MINUTES
HEALTH COMMISSION MEETING
Tuesday, October 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 David Pating, M.D., Vice President
Commissioner Dan Bernal
Commissioner James Loyce, Jr., M.S.
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 4:07pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETINGS OF SEPTEMBER 28, 2017 and OCTOBER 3, 2017

Commissioner Comments:
Commissioner Chow requested the following edits on the October 3, 2017 minutes:

Item 8, Update from the Office of Compliance and Privacy Affairs,
“Ms. Rykowski stated that an EHR will help reduce increase privacy and reduce unauthorized access.”

Item 9, SFDPH FY2016-17 Fourth Quarter Financial Report,
“Commissioner Chow asked for more information regarding the anticipated one-time primary care settlements budget.”

Action Taken: The September 28, 2017 minutes were unanimously approved.
The October 3, 2017 minutes were unanimously approved with the revisions 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

President Trump Announced Two Measures Impacting The Affordable Care Act
On October 12, 2017, The White House announced it would end the Affordable Care Act’s cost-sharing reduction (CSR) payments that help low-income people obtain health care. The subsidies, which are worth an estimated $7 billion this year and are paid out in monthly installments, may stop almost immediately since Congress hasn’t appropriated funding for the program. According to health care analysts, ending the payments could cause premiums to spike, push insurers out of the marketplace, and cost the government to spend more money in the upcoming year than it would otherwise spend. In May, California Attorney General Xavier Becerra and a coalition of 19 of Attorneys General moved to intervene in the House v. Price (CSR court case) in order to protect millions of Americans’ access to affordable health care and have the CSR payments continue. Attorneys General from California and New York say they are prepared to sue the Trump administration to protect health-care subsidies that the White House said would be cut off. As of 2017, the CSR payments are worth an estimated $800 million to California.

On the same day as the announcement regarding cost-sharing reduction (CSR) payments, President Trump signed an executive order allowing the sale of cheaper polices across state lines with fewer benefits. The order seeks to expand the ability of small businesses and other groups to band together to buy health insurance through what are known as association health plans. It also aims to lift limits on short-term health insurance plans. It’s unclear exactly how much the order will affect the marketplaces, but health care analysts warn that it could destabilize insurance markets, weaken patient protections, and make coverage unaffordable for people with pre-existing conditions. This executive order would change some of the ACA minimum standards for health coverage, meaning these plans could be cheaper, offer skimpier benefits and attract healthier people. That could drive up costs for older, sicker people who chose more traditional health coverage. The executive order is not a change in the law or regulations, but rather a direction to draft rules. Therefore, changes are unlikely to affect plans beginning on January 1, 2018, although some changes may take effect mid-year.

The Governor Signs Two Landmark Pieces of Legislation
Decriminalization of HIV – SB 239

Governor Jerry Brown signed SB 239, which replaces outdated HIV criminalization laws with laws that promote public health. Starting January 1, California laws that criminalize and stigmatize people living with HIV will be updated by ensuring the law addresses HIV in the same manner as other serious communicable diseases. Under signed legislation sponsored by Senator Scott Weiner, several HIV-specific criminal laws that impose harsh penalties on people living with HIV, including for activities that pose no risk of HIV transmission will be repealed. Research suggests that HIV-specific criminal laws have done nothing to further public health goals, as they have not been found to influence sexual behaviors that may be related to risk of HIV transmission nor have they been found to reduce new HIV infections. Furthermore, these laws affect certain populations more than others. A 2015 report found that HIV criminalization in California disproportionately affects sex workers, Latino/Latina, and Black/African-American populations. This new law will promote public health by reducing HIV-related discrimination and eliminating barriers to HIV testing and treatment, and aligning California law with current HIV science and San Francisco’s HIV-related efforts.

Family Paid Leave- SB 63

On Thursday, October 12th, Governor Jerry Brown signed SB 63, the New Parent Leave Act that will improve the health and wellness of families. This bill will provide nearly 2.8 million small business workers in California eligibility to take 12 weeks of unpaid leave to care for a newborn without losing their jobs. Starting January
1st, 2018 the new law makes it illegal for companies that employ 20 to 49 workers to refuse to grant new parents up to 12 weeks of unpaid leave within one year of their child’s birth, adoption or foster care placement. Parental leave to bond with a new child is associated with a range of positive maternal health outcomes, including improved mental and physical health and less diabetes, hypertension, heart disease, and breast cancer. SFDPH’s Maternal, Child, and Adolescent Health has worked with the City & County of San Francisco and the Healthy Mothers Workplace Coalition to communicate the health impacts of parental leave on maternal and child health throughout 2017, and were instrumental in efforts to pass this legislation.

North Bay Fire Response
The Public Health Department Operations Center and the Department of Emergency Management Emergency Operations Center opened on Monday, October 9, 2017, in response to the fires in the North Bay. At this time 40 lives have been lost, more than 200 thousand acres and 6,000 structures have burned, and more than 40,000 remain evacuated. Many San Francisco City Departments have been involved in mutual aid response including Fire, Police, Sherriff, Port, Department of Emergency Management, Public Health, Department of Technology, and Animal Care and Control. DPH mutual aid included EMS personnel and the Public Health Emergency Preparedness and Response staff supporting the command center in Sonoma as well as Behavioral Health staff to assist with counseling and support services. Communications assisted with 3 staff working the EOC, preparing public messaging, servicing press releases, responding to media and disseminating information via social media and on the DPH web site. The Health Department monitored San Francisco hospitals and skilled nursing facilities readiness to care for local residents who may be suffering respiratory illness due to the smoky air, as well as to care for evacuees from the North Bay. More than 100 such patients are in San Francisco skilled nursing facilities at this time. The Health Department also functioned as the lead agency city-wide to disseminate over 7,000 N95 masks to city departments for their employees who work outdoors and choose to wear masks voluntarily. In addition, Environmental Health is sending inspectors to help in the effort.

As part of the response, the Primary Care team used text messaging for the first time to send targeted messages to our patients at highest risk of respiratory problems because of poor air quality. Population Health and Care Experience teams collaborated to send 1,900 text messages to our active patients with asthma or COPD, alerting them to the poor air quality, reminding them as the weekend was approaching to make sure they had their inhalers and to use them as directed, and giving them a number to call if they needed help or refills. With the fires’ increasing containment and forecasted better air quality, we are hoping that we have seen the worst of this, but are ready and able to step in, if and when we are needed.

Hep A Vaccination
In light of the Hepatitis A outbreaks elsewhere in California, San Francisco is taking a proactive approach to reduce the risk of a similar outbreak among homeless people and drug users here. We are moving quickly to vaccinate people in homeless communities for Hepatitis A, a safe and effective method that protects individual health and the health of the community. Hepatitis A is an infectious virus that causes liver inflammation, and is spread person-to-person by close contact and contaminated food. The virus is ingested by mouth from contact with hands, objects, surfaces, food or drinks that are contaminated by the feces of an infected person. Unlike Hepatitis B or C, it is not a chronic illness and is not blood borne.

To date the Health Department has distributed 2,500 doses of outbreak prevention Hepatitis A vaccine to clinics and community organizations that serve homeless people and drug users. Shelter health staff were also able to immunize many at the most recent Project Homeless Connect on October 11th. Additional vaccines have been given at primary care clinics, and in shelters and navigation centers. All of these vaccines are provided free of charge to recipients.

Promoting Housing Security and Healthy Homes
The Children's Environmental Health Promotion (CEHP) Program within the DPH Environmental Health Branch has just issued a new report, “Promoting Housing Security and Healthy Homes for Families Served by Maternal,
Child and Adolescent Health Programs.” The report shares findings of the CEHP comprehensive home environmental assessments provided to 173 WIC-enrolled families during 2013-2015, including both environmental hazard violations as well as social determinants of health findings.

Many of the families surveyed during this project indicated that housing insecurity is the most dominant stress that they face, with about a quarter of them living in extremely overcrowded homes: 17 participant families lived with two families in the same unit and 25 participant families lived with three to ten families in the same unit, with up to 28 children and adults in the same home.

The report is linked on the Children’s Environmental Health Promotion Program website: https://www.sfdph.org/dph/EH/CEHP/default.asp

**Sugary Drinks Distributor Tax Advisory Committee**

Effective January 1, 2018, the City will begin imposing the Sugary Drinks Tax, an excise tax on distributors of sugar-sweetened beverages (SSB), syrup, or powder, adopted by voters in November 2016. Pursuant to City’s Administrative Code, the City will create the Sugary Drinks Distributor Tax Advisory Committee, which aims to evaluate the impacts of the tax and provide recommendations on potential establishment or funding of programs to reduce consumption of SSBs in San Francisco. This committee has 16 seats, 8 appointed by the Board of Supervisors, 3 appointed by the Director of Health, and 5 appointed by other City agencies.

The Director of Health appoints seats 10, 11, and 12, focusing on chronic disease prevention, oral health, and food security/access respectively. We have appointed the following individuals to these seats and am appreciative of their willingness to serve. They are leading experts in their respective fields and will prove to be invaluable contributors to the Advisory Committee.

Seat 10: An employee of the Department of Public Health (DPH) who has experience or expertise in the field of chronic disease prevention or treatment

Appointee: Rita Nguyen, MD – Assistant Health Officer at DPH

Dr. Nguyen brings many years of experience in the field as a chronic disease physician specialist at DPH. Dr. Nguyen is committed towards addressing health inequities like healthcare access and food insecurity, as these are barriers to prevention and health in underserved communities.

Seat 11: Person with experience or expertise in the field of oral health

Appointee: Irene Hilton, DDS, MPH – Public Health Dentist at DPH

Dr. Hilton has served families, adults, and young children as a dentist at DPH for almost 30 years. Dr. Hilton has tremendous expertise in the field, and serves as an oral health advocate to increase awareness and improve oral health in San Francisco.

Seat 12: Person with experience or expertise in the field of food security or access

Appointee: Ryan Thayer, Lead Community Organizer at Tenderloin Neighborhood Development (TNDC)

Ryan brings a deep-rooted passion and years of experience in addressing health inequities and healthy food access in low-income communities, through his work with TNDC and the Tenderloin Healthy Corner Store Coalition.
## Governing Body Report - Credentialing Summary

(10/19/17 MEC)

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### Current Statistics – as of 9/29/17

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**Current Statistics – as of 9/01/2017**

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<td>Applications in Process</td>
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<td>Applications Withdrawn this month</td>
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Naveena Bobba MD, Director of Public Health Emergency Preparedness and Response, gave updates on the SFDPH response to the recent fires and heat. She also provided information regarding the SFDPH proactive actions regarding Hepatitis A prevention in the San Francisco homeless and injection drug using populations.

Commissioner Comments:
Commissioner Sanchez stated that he is aware that many of the SFDPH staff have been impacted by the fires. He added that he hopes the SFDPH is successful in its efforts to provide support to the counties impacted by the fires. Director Garcia stated that the SFDPH continues to check on the status of impacted employees. She added that she is proud of the work the SFDPH has provided to the region. She also stated that mental health and housing need will continue to be important issues to address.

Commissioner Chow asked for more information regarding which San Francisco skilled nursing facilities (SNF) had availability to transfer 100 patients from the North Bay. Dr. Bobba stated that corporate SNF organizations worked together to arrange the transfers. Director Garcia stated that efforts were made by ZSFG and LHH to make room for possible transfers if they were needed.

Commissioner Bernal thanked Director Garcia and the SFDPH staff who have provided assistance to the North Bay. He asked for a recommendation for the public to provide support or assistance. Dr. Bobba suggested the Red Cross and California Association of Hospitals.

Commissioner Chow asked for clarification regarding the number of doses of Hepatitis A vaccine that are distributed through the SFDPH’s current effort. Dr. Bobba stated that one shot is given at SFDPH pop-up clinics, which is 90% effective. She added that attempts to follow-up for the second shot will be made.

Commissioner Loyce stated that he looks forward to future reports on the bipartisan effort to fund Affordable Care Act subsidies recently removed by President Trump’s Executive Order eliminating the cost sharing reduction payments that help low-income people obtain health care.

4) GENERAL PUBLIC COMMENT
There was no public comment.

5) COMMUNITY AND PUBLIC HEALTH COMMITTEE

Commissioner Pating, Chair, stated that the Committee heard a Jail Health update. He noted that Jail Health has standardized naloxone procedures in the jails and developed safe opioid prescribing procedures. The unit has also had great success with linking HIV patients to community care after their release from jail. In addition, it is also doing effective work on providing Hepatitis A vaccines to those most at risk.

6) REQUEST FOR RECOMMENDATION THAT THE BOARD OF SUPERVISORS APPROVE A NEW CONTRACT WITH EPIC CITY GOVERNMENT LLC FOR THE PROVISION OF AN ELECTRONIC HEALTH RECORD SYSTEM
Bill Kim, SFDPH CIO, gave the update.

Commissioner Comments:
Commissioner Chow noted that because the SFDPH electronic health record (EHR) is such a monumental project, the contract for this system has been brought before the full Health Commission for consideration of approval.

Commissioner Loyce thanked Mr. Kim and all staff involved in the process for their hard work.
Commissioner Chow acknowledged the effective work of Mr. Kim and thorough process that led to the SFDPH choosing a vendor.

Commissioner Pating stated that the contract meets the needs of SFDPH and opens the door to future partnerships.

Commissioner Sanchez stated that he appreciated the arduous process the SFDPH conducted to explore all options prior to choosing a vendor.

Commissioner Chow requested an update to the Health Commission on the EHR implementation every quarter.

**Action Taken:** The Health Commission unanimously recommended that the Board of Supervisors approve a new contract with Epic City Government, LLC (“Epic City Government”), in the amount of $167,384,597 for a software license, support and implementation services, maintenance services, and hosting for a new integrated Electronic Health Record application for the period January 1, 2018 to December 31, 2027 (120 months).

7) **EMERGENCY MEDICAL SERVICES UPDATE**
John Brown MD, EMS Medical Director, and James Duren, EMS Administrative Director gave the update.

**Commissioner Comments:**
Director Garcia noted that Mr. Duren previously managed over 30 fire departments in King County in Washington State.

Commissioner Loyce thanked the presenters for the report and stated that he looks forward to a presentation of evaluation data in 2018.

Commissioner Sanchez welcomed Mr. Duren and thanked him for responding to the unique challenges that San Francisco offers.

Commissioner Chow stated that he recalls when both the EMS and paramedics were organized within the SFDPH and hopes the transition of the EMS back to the SFDPH is successful. He requested an EMS update in six months.

8) **RESOLUTION: APPROVING THE SFDPH 2018 STATE AND FEDERAL LEGISLATIVE PLANS**
Cyndy Comerford, Office of Policy and Planning, gave the presentation.

**Commissioner Comments:**
Commissioner Pating suggested the following additional topics for the SFDPH legislative plans:
- Contraception policy
- Federal position on immigration as it impacts health workers
- NIH research funding levels
- Federal cannabis policy
- 42CR Confidentiality of substance use services
- Improve information sharing across medical systems while protecting a patient’s privacy
- Overturning IMB exclusions as long term
- Safe injection site bill
Ms. Comerford thanked Commissioner Pating for the suggestions. Director Garcia stated that she agrees with Commissioner Pating’s suggestions.

Commissioner Chow suggested that cannabis policies should include relevant environmental issues related to growing and distribution.

Commissioner Loyce thanked Ms. Comerford for the in-depth report. He added that he looks forward to an update on the current bipartisan bill to safeguard the Affordable Care Act subsidies which assist many lower income people to access health insurance.

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

9) OTHER BUSINESS:
This item was not discussed.

10) JOINT CONFERENCE COMMITTEE REPORTS
Commissioner Sanchez, LHH JCC Chair, stated that the October 10, 2017 LHH JCC meeting was primarily a closed session to review quality reports.

11) COMMITTEE AGENDA SETTING
Mr. Morewitz reminded the Health Commissioners that the December 19, 2017 meeting will be a planning session to discuss the SFDPH 5-year budget.

12) 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 Cal. Government Code Sections 1156, 1156.1, 1157, 1157.5 and 1157.6: Health and Safety Code Section 1461; and California Constitution, Article I, Section 1:

FOR DISCUSSION AND POSSIBLE ACTION: CONSIDERATION OF CREDENTIALING MATTERS

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

13) ADJOURNMENT
The meeting was adjourned at 5:48pm.
HEALTH COMMISSION RESOLUTION NO. 17-18
APPROVING THE SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH’S
2018 STATE AND FEDERAL LEGISLATIVE PLANS

WHEREAS, The San Francisco Department of Public Health’s (SFDPH) Strategic Plan prioritizes engagement in state and federal advocacy in order to ensure that health policy changes are consistent with Department priorities; and

WHEREAS, SFDPH’s advocacy activities are coordinated in the Office of Policy and Planning, which, through legislative analysis, participation in statewide coalitions, and collaboration with community partners and colleagues from other counties, reviews and analyzes health-related legislation for the Department and the City; and

WHEREAS, A number of important issues that will have a significant impact on achievement of SFDPH’s budget priorities and the citywide Community Health Improvement priorities will likely be considered by state and federal legislative bodies in 2018, including health care reform, behavioral health, Medi-Cal, climate change and justice, maternal, child and adolescent health; hospital and county health funding; and population health and prevention; and

WHEREAS, SFDPH participates in a number of statewide associations representing various county health professionals, including health executives, health officers, public hospital executives, and behavioral health directors, to ensure that San Francisco positions are represented in coalition positions on legislation; and

WHEREAS, SFDPH coordinates engagement in state and federal policymaking and legislative advocacy through the Mayor’s Office of Legislative and Government Affairs to advocate for health policy that is consistent with SFDPH and citywide priorities; and

WHEREAS, The City maintains lobbyists in Washington, DC and Sacramento, with whom SFDPH staff works to ensure that health policy positions approved by the Mayor’s Office and consistent with SFDPH priorities are represented in federal and state advocacy; and

WHEREAS, SFDPH’s 2018 state and federal legislative plans reflect SFDPH’s health policy priorities, and are an important tool for the City to advocate for health policy and legislation;

NOW, THEREFORE, BE IT RESOLVED, That the Health Commission approves SFDPH’s 2018 federal and state legislative plans.

I hereby certify that at the San Francisco Health Commission at its meeting of October 17, 2017 adopted the foregoing resolution.

_________________________________
Mark Morewitz
Executive Secretary to the Health Commission