

James Loyce, Jr., M.S.
President

Dan Bernal
Vice President

Edward A. Chow, M.D.
Commissioner

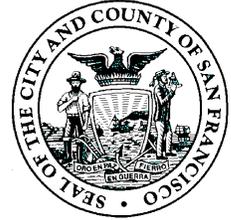
Cecilia Chung
Commissioner

Laurie Green, M.D.
Commissioner

Tessie M. Guillermo
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 June 18, 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 Edward A. Chow M.D.
Commissioner Cecilia Chung
Commissioner Laurie Green, MD
Commissioner Tessie Guillermo

Excused: Commissioner Dan Bernal, Vice President

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

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF JUNE 4, 2019

Action Taken: The Health Commission unanimously approved the June 4, 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>

Legislature Approves FY19-20 Budget with Medi-Cal Expansion

On June 13th, California lawmakers approved a \$214.8 billion budget bill for Fiscal Year 2019-20. Under the approved budget, Medi-Cal coverage would be expanded to eligible young adults aged 19 through 25 regardless of immigration status starting January 1, 2020. This expansion is expected to provide full-scope coverage to approximately 90,000 undocumented adults in the first year across state. The budget bill now heads to the Governor where he is likely to act on the measure before the start of the new fiscal year on July 1.

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.

Board of Supervisors approves conservatorship legislation introduced by Mayor Breed and Supervisor Mandelman

On June 4th, the Board of Supervisors passed legislation introduced by Mayor London Breed and Supervisor Rafael Mandelman to strengthen the City's conservatorship laws in order to provide care and treatment for San Franciscans most in need, who currently suffer from severe mental health and substance use disorders. The legislation is part of Mayor Breed's efforts to improve the City's response to those in need of mental health and substance use treatment. The Mayor's efforts include funding 100 new treatment beds last year as well as an additional 100 new beds as part of her recently announced Fiscal Year 2019-2020 and 2020-2021 budget proposal.

This legislation addresses this population and provides a path for the City to petition a court for a short-term conservatorship in order to provide them the treatment they need and deserve. In order to qualify for conservatorship, an individual must be dual-diagnosed with a serious mental illness and with a substance use disorder, and have been brought to the psychiatric emergency room at least eight times in a 12-month period under an involuntary "5150" emergency hold. A 5150 hold is issued to individuals who present an immediate danger to themselves or others, or are gravely disabled and unable to provide for their basic needs. At the end of the conservatorship process, these individuals are guaranteed permanent housing.

The legislation is available to the City under Senate Bill 1045, which was introduced by Senator Scott Wiener and signed into law in September 2018. Senator Wiener has introduced SB 40, which has passed the Senate by a 36-0 vote, to clarify the parameters under which someone may be conserved. The San Francisco Department of Public Health estimates that if SB 40 is signed into law, the City legislation would apply to approximately 50 of the most acute individuals in San Francisco per year.

INVINCIBLE Women's Summit

On June 14th, Mayor London Breed hosted the INVINCIBLE Women's Summit in San Francisco at Moscone Center West. It is a one-day event that inspires women to recognize and activate their personal power and collective strength, provide tangible takeaways and build diverse coalitions to create real solutions to challenges. Among the 100+ businesses and organizations that lead sessions and demonstrations, the Department of Public Health (DPH) promoted resources by featuring four exhibits: Careers in Health Care, Reproductive Health, Mindfulness and Heart Health. The careers booth discussed employment opportunities and the employment process at DPH. The reproductive health booth provide information regarding maternal, child and adolescent health and sexually transmitted diseases. The Trauma Informed Systems team shared ways to practice mindfulness by running both a booth and a quiet space for journaling and guided meditation. The Heart Health booth conducted blood pressure screenings and provided educations about the importance of monitoring and maintaining a healthy blood pressure. All DPH staff engaged with attendees to explore solutions to challenges facing women today and actions to mitigate those challenges in the future in order to develop successful change for women in San Francisco and beyond.

Weekend Heat Advisory

On June 7th, the Department of Public Health (DPH) activated its emergency heat response plan early and convened an Incident Management Team (IMT) in response to a San Francisco heat advisory placed by the National Weather Service. The IMT was comprised of members of DPH Public Health Emergency Preparedness & Response Branch (PHEPR), Emergency Medical Services Agency (EMSA), the Health Officer, and a public information officer. The IMT activated the Department Operations Center (DOC) to strategically disseminate public messaging campaign to the public and critical partners, and monitor the EMS system for surge, message hospital emergency departments in advance to anticipate staffing needs and potential facilities issues related to the heat.

During the three full days of the hotter-than-predicted extreme temperatures, staff worked to serve populations under difficult conditions and support the important work that DPH does. EMSA staff

implemented their new medical surge Mutual Aid plan to successfully blunt the increasing need for ambulances and keep our system running. The public information officer took lead in messaging across the city, including to vulnerable populations and extended warnings this year to remind people that heat can remain elevated indoors even after the temperature cools, and to check on your neighbors. PHEPR staff rolled out innovative work to increase engagement and define wellness check cans for vulnerable populations through collaborative work with agencies across our city. Staff at the Zuckerberg San Francisco General, Laguna Honda Hospital, and select primary care clinics worked under difficult conditions in the old buildings, while making sure those patients were not suffering from heat related symptoms while seeking care.

City prepares for future power outages

On June 13th, in an effort to better understand impacts to City operations during a widespread power outage, the department invited City Departments to come together for information sharing, coordination and planning. The Department of Public Health (DPH) participated in the workshop which included facilitated conversations in function-specific groups that discussed how Departments' people, processes and systems are affected by a power outage. Along with other City Departments, DPH shared information regarding the impact of a PG&E outage on critical operations and informed future preparedness for the City.

On April 26th, 2019 the California Public Utilities Commission (CPUC) approved the adoption of Public Safety Power Shutoff (PSPS) guidelines as a preventative measure against imminent and significant fire risk as a response to the unprecedented rise in loss of property and life due to wildfires in California, electric utility providers in the state implemented procedures to proactively de-energize transmission and/or distribution lines in areas under threat of fire. PG&E's latest publication of Public Safety Power Shutoff Policies and Procedures (May 2019) warns that electricity may be shut off several times a year, outages may last more than 48 hours, and any of the utility's 16 million customers may be affected.

Epic training begins to prepare for Go-live

On May 28th, the Department of Public Health IT team began the critical task of training nearly 10,000 staff members from Zuckerberg San Francisco General, Laguna Honda Hospital, the Behavioral Health Center, and the Primary and Specialty Care clinics in advance of our first Epic Electronic Health Record launch on August 3rd. Over the coming weeks, trainers will provide the knowledge and skills that San Francisco Health Network providers and staff members need to effectively use this valuable tool for the enhancement of patient and client care. The training covers multiples workflows or scenarios and provides the basic foundation and proficiency needed to work within the new system. The quick pace environment gives staff a firsthand experience and ensures interactive, in-person support.

DPH in the News (Jun 4 – Jun 17 2019)

NPR, Jun 17 2019, Meth In The Morning, Heroin At Night: Inside The Seesaw Struggle of Dual Addiction
<https://www.npr.org/sections/health-shots/2019/06/17/730803759/meth-in-the-morning-heroin-at-night-inside-the-seesaw-struggle-of-dual-addiction>

EMS1, Jun 17 2019, Baltimore stabilization centers hope to solve heroin crisis
<https://www.ems1.com/careers/articles/394140048-Baltimore-stabilization-centers-hope-to-solve-heroin-crisis/>

Planetizen, Jun 13 2019, SF to use conservatorship for some mentally ill homeless people
<https://www.planetizen.com/news/2019/06/104764-san-francisco-use-conservatorship-some-mentally-ill-homeless-people>

Common Health, Jun 12 2019, The van vs. an opioid addiction: taking treatment to the streets
<https://www.wbur.org/commonhealth/2019/06/12/boston-care-zone-van-suboxone>

Time, Jun 11 2019, For the first time, an expert panel is recommending a drug to prevent high-risk groups from getting HIV

<https://time.com/5604357/uspstf-prep-hiv-recommendation/>

Live Trading News, Jun 11 2019, Trump's Healthcare Discrimination

<https://48hills.org/2019/06/the-facts-about-vaping/>

SFist, Jun 8 2019, Mission Beach Café shutters after 12 years

<https://sfist.com/2019/06/08/mission-beach-cafe-shutters-after-12-years/>

Washington Post, Jun 7 2019, San Francisco plans to force mentally ill addicts into a system critics call ripe for abuses

https://www.washingtonpost.com/nation/2019/06/07/san-francisco-plans-force-mentally-ill-addicts-into-system-critics-call-ripe-abuses/?noredirect=on&utm_term=.c968c636040a

AP, June 4 2019, SF may force treatment on mentally ill drug users

<https://fox40.com/2019/06/04/san-francisco-may-force-treatment-on-mentally-ill-drug-users/>

USA Today, Jun 4 2019, SF proposes nation's first universal mental health care system

<https://www.msn.com/en-us/news/us/san-francisco-proposes-nations-first-universal-mental-health-care-system/ar-AAcot5Y>

SF Chronicle, Jun 4 2019, SF, state seek to block fed's rule allowing health workers to deny care

<https://www.sfchronicle.com/politics/article/SF-state-seek-to-block-fed-s-rule-allowing-13936893.php>

City Attorney of SF, Jun 4 2019, Herrera asks court to block Trump's discriminatory health care rule

<https://www.prnewswire.com/news-releases/herrera-asks-court-to-block-trumps-discriminatory-health-care-rule-300861557.html>

Commissioner Comments:

Commissioner Chow noted that the weather in San Francisco usually gets warmer in the Fall and requested an update in six months on SFDPH efforts to address public health issues related to heat.

4) GENERAL PUBLIC COMMENT

Raquel Rivera, sister of one of the 17 CPMC patients that were transferred from the subacute unit at the former St. Luke's Hospital to the Davies Campus, stated that in less than 6 months, 6 of these patients have died. She added that her sister almost died of neglect and that her family's regular visits helped save her life.

Gloria Simpson stated that San Francisco needs additional subacute beds. She noted that a CPMC subacute patient is dying almost every month due to the lack of experienced clinical staff on the unit. She asked when will these lives be going to matter to public officials.

Teresa Palmer, retired geriatrician, stated that CPMC initially wanted to close down the subacute unit which would have meant patients would have to be moved out of county and away from their families. She added that former SFDPH Director Barbara Garcia said that beds could be licensed at St. Mary's or Chinese Hospital. She asked that this idea be revisited so that there is adequate provision of subacute services in San Francisco.

Mark Aaronson, Founding Director of the Hastings Civil Justice Clinic, urged the Health Commission to make subacute care its number one priority. He added that since the Affordable Care Act, the amount of traditional Charity Care and Medi-Cal Shortfall patients at CPMC has decreased.

Kung Feng, Executive Director of Jobs with Justice, stated that the closing of the CPMC subacute at St. Luke's may seem abstract to the Commission but it is a very personal issue for these families and patients. He added that being far away from family and friends negatively impacts the patients' lives. He called on CPMC to provide care that these patients and the community needs.

Paul Cartior stated that he is very concerned about the moving of subacute services out of county. He noted that this makes it difficult for family to visit and isolation can be detrimental to survival rates of subacute patients.

Magina Montana stated that every time the group comes to the Health Commission or City Hall to discuss the CPMC subacute patients, she feels that San Francisco does not value human life. Instead it allows for-profit hospitals to run as non-profit without accountability. She asked what is going to happen to the remaining patients at CPMC's subacute unit.

Michael Lyons stated that the community fought CPMC to keep St. Luke's Hospital open; now the community watches as CPMC's priority for making revenue over patient care has led to patient deaths.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE

Commissioner Chung, Chair, stated that the Committee discussed two presentations. The Environment Health Section gave an update on its food safety program. She noted that the current numbered scoring system will soon be replaced with a placard system that focuses on food safety issues and uses the following three categories: Pass (green placard), Conditional Pass, (yellow placard), and Closed (red placard).

Commissioner Chung stated that the Committee also heard a presentation on the SFDPH HIV/Hepatitis C, and Sexually Transmitted Diseases Roadmap, which described the SFDPH plan to more effectively integrate services. An RFP for these services will be released this fall.

6) UPDATE FROM DECEMBER 4, 2018 PROPOSITION Q HEARINGS:

A. CPMC LICENSE CHANGE OF THE ALZHEIMER'S DAY PROGRAM FROM CPMC AND INSTITUTE ON AGING (IOA) TO BE INDEPENDENTLY LICENSED BY IOA, AND

B. CPMC CHANGE OF MANAGEMENT OF OUTPATIENT DEPARTMENTS FROM CPMC TO THE SUTTER PACIFIC MEDICAL FOUNDATION

Sneha Patil, Director, SFDPH Office of Policy and Planning, presented the item. Calvin Lamb MD, CEO Sutter Pacific Medical Foundation and Tom Briody, CEO Institute on Aging, were present to answer questions.

Public Comment:

Teresa Palmer, retired geriatrician, stated that she is glad to hear that IOA has found a suitable facility. She is concerned about the transfer of the Diabetes Center to the Foundation. She noted that CPMC and the Foundation assured the Commission and public that the two entities were under the same "financial umbrella." However, staffing for the Diabetes Center has not been adequate. She noted that community providers are no longer referring patients to the Diabetes Center because they know the quality of care is not consistent.

Lida Montano stated that by not properly staffing the Diabetes Clinic, CPMC has shown that it does not care about its low income patients.

Commissioner Comments:

Commissioner Green asked if there is any available information on changes to patient volume, which could show attrition since the transfer of services to the Foundation. She asked if CPMC could contract with the Foundation, which could subcontract to other providers. Dr. Lamb stated that subcontracting requires willingness from both parties; this is not always possible. He noted that the patient volume has not changed nor has the payor mix changed since the transfer.

Commissioner Guillermo stated that there was no mention of the impact of the transfer of non-invasive cardiology services. Dr. Lamb stated that in general, all the services that were transferred have not had a change in patient volume. Commissioner Guillermo stated that according to the memo presented to the Health Commission, the volume for non-invasive cardiology services has decreased. Dr. Lamb stated that the Foundation has made every attempt to get Letters of Agreement for any patients; he noted that patients with HMO networks are usually encouraged to see a provider within the network.

Commissioner Chow asked for more information regarding the patients' experience in this transfer of services. Dr. Lamb stated that, for the most part, the transferred services are still in the same building and the Foundation's shorter registration process is for outpatient services.

Commissioner Chow asked if Spanish-speaking patients can be seen in all the transferred services. Dr. Lamb stated that staff at the transferred services have the capacity to speak several languages to meet the needs of patients.

Commissioner Chow asked if the payer mix of the transferred services has changed. Dr. Lamb stated that the proportion of Medi-Cal patients has slightly increased.

Commissioner Chow stated that at the annual joint meeting between the Health and Planning Commissioners to review the report on the City's Development Agreement with CPMC, the Commissioners may ask for quantitative data on the changes of the patient mix at the Diabetes Clinic and the impact of the lack of Diabetes services for monolingual patients until a bilingual staff member was hired in January 2019. He added that he hopes this data will show a positive impact of the transition of these services to the Foundation.

Commissioner Guillermo asked if CPMC can track changes in health outcomes of the patients accessing the transferred services. Dr. Lamb stated that the data for the Diabetes Clinic patients is not available because not all patients have CPMC as a medical home. He noted that for the Breast Health/Mammography Center and Non-Invasive Cardiology services, the same providers and equipment are being used.

Commissioner Chow stated that he is pleased that IOA was able to obtain a new building to provide services.

7) LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER (LHH) MEDICAL STAFF BYLAWS & RULES AND REGULATIONS

Mivic Hirose, LHH Chief Executive Administrator, presented the item.

Action Taken: The Health Commission unanimously approved the Laguna Honda Hospital and Rehabilitation Center (LHH) Medical Staff Bylaws and Rules and Regulations.

8) SFDPH GENDER HEALTH SF UPDATE

Jenna Rapues, Director, Seth Pardo, Program Evaluator, and Dr. Barry Zevin, Medical Director presented the item.

Commissioner Comments:

Commissioner Guillermo asked if the program evaluation data includes information on out-of-network participants. Mr. Pardo stated that the data includes both in-network and out-of-network participants.

Commissioner Guillermo noted that the demographics of the participants indicates high risk and yet the group is still well prepared for surgery. Mr Pardo stated that the participants he interviewed were so thankful for the opportunity to access these services that it effectively motivated them to improve health behaviors related to surgery preparation.

Commissioner Chung stated that it is heartwarming to hear the details of the many high quality services provided for by this program. She asked for more information on how health outcomes relate to referrals. Mr. Pardo stated that the participants medical record would be accessible to program staff only if the individual is within the San Francisco Health Network. Dr. Zevin stated that for those participants who are HIV positive, there has not been an apparent difference in health outcomes. He added that these participants sometimes need a bit more coordination between HIV treatment and surgical providers.

Commissioner Chung asked how the lack of stable housing impacts clients. Dr. Zevin stated that the program has learned the importance of coordinating with other case management programs in an attempt to provide necessary services for each participant.

Commissioner Chow stated that the new centralized electronic health record (EPIC) may be useful in gathering information on physical and behavioral health outcomes.

9) SFDPH WIDE SEXUAL ORIENTATION AND GENDER IDENTITY DATA INITIATIVE

This item was deferred due to the possible loss of quorum of Health Commissioners.

10) OTHER BUSINESS:

Mr. Morewitz reminded the Commissioners that the August 20, 2019 meeting will take place at the Chinatown YMCA and will focus on public health issues of that neighborhood.

11) JOINT CONFERENCE COMMITTEE REPORTS

Commissioner Guillermo, Chair of the LHH JCC, stated that the June 17, 2019 committee meeting was primarily a closed session to review quality reports.

12) CLOSED SESSION:

- A) Public comments on all matters pertaining to the Closed Session. (SF Admin. Code Section 67.15.)
- B) Vote on whether to hold a Closed Session. (Action Item)
- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5, 1157.6, and 1157.7; Health and Safety Code Section 1461; San Francisco Administrative Code Sections 67.567.8, 67.8-1, and 67.10; and California Constitution, Article I, Section 1.

REVIEW OF LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER QUALITY AND PERFORMANCE IMPROVEMENT AND PATIENT SAFETY

RECONVENE IN OPEN SESSION

1. *Discussion and Vote to elect whether to disclose any portion of the closed session discussion that is not confidential under Federal or State law, The Charter, or Non-Waivable Privilege (San Francisco Administrative Code Section 67.12(a).)*
2. Possible report on action taken in closed session (Government Code Section 54957.1(a) and 54957.7(b) and San Francisco Administrative Code Section 67.12(b).

Action taken: The Health Commission voted not to disclose the discussion held in closed session.

13) ADJOURNMENT

The meeting was adjourned at 6:46pm.