

COMMUNITY OUTREACH

Community outreach has been considered an integral component of this project. While trauma care is a valued public good in San Francisco, it is also essential to provide information to the public about the background and purpose for this Study and to elicit questions and concerns from SFGH's most proximal neighbors, as well as the broader San Francisco community. From October 2002 through February 2003, widespread outreach to neighborhoods and communities served by SFGH, civic organizations, and the San Francisco healthcare provider community was conducted, and future updates are planned. SFGH physicians and administrators, as well as Gerson/Overstreet project team members provided information on the goals, objectives and progress of the needs assessment and feasibility study. Questions, concerns, issues and objections were all recorded from community participants.

GOALS OF OUTREACH EFFORT

Specifically, the outreach effort was designed to address the following:

- Acquaint stakeholders with the ongoing study;
- Describe air medical access and its linkage to the SFGH Trauma Center;
- Describe the study's objectives: needs assessment and feasibility of air medical access at San Francisco General Hospital;
- Listen and respond to community questions and concerns, ultimately bringing them to the attention of the Health Commission;
- Outline the public decision-making process and timeline for this project and any subsequent follow-up, and
- Assess the level of public support for air medical access to SFGH.

PUBLIC MEETINGS

Very early in the project, a decision was made to combine the majority of the Helipad Study outreach with the ongoing community efforts for the SFGH Rebuild Project, formally called the Long Range Service Delivery Plan. Many of the same constituencies have an interest in both air medical access and the long range location planning decision for SFGH, which deals with the new seismic safety standards required by Senate Bill 1953.

To date meetings have been held with the following constituencies:

Neighborhood Groups

- East Mission Improvement Association
– 3 meetings
- Potrero Hill Community – 2 meetings
- Mission District leaders
- Bayview/ Hunters Point Community
- Community First Coalition

Healthcare Provider Community Groups

- San Francisco Medical Society
- San Francisco Hospital Council
- NICOS (Chinatown healthcare leaders)
- Operations Advisory Committee of the San Francisco Emergency Medical System

Civic Organizations

- SFGH Rebuild Combined Advisory Group
- San Francisco Planning and Urban Research Association (SPUR) – 2 meetings

Description of Community Meetings: Neighborhood Groups

East Mission Improvement Association. After an initial planning meeting with leadership of the East Mission Improvement Association, a community meeting was held in Carr Auditorium at the SFGH

campus on November 18, 2002. The meeting was publicized via leaflets, distributed door to door within an area suggested by the leadership of the East Mission Improvement Association. Approximately 75 neighbors attended and heard presentations from Tony Wagner, CHN Director of Hospital Systems, on the SFGH Rebuild effort and from Gene O'Connell, SFGH CEO and Dr. Robert Mackerzie, SFGH Trauma Medical Director, on the Helipad Study.

Members of the public were intensely concerned about, and in many cases opposed to, the installation of a helipad at SFGH. Noise was the biggest issue of concern, followed by safety. Members of the East Mission community felt that the dense, urban, residential area surrounding San Francisco General Hospital is not compatible with helicopters. However, it is also clear that the majority wants to support the trauma center and its mission, but is skeptical of the link stated between trauma care and air medical access. Members of the group handed out their own materials, opposing the Helipad study. See Appendix E for copies of this material. Because the Study was in its initial stages, the SFGH staff did not yet have information on helicopter noise generation, anticipated numbers of flights, proposed site locations, or safety data. A commitment was made to return to the group when more results were available.

On February 11, 2003 a second meeting with the Association was held, with approximately 40 neighbors in attendance. Hospital representatives Tony Wagner and Gene O'Connell, with consultant Mike McClintock of Gerson/Overstreet Architects, presented preliminary initial findings of the overall study. This information included: documenting the need for air access to San Francisco General Hospital and outlining the feasibility of constructing a helipad. Attendees raised questions about noise, the proposed timeline, the rationale for the need, safety, and the possible relocation of the hospital to Mission Bay, the decision-making process, diversion, and the fiscal impacts of a helipad. The dialogue was productive, but the Association took no action. A few individuals, including former Mayor Art Agnos, who is a resident of Potrero Hill, did come forward and indicate their

support of a medical helipad. Most of these individuals indicated that noise mitigation is a priority.

Potrero Hill. At their regular meeting at the Potrero Hill Neighborhood House on November 19, 2002 the Potrero Boosters heard presentations made by Tony Wagner on both the Rebuild and Helipad efforts. About 25-30 residents were in attendance. There were many questions and heated opposition by a few individuals, some of whom had also attended the previous East Mission meeting. The concerns were similar to those voiced at the first East Mission meeting. Residents of Potrero Hill expressed already feeling “under siege” by television traffic and news helicopters. It is clear that this perceived nuisance, in large part fuels the opposition to medical helicopters. A few residents suggested locating the helipad at Mission Bay. Another resident from the eastern portion of Potrero Hill, however, objected, stating that Dogpatch residents would be impacted by this and would oppose a Mission Bay proposal. A few individuals came forward informally at the end of the meeting to indicate they would support the helipad, and most definitely, supported the Trauma Center.

A follow-up meeting with Potrero Hill residents was held on February 20 at the Potrero Hill Neighborhood House. Approximately 20 members of the public were there. Gene O’Connell, Tony Wagner and Mike McClintock made presentations. Many of those present had previously attended other presentations. Attendees were, by and large, opposed to a helipad with the primary concern being noise, its potential to disrupt sleep and daily life, and its impact on property values. Questions and comments also focused on television news helicopters hovering over the freeway, ability to guarantee limits on flights, a frustration that “noise maps” were not presented and a perceived lack of specificity. There was skepticism about the objectivity of the study, about why alternative sites, such as China Basin, were not explored, hospital capacity issues, diversion, and the extent of the community process. Finally, there were questions about whether revenue from insured patients would be directed toward SFGH, and whether lives of San Francisco residents would be saved by helicopter access. Former Mayor Art Agnos, again in

attendance expressed support for the helipad. A petition for signatures of those opposing the helipad was circulated at this meeting.

Mission District. Mission community leaders met at the Mission Language and Vocational School to discuss the Rebuild and Helipad studies on November 25, 2002. The attendees were very supportive of the hospital and the Trauma Center, and especially of keeping the hospital in its current location in the Mission. Tony Wagner presented information on the Hospital Rebuild and John Kanaley, Sr. Associate Administrator for Facilities, spoke about the helipad. Dr. Kevin Grumbach spoke about the importance of the helipad to the quality of care at the trauma center. There were questions about why a helipad was needed, but there was no outright opposition to the proposal. One of the attendees had served in Vietnam and was supportive of the role helicopters play in saving lives.

Bayview Hunters Point. Approximately 20 neighborhood residents attended a presentation on the rebuild and helipad projects at a meeting on January 29, 2003 at the Southeast Health Center. Tony Wagner, Judith Klain, Interim Director of CHN Planning, and Chris Wachsmuth, RN, MS, SFGH Associate Administrator for Trauma and Emergency Services presented. One resident said she opposed helicopters in the Bayview and would oppose them at SFGH because “too many fall down”. Another resident, representing the Community First Coalition disagreed. She felt that if helicopters are needed for medical reasons, they should be supported, but not in Bayview. The reference here was to the public safety landing site in the Hunters Point Naval Shipyard. It is felt that the Bayview already bears a disproportionate share of unwanted land uses.

The group expressed an interest in touring the trauma center. A minister who attended pointed out that San Francisco serves as a regional trauma center, caring for visitors and commuters. The Trauma Center was described as a regional asset that should be preserved.

Community First Coalition. A follow-up meeting with the Community First Coalition was held on

February 21, 2003 at the offices of Business Development, Inc., in the Bayview. Eight neighborhood representatives listened to a presentation regarding the Trauma Center, the Study, and its findings made by Ms. Chris Wachsmuth. A wide-ranging discussion followed. Attendees were skeptical because of past negative experiences with the Navy, the Police Department, DPH and other government agencies. They questioned whether scarce resources would be directed from other medical needs, toward this project, because it is perceived as more “glamorous”. The fiscal benefits of the helipad were described and well received. Questions about safety were raised and the community outreach effort was praised. While the group indicated that they were inclined to support the project, there was no final decision made at that time.

Description of Community Meetings: Healthcare Provider Organizations

San Francisco Medical Society. On February 3, 2003, Ms. Chris Wachsmuth, Dr. Robert Mackersie, and Dr. John Brown, EMS System Medical Director presented the Helipad Study to the San Francisco Medical Society Executive Committee. After some discussion about vulnerabilities of the current trauma system including the lack of rapid transport to a Pediatric Trauma Center, the Executive Committee of the Medical Society voted to endorse the helipad project and indicated that they would write a letter of support.

San Francisco Hospital Council. On February 6, 2003 Gene O’Connell presented the Helipad Study to the San Francisco Hospital Council. The Hospital Council unanimously voted to endorse the helipad project and indicated the Council would write a letter of support for air medical access to SFGH.

NICOS (Chinatown Health Community Coalition). On February 14, 2003, Anthony Wagner and Gene O’Connell made a combined Rebuild and Helipad Study presentation to NICOS members at Chinese Hospital. The group was very supportive of SFGH and the Trauma Center. They discussed what locations would work best for their communities and also provided feedback on the problems members of

the Chinese community experience when trying to access services at SFGH. The Director of NICOS indicated that the group looked favorably on the Helipad proposal and would be happy to present a request for support to their Board at the end of February.

Operations Committee of San Francisco Emergency Medical Services Section.

On February 17, 2003, Chris Wachsmuth, Associate Administrator for Emergency and Trauma Services and Ana Marino Ghosh, SFGH Trauma Business Manager, attended the meeting of the Operations Advisory Committee for the San Francisco EMS System. Ms. Wachsmuth presented the Helipad Study findings and responded to questions. EMS providers, especially the Chief Paramedic from the National Parks Service, which responds to emergencies within the Golden Gate National Recreation Area, felt strongly that the helipad was needed. A SFFD paramedic representative expressed similar sentiments. The public member of the committee stated that additional questions needed to be answered before his support would be given. The Committee voted to endorse the project and indicated it would be sending a letter of support.

San Francisco Emergency Medical Physicians Association.

Dr. John Brown has met with the San Francisco Emergency Medical Physicians Association during regular meetings over the extended period during which the Trauma Care System Plan was being revised. Most recently, some members of this group have voiced concerns that a helipad at SFGH, while potentially a benefit to San Franciscans requiring life-saving care, would impact Emergency Departments in the City with higher rates of ambulance diversion as air ambulance patients added to the Trauma Center admissions volume.

National Association of Emergency Medical Physicians.

Dr. John Brown met with the Air Medical Committee of the National Association of Emergency Medical Physicians in February 2003 and presented an overview of San Francisco's Trauma Care System Plan related to air medical access, and the current Needs Assessment and Feasibility Study. Committee

members commented on the lack of air access to the SFGH Trauma Center relative to national standards of care, and stated their intent to issue a letter to this effect.

Description of Community Meetings: Civic Organizations

Rebuild Combined Advisory Group Meeting. A presentation outlining the scope and process for the Study was made to the Rebuild Community Advisory Group on October 10, 2002. Members of the Hospital community were by and large supportive of the Helipad. East Mission Improvement Association residents who are members of this group indicated opposition to the helipad proposal, primarily on the basis of anticipated noise impacts.

San Francisco Planning and Urban Research Association (SPUR). SPUR met on January 23, 2003 to hear a presentation on the Rebuild and Helipad studies made by Tony Wagner and Gene O'Connell. The Urban Policy Committee of SPUR met on February 12, 2003 and voted to endorse a helipad at San Francisco General Hospital, indicating that they would send a letter of support.

EXPERT OPINIONS AND LETTERS OF SUPPORT

To elicit expert comments regarding the need for a helipad, as well as to create awareness of the Study, letters were sent to members of the health and public safety community. Included in this group were San Francisco hospital administrators, Emergency Department Medical Directors, regional EMS Agency administrators, Trauma Center directors, directors of San Francisco public safety departments, air medical service providers, SFGH Chiefs of Service, trauma specialty physicians, and other national and local trauma experts. Fifty-seven responses have been received to date. All have been positive and support the need for medical air access for the City of San Francisco. The letters very articulately describe the need for air medical access from a public safety and patient care perspective, the need for rapid medical intervention, trauma services, and the acceptable

standard of care for such services. All letters are included in Appendix F.

HELIPAD HOTLINE

A telephone Helipad Study Hotline was established at SFGH. [206-3295] to receive questions and comments about the study. The number has been circulated for three months, but to date no calls have been received.

COMMUNITY OUTREACH MATERIALS

SFGH staff and consultants developed handouts and other materials for the Helipad Study. A sample of the community outreach material is attached in Appendix G.

SUMMARY OF COMMUNITY CONCERNS

The concerns of the community tend to fall into a number of major themes and are summarized in Table 7-1 below.

CONCLUSION

The Community Outreach effort for this study was considered successful because of the participation of neighborhood interest groups, healthcare providers and civic organizations. The time and effort extended by the individual members of these groups provided this Study with important questions, issues and concerns that will certainly require additional work. The quality of this Study's outcome is directly attributable to the contributions of time and discussion made by all participants in the outreach activities.

Throughout the City, awareness of the value of the Trauma Center at San Francisco General Hospital is high. In the medical community, in neighborhoods both closely linked to the SFGH Potrero campus and located at some distance, as well as within City-wide groups, there is support for a helipad as a part of San Francisco General Hospital's Level I Trauma Center. Among immediate neighbors of the hospital, attitudes toward the helipad range from skepticism and adamant opposition to support requiring additional information prior to full endorsement. Concerns about

noise and, to a lesser extent, safety, predominate. At meetings of East Mission, Potrero Hill and Bayview residents, opponents made their opposition to a medical helipad very clear, prior to release of the Study findings regarding noise, safety, and value for injured individuals.

Endorsements were received from the San Francisco Hospital Council, the San Francisco Medical Society, SPUR, the Operations Advisory Committee of the SF EMS System, the California State EMSA, the San Mateo EMSA, and the San Francisco Chapter of the Emergency Nurses Association. The individual institutions that endorsed the project were: Chinese Hospital, St. Francis Hospital, the UCSF Medical Center, Seton Medical Center, U.C. Davis Medical Center, Marin General Hospital, and Santa Clara Valley Medical Center. In total, fifty-seven letters of support were received strongly endorsing the need for air medical access for the City of San Francisco and its Level I Trauma Center.

Should the Helipad project proceed, it will be necessary to identify and clarify the extent of negative impacts on neighboring residential areas as part of the environmental review process and to bring forth the findings for public review. Opportunities to mitigate these impacts will need to be identified and actively pursued to achieve positive results for everyone in San Francisco.