OUR MISSION
Protecting and promoting health and well-being for all in San Francisco.

OUR VISION
Making San Francisco the healthiest place on earth.

OUR STRATEGIC PRIORITIES
The San Francisco Department of Public Health (SFDPH) has chosen five broad-based and far-reaching strategic goals which directly align with its True North core values and reinforce the Department’s commitment to its mission and vision.

- Strategy 1 – Advancing Equity
- Strategy 2 – Develop our People
- Strategy 3 – Lean Transformation
- Strategy 4 – Turning Data into Actionable Knowledge
- Strategy 5 – Homelessness & Behavioral Health

SFDPH is committed to providing quality health care and services for all San Franciscans, regardless of immigration or insurance status. We want all of our patients and clients to continue to seek services with their SFDPH providers, including care at our clinics and hospitals.

SFDPH's Mission, Vision, and Five Strategic Priorities were presented to the Health Commission on January 7th, 2020.

San Francisco Department of Public Health
101 Grove Street
San Francisco, CA 94102
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I am pleased to present the San Francisco Department of Public Health’s (SFDPH) Annual Report for Fiscal Year 2021 – 2022, describing the accomplishments of our programs and services throughout the City. Below are some highlights of the tremendous body of work SFDPH accomplished.

The COVID-19 pandemic has continued to test our strength and resilience, yet our City has come together repeatedly to protect our health and well-being. This fiscal year marked our one-year anniversary of an equitable and strategic vaccine rollout. Between December 2021 and when the first doses were administered, nearly 1.4 million COVID-19 vaccine doses had been delivered, inoculating about 750,000 San Franciscans with the best defense against the virus. The City also entered a new stage of the pandemic and embarked on a full reopening.

With COVID, San Francisco came together to address this public health crisis. We expect no less for our drug overdose epidemic. Building on DPH’s longstanding expertise and innovation, we launched the Street Overdose Response Team (SORT). SORT is a collaboration between DPH and the Fire Department that reaches people after they experience a nonfatal overdose and offers them risk reduction services. In addition to SORT, other overdose prevention efforts undertaken this year included expanding access to buprenorphine, increasing distribution of naloxone, and improving access to SUD treatment programs. As a Department and a City, we are stepping up to protect our community, to save lives, and to be a national model for overdose response and drug use disorder treatment.

To that end, the department also continued its the implementation of Mental Health San Francisco – an initiative that increases support and care for people experiencing mental health and substance use disorders. Through the initiative, SFDPH plans to increase overnight residential treatment capacity by 400 new beds. In 2022, DPH opened two new facilities: SoMA Rise, one of the nation’s first drug sobering centers, and the Minna Project, which supports people with mental health and substance use disorders who are transitioning from the justice system to independent living. DPH has also prioritized increasing staffing to support new services under MHSF and hired over 250 behavioral health workers in 2022.
SFDPH cannot fulfill its mission to protect and promote the health of all San Franciscans without unequivocal support for racial equity and concrete actions to be an antiracist institution. DPH continued to prioritize racial equity through the implementation of the department-wide Racial Equity Action Plan (REAP). This fiscal year, SFDPH sought to improve human resources staffing and policies in hiring and employee experience, including creating a new Office of Experience & Culture to build clear and accessible systems of employee support. SFDPH also saw progress in its infrastructure and accountability by staffing up the Office of Health Equity.

Finally, in April 2022, the federal Centers for Medicare & Medicaid Services (CMS) terminated its Medicare and Medicaid payments to Laguna Honda Hospital. Participation in this program is how we fund the majority of Laguna Honda patient care. Strengthening and sustaining Laguna Honda is the top priority, and every effort is being made to recertify the hospital and ensure long-term stability. For more than 150 years, Laguna Honda Hospital has been a pillar of our healthcare system and a pride of San Francisco. It is an indispensable institution where patients with complex medical conditions receive world class healthcare from our dedicated staff.

Everyone at the DPH is essential to our success. I thank all our dedicated staff, our community and city partners, and the Health Commission for their contributions, partnership, and service to the health of San Francisco.

Grant Colfax, MD
Director of Health
The Health Commission acknowledges the incredible work and dedication of every Department of Public Health (DPH) staff member. Each employee’s contribution was greatly appreciated as the DPH faced several major challenges over the course of this year.

Under the leadership of Dr. Grant Colfax, DPH Director of Health, and Dr. Susan Philip, San Francisco Health Officer, the DPH continued its effective, multi-faceted COVID-19 response, using data to drive policy decisions and resource allocations. This included providing prevention information, masks, testing, and vaccines to the general community, while continuing focused efforts in communities most impacted by the pandemic.

In April, Laguna Honda Hospital and Rehabilitation Center (LHH) received notice that the Centers for Medicare and Medicaid Services (CMS) had terminated LHH’s participation in its programs that fund the majority of LHH patient care, approximately $200 million per year. Director Colfax immediately launched an incident command structure to organize and implement CMS recertification efforts. To assist in this process, the Health Commission and Board of Supervisors approved contracts with consultants with vast CMS quality improvement expertise. The Health Commission began focusing its second meeting each month to provide clear and timely information about LHH recertification and other relevant quality improvement updates. LHH remains open and licensed to provide care to its current patients during its complex recertification process, and the Commissioners continue to closely monitor the situation and are hopeful recertification will be achieved in 2023.

Amid these challenges, the Health Commission celebrated the renovation of Maxine Health Center. The transformation of this neighborhood clinic brings increased capacity for DPH staff to provide excellent medical and behavioral health services to the San Francisco community.

The Health Commission is grateful to Mayor Breed and the Board of Supervisors for their leadership on matters related to public health. We also acknowledge the importance of DPH’s many productive partnerships with other City Departments and community-based organizations to protect the health and well-being of all San Franciscans.

Best Regards,
Dan Bernal
Health Commission President
ABOUT SFDPH

The mission of the San Francisco Department of Public Health (SFDPH) is to protect and promote the health of all San Franciscans. SFDPH is an integrated health department with two primary roles and two major divisions to fulfill its mission:

- Protecting the health of the population, which is the primary responsibility of the Population Health Division; and
- Promoting the health of our patients, which is the primary responsibility of the San Francisco Health Network, which includes Behavioral Health Services.

SFDPH’s central administrative functions, such as finance, human resources, information technology, communications, and policy and planning, support the work of SFDPH’s two divisions and promote integration.

POPULATION HEALTH DIVISION

SFDPH’s Population Health Division (PHD) addresses public health concerns, including consumer safety, health promotion and prevention, the preparation and response to public health emergencies, and the monitoring of threats to the public’s health. PHD implements traditional and innovative public health interventions. PHD staff inspect restaurants, promote improved air and water quality, track communicable diseases, and educate San Franciscans about the negative health impacts of tobacco. PHD staff also promote pedestrian safety, participate in an ambitious campaign to eliminate new HIV infections, and provide technical assistance to small neighborhood markets to increase healthy food options for residents.

PHD was granted public health accreditation in March of 2017, which specifically focuses on measurement of health department performance against a set of nationally recognized, practice-focused, and evidence-based standards based on the ten essential public health services, as well as management, administration, and governance.

SAN FRANCISCO HEALTH NETWORK

The SF Health Network (SFHN) comprises the direct health services SFDPH provides to thousands of insured and uninsured residents of San Francisco, including those most socially and medically vulnerable. The San Francisco Health Network is a community of top-rated clinics, hospitals and programs operated by SFDPH. The Health Network connects San Franciscans to quality health care. Every year SFHN serves more than 100,000 people in our clinics and hospitals, including Zuckerberg San Francisco General, the only trauma center serving all of San Francisco and northern San Mateo County, and Laguna Honda Hospital and Rehabilitation Center. SFHN provides continuous care for people wherever they are – in clinics, hospitals, at home, in jail or transitional housing. As the city’s public health system, the SFHN also provides emergency and trauma care to any San Franciscan who needs it.

The SFHN includes the Behavioral Health Services (BHS) division, which is the largest provider of mental health and substance use prevention, early intervention, and treatment services in the City. BHS is comprised of a network of more than 80 community-based contracted partners and civil service clinics providing mental health services and substance use disorder services for San Francisco Medi-Cal beneficiaries, uninsured, and indigent residents.

The Health Network celebrates the city’s diversity, serving individuals and families of all backgrounds and identities, regardless of immigration or insurance status.
TRUE NORTH

True North is a precise, concise, and universal set of ideals which, when taken together provide a compass that describes the SFDPH’s ideal that the department is continually striving towards. True North encompasses a broad scope of work and serves as the basis for strategic planning that guides leadership in setting priorities and metrics across all levels of the organization. While departmental tactics and strategies may change True North does not change. SFDPH’s True North, Mission, and Vision are summarized in the following visual triangle.

SFDPH TRUE NORTH TRIANGLE

SIX TRUE NORTH PILLARS

Equity
Eliminate health disparities.

Safety & Security
Ensure safe environments for our clients, patients and staff.

Health Impact
Improve the health of the people we serve.

Service Experience
Provide the best experience for the people we serve.

Workforce
Create an environment that respects, values and invests in all our people.

Financial Stewardship
Ensure transparent and accountable stewardship of resources.
SFDPH’s dedicated staff help realize the organization’s mission of protecting and promoting the health of all San Franciscans. The San Francisco Health Network integrates our delivery system and focuses on providing high quality health care services. The Population Health Division leads SFDPH efforts in health protection, promotion, prevention, and disaster readiness. As part of the Department’s Racial Equity Action Plan, demographic information for Senior Leadership is collected annually and included in the SFDPH Annual Report.

*Last updated on June 30, 2022*
SENIOR LEADERSHIP DEMOGRAPHICS

As part of the Department’s Racial Equity Action Plan, demographic information for the Health Commission and the Department’s senior leadership* is collected annually and included in the SFDPH Annual Report. These data are also required to be collected for every City and County of San Francisco policy body every two years.

*Defined as organizational chart leadership, MEA management, and medical and nursing directors. Out of 283 Senior Leadership Staff, 211 responded to the survey.

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<tr>
<th>RACE/ETHNICITY</th>
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<tbody>
<tr>
<td>White</td>
<td>45%</td>
</tr>
<tr>
<td>Asian</td>
<td>26%</td>
</tr>
<tr>
<td>Hispanic/Latino/a/e/x</td>
<td>10%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>10%</td>
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<tr>
<td>Multiracial</td>
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<tr>
<td>Middle Eastern/North African</td>
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<tr>
<td>No response</td>
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<tr>
<td>Native American/Alaska Native</td>
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<th>SEXUAL ORIENTATION</th>
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<tbody>
<tr>
<td>Straight/Heterosexual</td>
<td>73%</td>
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<tr>
<td>Gay/Lesbian/Same Gender Loving</td>
<td>18%</td>
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<tr>
<td>Bisexual</td>
<td>5%</td>
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<tr>
<td>Prefer not to disclose</td>
<td>1%</td>
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<tr>
<td>No response</td>
<td>1%</td>
</tr>
<tr>
<td>Queer</td>
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<tr>
<th>GENDER IDENTITY</th>
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<tbody>
<tr>
<td>Female</td>
<td>64%</td>
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<tr>
<td>Male</td>
<td>33%</td>
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<tr>
<td>Genderqueer/Non-binary</td>
<td>1%</td>
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<tr>
<td>No Response</td>
<td>1%</td>
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<tr>
<th>DISABILITY STATUS</th>
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<tbody>
<tr>
<td>Has one or more disabilities</td>
<td>95%</td>
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<tr>
<th>VETERAN STATUS</th>
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<tr>
<td>Has served in military (of any country)</td>
<td>97%</td>
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As SFDPH’s governing and policy-making body, the San Francisco Health Commission is mandated by City and County Charter to manage and control the City and County hospitals, to monitor and regulate emergency medical services and all matters pertaining to the preservation, promotion and protection of the lives, health, and mental health of San Francisco residents.* The full Health Commission meets on the first and third Tuesday of each month at 4:00 p.m. in Room 300 at 101 Grove Street.

The Health Commission’s committee structure consists of:

- The Zuckerberg SF General Joint Conference Committee
- The Laguna Honda Hospital Joint Conference Committee
- The Community and Public Health Committee
- The Finance and Planning Committee

The Health Commission also participates in the following external bodies:

- San Francisco Health Plan Board of Directors
- Zuckerberg SF General Foundation Board of Directors
- San Francisco Public Health Foundation Board of Directors
- In-Home Supportive Services Public Authority Governing Board

As part of the Department’s Racial Equity Action Plan, demographic information for the Health Commission is collected annually and included in the SFDPH Annual Report. These data are also required to be collected for every CCSF policy body every two years.

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*San Francisco Charter § 4.110. [Health Commission](#).

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**Demographic categories derived from the Department of the Status of Women Biannual CCSF Policy Body Survey.**
Commissioner Bernal is Chief of Staff for Speaker of the House Nancy Pelosi. He has dedicated his career to public service, having served in the White House under President Bill Clinton and as a presidential appointee at the U.S. Department of Education. As Congress debated the Affordable Care Act, he supported Speaker Pelosi’s efforts to build support for the legislation in California by convening diverse stakeholders and coordinating activities among Bay Area Members of Congress. He continues to serve as a valuable resource to the California Democratic Congressional Delegation, key policy makers, and advocates in the fight to protect and improve the Affordable Care Act. He was appointed to the Health Commission in 2017.

Commissioner Green has delivered two generations of babies and practiced medicine in San Francisco for 40 years. In 1989 she co-founded Pacific Women’s Obstetrics & Gynecology Medical Group, the second all-female OB/GYN practice in San Francisco, providing state-of-the-art, empathic obstetrics and gynecology care in a woman-run environment. Dr. Green is also the Founder and Board Chair of The MAVEN Project, which engages physicians to volunteer their clinical expertise via telehealth technology to medically under-resourced communities in the Bay Area and across the country. Commissioner Green was appointed to the Health Commission in 2018 and is a member of the Joint Conference Committees of Laguna Honda Hospital and Zuckerberg San Francisco General Hospital, where she trained.

Commissioner Chow is an internal medicine specialist who has been in practice in San Francisco for over fifty years. He is President and CEO of Jade Health Care Medical Group, affiliated with the Chinese Hospital Health System. Previously he was Executive Director of the Chinese Community Health Care Association, and Chief Medical Officer of the Chinese Community Health Plan. Commissioner Chow currently chairs the Zuckerberg San Francisco General Hospital Joint Conference Committee; he is also a member of the Finance and Planning Committee and Laguna Honda Hospital Joint Conference Committee. He was appointed to the Health Commission in 1989.

Commissioner Christian is an Assistant District Attorney in San Francisco and is the office’s Managing Attorney for Collaborative Courts. From 2012 through 2019, she was assigned to the Behavioral Health Court—a collaborative, multidisciplinary court providing treatment and rehabilitation for people whose criminal justice involvement is tied to behavioral health disorders. In 2012, she was appointed to the San Francisco Human Rights Commission, where she served four terms as Commission Chair and worked with the Mayor’s Office to create and implement a pilot program for Implicit Bias trainings for City employees. Commissioner Christian is a member of the ZSFG Joint Conference Committee and the Community & Public Health Committee. She was appointed to the Health Commission in 2020.
CECILIA CHUNG

Commissioner Chung is nationally recognized as a civil rights leader, advocating for HIV/AIDS awareness and care, LGBT equality, and prisoner rights. She is the Senior Strategist of Transgender Law Center and has served on a number of planning bodies, which includes the San Francisco HIV Health Services Planning Council, Transgender Community Advisory Board for UCSF TRANS and the Visioning Change Initiative of the California HIV/AIDS Research Program. She is a past member of the Presidential Advisory Council on HIV/AIDS. Commissioner Chung chairs the Finance and Planning Committee and is a member of the Community and Public Health Committee. She was appointed to the Health Commission in 2012.

TESSIE M. GUILLERMO

Commissioner Guillermo is the former Chair of the Board of Directors of CommonSpirit, the largest national non-profit health system in the United States and former President and CEO of ZeroDivide, a philanthropy and consultancy that developed innovative digital equity strategies in support of low-income communities. Commissioner Guillermo was the founding CEO of the Asian and Pacific Islander American Health Forum, leading this national minority health policy/advocacy organization for 15 years. Commissioner Guillermo was appointed to the Health Commission in 2018, chairs the Laguna Honda Hospital Joint Conference Committee, and is a member of the Finance and Planning Committee.

SUZANNE GIRAUDO, PH.D.

Dr. Giraudo is a psychologist and is the Clinical Director of the California Pacific Medical Center Department of Pediatrics Child Development Center. In addition to her clinical expertise, Dr. Giraudo’s professional background includes development, administration, and supervision of pediatric clinical programs, grant administration, and teaching. She is the founder and trustee of the DeMarillac Academy, a Catholic school located in the Tenderloin, serving underserved children and families. Commissioner Giraudo is chair of the Community and Public Health Committee and represents the Health Commission on the San Francisco General Hospital Foundation. Prior to her appointment to the Health Commission in 2019, Dr. Giraudo was a member of the Children and Families First Commission for 12 years.

MARK MOREWITZ, MSW, HEALTH COMMISSION SECRETARY

Mr. Morewitz has worked in public health research, program development and evaluation, and non-profit administration. First hired at the SFDPH in 1992, he has worked in HIV service contracting and monitoring; provided social work services; and served as the Director of the SFDPH Forensic AIDS Project. He has served as the Health Commission Executive Secretary since 2009.
MOVING INTO A NEW NORMAL: THE COVID TRANSITION

The COVID-19 Pandemic has been a once-in-a-lifetime threat to our health and wellbeing. With five major surges, dozens of Health Order changes and updates were issued, each with the intent of keeping San Franciscans as safe as possible in uncertain times. The pandemic has repeatedly tested our strength and resilience, yet time and time again, San Francisco residents, businesses, local leaders, and community groups and organizations have all come together to protect our city.

During the 21-22 fiscal year, the City entered a new stage in the pandemic, two years after our department first mobilized emergency resources to meet its dynamic and complex challenges.

The following provides an overview of the major themes of the response during the year. A timeline of major milestones for the year is also provided to the right.

ENTERING A NEW PHASE OF PANDEMIC RESPONSE

At the start of the fiscal year, the City embarked on a full reopening with the rest of the state. San Francisco’s reopening and recovery is, in large part, due to the availability and successful rollout of vaccines in San Francisco. The effectiveness and availability of COVID-19 vaccines dramatically drove down case rates, hospitalizations, and community spread.

With this reopening, the City response transitioned from the COVID Command Center (CCC) structure to a city-coordinated but department-led pandemic response. For SFDPH, this meant transitioning to the Departmental COVID Task Force (DCTF), which aimed to balance the anticipated needs of the COVID response with the growing needs of the City as it re-opens. The Task Force focused on preventing hospitalizations and deaths in our most highly impacted communities, as well as supporting the safe reopening of schools.

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<th>TIMELINE</th>
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<tr>
<td>Summer</td>
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<tr>
<td>July 2021 – Entering Phase 2 of Response/ Transition to Covid Taskforce.</td>
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<td>Summer, 2021 – Delta variant surges.</td>
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<tr>
<td>September 2021 – Booster doses become available for individuals 65 years and older.</td>
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<tr>
<td>November 2021 – San Francisco rolls out vaccines for 5- to 11-year-olds.</td>
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<tr>
<td>December 2021 – Start of Omicron Surge.</td>
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<tr>
<td>December 15, 2021 – 1 Year Anniversary of vaccine release, and 1+ Million Vaccine Doses provided in SF.</td>
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<tr>
<td>February 16, 2022 – 11 Bay Area health officers to lift most indoor mask mandates.</td>
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<tr>
<td>June 21, 2022 – San Francisco begins COVID-19 vaccinations for children 6 months to 4 years old.</td>
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As the City entered the “new normal,” disaster service workers (DSWs) were called back to help re-open their departments. With the transition, the City officially closed the COVID Command Center at Moscone after serving as the headquarters for seventeen months and holding 500+ pandemic response workers at its peak.

MARKING ONE-YEAR ANNIVERSARY OF VACCINATIONS
Our vaccine roll-out exemplified an equitable and strategic low-barrier response to greatly impacted communities across SF—each with a diverse set of needs. Between December 2021 and when the first doses were administered, nearly 1.4 million COVID-19 vaccine doses had been given out, inoculating about 750,000 San Franciscans with the best defense against the virus. By the end of 2021, the City reached a new milestone with 80% of the total population fully vaccinated. The achievement was the result of a year’s strategic effort in partnership with community groups and health systems to make the vaccine easily accessible at nearly 100 vaccination sites located throughout the City along with dedicated outreach to highly impacted communities.

Among our “Vaxiversary” highlights:
- 55% children ages 5-11 received at least one dose in just over a month span;
- 70% of Black/African Americans and over 80% of Latina/o/x fully vaccinated;
- 54% of people experiencing homelessness fully vaccinated;
- 600+ mobile vaccination events to the elderly, home bound individuals, people experiencing homelessness, and other vulnerable communities;
- 30+ community partnerships.

Responding to the Omicron Variant
This year saw the introduction of Omicron – the most transmissible variant yet. Most cases were mild or asymptomatic because of all the work we did with our City partners to achieve an 82% vaccination rate and 62% booster rate at the time of the surge. SFDPH managed this surge while keeping our hospitals, clinics, schools, and other essential services open.

With Omicron, the goal was not to prevent every case of COVID, but rather, to prevent its worst outcomes such as severe disease, hospitalizations, and death. We must take lessons learned from these past two years to ensure our investments and work with community is strengthened, to address not only COVID, but many other health inequities that the pandemic cast in sharp relief.
EXPANDING RESIDENTIAL CARE AND TREATMENT FOR MENTAL HEALTH AND SUBSTANCE USE DISORDERS

As a critical component of Mental Health San Francisco – an initiative that increases support and care for people experiencing mental health and substance use disorders – SFDPH opened more than 160 new residential care and treatment beds in 2022.

Through Mental Health San Francisco, SFDPH plans to increase overnight residential treatment capacity by 20% or 400 new spaces. To date, more than 250 of the 400 beds have been established, including the 160 beds opened in 2022. Once the effort is complete, San Francisco’s capacity for residential care and treatment will reach approximately 2,600 beds.

- Newly opened facilities in 2022 included: SoMa Rise, one of the nation’s first drug sobering centers, and the Minna Project, which supports people with mental health and substance use disorders who are transitioning from the justice system to independent living.
- In its first four months of operation (from June to September 2022), 900 people per month visited SoMa Rise to rest, eat a meal, take a shower, or receive connections to care. From June to October 2022, 50 justice-involved people received treatment, case management, and supportive counseling while residing at the Minna Project.
- Other residential care and treatment programs were contracted by SFDPH to provide 24-hour behavioral health and medical care, supervised living, and/or group living for people with complex mental health and substance use disorders.
- Along with City partners, DPH also grew street care for behavioral health crises to seven teams dedicated to providing high-quality care for people experiencing homelessness, substance use disorder and mental health challenges. Additionally, SFDPH launched the Office of Coordinated Care and invested $2 million in case management services. Both street response and case management services reach people who are disconnected from care and provide support to help people remain in treatment.

In the coming year, SFDPH will pursue opening 100 additional beds, including long-term recovery housing for people transitioning from residential treatment. Additionally, a crisis stabilization unit, which is an alternative to hospital care for people experiencing mental health crises, will open in late 2024. Other service improvements under Mental Health San Francisco include expanding outpatient assessment and treatment such as the hours of operation for the walk-in treatment center and pharmacy as well as increasing citywide distribution of naloxone for the reversal of opioid overdose.
SFDPH seeks to prioritize racial equity processes in all its infrastructure to achieve equitable outcomes for all San Franciscans. SFDPH released its first official department-wide Racial Equity Action Plan (REAP) in 2020 which highlighted areas of improvement for 2021-2023. Despite the disruptions caused by the COVID-19 pandemic, some important structural changes were seen.

For Fiscal Year 2021-2022, much of SFDPH’s racial equity work sought to improve human resources staffing and policies in hiring and employee experience, in alignment with the REAP:

1. **HIRING AND RECRUITMENT** including the hiring of a Workforce Initiatives Coordinator to:
   - Oversee, improve, and expand two equity-focused pathways programs — one for RNs and another for Behavioral Health Clinicians;
   - Support divisions with pathways programs, starting with BHS;
   - Develop internship standards and onboarding resources.

   In addition, HR focused on:
   - Identifying hard-to-fill job classes with lowest applicant diversity;
   - Maximize focused recruitment efforts and launch hiring efficiencies focused on removing barriers and reducing paperwork from basic HR selection processes;
   - Hosted information sessions to inform hiring managers about efficiencies and equitable and inclusive recruitment and hiring guidelines published through HR-OHE partnership.

2. **RETENTION AND PROMOTION** — including creating a new Office of Experience & Culture to build clear and accessible systems of employee support. A "We Are SFDPH" video was created for recruitment and workforce celebration, as well as specific resources for employees to document out of class work as DSWs and to assist in applying for promotive jobs.

3. **DISCIPLINE AND SEPARATION** — including utilizing the tracking mechanism to analyze disciplinary and probationary release data by race/ethnicity, gender and job class to identify patterns of structural bias and ways to address them.

This fiscal year, DPH has also seen progress in its REAP goals of infrastructure and accountability through the budget prioritization to fully implement an Office of Health Equity (OHE). The OHE oversees an Equity Structure throughout SFDPH with established Equity Champions, Leads, and Fellows and the establishment of each division’s Equity A3 Strategic Plan.

In May 2022, OHE released its first annual Equity Report. Over the next year, DPH will continue to pursue goals of the 2021-2023 REAP and provide its second annual Equity Report. Moreover, utilizing this foundation, lessons learned, and new Equity A3 Strategic Plans, an updated and expanded REAP for 2024-2026 will be developed.
HEALTHCARE SERVICES HIGHLIGHTS

LAGUNA HONDA HOSPITAL RECERTIFICATION

For more than 150 years, Laguna Honda Hospital has been a pillar of San Francisco’s healthcare system, providing healthcare services to approximately 700 residents. In April 2022, the federal Centers for Medicare & Medicaid Services (CMS) terminated its Medicare and Medicaid payments to Laguna Honda. CMS funds the majority of resident care at Laguna Honda, accounting for approximately $550k a day.

CMS recertification is the top priority, and every effort is being made to recertify the hospital and ensure long-term stability, including welcoming both internal and external experts, working hard to meet all regulatory requirements and making rapid improvements to align Laguna Honda with top performing skilled nursing facilities. We are confident that these strategies, and the team, will see Laguna Honda through this current challenge and that the organization will emerge stronger.

Laguna Honda remains open and licensed during the recertification process. We continue to provide quality healthcare to our residents as we work toward successful recertification in Medicare and Medicaid.

INNOVATIONS IN MEDI-CAL: CA ADVANCING AND INNOVATING MEDI-CAL (CalAIM)

CalAIM is a multi-year, multi-phased initiative by the CA Department of Health Care Services to transform and strengthen Medi-Cal by using a person-centered, “no wrong door” approach to care that seamlessly integrates physical, behavioral, and social services. By addressing social determinants of health, CalAIM seeks to decrease health disparities and improve health outcomes, quality of life, and consumer experience for Medi-Cal enrollees.

Since January 2022, SFDPH has launched three Enhanced Care Management (ECM) teams which use an interdisciplinary approach to provide comprehensive care management for complex patients meeting CalAIM’s initial Populations of Focus: People Experiencing Homelessness, Adult High Utilizers, and Adults with Serious Mental Illness/Substance Use Disorder.

In FY 22-23 the SFDPH CalAIM team looks ahead to: expanding ECM to include additional populations, new Community Supports, progress in Behavioral Health reform, advancing bi-directional data sharing structures, and scaling Justice-Involved processes for Medi-Cal Screening and Enrollment.
HEALTHCARE SERVICES HIGHLIGHTS - CONTINUED

SFHN PRIMARY CARE ADDRESSES DIABETES

SFHN Primary Care implemented a number of new programs to improve diabetes care and services for primary care patients across San Francisco. With the installation of retinal cameras in all clinics, Primary Care is screening more patients for eye damage caused by diabetes than ever before. Between November 2021 and November 2022, the rate of retinopathy screening increased from 41% to 52%. Tom Waddell Urban Health, the Primary Care clinic serving the most patients experiencing homelessness, has been particularly focused on screening their patients. Tom Waddell Urban Health increased their rate of diabetic retinopathy screening from 28% to 65%.

Primary Care also launched a Diabetes Care Pilot at Maxine Hall Health Center and Silver Avenue Health Center focused on Black and Latinx patients with uncontrolled diabetes. Preliminary data show that over the course of 6 months of participation in the program, diabetes control improved from 0% to 40% among participants. Primary Care has served 23 patients in the pilot at Maxine Hall Health Center and 22 patients at Silver Avenue Family Health Center. The program provided $900 in food vouchers and access to a multidisciplinary care team for medication management, nutritional counseling, and care coordination. Primary care plans to expand the pilot to include Southeast Family Health Center, where they will be using Food Pharmacy, rather than vouchers.

MATERNAL CHILD ADOLESCENT HEALTH AND REDUCING PERINATAL HEALTH DISPARITIES

Maternal, Child and Adolescent Health (MCAH) works to reduce health disparities and improve health outcomes by ensuring access to health services and strengthening the public health systems and services that address the root causes of poor health. Key highlights of our work to reduce perinatal health disparities in fiscal year 2021-2022 included:

- MCAH’s Expecting Justice program served 151 participants with income supplements. The program also delivered a free, stipend-based certified lactation education specialist (CLES) training for San Francisco’s Black community members with support of Dream Keepers Initiative funds.
- Women Infant Children (WIC) services served 14,011 participants and Black Infant Health Program (BIHP) served 160 participants. Staff of both programs also jointly conducted prenatal breastfeeding classes (6 weeks series). Parents who participated received consistent support and education.
- MCAH’s perinatal equity team implemented an evidence-informed partnership with SisterWeb, a CBO partner which trains community-based doulas, and Home Visiting’s public health nurses to focus on decreasing Black infant mortality, reducing maternal morbidity, and improving Black perinatal outcomes.
- MCAH Epidemiology developed a new plan to monitor preterm birth in small population groups over short periods without compromising individual privacy or statistical reliability.
- Between 2012 and 2021 in San Francisco, the disparity in access to timely prenatal care narrowed from a 25-percentage point difference between Black/African American and white pregnant people to a 17-percentage point difference. In addition, in 2020-2021, despite the pandemic, Black/AA infants lost significantly fewer days of gestation due to preterm birth compared to 2018-2019.
OVERDOSE PREVENTION HIGHLIGHTS

JAIL SERVICES CONTRIBUTE TO REDUCTION IN OVERDOSE DEATHS

As part of the SFHN, Jail Health Services (JHS) is committed to reducing overdose deaths and the disproportionate impact it has on specific communities in San Francisco. JHS has provided overdose prevention education for people incarcerated in SF Jail since the early 2000s.

JHS has also long provided medication assisted treatment (MAT) for Opioid Use Disorder (OUD) with methadone maintenance. In the early 2000s, JHS expanded MAT to include treatment with buprenorphine for patients with OUD in jail. Tens of thousands of people incarcerated in SF County Jails have accessed this treatment over the last twenty years.

To further address the overdose crisis in San Francisco, JHS partnered with UCSF in a SAMHSA-funded clinical program called Project JUNO Community. Project JUNO will provide MAT linkage and comprehensive psychosocial services to 200 individuals aged 18 and older with OUD who started on MAT while incarcerated at the San Francisco County Jail.

This linkage from treatment in jail to ongoing treatment in the community is essential to protect the health of people with OUD who have cycled in and out of the criminal legal system. Two patient navigators are now working in the jail to create relationships with people on MAT in order to support them with care continuity after release from jail.

THE TENDERLOIN LINKAGE CENTER

The Tenderloin Center (TLC) opened in January 2022 as a component of the City’s Tenderloin Emergency Initiative, a multi-agency plan to improve crisis conditions in the neighborhood. The TLC was a temporary site to reduce overdose deaths and increase connections to services, as well as to collect data from the ground experience for future sites and services.

The TLC accomplished a great deal while in operation and addressed an important need in the community, including hosting an average of 400 people daily and reversing more than 300 potentially fatal overdoses.

The TLC conducted more than 35,000 onsite general health, behavioral health, social service, and housing activities. Of the nearly 3,000 people who were directly linked to services, more than 400 were linked to behavioral health services.

The TLC provided meals, showers, laundry, and enrolled hundreds of individuals in programs such as Medi-Cal and CalFresh. Visitors to the TLC spent almost 19,000 hours per month at the site, which was time not spent on the streets.
WHOLE PERSON INTEGRATED CARE (WPIC) HIGHLIGHTS

SUPPORTING OVERDOSE PREVENTION:
STREET OVERDOSE REPONSE TEAM/POST OVERDOSE ENGAGEMENT TEAM

The Street Overdose Response Team (SORT) and the Post-Overdose Engagement Team (POET) launched in FY 21-22 as part of the SFDPH Overdose Prevention Plan. SORT is a collaboration between SFDPH, the San Francisco Fire Department and two community partners: RAMS, Inc. and the Harm Reduction Therapy Center.

SORT responds to 911 calls involving an overdose and connects with people in this critical moment to provide an array of services including medication assisted treatment for addiction, naloxone kits, educational materials, and support accessing substance use treatment and shelter. POET provides the follow-up services for individuals, including harm reduction and overdose prevention counseling, medical care, medication assisted treatment for addiction case management and mental health counseling.

Launched in August 2021, SORT and POET highlights through FY 21-22 include: SORT responded to 868 overdose calls; supplied naloxone and fentanyl test kits to 683 people; and connected 56 people to buprenorphine. POET engaged with 464 participants, provided harm reduction education to 290 participants, and assisted 94 participants with refills or new starts of buprenorphine.

EXPANDING ON ALCHEOL HARM REDUCTION: MANAGED ALCOHOL PROGRAM

The SFDPH Managed Alcohol Program (MAP) is a novel harm-reduction residential program for clients with severe alcohol use disorder who do not currently desire abstinence but are interested in stabilizing other aspects of their lives and reducing the harms of uncontrolled drinking in the community.

The program provides controlled amounts of alcohol throughout the day with the aim of meeting each individual where they are at in terms of their desire to consume alcohol. The program goals are to reduce the harms of street-based drinking, prevent withdrawal seizures, decrease emergency service utilization, and improve participants’ sense of health, safety, and well-being. MAP was developed as a COVID-19 response program to support individuals with severe alcohol use disorder (AUD) during the pandemic.

MAP served 21 individuals in 25 distinct encounters. MAP currently has 10 beds and will scale to add an additional 10 beds focusing on the Latinx and indigenous Mayan community. MAP’s multidisciplinary team of nurses, providers, health workers, and behavioral health staff take great pride in the stabilization and success of its participants which includes: decrease in emergency services activation, emergency department utilization, and hospitalizations; reduction in alcohol use and enhanced engagement with medications for alcohol use disorder; linkage to primary care, mental health care, case management services; and family reunification after periods of estrangement.
WPIC HIGHLIGHTS - CONTINUED

HEALTH SERVICES FOR PERMANENT SUPPORTIVE HOUSING TENANTS: PERMANENT HOUSING ADVANCED CLINICAL SERVICES (PHACS)

Permanent Housing Advanced Clinical Services (PHACS) is a new collaboration between Whole Person Integrated Care and Behavioral Health that launched in March 2022.

PHACS is a team of interdisciplinary healthcare providers working in partnership with HSH-funded Permanent Supportive Housing (PSH) service providers to improve the quality of life of tenants and support housing retention.

PHACS services include linkage to physical and behavioral health care, delivering coaching and consultation services to housing support services staff, and providing short-term on-site physical and behavioral health services to tenants.

PHACS currently serves a total of twenty PSH sites and has served more than 300 tenants since being launched in 2022. In FY23, PHACS will scale to include additional sites and will hire behavioral health staff and a training and capacity building coordinator to enhance current service delivery.

HIV SERVICES HIGHLIGHTS

SF CITY CLINIC LAUNCHES PROJECT ExEl (Expand and Elevate)

SF City Clinic served 6,498 distinct patients, with 12,575 total visits, in fiscal year 2021-2022. SF City Clinic was also awarded a 5-year grant from the CDC to develop and evaluate models for optimizing the integration of HIV prevention services in sexual health clinics. With Project ExEl, SF City Clinic is improving the delivery of PrEP for HIV prevention across SFDPH through development of the first SFDPH-wide PrEP registry to facilitate panel management, retention, and program evaluation.

As part of Project ExEl, SF City Clinic embarked on a community and staff engagement project which culminated in a radical transformation of the clinic’s façade by Precita Eyes. The mural, “A Sanctuary for Health,” reflects the diversity, resiliency, strength and compassion of SF City Clinic patients and staff.
HIV SERVICES HIGHLIGHTS - CONTINUED

MONITORING HEALTH AND SERVING MEN WHO HAVE SEX WITH MEN IN SAN FRANCISCO

SFDPH is one of a limited number of metropolitan areas funded as part of the CDC National HIV Behavioral Surveillance (NHBS). NHBS is conducted at the Center for Public Health Research (CPHR) to provide data on HIV prevalence, risk, and preventive behaviors among populations most affected by HIV in our city.

In 2021, CPHR’s Project M team reached 505 men who have sex with men (MSM) in San Francisco to offer testing for HIV and other sexually transmitted diseases. They found that COVID negatively impacted access to HIV prevention and care for MSM in our city. The Project M team findings included:

- 19.01% of MSM were living with HIV. Of those living with HIV, most were taking their HIV medications (95.83%), but some (7.29%) reported experiencing problems getting HIV treatment due to COVID restrictions. COVID also impacted HIV prevention.
- Some MSM (5.91%) experienced PrEP barriers due to the COVID pandemic, and almost 1/5 reported experiencing HIV testing barriers during the pandemic.

Efforts are currently underway to share results from the study with community and providers. Interventions are being implemented to address HIV prevention and care barriers among MSM in San Francisco.

HIV HEALTH SERVICES

During 2021, HIV Health Services (HHS) funded a continuum of client-centered services for 5,586 HIV-positive individuals, the majority of whom were over 45 years old and/or identify as persons of color. HHS has set HIV viral load suppression as their key quality performance indicator, and 87% of clients attained or maintained HIV viral suppression, a 14% increase from 2010. SFDPH is now in the third year of augmented federal HIV dedicated care funding through Ending the HIV Epidemic (EHE).

Since its inception, the EHE programs have served 379 clients, and HIV viral load suppression rate has improved from 67% to 74%. In 2020, HHS initiated a continuous quality improvement project focused on improving viral load suppression in the Black/African American population to eliminate HIV health outcome disparities.

Over the course of this two-year initiative, viral load suppression disparity for Black/African Americans as compared to entire population has reduced to a 2% difference. In 2022, HHS established a new initiative addressing HIV health outcomes disparities in persons experiencing housing instability or homelessness.
This fiscal year, ZSFG’s Department of Psychiatry, which is mostly comprised of UCSF staff, prioritized behavioral health to align with the City and County of San Francisco. Below are a few of the key initiatives that the department has begun working on and will continue into FY23:

**Houdini Link:** The Division of Substance Abuse and Addiction Medicine (DSAAM) partnered with Behavioral Health Services to support substance use treatment through Houdini Link (Hospital Opioid Use Disorder treatment Initiation and Linkage to care) and the Bridge Clinic. This project successfully improved post-hospitalization linkage to community-based medication-assisted treatment, decreased substance use and improved quality of life for patients. It was so successful that Mayor Breed funded it as an exemplar program to address the city’s overdose epidemic. In FY21-22, screening, harm reduction, and brief patient navigation services were provided to 153 persons admitted to ZSFG or in the ZSFG ED. 53 persons with opioid use disorder were subsequently enrolled into the Houdini LINNK program and were provided 6 months of strengths-based patient navigation, linkage to their choice of San Francisco Based Community-Based MOUD treatment provider, and contingency management services.

**The Transform Mental Behavioral Health Fund:** The Department of Psychiatry is a partner in The Transform Mental Behavioral Health Fund (TMBHF), which was established to address rising mental and behavioral health needs throughout San Francisco. Through this fund, Patient Navigators (PNs) are being hired to serve as a part of a comprehensive patient navigation program that works with vulnerable and underserved patients at ZSFG. These PNs will work across the following programs: The Addiction Care Team, Behavioral Emergency Response Team, Inpatient Psychiatry, Psychiatric Emergency Services, Social Medicine, Solid Start, and Healthy Steps. They are due to go live in October and November of 2022.

**LGBTQ+ Healthcare Equality Leader 2022**

In April 2022, the Human Rights Campaign Foundation gave ZSFG a top score of 100 and the designation of “LGBTQ+ Healthcare Equality Leader” in their 15th anniversary edition of the Healthcare Equality Index (HEI). This is the nation’s foremost benchmarking survey of healthcare facilities on policies and practices dedicated to the equitable treatment and inclusion of LGBTQ+ patients, visitors and employees. ZSFG was granted this designation for our equitable and inclusive care for LGBTQ+ patients and their families. In the last year, ZSFG hosted, partnered, and sponsored several large-scale community events focused on Trans and Non-binary individuals including the Transgender Day of Remembrance, Transgender Day of Visibility, the Trans March, the Trans Wellness & Holistic Fair and, through the Transgender Pilot Program of Behavioral Health Services, the annual Transgender Health Fair in addition to numerous online provider and patient education sessions supporting the LGBTQ+ community. This designation demonstrates that ZSFG is committed to improving the health and wellness of our LGBTQ+ community and providing world class care with equity, compassion and respect. Our deepest gratitude and congratulations to our Chief Medical Officer, Dr. Lukejohn Day, for his leadership in helping us obtain this designation, and many thanks to all of our staff who put our values into action every day.
This year, ZSFG Nursing launched the REIGN Nursing Student Externship Program, made possible by the San Francisco General Hospital Foundation’s Equity and Innovation Grants Program. To honor the legacy of Mary Eliza Mahoney, the first African American licensed nurse to graduate from an accredited school of nursing, the ZSFG student nurse externship program strives to Recognize Excellence in Generations of Nursing (REIGN). This initiative will provide 10 student externs from underrepresented races and ethnicities into the profession of nursing with up to 120 hours of clinical and patient care experience. This program allows externs to learn more about public health and trauma care; develop competencies, clinical skills, and professional confidence; and establish valuable professional relationships.

POPULATION HEALTH DIVISION (PHD) HIGHLIGHTS

GLOBAL LEADERSHIP IN PUBLIC HEALTH EMERGENCIES

The Public Health Emergency Preparedness and Response (PHEPR) Branch of the Population Division has led multiple emergency responses over the past few years. Over the course of FY 21-22, PHEPR supported the response to two declared emergencies (COVID and Tenderloin Emergency Response), as well managed heat and flood emergencies and power and water outage responses. Despite the demands of so many events in such a short timeframe, San Francisco has been able to meet and overcome each challenge.

PHEPR staff have been asked to share our experiences and insight in a variety of public contexts to help others improve their own responses. In the past year, PHEPR staff have been invited to share expertise and experience at the National Association of City and County Health Officers Preparedness conference, a National Academies of Science, Engineering and Medicine COVID meeting, the California Hospital Association, and a World Health Organization meeting, among others.

SFDPH and PHEPR have been recognized as leaders in emergency preparedness and response and, through sharing our successes and lessons learned, are helping to improve preparedness and health not only in San Francisco, but around the world.
PHD HIGHLIGHTS – CONTINUED

ENVIRONMENTAL HEALTH

The Environmental Health Branch (EHB) is tasked with enforcing the health codes and regulations in San Francisco. This work is done through about 30 different programs, over 40 separate ordinances, and about 150 staff members. During the FY 21-22, some the unique highlights included:

• In response to COVID, EHB helped move the city from the Purple Tier to the Red Tier to the Enhanced Orange Tier to Orange and finally the Yellow Tier. Each time the Health Order and Tier was changed, EHB sent out email blasts to thousands of businesses, distributed handouts, responded to phoned calls and participated in the citywide webinars. By the time the State color tier system ended on June 15, 2021, EHB had performed over 8,200 compliance inspections, issued over 2,200 notices of violation, and closed around 40 businesses.

• The Food Program inspected a total of 9,079 food facilities. The Food Program partnered with the Department of Public Works and the San Francisco Police Department to form an enforcement task force. The task force has prioritized food vending on the street, which represents a high hazard for foodborne illnesses.

• The Agricultural Program located a Category 1 invasive plant species in San Francisco called False Yellowhead. This is only the second time it has been found in California and the program properly removed and disposed of the plants.

• The Children’s Environmental Health Promotion Program partnered with the Department of the Environment to spend the roughly $21M settlement from the lead paint manufacturers. The money will be spent replacing high friction doors and windows in residential dwelling located in areas of the city with the highest rates of childhood lead poisoning. The program currently has six properties participating in a pilot program and plans to move to full-scale implementation in the next fiscal year.

• The Solid Waste Program successfully passed new regulations to allow them to issue permits for new refuse routes in San Francisco which will be the first since 1932. The Retail Tobacco Program hired three young people through the Mayor’s Opportunities for All Program. These employees will focus on reducing tobacco sales.

PHD LAUNCHES CENTER FOR DATA SCIENCE

The Population Health Division welcomed the new Center for Data Science (CDS) in FY 21-22. The vision of CDS is to apply both the art and science of transforming data into actionable knowledge so that PHD may better understand and effectively respond to emergent health issues in and among our communities. CDS began its work with broad focus on the novel public health emergency data analytics, data visualization, and reporting needs. CDS also absorbed several key citywide initiatives including Vision Zero SF (VZSF), Climate & Health Program, and analytics to inform community health equity work.

In their inaugural year, CDS released two Vision Zero reports: VZSF Severe Injury Report (2021) and the 2021 VZSF annual fatality report, as well as a Safe Streets update in collaboration with our Vision Zero SF inter-agency partners. CDS also facilitated coordination of the inter-agency Crisis Response; co-managed the Heat and Air Quality Resilience (HAQR) Project to develop the first interdepartmental HAQR Strategy; and developed strategic partnerships with key equity stakeholders including the Food Security Task Force, Office of Anti-Racism and Equity, Office of Health Equity, and the Mayor’s Office of Transgender Initiatives.
CENTRAL ADMINISTRATION HIGHLIGHTS

**SFDPH PUBLIC AFFAIRS AND COMMUNICATIONS RESPOND TO PUBLIC HEALTH EMERGENCIES**

The goal of the DPH Public Affairs and Communications (PA &C) Team is to promote the people, policies, and work of the department to enhance its reputation and advance its mission. With the emergence of new, highly infectious COVID-19 variants, the team enlisted the support of a pandemic-weary public to understand and follow changing health order guidelines and public health recommendations. PA &C was also at the center of new initiatives to deliver booster doses, expand vaccines to children, and lower vaccine disparities in BIPOC communities, among others.

San Francisco’s rate of accidental overdose deaths and the delivery of behavioral health care put the efforts of DPH in a local and national spotlight. Of particular note was the launch of the multi-departmental Tenderloin Emergency Initiative, including the Tenderloin Center which DPH came to manage. In collaboration with City partner agencies, PA &C steered media coverage and helped shape public opinion of the seriousness of the substance use and mental health efforts in San Francisco as the city emerged from the pandemic, and how DPH would be a leader in evolving solutions to improving the access and availability of services.

DPH PA &C also led a campaign to engage local, state, and national stakeholders in the vitalness of Laguna Honda Hospital in San Francisco’s safety net system of care. Thoughtful messaging through the many steps forward in the regulatory process helped align stakeholders and storytelling about the residents and staff who make up Laguna Honda special and showed what was at stake in getting the hospital back on track.

**SFDPH HUMAN RESOURCES SUPPORTS DEPARTMENT WORKFORCE**

The Human Resources Division (HR) consists of seven teams working to support the SFDPH workforce. In FY 21-22, HR focused its efforts on efficiently staffing Department-wide vacancies, conducting union negotiations, improving communication with the SFDPH workforce, and continuing to provide a safe and healthy working environment.

The HR Division executed several Racial Equity Action Plan (REAP) initiatives through hiring efficiency process improvements that reduced time to hire while embedding an equity lens. They hosted over 150 expedited hiring events, onboarding critical SFDPH positions with one-stop fingerprinting, medical, badge photo, and form review.

HR also implemented the SmartRecruiters platform to streamline recruitment and examination, and improve communication with job applicants. HR created the Office of Experience and Culture team to bridge the gap between the HR teams and strengthen partnerships with the SFDPH workforce.

**DPH INFORMATION TECHNOLOGY**

The SFDPH Information Technology (IT) Division implemented Epic Wave 2, including for Jail Health, Sobering Center, and PHD Clinics, as well as sequenced Epic Wave 3 for Behavioral Health Services and SFDPH Laboratories (Beaker). IT, with the Health Officer, co-created the strategic initiative the SFDPH Way to Improving Data to Enable and Align (IDEA). It also completed the project plan and issued an RFP for the SFDPH Telephone Modernization project. IT further constructed a data-mart to support the Street Crisis Response Team by joining data from Epic, Avatar, and the One System (HSH). IT also developed and tested alternatives to replace 3,000 zero client clinical computing endpoints.
FY 21-22 BY THE NUMBERS

In FY 21-22, SFDPH’s budget was $2,821,181,991, which was an increase of $45,399,562 from the FY 20-21 budget. The General Fund subsidy from the City and County was $838,641,937, which represents 30 percent of the total budget.

MAJOR INVESTMENTS

$123.6 million to continue DPH’s COVID-19 Response, which includes supporting vaccinations, testing, surveillance and data intelligence, community engagement and equity, COVID-19 Task Force operations, and SFDPH’s Operational Sustainability, which includes supporting San Francisco Health Network and Population Health Division’s return to “New Normal” operations.

$76.8 million in one-time funds for the acquisition and rehabilitation of new facilities and $11.4 million annually in ongoing operations to increase bed capacity by approximately 196 additional beds for our Behavioral Health System of Care. Bed types include Board and Care, Residential Step Down, Transitional Aged Youth (TAY) residential treatment, Managed Alcohol Program (MAP), and co-op housing beds.

$2.7 million annually for expanding street medicine capacity which supports clients in the street, shelters and at the new Health Resource Center – a dedicated outpatient clinic for people experiencing homelessness.

$1.3 million annually for TAY mental health, care coordination, and case management services.

$1.0 million annually for specialized transgender mental health services, specifically for transgender people experiencing homelessness.

$5.4 million to expand access to Medication Assisted Treatment (MAT) and Contingency Management, which are two proven effective treatment strategies for individuals who use drugs.

$5.4 million for the Street Overdose Response Team (SORT), which is a new initiative providing a street-based response for people experiencing homelessness with a recent non-fatal overdose through engagement, care coordination, and low barrier treatments like MAT.

$1.8 million annually to create an additional Street Crisis Response Team for a total of seven teams to serve the City.

$7.7 million to increase services for clients in shelters and permanent supportive housing (PSH).

$2.5 million to support the transfer of the Local Emergency Medical System Agency (EMSA) from SFDPH to Department of Emergency Management (DEM).
## SF HEALTH NETWORK METRICS

San Francisco Health Network provides a wide array of services across its continuum of care. San Francisco Health Network’s direct service providers consist of Zuckerberg SF General (ZSFG); Laguna Honda Hospital (LHH); Primary Care (PC); Behavioral Health Services (BHS); Jail Health Services (JHS); Whole Person Integrated Care (WPIC), Home Health (HH); and Dental Care. See pages 36-37 for descriptions of these levels of care.

<table>
<thead>
<tr>
<th>LEVEL OF CARE</th>
<th>TYPE</th>
<th>UNIQUE PATIENTS FY20-21</th>
<th>UNIQUE PATIENTS FY21-22</th>
<th>ENCOUNTERS FY20-21</th>
<th>ENCOUNTERS FY21-22</th>
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<td>PRIMARY CARE</td>
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<td>55,316</td>
<td>57,525</td>
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<td>Substance Use Disorder Services</td>
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<td>WHOLE PERSON INTEGRATED CARE(^2)</td>
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<td>4,196</td>
<td>7,744</td>
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<td>JAIL HEALTH SERVICES(^3)</td>
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<td>EMERGENCY</td>
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<td>Percent Admitted Psychiatric</td>
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<td>Percent Admitted Trauma Center Activation</td>
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<td>DIAGNOSTIC &amp; ANCILLARY</td>
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<td>46,161</td>
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1 Encounters have historically not been reported for BHS for the annual report. Future reports will explore inclusion of this data.

2 Encounter counts for WPIC include scheduled and unscheduled services with clients at clinics and in the community, as well as stays at our Medical Respite program. Improved reporting methodologies have resulted in increased, more accurate representation of WPIC services in this report.

3 Encounters defined as unique Epic inpatient admission and represents the total number of incarceration episodes for the patient within the defined time period.
### HOSPITAL – INPATIENT METRICS

<table>
<thead>
<tr>
<th>HOSPITAL</th>
<th>LEVEL OF CARE</th>
<th>UNIQUE PATIENTS FY20-21</th>
<th>PATIENT DAYS FY20-21</th>
<th>PATIENT DAYS FY21-22</th>
<th>AVG STAY (DAYS) FY20-21</th>
<th>AVG STAY (DAYS) FY21-22</th>
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<tr>
<td>ZUCKERBERG SF GENERAL (ZSFG)</td>
<td>Acute Inpatient</td>
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<td>Medical</td>
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<td>11,861</td>
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<td>Psychiatric</td>
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<td>608</td>
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<td>Skilled Nursing</td>
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<td>277</td>
<td>9,805</td>
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<tr>
<td>LAGUNA HONDA HOSPITAL (LHH)</td>
<td>Acute Inpatient</td>
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<td>231,357</td>
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#### PATIENTS BY RACE/ETHNICITY

- **Black/African American**
- **Hispanic/Latinx**
- **Asian**
- **White**

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<tr>
<th>Health System</th>
<th>Black/African American</th>
<th>Hispanic/Latinx</th>
<th>Asian</th>
<th>White</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco (n=815,201 residents)</td>
<td>16%</td>
<td>13%</td>
<td>5%</td>
<td>35%</td>
</tr>
<tr>
<td>ZSFG (n=100,385 patients)</td>
<td>21%</td>
<td>25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laguna Honda (n=864 patients)</td>
<td>14%</td>
<td>14%</td>
<td>5%</td>
<td>40%</td>
</tr>
<tr>
<td>Primary Care (n=57,530 patients)</td>
<td>29%</td>
<td>17%</td>
<td>17%</td>
<td>40%</td>
</tr>
<tr>
<td>WPIC (n=7,744 patients)</td>
<td>17%</td>
<td>17%</td>
<td>4%</td>
<td>37%</td>
</tr>
<tr>
<td>Mental Health Services (n=16,532 patients)</td>
<td>20%</td>
<td>3%</td>
<td>7%</td>
<td>38%</td>
</tr>
<tr>
<td>Substance Use Disorder Services (n=4,513 patients)</td>
<td>22%</td>
<td>17%</td>
<td>25%</td>
<td>29%</td>
</tr>
<tr>
<td>Jail Health (n=5,608 patients)</td>
<td>25%</td>
<td>3%</td>
<td>17%</td>
<td>26%</td>
</tr>
</tbody>
</table>

---

4 Data not shown: American Indians, Alaskan Natives, Native Hawaiians, and Pacific Islanders comprise approximately 1% of the population served in all health systems above. Race/ethnicity data is unknown for 0-16% of patients served; Jail Health’s demographic data represents October 2021 – June 2022. Due to the transition to a new electronic health record system, data for July through September of 2021 is not available.
PATIENTS BY AGE

- San Francisco (n=815,201 residents)
- ZSFG (n=100,385 patients)
- Laguna Honda (n=864 patients)
- Primary Care (n=57,530 patients)
- WPIC (n=7,744 patients)
- Mental Health Services (n=16,532 patients)
- Substance Use Disorder Services (n=4,513 patients)
- Jail Health (n=5,608 patients)

PATIENTS BY SEX

- San Francisco (n=815,201 residents)
- ZSFG (n=100,385 patients)
- Laguna Honda (n=864 patients)
- Primary Care (n=57,530 patients)
- WPIC (n=7,744 patients)
- Mental Health Services (n=16,532 patients)
- Substance Use Disorder Services (n=4,513 patients)

PATIENTS BY GENDER

- San Francisco (n=815,201 residents)
- ZSFG (n=100,385 patients)
- Laguna Honda (n=864 patients)
- Primary Care (n=57,530 patients)
- WPIC (n=7,744 patients)
- Mental Health Services (n=16,532 patients)
- Substance Use Disorder Services (n=4,513 patients)
- Jail Health (n=5,608 patients)

---

5 San Francisco data based on 5-year 2021 American Community Survey (ACS)
6 ACS data does not include estimates by gender, therefore citywide data is not available; Note that gender data has not been collected for a number of patients resulting in high percentages of “unknown” for different areas of care.
SAN FRANCISCO HEALTH NETWORK, PAYOR SOURCES

![Bar chart showing payor sources for different care settings.](chart)

PRIMARY CARE AND WHOLE PERSON INTEGRATED CARE, PAYOR SOURCES

![Bar chart showing payor sources for primary care and WPIC.](chart)

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7 Many WPIC services are delivered through non-traditional routes (e.g., on the street or in shelters) by nurses or health workers and reports on these non-billable services do not reflect insurance information.
# HEALTH COMMISSION RESOLUTIONS

## 2021

<table>
<thead>
<tr>
<th>Resolution Number</th>
<th>Description</th>
<th>Resolution Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>21-8</td>
<td>Resolution to Recommend to the Board of Supervisors to Authorize the DPH to Accept and Expend a Gift of Perpetual Software License in the Value of $59,949 from the SFGH Foundation</td>
<td>21-12</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under California Government Code Section 54953(e)</td>
</tr>
<tr>
<td>21-9</td>
<td>Ramaytush Ohlone Land Acknowledgment</td>
<td>21-13</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under California Government Code Section 54953(e)</td>
</tr>
<tr>
<td>21-10</td>
<td>Honoring the Importance of the Health Commission Hearing From Diverse Community Voices and Codifying Its Commitment To An Annual Meeting In The Community</td>
<td>21-14</td>
<td>Resolution to Recommend to the BOS to Authorize the DPH to Accept and Expend a Gift of Face Shields in the Value of $10,127 from Sergey Bin</td>
</tr>
<tr>
<td>21-11</td>
<td>To Establish a San Francisco Health Care for Homeless Co-Applicant Board</td>
<td>21-15</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under California Government Code Section 54953(e)</td>
</tr>
</tbody>
</table>

## 2022

<table>
<thead>
<tr>
<th>Resolution Number</th>
<th>Description</th>
<th>Resolution Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>22-01</td>
<td>Addressing Health Disparities of the Local American Indian Communities</td>
<td>22-09</td>
<td>Resolution to Recommend to the BOS to Authorize the DPH to Accept and Expend a Bequest from the Estate of Janet D. Kramer</td>
</tr>
<tr>
<td>22-02</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under CA Govt. Code Section 54953(e)</td>
<td>22-10</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under CA Govt. Code Section 54953(e)</td>
</tr>
<tr>
<td>22-03</td>
<td>Resolution Recommending that Funds Reclaimed Through the SF City Option Escheatment Process be Used for Health Care Services in San Francisco</td>
<td>22-11</td>
<td>Honoring Dr. David Woods</td>
</tr>
<tr>
<td>22-04</td>
<td>Resolution to Authorize the Amount and Replenishment of the ZSFG Patient Trust Fund</td>
<td>22-12</td>
<td>Honoring Sue Carlisle</td>
</tr>
<tr>
<td>22-05</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under California Government Code Section 54953(e)</td>
<td>22-13</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under California Government Code Section 54953(e)</td>
</tr>
<tr>
<td>22-06</td>
<td>Resolution Adopting a New Regulation to License Refuse Collectors and Permit Designated Refuses Collection Routes Within the City and County of SF</td>
<td>22-14</td>
<td>Honoring Asian and Pacific Islander Heritage Month</td>
</tr>
<tr>
<td>22-07</td>
<td>Resolution to Recommend to the BOS to Authorize the DPH to Accept and Expend a Gift of $115,000 from the Epic Systems Corporation</td>
<td>22-15</td>
<td>Honoring LGBTQ Pride Month</td>
</tr>
<tr>
<td>22-08</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under CA Govt Code Section 54953(e)</td>
<td>22-16</td>
<td>Resolution Making Findings to Allow Teleconferenced Meetings Under California Government Code Section 54953(e)</td>
</tr>
</tbody>
</table>
SFDPH SERVICE SITES

PRIMARY CARE SERVICES SITES

*Castro-Mission Health Center and Dimensions Clinic temporarily located at ZSFG during FY 21-22

**School based wellness centers reopened with schools in Fall 2021

BEHAVIORAL HEALTH SERVICES SITES
DESCRIPTIONS OF SAN FRANCISCO HEALTH NETWORK LEVELS OF CARE

The following section provides descriptions of SFHN’s levels of care presented in the SFHN metric table.

PRIMARY CARE
Primary Care is the healthcare foundation for the SFHN. Primary Care includes 10 community-based health centers, and four University of California, San Francisco affiliated clinics located at Zuckerberg San Francisco General Hospital. Primary Care teams are also imbedded in four Behavioral Health Homes. The clinics offer a fully integrated model of care which includes medical, nursing, behavioral health, psychiatry, podiatry, pharmacy, nutrition, acupuncture, population health, complex care management and a centralized call center.

BEHAVIORAL HEALTH SERVICES (BHS)
BHS is the largest provider of mental health and substance use prevention, early intervention, and treatment services in the City and County of San Francisco. BHS is comprised of a network of more than 80 community-based contracted partners and civil service clinics providing mental health services and substance use disorder (SUD) services for San Francisco Medi-Cal beneficiaries, uninsured, and indigent residents.

MENTAL HEALTH SERVICES
Mental health services include individual, group, collateral, assessment, medication support, residential, crisis residential, crisis intervention, crisis stabilization, psychiatric inpatient, targeted case management, as well as performing outreach, engagement, and wellness services. Services are provided by a network of county-run clinics and community-based organizations.

SUBSTANCE USE DISORDER (SUD) SERVICES
SUD services include individual, group, assessment, medication assisted treatment, methadone maintenance, residential, perinatal, withdrawal management, and case management. SUD services are provided by a network of community-based organizations.

WHOLE PERSON INTEGRATED CARE (WPIC)
WPIC brings together existing non-traditional primary care, urgent care, and behavioral health clinical services primarily serving people experiencing homelessness. WPIC takes a data-driven, collaborative approach to caring for our highest risk patients and facilitating citywide care coordination, partnering frequently with staff from across DPH, the Department of Homelessness and Supportive Housing and San Francisco Fire Department. WPIC’s programs include WPIC Urgent Care, Open Access Clinic, Shelter Health, Shelter in Place Health services, Street Medicine, Street Overdose Response Team (SORT), Alcohol Sobering Center/Managed Alcohol Program, Medical Respite, Permanent Supportive Housing Nursing, and Whole Person Care.

JAIL HEALTH SERVICES (JHS)
JHS provides comprehensive primary care, HIV, women’s health, addiction medicine, and urgent care services to more than 8,000 patients annually. JHS is a 24/7 operation and utilizes a team-based approach to patient care via the behavioral health/psychiatry, reentry, medical, nursing, and prevention teams. Given the link between structural racism and incarceration, JHS has a unique opportunity to impact health equity for an especially vulnerable and often invisible population.

DENTAL SERVICES
Dental Services provides basic dental care like cleaning, fillings and simple tooth removal to San Francisco residents through SFHN Primary Care clinics. These clinics include: Silver Avenue Family Health Center (children 0-20 and pregnant women), Chinatown Public Health Center (children 0-20 and pregnant women), Southeast Health Center (children 0-20, pregnant women, adults, homeless, HIV+), Potrero Hill Health Center (children 0-20, pregnant women, adults, homeless, HIV+), Tom Waddell Urgent Care (homeless, HIV+), and Juvenile Justice Center (incarcerated youth).
HEALTH AT HOME (HH)
The licensed home health agency of the San Francisco Health Network, HH is committed to promoting the health and independence of its clients by providing high-quality and innovative health care services (registered nurses, medical social workers, physical therapists, occupational therapists, speech therapists, and home health aides) in the homes of the clients we serve. Home visits provide services such as symptom management, restorative care, nutrition education, wound & ostomy care, diabetic & respiratory care, palliative care services, HIV management, training in mobility & activities of daily living, home safety training, durable medical equipment evaluation, counseling, community referrals, eligibility assessments, emotional support, personal care, meal preparation, and caregiver education and training.

LAGUNA HONDA HOSPITAL (LHH)
LHH provides a full range of skilled nursing services to adult residents of San Francisco who are disabled or chronically ill, including specialized care for those with wounds, head trauma, stroke, spinal cord and orthopedic injuries, HIV/AIDS, and dementia. LHH is California’s first green-certified hospital situated on a 62-acre campus. The facility is designed to offer choices for therapeutic healing, to encourage community involvement and to provide a therapeutic environment for residents in 13 specialized nursing and rehabilitation programs.

The LHH approach is to see the whole person, not just the individual; and to deliver individually-focused care that improves physical and emotional well-being, supports community integration and creates possibilities to help people engage with the world around them.

ZUCKERBERG SF GENERAL HOSPITAL (ZSFG)
ZSFG is a licensed general acute care hospital, which is owned and operated by the City and County of San Francisco, Department of Public Health. ZSFG provides a full complement of inpatient, outpatient, emergency, skilled nursing, diagnostic, mental health and rehabilitation services for adults and children. It is the largest acute inpatient hospital for psychiatric patients in the city. Additionally, it is the only acute hospital in San Francisco that provides 24-hour psychiatric emergency services.

EMERGENCY SERVICES
ZSFG’s emergency services include comprehensive care for severely injured patients.

PSYCHIATRIC EMERGENCY SERVICES (PES)
Provides crisis stabilization, complete medical and psychiatric assessment and evaluation services, and initial treatment, if appropriate. The staff, which includes physicians, nurses, and social workers, work closely with a number of community agencies to develop short and long-term treatment plans.

SPECIALTY CARE
Care received across SFHN’s medical specialty care clinics which include: cardiology, dermatology, diabetes, endocrinology, gastroenterology/hepatology, general surgery, geriatrics, gynecology, hematology/oncology, infectious diseases, nephrology, neurology, neurosurgery, ophthalmology, oral and maxillofacial surgery orthopedics, otolaryngology, pain clinic, palliative care, pulmonary, rheumatology, vascular surgery, and urology.

URGENT CARE
Urgent Care refers to the urgent care clinics where Adult and Pediatric patients are seen for same-day urgent medical care for illness or injuries that are not life threatening.

DIAGNOSTIC & ANCILLARY
High-volume diagnostic and therapeutic services that include: laboratory, pathology, radiology, rehabilitation, and wellness.
## SFDPH Contractors

### Community-Based Organizations (Non-Profits)

- 18 Reasons
- 3rd Street Youth Center & Clinic
- A Better Way
- AGUILAS, Inc.
- AIDS Legal Referral Panel of the San Francisco Bay Area
- Alternative Family Services, Inc.
- APA Family Support Services
- BAART Community Healthcare
- Baker Places
- Bay Area Air Quality Management District
- Bayview Hunter’s Point -YMCA
- Bayview Hunter’s Point Foundation
- Boys and Girls Club of San Francisco
- California Pacific Medical Center
- Catholic Charities
- Center on Juvenile and Criminal Justice
- Center to Promote Healthcare Access dba Social Interest Solutions
- Central American Resource Center (CARCEN)
- Central City Hospitality House
- Children’s Council of San Francisco
- Chinese Hospital Association
- Community Forward SF aka Community Awareness and Treatment Services (CATS)
- Community Housing Partnership
- Community Music Center of San Francisco
- Community Youth Center San Francisco
- Conard House
- Curry Senior Center
- Dignity Health/ St. Mary’s Medical Center
- Dolores Street Community Center
- East Bay Agency for Children
- Edgewood Center for Children and Families
- Eldergivers- Art With Elders
- Episcopal Community Services of San Francisco
- Family Service Agency of San Francisco
- Felton Institute
- Fort Help, LLC
- Fort Help Mission, Inc.
- Friendship House Association of American Indians of San Francisco
- FUSE Corps
- Glide Foundation (Board of Trustees of the Glide Foundation)
- Harm Reduction Coalition
- Harm Reduction Therapy Center
- HealthRIGHT 360
- Heluna Health dba Public Health Foundation Enterprises (PHFE)
- Homeless Children’s Network
- Homeless Prenatal Program
- Horizons Unlimited of San Francisco
- Huckleberry Youth Programs
- Hyde Street Community Services
- Instituto Familiar de la Raza
- International Institute of the Bay Area
- Jamestown Community Center
- Japanese Community Youth Council
- Jewish Family and Children’s Services
- Justice & Diversity Center of the Bar Assn. of San Francisco
- Larkin Street Youth Services
- Latino Commission
- Lavender Youth Recreation & Information Center (LYRIC)
- Learning for Action (Bay Area Trauma Informed System of Care)
- Life Learning Academy
- Livable City
- Lutheran Social Services of Northern California
- Maitri AIDS Hospice
- Mental Health Association of SF
- Mission Council on Alcohol Abuse for the Spanish-Speaking
- Mission Language and Vocational School
- Mission Neighborhood Health Center
- Mt. St. Joseph-St. Elizabeth’s
• Center for Families in Recovery
• NAMI San Francisco
• Napa County Health and Human Services
• Native American Health Center
• NICOS Chinese Health Coalition
• North East Medical Services (NEMS)
• Oakes Children’s Center
• Positive Resource Center
• Progress Foundation
• Project Open Hand
• Public Health Institute
• Rafiki Coalition for Health and Wellness
• Regents of the University of California
• Richmond Area Multi Services (RAMS)
• Safe and Sound
• Saint Francis Memorial Hospital
• Samuel Merritt University
• San Francisco AIDS Foundation
• San Francisco Community Clinic Consortium
• San Francisco Community Health Authority
• San Francisco Community Health Center
• San Francisco Food Bank
• San Francisco Lesbian Gay Bisexual Transgender Community Center
• San Francisco Mental Health and Education Fund
• San Francisco Public Health Foundation
• San Francisco Study Center
• Seneca Center
• Shanti Project
• Sierra Hospital
• SisterWeb
• Special Services for Groups
• Sonoma County Department of Health and Human Services
• St. James Infirmary
• St. Vincent de Paul Society Swords to Plowshares
• The Medical Clown Project
• The Salvation Army A California Corp
• Tides Center
• Unity Care Group, Inc.
• Victor Treatment Centers
• West Coast Children’s Clinic
• Westside Community Mental Health Center

• Yale University School of Medicine
• YMCA of San Francisco
• Youth Leadership Institute

PUBLIC AGENCIES
• City College of San Francisco
• San Francisco Unified School District
• Alameda County Behavioral Health Care Services
• Marin County Community Health and Prevention Services
• San Mateo County Health Services Agency
• Santa Cruz County
• Sonoma County
• San Francisco State University
• San Francisco Unified School District
• Superior Court of California-County of San Francisco
• University of California, Los Angeles
• University of California, San Diego
• University of California, San Francisco
• University of the Pacific School of Dentistry
### ADDITIONAL RESOURCES

To learn more about SFDPH efforts to protect and promote the health of all San Franciscans, please explore the following resources (click on **blue titles** for links to associated web materials):

#### DEPARTMENT OF PUBLIC HEALTH

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<tr>
<th>Resource</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFDPH Webpage</td>
<td>Learn more about SFDPH services and programs and link to additional SFDPH reports – including past Annual Reports.</td>
</tr>
<tr>
<td>SF Health Commission</td>
<td>Read more about the SF Health Commission, the governing and policy-making body of the SFDPH.</td>
</tr>
<tr>
<td>SF Health Network</td>
<td>Learn more about the SF Health Network, the city’s only complete care system.</td>
</tr>
<tr>
<td>Zuckerberg SF General (ZSFG)</td>
<td>Learn more detailed information about ZSFG’s services, accomplishments, and operations over the last fiscal year.</td>
</tr>
<tr>
<td>Laguna Honda Hospital (LHH)</td>
<td>Learn more detailed information about LHH’s services, accomplishments, and operations over the last fiscal year.</td>
</tr>
</tbody>
</table>

#### CITY & COUNTY OF SAN FRANCISCO COVID-19 RESPONSE

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<thead>
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<th>Resource</th>
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</thead>
<tbody>
<tr>
<td>SFDPH COVID-19 Response</td>
<td>Find out more information about SFDPH’s response to COVID-19, including all Health Orders and Directives.</td>
</tr>
</tbody>
</table>

#### ACCESS TO COVERAGE & CARE

<table>
<thead>
<tr>
<th>Resource</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get Covered San Francisco!</td>
<td>Learn more about the various health care options under the Affordable Care Act.</td>
</tr>
<tr>
<td>Healthy San Francisco</td>
<td>Learn about the Healthy San Francisco program, including information on eligibility and enrollment.</td>
</tr>
</tbody>
</table>
This report can be found online at www.SFDPH.org
(415) 554-2500

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