

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, January 17, 2017, 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 James Loyce, Jr., M.S.
Commissioner David Pating, M.D.
Commissioner David J. Sanchez Jr., Ph.D.

Excused: Commissioner Cecilia Chung Commissioner
Commissioner Judith Karshmer, Ph.D, PMHCNS-BC

The meeting was called to order at 4:11pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF JANUARY 3, 2017

Commissioner Comments:

Commissioner Chow requested that the phrase, "Commissioner Chow," on page 8 under "Joint Conference Committee Reports," be replaced with "a physician on the Health Commission."

Commissioner Chow asked if the DPH Annual Report has been finalized with the suggested revisions made by the Health Commission. Mr. Morewitz stated that the document is almost finished and that he will forward it to the Commissioners when it is finalized.

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>

State of California Governor's Proposed Budget FY 2017-2018 – Health and Human Services

On Tuesday, January 10th, Governor Jerry Brown released his proposed \$179.5 billion dollar state budget for fiscal year 2017-2018. The State is projected to run a \$1.6-billion deficit by next summer and the budget the Governor released seeks to resolve the shortfall by slowing the previously expected growth in public school funding and rolling back a series of one-time expenses discussed during last year's budget negotiations.

The budget maintains the state's commitment to the Medi-Cal program which is expected to cover 14.3 million Californians, over one-third of the state's population, and continues funding for all children regardless of immigration status. The Governor's budget does not take into account a repeal of the Affordable Care Act, which would be unlikely to be implemented in the budget year. The Governor's proposal acknowledges that a complete repeal of the Affordable Care Act, without a replacement program, would impact millions of Californians' health benefits and disrupt the private insurance market. California could potentially lose as much as \$17.3 billion dollars in federal funding for the state's expanded Medi-Cal program in 2017-18.

Last November, voters passed two major initiatives that have budget impacts, Proposition 56, the Tobacco Tax Initiative and Proposition 64, the legalization of adult use cannabis. Proposition 56 increases the cigarette excise tax by \$2 per pack with an equivalent increase on other tobacco products and e-cigarettes. Revenues from this proposition will largely go to support new growth in Medi-Cal expenditures and support other health related initiatives. The passage of Proposition 64 has created a need for a combined regulatory structure for both the medical cannabis and the adult use cannabis programs. The budget proposed a \$52.2 million loan, which will be extended from the General Fund, to fund regulatory activities, processing licenses, and enforcement.

The overall proposed expenditures for Health and Human Services are relatively flat compared to the previous budget. Health highlights include:

- A \$2 billion bond secured by a portion of future Proposition 63 Mental Health Services Act revenues, subject to court validation, to address homelessness for individuals with mental health needs through the provision of permanent supportive housing
- Continuation of full-scope Medi-Cal for undocumented children at a cost of \$279 million for an estimated 185,000 children
- \$536 million to backfill anticipated federal funding decreases for the Children's Health Insurance Program
- A projection of \$48 million in savings by transitioning coverage of new immigrant adults without children from Medi-Cal to Covered California
- Discontinuation of the Coordinated Care Initiative for dual Medi-Cal/Medicare eligibles
- Allocation of new tax revenue funded by the last election's ballot initiatives to cover increased Medi-Cal costs.

Nancy Pelosi, Barbara Lee and Jackie Speier Speak Out Against Repeal of ACA

Congresswomen Nancy Pelosi, Barbara Lee and Jackie Speier spoke at two locations in the City including Zuckerberg San Francisco General and City Hall to talk about the gains made under the ACA the necessity of maintaining healthcare coverage for those Americans in greatest need. At ZSFG, patients spoke out about the care they have received since the ACA and what an appeal would mean to them. Barbara Lee noted that levels of the uninsured dropped to their lowest level after the ACA and that the most helped were low income individuals, as well as African American, Latino and Asian and Pacific Islander populations. Said speaker Nancy Pelosi, "The ACA is about keeping America healthy."

Bay Area Public Health Departments declare Flu Widespread in the Bay Area

Public Health Departments around the Bay Area have announced that influenza activity is increasing and has reached "widespread" levels. Areas with the most influenza activity in the state include the Bay Area.

Flu specimens that have been tested match very closely to the current vaccine strains, which means the vaccine is expected to provide good protection against the flu. People at highest risk for severe complications from influenza include adults 65 years of age and older, children less than 5 years old, pregnant women and those with certain medical conditions like asthma, heart disease and weakened immune systems.

In San Francisco, we are working closely with long term care and assisted living facilities to offer guidance for flu prevention and response.

Electronic Health Record goes out for Request for Proposal

Our effort to pursue an Electronic Health Record is well underway. We learned much from our DPH-Apex attempt, and have used that information to go forward. Our Request for Proposal (RFP) for an Electronic Health Record is set to go out today. We expect to have demos in July and to make an award by August 31, 2017. We hope to start January 2018 with a new Electronic Health Record. Staff have been informed of the very strict guidelines that exist for the RFP process and were cautioned not to discuss specifics or vendors in order to maintain a fair and ethical RFP process.

Community Meetings held for UCSF Research Building Planning

UCSF and SFDPH leaders joined recently with community members to discuss plans for the new UCSF Research Building on the ZSFG campus. Meetings have been held in various venues to accommodate as many voices as possible, including a local restaurant in the Mission, the Umqua Bank in Potrero Hill and at the ZSFG Wellness Center. Community members have expressed concern regarding the changing nature of the mission district community. UCSF leaders have committed to open and clear lines of communication with the community on an ongoing basis as this important facility is created.

REAL (Race, Ethnicity, and Language) Data Collection

Many health inequities exist in San Francisco, for example, African American/Black residents have much higher rates of hospitalization for hypertension compared to all others. In order to address these disparities, it is important that we track information on race, ethnicity and language (REAL). In addition, collecting REAL data is necessary for us to receive our full share of Medi-Cal revenue. In the next few months, posters will be going up in clinics around the SF Health Network to let patients know why it is important that we collect this information. We'll also be rolling out a standard approach to collecting this data. Why? Patients are more likely to share this personal information when asked by respectful and trained staff who can explain and answer questions or concerns about providing this information. Plus, we want to support our front-line staff to be sure that they have the tools and training to do this important work. Training began the week of January 9th. As we train, we'll be changing workflows for eligibility workers, specialty and ancillary staff who check-in patients to fill out demographic intake forms. Collecting accurate and timely REAL data is more important than ever, in order to best serve our patients!

Healthy Retail SF Program Update

The Healthy Retail SF Program has held various events the past several months, including two store redesigns and two community Grand Re-Opening events. Fox Market at 570 Larkin Street in the Tenderloin and Palou Market at 4919 3rd Street. in the Bayview are the eighth and ninth stores to be redesigned as participants of the program, receiving equipment (shelving and produce refrigeration), training, healthy promotional signage, connections with resident leaders, and other technical assistance. Both stores are on path to becoming healthy retailers and are now able to sell more fruits and vegetables, healthy snacks and groceries to their communities. Palou Market was proud to host Mayor Ed Lee, SF Health Officer Tomás Aragón, and Supervisor Mar in late October, as well as host a community event at the store, giving away reusable shopping bags and fruit. Fox Market celebrated their Grand Re-Opening with a ribbon cutting ceremony with activities, speakers, and taste testings. Also, Lee's Market at 1397 Revere St. in the Bayview, the first store to participate in the Program, celebrated their "graduation" from Healthy Retail SF, as they have continued to provide the community with healthier food for over three years. There was free fruit and sandwiches, and Lee's Market received a Certificate of Honor from Supervisor Malia Cohen and the Bayview Heal Zone. The Healthy Retail SF program is a partnership between the Community Health Equity and Promotion Branch, Office of Education and Workforce Development office, the Bayview Heal Zone/Healthy Southeast Coalition and Tenderloin Healthy Corner Store Coalition.

Curry Senior Center Celebrates New Dining Room with Holiday Meal and Gifts for Community

On December 23, 2016, 300 low-income and homeless seniors in the Tenderloin were treated to holiday meals, gifts and activities. David Knego, Curry Executive Director, and Valerie Williams, Curry Health Center Director, along with a Representative from Supervisor Jane Kim's Office, Frank Billante of Home Instead Senior Care, Ballow Yu from Walgreens and volunteers were on hand to serve the meal and hand out gift bags. Curry Center's Dining Hall & Community Room which serves breakfast and lunch seven days a week to homeless seniors had been closed for five weeks for renovations. Thank you to Home Instead Senior Care, Walgreens stores in San Francisco, Kaiser, CPMC, Project Open Hand, American Academy of Ophthalmology and HDR Architects for the donated gift bags.

Trauma Informed Systems Training Expands

SFDPH has joined other localities like the City of Philadelphia and the State of Maine in implementing a system-wide Trauma Informed System Initiative to help us realize, recognize and respond to trauma and its effects on ourselves, our colleagues and our system. They will be holding half day trainings that will explore the application of six principles of trauma-informed systems: Trauma Understanding, Safety and Stability, Cultural Humility and Responsiveness, Compassion and Dependability, Resilience and Recovery, and Empowerment and Collaboration. All staff are encouraged to attend. There are plenty of spaces in the upcoming Jan 26th training. For more information, contact lisa.reyes@sfdph.org 415-255-3613

Pride Planning Committee

It is time to start planning the 47th LGBT Pride Parade. Last year's contingent was our biggest yet and we plan to get larger! If you haven't marched in the parade before, it is a wonderful and heartwarming event. The event will be held Sunday, June 25th this year. All are welcome and if you are interested in helping plan the event, please contact Travis.touhey@sfdph.org.

Human Resources improves Family Medical Leave Process

On January 4th and 5th, Human Resources Director, Ron Weigelt hosted a rapid improvement process event for Family Medical Leave. The event brought together staff from payroll, human resources operations, labor relations, and disability accommodations. Family Medical Leave is managed by two groups created in the past year specifically for that purpose. By creating a unit designed to meet the family medical leave needs of staff, human resources had already improved service. The event discussed the process from start to finish, and mapped out the processes used at the ZSFG human resources office and those used at the LHH and Central office. The result was that the best practices of each unit were established as the standard method to be used by both. Processes were reviewed that included payroll (including time keeping), labor relations, disability accommodations, and the interface with Occupational Health. The end result of the rapid improvement process event is that service will be improved for both staff and management, with an eye towards improved communication, streamlining of processes, and timely response rates. A follow up event will be held the first week of May 2017, to ensure improvements agreed upon remain on track.

Human Resources Improves Employee Separation Issues

In 2015 and 2016, the Office of the Controller's City Services Auditor Division (CSA), conducted an audit of the employee separation process of the Department of Public Health. The audit found that Public Health does not track the system access it grants to contractors and does not always deactivate information technology accounts of employees and contractors who separate from the department. HR is now implementing counter measures to ensure all of our systems are promptly notified and respond when employees or partners no longer work for or with our organization. Population Health has generously offered the assistance of a project manager (Darlene Daevu) towards this process improvement task. Darlene will assist HR in the area of equipment issuing and retrieval, ID badge and facility access management, payroll termination, and related key tasks.

Director Garcia introduced Kavous Bassiri, the new Director of the San Francisco Health Network Behavioral Health. Mr. Bassiri was formerly the President and CEO of RAMS Inc., a SFPDH mental health provider. Mr. Bassiri stated that he is pleased to join the SFPDH and looks forward to serving the greater San Francisco community in his new role.

Commissioner Comments:

Commissioner Chow asked if the governor's budget is proposing to reduce MediCal reimbursement rates. Colleen Chawla, Deputy Director of Health and Director of Policy and Planning, stated that the Governor's budget does not reduce MediCal reimbursement. Instead, the budget uses funds from two ballot initiatives dedicated to MediCal funding to prevent any reductions in MediCal.

Commissioner Loyce stated that he is interested in future updates on changes to the Affordable Care Act (ACA) based on the President's actions.

Commissioner Pating requested an explanation for changes in federal Medicaid rates and the potential impact on the state budget and MediCal. Ms. Chawla stated that the federal government provides matching funds for California based on its income. California has one of the lowest matching rates compared to other states. She added that before the ACA, California's matching rate was 50%/50%; with Medicaid expansion, the rate comprised of 90% federal funding and 10% state funding. The Medicaid expansion rate issue is what is currently being considered for change at the federal level as part of ACA repeal efforts by Congress. One possible option is for the federal government to reduce Medicaid expansion rate to 50/50 which would force the state to pass along some of the costs to counties, which may directly impact future budgets of San Francisco. Ms. Chawla stated that the federal government is also considering giving states Medicaid block grants which would reduce the overall Medicaid reimbursement amount that California would receive.

Commissioner Pating asked if LGBTQ data is included in the REAL data collection efforts noted in the Director's Report. Director Garcia stated that the SFPDH has begun to collect the data for San Francisco but the state is not yet requiring this information.

4) GENERAL PUBLIC COMMENT

There was no public comment.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE

Commissioner Pating, Chair, stated that the Committee heard an update on the MHSa 5-year plan. SF has received \$25-\$30 million a year based on taxes of Californians making over \$1 million a year. Full service partnerships, a category of MHSa programs which serve severely mentally ill clients, show effective outcomes. MHSa also provides a myriad of prevention services including housing. He also noted that the pilot of the mental health portion of the transgender health program is innovative.

Commissioner Pating stated that the Committee also heard an update on the Applied Research, Community Health Epidemiology and Surveillance (ARCHES) section of the Population Health Division. Wayne Enanoria, the new director, provided the update. The unit will move towards developing more patient-centered data systems to better inform the SFPDH and other health systems.

6) SFPDH ANNUAL GIFT REPORT FY 2015-16

Anne Okubo, Deputy Financial Officer, presented the report.

Commissioner Comments:

Commissioner Sanchez stated that he is astounded that the community has given such significant gifts, which are a testament to the quality work that the SFPDH provides to all San Franciscans.

Commissioner Chow stated that he is pleased that Avon is still donating significantly and asked for an update on their grant. Mr. Pickens stated that Avon reduced its ongoing grant by approximately \$200,000 due to the decrease in the economic market several years ago.

Action Taken: The Gift Report FY2015-16 was unanimously approved.

7) SFDPH 2016 FEDERAL AND STATE LEGISLATIVE SUMMARY AND 2017 FEDERAL AND STATE LEGISLATIVE PLANS

Cyndy Comerford, Office of Policy and Planning, and Nicki Sandberg, Office of Policy and Planning, presented the plans.

Commissioner Comments:

Commissioner Loyce asked for information to help understand the current uninsured rates compared to pre-ACA rates. Ms. Chawla stated that the current uninsured rates are half of what they were prior to the implementation of the ACA.

Commissioner Pating requested including telecare issues and NIH funding levels in the plan.

Commissioner Sanchez thanked the presenters for a comprehensive state and federal legislative platform.

Commissioner Chow made a request for issues relating to the funding and correct distribution of primary care providers be included in the plans. This would include the correct use of technology and correct use of existing providers in the service system.

Commissioner Chow also requested that the plans should include MediCal reimbursement rate issues since California receives such a low reimbursement/match rate from the federal government. He added that the state should advocate for adequate reimbursement for medical specialties that are in short supply.

Commissioner Chow stated that he looks forward to a reviewing a revised resolution that contains suggestions made by the Health Commissioners.

8) CALIFORNIA END OF LIFE OPTION ACT

Sneha Patil, Office of Policy and Planning, and Alice Chen MD, SF Health Network Chief Medical Officer, gave the presentation.

Commissioner Comments:

Commissioner Pating asked if the SFDPH has had any patients request assistance with end of life planning since AB 15 became effective in June of 2016. Anne Kinderman MD, ZSFG Director of Palliative Services, stated that one patient went through the full process but has not chosen to ingest the medication. She added that some patients died in between making the first and second request.

Commissioner Pating asked how SFDPH staff are trained for this process. Dr. Kinderman stated that staff can volunteer to be trained and get credentialed for this process. Dr. Alice Chen, SF Health Network Chief Medical Officer, stated that participation is voluntary and if a patient's primary care provider is not comfortable participating, the Network has other physicians who can consult on the process.

Commissioner Pating asked if the process for staff is an "Opt in" or "Opt out" process. Dr. Chen stated that staff may volunteer; there is no assumption within the system that all staff will be comfortable participating in the process.

Commissioner Loyce stated that he appreciates the depth and thoughtfulness of the policy.

Commissioner Chow asked if the hospital is considered a public space for ingesting medication. Dr. Chen stated that for ZSFG patients with no home, the Transitions team will find an appropriate housing placement. Laguna Honda Hospital patients live at the hospital and they are therefore authorized to ingest the medication in the facility.

Commissioner Chow asked how the SF Health Network will interact with a situation in which a person who is not associated with the Network requests assistance if her/his primary care provider does not wish to participate in end of life counseling or planning. Dr. Chen stated that although AB 15 does not address this situation specifically, the SF Network staff felt that there should be a true relationship between the patient and physician to participate in end of life planning. Therefore SF Health Network staff will only be assisting Network patients in this process. Dr. Kinderman stated that there are private primary care physicians that are charging fees to consult with patients. She added that some freestanding hospices are also offering this service to their clients.

Commissioner Sanchez asked if the advisory and ethics committees utilize a mix of medical and mental health staff including social workers. Dr. Kinderman stated that the committees utilize a variety of professional staff and community members to insure diverse perspectives are represented.

9) OTHER BUSINESS:

This item was not discussed.

10) JOINT CONFERENCE COMMITTEE REPORTS

Commissioner Sanchez, LHH JCC Chair, stated that the Committee discussed the following items at its January 10, 2017 meeting: Administrator's Report, LHH Security Services Program, LHH Health At Home Annual Report, LHH Strategic Goals Update-Technology, and approved hospital-wide policies. He noted that Health At Home has successfully reduced its General Fund budget by increasing revenue.

11) COMMITTEE AGENDA SETTING

Mr. Morewitz reminded the Health Commissioners that a joint meeting with the Planning Commission will be held on February 9, 2017 at City Hall to review the CPMC Annual Report on the Development Agreement with CCSF.

12) 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) and to invoke the attorney-client privilege (San Francisco Administrative Code Section 67.10(d))

C) CONFERENCE WITH CITY ATTORNEY

Convene in Closed Session - Existing Litigation - Motion that the Health Commission convene in closed session with the City Attorney for the purpose of conferring with, or receiving advice from, the City Attorney regarding the following existing lawsuits in which a proposed settlement is being consider by the Commission, pursuant to San Francisco Administrative Code Section 67.10(d) and California Government Code Sections 54956.9 and 54956.9(e)(3) permit this closed session. Discussion in open session concerning these matters would likely and unavoidably prejudice the position of the City in the pending lawsuits listed below.

(After a closed session, if one occurs, the Health Commission shall adopt a motion either to disclose or not to disclose.)

Settlement of Existing Litigation as Defendant: Luyen Phan for \$2,875,000
Luyen Phan, et al. v. City and County of San Francisco, et al., San Francisco Superior Court
Case No. CGC-16-552178, filed May 23, 2016.

D) Reconvene in Open Session: Motions and vote on whether to disclose any or all of the closed session discussions, San Francisco Administrative Code Section 67.12(a)

Action Taken: The Health Commission voted to not disclose the discussion held in closed session.

13) ADJOURNMENT

The meeting was adjourned at 6:21pm.