

Edward A. Chow, M.D.

President

Cecilia Chung

Commissioner

Judith Karshmer, Ph.D., PMHCNS-BC

Commissioner

David Pating, M.D.

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

TEL (415) 554-2666

FAX (415) 554-2665

Web Site: <http://www.sfdph.org>

MINUTES

HEALTH COMMISSION MEETING

Tuesday, September 2, 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 Cecilia Chung
Commissioner Judith Karshmer, Ph.D, PMHCNS-BC
Commissioner David J. Sanchez Jr., Ph.D.
Commissioner David B. Singer
Commissioner Belle Taylor-McGhee (left meeting at 5:15pm)

The meeting was called to order at 4:06 pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF AUGUST 19 2014.

Action Taken: The Health Commission unanimously approved the minutes of the meeting of August 19, 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>

Magnitude 6.0 Earthquake in San Francisco

Many in the San Francisco Bay Area were awoken early Sunday morning by the largest earthquake in the Bay Area since the Loma Prieta earthquake nearly 25 years ago. Thankfully, no damage was reported in San Francisco. This is a good reminder that we need to do what can now, before the next earthquake, because that will make our City's recovery all the more effective. Our thoughts are with the residents and first responders in Napa County and other Northern California cities that reported injuries and damage.

Ebola Update

Health Officer Tomas Aragon and his Population Health Division team have been keeping abreast of the Ebola situation and ensuring that the public and San Francisco clinicians have the information they need. There is no Ebola in San Francisco and the risk of Ebola to the San Francisco general public is extremely low. DPH has been working closely with the California Department of Public Health (CA DPH) and the Centers for Disease Control (CDC) to make available the most up-to-date, comprehensive information on the Health Alerts section of

SFDPH.org. San Francisco is well prepared to respond to any communicable disease outbreak, including Ebola. DPH is taking steps to ensure that clinicians and hospitals citywide are educated and prepared. There has been frequent, regular communication with local hospitals to share information and guidance concerning Ebola. Health advisories are issued as new information is received.

Women in Medicine

I attended the conference on 'Women in Medicine' sponsored by the Committee of interns and residents. I was so impressed with the SFGH residents who attended the conference and their commitment to SFGH and our community members.

NEMS / SFHN Agreement

San Francisco Health Network (SFHN) and North East Medical Services (NEMS) have recently entered into an agreement to form a network partnership, with NEMS offering primary care services and SFHN offering hospital and ancillary services to Medi-Cal patients. This agreement is the first of its kind for SFHN and is a positive step towards retaining our existing Medi-Cal managed care patients as well as expanding our membership population. The target date for enrolling patients into this new NEMS/SFHN network is November 1, 2014. Many thanks to the executive leaders and staff at all campuses who are working to administer this new provider network by the target date.

Warm Line

The City's new telephone Mental Health Triage Warm Line will offer peer counselors 24 hours a day, seven days a week, to people who need someone to talk to right now. The Warm Line, a project of the San Francisco Department of Public Health (SFDPH), is funded by a \$1.2 million grant from the state Mental Health Services Act that supports programs to reduce hospitalizations due to mental illness. The Warm Line is operated by the non-profit Mental Health Association of San Francisco (MHASF), under a SFDPH contract. It augments the City's existing mental health telephone services, which include a 24-hour Suicide Prevention Hotline and an Access Helpline for referrals to mental health services.

Central American Refugee Youth

On August 25, SF Gate featured an article by Drs. Heyman Oo and Clem Donahue, pediatricians in the Department of Pediatrics of SFGH. The piece was about the Central American refugee youth that are arriving in San Francisco and being served by our city, consistent with our history of being a sanctuary for Central American refugees.

Medical Director of Chinatown Public Health Center

We are pleased to announce that Ben Yee-Bun Lui MD, MPH has accepted the permanent position as Medical Director of Chinatown Public Health Center. Dr. Lui was a staff physician and the Associate Medical Director at Asian Health Services, an FQHC in Oakland before coming to the San Francisco Department of Public Health. He also served as Assistant Program Director for PRIME-US at UCSF. In addition to being the Medical Director at Chinatown Public Health Center, Dr. Lui is an Assistant Clinical Professor at Division of General Internal Medicine-SFGH. His interests include team-based care, patient-centered medical home, quality improvement, medical education, health care leadership and management. We are thrilled to have you in this permanent position, Dr. Lui.

Midday Tooth brushing Program

In the 2013-2014 program year, the Maternal, Child and Adolescent Health (MCAH) Child Care Health Program, in collaboration with the UCSF School of Dental Public Health reached out to 42 low-income and state subsidized SF child care sites to implement and support midday tooth brushing programs in the classroom. The goal was to establish a tooth brushing program at each child care site to ensure that children receive at least one daily protective application of fluoride toothpaste to prevent the formation of dental caries. Success was achieved at 36 of the sites.

The Commonwealth Club of California

Dr. Alice Chen, Chief Integration Officer for San Francisco General Hospital, was the moderator for the Commonwealth Club of California program "Reinventing American Health Care." She interviewed Dr. Ezekiel Emanuel about the history and importance of the Affordable Care Act.

Dr. Barry Zevin, Medical Director for the SF Homeless Outreach Team, also moderated the Commonwealth Club of California program recently discussing the impact of the Affordable Care Act on the LGBT community. Thank you Dr. Chen and Dr. Zevin for being voices on important health matters in our State.

New Health Commissioner, Dr. David Pating

I would like to welcome David Pating, MD, Chief of Addiction Medicine at Kaiser Medical Center, San Francisco to the San Francisco Health Commission. Dr. Pating is a psychiatrist specializing in addiction psychiatry. He is regional chair of Addiction Medicine; chair of the Chemical Dependency Quality Improvement Committee and past chair of the Best Practices Committee on Co-Occurring Psychiatric and Substance Use Disorders.

Dr. Pating is an Assistant Clinical Professor at the University of California San Francisco (UCSF) School of Medicine and site-director of the joint UCSF Veteran's Administration Medical Center (VAMC)-Kaiser fellowship in Addiction Medicine. He has consulted to Substance Abuse and Mental Health Services Administration (SAMHSA), San Francisco City & County Dept of Public Health, the Medical Board of California, California's Administrative Offices of the Courts and 9th Circuit Court of Appeals.

Dr. Pating is a past-president of the California Society of Addiction Medicine, a member of the California Medical Association and California Psychiatric Association and an active board member of the California Public Protection and Physician Health, Inc., the California Institute of Mental Health, American Society of Addiction Medicine, and National Quality Forum Behavioral Health Steering Committee.

Currently, Dr. Pating is a Vice-chair of California's Mental Health Services Oversight and Accountability Commission (Proposition 63) and chairs Evaluation Committees. Dr. Pating is also co-chair of the California Coalition for Whole Health. He was sworn in as a Health Commissioner on August 29, 2014.

The Whistleblower Program, operated by the Controller's Office, receives complaints regarding the misuse of City funds, improper activities by City officers and employees, deficiencies in the quality and delivery of government services, and wasteful and inefficient City government practices. There are a number of ways to file a complaint. Go to www.sfcontroller.org and click on the Frequently Requested tab to access the Whistleblower complaint instructions in the drop down menu.

**COMMUNITY HEALTH NETWORK
SAN FRANCISCO GENERAL HOSPITAL & TRAUMA CENTER**

AUGUST 2014

Governing Body Report - Credentialing Summary
(7/17/14 BUSINESS-MEC)

	08/2014	07/2014 to 06/2015
<i>New Appointments</i>	37	48
Reinstatements		
<i>Reappointments</i>	60	107
Delinquencies:		
Reappointment Denials:		
Resigned/Retired:	12	31
<i>Disciplinary Actions</i>		
Administrative Suspension		
<i>Restriction/Limitation-Privileges</i>		
Deceased		
<i>Changes in Privileges</i>		
Voluntary Relinquishments	8	22
Additions	15	21
Proctorship Completed	15	31

Current Statistics – as of 7/7/14		
Active Staff	540	
<i>Courtesy Staff</i>	482	
Affiliated Professionals (non-physicians)	260	
TOTAL MEMBERS	1,282	

<i>Applications in Process</i>	124
Applications Withdrawn Month of August 2014	0
SFGH Reappointments in Process 9/2014 to 11/2014	149

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

AUGUST 2014

Health Commission - Director of Health Report

(August 7, 2014 Medical Exec Committee)

	August	(FY 2014-2015) Year-to-Date
<i>New Appointments</i>	1	3
Reinstatements	1	1
<i>Reappointments</i>	3	5
Delinquencies:	0	0
Reappointment Denials:	0	0
Resigned/Retired:	1	2
<i>Disciplinary Actions</i>	0	0
Administrative Suspension	0	1
<i>Restriction/Limitation-Privileges</i>	0	0
Deceased	0	0
<i>Changes in Privileges</i>		
Additions	0	0
Voluntary Relinquishments	0	0
Proctorship Completed	0	0
Proctorship Extension	0	0

Current Statistics – as of 8/1/2014		
Active Medical Staff	35	
As-Needed Medical Staff	14	
<i>External Consultant Medical Staff</i>	43	
<i>Courtesy Medical Staff</i>	1	
<i>Affiliated Professionals</i>	6	
TOTAL MEMBERS	99	

Applications in Process	3
Applications Withdrawn Month of August 2014	1

Commissioner Comments/Follow-Up:

Commissioner Singer stated that he is inspired by Dr. Chan's work and added that this is another example of the high quality of work being done by the SFDPH staff.

Commissioner Chow asked if information about the new SFDPH Warm Line has been released to providers and the community. Director Garcia stated that many mental health community providers have been notified about the new service and that she will update the Commission in the future about this program.

4) GENERAL PUBLIC COMMENT

Reuben Goodman encouraged the Health Commissioners to participate in the San Francisco Walk to End Alzheimer's on September 20, 2014 at 10am.

Gerry Meehan stated that he is enrolled in Healthy San Francisco and is very concerned about his health care if the program requirements change; he added that he cannot afford insurance through the Affordable Care Act.

5) FINANCE AND PLANNING COMMITTEE

Commissioner Chung, Committee Chair, stated that the Committee heard presentations on revisions to the Health Care Accountability Ordinance, ACA Enrollment Data, and a San Francisco Health Network Managed Care Report. She also stated that the Committee recommended that the full Health Commission approve the September Contracts Report and the new contract with Macro Helix. She added that the Public Health Foundation Enterprises contract was not discussed by the Committee because it is still in negotiation; the contract has been taken off the Consent Calendar and will be considered at the October 7, 2014 Finance and Planning Committee meeting.

6) CONSENT CALENDAR

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

- SEPTEMBER 2014 CONTRACTS REPORT
- REQUEST FOR APPROVAL OF A NEW AGREEMENT IN THE AMOUNT OF \$625,000 WITH MACRO HELIX (A WHOLLY OWNED SUBSIDIARY OF MCKESSON CORPORATION) TO PROVIDE ACCESS TO THE WEB BASED 340B ARCHITECT AND NDC ARCHITECT SOFTWARE SOLUTION TO BE USED BY SAN FRANCISCO GENERAL HOSPITAL AND ITS SATELLITE AND CONTRACTED PHARMACIES FOR THE TERM OF SEPTEMBER 1, 2014 THROUGH AUGUST 31, 2019 (60 MONTHS).

7) HEALTH COMMISSION VICE PRESIDENT ELECTIONS

Edward Chow, MD, Health Commission President, stated that David Pating, MD, was appointed by the Mayor to be the newest Health Commissioner. To enable Commissioner Pating to become more familiar with the Health Commission Vice Presidential candidates, Commissioner Chow suggested that the elections be moved to the October 7, 2014 meeting.

8) HEALTH CARE SERVICES MASTER PLAN CONSISTENCY DETERMINATION APPLICATION REVIEW: HEALTHRIGHT360

Colleen Chawla, Deputy Director of Health and Director of Policy and Planning, reminded the Commissioners that the item was introduced at the August 5, 2014 meeting.

Commissioner Comments/Follow-Up:

Commissioner Karshmer stated that she is pleased that there is a built-in follow-up after a year so the Health Commission can learn from the process.

Commissioner Singer stated that he hopes as the SFDPH builds more effective IT systems, there will be more data for the Commission to review as part of the Consistency Determination process.

Action Taken: The Health Commission Unanimously approved the resolution. (*Attachment A*)

9) PROPOSED CHANGES TO ELIGIBILITY REQUIREMENT FOR HEALTHY SAN FRANCISCO AND IN THE ADMINISTRATION OF THE CITY OPTION:RESOLUTION

Colleen Chawla, Deputy Director of Health and Director of Policy and Planning, gave the presentation and introduced the resolution.

Public Comment:

Deena Lahn, San Francisco Community Clinic Consortium (SFCCC) Vice President of Policy Advocacy, stated that SFCCC supports the proposed changes and added that the over 65-year old population is very important to include. She also stated that San Francisco is not experiencing patients coming to providers after years of not accessing medical services because Healthy San Francisco was in place to provide assistance.

Commissioner Comments/Follow-Up:

Commissioner Chow asked for clarification of the use of Medical Reimbursement Accounts (MRA). Ms. Chawla stated that MRA funds help pay for medical services. Under the City Option, if a San Francisco resident does not have insurance, the funds could be put in a MRA which would be used to pay insurance premiums. Ms. Chawla added that MRA funds are available to employees for the life of the account.

Commissioner Singer asked the estimation for the number of people impacted by the proposed changes to the financial eligibility requirements. Diana Guevara, SFGH Associate Administrator, stated that expectations are that less than 1,000 people will be impacted by the changes.

Commissioner Singer requested that the resolution include estimated costs of the changes to Healthy San Francisco.

Commissioner Taylor-McGhee asked for more information on the proposed affordability program. Ms. Chawla stated that the SFDPH is searching for a consultant to assist with developing this program and foundations to assist with funding. Ms. Chawla added that projected costs of the program are not yet available because it is still in the development stage.

Commissioner Chung stated that affordability is relative and San Francisco is an increasingly expensive city to live; she added that the funds from the MRA will not be enough to cover the necessary cost of insurance for many people.

Commissioner Sanchez lauded the decision to include people 65 years and older.

Commissioner Karshmer thanked Director Garcia and all SFDPH staff involved for listening to public feedback and for proposing necessary changes to Healthy San Francisco. She added that it will be necessary to look at the cost of the proposed changes.

Commissioner Chow requested that the resolution more clearly stated that only seniors who are not eligible for publically subsidized insurance will be eligible for Healthy San Francisco. He also requested that the resolution separate the issues of analysis conducted by SFDPH and the development and presentation of an affordability plan by August 2015.

10) RESOLUTION: SUPPORTING THE AVAILABILITY OF HEALTH CARE SERVICES TO MEET THE NEEDS OF UNACCOMPANIED IMMIGRANT CENTRAL AMERICAN YOUTH

Director Garcia introduced the resolution. Ken Epstein, PhD, LCSW, Director of SFDPH Community Behavioral Health Services, Children, Youth and Families System of Care, stated that the SFDPH has many trauma experts and a uniform home visit protocol is being developed so the youth will not be required to respond to the same questions by different staff.

Commissioner Comments/Follow-Up:

Commissioner Sanchez stated that the resolution is reaffirmation of the City of SF and SFDPH's mission and unique spirit..

Commissioner Chow stated that the Health Commission and the SFDPH welcome all people and the system of care is here for people most in need.

Commissioner Singer suggested that the SFDPH communicate with other cities to let them know the efforts to serve this vulnerable population.

Commissioner Karshmer stated that she is in full support of the resolution.

Action Taken: The Health Commission unanimously approved the resolution. (Attachment B)

11) SFGH INSTITUTIONAL MASTER PLAN:RESOLUTION

Roland Pickens, Director of the San Francisco Health Network, gave the presentation and reminded the Commissioners that a resolution on this topic was introduced at the August 5, 2014 meeting.

Commissioner Comments/Follow-Up:

Commissioner Singer stated that the SFGH JCC reviewed the draft SFGH Institutional Master Plan at the 8/26/14 SFGH JCC meeting and recommends that the full Health Commission vote to approve it.

Commissioner Karshmer asked if the SFGH Institutional Master Plan meets the consistency determination of the Health Care Services Master Plan. Ms. Chawla stated that the Plan is consistent with the Health Care Services Master Plan because the SFDPH provides services to so many underserved people.

Commissioner Chung asked for information regarding the plan to work with the community as the Plan is implemented. Mr. Pickens stated that the SFDPH always works closely with an impacted community when implementing any activity that would impact the local neighborhood.

Action Taken: The Health Commission approved the resolution. (*Attachment C*)

12) SFDPH SEXUAL ORIENTATION GUIDELINES

Maria X. Martinez, Senior Staff to the Director of Health, gave the presentation.

Commissioner Comments/Follow-Up:

Commissioner Chung stated that she appreciates the dynamic process and thorough work put into these guidelines. She added that she is glad to see that the age has been lowered to accommodate the reality of the client population. She also stated that community policy-makers across the country will be looking to San Francisco for guidance around these types of guidelines.

Commissioner Karshmer encouraged thorough outreach and education regarding the SFDPH Sexual Orientation and the Gender guidelines.

Action Taken: The Health Commission approved the SFDPH Sexual Orientation Guidelines.

13) OTHER BUSINESS

Reuben Goodman stated that he would like social workers in mental health clinics be more sensitive to the issues clients face.

14) JOINT CONFERENCE COMMITTEE REPORTS

Commissioner Singer, who chaired the August 26, 2014 SFGH JCC, stated that the Committee heard a SFGH LEAN update, discussed the City hiring process, and the status of hiring the SFDPH Chief Security Officer. In addition, the Committee discussed the draft SFGH Institutional Master Plan. Commissioner Singer stated that in closed session, the Committee approved the Credentials Report and Performance Improvement and Patient Safety Report.

15) COMMITTEE AGENDA SETTING

Commissioner Chung stated that the Finance and Planning Committee will like include planning sessions during the next year to follow-up on the planning efforts at the August 19, 2014 full Health Commission planning meeting.

16) ADJOURNMENT

The meeting was adjourned at 6:02pm.

**HEALTH COMMISSION
RESOLUTION NO. 14-11**

RECOMMENDING THAT HEALTHRIGHT360'S HEALTH CARE SERVICES MASTER PLAN CONSISTENCY DETERMINATION FOR ITS PROPOSED PROJECT AT 1563 MISSION STREET BE CONSIDERED CONSISTENT AND RECOMMENDED FOR INCENTIVES

WHEREAS, San Francisco Ordinance No. 300-10, sponsored by Supervisor David Campos and effective January 2, 2011, required the creation of a Health Care Services Master Plan (HCSMP) intended to identify the current and projected needs for – and locations of – health care services within San Francisco while setting forth recommendations on how to achieve and maintain an appropriate distribution of health care services with a focus on access; and

WHEREAS, The HCSMP, adopted by the Board of Supervisors and enacted December 17, 2013, 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; and

WHEREAS, On June 16, 2014, HealthRight 360 (HR360) submitted a HCSMP Consistency Determination Application for their proposed project at 1563 Mission Street; and

WHEREAS, the San Francisco Planning Department (Planning), after confirming that HR360's proposed project was subject to an HCSMP Consistency Determination, forwarded the Consistency Determination Application to the San Francisco Department of Public Health (SFDPH) for review; and

WHEREAS, SFDPH reviewed the Consistency Determination and determined that HR360's proposed project addresses the following HCSMP recommendations and/or guidelines:

HCSMP Guideline	HR360 Proposed Project at 1563 Mission Street
<p><u>Guideline 3.1.1:</u> Increase the availability and accessibility of primary care in low-income areas, areas with documented high rates of health disparities and/or areas with limited existing health care resources.</p>	<p>HR360 is proposing to relocate and expand its primary care services within its existing service area. The proposed project is anticipated to provide 18,500 medical visits to 7,400 unique patients on an annual basis. The new facility will be located in zip code 94103 and will primarily serve residents from two zip codes, 94103 and 94102. Residents of 94103, where the new facility will be located, and 94102 currently comprise one-third of HR360's current patient population.</p> <p>In 94103, the proportion of individuals living below 200% of the federal poverty level (FPL) is 59% greater than the citywide average and the proportion living below 125% FPL is 75% greater than the citywide</p>

HCSMP Guideline	HR360 Proposed Project at 1563 Mission Street
	<p>average. Similarly, in 94102, the proportion of individuals living below 200% FPL is 103% greater than the citywide average and the proportion living below 125% FPL is 123% greater than the citywide average.</p> <p>Consistent with the high population of low-income individuals, data provided by HR360 show that residents of these zip codes are significantly more likely to participate in cash assistance and food stamp programs. In 94103, the proportion of residents on cash assistance is 85% greater than the citywide average and the proportion with food stamps is 46% greater than the citywide average. Similarly, in 94102, the proportion of residents on cash assistance is 121% greater than the citywide average and the proportion with food stamps is 173% greater than the citywide average.</p> <p>The rate of preventable emergency room visits – a key indicator of access to primary care – is 77% higher in the South of Market neighborhood where HR360 will be located than the citywide rate.</p>
<p><u>Guideline 3.1.2:</u> Increase the availability and accessibility of culturally competent primary care among vulnerable subpopulations including but not limited to Medi-Cal beneficiaries, uninsured residents, limited English speakers, and populations with documented high rates of health disparities.</p>	<p>In 94103, the proportion of residents with public health insurance is 34% greater than the citywide average and the proportion with no health insurance is 44% greater than the citywide average. Similarly, in 94102, the proportion of residents with public health insurance is 69% greater than the citywide average and the proportion with no health insurance is 54% greater than the citywide average.</p> <p>The proportion of the population of foreign born residents and those that speak a language other than</p>

HCSMP Guideline	HR360 Proposed Project at 1563 Mission Street
	English at home are similar in HR360's proposed service area as they are citywide.
<u>Guideline 3.1.5:</u> Increase the availability and accessibility of dental care in low-income areas and areas with documented high rates of health disparities.	HR360 is anticipated to provide 5,400 dental visits to 2,160 unique patients on an annual basis HR360's proposed project will increase dental services in an area with low income populations and vulnerable subpopulations as demonstrated by justification for Guideline 3.1.1.
<u>Guideline 3.1.6:</u> Increase the availability and accessibility of dental care among vulnerable subpopulations.	HR360 is anticipated to provide 5,400 dental visits to 2,160 unique patients on an annual basis HR360's proposed project will increase dental services in an area with vulnerable subpopulations as demonstrated by justification for Guideline 3.1.2
<u>Guideline 3.1.8:</u> Increase the supply of culturally competent providers serving low-income and uninsured populations,	HR360's proposed project will increase culturally competent services to low income and uninsured patients. HR360 has a history of serving a significant proportion of low-income and uninsured patients in the neighborhood of the new facility. Additionally, HR360 offers direct services and/or translation services in a wide array of languages.
<u>Guideline 3.1.10:</u> Promote projects that demonstrate the ability and commitment to deliver and facilitate access to specialty care for underserved populations.	HR360 has demonstrated its ability to deliver and facilitate access to medical care through transportation assistance (50,000 transport stops were provided in past fiscal year). HR360's transportation department is proposing to offer shuttle service for clinic patients to access identified specialty providers or hospitals.
<u>Guideline 3.2.3:</u> Increase the availability of behavioral health and trauma-related services in neighborhoods with documented high rates of violence.	Proposed project will increase behavioral health services in a service area population that has a violent crime rate 400% higher than the citywide rate.
<u>Guideline 3.2.4:</u> Support expansion of	HR360's proposed project will expand on

HCSMP Guideline	HR360 Proposed Project at 1563 Mission Street
<p>community-based behavioral health services.</p>	<p>community behavioral health services in the city by adding 10,000 square feet for substance abuse and mental health services, providing approximately 1,000 individuals with substance use disorder services and 300 individuals with mental health counseling.</p>

WHEREAS, SFDPH staff, upon completing review of HR360’s Consistency Determination Application for 1563 Mission Street, recommended to the Health Commission a finding of “Consistent and Recommended for Incentives”; now

THEREFORE BE IT RESOLVED, That the San Francisco Health Commission commends HR360’s efforts to address the health and wellness needs of San Francisco residents; and be it

FURTHER RESOLVED, That HR360 has demonstrated a long history of providing health and behavioral health services to San Francisco’s most vulnerable populations; and be it

FURTHER RESOLVED, That the San Francisco Health Commission recommends to Planning that HR360’s proposed project be considered Consistent and Recommended for Incentives; and be it

FURTHER RESOLVED, That the San Francisco Health Commission encourages Planning to partner with HR360 to determine what incentives are best suited to the proposed project based on its anticipated health care benefits to the community; and be it

FURTHER RESOLVED, That the Health Commission requests that HR360 report back to the Health Commission one year following the opening of the new facility to report on its progress in meeting the recommendations and guidelines outlined in their application.

I hereby certify that the San Francisco Health Commission at its meeting on September 2nd, 2014 adopted the foregoing resolution.

Mark Morewitz
Health Commission Secretary

**HEALTH COMMISSION
RESOLUTION NO. 14-13**

Supporting the Availability of Health Care Services to Meet the Needs of Unaccompanied Immigrant Central American Youth

WHEREAS, In recent months an unprecedented number of children have fled their home countries in Central America to seek refuge in the United States; and

WHEREAS, Data collected by the Department of Homeland Security (DHS) shows that since October 2013, approximately 47,017 Central American children have fled from their home countries into the United States, which represents a substantial increase from prior years; and

WHEREAS, It is estimated that the number of children entering the United States in fiscal year 2014 will exceed 60,000, with an average of 120-400 children crossing the border each day; and

WHEREAS, From January to July 2014, the Department of Health and Human Services reported that 185 unaccompanied youth were released to relatives and host families in San Francisco, with many more likely arriving without being processed by DHHS; and

WHEREAS, As many as 500 unaccompanied youth may arrive in San Francisco by the end of the year; and

WHEREAS, During their dangerous journey to the United States, many children become victims of trafficking, sexual abuse and violence; and

WHEREAS, The United Nations High Commissioner for Refugees (UNHCR) interviewed more than 400 unaccompanied youth and the youth stated that extreme poverty, unemployment, trauma and the lack of state protection from gang violence and drug-traffickers were the main reasons for fleeing their home countries; and

WHEREAS, Once apprehended by the U.S. Customs and Border Patrol, many of these children have been placed in detention facilities and processing centers where they have been subjected to difficult living conditions; and

WHEREAS, The United States Department of Health and Human Services (HHS) Office of Refugee Resettlement (ORR), the agency responsible for the care and well-being of unaccompanied immigrant children, has identified the need for children to receive culturally competent and trauma-informed medical and social work services for life-skills readiness and to ease their social integration process; additionally, ORR cited the need for legal services to ensure that every child has access to counsel and receives due process; and

WHEREAS, The Obama Administration and DHHS are in communication with major cities, including San Francisco, to identify needed resources to help address this escalating international humanitarian crisis; and

WHEREAS, The San Francisco Bay Area is home to a large and vibrant Central American community and has a longstanding history of supporting the advancement of human rights throughout Central America, evidenced by the important role it played during the Sanctuary Movement of the 1980's when San Francisco provided a safe-haven for Central American refugees fleeing civil conflict; and

WHEREAS, Since the passage of the Sanctuary Ordinance in 1989, San Francisco has held the distinction of being a "Sanctuary City," providing equal access to public services and civil protections and providing

compassionate, culturally appropriate supports and services to the most vulnerable among us, regardless of their immigration status; and

WHEREAS, This year the San Francisco Board of Supervisors unanimously approved a resolution declaring San Francisco's commitment to aiding in the humanitarian relief effort by leveraging city resources toward addressing the needs of unaccompanied immigrant children coming to San Francisco; and

WHEREAS, Given the arduous nature of their journey, unaccompanied immigrant children may have significant health and mental health care needs; and

WHEREAS, The San Francisco Department of Public Health (SFDPH) is the City's health care safety net with a long history of providing linguistically and culturally appropriate services to immigrant youth and families in San Francisco; and

WHEREAS, SFDPH's San Francisco Health Network already provides a complete range of health care services that are available to individuals of all ages, regardless of immigration status, including primary care and specialty care, including mental health services, as well as hospital and emergency services; and

WHEREAS, These services are also available through the Healthy Kids Program, which provides health insurance for low-income children, and through Healthy San Francisco, which provides comprehensive health care for low-income uninsured individuals over age 18; and

WHEREAS, SFDPH is already caring for many of these youth in its pediatric and community-based primary care clinics; and

WHEREAS, One of the most common pathways to mental health services for unaccompanied youth is through the schools and through their primary care providers; and

WHEREAS, SFDPH provides specialized mental health services for children and adolescents both on campus at several public schools in San Francisco and also by referral from primary care clinics, behavioral health clinics through contracted community-based organizations, and through ongoing collaborations with the school district; and

WHEREAS, SFDPH is also working to provide mental health training to community organizations that are working with these youth, as many have been through traumatic events; and

WHEREAS, SFDPH is taking the lead in developing a home visiting template so that interdisciplinary and interdepartmental service providers can utilize some standardized questions to assess risk, trauma, health, wellness and the safety of the home environment; now

THEREFORE BE IT RESOLVED, That the San Francisco Health Commission is committed to assisting in the humanitarian relief effort by supporting the San Francisco Department of Public Health's ongoing efforts to extend critical health care programs and services to unaccompanied immigrant children in San Francisco.

I hereby certify that the San Francisco Health Commission at its meeting on September 2nd, 2014 adopted the foregoing resolution.

Mark Morewitz
Health Commission Secretary

**HEALTH COMMISSION
CITY AND COUNTY OF SAN FRANCISCO
Resolution No. 14-10**

**APPROVING THE SUBMISSION OF AN UPDATED INSTITUTIONAL MASTER PLAN FOR SAN FRANCISCO
GENERAL HOSPITAL AS REQUIRED BY CITY PLANNING CODE SECTION: 304.5.**

WHEREAS, San Francisco General Hospital and Trauma Center, as one of the nation's leading public hospitals, has continuously provided a wide range of ambulatory and acute care services to San Francisco residents for more than one hundred years;

WHEREAS, the rebuild of San Francisco General Hospital will be completed in 2015 and the San Francisco Department of Public Health desires to take the opportunity to plan for the re-use of the existing hospital space that supports greater integration of DPH services;

WHEREAS, greater integration of DPH services can lead to consolidation of space and operational efficiencies resulting in potential budgetary savings;

WHEREAS, City Planning code section 304.5 requires all medical and post-secondary educational institutions in the City and County of San Francisco to file a current Institutional Master Plan ("IMP") with the Planning Department;

WHEREAS, the updated(San Francisco General Hospital Institutional Master Plan provides a broad overview of capital projects that have been completed or are underway on San Francisco General Hospital campus since the 2008 report;

WHEREAS, the updated 2014 San Francisco General Hospital Institutional Master Plan provides a broad overview of the Department of Public Health's general planning intent for the hospital campus in the future;

WHEREAS, the updated 2014 San Francisco General Hospital Institutional Master Plan provides the guidelines for the development of more detailed campus master planning documents;

WHEREAS, the updated 2014 San Francisco General Hospital Institutional Master Plan reaffirms that future development plans for the San Francisco General Hospital campus are consistent with the findings and plans outlined in the 2008 Environmental Impact Report for the Rebuild of San Francisco General Hospital;

NOW, THEREFORE, BE IT RESOLVED, that the updated 2014 San Francisco General Hospital Institutional Master Plan has been endorsed for submission to the San Francisco City Planning Department.

I hereby certify that the San Francisco Health Commission at its meeting of September 2, 2014 adopted the foregoing resolution.

Mark Morewitz
Executive Secretary to the Health Commission