PERFORMANCE INDICATORS



BERT ACTIVATIONS/CALLS

October **73** Cumulative **890**

\*Cumulative counts are data since January 2024



#### Three Criteria for a Successful Intervention:

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

Show of Support

Verbal Redirection

Assist with Escort

Verbal De-escalation

### EXAMPLE OF A SUCCESSFUL BERT ACTIVATION

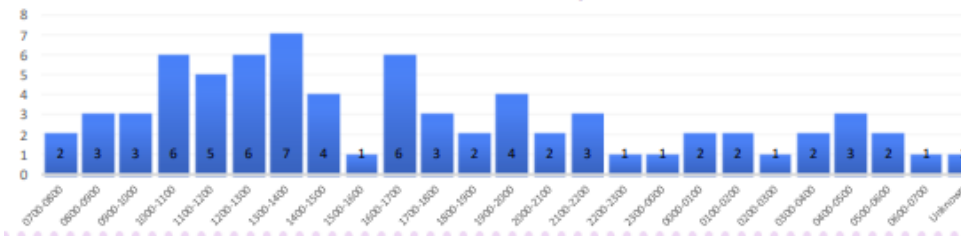
BERT activated for a patient who arrived back to the unit s/p lung biopsy with an acute change in behavior.

#### VERBAL DE-ESCALATION, ACTIVE LISTENING, and ASSIST WITH EMERGENT MEDICATION

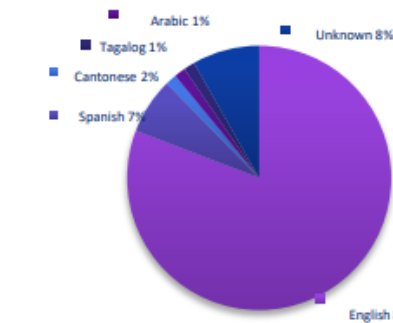
Upon BERT arrival, the patient was observed to be in acute distress, anxious and fearful, crying, hyperventilating, and yelling out staff to not come near him. With the assist of a Spanish speaking staff, the patient was able to verbalize triggering of PTSD during the procedure where the sedation, positioning, and restraining triggered the patient's past traumatic experiences. BERT staff and primary RN established a safe environment, provided active listening, apologized for the traumatic experience and reassured the patient for his safety. BERT and primary RN asked permission to approach the patient before proceeding with care. The patient was initially reluctant to engage and accept medication, but was amenable to taking PO PRN medications for anxiety with multiple prompting and encouragement. The patient was verbally de-escalated with verbal cues and PRN medication. The MD was called to bedside for further support per patient's request.

### TIME

BERT ACTIVATIONS/CALLS

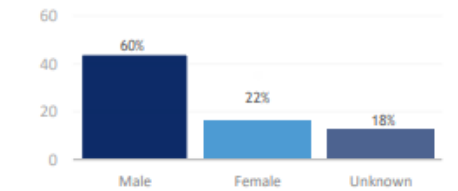


### PREFERRED LANGUAGE

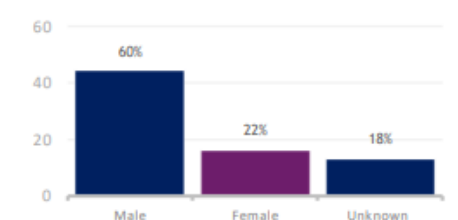


\*BERT currently has staff certified as proficient in Cantonese, Vietnamese and Burmese and has members that can communicate in Spanish and Tagalog

### SEX ASSIGNED AT BIRTH



### GENDER IDENTITY



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



### Education & Trainings

October Monthly Safety Tip Topic:  
Choose Wisely What You Insist Upon (Continued)

### BERT OCTOBER 2024 REPORT

For further information about BERT, please contact:

Joan Torres, RN, MSN, MBA, CNL  
BERT Nurse Manager  
joanpauline.torres@sfdph.org