The Mission of the San Francisco Department of Public Health is to protect and promote the health of all San Franciscans.

The San Francisco Department of Public Health Shall:

- Assess and research the health of the community
- Develop and enforce healthy policy
- Prevent disease and injury
- Educate the public and train health care providers
- Provide quality, comprehensive, culturally-proficient health services
- Ensure equal access to all
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I am pleased to present the San Francisco Department of Public Health’s Annual Report for Fiscal Year 2014/2015, highlighting our work in the context of our longstanding mission—to protect and promote the health of all San Franciscans. This year we made significant progress building our capacity for disease prevention, promoting health equity through our Black African American Health Initiative, and rebuilding Zuckerberg San Francisco General Hospital.

As the public health leader for the City and County of San Francisco, from October 2014 through February 2015 the San Francisco Department of Public Health (SFDPH) activated its Departmental Operations Center (DOC) in response to the Ebola outbreak in West Africa, the largest known Ebola outbreak to date. The Ebola DOC used the national Incident Command System to organize the department’s preparedness efforts. Over 100 SFDPH staff were activated during this time. SFDPH staff provided support and technical expertise to City departments concerning Ebola, engaged in robust coordination and planning with the San Francisco health care system, developed and implemented monitoring protocols, conducted large scale training and education around personal protective equipment for Ebola, and disseminated Ebola information and guidance. The activation brought together multiple branches throughout the department, and multiple departments within the city, to collaboratively plan and prepare for this disease. It furthered our city’s public health preparedness immensely, and demonstrated SFDPH’s ability to quickly respond to emerging infectious diseases to protect the health of San Francisco residents and visitors.

In addition to protecting the health of our residents, SFDPH is committed to promoting and addressing health equity among our residents with the highest health disparities. In 2014, SFDPH leadership launched a multi-pronged effort to address health disparities among the Black/African American population in San Francisco. SFDPH’s Black/African American Health Initiative focuses on four high-priority health areas: 1) heart health; 2) behavioral health; 3) women’s health; and 4) sexual health. The initiative is seeking to reduce health disparities in these areas by employing the principles of collective impact and cultural humility, and ensuring a specific focus on workforce development. During Fiscal Year 2014/2015, initiative leaders met quarterly to discuss health disparities, prioritize work activities, review project progress updates, and celebrate the health of our multicultural staff at SFDPH.

This year we worked tirelessly on building a new hospital and are proud to announce that SF General Foundation received a historic donation of $75 million from Mark Zuckerberg and Dr. Priscilla Chan for Zuckerberg SF General and Trauma Center, the City’s largest safety net provider and only trauma center. The donation will help fund equipment and technology for the new Zuckerberg SF General which is set to open in May 2016. This investment is a testament to the outstanding work at the hospital and high quality of care provided to thousands of vulnerable San Francisco residents each year.

I’m proud of our accomplishments this year. I thank all of our devoted staff and community partners for their work and contributions to the health of San Francisco.

Sincerely,

Barbara A. Garcia, MPA
Director of Health
The Health Commission is proud that the San Francisco Department of Public Health (SFDPH) remains a world class public health leader. We recognize that this can only be accomplished through the effective leadership of Director of Health, Barbara Garcia, and the impactful work of the many SFDPH dedicated employees that contribute daily to improving the health of all San Franciscans. We are deeply appreciative of the strong support that the SFDPH receives from Mayor Lee and the Board of Supervisors. The Health Commission also acknowledges the importance of the many productive partnerships between the SFDPH with community partners and other City Departments.

During the year, the Health Commission worked closely with Director Garcia to monitor the ongoing development and implementation of the San Francisco Health Network and the Population Health Division. Both SFDPH divisions have been integral to the well-being of all San Franciscans as the City continues to experience an economic transition that is quickly changing the health, mental health, and housing needs of many vulnerable residents.

- The San Francisco Health Network (SFHN) is the City’s only complete care system. The SFHN integrates primary and specialty care for all ages, dentistry, emergency & trauma treatment, and behavioral health services.
- The Population Health Division (PHD) of the SFDPH provides core public health services for the City and County of San Francisco. For the past several years, PHD staff have engaged in community-wide strategic planning activities to prepare for public health accreditation; the process is likely to be completed in 2016.

The Health Commission also continued to closely monitor the budget and timeline of the Zuckerberg SF General Rebuild Project. The Commissioners were profoundly grateful for the generosity of the many donors who contributed a total of $104 million, including Dr. Priscilla Chan and Mark Zuckerberg's donation of $75 million, enabling the new state-of-the-art hospital building to open in spring of 2016.

The health and wellbeing of all San Franciscans is our priority. We are committed to maintain an effective, sustainable healthcare delivery system and public health services to meet the diverse needs of all San Franciscans.

Edward A. Chow, M.D.
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 SFDPH’s Population Health Division; and
- Promoting the health of our patients, which is the primary responsibility of the San Francisco Health Network.

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

POPULATION HEALTH

SFDPH’s Population Health Division (PHD) addresses public health concerns, including consumer safety, health promotion and prevention, 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 corner stores to increase healthy food options for residents. PHD contributes to the health of SFDPH’s patients by contributing population health data and data analysis to the San Francisco Health Network. PHD is currently applying for national public health accreditation 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.

As part of the journey to achieve Public Health Accreditation, in FY 14/15 the Population Health Division (PHD) focused on development of a Performance Management System that will provide the infrastructure for our performance improvement activities. In support of this goal, two new plans were drafted that align with PHD’s five year Strategic Plan priorities. The first is a Quality Improvement Plan that provides a context and framework for performance improvement activities in PHD. This plan includes ongoing quality improvement projects and trainings as well as a proposed evaluation and monitoring process. The second is a PHD Workforce Development Plan that provides a roadmap towards individual and Division-wide professional development by creating a learning culture which fosters trust by clarifying roles and expectations, ensuring transparency, and delivering results. The timeline for final achievement of Public Health Accreditation is Fall of 2016.

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 services the SFHN provides are not new – rather, they are newly aligned to achieve the triple aim of Health Reform: better care for individuals; better health for the population; and lower cost through improvement. Unlike other public or private systems, the SFHN contains the crucial components needed to build a seamless continuum of care: patient-centered medical homes provided by primary care clinics located throughout the community; comprehensive behavioral health services; acute care and specialty services provided at San Francisco General Hospital; skilled nursing care provided at Laguna Honda Hospital; and other home- and community-based services. In addition to the health care services, SFDPH provides critical health care services for the broader community. Zuckerberg San Francisco General Hospital, for example, is the only trauma center serving all of San Francisco and northern San Mateo County. Additionally, SFDPH’s Community Behavioral Health Services provides mental health and substance abuse services to all low-income San Franciscans who need them. Services such as these are essential components of the San Francisco safety net.

The mission of SFHN is to provide high quality health care that enables all San Franciscans to live vibrant, healthy lives and to be every San Francisco’s first choice for health care and well-being. The 2014 Affordable Care Act significantly increased the number of San Franciscans with health insurance and more adults became eligible for Medi-Cal Managed Care, California’s health insurance program for low-income individuals. The SFHN is responsible for providing care to more than 62,000 Medi-Cal Managed Care members (approximately 42% of San Francisco’s Medi-Cal Managed Care members). As more adults gain health insurance, it is vital that SFHN become a “provider of choice” in San Francisco. In FY 14/15, SFHN worked on many strategic initiatives to meet this goal including the acquisition of an enterprise electronic health record as the core of our delivery system; continued development of the Business Intelligence Unit and data warehouse; standardization of operational processes such as utilization management and credentialing; and expanding the SFHN call center. SFHN also furthered planning to expand beyond Medi-Cal patients to include Covered California members, as critical steps to increase the financial sustainability of the Network. SFHN continues to strive towards quality patient care and efficient delivery through improved access, capacity, coordination, and patient flow.

The SFHN is San Francisco’s only complete care system and includes primary care, dental care, emergency and trauma treatment, medical and surgical specialties, diagnostic testing, skilled nursing and rehabilitation, behavioral health services and jail health services. To learn more about San Francisco Health Network and the services we provide, please visit: http://www.sfhealthnetwork.org
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 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 has designated seats on the following 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

**Edward A. Chow, M.D. President**

Commissioner Chow is an internal medicine specialist who has been in practice in San Francisco for over forty-five years. Previously, he was the Executive Director of the Chinese Community Health Care Association, and Chief Medical Officer of the Chinese Community Health Plan. He is Chair of the American Diabetes Association Action Council (APADAC), co-chair of the Asian American Native Hawaiian and Pacific Islander Diabetes Coalition; member-at-large of the Federation of Chinese American and Chinese Canadian Medical Societies Board of Directors; and founding member of the National Council of Asian Pacific Islander Physicians. He has received numerous awards for his work in health disparities and cultural competency, including the 2008 Alumni Merit Award from St. Louis University School of Medicine, Laureate Award from the American College of Physicians Northern California Chapter (2008), San Francisco Asian Pacific American Heritage Lifetime Achievement Award (2010), and the Silver SPUR award (2012) for enhancing the quality of life and vitality of the San Francisco Bay Area. Dr. Chow is the president of the Health Commission and currently chairs the San Francisco General Hospital Joint Conference Committee and is a member of the Finance and Planning Committee. He is serving his seventh term on the Health Commission.

**David B. Singer, MBA, Vice-President**

David B. Singer is Managing Partner of Maverick Capital Ventures. Mr. Singer is a founder and former CEO of three healthcare companies: Affymetrix, Inc.; Corcept Therapeutics, Inc.; and Genesoft Pharmaceuticals. Mr. Singer currently serves on the boards of private and public companies in the fields of healthcare information technology, healthcare delivery, and biotechnology. Mr. Singer received a B.A. from Yale University and an M.B.A. from Stanford University. He was a Crown Fellow of the Aspen Institute and a member of the Rand Corporation’s Health Advisory Board. He is currently a Sterling Fellow of Yale University, and a director of College Track. Commissioner Singer sits on the Finance and Planning Committee and the Zuckerberg SF General Joint Conference Committee. He was appointed to the Health Commission in 2013.
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 former Deputy Director of the Transgender Law Center and has served on a number of planning bodies, which include 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 currently President of the United States People Living with HIV Caucus. Commissioner Chung chairs the Finance and Planning Committee and is a member of the Laguna Honda Hospital Joint Conference Committee and the Community and Public Health Committee. She was appointed to the Health Commission in 2012.

Judith Karshmer, Ph.D., PMHCNS-BC

Dr. Karshmer is the Dean of the School of Nursing & Health Professions at the University of San Francisco. Dr. Karshmer completed her undergraduate degree in nursing at the University of Iowa, graduate degree in advanced psychiatric-mental health nursing at Rutgers-The State University of New Jersey, masters in social psychology at the University of Massachusetts and PhD at New Mexico State University. She is the immediate past president of the California Association of Colleges of Nursing, member of the AACN-AONE Task Force on Academic-Practice Partnerships, and was recently elected as CCNE Commissioner, representing deans. Commissioner Karshmer was appointed to the Health Commission in 2013. She is a member of the Community and Public Health Committee and the Laguna Honda Hospital Joint Conference Committee.

David Pating, M.D.

David Pating, MD, is a psychiatrist and Chief of Addiction Medicine at Kaiser San Francisco Medical Center. He is an Associate Clinical Professor at UCSF School of Medicine and site-director for the UCSF fellowship in Addiction Psychiatry. As a member of the Permanente Medical Group, Dr. Pating served as regional chair of Addiction Medicine. He was also Vice-chair of California’s Mental Health Services Oversight and Accountability Commission (Proposition 63); past-president of the California Society of Addiction Medicine; a member of the California Medical Association, California Psychiatric Association and American Society of Addiction Medicine; and an active board member of the California Public Protection and Physician Health, Inc., the California Institute of Behavioral Health Solutions, San Francisco Medical Society, and National Quality Forum’s Behavioral Health Standing Committee. Dr. Pating joined the health commission in 2014. He chairs the Community and Public Health Committee and is a member of the Laguna Honda Joint Conference Committee.
David J. Sanchez, Jr., Ph.D.

Commissioner Sanchez is Professor Emeritus at University of California, San Francisco. Commissioner Sanchez is a member of the Zuckerberg SF General Joint Conference Committee and the Chair of the Laguna Honda Hospital Joint Conference Committee. He is a member of the Zuckerberg SF General Foundation Board. He has also served on the San Francisco Board of Education and the Community College Board, the San Francisco Police Commission, and is Trustee Emeritus of the San Francisco Foundation. He was appointed to the California Commission on Aging in 2013. He has served on the Health Commission since 1997.

Belle Taylor-McGhee

Commissioner Taylor-McGhee is a national leader in women’s reproductive health, a public speaker, published writer, and an experienced non-profit executive director. Currently, Ms. Taylor-McGhee is a consultant with JLM Management Group, a multi-disciplinary consulting firm specializing in strategic communications, media and public relations, and business development. Commissioner Taylor-McGhee chairs the Community and Public Health Committee and is a member of the Laguna Honda Hospital Joint Conference Committee and the Finance and Planning Committee. She was appointed to the Health Commission in 2012.

Mark Morewitz, MSW, is the Health Commission Executive Secretary
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<td>Approving the Conveyance of an Easement for Overhead Electrical Facilities at the Priscilla and Mark Zuckerberg Zuckerberg SF General and Trauma Center to Pacific Gas and Electric Company; Adopting Findings Under the California Environmental Quality Act (“CEQA”), CCEQA Guidelines and San Francisco Administrative Code Chapter 31, Including the Adoption of a Mitigation Monitoring and Reporting Program and a Statement of Overriding Considerations; and Directing the Director of Health to Seek Approval of the San Francisco Board of Supervisors</td>
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<td>Determining the Impact of the Closure of 32 Short-Term Skilled Nursing Facility Beds at St. Mary’s Medical Center on the Health Care Services in the Community</td>
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<td>Endorsing a Non-Binding Term Sheet Between the City and County of San Francisco and the Regents of the University for a Ground Lease of the B/C Lot at the Priscilla and Mark Zuckerberg Zuckerberg SF General and Trauma Center for the Purpose of Building a New UCSF Research Facility and Directing Department of Public Health Staff to Seek an Endorsement of the San Francisco Board of Supervisors</td>
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<td>Authorizing the Department of Public Health to Recommend to the Board of Supervisors to Accept and Expend Retroactively a Gift of $400,000 and Another Gift of $100,000 from Dr. Milka Rols</td>
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14-17 Supporting Palliative Care and the Recommendations of the Palliative Care Task Force

14-16 Recommending that the Health Care Services Master Plan Consistency Determination for Jewish Home’s Proposed Project Be Considered Consistent and Recommended for Incentives

14-15 Authorizing the SFDPH LHH to Enter into the California Department of Transportation’s Standard Agreement to Acquire Two Medium Sized Transit Shuttle Vehicles as Part of the Federal Transportation Administration Section 5310 Program

14-14 Authorizing the SFDPH LHH to Enter into the California Department of Transportation’s Standard Agreement to Acquire One Large Transit Shuttle Vehicle as Part of the Federal Transportation Administration Section 5310 Program

14-13 Amending the Healthcare Accountability Ordinance Minimum Standards

14-12 Supporting the Availability of Health Care Services to Meet the Needs of Unaccompanied Immigrant Central American Youth

14-11 Approving Eligibility Changes to Healthy San Francisco and the City Option MRA to Align With and Support the Affordable Care Act and Findings and Guiding Principles of the 2013 Universal Healthcare Council Final Report

14-10 Approving the Submission of an Update Institutional Master Plan for ZSFG as Required by City Planning Code Section: 304.5

14-09 Honoring Commissioner Sonia Melara, MSW

14-08 Determining that the Closure of 24 Skilled Nursing Facility Beds at California Pacific Medical Center Will Have a Detrimental Impact on Health Care Services In the Community
From October 2014 through February 2015 the San Francisco Department of Public Health (SFDPH) activated its Departmental Operations Center (DOC) in response to the Ebola outbreak in West Africa, the largest known Ebola outbreak to date. The Ebola threat presented a unique challenge to the public health community as well as the health care system. The wide range of agencies and individuals that would be needed to respond to a potential Ebola case in San Francisco, the complex infection control precautions required, and emerging and complex guidance from State and Federal partners necessitated an intense effort by the Department to develop plans for a high stakes response. Additionally protocols were created at short notice for monitoring the health of individuals returning from to West Africa (in most cases having traveled to help with the Ebola effort), to ensure that these returning travelers remained healthy and safe once back in the US.

The Ebola DOC used the national Incident Command System to organize the department’s preparedness efforts. Over 100 SFDPH staff, representing multiple disciplines, were activated during this time period. The Department reached out for volunteers and was proud of the staff who responded to the call. Staff indicated their interest in assisting with a range of key activities, including providing outreach to increase awareness and clarify misconceptions related to the Ebola virus, conducting investigations and contact tracing should it be necessary, and providing administrative support for the overall effort.

Accomplishments during the activation included providing support and technical expertise to City departments concerning Ebola, robust coordination and planning with the San Francisco health care system, development and implementation of monitoring protocols, large scale training and education around personal protective equipment (PPE) for Ebola, and dissemination of Ebola information and guidance. The department also monitored 113 patients who returned from Ebola-affected countries. The activation brought together multiple branches throughout the department, and multiple departments within the city, to collaboratively plan and prepare for this disease. It furthered public health preparedness immensely, and demonstrated that SFDPH is able to successfully respond to emerging infectious diseases and to protect the health of San Francisco residents and visitors.
Tooth decay is the most common chronic childhood disease in the U.S. Children with untreated cavities experience pain, dysfunction, school absences, difficulty concentrating and low self-esteem. Poor oral health also has high costs; in 2007 there were 1,273 dental-related Emergency Room visits in San Francisco (all ages), costing $5,000 per child to visit the Emergency Room (if they are hospitalized for their dental related illness).

San Francisco preschoolers and kindergartners experience more untreated decay than the rest of the country’s children. Low income kindergartners in San Francisco are eight times more likely to have untreated tooth decay. Children of color in San Francisco are two to three times more likely to have untreated decay than white children. Denti-Cal, the Medi-Cal dental program, has been inundated with new patients due to the Medi-Cal expansion of 2014. Most of these new patients are adults taking what were already scarce appointment spots.

In response to these challenges, the Children's Oral Health Strategic Plan was developed by the SF Health Improvement Partnership (SFHIP) and funded by the Metta Fund, the United Way and the California Department of Public Health. SFHIP is a cross-sector initiative designed to improve the health and wellness of all San Franciscans, combined the efforts of three successful community health improvement collaborations: San Francisco’s non-profit hospitals and their Community Benefits Partnership (CBP) and Building a Healthier San Francisco (BHSF) projects; the Clinical and Translational Science Institute (CTSI) at the University of California, San Francisco; and the San Francisco Department of Public Health and its community health improvement process.

The SFHIP steering committee includes members from UCSF, UOP, Kaiser, SFDPH (Population Health Division, Primary Care and Maternal Child and Adolescent Health), Native American Health Center, the SF Dental Society, API and Head Start. Input for the plan was received at two city wide retreats with more than 50 participants from agencies including: Denti-Cal, SF Health Plan, Blue Cross, WIC, CarCen, SF Dental Hygiene Society, safety net dental clinics and many other groups.

The vision of the plan: “All children in San Francisco are cavity free.” Target groups are children under 10, pregnant women, and at risk populations, including low-income communities of color and recent immigrants. The plan’s goals by 2017 include: a 10 percent reduction in cavities in kindergartners, and a 50 percent reduction of untreated dental decay in kindergartners, a reduction in the gap from 20 to 15 percent between children of color and white children with respect to risk of cavities. Goals also include increasing the percentage of children under 10 years old who receive Denti-Cal services by 10 percent, increasing the percentage of children on Medi-Cal who have seen a dental provider by age 1 by 10 percent, and increasing the percentage of women on Medi-Cal that had a dental visit during pregnancy by 20 percent. Dental Sealants have been found to be very successful in preventing cavities in young children. An additional goal is to increase the number of low-income children who have received dental sealants on their permanent teeth in San Francisco schools. This plan also promotes the integration of oral disease prevention into well child visits, and increases early access to dental providers WIC sites, preschool centers and elementary schools.
In 2014, the San Francisco Department of Public Health (SFDPH) leadership began to address the health disparities among the Black/African American population in San Francisco through a focused and deliberate process across the Department. Through the Black/African American Health Initiative (BAAHI) Think Tank planning group, which is comprised of about 100 staff members, representing both the San Francisco Health Network and the Population Health Division, helped identify strategies identified three Working Groups – Collective Impact, Cultural Humility, and Workforce Development. During 2015, Think Tank members met quarterly to discuss health disparities, prioritize work activities, review project progress updates, and celebrate the health of our multicultural staff at SFDPH.

WORKING GROUPS

Think Tank members and additional staff across the department signed up to serve on the respective Working Groups. Below is a description of the groups and its progress to date:

- **Collective Impact** – The San Francisco Network and Population Health Division have been working diligently on building a collective impact model to boost clinical outcomes in the African American population starting with our SF Health Network clients. SFDPH is increasing vigilance about African American health status and standardizing care across the department to eliminate inconsistencies and improve the health in our communities. In FY 14/15, the SFDPH continued its cross-sectorial strategic collaboration between the San Francisco Health Network and the Population Health Division on the BAAHI Initiative to address the significant disparities in health status and health outcomes disproportionately affecting the African American community. The Collective Impact Working Group prioritized four health areas: 1) heart health; 2) behavioral health; 3) women’s health; and 4) sexual health. To demonstrate BAAHI in action, SFDPH received a three-year REACH grant to focus on improving heart health through increased access to physical activity among the African American and Latino population in San Francisco.

- **Cultural Humility** – Honest conversations with and among staff about race and the impact of race on our behavior and our understanding of one another and of our patients has been the focus of the BAAHI Cultural Humility Working Group. To date, nearly 200 executive leaders and senior managers have undertaken a rigorous course of racial humility trainings, led by nationally recognized expert Dr. Ken Hardy. This investment in SFDPH workforce will continue with future trainings planned at Laguna Honda Hospital, San Francisco General Hospital, 1380 Howard and at several population health programs.

- **Workforce Development** – To ensure that our workforce reflects our patient population as much as possible, SFDPH is working to improve HR processes, which includes creating career paths for African American employees, expanding recruitment efforts and providing education on identifying and avoiding bias in the hiring process. One of the first activities for the BAAHI Workforce Development working group identified was to establish a baseline of data regarding employee demographics.
During this year, the group identified the data to be gathered - by race/ethnicity, classification and work unit in order to determine areas where we lack diversity. The data was summarized and presented as a report at the October Think Tank quarterly meeting. Director Garcia also presented current activities to promote interest among African Americans in pursuing careers in public health, develop strategies to retain and motivate a diverse staff, and support continuing education and learning career pathways for current and new staff.

**BAAHI Workforce Development**

Working Group members will develop a set of recommendations to increase the recruitment and retention of Black/African American staff through subcommittees focused on:

- Training Efforts
- Mentoring Programs for African Americans
- Hiring Manager Review and Hiring Panel
- Pathways and Marketing
- Job Announcements
- Exam processes and minimum qualifications

**BAAHI NEXT PHASE – FUTURE STEPS**

BAAHI Think Tank, committee members, and staff will continue to work on Working Group deliverables in the next phase of the BAAHI. Through the combination of these strategic efforts, SFDPH staff will be supported and better equipped to work together to deliver care to our diverse patient and client population, and able contribute toward improvements in the health of San Francisco’s Black/African American community.
MINORITY AIDS INITIATIVE-TARGETED CAPACITY EXPANSION PROGRAM

The Minority AIDS Initiative-Targeted Capacity Expansion (MAI-TCE) Program was a successful, multidisciplinary initiative funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Numerous branches of the San Francisco Department of Public Health and community partners collaborated to better respond to the complex needs of people living with and at risk for HIV (PLWARH) with co-occurring mental health and substance use (behavioral health) disorders.

Between April 2012 and October 2015, over 400 MAI-TCE clients were able to access culturally competent and effective integrated behavioral health care aimed to improve quality of life and HIV-related health outcomes and reduce symptoms and impact of behavioral health concerns. In addition, a brief, one-time, early-intervention service for gay and bisexual men and transwomen who have sex with men was offered to reduce the harmful effects of binge drinking on HIV transmission risk.

The MAI-TCE program offers valuable lessons learned for addressing behavioral health needs of PLWARH within medical settings. The results challenge current norms regarding recovery expectations for people affected by HIV, substance use, and mental health concerns. Given the current trends in health care, this integration model represents a best practice and should be considered for replication.

CRYPTOSPORIDIOSIS SURVEILLANCE

The Bay Area Cryptosporidiosis Surveillance Project (CSP) monitors human cryptosporidiosis in Bay Area Counties served by the San Francisco Public Utilities Commission: Alameda, San Francisco, San Mateo, and Santa Clara, and Tuolumne County, where the Hetch Hetchy Reservoir is located. During January-April 2015, the Cryptosporidiosis Surveillance Project received an unusually high number of case reports of cryptosporidiosis among San Francisco residents. Most cases were homeless, many were HIV positive, and although several were hospitalized, there were no reported deaths or severe complications.

In collaboration with the Communicable Disease Prevention and Control Unit at SFPD, a health update advisory was distributed to local clinicians, targeting primarily those serving the homeless communities. Analysis of the interviews and medical notes did not suggest a point source outbreak. Additionally, routine monitoring of Cryptosporidium by the SFPUC confirmed that the drinking water was safe to drink. Since May 2015, the Cryptosporidiosis cases have returned to baseline rates in San Francisco and the outbreak among homeless/HIV-infected individuals has resolved.

DISASTER PREPAREDNESS AND ORGANIZATIONAL RESPONSE CAPACITY

As part of SFPD’s overall response to the Ebola outbreak, Ambulatory Care (AC) Disaster Preparedness led efforts in coordinating with programs throughout SFHN and the Population Health Division to create screening, containment, transfer, and decontamination protocols for all AC sites in Primary Care (PC), Behavioral Health Services (BH), Zuckerberg SF General (ZSFG), Laguna Honda (LHH), and shelter sites. In collaboration with Occupational Health Services, AC instituted division-wide training and held integrated drills with ZSFG and Emergency Medical Services.

AC Disaster Preparedness has also conducted training throughout primary care. Currently all 14 PC sites have completed 3 separate modules in disaster preparedness and response, clinical stabilization of common injuries and crisis management of scarce resources. In addition each PC site has completed table top exercises for management and command staff followed by multidisciplinary single site exercises that will include participation from DOC, ZSFG and AC local command. These exercises will score basic disaster training competencies, and determine surge capacity for each site. In addition, AC Disaster Preparedness is currently taking inventory of Behavioral Health, Maternal Child and Adolescent Health and community-based contractor sites in order to develop standardized yet site-specific emergency procedure plans.
VISION ZERO

Vision Zero is San Francisco’s policy to eliminate all traffic-related deaths by 2024. Every year, about 30 people lose their lives and over 200 more are seriously injured while traveling on city streets. Approximately 12% of streets account for over 70% of severe and fatal traffic injuries. These deaths and injuries are preventable, and San Francisco is committed to stopping further loss of life.

This year, Federal and State officials from the National Highway Traffic Safety Administration, California Office of Traffic Safety, and California State Transportation Agency visited San Francisco for a summit on Vision Zero. SFDPH Co-Chairs the Citywide Vision Zero Task Force with the SF Municipal Transportation Agency (SFMTA). The following strategies focused on education, evaluation and data:

- Educated schoolchildren and their families about safe and active walking and biking through the Safe Routes to Schools Program
- Partnered with Supervisor Kim’s office to produce street banners instructing drivers to “Slow Down! We live here.”
- Partnered with SFMTA, SFPD and Walk San Francisco on Safe Streets SF, an educational pedestrian safety program.
- Developed a transportation injury surveillance system linking hospital and police collision records. This work will help capture the estimated 25% of pedestrian and cyclist injuries not included in police records.

PRE-EXPOSURE PROPHYLAXIS PROGRAM

Pre-Exposure Prophylaxis (PrEP) is a highly effective HIV prevention tool for at risk individuals, and a key component of the SF Getting to Zero (GTZ) initiative. Several large studies, many conducted in collaboration with UCSF, have demonstrated the effectiveness of daily PrEP, as part of a comprehensive HIV prevention package.

The SFHN has developed a multifaceted PrEP program to increase PrEP access through primary care. The SFHN PrEP Program recently developed and disseminated PrEP clinical management guidelines to more than 30 primary care providers at SFHN clinics. These trainings provide guidance on PrEP evaluation, initiation, and monitoring of PrEP services for patients in their medical home. In addition, a PrEP referral clinic will be opening at the Positive Health Program (Ward 86) in November 2015. This clinic will serve as a referral and consultative resource for providers within the SFHN, and provide consultation and training for local partners.

In an effort to ensure equity, and aligned with the goals of GTZ, the SFHN PrEP Program has developed this coordinated PrEP program with a focus on communities disproportionately impacted by HIV including young MSM, women at risk for HIV, and communities of color.

SAFE DEVICE COMMITTEE

The SFDPH Occupational Safety and Health (OSH) Section serves as a resource within the Department of Public Health on issues related to occupational injury and illness prevention. This includes conducting evaluations of reported workplace hazards and unsafe working conditions, developing programs and policies to prevent injuries and ensuring compliance with safety and health regulatory requirements.

The SFDPH Bloodborne Pathogen (BBP) Safe Device Committee works with managers, supervisors, and front line users to identify safe work practices, evaluate and select safety devices and develop training curriculum and evaluation criteria to reduce the risk of blood and body fluid exposure.

This year the Safe Device Committee focus has been on updating the non-safety device inventory for each unit within the SFDPH. By identifying non-safety devices, alternative safety devices can be identified thereby reducing the risk of BBP exposure. Projects included replacing disposable eye glasses with ones that offer more protection and creating signage with a description and pictures of the sharp safety devices being used in each facility. Posters were placed on each ZSFG unit and will be installed at LHH, JHS and Primary Care.
FISCAL YEAR 14/15 HIGHLIGHTS

PROTECTING HEALTH

SECURITY

SFDPH is committed to providing a safe, secure, accessible, and effective environment of care, consistent with its mission, scope of services, and applicable governmental mandate. This commitment includes the provision of a physical environment that minimizes the risk of harm to patients, staff and visitors. In FY 14/15 SFDPH Security accomplished the following:

- Completed a security risk assessment for all SFDPH facilities, and developed a security management plan that established the framework, organization, and processes for the development, implementation, maintenance, and continuous improvement of a comprehensive security management program. The program is designed to provide protection through appropriate staffing, security technology, and environmental controls.
- Developed security operation procedures for ZSFG.
- Provided Crisis Prevention and Intervention Training for 600 employees.
- Developed a SFDPH security resource plan to address operational efficiency.
- Developed governance protocols to validate the compliance of the contract security provider.

HEPATITIS C

With new curative treatments now available for Hepatitis C, SFDPH is poised to expand access to prevention, testing, and treatment. In FY 14/15 a needs assessment resulted in the development of five overarching goals around addressing hepatitis C (HCV) in San Francisco: 1) Increase HCV awareness in affected communities, 2) Increase community and clinic-based screening, 3) Develop a linkage-to-care program, 4) Increase primary care provider capacity to treat HCV, and 5) Increase patient uptake of curative therapies. This initiative is a joint effort of the Population Health Division and the San Francisco Health Network.

Successes in FY 14/15 include:

- Increased access to HCV testing in the community HCV (four SFDPH-funded methadone programs are now screening for HCV onsite in addition to Magnet, City Clinic, and all existing community-based HIV testing sites).
- Excellent primary-care based treatment at Tom Waddell Urban Health, resulting in 39 patients being cured of HCV.
- Development of a SFHN-wide training plan to enable providers to treat hepatitis C in the primary care setting.
- Development of a social marketing campaign to increase hepatitis C awareness among people who inject drugs, to be launched in early 2016.
- Establishing the infrastructure for a new linkage to care program, to begin in early 2016.

DEMENTIA CARE

The Memory Care and Dementia Program at Laguna Honda provides services for San Franciscans living with moderate to severe cognitive impairment. Laguna Honda’s program provides services that promote resident choice, includes structured activities, and maximizes resident abilities in the most independent setting available to fit their needs. These include social environments such as the Virginia Leishman Farm and the aquatics pools used for therapy or relaxation, and art classes hosted by Art With Elders and performances by Medical Clowns.

The effectiveness of the program can be seen through various measures as profiled by Medicare. Laguna Honda was rated lower than both California and national averages on percentages of long-stay residents who were physically restrained, have depressive symptoms and received antipsychotic medication. Laguna Honda’s goal is to maintain this trend as well as learn best practices recognized by the Alzheimer’s Association, which is the preferred organization when it comes to approaches in dementia care.
San Francisco’s uninsured rate has halved since 2014, with over 97,000 residents enrolling in ACA coverage. However, thousands remain ineligible for ACA options or are unable to afford coverage due to the city’s high cost of living. To address these concerns, the Health Commission approved an SFDPH plan to ensure affordable access to health care for all low- and moderate-income San Franciscans.

The plan leverages the city’s Health Care Security Ordinance infrastructure, which obligates covered employers to make health care expenditures for their employees, and includes Healthy San Francisco (HSF) and the City Option.

The plan maintains the comprehensive HSF safety net for uninsured San Franciscans ineligible or ACA coverage. Effective January 1, 2016, HSF eligibility will be extended to uninsured residents without affordable options, and upper income threshold increased to 500% of the federal poverty level (FPL).

Another key component, called Bridge to Coverage, is slated to launch in late 2016, and will benefit 3,000 San Franciscans, many of whom are part-time or low-wage employees. The program will be available to uninsured residents earning up to 500% FPL, eligible to buy on Covered California, and receiving employer contributions to the City Option.

The entire health department has been intensely focused on the construction of Zuckerberg San Francisco General Hospital’s new acute care and trauma building. From the planning that started in 2006, to the 2008 bond measure and the groundbreaking in 2009, the exciting rebuild project is now nearing its conclusion.

The opening of the new hospital building has been adjusted to accommodate the advanced technologies and critical care services that ZSFG will provide, as the city’s only trauma center. Before moving patients into our new facility, the hospital is installing equipment and IT, testing systems, training and orienting 5,400 employees. The new building will also have a state-of-the-art “hybrid operating room”, which is a new life-saving feature that brings interventional radiology into the surgical suite for our trauma center. Very few hospitals have such advanced technologies, and ZSFG will be fortunate to offer this to our most critically ill patients. The expertise and dedication of the entire ZSFG Rebuild team, SFDPH and hospital leaders, DPW project managers, Webcor Builders, Fong & Chan Architects, Jacobs, and the support of San Francisco residents and the ZSFG Foundation have culminated in an impressive new building that will improve care for future generations. The new building is expected to be open for patient care in the spring of 2016.

The Hummingbird Place, a Peer Respite launched in May of 2015, provides a safe space and less restrictive setting for those needing alternatives to hospitalization. Under this peer model, staff with lived experience work with service providers in the community to divert eligible participants from emergency settings. The Peer Respite can also take in individuals exiting the hospital that may need extra support rejoining the community.

The Peer Respite is located on the grounds of Zuckerberg San Francisco General Behavioral Health Center (BHC) and has a non-institutional home-like environment, where guests have a respite from the stressors that overwhelm their daily lives. The Peer Respite has the capacity to serve up to 20 individuals and operates 24/7 with beds for four overnight guests. The Peer Respite can also serve as temporary housing for guests requiring additional support to avoid hospitalization or to facilitate their successful return to the community.

Peer staff work closely with case managers and other service providers to identify those, who would benefit from the Respite as an alternative to crisis or emergency services. By participating in Wellness Recovery Action Plan, stress reduction, one-to-one counseling, art therapy, music, yoga, gardening and food preparation, guests learn new tools for living outside a controlled environment.
PRIMARY CARE DENTAL PROGRAM EXPANSION

Beginning in July 2014, SFHN Primary Care expanded routine dental services to non-pregnant adults with Medi-Cal. They are served at Southeast and Potrero Hill Health Centers. The SFHN team of dentists, dental hygienists and dental assistants now provides dental services to all Primary Care patients with Medi-Cal, while continuing to provide urgent dental care for adults covered by Healthy San Francisco. High quality dental care is also provided at Silver Avenue Family Health Center, Chinatown Public Health Center, Southeast Health Center and Potrero Hill Health Center, and Tom Waddell Urgent Care.

Since the expansion in July, 2014, SFHN Dental Services have increased the number of adults served at Southeast Health Center by over 59%. At Potrero Hill Health Center, adult patient visits increased by 72% over the previous fiscal year. It plans to continue expanding dental services in order to provide timely access to high quality dental care for all adults and children served by SFHN Primary Care.

AMBULATORY CARE REDUCING HEALTH DISPARITIES

Ambulatory Care seeks to reduce health disparities in key areas, including hypertension control and breast cancer screening. Across the San Francisco Health Network (SFHN) primary care clinics, Black and African American (BAA) hypertensive patients have lower rates of blood pressure (BP) control compared to nonblack populations. In FY 14/15 SFHN Primary Care initiated quality improvement efforts targeting BP control, including training analysts to use the a chronic disease registry to track BP control by race over time, introducing equity as a quality improvement framework with clinics and key stakeholders, and prioritizing potential interventions. From January 2015 to August 2015, the control rate for BAA patients improved from 53% to 57%, and the entire SFHN PC population improved from 61% to 66%.

The Breast Cancer Screening (BigAIMS) initiative has also made great strides in improving access. Drop-ins were established on the MammOVan, which have increased patient scheduling flexibility while improving screening rates and reducing unfilled slots. An analysis of screening rates by race/ethnicity revealed an 11% gap for BAA patients in 2014. Between April 2014 and Sept 2015, overall PC screening rates increased from 68% to 73% while rates for BAA women increased from 61% to 68%, a 6% reduction in the disparity gap.

PALLIATIVE CARE

During the summer of 2014 a diverse group of representatives from San Francisco’s leading health care and community organizations, advocacy and professional associations, and consumers, convened to discuss San Francisco’s palliative care needs. The Task Force resulted in a summary report which provides short- and long-term recommendations on how to move San Francisco closer to meeting the palliative care needs of its residents—critical in light of the city’s aging demographics and the need for culturally responsive long-term care options. Recommendations were developed in four key areas: Quality, Finance, Systems, and Community Engagement. Individually and collectively, the recommendations provide a valuable framework for achieving collaborative and integrated palliative care in all settings and across the care continuum. As a result of these efforts, San Francisco’s Long Term Care Coordinating Council created a Palliative Care Committee which is currently working on implementing identified recommendations.
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), which includes the Behavioral Health Center (BHC); Laguna Honda Hospital (LHH); Primary Care (PC); Health at Home (HAH); and Jail Health Services. Major service components include primary care, specialty care, acute care, home health care, long-term care, and emergency care.

The following table summarizes data from ZSFG, LHH, and PC. Please note that Women's Health Center activities are counted under Specialty Care.

### SF Health Network Patient Encounters

<table>
<thead>
<tr>
<th>Encounter Type</th>
<th>FY 12/13</th>
<th>FY 13/14</th>
<th>FY 14/15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care</td>
<td>270,499</td>
<td>274,471</td>
<td>266,803</td>
</tr>
<tr>
<td>Specialty Care</td>
<td>235,252</td>
<td>228,501</td>
<td>232,806</td>
</tr>
<tr>
<td>Dental Care</td>
<td>11,994</td>
<td>14,146</td>
<td>14,472</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>28,176</td>
<td>25,281</td>
<td>18,853</td>
</tr>
<tr>
<td>Emergency Encounters</td>
<td>77,628</td>
<td>74,713</td>
<td>75,632</td>
</tr>
<tr>
<td>Medical Encounters</td>
<td>70,783</td>
<td>67,737</td>
<td>68,592</td>
</tr>
<tr>
<td>Percent Admitted</td>
<td>20%</td>
<td>18%</td>
<td>14%</td>
</tr>
<tr>
<td>Psychiatric Encounters</td>
<td>6,845</td>
<td>6,976</td>
<td>7,040</td>
</tr>
<tr>
<td>Percent Admitted</td>
<td>33%</td>
<td>26%</td>
<td>18%</td>
</tr>
<tr>
<td>Encounters Requiring Trauma Center Services Activations</td>
<td>3,188</td>
<td>3,647</td>
<td>4,033</td>
</tr>
<tr>
<td>Diagnostic and Ancillary</td>
<td>222,882</td>
<td>225,756</td>
<td>176,056</td>
</tr>
<tr>
<td>Acute Inpatient</td>
<td>96,858</td>
<td>93,425</td>
<td>89,567</td>
</tr>
<tr>
<td>Actual Days at SFGH</td>
<td>95,636</td>
<td>91,458</td>
<td>89,014</td>
</tr>
<tr>
<td>Actual Days at LHH</td>
<td>1,222</td>
<td>967</td>
<td>553</td>
</tr>
<tr>
<td>Home Health Care Visits</td>
<td>19,098</td>
<td>18,872</td>
<td>19,781</td>
</tr>
<tr>
<td>Skilled Nursing Care</td>
<td>312,850</td>
<td>299,174</td>
<td>293,226</td>
</tr>
<tr>
<td>Actual Days at SFGH</td>
<td>7,326</td>
<td>7,662</td>
<td>9,012</td>
</tr>
<tr>
<td>Actual Days at BHC</td>
<td>28,272</td>
<td>16,384</td>
<td>11,314</td>
</tr>
<tr>
<td>Actual Days at LHH</td>
<td>277,216</td>
<td>275,128</td>
<td>272,900</td>
</tr>
</tbody>
</table>
*Data not shown: Native Americans comprise approximately 1% of the population served in all health systems above. Race/ethnicity data is unknown for 2-11% of patients served.

*Data collection and reporting for transgender patients is currently under development.
SF Health Network Patients by Age, FY 14/15

SF Health Network Hospital Patient Payer Source, FY 14/15
CBHS relies on a network of civil service and contracted providers to offer high-quality services to CBHS mental health and substance abuse clients. The tables below indicate the number of CBHS mental health and substance abuse clients served by contractors vs. civil service providers in FY 14/15.

### CBHS Mental Health Clients Served

<table>
<thead>
<tr>
<th>Provider</th>
<th>Unduplicated Client Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract Providers</td>
<td>15,335</td>
</tr>
<tr>
<td>Civil Service Providers [1]</td>
<td>13,588</td>
</tr>
<tr>
<td>Total Unduplicated Clients</td>
<td>24,767</td>
</tr>
</tbody>
</table>

### CBHS Substance Abuse Clients Served

<table>
<thead>
<tr>
<th>Provider</th>
<th>Unduplicated Client Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract Providers - Treatment Services</td>
<td>7,453</td>
</tr>
<tr>
<td>Contract Providers - Prevention, Education &amp; Sobering Services</td>
<td>~15,000</td>
</tr>
<tr>
<td>Civil Service Providers [2]</td>
<td>NA</td>
</tr>
<tr>
<td>Total Unduplicated Clients</td>
<td>~22,390</td>
</tr>
</tbody>
</table>

[1] Clients may be seen by multiple contract agencies and by both contract and civil service providers. The duplicated client count gives a sense of client activity whereas the unduplicated count indicates the number of unique clients seen by contract and civil service counts.

[2] There are no civil service substance abuse programs in CBHS.
SFDPH has been a leader in the field of public health for decades, providing important innovations in interventions and programs. However, in spite of these successes, San Francisco faces many health challenges: a striking epidemic of adult and youth obesity and its complications (e.g., childhood type 2 diabetes and hypertension); high rates of infant mortality, and persistent health inequities related to ethnic, social, economic, and environmental factors. SFDPH's ongoing efforts to meet emerging challenges are reflected in the Strategic Plan for our Population Health Division. In Fiscal Year 14/15 PHD conducted the following key programmatic activities that support PHD’s strategic plan focus areas.

### Safe and Healthy Living Environments:

- **Tobacco Free Project**
  - 92 participants attend stop smoking class
  - 34 participants (39.5%) quit smoking

### Healthy Eating and Physical Activity:

- **Shape Up SF**
  - 30 trainings on effects of sugary drinks

- **Healthy Retail SF**
  - 22 Bayview Hunters Point stores participate
  - 10 stores improve healthy retail score

- **Safe Routes to School**
  - 28% increase in walking to school
  - 32% increase in biking to school

### Access to Quality Care and Services:

- **HIV Care**
  - 90% of HIV-positive patients received care within 3 mos of diagnosis

- **Newcomer Health**
  - 348 newly documented refugees enrolled
  - 13 outreach events
FISCAL YEAR 14/15 BY THE NUMBERS

POPULATION HEALTH

BLACK/AFRICAN AMERICAN HEALTH

RACIAL/CULTURAL HUMILITY TRAINING 61 SENIOR LEADERSHIP AND MANAGERS TRAINED

MATERNAL, CHILD, ADOLESCENT HEALTH

NURSE FAMILY PARTNERSHIP 152 FAMILIES SERVED

CHILD CARE HEALTH PROGRAM 1,052 CHILDREN SCREENED

HIV PREVENTION

150,902 PEOPLE SERVED
1,406,229 FREE CONDOMS DISTRIBUTED
24,770 HIV TESTS PROVIDED
In FY 14/15, SFDPH’s budget was $1,984,261,187. The City and County contributed $614,148,840 in General Fund dollars to SFDPH, an increase of $60,409,934 from FY 13/14 allocation of $553,738,906. This overall increase resulted from a combination of revenue increases and the following major initiatives:

- $4.4 million to support meaningful use of Electronic Health Records
- $1.4 million to create a centralized call center for the SF Health Network to handle primary care appointment scheduling
- $2.5 million for IT operating costs, including enhanced security.
- $2.3 million for specialty behavioral health services support by 2011 realignment

Several initiatives to support healthcare reform, many of which were offset by corresponding revenue increases, including increasing nonspecialty mental health services, restructuring maternal and child health programming and specialty and ancillary services at Zuckerberg San Francisco General.
■ 18 Reasons
■ 44 McAllister Associates LP
■ 473 Ellis LP
■ A Better Way
■ Aquilas
■ AIDS Community Research Consortium
■ AIDS Emergency Fund
■ AIDS Legal Referral Panel of the San Francisco Bay Area
■ Alternative Family Services
■ APA Family Support Services
■ Asian American Recovery Services
■ Asian and Pacific Islander Wellness Center
■ Asian Week Foundation
■ Asthma Resource Center of San Francisco
■ BAART Behavioral Health Services
■ BAART Community Healthcare
■ Baker Places
■ Bay Area Addiction Research and Treatment (BAART)
■ Bay Area Communication Access
■ Bay Area Young Positives
■ Bayview Hunters Point Foundation for Community Improvement
■ Bayview Hunters Point Health and Environmental Resource Center (HERC)
■ Black Coalition on AIDS
■ Boys and Girls Clubs of San Francisco
■ California Family Health Council
■ California Institute of Integral Studies
■ Catholic Charities CYO of the Archdiocese of San Francisco
■ Center on Juvenile and Criminal Justice
■ Central American Resource Center of Northern California
■ Central City Hospitality House
■ Children's Council of San Francisco
■ Chinatown Community Development Center
■ City College of San Francisco
■ Community Awareness and Treatment Services
■ Community Housing Partnership
■ Community Initiatives
■ Community Youth Center San Francisco
■ Conard House
■ Crestwood Hope Center
■ Dignity Health (formerly Catholic Healthcare West)
■ Dolores Street Community Services
■ Edgewood Center for Children and Families
■ Eldergivers
■ Episcopal Community Services of San Francisco
■ Family Service Agency of San Francisco
■ Fort Help LLC
■ Fred Finch Youth Center
■ Friendship House Assn. of American Indians
■ Glide Community Housing
■ GP/TODCO A (TODCO Development Co.)
■ Hamilton Family Center
■ Harm Reduction Coalition
■ HealthRight 360
■ Helios Healthcare LLC
■ Homeless Children's Network
■ Homeless Prenatal Program
■ Horizons Unlimited of San Francisco
■ Huckleberry Youth Programs
■ Hyde Street Community Services
■ Institute for Community Health Outreach
■ Institute on Aging
■ Instituto Familiar de la Raza
■ International Institute of the Bay Area
■ Internet Sexuality Information Services
■ Iris Center: Women's Counseling and Recovery Services
■ Japanese Community Youth Council
■ Jelani House
■ Jewish Family and Children's Services
■ John Muir Behavioral Health Center
■ Justice and Diversity Center of the Bar Association of San Francisco
■ Larkin Street Youth Center
■ Latino Commission
■ Lighthouse for the Blind and Visually Impaired
■ Lutheran Social Services of Northern California
■ Maitri AIDS Hospice
■ Medical Clown Project
■ Mental Health Association of San Francisco
■ Mental Health Management I DBA Canyon Manor
■ Mercy Housing California 50 ACLP
■ Mission Council on Alcohol Abuse for the Spanish-speaking
■ Mission Creek Senior Community
■ Mission Neighborhood Health Center
■ Mt. St. Joseph-St. Elizabeth Epiphany Center
■ National Alliance on Mental Illness (NAMI) San Francisco
■ National Council on Alcoholism Bay Area
■ Native American Health Center
■ NICOS Chinese Health Coalition
■ North of Market Senior Services dba Curry Senior Center
■ Northern California Presbyterian Homes
■ Oakes Children's Center
■ Parkview Terrace Partners LP
■ Plaza Apartments Associates LP
■ Positive Resource Center
■ Progress Foundation
■ Project Open Hand
■ Providence Foundation of San Francisco
■ Public Health Foundation Enterprises (PHFE)
■ Public Health Institute (PHI)
■ Rafiki Coalition for Health and Wellness
■ Regents of the University of California
■ Richmond Area Multi-Services
■ Saint Francis Memorial Hospital
■ Samuel Merritt University
■ San Francisco AIDS Foundation
San Francisco Bicycle Coalition
San Francisco Child Abuse Prevention Center
San Francisco Community Clinic Consortium
San Francisco Community Health Authority
San Francisco Food Bank
San Francisco Mental Health Educational Funds
San Francisco Network Ministries Housing Corp.
San Francisco Public Health Foundation
San Francisco Society for the Prevention of Cruelty to Animals
San Francisco State University
San Francisco Study Center
San Francisco Suicide Prevention
San Francisco Superior Court
San Francisco Unified School District
Self-Help for the Elderly
Seneca Center
Shanti Project
Special Service for Groups
St. Helena Hospital Center for Behavioral Health
St. James Infirmary
Stop AIDS Project
Swords to Plowshares
Tenderloin Neighborhood Development Corp.
Thunder Road Adolescent Treatment Centers
Tides Center
UCSF Langley Porter Psychiatric Institute
University of California Berkeley
University of the Pacific
Victor Treatment Centers
West Bay Housing Corporation
Westcoast Children's Clinic
Westside Community Mental Health Center
Women's Community Clinic
YMCA of San Francisco Bayview Hunters Point
YMCA of San Francisco Urban Services
Youth Justice Institute
Youth Leadership Institute
To learn more about SFDPH efforts to protect and promote the health of all San Franciscans, please explore the following resources:

- **SFDPH Webpage** ([www.SFDPH.org](http://www.SFDPH.org)) Learn more about SFDPH services and programs and link to additional SFDPH reports – including past Annual Reports.

- **SF Health Network** ([www.sfhealthnetwork.org](http://www.sfhealthnetwork.org)) Learn more about the SF Health Network.

- **Get Covered San Francisco** ([www.sfgov.org/healthreform](http://www.sfgov.org/healthreform)) Learn more about health care options under the Affordable Care Act.

- **Healthy San Francisco** ([www.healthysanfrancisco.org](http://www.healthysanfrancisco.org)) Learn about the Healthy San Francisco program, including information on eligibility and enrollment.

- **San Francisco Health Improvement Partnerships (SFHIP)** ([www.sfhip.org](http://www.sfhip.org)) Learn more about SFHIP, a dynamic portal to the community’s priority health issues and associated community resources.

- **SF General Foundation** ([www.SFGHFoundation.org](http://www.SFGHFoundation.org)) Find out more about the SF General (SFGH) Foundation, a not-for-profit corporation that provides fundraising support to ZSFG.


- **Friends of Laguna Honda** ([www.friendsoflagunahonda.org](http://www.friendsoflagunahonda.org)) Friends of Laguna Honda, a non-profit organization founded in 1956, is dedicated to enhancing the quality of life for the residents at Laguna Honda Hospital and Rehabilitation Center by funding non-medical programs and services that would otherwise be unavailable.


- **San Francisco Public Health Foundation** ([http://sfphf.org](http://sfphf.org)) Read about the San Francisco Public Health Foundation, a non-profit that strives to provide resources to San Francisco’s public health community, facilitating the provision of high quality and cost-effective health care services.