

Edward A. Chow, M.D.
President

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



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MINUTES

HEALTH COMMISSION MEETING

Tuesday, May 6, 2014, 4:00 p.m.

**101 Grove Street, Room 300 or Room 302
San Francisco, CA 94102**

1) CALL TO ORDER

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

The meeting was called to order at 4:05 pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF APRIL 15, 2014.

Action Taken: The Health Commission unanimously approved the minutes of the meeting of April 15, 2014.

3) DIRECTOR'S REPORT

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

Covered California's First Open Enrollment a Success

Covered California closed its inaugural open enrollment period on April 15th. Officials reported that during the six months period, nearly 1.4 million people signed up for plans through Covered California and another 1.9 million enrolled in Medi-Cal. Combined, these 3.2 million Californians represent over one-third of nationwide participation in new coverage options under the Affordable Care Act. Officials credited this success in large part to the broad network of outreach and enrollment entities who partnered with Covered California.

Among the Covered California enrollees, 85% have paid their first month's premium, nearly 6% are children, while 46% are aged 18-44, and approximately 48% are aged 45-64. Most enrollees are eligible for federal tax credits and/or cost-sharing subsidies, and the Silver tier plans (second-least expensive and covering at least 70% of enrollee health care costs) are the most popular. Covered California also reports having met or

exceeded its enrollment projections for African Americans (3% of total enrollees), Asian Americans (21%), and Latinos (28%). Updated regional level data is not yet available.

State Board of Pharmacy

The Laguna Honda Hospital pharmacy was inspected by the California State Board of Pharmacy (BOP) on Monday April 21, 2014. There is national scrutiny around sterile compounding and the Board of Pharmacy has been a stickler during their surveys this past year. The findings of the inspector were limited to one minor change in the frequency on cleaning of walls, ceilings and surfaces in our sterile compounding areas. The minimal findings show that the Laguna pharmacy has done an exemplary job keeping track of the many important details required to comply with the BOP regulations. It also provides confidence in the quality of care the pharmacy is providing to a vulnerable population.

Preterm Birth Initiative

On April 24, UCSF announced that it will receive \$100m from Mark and Lynne Benioff and the Bill and Melinda Gates Foundation to support a 10 year initiative to reduce the burden of preterm birth locally and globally. This landmark award will establish robust discovery and implementation research programs drawing expertise from disciplines across the UCSF campuses and key partners, including the SFDPH. Dr. Jonathan Fuchs, from the Center for Learning and Innovation, and Drs. Mary Hansell and Curtis Chan from Maternal Child and Adolescent Health, were deeply involved in the development of the project plan which proposes to use collective impact approach to reduce racial/ethnic and socioeconomic disparities in preterm birth. Collective impact brings together multi-sectorial partners to implement proven interventions and innovative solutions to address complex social and health issues. SFDPH will be a key partner to help leverage its strong outreach to its network of clinics and community partners while also focusing on "inreach" to other city agencies that can be mobilized to turn the curve on preterm birth in vulnerable communities-- a headline indicator of the population's health in San Francisco.

DPH Nurses Week 2014

This year, Nurses Week is May 5 through May 9. The DPH Nursing Leadership Council will recognize and celebrate the contributions of the DPH Nursing Staff with an awards ceremony at the Nurses Week Reception on May 8 at the San Francisco General Hospital cafeteria. Join in thanking the DPH nurses that make a difference.

Nation's First Library Social Worker Helps Give Hope to the Homeless

Leah Esguerra, LMFT, embedded SF HOT Psychiatric Social Worker at the San Francisco Public Library, was interviewed twice about the social services she provides at the library. Health and Safety Associate, Joseph Bank, was also interviewed. Both radio pieces garnered positive feedback from the community about the collaborative work between Public Health and the Public Library. The KGO Radio interview aired on March 17, 2014 while NPR California Report aired on April 11, 2014. We are proud of Leah and the compassionate and effective program she has developed with the Health and Safety Associates, a model that has been copied in San Jose and Sacramento. Chief Librarian, Luis Herrera, shares his support. "Initially there were some questions about whether this was a good idea," he says. "But it's taken off. And I think, in fact, we would look at the idea of expanding."

Award for Outstanding Contributions to Education

In April, the American Association of Neurological Surgeons presented Twyila with an award for her Outstanding Contributions to Education for Advance Practice Providers at the Plenary Session here in San Francisco. This is the first time such an award has been presented to someone other than a neurosurgeon. Before Twyila's involvement in education for advanced practice providers and allied professionals, this was a spotty and often-forgotten offering at our national meetings. Not only has Twyila organized and galvanized these efforts over the past decade, but her annual free-standing advanced practice course has become the most important educational event of the year.

Treasure Island Nurse Clinic

April 24 was opening day at the Treasure Island Nurse's clinic and the community response has been positive. 11 people sought services, ranging in ages from 8 to 60. In addition to the nurse on duty, a dedicated Health Worker will also staff the clinic two days a week, Wednesdays and Fridays, from 2 p.m. - 6 p.m. In a month, there will be a "grand" opening for the new clinic.

Commissioner Comments/Follow-Up:

Commissioner Chow asked for a follow-up on the Pre-Term Birth Initiative at a future Community and Public Health Committee. Director Garcia stated that an update could be provide in approximately 6 months.

4) GENERAL PUBLIC COMMENT

Jacob Moody, Executive Director of the Bayview Hunter's Point Foundation, stated that even though the African American population in San Francisco is dwindling, there is growing interest in the issues facing this population. He encouraged the Health Commission to support the SFDPH's cross-cutting programs focusing on African Americans and to continue to keep this population in mind as policy and budget decisions are made.

Deena Lahn, Policy Advocate for the San Francisco Community Clinic Consortium, stated that in the California Governor's budget, he proposed that the state will pay insurance premiums in the Health Exchange. However, the MediCal Comprehensive Services Prenatal Program focuses on lower income women by providing the cultural and linguistically appropriate services. She added that if the Governor's proposal is approved, lower income women may lose access to this culturally appropriate program.

5) FINANCE AND PLANNING COMMITTEE

Commissioner Chung, Committee Chair, stated that the Committee discussed a revised Contracts Report format and procedure to increase the efficiency and effectiveness of the Commission's oversight of SFDPH contracts. The Committee also reviewed and recommended for approval all the items on the Consent Calendar, reviewed the RFP Report Update and gave feedback on the FY 12-13 Healthy San Francisco Annual Report draft.

6) CONSENT CALENDAR

Action Taken: The following were unanimously approved the Health Commission:

- MAY 2014 CONTRACTS REPORT
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH THE SAN FRANCISCO PUBLIC HEALTH FOUNDATION, FUNDED BY THE GENERAL FUND IN THE AMOUNT OF \$200,480, WHICH INCLUDES A 12% CONTINGENCY, TO PROVIDE THE SUSTAINABLE COMMUNITIES INDEX PROGRAM SUPPORT, FOR THE PERIOD OF MARCH 1, 2014 THROUGH JUNE 30, 2015 (1.4 YEARS).
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH THE SAN FRANCISCO PUBLIC HEALTH FOUNDATION, FUNDED BY THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) IN THE AMOUNT OF \$437,220, WHICH INCLUDES A 12% CONTINGENCY, TO PROVIDE FISCAL MANAGEMENT AND PROGRAM SUPPORT OF THE BRACE: EMPOWERING SAN FRANCISCO COMMUNITIES TO ADDRESS CLIMATE CHANGE, FOR THE PERIOD OF SEPTEMBER 1, 2013 THROUGH AUGUST 31, 2016 (3 YEAR FEDERAL GRANT).
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH THE SAN FRANCISCO PUBLIC HEALTH FOUNDATION, FUNDED BY THE GENERAL FUND IN THE AMOUNT OF \$168,000, WHICH INCLUDES A 12% CONTINGENCY, TO PROVIDE PROGRAM SUPPORT TO THE FOOD SYSTEM PROGRAM – ENSURING FOOD SECURITY AND HEALTHY EATING FOR ALL SAN FRANCISCANS," FOR THE PERIOD OF APRIL 1, 2014 THROUGH JUNE 30, 2015 (1.3 YEARS).

7) **PEDESTRIAN SAFETY AND VISION ZERO IN SAN FRANCISCO: RESOLUTION**

Megan Wier, Environmental Health and Ana Validzic, Community Health Equity and Promotion, led the presentation.

Commissioner Comments/Follow-Up:

Commissioner Singer asked if the group incorporated anticipated future needs of San Francisco amidst the current economic and development transition in the City. Ms. Wier stated that the Vision Zero planning group developed projections for future needs that help predict how new development will impact pedestrian traffic and safety.

Commissioner Melara asked if public education efforts around shared space between pedestrians, bicyclists, and cars are planned. She highlighted the lack of open spaces in the Tenderloin. Ms. Wier stated that the Vision Zero plan protects the most vulnerable populations and stated that public education is part of the plan. She added that based on direction from the Health Commission, the SFDPH is currently conducting a health impact assessment of Tenderloin single-room-occupancy hotels which may eventually lead to changes for the neighborhood.

Commissioner Sanchez thanked everyone involved for the excellent collaboration. He suggested closely monitoring streets in which construction has occurred because crosswalks are not always replaced effectively; he added that areas near schools are particularly impacted. Ms. Validic stated that current efforts to mitigate these issues include monthly meetings with schools, SF Police, SFDPH, community groups, and parents; schools are prioritized by capital improvements needed.

Commissioner Karshmer asked how the private sector is involved in the Vision Zero plan. Ms. Wier stated that the group has identified the need to expand their private partnerships. Commissioner Karshmer asked for an update on the expansion of private partnerships and on the outcomes of the plan.

Commissioner Chow requested that updates on outcomes and data collection will first be made at the Community and Public Health Committee.

Commissioner Chow stated that the data shows that one third of accidents are the fault of pedestrians. He added that in the current climate of San Francisco, people are often texting or looking at their phone as they cross a street. He also added that people in dark clothes crossing the streets are difficult to be seen by bicyclists and cars. He advocated for expanding safety-education efforts for pedestrians, bicyclists and drivers.

Commissioner Taylor-McGhee asked if the group has reached out to the private sector to encourage an increase in walking. Ms. Wier stated that the group is working with employers to encourage bike use and increased walking. She added that the education campaigns have been developed in conjunction with small and large companies.

Action Taken: The Health Commission unanimously approved the resolution, "In Support of Vision Zero and the Goal of Zero Traffic Deaths in San Francisco by 2024."
(See Attachment A)

8) CARE TASK FORCE UPDATE: RESOLUTION

Lani Kent, Mayor's Office Senior Health Policy Advisor and Jo Robinson, Director of Community Behavior Health, gave the report.

Commissioner Comments/Follow-Up:

Commissioner Singer stated that it is clear the report identifies a need but he requested a better articulation of the reasons why there is an existing hole in the safety net. He also requested a prioritization of the recommendations.

Commissioner Chung asked for clarification of the criteria used to define the population for which the recommendations could be applied. Ms. Robins stated the Task Force focused on populations that the system failed to engage; individuals who do not ask for treatment for substance abuse or mental health. She added that most of the clients are homeless.

Commissioner Melara asked if the target population overlaps with clients of SFDPH services who have been categorized as high utilizers of services; Ms. Robins stated that there is overlap of the two groups of clients.

Commissioner Sanchez suggested defining a projected number of clients to reach in the first year of activities.

Commissioner Karshmer stated that clarity regarding the definitions of the client population and outcomes are needed.

Commissioner Chow requested prioritization of the many recommendations and the projected number of clients to reach.

Director Garcia stated that the SFDPH will prioritize the recommendations and will report back to the Health Commission at its next meeting.

Commissioner Chung recommended that efforts to educate the public about having compassion for this population may be beneficial to the efforts of implementing the Task Force's recommendations.

9) DPH BUDGET FY 2014-2016

Greg Wagner, Chief Financial Officer, and Jen Louie, Budget Director, gave the presentation.

Commissioner Comments/Follow-Up:

Commissioner Singer stated that this budget does not fully invest in the next generation of IT systems or health records. Although it would be enormously expensive to invest in these now, without these elements, future SFDPH revenue is at stake and the situation may result in more expensive but poorer quality of care provided to clients. He added that it is the collective responsibility of the Health Commission and the SFDPH leadership to push forward on this issue as soon as possible. Director Garcia stated that she appreciates Commissioner Singer's comments and the SFDPH will make all attempts to prioritize necessary IT systems in future budget recommendations.

Commissioner Karshmer asked how the pace of hiring impact the FTEs requested in the budget. Mr. Wagner stated that SFDPH Human Resources is working to decrease the time it takes to hire new staff; he added that hiring for the new SFGH hospital is vital as the transition begins next year.

Commissioner Chow thanked Mr. Wagner and Ms. Louie for the breakdown of FTE data he requested.

Action Taken: The Health Commission unanimously approved the DPH Budget FY2014-16.

10) OTHER BUSINESS

This item was not discussed.

11) JOINT CONFERENCE COMMITTEE REPORTS

Commissioner Chow, Chair of the SFGH JCC, stated at its April 22, 2014 meeting, the Committee heard presentations on the Care Transitions Taskforce and an update on the SFGH Psychiatry Audit and a plan of correction. The Committee also reviewed and discussed regular reports including the Hospital Administrator's Report, Patient Care Services Report, Medical Staff Report and the Quality Council minutes. In closed session, the Committee reviewed and approved the SFGH Credentials and PIPS reports

Commissioner Sanchez, Chair of the LHH JCC, stated that at is April 22, 2014 meeting, the Committee reviewed and approved the minutes in open session. In closed session, the Committee reviewed and approved the LHH Credentials and Quality Reports.

12) COMMITTEE AGENDA SETTING

This item was not discussed.

13) ADJOURNMENT

The meeting was adjourned at 6:36pm.

**HEALTH COMMISSION
RESOLUTION NO. 14-5**

IN SUPPORT OF VISION ZERO AND THE GOAL OF ZERO TRAFFIC DEATHS IN SAN FRANCISCO BY 2024

WHEREAS, at least 800 pedestrians are injured and an average of 100 severely injured or killed and a rising number of cyclists are injured on San Francisco streets each year, with a record number of four cyclist deaths in San Francisco in 2013; and

WHEREAS, pedestrians and cyclists are the most vulnerable road users and account for over half of the traffic deaths in San Francisco with San Francisco having the highest per capita rate of pedestrian injury of all counties in the state of California; and

WHEREAS, the San Francisco Department of Public Health (SFDPH) has found that pedestrian and cyclist injuries and deaths are highly concentrated on a subset of city streets, and these streets are disproportionately concentrated in low-income, non-English speaking communities with high densities of seniors, disabled residents, and populations reliant on walking and public transit; and

WHEREAS, seniors are five times more likely to be fatally injured as pedestrians compared to younger adults, and children are more vulnerable to pedestrian injury as they are still developing cognitively and behaviorally; and

WHEREAS, vehicle speeds are highly predictive of injury severity for all road users, with pedestrians five times more likely to die if hit by a vehicle travelling 40 miles per hour compared to 25 miles per hour; and

WHEREAS, the medical costs alone of pedestrian injury at San Francisco General Hospital have been estimated to be an average of \$15 million annually and the total health-related economic costs of annual pedestrian injuries are estimated to be much higher at \$564 million using US Department of Transportation methods; and

WHEREAS, Vision Zero provides a framework by which no loss of life is acceptable in our transportation system, which must be designed to ensure that consequences of individual mistakes should not be death or serious injury; and

WHEREAS, Traffic Safety best practice focuses on the "5 Es" of Engineering, Enforcement, Education, Encouragement, and Evaluation, with SFDPH having a lead role in Education, Encouragement, and Evaluation initiatives citywide and a supportive role in Engineering and Enforcement efforts; and

WHEREAS, the City and County of San Francisco adopted a Pedestrian Strategy in 2013 to reduce severe and fatal pedestrian injuries by 25 percent by 2016 and 50 percent by 2021, which was the product of the work of the Citywide Pedestrian Safety Task Force established by Executive Directive 10-03 issued in December 2010, and SFDPH's Population Health Division's Strategic Plan adopts those same goals for severe and fatal pedestrian injury reductions with the Community Health Improvement Plan similarly supporting injury reductions; and

WHEREAS, the SFDPH has co-chaired the Citywide Pedestrian Safety Task Force since 2011, since expanded to the Citywide Vision Zero Task Force in 2014; and

WHEREAS, the SFPDPH coordinates the San Francisco Safe Routes to School Partnership, comprised of City agencies and community partners to promote safe and active walking and biking to school, and provides mini-grants to community groups in areas disproportionately impacted by traffic injuries and deaths; and

WHEREAS, the SFPDPH collaborates with City agencies and community partners to provide data and research to support data-driven, evidence-based approaches to traffic injury prevention including with TransBASE - an innovative spatial and relational database management system used by the San Francisco Municipal Transportation Agency (SFMTA) to inform data-driven, targeted pedestrian and cyclist safety investments; and

WHEREAS, the SFPDPH is working to develop a comprehensive Transportation-Related Injury Surveillance System linking police, SF General Hospital, emergency dispatch and other records to inform targeted prevention efforts and identify the approximately 20% of pedestrian and cyclist injuries not reported in police records, currently supported through a work order with the SFMTA for an SFPDPH Epidemiologist position;

THEREFORE BE IT RESOLVED, That the San Francisco Health Commission adopts Vision Zero and the goal of zero traffic deaths on San Francisco streets by 2024; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports SFPDPH's continued leadership to help the City achieve this goal through the Citywide Vision Zero Task Force and engineering, enforcement, education, encouragement and evaluation initiatives; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports reducing child pedestrian injuries through the Safe Routes to School Program and the pursuit of additional funding opportunities to support SFPDPH-Community Partnerships; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports SFPDPH efforts to institutionalize TransBASE and its development and application in support of Vision Zero actions, evaluation, and monitoring; and be it

FURTHER RESOLVED, That the San Francisco Health Commission supports SFPDPH efforts to develop and institutionalize a comprehensive Transportation-Related Injury Surveillance System and its application in support of Vision Zero actions, evaluation, and monitoring; and be it

FURTHER RESOLVED, That the San Francisco Health Commission requests that SFPDPH staff report back to the Commission regarding progress and barriers to the achievement of Vision Zero on an annual basis.

I hereby certify that at the San Francisco Health Commission at its meeting of May 6, 2014 adopted the foregoing resolution.

Mark Morewitz
Health Commission Executive Secretary