

Edward A. Chow, M.D.
President

David B. Singer
Vice President

Cecilia Chung
Commissioner

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

David Pating, M.D
Commissioner

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

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MINUTES

HEALTH COMMISSION MEETING

Tuesday, July 21, 2015, 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 David B. Singer, Vice President
Commissioner Cecilia Chung Commissioner
Commissioner Judith Karshmer, Ph.D, PMHCNS-BC
Commissioner David Pating, M.D.
Commissioner David J. Sanchez Jr., Ph.D.
Commissioner Belle Taylor-McGhee

The meeting was called to order at 4:14pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF JULY 7, 2015

Action Taken: The Health Commission unanimously approved the minutes of the July 7, 2015 Health Commission meeting.

3) 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>

Mayor Lee Announces Support for Proposal to Strengthen Health Care Security Ordinance to Ensure Continued Health Care Access and Coverage

The commissioners will hear a proposal today to modernize the "City Option" of the Health Care Security Ordinance (HSCO) to ensure that all low and moderate-income San Franciscans have access to health care. The plan will increase the affordability of Covered California plans for many San Franciscans, and maintain the Healthy San Francisco safety net for those who do not have other coverage options. These improvements will help more low-income San Franciscans afford Obamacare health insurance plans, while leaving the safety net in place for those who need it. Mayor Lee announced his support for the proposal on Friday, July 17, noting that it will keep the promise of health reform for all San Franciscans.

Though the ACA mandates coverage for most people, more than 40 percent of Covered California enrollees struggle to pay their health insurance premiums. In a city with a higher than average cost of living, San Franciscans face additional affordability challenges. The proposal would create a mechanism for [eligible San](#)

Franciscans who cannot afford to buy health insurance on the Covered California exchange to qualify for financial assistance to help them bridge the gap and pay for coverage. The funds would come from employer payments into the “City Option” of the Health Care Security Ordinance. The City Option is a health access program administered by the SFDPH and comprises medical reimbursement accounts, which reimburse eligible participants for out-of-pocket health care costs; and Healthy San Francisco, which provides coordinated health care services to the City’s uninsured. Approximately 20 percent of employers complying with the HCSO do so by making payments to the City Option on behalf of some or all of their employees.

This plan builds on the medical reimbursement accounts by adding a “Bridge to Coverage” feature. For San Franciscans who are eligible for Covered California, and whose employers contribute to the City Option, the Bridge to Coverage would provide an individually-tailored benefit of premium and cost-sharing assistance for plans purchased on Covered California. Nearly three-quarters of the 3,000 potential beneficiaries are part-time employees, a group often identified by employers as being expensive and challenging to insure.

The new Employee Wellness Fund would make wellness a priority by offering incentives to City Option employers who invest in the wellness of their employees. SFDPH would begin planning for a new program to reimburse eligible employers for employee wellness programs such as smoking cessation, ergonomic evaluation for injury prevention or discounted gym memberships. Such programs improve employee health, and help employers lower insurance costs, increase productivity and improve retention. If approved, SFDPH will convene a stakeholder process to establish program eligibility and benefit design and anticipates launching this program in 2017.

SFGH to Host 50th Anniversary of Medicare and Medicaid Celebration

This summer, the Centers for Medicare & Medicaid Services (CMS) will recognize ways in which Medicare and Medicaid have transformed the nation’s health care system over the past five decades. As we mark the 50th anniversary of Medicare and Medicaid, we are reminded of the critical role these programs play in protecting the health and well-being of millions of families and improving America’s economic security. These are life changing programs that keep Americans healthy.

To commemorate the anniversary, CMS, Health and Human Services and San Francisco General Hospital and Trauma Center are hosting an event from **10:00-11:30 AM on July 30**, exactly 50 years from the day President Johnson signed the Social Security Amendments of 1965 into law. The event will feature remarks from health care experts about how Medicare and Medicaid continue to build a health care system that is better, smarter, and healthier. Roland Pickens, Director of the San Francisco Health Network, and Interim CEO of SFGH will make introductory remarks and Dr. Edgar Pierluissi, Medical Director of the hospital’s Acute Care for Elders Unit will be a panelist. The keynote speaker will be Dr. Sandra Hernandez, President and CEO of the California HealthCare Foundation and former SFDPH Director. I hope you will be able to join in marking this historic anniversary with David Sayen, CMS Regional Administrator, and Melissa Stafford Jones, HHS Regional Director.

US Conference of Mayors supports Vision Zero

The US Conference of Mayors took place last month here in San Francisco. While here, the mayors passed a resolution in support of Vision Zero, an innovative strategy to eliminate traffic fatalities and severe injuries, while increasing safe, healthy, equitable mobility for all. “San Francisco is proud to lead among U.S. cities committed to Vision Zero, and we are excited to see more cities work toward these important Vision Zero goals,” said Mayor Ed Lee, who also co-sponsored the resolution. “We look forward to collaborating with the growing number of Vision Zero cities to ensure that our cities’ streets are safe for all those who move around. The City and County of San Francisco adopted Vision Zero in 2014 as a policy to eliminate traffic deaths in the city by 2024. The San Francisco Department of Public Health co-chairs the city’s Vision Zero Task Force with SF Municipal Transportation Agency, and leads initiatives focusing on education, community engagement, evaluation and analysis to inform data-driven, evidence-based investments. By working with city agencies, elected officials, community organizations and the public to protect our most vulnerable road users, SFDPH is

helping to create a culture whereby city residents, workers and visitors prioritize traffic safety to ensure mistakes that happen on our streets do not result in serious injuries or death. To learn more about Vision Zero please visit www.visionzerosf.org

Sue Currin retires from SFGH, leaves legacy of quality improvement and fundraising accomplishments. Hospital on sure footing for the future.

Sue Currin, RN, MSN, CEO of San Francisco General Hospital and Trauma Center, announced her retirement after more than 34 years as a nurse, leader and administrator.

Since becoming CEO in May 2009, Ms. Currin has led the hospital through tremendous progress. San Francisco General Hospital's clinical quality is nationally recognized, with standout performances in obstetrics, pediatrics, geriatrics, palliative care, cancer, trauma and HIV/AIDS care. Ms. Currin has overseen many safety initiatives, for example showing accomplishments in the areas of reducing medication errors and sepsis mortality.

During Ms. Currin's tenure and led by San Francisco General Hospital Foundation, there has been an enormous increase in philanthropic gifts to the Foundation, including a record-setting gift by Dr. Priscilla Chan and Mark Zuckerberg and a successful capital campaign that is currently underway. Ms. Currin has been instrumental in guiding the hospital toward its new building, where a healing environment will complement the top-quality care provided by hospital doctors, nurses and other staff. Before becoming CEO, she served as The General's Chief Operating Officer and Chief Nursing Officer.

The General is the hospital and specialty care provider for the San Francisco Health Network, the San Francisco Department of Public Health's integrated health care delivery system. It is the only trauma center in the city, and the only hospital in San Francisco certified as Baby-Friendly by the World Health Organization.

Ms. Currin's retirement is effective July 1, 2015. She plans to spend time with her family and pursue other opportunities to contribute to health care. The San Francisco Department of Public Health will conduct a national search for the new CEO. Meanwhile, Roland Pickens, Director of the San Francisco Health Network, will serve as Interim CEO.

In that capacity Mr. Pickens will work hand-in-hand with the current SFGH leadership to ensure stability during this transition and delivery of ongoing priorities, including the move into the new hospital, the continuation of the lean management system and roll out of a new strategic plan. Mr. Pickens will continue to serve as Director of the San Francisco Health Network, joined by his executive leadership, Dr. Alice Chen, Chief Medical Officer, and Marcellina Ogbu, Deputy Director.

Annual Medical Staff Retreat at Laguna Honda

On Thursday, June 25th, the Medical Staff of Laguna Honda Hospital and Rehabilitation Center attended the Annual Medical Staff Retreat at Fort Mason Center. The morning session began with the annual Medical Staff meeting and elections. Service chiefs gave annual reports – Medicine presented by Dr. Colleen Riley as Dr. Monica Banchemo was on vacation; Outpatient Clinics by Dr. Christina Lee; Psychiatry by Dr. Yifang Qian; and Physical Medicine and Rehabilitation by Dr. Chris Hinnant as Dr. Pascual was on vacation. Dr. Colleen Riley presented the Chief Medical Officer report and the "Year in Review", and medical staff committee chairpersons gave their annual committee reports. The Education Coordinator, Dr. Eric Jamison, gave an annual update on medical education activities.

Medical Staff Officer elections were held with the following officers elected:

- Chief of Staff – Dr. Michael McShane
- Secretary – Dr. Michelle Murphy
- 2nd Member at Large – Dr. Susan Sabai
- 3rd Member at Large – Dr. Firoozeh Parsa Nezhad

- Dr. Wilmie Hathaway will continue as Vice Chief of Staff

Laguna Honda Attends 2015 San Francisco AIDS Walk on July 19

Laguna Honda Hospital and Rehabilitation Center has been participating in the San Francisco AIDS walk for the past 12 years. Every year, 20 residents from the Positive Care unit are transported by bus to actively participate in the walk. Fifteen former residents who have been successfully discharged from Laguna Honda and now reside in Leland House, Peter Claver community and other sites, attend the event as part of the Laguna Honda team on an annual basis. In addition, other residents of Leland House, former hospital staff including the Ombudsman as well as one of the Deputy Sheriffs and his family join the Laguna Honda team at the AIDS walk. The length of the walk is 6.2 miles and begins/ends at Sharon Meadow in Golden Gate Park. Each of the Laguna Honda residents who participates has someone to accompany them. The day is spent in Sharon Meadow listening to music and enjoying a picnic lunch.

DPH Human Resources Hiring

With five lean continuous process improvement events conducted in fiscal year 14 – 15 (July 1, 2014 – June 30, 2015) hiring continues to pick up its pace! Total hires for the year were 1,394, with 745 of those being at SFGH. Our Public Health exams unit (Merit Services) posted 300 recruitments which resulted in the screening of 26,154 applications. The amount of improvement we have seen in DPH human resources is noteworthy for a number of reasons. There has been a collaboration between the CCSF human resources section and the DPH human resources section that is unprecedented. Both groups have worked hard to streamline processes and provide better communication and improved transparency. Many of the improvements they have implemented are now being modeled for implementation in other departments with the CCSF. Internally, the cooperation of our finance staff, nursing administration, and department leadership has also been essential in our continuous improvement. We have come a long way since our August of 2014, lean continuous process improvement value stream mapping workshop which estimated the time between the submission of a request to hire and the date an RN walks into work was about 190 days. We have now shortened that time to the 45 - 60 day range and we continue to make improvements.

Employee Opportunities

Job interest cards tell employees and prospective employees when activity is happening for a particular job class. If employees want to find out when positions or classifications are opening up they can put in a job card. We encourage employees to put in these job interest cards to ensure they do not miss an application period. Supervisors are also asked to fill out the cards for classifications they know their employees are interested in or for those they may have upcoming vacancies in. Temporary and provisional employees put in a job card to notify them of open permanent jobs. Ultimately, it is the responsibility of each individual employee to watch for job announcements and to apply. Job cards are one tool that human resources provides to help employees and prospective employees in monitoring opportunities. Job cards stay active for one year and can be renewed. Human resources actively encourages the use of job cards. For more information, go to the [Employment Opportunities web page](#).

Aspen Institute Health Innovator Fellow

Dr. Alice Chen has been selected as a Fellow of the Inaugural class of the Aspen Institute Health Innovators Fellowship. The goal of the fellowship is to strengthen the leadership of innovators across the U.S. health care ecosystem and to connect, inspire and challenge them to create new approaches that will improve the health and well-being of all Americans. In addition to her role as Chief Medical Officer for the San Francisco Health Network, Alice is also a professor of medicine at the University of California San Francisco. At the San Francisco Health Network, she focuses on creating policies and programs to improve access and quality of health care for vulnerable communities.

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

JULY 2015

Governing Body Report - Credentialing Summary
(7/16/15 BUSINESS-MEC)

	7/2015	07/2015 to 06/2016
<i>New Appointments</i>	35	35
Reinstatements		
<i>Reappointments</i>	51	51
Delinquencies:		
Reappointment Denials:		
Resigned/Retired:	28	28
<i>Disciplinary Actions</i>		
Administrative Suspension		
<i>Restriction/Limitation-Privileges</i>		
Deceased		
<i>Changes in Privileges</i>		
Voluntary Relinquishments	12	12
Additions	15	15
Proctorship Completed	20	20

Current Statistics – as of 7/1/15		
Active Staff	522	
<i>Courtesy Staff</i>	493	
Affiliated Professionals (non-physicians)	269	
TOTAL MEMBERS	1284	

<i>Applications in Process</i>	104
Applications Withdrawn Month of JULY 2015	2
SFGH Reappointments in Process 8/2015 to 10/2015	190

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

JULY 2015

Health Commission - Director of Health Report
(JULY 2, 2015 Medical Exec Committee)

	July	(FY 2015-2016) Year-to-Date
<i>New Appointments</i>	2	2
Reinstatements	0	0
<i>Reappointments</i>	5	5
Delinquencies:	0	0
Reappointment Denials:	0	0
Resigned/Retired:	0	0
<i>Disciplinary Actions</i>	0	0
<i>Restriction/Limitation-Privileges</i>	0	0
Deceased	0	0
<i>Changes in Privileges</i>		
Additions	0	0
Voluntary Relinquishments	0	0
Proctorship Completed	1	1
Proctorship Extension	0	0

Current Statistics – as of 6/30/2015	
Active Medical Staff	36
As-Needed Medical Staff	13
<i>External Consultant Medical Staff</i>	42
<i>Courtesy Medical Staff</i>	1
<i>Affiliated Professionals</i>	9
TOTAL MEMBERS	101

Applications in Process	7
Applications Withdrawn this month	0

4) GENERAL PUBLIC COMMENT

There was no general public comment.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE

Commissioner Pating, stated that as new Committee Chair, he has requested that presenters to the Committee indicate how their program fits into overall SFDPH goals. He also stated that the Committee discussed a presentation on Food Security in San Francisco. He added that approximately one fourth of the people living below 200% of the federal poverty level in San Francisco are at risk for food insecurity. The Committee requested that the presenter return in early 2016 to provide updates. He also stated that the Committee discussed a presentation on SFDPH implementation of Culturally and Linguistically Appropriate Services (CLAS). He added that the Committee discussed a presentation on TB Elimination. He noted that TB Control activities have reduced the number of TB cases from 334 in 1990 to 114 in 2014.

Commissioner Comments/ Follow-Up:

Commissioner Chow asked if the Committee heard SFDPH plans for continued reduction in TB cases. Commissioner Pating stated that new residents with TB continue to move to San Francisco. He also stated that The Affordable Care Act requires co-pays for TB screening which may be cost-prohibitive to many lower-income people. He added that work to change the federal policy may eventually impact the number of cases in San Francisco. Director Garcia stated that she will work with staff to develop an action plan with a goal of further reducing TB cases in San Francisco.

Commissioner Chung stated that HIV, Hepatitis B and Hepatitis C have successful community models that may be useful when looking at further reductions in TB cases.

6) LHH GIFT FUND EXPENDITURE BUDGET FY2015-2016

ChiaYu Ma, LHH Deputy Finance Officer, reviewed the item.

Commissioner Comments/ Follow-Up:

Commissioner Karshmer, Chair of the LHH JCC, stated that the Gift Fund provides for wonderful items and activities for the LHH residents.

Commissioner Chung asked for clarification regarding the increase in the Dementia Care program budget; she noted that very little was spent in the item during the past year. Ms. Ma stated that this was a new line item in last year's Gift Fund budget; the program has been strengthened. Mivic Hirose, LHH Executive Administrator, stated that the program was initially only in 3 LHH resident neighborhoods but has since been expanded.

Commissioner Sanchez stated that the LHH Gift Fund has expanded the activities it provides to support the residents of LHH. He also stated that current and past LHH staff and residents' families continue to contribute to the fund.

Commissioner Chow asked for clarification on the current total amount in the LHH Gift Fund. Ms. Ma stated that the fund has approximately \$2.8M; she reminded the Health Commission that it recently approved selling of the stock which makes up approximately \$700,000 of the Fund's total. She also stated that the fund had two sizable donations in the past two years.

Action Taken: The Health Commission unanimously approved the LHH Gift Fund Expenditure Budget FY2015-16.

7) SFDPH POLICY ON NAMING SFDPH FACILITIES

Colleen Chawla, Deputy Director of Health and Director of Policy and Planning, reviewed the draft policy. She reminded the Health Commission that it will vote on this item at its August 4, 2015 meeting.

Commissioner Comments/Follow-Up:

Commissioner Karshmer asked if this is a change to the current policy. Ms. Chawla stated that there is no existing policy in place for naming/renaming SFDPH facilities.

Commissioner Sanchez asked whether the policy, when approved, would impact the status of current naming processes at the new SFGH hospital building. Ms. Chawla stated that if approved, the new policy would not impact the current SFGH naming processes.

Commissioner Sanchez asked if the new policy would impact the future UCSF research building since it is on the SFGH campus. Director Garcia stated that the SFDPH will consult with the City Attorney on this question.

8) RESOLUTION IN SUPPORT OF NAMING THE GENERAL MEDICINE CLINIC AT SAN FRANCISCO GENERAL HOSPITAL THE RICHARD H. FINE PEOPLE'S CLINIC

Roland Pickens, Director of the San Francisco Health Network and Dr. Dean Schlinger, UCSF School of Medicine, gave the presentation. Mr. Morewitz reminded the Health Commission that it will vote on this item at its August 4, 2015 meeting.

Commissioner Comments/Follow-Up:

Commissioner Chow asked why the naming request included the term "People's." Dr. Schlinger stated that Dr. Fine had always envisioned the clinic as the people's clinic and medical home. He noted that many of the patients who are seen at the clinic are some of the City's most challenging and complex cases.

9) SFDPH PROPOSAL TO MODERNIZE THE HEALTH CARE SECURITY ORDINANCE'S CITY OPTION & CREATE A NEW EMPLOYEE WELLNESS FUND

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

Public Comment:

Stephanie Fisher, CCSF Health Service System, stated that if employees can form healthy habits at work, they will have impact approximately 50% of their behavior. Employee wellness programs increase job performance, productivity, and can have significant benefits to the employer.

David Serrano Sewell, Hospital Council of Northern and Central CA, stated that the Hospital Council is in support of the resolution to modernize the City Option.

Abbie Yant, Dignity Health St. Francis Memorial Hospital, stated that Dignity Health is in support of the resolution. She added that there has been much creativity and research put into the proposal.

Emily Webb, Sutter Health/CPMC, stated that Sutter Health supports the resolution and modernization effort; she added that Sutter Health will continue to work with the SFDPH and its community partners to make the modernization effort a success.

Rose Auguste, Health Access California, stated that her organization is in support of the resolution. She added that insurance premium assistance should be available to non-residents of San Francisco who work in San Francisco.

Deena Lahn, San Francisco Community Clinic Consortium (SFCCC), stated that her organization is in support of the resolution. She noted that SFCCC serves approximately 10% of the San Francisco population, most of whom are low-income. Many of SFCCC's clients want Covered California or a Bronze plan but cannot afford it.

Commissioner Comments/Follow-Up:

Commissioner Taylor-McGhee stated that American citizens who are enrolled in Healthy San Francisco will still be subject to federal fines due to not having insurance coverage. She asked the estimated number of new enrollees in Healthy San Francisco if the modernization proposal is approved. Ms. Chawla stated that in the beginning of 2014, there were 4,000 individuals who would be eligible for Covered California health insurance; this number has decreased to approximately 1,700. She added that it is projected that this number will likely decrease to 1,200 in 2016. She also stated that the federal penalty for not being enrolled in health insurance will reach its maximum of 2.5% in 2016. Therefore, individuals will likely not realize the full impact of the penalty on their finances until 2017 when preparing their tax return.

Commissioner Taylor-McGhee asked how employers are reacting to the SFDPH proposal to modernize the City Option. Ms. Chalwa stated that the SFDPH met with employers and labor union representatives. The employers that spoke to the SFDPH thought the changes were acceptable. She noted that she will be making a presentation to the Small Business Commission on July 27, 2015.

Commissioner Singer recommended that analysis regarding the City economic cycles be used in presentations in which the Health Commission is asked to consider supporting a program that would require a long-term commitment to funding a new effort. He requested that projections for varying economic scenarios be included in the next presentation of this item.

Commissioner Singer asked why the SFDPH is not utilizing this opportunity to route more people to enroll in the San Francisco Health Network (SFHN). Ms. Chawla stated that SFDPH did explore this concept but it requires that SFHN have a contract with Covered California; there is currently no pathway for someone enrolled in Covered California to choose SFHN as its preferred provider. She noted that a contract would require that Covered California allow a different price option for a group of approximately 3,000 people in San Francisco than anywhere else in the State; she noted this is not a possible option.

Commissioner Singer asked what types of employers would be targeted for the Wellness Program. Ms. Chawla stated that the Wellness Program would be targeted for employees of businesses that contribute to the City Option of the Health Care Security Ordinance.

Commissioner Singer stated that the Wellness proposal is a different topic than the modernization of the City Option. Ms. Chawla stated that the Wellness Program is a separate proposal than the modernization of the City Option but they are bridged together due to their alignment with ACA, which had investments in employer-based employee wellness programs.

Commissioner Chow asked how the SFDPH proposes to fund the Wellness program. Ms. Chawla stated that the SFDPH proposes that the program be an initiative of the SFDPH General Fund budget.

Commissioner Sanchez stated that he would like to see the City Option expanded to enable people who work in San Francisco eligible regardless of whether they live in San Francisco; he noted that many people employed in San Francisco can no longer afford to live in the City.

Commissioner Pating suggested that a financial stress test analysis be conducted for the modernization of the City Option.

Commissioner Karshmer stated that wellness programs can be integral to prevention and maintaining health.

Commissioner Chow stated that he would like a deeper understanding of the business-owner's thoughts on a wellness program.

Commissioner Chung asked if all employees working in San Francisco would be able to participate in wellness program activities. Ms. Chawla stated that the Wellness Program is intended for employees of businesses that contribute to the City Option. She added that the SFDPH hopes to utilize San Francisco Community Health Improvement Plan data to design the program, which will include outcomes and tracking measures.

Commissioner Chung asked if San Francisco residency will be required for participating in the Wellness Program. Ms. Chawla stated that details of the Wellness Program still need to be worked out. Director Garcia stated that the SFDPH currently provides wellness programs and activities. The proposed Wellness Program concept is an attempt to support the employees of those businesses that contribute to the City Option.

Commissioner suggested that the Wellness Program further developed before being brought to the Health Commission for its approval.

Commissioner Chow suggested that the draft resolution language be revised to indicate that the SFDPH will explore a Wellness Program model for consideration by the Health Commission.

Commissioner Pating stated his support for a Wellness Program to be included in the resolution. He added that part of the wellness activities could include targeting employees of these small business for issues such as obesity or tobacco use reduction that align with other SFDPH initiatives.

Commissioner Singer stated that he is unsure if small businesses with a handful of employees will participate in wellness activities. He noted that the Rand Corporation study noted in the memo for this item was focused on large corporations, not small businesses.

Commissioner Chung stated that she prefers that wellness activities be available to any employee of businesses contributing to the City Option regardless of their San Francisco residency. She added that health equity is a Health Commission priority.

10) OTHER BUSINESS:

Commissioner Chow reminded the Health Commissioners that the next planning session is scheduled for October 6, 2015.

11) JOINT CONFERENCE COMMITTEE REPORTS

Commissioner Karshmer, Chair of the LHH JCC, stated that at is July 14, 2015 meeting, the Committee reviewed and discussed the Administrator's Report and Meaningful Use Planning and Implementation 2015 Update, and a impactful presentation on the LHH Positive Care Program. The Committee also approved hospital-wide policies and procedures.

Commissioner Karshmer, a member of the IHHS Governing Body, stated that the group is in the process of establishing non-profit status for itself in an effort to seek grant funds in the future.

12) COMMITTEE AGENDA SETTING

This item was not discussed.

13) CLOSED SESSION

- A) Public comments on all matters pertaining to the closed session
- B) Vote on whether to hold a closed session (San Francisco Administrative Code Section 67.11)
- C) Closed session pursuant to Evidence Code Sections 1157(a) and (b); 1157.7; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1

PERSONNEL EVALUATION: MARK MOREWITZ, HEALTH COMMISSION EXECUTIVE SECRETARY

PERSONNEL EVALUATION: BARBARA GARCIA, DIRECTOR OF HEALTH

- D) Reconvene in Open Session
 - 1. Possible report on action taken in closed session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
 - 2. Vote to elect whether to disclose any or all discussions held in closed session (*San Francisco Administrative Code Section 67.12(a).*)

Action Taken: The Committee voted not to disclose discussions held in closed session.

14) ADJOURNMENT

The meeting was adjourned at 6:43pm.