

VISION ZERO INTER-AGENCY TRAFFIC FATALITY RESPONSE

Update: September 2017

Background

The Vision Zero SF Inter-Agency Traffic Fatality Response protocol was developed to coordinate the City and County of San Francisco's response to traffic deaths to support the families of victims of traffic fatalities, and eliminate communication gaps to ensure families receive available support services. It was developed in response to feedback from families who lost loved ones in traffic collisions on San Francisco Streets, who are now members of the Bay Area Families for Safe Streets. The current protocol is activated when a traffic fatality occurs on the scene of a collision or in the emergency room immediately following a collision. Coordinating agencies include: the San Francisco Medical Examiner's Office, the San Francisco Police Department, the San Francisco Department of Public Health, and the District Attorney's Office. A pilot of the protocol was launched July 1, 2017, and the latest version of the protocol and referral sheet are attached separately.

Response to Date

Since July 1, 2017, four people have died from transportation-related injuries on San Francisco streets: two motorcyclists and two pedestrians. In all cases, the SF Police Department, Medical Examiner's Office, SF Department of Public Health Comprehensive Crisis Services and SF District Attorney's Office Victim Services staff coordinated to ensure that victims and their families received timely notification of the fatality consistent with City law and policy, and support services from SFDPH and the District Attorney's Office. City staff from the Medical Examiner's Office, SF Police Department, SF Department of Public Health, and District Attorney's Victim Services meet within a week of a fatality to debrief regarding the fatality response and whether any changes are needed to the protocol.

Successes to Date

To date, the protocol has helped to build and strengthen collaboration between City agencies in responding to traffic deaths and providing services to victims and their family members, as well as increasing communication overall. It has created and strengthened communication channels between service providers and family members to ensure the family members are aware of and access needed support services and referrals - including crisis counseling and financial support for funeral/burial expenses and other compensation. From its inception, all participating agencies have demonstrated high levels of commitment to the partnership by participating and presenting in meetings, contributing opinions and constructive feedback to create and revise the protocol, sharing information, expanding



















internal protocols and procedures, and assigning key contact people. Participating staff are also continuing to work to institutionalize the protocol by conducting staff trainings and bringing new staff on board as needed. Benefits of the protocol for City Staff include that SFPD Collision Investigators are supported by SFDPH Crisis Counselors at the collision scene, knowing that families, victims and witnesses are receiving crisis counseling from trained staff, and that the SF District Attorney's Victim Services team is able to provide services much more quickly within the critical time windows for grieving families.

Lessons Learned

Based on lessons learned from responses to the above four fatalities, the original protocol was revised to have SFDPH Comprehensive Crisis Services notified when a traffic fatality occurs through the SFPD's Department Operations Center (DOC), to ensure consistent and timely notification so they can respond to the scene. SFDPH Comprehensive Crisis Services is now given the name and cell number of the SFPD Investigator that will be the point of contact for them to reach out to regarding whether services are needed at the scene. When services are not needed on scene, a referral to SFDPH Comprehensive Crisis Services is provided to the family by the Medical Examiner's Office and the District Attorney's Office.

Next Steps

Next steps for the protocol include expanding outreach and services to the families of patients who die after being hospitalized due to transportation-related injury. This work is slated to begin in Winter 2018.

Acknowledgements: This work is a collaboration between the City and County of San Francisco's Medical Examiner's Office; SF Police Department; SF Department of Public Health's Comprehensive Crisis Services, Community Health, Equity and Promotion, and Environmental Health Branch; and the District Attorney's Office Victim Services. We are grateful to the Bay Area Families for Safe Streets for candidly sharing their experiences with us so we can implement changes to provide more coordinated support to the families of victims of traffic deaths on San Francisco streets.

For more information, please contact: Megan Wier, Director, Program on Health, Equity and Sustainability, Environmental Health Branch, Population Health Division, San Francisco Department of Public Health: <u>Megan Wier@sfdph.org</u>.





















TRAFFIC FATALITY RESPONSE CHECK LIST *PILOT - EFFECTIVE: JULY 1, 2017* Revised: September 6, 2017

When Traffic Fatality Occurs on the Scene of Collision OR In the Emergency Room Immediately Following a Collision

Purpose: To coordinate the City agency response to traffic deaths to support victims of traffic fatalities and their family members, and eliminate communication gaps to ensure families receive available support services.

	Responsible Agency	Action	Timeframe for Completion	Completed in timeframe (Y/N)	Revisions to Protocol Needed?
1	SFPD/SFFD/E MT/SFDPH	Respond to the scene of the collision or Emergency Room.SFFD/Paramedic pronounces death.SFFD or other agency contacts Medical Examiner (ME).			
		 SFPD Investigator to request that Department Operations Center (DOC) contact SFDPH Crisis. DOC will provide SFDPH Crisis (415-970-3800) with the name and cell # of the SFPD Investigator that will be the point of contact for them to reach out to re: whether services are needed at the scene, and when they arrive at the collision scene. 			
2	ME	ME responds and takes victim to Medical Examiner's Office, confirms identity of victim.			
3	SFPD	Once victim is declared deceased, SFPD contacts DOC. SFPD DOC then communicates to entire SFPD who is officer in charge in case next of kin tries to proactively contact SFPD.	Within 24 Hours		

















4	ME	ME notifies next of kin in person or via phone if they live in San Francisco, or notifies corresponding county agency if next of kin lives outside of SF before exam. ME completes examination.	Once next of kin is notified, timeframes for next action items are in effect	
5	ME	ME provides contact information to next of kin for SFDPH Crisis Response Team, DA's Office-Victim's Services, and SF Bay Area Families for Safe Streets.	At time of notification of death	
6	ME	ME calls SFPD TCIU Investigator to inform them that contact has been made with next of kin. ME emails next of kin information to <u>Anita.Bonilla@sfgov.org</u> at the DA's Office – Victim's Services.	ASAP	
7	SFPD	DA Victim's Services reviews SFPD TCIU DOC report on a daily basis during the week and goes to the TCIU Office to obtain completed <i>Traffic Fatality Victim Initial Contact Form</i> .	Daily, Weekdays	
8	SFPD	SFPD TCIU Investigator contacts next of kin via phone re: investigation.	Within 48 hours	
9	DA, SFDPH	DA Victim's Services contacts victim family to provide support services. Provides family referral to SFDPH Crisis Response (if they did not respond to collision scene) <u>and</u> notifies SFDPH Crisis Response of contact and emails <u>Stephanie.Felder@sfdph.org</u> to confirm information was shared. Provides contact information for the SF Bay Area Families for Safe Streets.	48 hours after first contact made by ME or TCIU	





Acronyms:

DA = District Attorney's Office ME = Medical Examiner's Office SFPD = San Francisco Police Department SFPD TCIU = San Francisco Police Department, Traffic Collision Investigators Unit SFFD = San Francisco Fire Department SFDPH = San Francisco Department of Public Health, Crisis Response Team

