

James Loyce, Jr., M.S.
President

Dan Bernal
Vice President

Edward A. Chow, M.D.
Commissioner

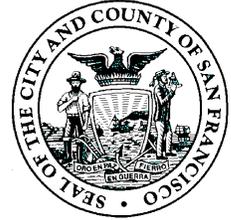
Cecilia Chung
Commissioner

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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Director of Health

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MINUTES

HEALTH COMMISSION MEETING

**Tuesday August 20, 2019 5:00 p.m.
Chinatown YMCA Multi-Purpose Room
855 Sacramento Street
San Francisco, CA 94108**

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
Commissioner Cecilia Chung

Excused: Commissioner Tessie Guillermo

The meeting was called to order at 5:11pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF AUGUST 6, 2019

Action Taken: The Health Commission unanimously approved the June 18, 2019 minutes.

3) 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>

Federal administration's changes to public charge

On August 12th, the Federal Administration issued a new rule change to "public charge" policies that govern how use of public benefits affect individuals' immigration status. Under the change, receiving certain public benefits would affect applications for legal permanent residency ("green card"). San Francisco and Santa Clara counties filed a joint lawsuit on August 13th to stop the Administration from moving forward with these changes. If litigation does not prevent the rule from taking effect, the soonest this policy will become effective is October 15.

The City of San Francisco encourages members of immigrant communities to continue to use all the benefits and resources available to them, including health care services. While the new public charge rule directly impacts a small number of people in San Francisco, the associated fear and confusion is likely to result in a 'chilling effect' – causing many low-income immigrants and their families to refrain from accessing critical health and nutrition benefits that they are entitled to receive. San Francisco is a sanctuary city, and all are

welcome here. The San Francisco Department of Public Health will continue to provide health care services through our clinics and hospitals in the San Francisco Health Network, regardless of immigration status or lack of insurance.

An Epic Transformation

On August 3rd, we went live with a new electronic health record system. Epic. The health department introduced a tremendous amount of change in a short period of time, and we've already had so many wins. Having access to a patient's entire medical records across the different locations is transformational for providers because we can connect primary care, specialty care, care at ZSFG and LHH, and beyond. More than 4,000 patients have information from non-DPH providers in their records, and at peak times, there are 1,500 concurrent users on the system. We also have information available within our Epic dashboard that we didn't have before. For example, we can see the number of beds available at any moment - information that used to take us 24 hours to get. In addition, Epic protects patient information as medical errors are now more transparent. There have been zero harm events associated with Go-live.

We've had a full team dedicated to ensuring the transition is as seamless as possible. For the entire month of August, we have specially trained support staff helping at each unit. For technical issues, the IT team brought in 360 helpers and created five command centers with staff working 12-hour shifts around the clock. The wait time for calls to the Help Desk are averaging less than 15 seconds, and 77 percent of the 10,000+ tickets have been closed as of August 14th. We've resolved issues by connecting with groups, building training plans, developing Tip Sheets, creating new processes, and always putting our patients first.

While we celebrate our successes, as with any new technology, we also continue to address challenges within Epic. There is a learning curve to using a new system, especially one that touches every part of the organization, and this is no exception. There have been moments of frustration, but there have been more moments of collaboration and patience within all levels of DPH staff. With new processes, workflow redesigns, and collaborations across many multi-disciplinary teams, we have been able to resolve thousands of issues and will continue to address them as quickly and efficiently as possible. As we continue to go through the experience and adjust to the new norms, we are excited to use Epic as a tool that will truly transform care.

Health department continues to respond to prevent overdoses and increase access to treatment

National and local media recently have reported about overdose mortality deaths in San Francisco. The health department has seen a rise in fentanyl overdoses, and deaths by overdoses, over the last few years. In response to this increase in trend, we are continuing to focus our work on overdose prevention efforts and saving lives:

- We have been providing naloxone (Narcan) in the community since 2003, saving lives by equipping people who use drugs, and their friends, to reverse overdoses.
- Our Street Medicine team provides buprenorphine to help people experiencing homelessness start opioid addiction treatment. Additionally, we are increasing access to buprenorphine. In 2017, there were 2,073 people with buprenorphine prescriptions, and another 400 people treated by our Street Medicine Team since November 2016.
- Our syringe access programs provide fentanyl test strips so that people can learn whether their drugs contain fentanyl and use that information to decide whether to take the drug, and how much of it to take. This is critical in cases when fentanyl is a contaminant in other drugs, such as meth, crack, heroin and Xanax.
- We have a strong surveillance system that allows us to monitor the situation closely and direct response efforts where they are most needed.
- Our syringe access programs also provide naloxone, buprenorphine and connection to treatment.
- Our Harm Reduction partners in the community receive information directly from the community of people who use drugs and provide educational alerts and warnings when fentanyl

overdoses rise, or other dangers to street drugs emerge. Communication within the community is key to saving lives.

- Our Jail Health Services provide opioid addiction treatment, including methadone and buprenorphine.
- We support the creation of overdose prevention sites (safe injection services) in San Francisco and are working with state legislators on enabling legislation.

DPH in the News (Aug 6 – Aug 14 2019)

SF Chronicle, Aug 14 2019, Navy altered Hunters Point cleanup to cover, not remove, toxic soil

<https://www.sfchronicle.com/bayarea/article/Report-Navy-altered-Hunters-Point-cleanup-to-14302320.php>

NY Post, Aug 12 2019, SF saw huge spike in fentanyl-related deaths in 2018

<https://nypost.com/2019/08/12/san-francisco-saw-huge-spike-in-fentanyl-related-deaths-in-2018/>

KRON, Aug 8 2019, Midwife services expanded at Zuckerberg SF General

<https://www.kron4.com/news/bay-area/midwife-services-expanded-at-zuckerberg-san-francisco-general/>

Pitchfork, Aug 8 2019, Outside Lands becomes first major U.S. festival to offer on-site cannabis sale and consumption

<https://pitchfork.com/news/outside-lands-becomes-first-major-us-festival-to-offer-on-site-cannabis-sale-and-consumption/>

SF Chronicle, Aug 7 2019, Fentanyl overdose deaths soared in 2018 with 89

<https://www.sfchronicle.com/bayarea/article/Fentanyl-overdose-deaths-soared-in-2018-with-89-14289026.php>

SF Chronicle, Aug 7 2019, Outside Lands gets green light for pot sales on festival grounds

<https://www.sfchronicle.com/business/article/Outside-Lands-gets-city-s-green-light-for-pot-14288811.php?psid=eTWi7>

KQED, Aug 7 2019, SF fentanyl deaths up almost 150

<https://www.kqed.org/news/11766169/san-francisco-fentanyl-deaths-up-almost-150>

Commissioner Comments:

Commissioner Chow noted that the new Federal policy govern how use of public benefits affect individual immigration status is an important issue for the community in Chinatown. He noted that in Los Angeles there have already been people who have disenrolled from public benefits, including Medi-Cal, due to fear of being deported. He requested that the SFDPH track the issue of dis-enrollment in the local immigrant populations.

Commissioner Chow asked for more information regarding lung issues related to vaping. Dr. Tomas Aragon, San Francisco Health Officer and Director of Population Health, stated that the pulmonary case related to vaping have occurred mostly in the Midwest with men. He noted that it is likely that these issues related to unregulated additives. He also encouraged all San Francisco cannabis vaping users to only vape with regulated products.

Commissioner Green asked if the SFDPH has a multi-lingual plan for addressing the public charge policy issue. She noted that culturally and linguistically appropriate messaging is very important. Dr. Colfax stated that the SFDPH Executive team continues to work together, and with the Human Service Agency, to track the impact and to outreach to the impacted communities with culturally and linguistically appropriate messages. He added that the City of San Francisco is part of a lawsuit against the federal government to stop the implementation of the policy.

Commissioner Chung stated that young mothers are dropping out of food assistance and WIC programs. She asked if the SFPDPH can track the impact on the most vulnerable populations. She is noted that people living with HIV are concerned that Ryan White funded programs are a public benefit. Dr. Colfax stated that, at present, the SFPDPH does not have a specific mechanism to understand the reason why someone would disenroll from a program. However, the Department can track enrollment data.

Commissioner Chow asked for continued reporting to the Health Commission regarding activities by the SFPDPH regarding this public charge policy issue.

Commissioner Bernal noted that there was a sweet spot of drug dealers by the federal government in the Tenderloin which resulted in 38 arrests. He asked if the SFPDPH has noted any increases in requests for access to services in that area since access to street drugs may have changed. Dr. Colfax stated that the SFPDPH is on high alert for increased withdrawals or overdoses.

Commissioner Green asked if the SFPDPH has data regarding the number of patients accessing clinics that specialize in bilingual and monolingual Spanish speaking clients. She noted that she is aware that clinics serving this population in Sonoma county are finding that many clients are very fearful of accessing any service. Dr. Hali Hammer, Director of the San Francisco Health Network Ambulatory Care, stated that the SFPDPH is tracking this population and there has been little impact on clients accessing the Network's many clinics.

4) GENERAL PUBLIC COMMENT

Jian Zhang, DNP, Chinese Hospital Chief Executive Officer, stated that Chinese Hospital has been providing culturally sensitive health care to the community for 120 years. In 2016, a new hospital building was added. Multiple meetings were convened in City Hall to discuss how all healthcare stakeholders in the Chinese community and the DPH can work collaboratively to ensure Chinese Hospital remains a safety net hospital.

5) SAN FRANCISCO CHINATOWN NEIGHBORHOOD HEALTH CONDITIONS AND STATUS

Tomas Aragon, MD, Director and Health Officer, and Jason Xu, Epidemiologist, presented the item.

Commissioner Comments:

Commissioner Loyce thanked Mr. Xu for the informative presentation.

6) SAN FRANCISCO HEALTH NETWORK CHINATOWN HEALTH CENTER

Sunny Pak, MD, MPH, Acting Medical Director, presented the item.

Commissioner Comments:

Commissioner Chung asked for a Hepatitis B update. Dr. Pak stated that every clinic patient is screened by Hepatitis A, B, and C. If they are found to be positive, they are offered treatment and access to specialty care as needed.

Commissioner Chow thanked Dr. Pak for the presentation and acknowledged the impactful work of the clinic's screening for Body Mass Index at 23 for Asian patients; he noted that the Health Commission passed a resolution supporting this program and that the policy has had national impact. He hopes that EPIC will be configured to reflect the need for screening of the Asian populations.

7) NICOS CHINESE HEALTH COALITION: CHINATOWN/CHINESE COMMUNITY ISSUES

Michael S. Lia, MSW, Director of Programs, and Rev. Norman Fong, NICOS Board President and Executive Director of the Chinatown Community Development Center, presented the item.

Commissioner Comments:

NICOS sees more online addiction but many clients are accessing gambling on multiple platforms.

Commissioner Chung noted that there is no mention of alcohol addiction in the presentation. Mr. Lia stated that the agency does not do much work in this area because data shows Asians have lower rates of alcohol addiction than the general population.

Commissioner Loyce noted that gambling and domestic violence often are seen in the same situations. Mr. Lia stated that domestic violence occurs twenty-five times more often in homes with gambling addiction.

Commissioner Chow thanked NICOS for its broad range of services and research. He also thanked the organization for taking on a leadership role in the City's children's oral health project. He added appreciation for continue attempts to improve oral health practices.

Commissioner Chow requested that the SFPDH review its connection with Chinatown in regard to disaster planning efforts. Dr. Colfax noted that Dr. Jan Gurley, Director of Public Health Emergency Preparedness and Response, will be working with the Chinatown community to strengthen the relationship in regard to emergency planning. Mr. Lia stated that NICOS has a long history of community disaster preparedness and has an infrastructure to check on vulnerable populations during a disaster.

8) STORIES OF API CHILDREN & YOUTH: SPOTLIGHT ON CHINATOWN CHILD DEVELOPMENT CENTER

Vincy Chow, LCSW, CCDC Director; Farahnaz Farahmand, Ph.D, Assistant Director of SFDPH Children, Youth, and Families System of Care, Ritchie Rubio, Ph.D, Director of Practice Improvement and Analytics of SFDPH Children, Youth, and Families System of Care, presented the item.

Commissioner Comments:

Commissioner Loyce thanked the presenters for an informative presentation.

9) OTHER BUSINESS:

This item was not discussed.

10) JOINT CONFERENCE COMMITTEE REPORTS

This item was not discussed.

11) ADJOURNMENT

The meeting was adjourned at 7:21pm.