MINUTES
HEALTH COMMISSION MEETING
Tuesday July 16, 2019 4:00 p.m.
101 Grove Street, Room 300
San Francisco, CA 94102

1) CALL TO ORDER
Present: Commissioner James Loyce, Jr., M.S., President
Commissioner Dan Bernal, Vice President
Commissioner Edward A. Chow M.D.
Commissioner Laurie Green, MD

Excused: Commissioner Cecilia Chung
Commissioner Tessie Guillermo

The meeting was called to order at 4:07 pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF JUNE 18, 2019
Action Taken: The Health Commission unanimously approved the June 18, 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

Governor signs FY19-20 budget with Medi-Cal expansion, insurance mandate, and expanded health insurance subsidies
On June 27th, Governor Newsom signed into law a $214.8 billion budget bill for Fiscal Year 2019-20. The budget makes significant investments in health and public health, housing and homelessness, paid family leave, early childcare and education, and emergency preparedness. Specifically, the budget includes the following measures to improve affordability and access to health care:

• Expand full-scope Medi-Cal coverage to eligible young adults aged 19 through 25 regardless of immigration status. This expansion will provide full-scope coverage to approximately 90,000 undocumented adults in the first year across state. Initial estimates suggest 1,000-2,000 individuals in San Francisco would become eligible for Medi-Cal.
• **Increase Covered California health insurance premium supports** for individuals with incomes between 400 and 600 percent of the federal poverty level (FPL) as well as reduce out-of-pocket premiums for those with incomes under 138 percent of the FPL over the next three years. Covered California projects that 922,000 people will be eligible to benefit from the new state subsidies.

• **Reinstate the individual mandate** that was part of the ACA, but revoked in 2017. Similar to the ACA’s mandate, individuals opting not to carry insurance coverage will incur a financial penalty under the state-level mandate.

These health-focused measures are scheduled to take effect January 1st, 2020. Details for other budget proposals are still being worked out in trailer bills, including many health-related proposals, and are expected to be decided on in the coming weeks.

**State legislation to address hospital balance billing practices and pilot new type of overdose prevention programs stalls**

On July 10th, legislation that would prohibit balance billing practices by hospitals, **AB 1611** (Chiu), was turned into a two-year bill after stalling in the legislature. Under the legislation, hospitals would be prohibited from billing insured patients, regardless of their plan type, and could not charge them rates higher than their copay or deductible. The bill would also limit payments from insurance companies to hospitals to no greater than the “reasonable and customary value” or the “average contracted rate” for services in the geographic area. San Francisco Department of Public Health is supportive of efforts to increase patient protections and has recently proposed new policies for patient billing at Zuckerberg San Francisco General Hospital and Trauma Center that strongly align with many of AB 1611’s patient protection provisions. The bill is expected to be re-visited in next year’s 2020 legislative session.

On June 19th, legislation that would allow San Francisco to authorize a new type of overdose prevention program (also known as safe injection services) under a six-year pilot program, **AB 362** (Eggman), was turned into a two-year bill after stalling in the legislature. The bill would extend harm reduction strategies already used in California by enabling San Francisco to authorize programs to provide drug users a safe and hygienic space to use pre-obtained drugs under the supervision of trained staff. The bill is expected to be re-visited in next year’s 2020 legislative session.

**Covered California announces 2020 health insurance premium rates**

On July 9th, Covered California announced the preliminary rates for 2020 insurance premiums purchased in the individual market place. Consumers in state exchange Covered CA, and off-exchange in the individual market, will see an average statewide rate increase of 0.8 percent to their premiums, which is the lowest change since Covered California’s launch. This stabilization in rates is due to new state affordability initiatives and coverage mandate that are designed to lower costs and encourage enrollment. Covered California projects that lowering health care costs and reinstating the penalty on individuals who can afford coverage, yet choose to go without insurance, will result in 229,000 people becoming newly insured. Covered CA also announced that all 11 health insurance companies will return to the market for 2020, and nearly all Californians will have a choice of two carriers, and 87 percent able to choose from three carriers or more.

As of December 2018, there were a total of 33,650 San Francisco residents enrolled in ACA individual market plans.

**Introduction of placarding system for food establishments**

On June 18th Supervisor Peskin introduced legislation to amend Article 8 of the San Francisco Health Code. The proposed amendments would change the way food establishments are graded following an inspection by the
Department of Public Health (DPH). The current law authorizes DPH to award a score at the end of an inspection which can range between 0 and 100 points.

The proposed amendments would change San Francisco from a score-based system to a color-coded placarding system. The placarding program is based on safe food handling practices and focuses on high risk violations which could contribute to foodborne illnesses. DPH would issue a green “Pass Placard” to food establishments following an inspection in which no more than one major violation is documented provided the violation is corrected by the end of the inspection. A yellow “Conditional Pass Placard” would be issued following an inspection where no more than two major violations were documented provided all violations are corrected by the end of the inspection. Lastly, a red “Closed Placard” would be issued if one or more major violations are documented and not corrected by the end of the inspection. The placard would need to be posted in a visible place to the public.

This is an important change to the way food establishments are scored during an inspection and places the focus on high risk major violations. Currently all other 9 Bay Area counties use a placarding system and this change would make us consistent with the rest of the Bay Area.

**Patient Care Incidents at Laguna Honda Hospital**
I was joined by Mayor Breed and President of the Board of Supervisors Yee on June 28 to report directly to the community about patient abuse issues involving 23 Laguna Honda residents. This misconduct does not represent who we are as the Health Department and the San Francisco Health Network, and it will not be tolerated. Laguna Honda has had a positive effect on the lives of generations of San Franciscans and continues to be a good place for our residents.

DPH leadership has taken immediate steps to correct the problems, including: notification of all patients and their families/caregivers, wellness checks for all Laguna Honda residents, all-staff training on preventing and reporting patient abuse, improvements in drug dispensing and monitoring policies, separation of the six staff members involved and changes in hospital leadership.

We immediately notified the California Department of Public Health and the San Francisco Police Department, and each agency is investigating.

Acting CEO Maggie Rykowski is now in place to lead the way forward, and the Health Department will present a turnaround plan to the Mayor, Board of Supervisors and Health Commission by September 1.

**Eric Raffin as Chief Information Officer**
On July 8th, Eric Raffin joined San Francisco Department of Public Health as Chief Information Officer. Eric comes to DPH most recently from San Mateo County Health where he served as Chief Information Officer for six years. Eric’s accomplishments in that role included creating a health information technology governance program, establishing a program and project management office and implementing a Health Information Exchange. Prior to working in local government, Eric spent nearly 17 years with the Department of Veterans Affairs (VA) in several executive leadership roles in both healthcare information technology and healthcare operations. Eric was a leader in VA’s reorganization of information technology (IT) services into the nation’s largest health IT organization, culminating in his last assignment as the Executive Director of IT Field Operations and Development.
With his strong record of accomplishments, Eric is very highly regarded in his field, and we are fortunate to have someone with such rich experience in health care and government information technology joining us at a pivotal time for the organization. In addition to the pressing matter of the Epic implementation next month, Eric will lend his skills and leadership to IT governance, security, data sharing, developing the IT team, and many other key aspects of IT that enable our organization to do a better job serving our patients and clients, and modernize our workplace.

San Francisco Health Network contracts with Canopy Health
San Francisco Health Network (SFHN) has signed its first commercial contract with Canopy Health. The contract was signed on July 1st and will allow UCSF/Canopy patients access to obstetric services at the Family Birth Center at Zuckerberg San Francisco General (ZSFG), the only 24/7 midwife program in San Francisco. Starting July 15th, UCSF/Canopy patients receiving care at Mt. Zion and Mission Bay and interested in a midwife assisted delivery, will be given the option to select ZSFG as their birthing hospital and place to receive outpatient obstetric care related to their delivery.

This new partnership represents a major milestone for SFHN and has been three years in the making, involving several departments and organizations including Finance, Care Coordination, Medical Records, Pharmacy, ZSFG Clinical Operations and Compliance, CPG, IT, Office of Policy and Planning, City Attorney’s Office, City’s Risk Management, Controller’s Office, Communications, Office of Managed Care, UCSF, Canopy Health, and Hill Physicians.

Counting down to Epic Go-Live!
We are now only a few short weeks away from what will be one of the most pivotal moments in the history at the San Francisco Department of Public Health: the implementation of our Epic Electronic Health Record. This project represents the culmination of years of planning, preparation and hard work, ultimately resulting in a resource for our department that connects our network of care in ways in which we could previously only dream about. After August 3, patient and client records created at Zuckerberg San Francisco General Hospital, Laguna Honda Hospital, and our primary and specialty care clinics will seamlessly connect so that the most vulnerable members of our population will be able to receive an even higher level of care. Many of our patients cross between these facilities and clinics, and now their records will do the same with ease. Here’s to our Epic future!

Health department surpasses True North Goal for Hypertension Equity for Black/African American patients
The San Francisco Department of Public Health (DPH) met and exceeded their True North Equity Goal for the 2018-2019 Fiscal Year. Rooted in San Francisco Health Network Primary Care, this metric focuses on percentage of Black/African American patients with hypertension whose last blood pressure (BP) was controlled in the past year. From January 2015 to June 2019, hypertension BP control for Black/African American patients has improved from 53 percent to 67 percent. Additionally, the disparity gap between the overall populations compared to Black/African American population has decreased from 8 percent to 3 percent. This is a significant step towards reducing health disparities in the city of San Francisco.

Castro-Mission Health Center temporary relocation
To prepare for an upcoming building remodel, Castro-Mission Health Center temporarily moved this month to 995 Potrero Avenue, Building 80, 1st floor, on the Zuckerberg San Francisco General (ZSFG) hospital campus. The Castro-Mission remodel will improve the safety of the building (3850 17th St.) in an earthquake and improve patient areas by adding 16 patient rooms and air conditioning. Updates will be made to restrooms, waiting rooms, patient registration areas, and staff areas. Construction is scheduled to start in late 2019. This year, Maxine Hall Health Center also will be temporarily moved to a manufactured clinic at 1181 Golden Gate Ave. for a similar building remodel. In addition, Southeast Health Center will be under construction in late 2019
for an expansion project. These projects are funded through the 2016 Public Health & Safety Bond, which voters approved by 80 percent.

**Health department marches at SF Pride Parade**

On June 30th, the health department’s contingent, joined by the President of the Health Commission, Jimmy Loyce, marched together at the SF Pride Parade. We had one of the largest contingents ever, with almost 150 people in our group. Patients from Positive Care at Laguna Honda also participated in the parade, as they do each year. The department played music from their truck, while department staff passed out condoms and materials supporting access to pre-exposure prophylaxis (PrEP) to prevent HIV infection. Thank you to everyone who donated their time and resources to make this event possible and a success, including the Public Health Foundation, Bridge HIV, Community Health Equity and Promotion, Environmental Health, Laguna Honda, and ZSFG.

**Gender Health SF Celebrates Pride 2019**

Gender Health SF (GHSF) celebrated PRIDE month by participating in San Francisco’s 16th annual Trans March. They hosted a community resource table and promoted wellness and health education resources. GHSF honored all LGBTQ+ people who are living their truth, power and visibility toward inclusiveness and liberation. Gender Health SF (GHSF) is a first-of-its-kind peer-based program whose mission is to increase access to quality gender affirming health care for underserved transgender and non-binary residents in San Francisco, regardless of immigration status and/or lack of income.

**DPH in the News (Jun 17 – Jul 11 2019)**

KQED, Jul 11 2019, SF universal mental health care ballot measure pushed to March 2020

SF Weekly, Jul 11 2019, Universal mental health care ballot measure bumped to March

Contagion, Jul 10 2019, SF homeless have 27-fold greater risk of dying following HIV diagnosis

SF Chronicle, Jul 9 2019, SFPD officer’s miraculous recovery after hit-and-run left him severely brain-damaged

SF Chronicle, Jul 7 2019, Needles on wane in BART trains and stations, another sign of fentanyl’s rise

Prairie State, Jul 2 2019, Needle exchange legislation before Pritzker will litter streets

AP, Jun 28 2019, Patient abuse scandal rocks SF’s Laguna Honda Hospital
https://www.potreroview.net/caleb-g-clark-potrero-hill-health-center-cares-for-the-community/

KQED, Jun 17 2019, In California, new drug treatment money also means new rules

Baltimore Sun, Jun 17 2019, Baltimore stabilization centers hope to solve heroin crisis
<table>
<thead>
<tr>
<th></th>
<th>6/2019</th>
<th>07/2018 to 07/2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>New Appointments</strong></td>
<td>6</td>
<td>195</td>
</tr>
<tr>
<td><strong>Reinstatements</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Reappointments</strong></td>
<td>93</td>
<td>589</td>
</tr>
<tr>
<td><strong>Delinquencies:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Reappointment Denials:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Resigned/Retired:</strong></td>
<td>21</td>
<td>193</td>
</tr>
<tr>
<td><strong>Disciplinary Actions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Administrative Suspension</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Restriction/Limitation-Privileges</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Deceased</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Changes in Privileges</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Voluntary Relinquishments</strong></td>
<td>30</td>
<td>154</td>
</tr>
<tr>
<td><strong>Additions</strong></td>
<td>13</td>
<td>143</td>
</tr>
<tr>
<td><strong>Proctorship Completed</strong></td>
<td>43</td>
<td>309</td>
</tr>
</tbody>
</table>

**Current Statistics – as of 8/1/18**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Active Staff</strong></td>
<td>546</td>
</tr>
<tr>
<td><strong>Courtesy Staff</strong></td>
<td>533</td>
</tr>
<tr>
<td><strong>Affiliated Professionals (non-physicians)</strong></td>
<td>281</td>
</tr>
<tr>
<td><strong>TOTAL MEMBERS</strong></td>
<td>1360</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Applications in Process</strong></td>
<td>90</td>
</tr>
<tr>
<td><strong>Applications Withdrawn Month of April 2019</strong></td>
<td>0</td>
</tr>
<tr>
<td><strong>SFGH Reappointments in Process 05/01/2018 to 07/31/2019</strong></td>
<td>187</td>
</tr>
</tbody>
</table>
New Appointments 0 16
Reinstatements 0 0
Reappointments 5 56
Delinquencies: 0 0
Reappointment Denials: 0 0
Resigned/Retired 0 12
Disciplinary Actions 0 0
Restriction/Limitation-Privileges 0 0
Deceased 0 0
Changes in Privileges
Additions 0 0
Voluntary Relinquishments 0 0
Proctorship Completed 2 7
Proctorship Extension 0 0

Current Statistics – as of 07/31/2018
Active Medical Staff 34
As-Needed Medical Staff 17
External Consultant Medical Staff 45
Courtesy Medical Staff 2
Affiliated Health Practitioners 13
TOTAL MEMBERS 111

Applications in Process 4
Applications Withdrawn this month 0

Public Comment:
Dr. Derek Kerr, presented and submitted the following written comment:
There’s something intriguing about the removal of Laguna Honda’s (LHH) Quality Director and its CEO. The 23 patients abused at LHH were under the care of nurses, yet the Chief Nursing Officer wasn’t held accountable. Instead, the Quality Director, who doesn’t govern clinical practice and to whom no nurses report, was removed. What's the rationale? Troy Williams, the SFGH Quality Director has taken over LHH's Quality Management. Yet on his watch, SFGH has been cited and threatened with fines and payment losses for an impermissible policy that allowed under-reporting of patient abuse since 2016. DPH Compliance Director Maggie Rykowski is now LHH's CEO. If she maintains this dual role, conflicts of interest could emerge. If someone reports a violation involving LHH, would she adjudicate that complaint as DPH Compliance Director, then defend against it as LHH's CEO?

Colin Gomez stated that 23 Laguna Honda Hospital residents were subjected to breach in privacy for 3 years. It does not make sense that the DPH Privacy Director is now the LHH Chief Administrator. He added that the LHH Quality Director was supposed to respond to the California Department of Public Health report of deficiencies. However, the ZSFG Director of Quality has been assigned to take over LHH quality issues. He
noted that ZSFG has had a deficiency for failure to report allegations of abuse. ZSFG has a 30 bed skilled nursing facility that did not pass its annual recertification survey twice. He also stated that there has been no mention that the nursing supervisors of these stations have been held accountable.

Commissioner Comments:
Commissioner Chow asked how the Governor’s budget will impact the SFPDH budget. Dr. Colfax stated that there has not yet been time to discuss the implications for the SFPDH with the state. He suggested that the Finance and Planning Committee hear more information regarding the impact of the state budget on the SFPDH budget in the near future.

Commissioner Chow stated that he fully supports the actions taken by the SFPDH regarding the incidents at LHH.

4) **GENERAL PUBLIC COMMENT**
There was no general public comment.

5) **COMMUNITY AND PUBLIC HEALTH COMMITTEE**
Commissioner Bernal, Chair, stated that the Committee reviewed the draft Tobacco and Smoking Rules and Regulations, which will be considered by the Board of Supervisors. This presentation included information regarding the rollout of the flavored tobacco ban, a map showing the density of establishments with tobacco sales permits, and the DPH’s public health education efforts.

He also stated that the Committee discussed an update from the Center for Learning and Innovation which focused on the unit’s efforts to provide support and consultation across the United States. The unit has had many successes such as helping to increase the uptake of PrEP in Florida and helping to support a SFPDH mentorship program for undergraduate minority students in HIV research.

6) **PROPOSITION Q HEARING: CLOSURE OF ST. MARY’S CARDIOVASCULAR PROGRAM**
Claire Lindsay, Senior Health Planner presented the item. David Klein, MD, President of St. Mary’s answered questions on the item.

Commissioner Comments:
Commissioner Green asked if St. Mary’s has seen an increase in minimally invasive procedures. Dr. Klein stated that nationally, there has been an increase; he noted that St. Mary’s expects a minimal decrease in Catheritization Lab procedures because of the closure.

Commissioner Green noted that cases in this St. Mary’s unit have decreased by approximately 50% since 2016 and asked for the reason for this change. Dr. Klein stated that he is not aware of a specific reason for this change and offered to bring back more information on the decrease in cases.

Commissioner Chow asked if that UCSF is the only other provider in San Francisco to offer this service to the public. Dr. Klein noted that Kaiser also offers this service, but only to its patients.

Commissioner Chow noted that the closure of this high quality service will be a loss to the City. He also asked for more information regarding if this closure will add any out-of-network issues for San Francisco Health Network patients.

Commissioner Chow stated that he is troubled by the public comment emailed to the Commission regarding the patients living in Chinatown who have historically be sent to this unit. The closure will be a specific loss to the Asian community. He asked the SFPDH to ascertain where these patients may be referred to after the closure of the St. Mary’s unit.
Commissioner Chow noted that cardiac surgery is still the “gold standard” as noted in the DPH memo.

Commissioner Chow requested information regarding any wait times for this service at other hospitals so the Commission and SFDPH can understand any access issues.

Commissioner Green asked for more information regarding the number of procedures at St. Mary’s unit that are acute versus planned. She would like to better understand the City’s capacity to provide acute services in this area after this closure.

Commissioner Green noted that post-surgery care is also important. Dr. Klein agreed and stated that post-op/ICU nursing staff have a higher rate of turnover and without a high volume of cases in this area, the staff’s skill level with handling these patients may be impacted.

7) PROPOSITION Q HEARING: CLOSURE OF ST. MARY’S SPINE CENTER
Claire Lindsay, Senior Health Planner presented the item. David Klein, MD, President of St. Mary’s answered questions on the item.

Commissioner Comments:
Commissioner Green noted that the Spine Center has a stellar reputation and hopes that the practice will continue to meet the patient population’s needs in the next setting.

Commissioner Chow requested information regarding the staff. Dr. Klein stated that of the five impacted staff, two have been given other positions and the remaining staff are waiting to determine if they will move with the practice.

8) LAGUNA HONDA HOSPITAL GIFT FUND BUDGET FY19-20
William Frazier, LHH Gift Fund Program Manager, presented the item.

Commissioner Comments:
Commissioner Chow asked for more information regarding the remaining funds in several budget categories at the end of the year. Mr. Frazier noted this year, there was a delay with PeopleSoft software and LHH was not able to access funds until late August. Additionally, the Friends of Laguna Honda changed how it transfers funds to LHH. The new process requires that the BOS approve the transfers, which adds time to the process before the funds can be made available.

Commissioner Green asked if there are certain categories that have the greatest impact on LHH residents. Mr. Frazier stated that the purchase of equipment makes a huge difference in the lives of residents.

Commissioner Bernal asked if historically, there is a difference between budget and expenditures. He noted that the LHH Gift Fund has consistently come in under budget because the staff aims high to ensure there are enough funds available for each category.

Action Taken: The Health Commission unanimously approved the item.
9) **SFDPH IT AND EPIC PROJECT UPDATE**
Winona Mindolovich, SFDPH IT Chief Transitions Officer, presented the item.

**Commissioner Comments:**
Commissioner Chow asked when the Commission will hear an update on the EPIC implementation. Ms. Mindolovich stated that an update on the initial implementation will be included in the Director’s Report and a full update will be given in October.

Commissioner Green requested that future updates include the impact of EPIC on productivity; she also asked that the clinical and financial metrics be reported on separately.

Commissioner Bernal thanked the entire EPIC team and welcomed Mr. Raffin, the new SFDPH CIO.

Dr. Colfax thanked Ms. Mindolovich for her effective leadership and assisting the SFDPH to achieve EPIC implementation on time.

10) **SAN FRANCISCO PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE ANNUAL UPDATE**
Tomas Aragon, SFDPH Health Officer and Director of the SFDPH Population Health Division introduced the item. Jan Gurley, MD, Director, gave the presentation.

**Commissioner Comments:**
Commissioner Chow noted that in the past, each neighborhood had its own Neighborhood Emergency Response Training (NERT) group that coordinated efforts for that area. Dr. Gurley stated that she is relatively new to her position and is aware of an active group in the Bayview that organizes the neighborhood in emergencies. She will forward additional information she finds on this topic to Mr. Morewitz to distribute to the Health Commission. She also added that under the CCSF Department of Emergency Management, these groups are coordinated. Her unit works specifically with public health-related issues.

Commissioner Green asked for information regarding hospital involvement in crisis preparations. Dr. Gurley stated that San Francisco has a vibrant hospital preparedness program that meets monthly to discuss the City’s emergency infrastructure plans; the group has special phones and emergency radios to use in crisis situations.

Commissioner Loyce asked for more information regarding psychological first aide training. Dr. Gurley stated that there are many psychological ramifications to first responders in addition to the general public. She noted that there is an intensive training for professionals and a less extensive training for members of the public.

Commissioner Bernal asked for more information regarding the critical partner list of organizations. Dr. Gurley stated that her unit is working to develop a first responder team database which will include organizations such as food delivery programs and IHSS workers to assist with the most vulnerable San Francisco residents.

Dr. Colfax thanked Dr. Gurley and Dr. Aragon. He noted that recent reports indicate that the number of days with temperatures in the area over 100 degrees will soon double. He requested that Dr. Gurley focus on drills and training to prepare the SFDPH for these conditions.

11) **OTHER BUSINESS:**
Mr. Morewitz reminded the Commissioners that the August 20, 2019 meeting will start at 5pm and will take place at the Chinatown YMCA, located at 855 Sacramento Street.

12) **JOINT CONFERENCE COMMITTEE REPORTS**
Commissioner Green, LHH JCC member, stated that the July 9, 2019 meeting, the Committee discussed the Administrator’s Report, which included the explanation of the patient incidents and the change in hospital
leadership. The Committee reiterated its sadness and commitment to support current leadership to ensure the safety of the LHH residents and quality of services. The Committee also heard an LHH EPIC implementation update and approved hospital-wide policies and procedures.

13) CLOSED SESSION:

   A) Public comments on all matters pertaining to the closed session

   B) Vote on whether to hold a closed session (San Francisco Administrative Code Section 67.11)

   C) Closed Session pursuant to Cal. Government Code Sections 1156, 1156.1, 1157, 1157.5 and 1157.6; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1:

   FOR DISCUSSION AND POSSIBLE ACTION: CONSIDERATION OF CREDENTIALING MATTERS

   D) Reconvene in Open Session: Motions and vote on whether to disclose any or all of the closed session discussions, San Francisco Administrative Code Section 67.12(a)

14) ADJOURNMENT
The meeting was adjourned at 6:12pm.