MINUTES
JOINT MEETING OF THE HEALTH COMMISSION AND PLANNING COMMISSION
Tuesday, December 3, 2015, 10:00 a.m.
City Hall, 1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

1) CALL TO ORDER
Health Commissioners Present:
Commissioner Edward A. Chow M.D. President
Commissioner David B. Singer, Vice President
Commissioner Judith Karshmer, Ph.D., PMHCNS-BC
Commissioner David Pating, M.D
Commissioner David J. Sanchez Jr., Ph.D.
Commissioner Belle Taylor-McGhee

Excused:
Commissioner Cecilia Chung
Commissioner Belle Taylor-McGhee

Planning Commissioners Present:
Commissioner Rodney Fong, President
Commissioner Cindy Wu
Commissioner Michael J. Antonini
Commissioner Rich Hillis
Commissioner Kathrin Moore
Commissioner Dennis Richards

Excused:
Commissioner Christine Johnson

Planning Commission President, Rodney Fong, called the meeting to order at 10:11am.

2) CALIFORNIA PACIFIC MEDICAL CENTER (CPMC) ANNUAL COMPLIANCE STATEMENT –
Joint Informational Hearing of the Planning and Health Commissions to review and comment on CPMC’s Annual Compliance Statement for 2013 and the City’s Report on CPMC’s Compliance Statement, in accordance with Section 8.2 of their Development Agreement with the City and County of San Francisco (Planning Department Case No. 2012.0403W; Ordinance No. 138-13). The 2013 Compliance Statement and the City Report are available for viewing on the Planning Department’s website (cpmc.sfplanning.org)
Greg Assai, San Francisco Office of Economic Development (OEWD); Elizabeth Purl, Planning Department; Colleen Chawla, San Francisco Department of Public Health (SFDPH); and Pamela Levin, San Francisco Health Service System, gave the City’s presentation. Jim Maxude gave the CPMC presentation.

Public Comment:
San Franciscans for Healthcare, Housing, Jobs, and Justice was provided ten minutes to provide the opposition presentation; Bob Prentiss, and Jane Sandoval provided the following comments;

- The Planning Department posted the relevant documents late which gave less time for the public to review and respond.
- On December 2, 2015, the Planning Department posted important information which was erroneously left out of the City report.
- The City oversight of this process should be more rigorous.
- CPMC has not met its Charity Care goals.
- The community is disappointed that only 17 patients have enrolled in the St. Anthony’s project.
- The CPMC Tenderloin community meeting had only seven attendees which is not an acceptable number of people involved to make it a community effort.
- There is concern that CPMC will not support St. Luke’s hospital historical effort to serve the most vulnerable populations.
- There are no plans for a pediatric inpatient unit at St. Luke’s hospital which will result in transportation issues for family of pediatric patients of other CPMC campuses.
- The Spanish-speaking staff were dismissed from the St. Luke’s Hospital Prenatal Diabetes clinic; telemedicine is not a replacement for linguistic and culturally appropriate services to this community.
- The St. Luke’s Hospital should have an ironclad plan for the number of psychiatric beds it will provide to the community.

Melanie Grossman LCSW, Older Women’s League San Francisco, stated that she is concerned about the healthcare needs of those who have historically been served by St. Luke’s Hospital. She added that transportation will be an issue for patients who are forced to go to other CPMC campuses for treatment.

Calvin Welsh, San Franciscans for Healthcare Jobs and Justice, stated that the Planning Department has not been diligent in monitoring compliance by CPMC. He added that only by using two years of rolling averages can CPMC been seen as compliant. He also stated that he is pleased that community advocacy has resulted in an increase in local hiring by CPMC. He urged the Commissions to amend the Development Agreement to include collateral agreements with community advocacy groups.

Laylaa Abdul-Khabir, San Franciscans for Healthcare Jobs and Justice, stated that she is glad that community advocacy efforts resulted in an increase in local hiring by CPMC. She added that another concern is CPMC’s retention of these employees.

Tess Welborn stated that CPMC is not in compliance due to its Charity Care shortfall. She added that CPMC has not fulfilled its obligations in the Tenderloin.

Melanie Grossman stated that there has been effective community engagement at the Cathedral Hill campus. CPMC is committed to shuttling the construction workers to the worksite to reduce parking issues. She added that CPMC should adopt a similar policy and practice for all of its employees to reduce the traffic congestion and parking issues. She does not agree that CPMC should not have to adhere to the Development Agreement parking stipulations until 2018.

Asha Safai stated that she was part of the 2007 St. Luke’s Hospital citizen advisory committee; at the time, discussions focused on rebuilding a culturally appropriate spectrum of services for the community. She also
stated that moving the CPMC inpatient pediatric ward to another campus will be anxiety-producing due to the length of time it takes to take public transportation to other campuses. She also noted that the dismissal of Spanish speaking staff at the prenatal diabetes clinic is a concern.

Female speaker stated that she believes healthcare is a right which includes proximity to health services.

Fernando Matt, Council of Community Housing Organizations, stated that the Planning Department’s delay in posting relevant documents constitutes a decrease in community engagement. He also stated that the dismissal of bilingual and bi-cultural staff at the St. Luke’s Hospital Prenatal Diabetes clinic is very concerning.

Ken Barnes MD, stated that CPMC laid off three bilingual and bicultural employees at the Diabetes clinic at St. Luke’s Hospital. He added that CPMC claims it has replaced this staff with bilingual staff; however, these staff are Filipino and speak Tagalog while the patients in the clinic are Latino and speak Spanish. He urged the Commissions to ensure there is a peer review of this situation and not accept an in-house CPMC review of this matter.

Commissioner Comments:
Commissioner Antonini made the following comments/questions:
• The number of projected jobs was higher than what is actually needed; he encouraged staff of the Planning and Health Departments to closely monitor this benchmark as CPMC moves forward.
• As a Kaiser member, he needs to go to different campuses to receive various kinds of care. He sees the situation of CPMC similarly, even the change of services at St. Luke’s. He added that patients should not be charged ambulance fees for having to be transported to different campuses.
• CPMC needs to find partners in the Tenderloin to meet the needs of that neighborhood.
• He encouraged CPMC to make sure there are appropriate translation services at the St. Luke’s Diabetes clinic.

Commissioner Chow presented the following comments/questions;
• What will happen if there is a complicated delivery at St. Luke’s Hospital? Mr. Maxude, CPMC, stated that the child and mother will be transferred to another CPMC campus with specialty services that can address the situation.
• The Health Commission commends CPMC for exploring sub-acute and skilled-nursing facility needs; he hopes that CPMC will work with the SFDPH and other city hospitals to find possible solutions.
• Expects that CPMC will come into compliance with the service levels noted in the Development Agreement.
• Cultural and linguistic issues are vital to appropriate delivery of services; he hopes to see meaningful progress related to these issues in the upcoming year. He requested that this issue be reported on at the Health Commission in 2016 because the issue of cultural appropriate service provision impacts all CPMC campuses.

Commissioner Pating presented the following comments/questions.
• He acknowledged CPMC for participating in SFHIP, increasing healthcare opportunities in San Francisco, and the support for the Bayview clinic. He also gave CPMC accolades for the collaboration with the San Francisco Health Network and is hopeful the partnership with St. Anthony Foundation will be helpful to the residents in the Tenderloin.
• He noted that the cultural competency issue at St. Luke’s Diabetes clinic is important to address and asked for a timeline in which CPMC will respond the letter from Director Garcia on this topic. Mr. Maxude stated that CPMC will likely respond in the next week and will continue to make strides to improve in this area.
• He noted that involving community is vital in the planning process and asked for more information regarding the plan to improve community outreach and relations. Mr. Maxude stated that CPMC will
continue to hold community meetings such as the one in August, to involve community. He noted that there may be a community meeting in approximately 6 months to focus on transportation issues.

Commissioner Sanchez presented the following comments/questions:
- CPMC made some significant progress in several areas. Hiring data is promising and he encouraged CPMC to increase outreach to local unions and communities, including veterans.
- He encouraged exploration of partnerships with organizations such as On Lok that provide transportation to assist when patients who live in the Mission must access care at other CPMC campuses.
- He acknowledged that cultural issues are vital to understand when working with such diverse patient populations.
- He thanked those that made public comment for their interest and concern.

Commissioner Moore made the presented the following comments/questions:
- She is encouraged about the progress and measurable data. In addition both campuses’ construction seems to be moving forward on schedule. She is also glad to hear the Cathedral Hill campus has effectively worked with the community to mitigate transportation issues for the construction workers.
- Cultural competency is important; translation is not an adequate substitute for cultural and linguistically appropriate service provision, especially in a medical setting with vulnerable populations.
- She is supportive of the St. Luke’s Hospital medical building to be an integral part of the rebuild at that campus.

Commissioner Wu presented the following comments and questions:
- Noted that the addendum to the Planning Department’s data was released late due to a printing error. She requested a timeline for next year’s process. Elizabeth Purl, Planning Department, stated that the information in the addendum was contained in the CPMC data which was released on time. Ms. Purl expects that all the data will be available in a more timely manner next year.
- Requested that in next year’s report from the Planning and Department of Public Health Reports that the issues noted in the 2013 and 2014 issues be noted to give a context and history of the new report data.
- What entities are responsible for client outreach in the CPMC/St. Anthony’s Foundation partnership? Ms. Chawla, SFDPH, stated that outreach should be conducted by St. Anthony’s Foundation and North East Medical Services (NEMS), a non-profit that has an existing partnership with CPMC. Ms. Chawla noted that it has been helpful that the St. Anthony’s service utilization has been slow to give the organization to develop its billing processes.
- Will there be opportunities for the public to give input into the service-mix offered at the Cathedral Hill and St. Luke’s Hospital campuses. Mr. Maxude stated that CPMC may hold meetings with the community to community needs but it is not holding meetings to seek input regarding service mixes at either campus.
- Does CPMC see a link between transportation issues and access to services? Mr. Maxude stated that CPMC would like to be part of the solution regarding transportation issues for its patients.

Commissioner Richards presented the following comments/questions:
- Requested that next year’s report shows a table with issues from all previous reports with red, yellow and green to highlight the status of the items. This will make tracking the issues more transparent.
- Asked if CPMC plans to wait five years on the transit subsidy process. Janice Hamilton, CPMC, stated that CPMC is committed implementing the transit subsidy in 2017; she noted that there are a sequence of tasks that need to be accomplished prior to the full implementation of the item. Commissioner Richards encouraged piloting options before 2017.
- Stated that the obvious solution to the Diabetes clinic issue it to allow bilingual and bicultural staff to return to best serve the patient population. Mr. Maxude stated that CPMC is looking at cultural issues
throughout all of its campuses and will be communicating with Director Garcia within the next week regarding this issue.

- Inquired whether there is a St. Luke’s advisory committee. Mr. Maxude stated that there was community engagement prior to the Development Agreement. Commissioner Richards encouraged community advisory groups for all CPMC campuses.
- Asked Calvin Welsh, San Franciscans for Healthcare Jobs and Justice, if he has thoughts on partnering more effectively with CPMC. Mr. Welsh stated that the historical relationship between CPMC and the community has not been productive; he noted that CPMC ended conversations with San Franciscans for Healthcare Jobs and Justice, prior to the Development Agreement being finalized. He stated that CPMC presents information but does not seem to be open to discussing the issues that impact the community. He also stated that San Franciscans for Healthcare Jobs and Justice has requested that a formal agreement be made to give it authority to work with the Planning and Health Departments to ensure effective compliance. Mr. Maxude stated that services provided at both the St. Luke’s Hospital and Cathedral Hill campuses are listed in the Development Agreement.
- Requested to receive the CPMC audit when it is available.

Commissioner Karshmer stated that the issue of timely sharing of information is important and suggested that the Health Commission receive updates during the year to best understand the issues impacting the community.

SFDPH Director Barbara Garcia encouraged CPMC to work in partnership with the community; she noted that it offers expertise and ideas that can strengthen the San Francisco service system.

The meeting was adjourned at 12:22pm.