

Edward A. Chow, M.D.
President

David B. Singer
Vice President

Cecilia Chung
Commissioner

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

James Loyce, Jr., M.S.
Commissioner

David Pating, M.D.
Commissioner

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

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

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



Barbara A. Garcia, M.P.A.
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**MINUTES
HEALTH COMMISSION MEETING
Tuesday, September 20, 2016, 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 David Pating, M.D.
Commissioner David J. Sanchez Jr., Ph.D.
Commissioner David B. Singer, Vice President

Excused: Commissioner Judith Karshmer, Ph.D, PMHCNS-BC
Commissioner James Loyce, Jr., M.S.

The meeting was called to order at 4:07pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF SEPTEMBER 6, 2016

Commissioner Comments:

Commissioner Pating stated that page 5, paragraph one, question #2 of the minutes should indicate that he asked for information regarding the availability of mental health day treatment and/or day hospital programs.

Action Taken: The minutes were unanimously approved with the revision noted above.

3) DIRECTORS 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>

Mayor Ed Lee Announces Newest Navigation Center to open on Central Waterfront

The Dogpatch Neighborhood Association has voted overwhelmingly to support the plan for a third temporary Navigation Center at the end of 25th Street on San Francisco Port property. The newest Navigation Center is expected to open in February 2017 and will provide shelter and support services for up to 70 homeless people at a time. The DPH will continue to provide support services to these and the other Navigation Centers' clients.

Navigation Centers are a temporary, low-threshold shelter model that provides on-site essential services and works toward permanent housing for the most vulnerable homeless San Franciscans. Navigation Centers have been nationally recognized as a best practice in addressing street homelessness by the National Alliance to End Homelessness and the Obama Administration's Interagency Council on Homelessness.

DPH Leadership Team participates in Lean Education Series

There has been much work done across the DPH to improve workflows and efficiencies using Lean principles. On Thursday, September 8, 2016, Executives from throughout the DPH gathered at Laguna Honda for the first in a series of Lean trainings led by Rona Consulting to provide our leaders with the necessary concepts and tools to transform our organization into the world-class patient- and family-centered system of care we envision. The trainings, called "Transforming Healthcare" are adopted from work done by the Toyota Management system as applied to healthcare. Participants were required to read a series of books including "The Toyota Way: 14 Management Principles from the World's Greatest Manufacturer" by Jeffrey Liker, "The Toyota Way to Healthcare Excellence" by John Black and "Toyota Production System—Beyond Large-Scale Production" by Taiichi Ohno. Leaders will meet for an additional four training sessions.

Behavioral Health and Mental Health Services hold Vocational Summit

Behavioral Health Services (BHS) and the Mental Health Services Act (MHSA) department held their first annual Vocational Summit at the San Francisco Public Library on August 31, 2016. The primary objectives of the summit were to provide education and information regarding the vast array of vocational and employment programs in San Francisco, and to acknowledge the outstanding work of staff from 42 programs. One of the programs highlighted was the San Francisco Vocational CO-OP which is a collaborative effort between Behavioral Health Services and the California Department of Rehabilitation. The CO-OP provides comprehensive vocational services, including career assessment, on-the-job training, job placement, and job retention supportive services to San Francisco residents with primary mental health diagnoses.

The Vocational Summit included inspirational speeches from client graduates of the CO-OP highlighting how their employment has positively impacted their own wellness and recovery. The CO-OP programs presented their menu of employment and training services available to the community. The CO-OP providers include Richmond Area Multi-Services, UCSF Citywide, Caminar, Positive Resource Center, Toolworks, and the Occupational Therapy Training Program. The summit also included outreach efforts from the city's Department of Human Resources' Access to City Employment for People with Disabilities program (ACE). This project works in collaboration with Department of Rehabilitation and Behavioral Health Services to increase access into the city's workforce for people with disabilities. We want to thank all of the community members, providers and clients who worked together to make this event such a huge success.

Addressing Health Disparities among African-Americans and Latinos in San Francisco

San Francisco faces some of the greatest income inequality in the nation. In addition, residents also face a host of other disparities, which are particularly visible in health indicators among San Franciscans. According to the most recent [2016 San Francisco Community Health Needs Assessment](#), put together by the San Francisco Health Improvement Partnership (SFHIP), on average, Black/ African-American residents live 10 years less than Whites, 14 years less than Asian and Pacific Islanders, and 11 years less than Latinos. The report further notes that Black/African-American residents face the greatest social, economic, and environmental hardships and consequently have the highest rates of acute and chronic disease, injury, and disability. These disparities are especially apparent when it comes to heart health: [data](#) show that higher rates of cardiovascular disease and hospitalizations due to heart disease are concentrated in areas of San Francisco that have higher concentrations of residents living in poverty and who identify as Black or African-American.

To address some of these disparities, the Centers for Disease Control has been awarding [REACH](#) (Racial and Ethnic Approaches to Health) grants to organizations across the country to implement initiatives to counteract these disparities. The San Francisco Department of Public Health was awarded a grant in 2014 and started its

Green Prescriptions program as a result. The program aims to provide physical activity prescriptions to patients in clinics across the City and link them to free physical activity opportunities. Take a look at the video to see how the program works and the impact it's having on our community.

Link to video: <https://www.youtube.com/watch?v=aZljTSfc2lk>

DPH Report Shows Decline in HIV Infections while Disparities Persist

A new report from DPH's Applied Research, Community Health Equity and Promotion division shows new HIV infections in San Francisco are continuing to decline and people with HIV are getting linked to care more quickly, but significant disparities persist that must be overcome in order to end the epidemic and "get to zero." New HIV diagnoses in San Francisco declined 17 percent and overall, 93 percent of the 17,198 people living with HIV are aware of their infection and are being linked to care more quickly and showing improved outcomes. The amount of time between HIV diagnosis and suppression of the virus has dropped from 11 months in 2009 to three months in 2014. Deaths among people with HIV have continued to decline since 2013, but disparities still exist. African American men in San Francisco have the highest HIV infection rate, at 140 per 100,000 population, compared to a rate of 52 among white men. African American women have the highest HIV infection rate among all women, at 31 per 100,000. Other groups experiencing disparities are Latinos, youth and transgender women.

San Francisco launched its "Getting to Zero" initiative in October 2015, pledging to become the first city to reach zero new HIV infections, deaths from HIV/AIDS and stigma. The City included \$3.1 million in new funding in this year's budget for Getting to Zero. This year's investment is focused largely on reducing disparities and includes programs to make prevention more accessible to Latino and African American men who have sex with men, transgender women and youth; community-based work to combat stigma, which may be a factor in seeking health services; intensive case management; addressing the needs of an aging population living with HIV and other programs. This is in addition to several ongoing efforts already underway to reduce disparities. SFDPH's current campaign, "Our Sexual Revolution," supported by the Centers for Disease Control and Prevention, seeks to increase the use of PrEP (pre-exposure prophylaxis) in the African American, Latino and transgender communities.

A link to the 2015-2016 report can be found here:

<https://www.sfdph.org/dph/files/reports/RptsHIVAIDS/AnnualReport2015-20160831.pdf>

Electronic Health Record Update

The DPH-APeX team is nearing a go/no-go decision on using UCSF's Epic Electronic Health Record, and parallel contingency plans are still underway in case we have a no-go decision. Presentations continue to be given to staff throughout the organization highlighting the benefits and clarifying the goals of the project and offering an opportunity for questions and concerns.

Security Update

A series of security briefings and trainings has begun at ZSFG Management Forum and Staff Forum meetings. Recent topics have included Active Shooter Trainings, and the new Mass Notification System, which will alert staff on their mobile devices in the case of an emergency. Basil Price, Director of Security, can be contacted to set up trainings at sites throughout the DPH, and can be reached at 415-206-2577.

FACES for the Future Program resumes at the Department of Public Health

FACES stands for "Facilitating Academic Careers in Engineering and Science." This past spring, we had the opportunity to host FACES students from San Francisco's John O'Connell High School. Students were placed in many different areas of the department including Social Services, Psychiatry, Nursing, Nutrition, Radiology, Environmental Health, and Community Health, Equity and Promotion. We now have the privilege to continue our partnership with the FACES program and we are currently seeking internship placements for Fall and

Spring sessions. Here's a link to a video showing students sharing their FACES internship experiences with SFDPH: https://www.youtube.com/watch?v=8QpK6_q6sY&feature=youtu.be

Leslie Dubbin Selected for New National Leadership Program to Build Culture of Health

The Robert Wood Johnson Foundation has named Leslie Dubbin, PhD, MS, RN, as a fellow in their first class of Interdisciplinary Research Leaders at the University of Minnesota. This is a new fellowship and is unusual in that it was awarded to a team of three: 2 researchers and a community partner. Dr. Leslie Dubbin, San Francisco Health Network's Chief Program Integration Officer for Ambulatory Care, and Dr. Irene Yen, an epidemiologist at UCSF are the researchers and their community partner is Susan Neufeld of San Francisco's BRIDGE Housing Corporation. Their research focuses on the social and health impacts of public housing renovation in San Francisco and will investigate how the Rental Assistance Demonstration (RAD) policy implementation in San Francisco affects people living in public housing as private developers renovate deteriorating public housing structures. During their fellowship, they will join researchers and community leaders from across the country to collaborate and innovate to solve these and other persistent challenges and advance a culture of health. Please join us in congratulating Leslie Dubbin on her selection for this important fellowship.

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

September 2016

Governing Body Report - Credentialing Summary
(9/6/16 MEC)

	9/2016	07/2016 to 07/2017
<i>New Appointments</i>	23	115
Reinstatements		
<i>Reappointments</i>	49	177
Delinquencies:		
Reappointment Denials:		
Resigned/Retired:	21	98
<i>Disciplinary Actions</i>		
Administrative Suspension		
<i>Restriction/Limitation-Privileges</i>		
Deceased		
<i>Changes in Privileges</i>		
Voluntary Relinquishments	6	27
Additions	16	35
Proctorship Completed	20	59

<i>Current Statistics – as of 9/2/16</i>		
Active Staff	558	
<i>Courtesy Staff</i>	510	
Affiliated Professionals (non-physicians)	254	
TOTAL MEMBERS	1,322	

<i>Applications in Process</i>	51
Applications Withdrawn Month of September 2016	1
SFGH Reappointments in Process 10/2016 to 12/2016	107

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

SEPTEMBER 2016

Health Commission - Director of Health Report
(September 1, 2016 Medical Exec Committee)

	September	(FY 2016-2017) Year-to-Date
<i>New Appointments</i>	0	1
Reinstatements	0	0
<i>Reappointments</i>	8	14
Delinquencies:	0	0
Reappointment Denials:	0	0
Resigned/Retired	2	6
<i>Disciplinary Actions</i>	0	0
<i>Administrative Suspension</i> <i>(for month of August)</i>	1	5
<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	1
Proctorship Extension	0	0

<i>Current Statistics – as of 9/1/2016</i>		
Active Medical Staff	36	
As-Needed Medical Staff	9	
<i>External Consultant Medical Staff</i>	45	
<i>Courtesy Medical Staff</i>	2	
<i>Affiliated Professionals</i>	14	
TOTAL MEMBERS	106	

<i>Applications in Process</i>	8
<i>Applications Withdrawn this month</i>	0

Public Comment:

Michael Petrelis stated that he is happy the data shows that the number of HIV cases in San Francisco have decreased. He added that what is missing is a congratulations to those gay men over 50 who helped create effective community models to help bring down infection rates. He also stated that Act Up and Queer Nation were effective advocacy groups.

Commissioner Comments:

Commissioner Singer asked for an update on the negotiation process for the integrated electronic health record. Director Garcia stated that the SFPDPH has worked with UCSF to develop an RFP to structure the finances and administration for the project. She added that the SFPDPH is making all efforts to alleviate duplication in the two bureaucracies. She also stated that she expects to have a cost estimate for the project in a few weeks. Greg Wagner, SFPDPH CFO, stated that UCSF has submitted its initial proposal and the SFPDPH is reviewing it and will ask for clarifications. On 10/15/2016, UCSF will submit a revised proposal. He also stated that January 15, 2017 is the ambitious target date to begin formal contract negotiations with UCSF.

Commissioner Singer asked for guidance on how the Health Commission should interact with this phase of the process. Mr. Wagner stated that the SFPDPH is currently focusing its review to ascertain if there are issues that would be prohibitive in addition to ensuring UCSF can accommodate all the SFPDPH's needs in their existing system. Costs associated with alterations will be brought to the Health Commission in in the next update.

4) GENERAL PUBLIC COMMENT

Michael Petrelis requested that Director Garcia declare a state of emergency in regard to the pigeon feces at the 16th Street BART station; this declaration would greatly assist in the coordination of the multi-agency effort to clean and monitor the station and the accompanying plazas. He noted that in addition to the SFPDPH, the MTA, PG&E, Clear Chanel, Public Works, BART, and JC Decaux are all involved in the maintenance and monitoring of the site. He also stated that a permanent drop-box for used syringes and needles is needed at the plaza.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE

Commissioner Pating, Chair, stated that the Committee discussed two presentations. The first was an update on the Community Health Equity and Promotion activities in the Tenderloin. The presentation focused on collective impact work to increase Hepatitis C testing, the Black African American Health Initiative, increased venue-based STD testing, and efforts to increase enrollment of new refugees and people seeking asylum, into health insurance. The second presentation focused on public health activities related to climate change in San Francisco. Data was shared indicating that the sea level will rise substantially by 2100. The presentation also included data on health issues that may be impacted by climate changes. He added that San Francisco is only one of two U.S. cities that received funding to help plan for climate change.

Commissioner Comments:

Commissioner Chow asked if the SFPDPH Community Health Equity and Promotion (CHEP) activities include the San Francisco Health Network. Director Garcia stated that one of the goals is to ensure there is coordination between the San Francisco Health Network and Population Health Division; this includes CHEP.

6) HEALTH IMPACT ASSESSMENT: SINGLE ROOM OCCUPANCY HOTELS IN SAN FRANCISCO/RESOLUTION

Cyndy Comerford, SFPDPH Office of Policy and Planning, presented the item.

Public Comment:

Michael Petrelis thanked the SFPDPH for the report and stated that many people hanging out at the 16th Street BART plaza live in near-by SROs. He added that the conditions of the plaza are making these residents sick. He also asked why the statement, "Deaths from drug overdoses are high and increasing," has been taken out of the draft resolution.

Commissioner Comments:

Commissioner Pating thanked Ms. Comerford for the presentation and asked who would conduct the training and develop the manual. Ms. Comerford stated that SFDPH will take the lead on developing the manual and conducting training. Regarding the other recommendations, the SFDPH will work in conjunction with the Mayor's Office and community partners.

Commissioner Pating asked if connections between City Departments and community partners are already established. Ms. Comerford stated that the intention and collaborative spirit is in place.

Commissioner Singer stated that the report and resolution are very important and noted that the recommendations seem practical. He asked what the consequences might be if the resolution is not approved and changes made. Ms. Comerford stated that the recommendations help bring together all relevant parties to make necessary improvements. She added that there is hope that conducting trainings for SRO operators will hopefully reduce the need for enforcement tools like levying fines or suspending business permits. She noted that is difficult and often impractical to suspend business licenses of SROs because there is no available space to move tenants into.

Commissioner Chung noted that the earlier draft of the resolution included health issues but the current version does not. Ms. Comerford stated that the revisions focus on addressing causes instead of symptoms. The intention is to mitigate the causes to prevent symptoms from impacting tenants.

Commissioner Chung asked how the impact of these activities can be measured if symptoms are not included. Ms. Comerford stated that the SFDPH hopes to develop measurable metrics that will link to specific health outcomes. She noted that during the August 2, 2016 presentation to the Health Commission on the report, a slide was shown linking policies to primary, secondary, and tertiary health outcomes.

In response from requests from the Health Commission, Director Garcia suggested that the 9th "Whereas" statement in the draft resolution be revised to include the following statement, "Deaths from drug overdose remain high and substance use disorder is a continued health issue.

Commissioner Pating stated that the operator trainings could be promoted to positively impact the hotel residents and make their businesses run more smoothly.

Commissioner Singer stated that some of the most successful programs have combined effective paradigms with economic incentives. Commissioner Pating added that it may be helpful to find business partners (e.g. technology businesses) to assist with the economic incentives.

Commissioner Sanchez stated that this project will involve several City agencies and community partners, all of which may have distinct benchmarks and timelines. As the effort moves forward, he encourages input from minority communities to assist in the development of the training, materials, and evaluation.

7) HIV EPIDEMIOLOGY ANNUAL REPORT 2015 AND STRATEGIES TO ADDRESS DISPARITIES

Susan Scheer, PhD MPH, Director HIV Epidemiology Section ARCHES Branch, and Hyman Scott, MD MPH, Medical Director, Clinical Research Bridge HIV, gave the presentation.

Commissioner Comments:

Commissioner Singer asked how the SFDPH can discern when someone has died of HIV-related issues. Dr. Scheer stated that the National Death Index lists the cause of death.

Commissioner Pating asked if someone with HIV died in a car accident, would the National Death Index list the death as HIV-related. Dr. Scheer stated that this type of death would not be listed as HIV-related.

Commissioner Chung noted that the slide entitled, "Disparities and Health Inequities: New HIV Diagnoses," shows that rates of new HIV diagnoses for African American dropped in 2014. Dr. Scheer stated that the sample size of the population is very low, approximately 25 people, so this can account for any of the dramatic changes in the data year-to-year.

Commissioner Singer asked if the data includes people incarcerated in the San Francisco jail system. Dr. Scheer stated that someone diagnosed in a San Francisco jail is considered a resident.

Commissioner Singer asked if the data substantially changes if the incarcerated population is taken out. Dr. Scheer stated that this analysis had not done.

Commissioner Chow asked what message should the Health Commissioners receive from the slide titled, "Disparities and Health Inequities: New HIV Diagnoses," that shows the groups most likely to be diagnosed are those aged 25-39 years old. Dr. Scheer stated that prevention efforts should target this group.

Commissioner Chung asked for more information on the homeless HIV population. Dr. Scheer stated that this population is usually younger, male, people of color, and a lower proportion of men-who-have-sex-with men. She added that the SFPDH and "Getting to Zero" initiative are working to target this population.

Commissioner Chow noted that the Asian/Pacific Islander population has a higher rate of late diagnosis but also higher rates of long-term survival.

Commissioner Chow asked if the "Getting to Zero" initiative is linking patients to San Francisco Health Network clinics. Dr. Scott stated that the initiative is connecting patients to primary care homes, including those within the San Francisco Health Network.

Commissioner Chow asked if there is an effort to monitor other STDs. Dr. Scott stated that there is a standardized protocol that includes quarterly STD testing for people on pre-exposure prophylaxis (PrEP).

Commissioner Pating stated that as there are fewer incident cases, it may be more difficult to use the community impact model; a vector approach may be necessary. Dr. Scott stated that the SFPDH is enhancing its partner notification services and education about PrEP and post-exposure prophylaxis (PEP). Director Garcia stated that there is also focus on ensuring people have medical homes they access.

Commissioner Chung asked if there have been recent cases of HIV transmission between mother and child, "vertical transmissions." Dr. Scheer stated that there have not been any such cases in San Francisco for over ten years.

8) UPDATE ON PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE

This item was deferred due to loss of quorum of the Health Commission.

9) OTHER BUSINESS:

This item was not discussed due to loss of quorum of the Health Commission.

10) JOINT CONFERENCE COMMITTEE REPORTS

This item was not discussed due to loss of quorum of the Health Commission.

11) COMMITTEE AGENDA SETTING

This item was not discussed due to loss of quorum of the Health Commission.

12) ADJOURNMENT

The meeting was adjourned at 6:27pm.