



City and County of San Francisco
Edwin M. Lee, Mayor

San Francisco Department of Public Health

Barbara A. Garcia, MPA
Director of Health

Director's Report for Health Commission Meeting of

May 20, 2014

A current overview of issues affecting the state of public health in San Francisco

<http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp>

May Revision of the Governor's Budget

On May 13, 2014, Governor Brown released the May Revision to his FY 2014-15 budget, originally proposed in January 2014. The revised budget, which allocates \$108 billion in State General Funds, includes an increase of \$2.4 billion from the previous proposal. The total Health and Human Services budget stands at \$136.7 billion (\$29.6 billion General Fund, \$107.1 other funds), which reflects an increase of \$839 million from the January budget and an increase of 2.7% from last year. While staff is still evaluating the May Revision, we believe most of the changes proposed have been assumed in DPH's FY 14-16 budget submission and there are no significant impacts to DPH. Following are key budget proposals of interest to SFDPH: Medi-Cal

- An overall increase of \$1.2 billion over the January budget is allocated to Medi-Cal for FY 2014-15. A majority of this allocation is to cover the cost of increased Medi-Cal enrollment, which has surpassed original projections. This also includes funds for the CalHEERs system with the aim of reducing the Medi-Cal enrollment and redetermination backlog. These changes are assumed in DPH's FY 14-16 Budget.
- The Department of Health Care Services (DHCS) revised its Medi-Cal enrollment estimates to include an additional 1.2 million persons. Projected enrollment now stands at 11.5 million (approximately 30% of the State population) by the end of the 2014-15 fiscal year, and includes 815,000 people not eligible for the 100% federal financing under the Affordable Care Act (ACA). These changes are assumed in DPH's FY 14-16 Budget.
- The State continues to expect to recover in savings from counties \$900 million in AB 85 realignment funds for the 2014-15 year. In the May revise the total savings is offset by increased CalWORKS costs of \$175.1 million. The state has provided revised allocation for San Francisco, which is lower than what was expected in the January budget. This allocation, however, is only an estimate and subject to final reconciliation based on actuals in FY 2015-16. We are continuing to working with the Mayor and Controller's Office to determine how much to assume in the City's FY 2014-16 budget.
- \$187.2 million is allocated for Medi-Cal managed care plan rate increases. This increase reflects a regular, actuarial increase independent of any other Medi-Cal rate provisions. These changes are assumed in DPH's FY 14-16 Budget.

- \$191.2 million is allocated for increased mental health and substance use disorders available through Medi-Cal. These changes are assumed in DPH's FY 14-16 Budget.

HIV/AIDS

- \$26.1 million in federal funds are included to cover two new drugs recently approved for the treatment of Hepatitis C under the AIDS Drug Assistance Program (ADAP). This initiative will increase access to Hepatitis C medication for SFDPH's co-infected patients from non SFDPH pharmacies, but there will be no direct impact to DPH's Budget.
- The Office of AIDS-Health Insurance Premium Payment Program is directed to explore mechanisms to pay out-of-pocket costs for program clients purchasing private insurance beginning January 2016. This will improve access to private health insurance purchased through Covered California for people living with HIV, but no significant impact to DPH.

Other

- \$2 million is allocated as placeholder funding for county administration costs related to the Katie A. v. Bonta settlement agreement, which addresses mental health and supportive services for youth in or at risk for foster care placement. Although San Francisco incurs these administrative costs, our relative proportion of the \$2 million allocated statewide would be minimal.

SFGH in The New York Times

San Francisco General Hospital and Trauma Center's stellar work in labor and delivery services was featured in the New York Times Fixes column on May 7. The story dubbed SFGH "the safest place in California to have a baby" and featured the many ways that SFGH exceeds national standards in obstetrics services. These include the low rate of C-sections and the high rate of vaginal births in subsequent pregnancies after C-sections. The General's teaching model and patient-centered use of mid-wives were highlighted as keys to our success.

UC Chancellor's Awards for Public Service

Staff from Jail Health Services' HIV & Integrated Services program (formerly FAP) received a UC-Berkeley Chancellor's Award for Public Service in recognition of From the Center, a collaborative project that implemented digital education in the San Francisco jails. The project provided incarcerated women the opportunity to learn about HIV/AIDS by creating digital stories sharing the impact that HIV has had on their lives. The women wrote and illustrated their stories, worked with a creative writing instructor to edit them, and then digitally produced them. These stories offer vital perspectives and interventions on HIV/AIDS and have been used in both community and academic settings and with other incarcerated and formerly incarcerated populations. The stories have reached over 500 prisoners in the past two years. Recognition for this project goes to Margaret Rhee from UC Berkeley and Department of Public Health employees Isela Gonzalez, Allyse Gray and Kate Monico Klein.

Carolyn Sufrin, MD, an attending in Ob/Gyn at SFGH and who also works for Jail Health Services, was awarded the UCSF Chancellor's Award for Public Service also for her work with incarcerated women. Dr. Sufrin has worked with JHS for over 6 years to improve the services provided to women in the SF County Jail. She has helped to expand family planning services and established a dysplasia clinic for the on-site management of abnormal pap smears, including

culposcopic examinations. Through her vision and efforts, this reproductive health specialty clinic has now become a weekly fixture at the jail, staffed by an attending from SFGH and Ob/Gyn residents, who learn about health disparities in this unique setting. With Dr. Sufrin's assistance, JHS is able to provide on-site comprehensive obstetrical and gynecological care that women might not otherwise obtain in jail or the community.

SF Man Determined to give Back - The San Francisco Examiner

The Examiner's May 11 front page featured the compelling story of grateful patient Antonio Garcia's efforts to give back to San Francisco General Hospital. Four years ago, trauma surgeons at The General saved his life after a bicycle accident. Garcia is organizing a 30 kilometer run to raise \$30,000 to celebrate his health and show his gratitude.

Congressional Hearing

On May 1 in Washington D.C. Dr. Susan Philip, Director of Disease Prevention and Control Branch of the Population Health Division of SFPDPH, presented in a Congressional briefing entitled "Drug Resistant Gonorrhea: Impact on HIV Prevention and Health Equity" hosted by the National Coalition of STD Directors (NCSDD). Dr. Philip is the STD Controller for San Francisco, and spoke in her role as Chair of the Board of Directors for NCSDD. The briefing was well attended by Congressional Staff as well as public health and industry representatives. Gonorrhea remains an important public health concern in San Francisco, and disproportionately affects gay men, men who have sex with men and African American adolescents. San Francisco, along with other cities on the West Coast of the US, is a site of possible emergence of drug resistant gonorrhea. The goal of the briefing was to remind policy makers of the important public health efforts to control gonorrhea and to urge continued support for public and private innovation in surveillance, testing, and new treatments for this public health problem.

Mirant Progress Report

The April 2014 Mirant Settlement Progress Report: Potrero Hill Community Health Projects has been released. This report serves as the first update on the progress of each funded project and its benefit to the residents of impacted neighborhoods. Following an Executive Summary of these six projects, the body of the report provides project profiles and progress reports from each funded agency, documenting activities and outcomes through January 2014.

The San Francisco Board of Supervisors passed Ordinance No. 217-11, approved by Mayor Edwin Lee November 9, 2011, appropriating \$1,000,000 of Mirant Potrero L.L.C. Settlement Funds to the Department of Public Health for neighborhood improvement and mitigation in the neighborhoods most impacted by the Potrero Power Plant. Based on recommendations prepared by the San Francisco Asthma Task Force and the Power Plant Task Force, the Board approved expenditures allocated to four special revenue funds to fund six distinct projects. Subsequent to funds being initiated in November 2011, DPH established work orders with appropriate City agencies, issued Requests for Applications, contracted with external non-profit agencies, and completed personnel requisitioning, interviewing and hiring to establish the intended projects. Funds are administered by the DPH Population Health Division Environmental Health Branch.

Potrero Hill and Bayview residents have greatly benefitted from the health-promoting projects that have been funded by the Mirant Settlement. We greatly appreciate the involvement of multiple City and non-profit agencies in implementing these projects.

SEIU-UHW and California Hospitals Announce Three-Year Agreement

A wide range of California hospitals and health care systems and the California Hospital Association reached a landmark agreement with the Service Employees International Union-United Healthcare Workers West (SEIU-UHW) on May 5th, 2014. As a part of the three year agreement, the hospitals and the union will launch a joint \$100 million advocacy campaign to increase Medi-Cal reimbursement rates and to improve service delivery. Additionally, SEIU-UHW will not pursue two ballot initiatives that would have sought limitations on hospital billing and executive compensation. The two sides also agreed to a code of conduct that will guide ongoing conversations between union representatives and hospital employees.

Public Health Officials Offered Healthy Tips for Safety During Heat Wave

As a heat wave descended upon the Bay Area the week of May 12, 2014, health officials from the San Francisco Department of Public Health offered tips to help withstand the predicted 100-plus degree days.

Everyone can be affected by the heat but age, medical condition and alcohol consumption can quickly complicate how individuals respond to periods of excessive heat. Populations vulnerable to heat-related illness include: people age 65 and over; infants and young children; people with medical conditions such as diabetes, high blood pressure, heart disease, obesity, asthma, and respiratory conditions; and people who consume caffeine or alcohol.

Drs. Tomas Aragon (Health Officer & Director, Population Health Division) and Naveena Bobba (Director, Public Health Emergency Preparedness and Response, PHD), recommended the following tips for preventing heat and sun-related illnesses: drink plenty of cool water and stay hydrated (Take your own bottle to ensure a supply and look for refilling stations); don't wait until you're thirsty to drink; wear light-colored, light-weight clothing and a hat; if you consume alcohol or high-sugared drinks, do so in moderation; wear sun screen and reapply as needed; and take a break from the sun and heat in the shade or by seeking out a cooler environment

It is also important for friends and family members to be able to recognize when someone may be suffering heat-related symptoms, whether due to the temperature, sun exposure, too much alcohol or other substance, or a combination. Seek medical help if any of the following signs or symptoms appears: difficulty breathing; red, hot, dry skin with no sweating; rapid, strong pulse throbbing headache, dizziness, nausea; delirium (confusion); and chills.

Middle East Respiratory Syndrome (MERS)

Because of the recent two cases of Middle East Respiratory Syndrome (MERS) in the United States in travelers from Saudi Arabia, the San Francisco Department of Public Health, Population Health Division issued an updated clinician Health Advisory on May 7, 2014.

Middle East Respiratory Syndrome (MERS) is viral respiratory illness first reported in Saudi Arabia in 2012. It is caused by a coronavirus called MERS-CoV. Most people who have been confirmed to have MERS-CoV infection developed severe acute respiratory illness. They had fever, cough, and shortness of breath. More than 30% of these people died. So far, all the cases have been linked to countries in the Arabian Peninsula. This virus has spread from ill people to others through close contact, such as caring for or living with an infected person. However, there is no evidence of sustained spreading in community settings.

On May 2, 2014, the first U.S. case of MERS was confirmed in a traveler from Saudi Arabia to the U.S. The traveler is considered to be fully recovered and has been released from the hospital. Public health officials have contacted healthcare workers, family members, and travelers who had close contact with the patient. At this time, none of these contacts has had evidence of being infected with MERS-CoV.

On May 11, 2014, a second U.S. imported case of MERS was confirmed in a traveler who also came to the U.S. from Saudi Arabia. This patient is currently hospitalized and doing well. People who had close contact with this patient are being contacted. The two U.S. cases are not linked. The Center for Disease Control (CDC) and other public health partners continue to investigate and respond to the changing situation to prevent the spread of MERS-CoV in the U.S. These two cases of MERS imported to the U.S. represent a very low risk to the general public in this country.

CDC continues to closely monitor the MERS situation globally and work with partners to better understand the risks of this virus, including the source, how it spreads, and how infections might be prevented. CDC recognizes the potential for MERS-CoV to spread further and cause more cases globally and in the U.S. We have provided information for travelers and are working with health departments, hospitals, and other partners to prepare for this.

Labor Negotiations Update

The labor union and the City have negotiated 13 labor agreements. The three year contract terms include a 3% wage package increase starting October 2014, a 3.25% increase starting October 2015 and a Consumer Price Index (CPI)+0.25% increase starting July 1, 2016. CPI will be between 2 and 3%. Contract negotiations are ongoing for several unions.

The Whistleblower Program, operated by the Controller's Office, receives complaints regarding the misuse of City funds, improper activities by City officers and employees, deficiencies in the quality and delivery of government services, and wasteful and inefficient City government practices. There are a number of ways to file a complaint. Go to www.sfcontroller.org and click on the Frequently Requested tab to access the Whistleblower complaint instructions in the drop down menu.

**COMMUNITY HEALTH NETWORK
SAN FRANCISCO GENERAL HOSPITAL & TRAUMA CENTER**

May 2014
Governing Body Report - Credentialing Summary
(4/17/14 BUSINESS-MEC)

	05/2014	07/2013 to 06/2014
New Appointments	10	213
Reinstatements		
Reappointments	58	512
Delinquencies:		
Reappointment Denials:		
Resigned/Retired:	22	198
Disciplinary Actions		
Administrative Suspension		
Restriction/Limitation-Privileges		
Deceased		3
Changes in Privileges		
Voluntary Relinquishments	7	124
Additions	17	128
Proctorship Completed	14	170

Current Statistics – as of 4/7/14		
Active Staff	548	
Courtesy Staff	489	
Affiliated Professionals (non-physicians)	259	
TOTAL MEMBERS	1,296	

Applications in Process	48
Applications Withdrawn Month of May 2014	0
SFGH Reappointments in Process 6/2014 to 8/2014	172

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

MAY 2014

Health Commission - Director of Health Report

(May 8, 2014 Medical Exec Committee)

	May	(FY 2013-2014) Year-to-Date
New Appointments	0	10
Reinstatements	0	0
Reappointments	3	45
Delinquencies:	0	0
Reappointment Denials:	0	0
Resigned/Retired:	1	11
Disciplinary Actions	0	0
Restriction/Limitation-Privileges	0	0
Deceased	0	0
Changes in Privileges		
Additions	0	0
Voluntary Relinquishments	0	0
Proctorship Completed	0	9
Proctorship Extension	0	0

Current Statistics – as of 4/30//2014	
Active Medical Staff	36
As-Needed Medical Staff	15
External Consultant Medical Staff	41
Courtesy Medical Staff	1
Affiliated Professionals	6
TOTAL MEMBERS	99

Applications in Process	4
Applications Withdrawn Month of May 2014	0