

Edward A. Chow, M.D.
President

James Loyce, Jr., M.S.
Vice President

Dan Bernal
Commissioner

Cecilia Chung
Commissioner

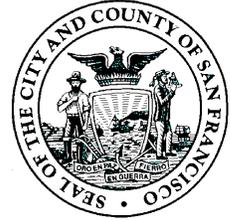
Laurie Green, M.D.
Commissioner

Tessie M. Guillermo
Commissioner

David J. Sanchez, Jr., Ph.D.
Commissioner

**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

**London N. Breed Mayor
Department of Public Health**



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MINUTES

HEALTH COMMISSION MEETING

Tuesday March 19, 2019 4:00 p.m.

101 Grove Street, Room 300

San Francisco, CA 94102

1) CALL TO ORDER

Present: Commissioner Edward A. Chow M.D., President
Commissioner Dan Bernal
Commissioner Laurie Green, MD
Commissioner James Loyce, Jr., M.S., Vice President
Commissioner David J. Sanchez Jr., Ph.D.

Excused: Commissioner Cecilia Chung
Commissioner Tessie Guillermo

The meeting was called to order at 4:04pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF MARCH 5, 2019

Action Taken: The Health Commission unanimously approved the March 5, 2019 minutes.

3) DIRECTORS REPORT

Grant Colfax, Director of Health, gave the report. The full report can be viewed at:
<http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp>

Three cases of measles reported in the Bay Area

In February, a passenger who had measles was on an international flight that landed at SFO. The person who had measles during the time of the flight was a Santa Cruz County resident. Since then, two additional passengers who were exposed to measles on that flight have become sick with measles: one was a San Francisco resident and the other was a Santa Clara County resident. For the general public, the risk for measles remains low despite these cases. No other passengers contracted measles as a result of exposure on that flight. The flight was more than three weeks ago. Measles develops within 21 days of exposure. Public health investigators have not identified evidence indicating that measles is spreading within the case counties. Making sure everyone is up to date on immunizations is especially important for travelers, because measles is circulating in many countries outside the United States. Early immunization with MMR vaccine is

recommended for infants ages 6-11 months before going on an international trip.

Employment Engagement Survey Update

As of March 11th, the response rate is for the DPH-wide Employee Engagement is 60 percent. This is 20 percent above first DPH-wide Employee Engagement survey which was conducted in 2015. To meet the target 80 percent participation, DPH will extend the deadline to complete the employee survey to Friday, March 15, 2019 at 5pm. Many units throughout the department have reached response rates of 80% including Human Resources, Environmental Services Staff (at ZSFG and LHH), Information Technologies, and Maternal, Child, and Adolescent Health.

ZSFG Server Incident Summary

On March 2nd, at approximately 3:00 a.m., the data center chiller in the basement of ZSFG began to fail and gradually stopped working. The chiller is responsible for cooling primary server rooms that host multiple DPH systems. The two fail-over chillers did not start up as designed. Alarms that had been set to alert the onsite facilities engineer as well as one designed to alert IT and facilities failed. As a consequence, the servers shut down, and application systems failed throughout DPH. ZSFG activated the Hospital Incident Command System (HICS) Level 0 and Public Health Emergency Preparedness & Response (PHEPR) was activated at 9:16 a.m.. Operational staff utilized their defined downtime processes.

At 7:40 a.m., after facilities turned on a secondary chiller, temperatures began to drop in the server room. DPH IT teamed along with Informatics staff that were deployed and coordinated with HICS. IT Major Incident Management (MIM) continued to issue DPH-wide updates regarding the outage. Because of the way they systems shut down, it required IT resources to manually bring systems up in a logical order. Informatics staff ensured all systems were functional as the systems came back online. By 11:30 a.m. most systems were up and in use. The last system was validated by Informatics as fully functional by 5:30 p.m..

ZSFG Facilities and IT have started root cause analysis and will be pursuing identified process improvements. A survey was sent to operations and IT staff involved to gain additional insight into the cause and what process needed improvement. PHEPR is coordinating and facilitating an After Action Reporting (AAR) to ensure there is documentation of the experience. Patient care was not compromised by this incident.

Passing of Jose Manuel Haros Carrasco

On the afternoon of March 1st, Jose Manuel Haros Carrasco, a porter for the Environmental Services Department at Laguna Honda Hospital, was involved in a fatal pedestrian accident. He was struck by a vehicle while crossing Woodside Ave and rushed to Zuckerberg San Francisco General Hospital. Jose passed away three days later and is survived by his wife and three children.

Jose joined Laguna Honda in June 2017. He performed exceptionally, carrying out his responsibilities and earning not only respect, but recognition from his peers throughout the hospital. During a certification survey for the Health at Home program, leadership and staff of the program wrote a letter to his supervisor highlighting his efforts to ensure their physical location was in impeccable condition. His contributions that week undoubtedly led to a successful survey. He received a promotion to a permanent full-time porter just six months later in December 2017. He continued to be one of the hardest working; always on time and always doing the utmost quality work for the hospital. Beyond his commitment to the job, he was a positive influence at Laguna Honda. He flashed a smile at every opportunity and surrounded others with a good mood and attitude.

Environmental Services Department leadership as well as all hospital managers and supervisors are working with their staff to reinforce safety tips when traveling to and from work. Laguna Honda also had Megan Wier, co-chair of San Francisco's Vision Zero Task Force and James Shahamiri, Transportation Engineer from San Francisco Municipal Transportation Agency, visit the accident site to assess and recommend opportunities for street improvements that will hopefully prevent future vehicle crashes and fatalities. Additionally, the Department of Public Health's Crisis Intervention Specialist Team has been in communication with Jose's family and are helping them work through the next steps of an unfortunate situation. The entire Laguna Honda

community continues to grieve at the loss of one of their members. Jose was 37 years old.

HealthyRetailSF grand re-opening

On February 28th, the HealthyRetailSF Program and community partner, the Tenderloin Healthy Corner Store Coalition, hosted a community Grand Re-Opening event at Salem Market at 920 Geary Street in the Tenderloin. HealthyRetailSF Program is a partnership between the Office of Economic & Workforce Development and SFDPH's Community Health Equity & Promotion branch. The Program provides support to San Francisco small businesses so that they can successfully sell healthier foods in their community. Salem Market received resources including a produce refrigeration unit, shelving, signage, and even a new "Fresh Fruits and Vegetables" neon light sign. Tenderloin resident "Food Justice Leaders" helped with the store makeover and are actively involved in promoting and marketing the new healthy products to their neighbors. Highlights of the event included a ribbon cutting ceremony, free reusable shopping bags and raffle prizes, as well as samples of fruit and sandwiches.

Vision Zero: Action Strategy Release and 2018 Fatality Report

Vision Zero is the City's initiative to eliminate traffic deaths, co-led by SFDPH and the SF Municipal Transportation Agency. The City released its [2019 Vision Zero Action Strategy](#), outlining the initiatives and actions that are being advanced to eliminate traffic fatalities. In 2014 when Vision Zero was adopted, 30 people were killed each year in traffic crashes. By 2017, San Francisco reached its lowest traffic fatality count in its recorded history: 20. And last year was the second least deadly year on record with 23 fatalities. SFDPH recently released the [Vision Zero Traffic Fatalities: 2018 End of Year Report](#), which summarizes fatality characteristics and trends. The 2019 Action Strategy highlights transformative policies that the State should advance to help cities, like San Francisco, eliminate traffic deaths. The Strategy also makes the connection between Vision Zero and complementary City goals – like addressing climate change, increasing walking/biking/transit, and affordable housing. Progress towards each of those goals is essential for realizing a healthy, sustainable city – and Vision Zero improvements help support those goals. SFDPH is advancing Vision Zero by: collaborating with Zuckerberg SF General surgeons, emergency physicians and nurses to develop robust injury data systems for monitoring, analysis and evaluation; working with vulnerable communities including seniors and people with disabilities to ensure their needs are addressed; providing crisis support to victims' families; and coordinating with the City to advance needed policy change.

Free 'quit kits' to help people stop smoking

A new voter-approved ordinance prohibits the sale of all menthol cigarettes and flavored e-cigarettes, cigarillos, and chewing tobacco in San Francisco, effective January 1st, 2019. In response to this change, the Department of Public Health continues their SFQuits! campaign to provide free supporting "quit kits" to assist people as they cut down and quit smoking. Based on feedback from smokers and clinicians, the available quit kits are green and feature mint-flavored items to support the 8 in 10 smokers who wish to quit smoking altogether.

Each quit kit is packaged in a reusable water bottle helpful for flushing out toxins from the body when a person is quitting smoking. Each kit contains: a supportive educational resources, a toothbrush, toothpaste, a writing pen, fingernail files, mint tea, toothpicks, sugar-free mints, a coupon to redeem for free nicotine replacement therapy (nicotine patches), and an offer to receive an incentive gift card registering for a quit kit. The free kit will also be available at several San Francisco health care facilities, and providers can request delivery of boxes of quit kits by calling 628-206-7668. Individual smokers can receive the free quit kit by calling 628-206-7668 or visiting www.SFQuits.org to order one by mail. The SFQuits! campaign is a local initiative of the Tobacco Free Project of the San Francisco Department of Public Health.

DPH in the News (Mar 1 – Mar 13)

SF Weekly, Mar 13 2019, Community input and data guides SF's new health director
<http://www.sfweekly.com/news/community-input-and-data-guides-s-f-s-new-health-director/>

Hoodline, Mar 13 2019, Sugary drink tax brings healthy food to more SF corner stores
<https://hoodline.com/2019/03/sugary-drink-tax-brings-healthy-food-to-more-sf-corner-stores>

Hoodline, Mar 12 2019, Castro-Mission Health Center to relocate across town for renovation
<https://www.msn.com/en-us/news/us/castro-mission-health-center-to-relocate-across-town-for-renovation/ar-BBUH3YU>

AP, Mar 11 2019, Monthly shots control HIV as well as pills
<https://www.thepeterboroughexaminer.com/living-story/9215977-monthly-shots-control-hiv-as-well-as-pills-studies/>

Tech Times, Mar 9 2019, Injections better than pills at treating HIV
<https://www.techtimes.com/articles/239367/20190309/injections-better-than-pills-at-treating-hiv.htm>

SF Examiner, Mar 9 2019, SF to officially recognize incarceration as a public health issue
<http://www.sfexaminer.com/sf-officially-recognize-incarceration-public-health-issue/>

KRON, Mar 6 2019, Multiple cases of measles confirmed in Bay Area
<https://www.kron4.com/news/bay-area/multiple-cases-of-measles-confirmed-in-bay-area/1832343100>

KRON, Mar 6 2019, Three cases of measles confirmed in Bay Area
<https://www.kron4.com/news/bay-area/3-cases-of-measles-confirmed-in-bay-area/1831740950>

KRON, Mar 5 2019, SF resident contracts measles, city's first case in 2013
<https://www.kron4.com/news/bay-area/san-francisco-resident-contracts-measles-city-s-first-case-since-2013/1829960022>

SF Examiner, Mar 5 2019, First case of measles in more than five years confirmed in SF
<http://www.sfexaminer.com/first-case-measles-five-years-confirmed-sf/>

Director Colfax asked Winona Mindolovich, Acting DPH CIO, to give an update on the ZSFG server incident that is included in the report.

Commissioner Comments:

Regarding the ZSFG server issue, Commissioner Bernal asked if data was lost or damaged. Ms. Mindolovich stated no data was lost and that DPH IT staff are repairing damage as issues are identified.

Commissioner Chow asked if ZSFG utilized any emergency preparedness tools to ensure clinical care continued during the server issue. Ms. Mindolovich stated that ZSFG activated its incident command system during the event.

4) GENERAL PUBLIC COMMENT

There was no general public comment.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE

Commissioner Loyce, Chair, stated that the committee discussed two presentations: Syringe Access and Disposal and a Drug Medi-Cal update. He noted that there has been an increase in syringe disposal options in San Francisco, including a team of San Francisco AIDS Foundation staff devoted to syringe clean-up. The team has picked-up approximately 90,000 syringes since they began work in July 2018. San Francisco residents may text a photo of a site needing syringe clean up to (415)810-1337 and a team will be assigned; once the clean-up is completed, the team will text a photo of the site to the person who made the request.

Regarding the Drug Medi-Cal presentation, Commissioner Loyce stated that the SFPDH has added a referral system to detox facilities; the SFPDH program outcomes are higher than the state-wide average; and the SFPDH is exceeding the timeline in implementing requirements.

Commissioner Comments:

Commissioner Bernal stated that the number of new HIV infections in intravenous drug users in San Francisco decreased from 110 in 2010 to 38 in 2016; he noted that the syringe access program was largely responsible for this change.

Commissioner Chow asked for more information regarding the difference between a one-to-one and needs-based syringe exchange. Commissioner Loyce stated that in one-to-one exchange, one used syringe is exchanged for a new one. In a needs-based exchange, an individual makes a request for the number of needles he/she will use before the next exchange. He added that research shows that one-to-one exchanges lead to reuse and sharing of used syringes, which may lead to bacterial infections and transmission of HIV and Hepatitis C.

Commissioner Bernal stated that the SFPDH has co-located detox facilities with residential services to encourage effective substance treatment. He added that San Francisco has been successful with two new Medi-Cal metrics: authorizing services in 24 hours and ensuring individuals have access to care within 15 days.

Commissioner Green asked for clarification of expected outcomes with the increase in beds. Dr. Naveena Bobba, SFPDH Deputy Director, stated that the SFPDH will track progress on lower-level-of-care issues and will update the Commission.

6) HEALTH COMMISSION OFFICER ELECTIONS

Edward A. Chow MD, President, noted that two Commissioners are absent and suggested a delay of the elections until the April 2, 2019 meeting.

Action Taken: The Health Commission unanimously voted to postpone its election of officers until the April 2, 2019 meeting.

7) SECOND HEARING ON FY2019-2020 AND FY2020-21 BUDGET

Greg Wagner, CFO, and Jen Louie, Budget Director, presented the item.

Commissioner Comments:

Commissioner Green asked for more information on the benefit of combining the ZSFG scheduling and registration workflow. Ms. Louie stated that the combining of some registration and eligibility functions will result in some efficiencies. She noted that cost efficiencies will be better understood when the workflow for this initiative is completed.

Commissioner Green asked how the addition of new community program beds will impact the lower level of care (LLOC) issues at Zuckerberg San Francisco General Hospital (ZSFG). Mr. Wagner stated that the SFPDH currently has LLOC needs in ZSFG medical and psychiatric services. Inpatient discharge needs are usually dealt

with by a transfer to a skilled nursing facility, with Laguna Honda Hospital (LHH) as the primary referral. LHH has its own LLOC issues for its discharges to the community. He added that there are also high utilizers of the SFDPH service system. The investment in new program beds is intended to increase capacity, especially for frequent users. He also stated that the SFDPH is working on metrics to measure the effectiveness of the new beds and how they will impact ZSFG and LHH.

Commissioner Sanchez congratulated Dr. Colfax on his first SFDPH budget, noting that the addition of the Office of Equity is an important SFDPH function.

Commissioner Loyce emphasized the importance of clarifying the terms equity and health disparity within the SFDPH lexicon.

Commissioner Chow asked for more information regarding the request for funding to train staff who will be conducting the combined scheduling and registration functions. Ron Weilgelt, SFDPH Human Resources Director, stated there are currently 32 different employee classifications involved in registration and eligibility. The SFDPH has worked with unions to reclassify these positions into one classification doing a higher level of work. Mr. Wagner stated that the consulting firm hired to evaluate revenue practices identified inconsistencies in the scheduling and registration practices throughout the SFDPH as having an impact. He added that EPIC, the electronic health record that the SFDPH will implement in August, requires that registration and eligibility be completed before a patient can move forward in the SFDPH system.

Commissioner Chow asked for more information on the \$6.5M contingency proposal for salary reductions. Mr. Wagner stated that this is a placeholder as the SFDPH negotiates new contracts with most of the unions that represent SFDPH employees. He added that the Mayor's Office has been made aware of this item. He will update the Health Commission on the details of the final initiative.

Action Taken: The Health Commission unanimously approved the FY2019-2020 and FY2020-21 Budget.

8) RESOLUTION: "INCARCERATION IS A PUBLIC HEALTH ISSUE"

Naveena Bobba MD, Deputy Director of Health, and Lisa Pratt MD, Jail Health Services Director, presented the item.

Sheriff Vicki Hennessy stated that she supports the resolution, which she feels builds upon the work of the Work Group to Re-Envision the Jail Replacement Project.

Public Comment:

Roma Guy, Taxpayers for Safety and former Health Commissioner, thanked the Commission and the SFDPH for the resolution and the robust discussion at previous Health Commission meetings. She also thanked Dr. Bobba, Dr. Pratt, and all SFDPH staff who developed the resolution. She is in support of the resolution and hopes that the SFDPH budget will include initiatives related to the implementation of the SFDPH from the final report of the Work Group to Re-Envision the Jail Replacement Project.

Erika Rommer, HealthRight360, stated that last year the organization served over 500 individuals in its in-custody program. She added that San Francisco should be providing treatment instead of incarcerating those individuals suffering from trauma, especially childhood trauma. HealthRight360 applauds the SFDPH for its innovative programs and she thanked the Health Commission for the resolution.

Kate Monico Klein, Taxpayers for Safety and former director of the SFDPH Forensic AIDS Project, thanked the Health Commission for taking on the important issue of incarceration in the public health realm. She noted that data has always been an obstacle to progress in this arena.

Javier Bremond, Community Housing Partnership, thanked everyone who worked on the resolution. He added that many residents are impacted by incarceration and it's good to know that San Francisco is showing that it understands the intersection of important issues like homelessness, mental health issues, and incarceration. He supports the resolution.

Maral Pririjian, San Francisco Pretrial Diversion/UCSF Citywide social worker, stated that she works with individuals with mental health issues released from custody and observes that most are survivors of multiple traumas. She noted that when someone is incarcerated, he/she loses support and resources.

Pondhakhuni Sudasivam, San Francisco Pretrial Diversion, stated that most of the population who is incarcerated have substance use and mental health issues; jail is not the right place to address these issues. She added that Single Residence Occupancy hotels provide little to no support for people returning from jail; many people would rather be on the street. She also stated that childhood trauma impacts whole communities.

David Mauroff, San Francisco Pretrial Diversion, thanked the Health Commission for the resolution. He noted that the longer someone is incarcerated, the more likely she/he will lose a job and home and the more likely the person will commit another crime.

Sophia Simon-Ortiz, Public Health Justice Collective, stated that she supports the resolution and added that jails do not make people well and encouraged the SFDPH to include support for the many communities impacted by issues related to incarceration.

Joe Palderon, Transitions Clinic, stated that the clinic's goal is to helping people transition from prison to the community. The clinic supports the resolution and is proud that San Francisco continues to be on the cutting edge of important social issues.

Michael Lyon presented the following written comment:

Gray Panthers supports this resolution on the basis of justice, good policy and as a senior issue.

From 2000 to 2009, the country's prison population grew by 16 percent, but older prisoners — 55 years or older — increased nearly 80 percent, and is now 16% of prison population. Large numbers are sentenced to over 20 years under drug-war era "habitual offender" laws or "three-strikes" laws.

23% of San Franciscans over 65 have problems with mobility, bathing, dressing, or getting out of bed. Jails make little or no accommodation for age, illness, or disability with respect to work assignments, safe and accessible facilities, self-care needs, or vulnerability.

This resolution is important to move the City to find alternatives to incarceration. With the imminent destruction of 850 Bryant, now is the time for the Health Commission to speak up for justice, humanity, and good policy.

Commissioner Comments:

Commissioner Loyce thanked the community, particularly Roma Guy, the Sheriff, the SFDPH, especially Dr. Pratt, who works in difficult circumstances each day. He acknowledged the impact of inter-generational trauma on the communities most affected by incarceration. He is in full support of the resolution and looks forward to the hearing updates on the impending project which will hopefully prevent many people from being incarcerated.

Commissioner Sanchez thanked the community for urging the SFDPH and the Commission to work on this important issue.

Action Taken: The Health Commission unanimously approved resolution. (See Attachment A)

9) VISION ZERO 2019 ACTION STRATEGY UPDATE

Megan Wier, Vision Zero Co-Chair and SFDPH Director, Program on Health, Equity, and Sustainability; Chava Kronenberg, Vision Zero Co-Chair and Pedestrian Program Manager; and Ryan Reeves, Vision Zero Program Lead, SFMTA, presented the item.

Commissioner Comments:

Commissioner Green noted that many Uber/Lyft drivers look at their phones while driving to navigate the trip. She asked if there is data on accidents related to texting or looking at phones while driving. Ms. Wier stated that the SFPDH and Vision Zero SF is very open to collaboration with these companies to collect relevant data. However, she indicated that the companies are not willing to collaborate at this time.

Commissioner Sanchez congratulated the project for its positive impact in San Francisco. He noted that the area around the Youth Guidance Center and School of the Arts is very complex to navigate for pedestrians. Ms. Wier stated that Vision Zero is aware of the issues in that area.

Commissioner Sanchez described. Ms. Wier stated that San Francisco is a leader of utilizing traffic calming measures in such areas.

Commissioner Chow noted that in the past the Health Commission supported State consideration of using automated speed control measures. Ms. Wier stated that Vision Zero SF is hoping to participate in the new State zero-traffic deaths taskforce.

Commissioner Chow noted that the new Stockton Street pedestrian lights are working well. He added that the crossing lights at the Diamond Heights Shopping Center are confusing. Ms. Wier stated that the light sequence is determined to accommodate the slowest walker, such as someone with a disability or an elderly pedestrian.

10) OTHER BUSINESS:

This item was not discussed.

11) JOINT CONFERENCE COMMITTEE REPORTS

Commissioner Sanchez, LHH JCC Chair, stated that at the March 12 ,2019 meeting, the committee reviewed the following items: Administrator's Report; True North Employee Safety: Prevention of Resident Handling Injuries and Workplace Violence Incidents; Laguna Honda EPIC Implementation; and Consideration of Hospital-Wide Policies and Procedures. In closed session, the committee approved the Credentials Report and discussed a Performance Improvement and Patient Safety report.

12) ADJOURNMENT

The meeting was adjourned at 6:31pm.

**HEALTH COMMISSION
CITY AND COUNTY OF SAN FRANCISCO
Resolution No. 19-5**

INCARCERATION IS A PUBLIC HEALTH ISSUE

WHEREAS, the mission of the San Francisco Department of Public Health (SFPDH) is to protect and promote the health of all San Franciscans.

WHEREAS, incarceration is the state of an individual being forcibly confined in jail or prison; and

WHEREAS, DPH is committed to working with multiple departments and community agencies in the City and County of San Francisco involved in the criminal justice system to provide health interventions for individuals incarcerated that are dealing with trauma and other identified health needs; and

WHEREAS, DPH recognizes that adverse childhood experiences and social inequities, such as institutional racism, leads to disproportionate involvement of people of color throughout the justice system; and

WHEREAS, criminalization of homelessness and poverty, substance use disorders, and mental illness leads to incarceration; and

WHEREAS, jails and prisons are not healing or trauma informed environments; and

WHEREAS, each experience of being incarcerated is physically and psychologically traumatic with lasting harm to individuals, their families, communities; and

WHEREAS, underserved populations such as homeless, socio-economically disadvantaged, transitional aged youth (TAY) and Black/African American individuals are disproportionately represented in the San Francisco County Jail (SFCJ) population:

- Approximately 40% of those incarcerated in SFCJ are homeless and/or marginally housed; and
- Transitional age youth (TAY), ages 18-25, had the highest number of bed days of any age group in SFCJ custody and were 17% of the SFCJ population; and
- Black/African-Americans represent 38% of those booked at the SFCJ, comprise approximately 50% of those who remain incarcerated in SFCJ, and are the racial group that is incarcerated in the SFCJ for the longest period; and

WHEREAS, under state and local law, the San Francisco Sheriff's Department is authorized to operate the SFCJ; and

WHEREAS the San Francisco Department of Public Health (SFDPH) Jail Health Services (JHS) partners with the SF Sheriff's Department to provide medical and behavioral health care to individuals in custody; and

WHEREAS, the SFDPH JHS served 11,964 unique individuals who completed a medical intake (2017-2018) while incarcerated at SFCJ; and

WHEREAS, 27% of incarcerated individuals were referred to Jail Behavioral Health Services; of this group, 71% received ongoing behavioral health care; and

WHEREAS, in 2018, approximately 22% of individuals incarcerated in SFCJ at any given time are diagnosed as seriously mentally ill (SMI); and

WHEREAS, 80% of bookings in SFCJ involved individuals who reported substance use; and

WHEREAS, the average length of incarceration was longest for individuals with co-occurring substance use and SMI; and

WHEREAS, individuals in California lose their Medi-Cal status when incarcerated and upon release Medi-Cal eligibility can take 30 days or more to reestablish. The lack of Medi-Cal access upon release from SFCJ can be an obstacle to accessing necessary medical, mental health, and substance use treatment; and

WHEREAS, the Sequential Intercept Model, developed to inform community-based responses to the involvement of people with mental and substance use disorders in the criminal justice system, outlines six points of interception; and

WHEREAS, SFDPH interventions, programs, and services support every intercept in San Francisco by offering key services to individuals prior to, during, and post release from the criminal justice system; and

WHEREAS, community-based treatment is always the preferred option for addressing an individual's severe behavioral health and/or substance use issues; and

WHEREAS, SFDPH operates programs aimed at improving the social determinants of health in all stages of life.

THEREFORE, BE IT RESOLVED, that the Health Commission recognizes incarceration to be a public health issue impacting the health and wellbeing of individuals incarcerated and the families and communities of those incarcerated, with particular impact on low-income communities, people of color, including African American men, cisgender and transgender women, and Transitional Age Youth (18-25); and be it

FURTHER RESOLVED, the Health Commission requests that the SFDPH develop and submit a report to the Commission that outlines action steps with projected budget initiatives, incorporates harm reduction, evidence-based and best practices, and addresses SFDPH-related recommendations from the 2018 final report of the Work Group to Re-Envision the Jail Replacement Project:

- To maximize efforts within its control to prevent individuals from being incarcerated;
- To increase effective collaboration within SFDPH programs and community partners of systems that impact and respond to incarceration;
- To improve data collection and analytics;
- To increase the effectiveness of medical and behavioral health services across the continuum of care;
- To enhance and expand post-release discharge planning, linkage to relevant services in the community, and other reentry services;
- To work on mitigating the known contributing factors of health inequity and the harmful impact of incarceration on individuals, families, and communities.

The report will inform citywide efforts to improve the systems that strive to prevent and respond to issues related to incarceration.

I hereby certify that the San Francisco Health Commission at its meeting of March 19, 2019 adopted the foregoing resolution.

Mark Morewitz
Executive Secretary to the Health Commission