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## HEALTH COMMISSION

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### MINUTES HEALTH COMMISSION COMMUNITY AND PUBLIC HEALTH COMMITTEE Tuesday, January 18, 2011 2:00 p.m. 101 Grove, Room 302, San Francisco, CA 94102

#### 1) CALL TO ORDER

Present: Commissioner Margine Sako, Chair  
Commissioner James M. Illig, Member  
Commissioner Catherine Waters R.N., Ph.D., Member

The meeting was called to order at 2:06pm

#### 2) APPROVAL OF THE NOVEMBER 16, 2010 COMMUNITY AND PUBLIC HEALTH COMMITTEE MINUTES

Action Taken: The minutes of the November 16, 2010 Community and Public Health Committee were unanimously approved.

#### 3) THE NEW PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE (PHEPR) SECTION

Tomas Aragon M.D., DPH Health Officer and Director of Population Health and Prevention, and Erica Pan M.D., MPH, Director of the Public Health Emergency Preparedness and Response Section, made the presentation. They explained that the new section creates an effective centralized organization to coordinate all disaster and emergency planning activities that had previously been implemented throughout the DPH.

The following are highlights of the discussion of this item:

Emergencies are defined as local events that the DPH and City services can effectively handle; disasters are defined as events that impact a larger group of people and that require assistance

beyond City services; catastrophes are defined as devastating large-scale events that eliminate the possibility of local services being able to deal with the volume and size of the disaster.

The DPH contractors must have an emergency/disaster response plan. As specified in their contracts, the City will reimburse these community based providers for their participation as part of the City's response to a disaster/emergency.

DPH will be providing basic disaster/emergency preparation training within neighborhoods throughout San Francisco.

All DPH staff are disaster/emergency responders.

#### Commissioner Comments/Follow-Up

Commissioner Sako recommended that disaster/emergency planning should be included in the City's needs assessment as part of the development of the Health Service Master Plan.

#### **4) THE EARLY PSYCHOSIS PROJECT**

Bob Cabaj, M.D., Community Behavioral Health Services Medical Director; Bob Bennett, CEO of the Family Service Agency; and Martha Shumway and Rachel Loewry, UCSF Department of Psychiatry, gave the presentation.

#### The following are highlights from the discussion of this item:

Individuals who are eligible for participation in the program must be within five years of onset of their first schizophrenic episode.

The program model provides six months of intensive treatment and then another 18 months of check-in and service coordination with the goal to transition participants to other community providers.

The program uses medications to assist with symptom management so the clients can actively and effectively participate in treatment. Clinical staff utilize a system to try medications in a specific sequence starting with those that have the least side effects.

The most common point of entry for the program is family referrals. However, the program also works with schools, various psychiatric facilities and Larkin Street Youth Center.

The multi-disciplinary teams consist of psychologists, vocation/education staff, peer advocates, counselors, therapists, and family members.

Providers participate in forty three hours of training and must also work under a clinical supervisor for a number of hours to insure consistent quality of care. At present, only providers working for the project have been trained in its treatment paradigm. In the future, community providers will also have training opportunities. Current community education efforts have focused on training providers to recognize early symptoms of schizophrenia.

A detailed cost analysis will be completed as the project progresses. It is anticipated that the program costs will be similar to standard community psychiatry outpatient programs. However, participant outcomes are expected to be much greater and more impactful.

Commissioner Comments/Follow-Up

Commissioner Sako thanked the group for their excellent work and asked Mr. Morewitz to calendar an update on this project in one year.

**5) COMMUNITY AND PUBLIC HEALTH COMMITTEE CALENDAR**

Commissioner Sako asked Mr. Morewitz and Ms. Garcia to communicate with Supervisor Jane Kim's office to request a coordinated effort in the review and consideration of Pedestrian Safety issues which are on the calendar to be presented at the next Community and Public Health Committee meeting.

**6) EMERGING ISSUES**

There was no discussion of this item.

**7) PUBLIC COMMENT**

There was no public comment.

**8) ADJOURNMENT**

The meeting adjourned at 3:54pm.