

**Sonia E. Melara, M.S.W.**  
President

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

**Cecilia Chung**  
Commissioner

**Judith Karshmer, Ph.D., PMHCNS-BC**  
Commissioner

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

**David B. Singer**  
Commissioner

**Belle Taylor-McGhee**  
Commissioner

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

**Edwin M. Lee, Mayor**  
**Department of Public Health**



**Barbara A. Garcia, M.P.A.**  
Director of Health

**Mark Morewitz, M.S.W.**  
Executive Secretary

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**SPECIAL JOINT MEETING:**  
**HEALTH COMMISSION AND PLANNING COMMISSION**

**MINUTES**

**Thursday, September 19, 2013, 10am**  
**City Hall, 1 Dr. Carlton B. Goodlett Place, Room 400**  
**San Francisco, CA 94102**

**1) CALL TO ORDER**

**Health Commissioners Present:**

Commissioner Sonia E. Melara, MSW, President  
Commissioner Edward A. Chow M.D.  
Commissioner Judith Karshmer, Ph.D, PMHCNS-BC  
Commissioner David J. Sanchez Jr., Ph.D.  
Commissioner David B. Singer  
Commissioner Belle Taylor-McGhee

Excused: Commissioner Cecilia Chung

**Planning Commissioners Present:**

Commissioner Rodney Fong, President  
Commissioner Cindy Wu  
Commissioner Michael Antonini  
Commissioner Gwyneth Borden  
Commissioner Rich Hillis  
Commissioner Kathrin Moore  
Commissioner Hisashi Sugaya

Commissioner Fong called the meeting to order at 10:04am.

**2) HEALTH CARE SERVICES MASTER PLAN**

Colleen Chawla, Deputy Director of Health and Director of DPH Policy and Planning, and Claudia Flores, Lead Planner at the San Francisco Planning Department, made the presentation.

On November 23, 2010, the Board of Supervisors adopted Ordinance No. 300-10, requiring the Department of Public Health and the Planning Department to prepare a Health Care Services Master Plan ("HCSMP"), to "provide the Health Commission, the Planning Commission and Board of Supervisors with information and public policy recommendations to guide their decisions to promote the City's land use and policy goals

developed in such Plan, such as distribution and access to health care services". The Ordinance created Planning Code Sections 342 and 342.10 to create and implement the HCSMP. An informational hearing on the Draft HCSMP was held at the Health Commission on July 16, 2013. An informational hearing on the Draft HCSMP was held at the Planning Commission on July 18, 2013. Public comment on the draft Plan closed August 22, 2013. Planning Department and Department of Public Health staff will present a summary of public comments and a revised draft of the HCSMP at a special joint meeting of the San Francisco Health Commission and the San Francisco Planning Commission. At this joint meeting, each Commission will consider adopting a resolution to recommend approval of the Plan by the Board of Supervisors. The Planning Commission will also consider adopting the Negative Declaration prepared under the California Environmental Quality Act (CEQA) for the HCSMP, and making CEQA Findings. The Preliminary Recommendation is to adopt a recommendation for approval.

Public Comment:

Susan Fang, Chinese Progressive Association, thanked those who worked on the revision for including a number of changes her organization previously suggested in the final draft. She requested that the following issues be included in a final version of the document:

- More clarity in the Consistency Determination process; she is concerned that if a project meets just one of the highlighted items, then the project will be offered incentives.
- Cultural Competency
- Insuring that Healthy San Francisco spending requirements are included.

Hilary Ronen, Legislative Aide to Supervisor Campos, thanked the Health Commission and Planning Commission; the Health Department; and the Planning Department; for working together to implement the legislation created by Supervisor Campos. She also thanked the Co-Chairs of the Health Care Services Master Plan Taskforce, Roma Guy and Dr. Tomas Aragon.

A person who remained anonymous, stated that she is a long-time resident of the Bayview community. She congratulated both Commissioners and Departments for the effective work that will be a model for the region and the rest of the country.

Lucy Johns, member of the Health Care Services Master Plan Taskforce, stated that the Health Care Services Master Plan can be useful as a policy statement with recommendations on how to improve the health of San Franciscans.

Dina Long, San Francisco Clinic Consortium, thanked the Planning and Health Departments and the Planning and Health Commissions for the work on the Health Care Services Master Plan.

Commissioner Comments/Follow-Up:

Commissioner Antonini stated that he is concerned that a clinic or medical facility might be told that they cannot locate where they want to because their request does not adhere to the Plan. He stated that he does not want to put up another barrier for medical facilities to provide care to those in need in San Francisco. He asked how the Consistency Determination mechanism would work. Ms. Chawla stated that projects that meet the Consistency Determination may be recommended for expedited Planning Department review and may be eligible for other non-monetary incentives. Only those projects that are deemed harmful to the health of San Franciscans would be deemed inconsistent.

Commissioner Antonini stated that he does not want the Plan to be used to block or fast-track projects. Ms. Chawla stated that the Consistency Determination mechanism includes the term "on balance" which means the project is assessed as a whole.

Commissioner Wu asked how will it be determined whether the project is deemed to be “On balance.” Ms. Chawla stated that the burden will be placed on the people who are applying for projects as to whether the project is “on balance.”

Commissioner Wu asked for more clarification on the types of incentives that will be offered. Ms. Flores stated that the current incentives are process-oriented. However, as the Plan is implemented, the Planning and Health Departments may suggest addition types of incentives which would be forwarded to the Planning and Health Commissions for review. She added that these additional incentives will be options that can be tracked over time to assess the added value to the overall process.

Commissioner Borden stated that the draft Plan does not mention access to food. She recommends that this issue be incorporated into health promotion within future versions of the Plan.

Commissioner Moore thanked everyone involved in the development of the Plan, especially Supervisor Campos. She stated that the Plan should be a living document that is amended over time to reflect changes in the San Francisco communities.

Commissioner Antonini asked if the Affordable Care Act will provide insurance to the 117,000 elderly people in San Francisco who are currently without insurance. Ms. Chawla stated that approximately two thirds of this group will be eligible for insurance through the Affordable Care Act. The remaining group will continue to be uninsured.

Commissioner Chow suggested that the word “rely” be changed to “utilize” in the final “Be it Further Resolved” paragraph in the draft resolution because the Plan is a living document that should be used, not just relied on.

Commissioner Singer thanked everyone who worked to develop the impactful Plan and asked for clarification on section 300-10 of the Plan. Ms. Chawla stated that there are two thresholds that would make a project subject to the Health Care Services Master Plan: changing from a non-medical use to a medical use that is 10,000 square feet or larger; and enlarging a current medical use building by more than 5,000 square feet.

Action Taken: The Health Commission unanimously approved the resolution with the amendment noted above. (Attachment 1)

Action Taken: The Planning Commission unanimously approved the resolution with the amendment noted above. (Attachment 1)

Commissioner Melara thanked everyone who participated in the development of the legislation and draft Plan. She added that this project is a model of how two City Departments can effectively work together to improve San Francisco.

Director Garcia thanked all Planning Department and Health Department staff, especially Ms. Chawla, and both the Planning and Health Commissioners.

### **3) GENERAL PUBLIC COMMENT**

There was no general public comment.

### **4) ADJOURNMENT**

The meeting was adjourned at 11:04am.

**HEALTH COMMISSION  
RESOLUTION 13-10**

**RECOMMENDING THAT THE BOARD OF SUPERVISORS ADOPT THE HEALTH CARE SERVICES MASTER PLAN AS  
AN OFFICIAL PLAN OF THE CITY AND COUNTY OF SAN FRANCISCO**

WHEREAS, San Francisco Ordinance 300-10, sponsored by Supervisor David Campos and effective January 2, 2011, required the creation of a Health Care Services Master Plan (HCSMP), and once adopted by the Board of Supervisors, requires that certain land use projects that fall under the medical use sections of the Planning Code and meet certain size thresholds be compared for consistency against the HCSMP;

WHEREAS, The HCSMP is a comprehensive look at San Francisco's current and projected health care facility and service needs and has been a collaboration between the Department of Public Health (DPH) and the Planning Department, and the many community and health care experts who participated in the process to create the Plan;

WHEREAS, The HCSMP will provide the Health Commission, the Planning Commission, and Board of Supervisors with information and public policy recommendations to guide their decisions to promote the City's land use and policy goals developed in such Plan, such as distribution and access to health care services;

WHEREAS, The HCSMP will also provide the Health Commission, the Planning Commission, and Board of Supervisors with information essential to health care planning for the City;

WHEREAS, The HCSMP identifies the current and projected need for, and locations of, health care services in San Francisco, and contains recommendations on how to achieve and maintain appropriate distribution of, and access to, such services;

WHEREAS, The Plan was informed by:

- A 41-member HCSMP Task Force that served as an advisory body charged with focusing on health care access among San Francisco's vulnerable populations and developing preliminary HCSMP recommendations that reflected both relevant data and community feedback.
- More than 100 San Francisco residents who gave their time to infuse the HCSMP with community perspective. Through public comment at HCSMP Task Force meetings and participation in HCSMP focus groups, community members shared their vision of what equitable health care access might look like in San Francisco.
- Quantitative data and policy analysis reflected in the Community Health Status Assessment and the five assessments required of the HCSMP by the Ordinance.

WHEREAS, The resulting HCSMP is a community- and data-driven document that sets forth a series of recommendations and related guidelines intended to provide a dynamic and inspiring roadmap for bettering health and health services, focus on improving access to care, particularly for San Francisco's vulnerable populations, including low-income areas and geographic areas with high rates of health disparities;

WHEREAS, The HCSMP recommendations and guidelines were largely developed by the HCSMP Task Force not only to guide land use decisions and inform the siting and scope of health care facilities and services, but also acknowledge that health and wellness result from the complex integration of services, community partnerships, and neighborhood characteristics;

WHEREAS, The HCSMP was posted and available for public comment between July 11, 2013 and August 22, 2013;

WHEREAS, On July 16, 2013, the Health Commission conducted a duly noticed public hearing on the HCSMP at a regularly scheduled meeting of the Health Commission;

WHEREAS, on September 3, 2013, the Health Commission was presented with a summary of the public comment that was received during the public comment period;

WHEREAS, At its September 3, 2013 meeting, the Health Commission voted in support of moving the draft Plan forward for final consideration by the Health Commission and Planning Commission at the September 19, 2013 special joint Commission meeting;

NOW BE IT RESOLVED, That pursuant to San Francisco Ordinance 300-10, the Health Commission recommends that the Board of Supervisors adopt the Health Care Services Master Plan as an official plan of the City and County of San Francisco; and

BE IT FURTHER RESOLVED, That the Health Commission commends and thanks the HCSMP Task Force and the additional members of the community who participated in this process for their thoughtful work and strong commitment to the development of this landmark plan; and

BE IT FURTHER RESOLVED, That the Health Commission intends to utilize the HCSMP to inform and support citywide strategic and health improvement planning efforts, particularly for San Francisco's vulnerable populations.

I hereby certify that the San Francisco Health Commission at its meeting of September 19, 2013 adopted the foregoing resolution.

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Mark Morewitz

Health Commission Executive Secretary