

**Edward A. Chow, M.D.**  
President

**Dan Bernal**  
Commissioner

**Cecilia Chung**  
Commissioner

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

**James Loyce, Jr., M.S.**  
Commissioner

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

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

**Mark Farrell, Mayor  
Department of Public Health**



**Barbara A. Garcia, M.P.A.**  
Director of Health

**Mark Morewitz, M.S.W.**  
Executive Secretary

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**MINUTES  
HEALTH COMMISSION MEETING  
Tuesday, February 6, 2018, 4:00 p.m.  
101 Grove Street, Room 300  
San Francisco, CA 94102**

**1) CALL TO ORDER**

Present: Commissioner Edward A. Chow M.D., President  
Commissioner Dan Bernal  
Commissioner Cecilia Chung  
Commissioner James Loyce, Jr., M.S.  
Commissioner David J. Sanchez Jr., Ph.D.

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

The meeting was called to order at 4:07pm. Commissioner Chow noted that Dr. David Pating resigned from the Health Commission. He thanked Dr. Pating for his service and contribution to the Health Commission.

Mr. Morewitz noted that Mayor Farrell reappointed Commissioner Chow for a four year term prior to the Health Commission meeting.

**2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF JANUARY 16, 2018**

Commissioner Comments:

Commissioner Chow thanked Commissioner Sanchez for Chairing the January 16, 2018 meeting in his absence.

Action Taken: The Health Commission unanimously approved the minutes.

**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>

**Federal Government Shutdown Ends, Federal Funding Extended to February, and CHIP Renewed For Six Years**

On Monday January 22nd, President Trump signed a stopgap funding bill, officially ending the three-day government shutdown. The measure passed both the Senate and House by large margins, and will fund the

government through February 8th. Senate Democrats agreed to the deal after Senate Majority Leader McConnell (KY) promised to hold debate on a bill to extend protections for recipients of the Deferred Action for Childhood Arrivals (DACA) program. The bill also extends funding for the Children's Health Insurance Program (CHIP) for the next six years after having expired in October 2017. The bill also temporarily delays implementation of three health care-related taxes (Cadillac Tax, Medical Device Tax, and Health Plan Tax) that were enacted as part of the Affordable Care Act (ACA) to help pay for insurance. The bill does not, however, address Community Health Centers funding, Disaster Aid, the 340B Drug Pricing Program, Disproportionate Share Hospital Payments or Immigration.

As part of the six year funding extension for CHIP, the current enhanced CHIP match rate continues "as is" for Federal Fiscal year 2018 (FFY18) and FFY19 and is then reduced by 11.5 percent in FFY20 (i.e. the enhancement is cut in half). In FFY21, states go back to CHIP's regular match rate. Another important issue addressed by the funding extension is the "maintenance of effort" provision, which requires states to continue income eligibility levels that were in place as of the date of enactment of the ACA. This provision, which ensures that children have a stable source of coverage, remains, though states that are above 300 percent of the poverty line may roll coverage back to that level beginning in FFY 20. Also, no offsets (i.e. reducing funds for the Public Health Prevention Fund) were necessary to fund the extension.

### **New "Conscience and Religious Freedom" Division Established in Department of Health and Human Services**

On January 18th, the Trump Administration announced the formation of the new Conscience and Religious Freedom Division in the U.S. Department of Health and Human Services (HHS) Office of Civil Rights (OCR). The new division was created to protect doctors, nurses, and other health care professionals who refuse to take part in certain medical procedures, such as abortion services and

gender reassignment surgery, or treat certain individuals on the grounds of moral or religious objections. The creation of the new division carries out an executive order issued last year by President Trump, and is a reversal of an Obama-era policy that banned health care professionals from refusing treatment to transgender individuals or people who have had or are seeking abortion services. Civil rights, gay rights and abortion rights groups, as well as some medical organizations, expressed concern that this action is part of a systematic effort by the Trump administration to legitimize discrimination. Legal action challenging the creation of the HHS division is expected to be filed in the coming weeks and months.

Supervisor London Breed (while Acting Mayor) issued a press release criticizing the Administration's action and affirming the City's commitment to inclusive values and the Department of Public Health's dedication to serving all those in need of care, including women, immigrants, and LGBTQ communities of all ages and all backgrounds. "By allowing medical providers to deny critical care based on personal ideology, the Trump Administration is once again sanctioning widespread discrimination. This is not an issue of religious freedom. It is another thinly-veiled attack on the health and well-being of women and LGBTQ communities. Access to preventive and necessary health services is a basic human need. San Francisco has long promoted this value through the Department of Public Health, which serves women, immigrants, and LGBTQ communities of all ages and all backgrounds.

San Francisco is proud of our culture of inclusive and comprehensive health care, regardless of gender identity and expression, sexual orientation, ethnicity or socioeconomic status. We will continue to promote these values and ensure that all who need services are able to access them."

### **Confirmation of Alex Azar to HHS Secretary**

On January 24th, Alex Azar was confirmed on a mostly partly line vote as the next U.S. Department of Health and Human Services (HHS) Secretary. During the confirmation hearings several senators expressed concerns over Azar's role in the Trump Administration's continued threats to the ACA and Azar's involvement in the pharmaceutical industry, particularly around rising prescription drug prices. Azar spent nearly a decade at

pharmaceutical company Eli Lilly. Prior to this time at Eli Lilly, Azar served as an official during the George W. Bush Administration. HHS has been without a permanent leader for nearly four months following then-Secretary Tom Price's resignation.

### Emergency Declaration for the Opioid Crisis Extended

On January 19th, the Trump Administration announced it is renewing the public health emergency declaration related to the national opioid epidemic for another 90 days. The initial emergency declaration by the U.S. Department of Health and Human Services (HHS) was declared on October 26th, 2017, and was set to expire on January 23rd, 2018. The new declaration will last until April 23rd, 2018, and continues to give Federal Health Agencies the authority to quickly hire more

treatment specialists and reallocate money to strengthen the response to the epidemic. Public health experts contend that the declaration has had little impact on the crisis, especially given that new funding or resources to help states respond to the crisis have yet to be provided.

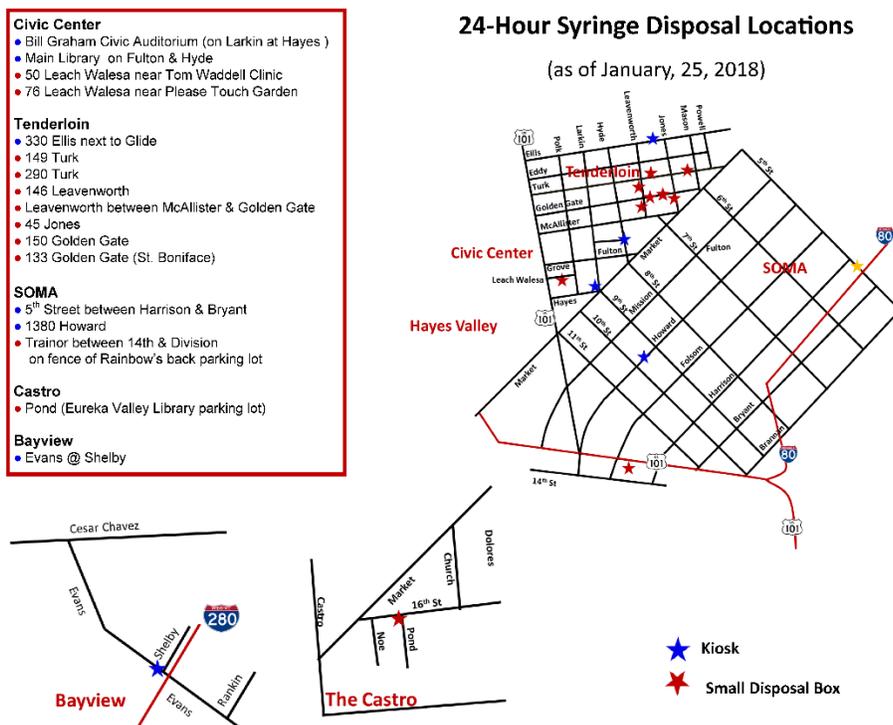
### SAMHSA Announces New Efforts to Advance Evidence-Based Practices for Opioid Use and Serious Mental Illness

On January 17th, the Substance Abuse and Mental Health Services Administration (SAMHSA) announced several new efforts to advance evidence-based practices in the behavioral health field. In conjunction with the public health emergency declaration, SAMHSA will launch a new Technical Assistance (TA) effort to focus on the specific needs of states and local jurisdictions to address the opioid crisis. To begin the effort, SAMSHA released \$12 million in funding to the American Academy of Addiction Psychiatry to utilize local expertise to provide technical assistance and training on scientifically based evidence-based practices to combat the nation's opioid crisis.

SAMSHA also released a new funding opportunity to develop a national Center of Excellence dedicated to the implementation of evidence-based practices to treat individuals living with serious mental illness. SAMHSA's \$14.5 million dollar Clinical Support Services will provide training and education to providers across the country to treat the nation's most vulnerable populations.

### Syringe Disposal

As part of our citywide syringe disposal plan, DPH collaborated with other City partners to place 5 syringe disposal kiosks in 2017. We currently have 17 outdoor syringe disposal boxes. Here is a map of their locations.



## **SFDPH Receives \$6 million for Dental Transformation Initiative to Fight Childhood Tooth Decay**

Recent increases in tooth decay rates and high disparities by race and ethnicity in dental caries among San Francisco kindergarteners mean that low income children of color in SF carry the biggest burden of dental caries. The San Francisco Department of Public Health hopes to reverse these trends as part of the Medi-Cal 2020 Dental Transformative Initiative (DTI). The Dental Transformation Initiative (DTI) is a funding tool which targets improvement of dental health for Medi-Cal children by focusing on high-value care, improved access, and utilization of performance measures to drive delivery system reform, by increasing the use of preventive dental services for children, preventing and treating more early childhood caries and increasing continuity of care for children. With funding of \$6 million dollars over 4 years, the SFDPH-led Local Dental Pilot Project (LDPP) (which is one of the four domains of the DTI) aims to increase access and utilization of preventive dental services among the 14,300 low-income kids age 0-5 who are Denti-Cal beneficiaries in SF.

By collaborating with The SF Health Network primary care clinics, UCSF, The SF Community Clinic Consortium, CavityFree SF, The SF Dental Society, The SF Unified School District, and community-based organizations, the SF DTI LDPP will implement five pilot projects based upon San Francisco Children's Oral Health Strategic Plan designed to improve and increase access to oral health among our childhood population. These pilots will aim to: 1) increase access and utilization of preventive dental care in private and public dental practices; 2) provide bilingual health care workers to coordinate dental care for children; 3) set up community task forces to develop culturally targeted health promotion messages for caregivers 4) provide training and technical assistance for primary care providers in identifying dental resources, referral and caregiver messaging 5) increase the number of Federal Qualified Health Center (FQHC) dual primary care and dental users.

For questions about the SFDPH DTI LDPP grant please contact [irene.hilton@sfdph.org](mailto:irene.hilton@sfdph.org)

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

January 2018

Governing Body Report - Credentialing Summary  
(1/18/18 MEC)

	<b>1/2018</b>	<b>07/2017 to 07/2018</b>
<b>New Appointments</b>	<b>10</b>	<b>161</b>
Reinstatements		
<b>Reappointments</b>	<b>35</b>	<b>355</b>
Delinquencies:		
Reappointment Denials:		
<b>Resigned/Retired:</b>	<b>12</b>	<b>121</b>
<b>Disciplinary Actions</b>		
<b>Administrative Suspension</b>		
<b>Restriction/Limitation-Privileges</b>		
<b>Deceased</b>		
<b>Changes in Privileges</b>		
Voluntary Relinquishments	<b>14</b>	<b>62</b>
Additions	<b>12</b>	<b>102</b>
Proctorship Completed	<b>21</b>	<b>147</b>

<b>Current Statistics – as of 1/3/18</b>		
Active Staff	<b>561</b>	
Courtesy Staff	<b>533</b>	
Affiliated Professionals (non-physicians)	<b>268</b>	
<b>TOTAL MEMBERS</b>	<b>1,362</b>	

<b>Applications in Process</b>	<b>23</b>
<b>Applications Withdrawn Month of January 2018</b>	<b>2</b>
<b>SFGH Reappointments in Process 2/2018 to 4/2018</b>	<b>150</b>

# LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

## January 2018

### Health Commission - Director of Health Report

(January 4, 2018 Medical Exec Committee)

	January	(FY 2017-2018) Year-to-Date
<b>New Appointments</b>	0	11
Reinstatements	0	0
<b>Reappointments</b>	4	38
Delinquencies:	0	0
Reappointment Denials:	0	0
<b>Resigned/Retired</b>	1	8
<b>Disciplinary Actions</b>	0	0
<b>Administrative Suspension</b>	2	9
<b>Restriction/Limitation-Privileges</b>	0	0
<b>Deceased</b>	0	0
<b>Changes in Privileges</b>		
Additions	0	1
Voluntary Relinquishments	0	0
Proctorship Completed	2	4
Proctorship Extension	0	0

<b>Current Statistics – as of 11/01/2017</b>	
Active Medical Staff	37
As-Needed Medical Staff	9
External Consultant Medical Staff	44
Courtesy Medical Staff	2
Affiliated Health Practitioners	14
<b>TOTAL MEMBERS</b>	<b>106</b>

Applications in Process	4
Applications Withdrawn this month	0

Commissioner Comments:

Commissioner Chow asked how the Dental Transformation Program fits into the San Francisco Children's Oral Health Strategic Plan that has been underway for the past several years. Director Garcia stated that both projects overlap.

**4) GENERAL PUBLIC COMMENT**

There was no general public comment.

**5) FINANCE AND PLANNING COMMITTEE**

Commissioner Chung, Chair, stated that the Committee reviewed and recommended all the items on the Consent Calendar for approval. She noted that the Friendship House Association of American Indians' contract term should be 1/1/18-12/31/22; she added that the Contracts Report contained a clerical error for the end date.

**6) CONSENT CALENDAR**

Action Taken: The following were unanimously approved:

- FEBRUARY 2018 CONTRACTS REPORT, (With corrected contract term for the Friendship House Association of American Indians-see item 5.)
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH FIRST DATABANK, INC. (FDB) FOR THE LICENSING AND INSTALLATION OF THE FDB DRUG DATABASE (MEDKNOWLEDGE), PATIENT EDUCATION SYSTEM (MEDUCATION) AND FDB WEB-BASED TOOL (ALERTSPACE); INCLUDING ALL COSTS FOR INSTALLATION, TRAINING, CUSTOMIZATION, AND ANY ADDITIONAL MODULES, ENHANCEMENTS OR SYSTEM EXPANSION. THE PRODUCTS WILL BE USED IN SUPPORT OF THE ELECTRONIC HEALTH RECORD PROJECT OF THE DEPARTMENT OF PUBLIC HEALTH. THE AGREEMENT SHALL BE IN THE AMOUNT OF \$1,293,605 FOR THE PERIOD APRIL 1, 2018 TO MARCH 31, 2023 (60 MONTHS).
- REQUEST FOR APPROVAL OF A NEW PERPETUAL SOFTWARE LICENSE AGREEMENT AND ACCOMPANYING SOFTWARE MAINTENANCE AGREEMENT WITH NEXTGATE SOLUTIONS, INC. FOR THE MATCHMETRIX® APPLICATION FOR USE IN THE ENTERPRISE MASTER PATIENT INDEX (EMPI) PROJECT IN SUPPORT OF THE ELECTRONIC HEALTH RECORD PROJECT OF THE DEPARTMENT OF PUBLIC HEALTH. THE SOFTWARE LICENSE AGREEMENT SHALL BE IN THE AMOUNT OF \$1,412,432 AND THE SOFTWARE MAINTENANCE AGREEMENT SHALL BE IN THE AMOUNT OF \$2,384,887 FOR THE PERIOD FEBRUARY 1, 2018 TO JANUARY 31, 2023 (60 MONTHS).
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH 314E CORPORATION, TO PROVIDE RHAPSODY INTERFACE DEVELOPMENT SPECIALISTS AND PROJECT MANAGEMENT SERVICES, IN SUPPORT OF THE ELECTRONIC HEALTH RECORD PROJECT FOR THE SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH IN THE AMOUNT OF \$9,406,624 WHICH INCLUDES A 12% CONTINGENCY AND AN OPTION TO EXTEND THE CONTRACT FOR AN ADDITIONAL 24 MONTHS. THE TERM OF THE CONTRACT INCLUDING OPTIONS IS FOR THE PERIOD FEBRUARY 1, 2018 TO JANUARY 31, 2023 (60 MONTHS).

**7) RESOLUTION ENDORSING THE SAN FRANCISCO SAFE INJECTION SERVICES TASK FORCE FINAL REPORT AND RECOMMENDATIONS**

Eileen Loughran, Community Health Equity and Promotion, presented the resolution and reminded the Health Commission that the San Francisco Safe Injection Services Task Force Final Report was presented at the November 7, 2017 meeting.

Public Comment:

Allen Cooper MD, stated that he has been practicing for 40 years and is currently working at HealthRight360. He noted that 10% of Hepatitis C patients do not have known risk factors and it may take twenty years for symptoms to show. Hepatitis C treatment can cost \$80,000 to treat; a liver transplant is approximately \$500,000. He added that safe injection sites will save lives, reduce Hepatitis C rates and will reduce the number of used needles on the street.

Holly Bradford, San Francisco Drug Users Union, stated that members of her community came out to thank the Health Commission for its bravery and for caring about drug users.

Kyle thanked the Health Commission for hearing the drug user community's issues and needs. He noted that lives will be saved by safe injection sites. He also said that his daughter will one day thank the Health Commission for their actions today.

Top Dollar thanked the Health Commission for allowing drug users to be heard and realizing that there are actions that can be taken to help.

Biskut thanked the Health Commission and the SFDPH for giving the community and opportunity to be heard and to educate people about drug addiction. He added that safe injection sites can be used as an education tool in addition to a direct intervention.

Billy thanked the Health Commission for letting the drug using community speak and be heard. Aaron thanked the Health Commission for its support.

Laura Thomas, Interim State Director of the California Drug Policy Alliance, Safe Injection Services Task Force member, and HIV Community Planning Council member, stated that she is proud that the City is moving forward to explore implementation of safe injection sites. She suggested that the most relevant analogy to use to show San Francisco has tackled another related issue is medical marijuana; there is successful regulation and administration of a Schedule 1 substance.

Michael Discepola, San Francisco AIDS Foundation Director of Outpatient Substance Use and member of the Safe Injection Services Task Force, stated that it is a day to celebrate. An affirmative vote by the Health Commission on the resolution will be a message to the drug using community that their lives matter and that San Francisco has the courage to be with them on their path. He also requested that needle exchange and Naloxone services should continue at the same levels.

Commissioner Comments:

Commissioner Sanchez thanked all the speakers for sharing their thoughts with the Health Commission. He thanked the Safe Injection Services Task Force for their work and put forth an amendment to add the phrase, "continued integrity and due diligence" to the last "Further Resolved," statement. The proposed change is below:

*"FURTHER RESOLVED, That the Health Commission supports the implementation of safe injection services, with continued integrity and due diligence."*

Commissioner Chung seconded the motion for the amendment.

Commissioner Loyce commended SFDPH staff and Director Garcia for their impactful work. He is pleased to be part of a Commission, and a resident of a City, that is taking a proactive pathway on this difficult topic.

Commissioner Chung congratulated all the community advocates whose work helped San Francisco to move forward on this issue. She noted that it is important not to judge people who are using drugs. This vote is not an endorsement of drug use; it is a public health intervention. She also stated that the HIV rates in San Francisco have dropped from 4% to 2% thanks to efforts of the Getting to Zero Initiative. She hopes safe injection sites will help further reduce HIV and Hepatitis C rates in San Francisco.

Commissioner Bernal acknowledged everyone in the audience and all those who spoke in favor of this resolution. He also thanked the Safe Injection Services Task Force for its effective work.

Commissioner Chow thanked the SFPDPH and Director Garcia for the work on the Task Force recommendations and resolution. He feels privileged to continue to be able to serve San Francisco as a Health Commissioner; he noted that the resolution reflects the Health Commission's desire to move the initiative forward to assist the residents of San Francisco.

Action Taken: The Health Commission unanimously approved the amendment.

Action Taken: The Health Commission unanimously approved the resolution. (see attachment)

#### **8) SFPDPH FY18-20 BUDGET UPDATE**

Greg Wagner, SFPDPH Chief Financial Officer, and Jen Louie, SFPDPH Budget Director, presented the item. Mr. Morewitz stated that the Health Commission will vote on the budget at its February 20, 2018 meeting.

##### Commissioner Comments:

Commissioner Chow asked how this budget fits in with the information presented at the 2017 Health Commission 5-year budget planning session. Mr. Wagner stated that the proposed SFPDPH budget is in alignment with the current SFPDPH 5-year budget.

Commissioner Loyce asked how the proposed California State budget will impact the SFPDPH budget. Mr. Wagner stated that the Governor recommends ending the 340B Drug Discount Program which would negatively impact the SFPDPH budget.

Commissioner Chow asked how changes in the funding levels for the UCSF Affiliation Agreement will impact the SFPDPH electronic health record budget. Mr. Wagner stated that the SFPDPH built in expected funding increases for the UCSF Affiliation Agreement into the electronic health record budget. He noted that of the \$14M increase for the UCSF Affiliation Agreement, \$4M was anticipated in the previous SFPDPH budget. He added that the SFPDPH is exploring a way to fund some electronic health record costs with one-time dollars to offset the remaining \$10M.

Commissioner Chow asked if some of the contracts discussed at today's Finance and Planning Committee and approved in item 6 related to "Drug Medi-Cal Delivery System," listed in C-1 of the budget presentation. Mr. Wagner stated that the contracts mentioned by Commissioner Chow relate to revenue processing under the Medi-Cal waiver.

Commissioner Chow asked why Primary Care is separated from the San Francisco Network in the budget presentation categories. Ms. Louie stated with the adoption of FSB, the new city-wide financial management system, the SFPDPH is restructuring how the budget is organized. This is the first phase of the restructure effort. She noted that quarterly reports will be in the new format.

#### **9) SFPDPH IT UPDATE**

Bill Kim, SFPDPH Chief Information Officer, gave the update.

Commissioner Comments:

Commissioner Chow thanked Mr. Kim for the update. He noted that the Health Commission will continue to receive quarterly updates on the electronic health record. Mr. Kim thanked the SFDPH IT Executive Team for their effective work on this project. Director Garcia thanked Mr. Kim for his leadership on this project.

**10) OTHER BUSINESS:**

There was no discussion of this item.

**11) JOINT CONFERENCE COMMITTEE REPORTS**

Commissioner Chow, ZSFG JCC Chair, stated that at its January 23, 2018 JCC meeting, the Committee discussed the following items: Regulatory Report, Hospital Administrator's Report, Patient Care Services Report, HR Report, and Chief of Medical Staff Report. The Committee also approved: Oral and Maxillofacial Surgery Rules and Regulations, Medicine Service Rules and Regulations, Surgery Service and Regulations, and ED Privilege List to add Toxicology. In closed session, the Committee reviewed the report of the PIPS minutes and approved the Credentials Report.

**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**

- 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 not to disclose the discussion held in closed session.

**13) ADJOURNMENT**

The meeting was adjourned at 5:53pm in memory of Dr. Mitch Grossman, former UCSF Associate Dean and Chair of Pediatric Services. Commissioner Sanchez noted that Dr. Grossman was dedicated to helping patient populations at ZSFG and strengthening the hospital.

**Health Commission  
City and County of San Francisco  
Resolution No. 18-1**

ENDORISING THE SAN FRANCISCO SAFE INJECTION SERVICES TASK FORCE'S FINAL REPORT AND RECOMMENDATIONS

WHEREAS, Two million Americans suffer from substance use disorders related to prescription opioids, heroin, and synthetics such as fentanyl, and the availability of fentanyl and its poisoning of drug supplies, in particular, poses additional concern due to its ability to heighten the potency and toxic influences of heroin and cocaine when mixed; and

WHEREAS, An estimated 22,500 people inject drugs in San Francisco and approximately 160 to 200 people die in the city each year from a drug overdose; and

WHEREAS, In recent years, San Francisco has continued to see overdoses from heroin, methamphetamine, and fentanyl and increasing attention has been placed on public injection drug use; and

WHEREAS, Drug injection is a known risk factor for opioid overdose, and people who inject drugs have health needs that are of particular concern to public health such as unhealthy substance use, the acquisition and transmission of HIV and hepatitis C, serious physical and mental health conditions, and premature death; and

WHEREAS, Recognizing that addiction is a medical condition, San Francisco operates a continuum of behavioral health care services that range from prevention to treatment services and bases its services in the principles of harm reduction; and

WHEREAS, Safe injection services represent one evidence-based strategy that fits within this harm reduction model, and approximately 100 safe injection sites now operate in over 65 cities around the world; and

WHEREAS, A 2017 study found that a single 13-booth safe injection services site would result in the following each year:

- each dollar spent would generate \$2.33 in savings, for total annual net savings of \$3.5 million;
- 415 fewer hospital stays
- 3.3 fewer HIV cases
- 19 fewer hepatitis C cases
- 110 more people who inject drugs entering treatment
- 1 life saved every four years; and

WHEREAS, State and federal law prohibit individuals from possessing controlled substances without a valid prescription and building owners and operators from allowing the manufacture, storage, or distribution of a controlled substance, and allows criminal and civil penalties to be imposed on all parties engaged in the property; and

WHEREAS, Assembly Bill 186, which is currently pending in the California Legislature, would allow designated counties, including San Francisco, to operate safe injection sites according to specific requirements and prohibit those involved with the programs from being charged with drug-related crimes; and

WHEREAS, In April 2017, the Board of Supervisors passed resolution 123-17 urging the San Francisco Department of Public Health to convene a Safe Injection Services Task Force to make policy recommendations to the Mayor, the Board of Supervisors, and City departments regarding the potential opportunities and obstacles associated with safe injection services, the community need for such services, and the feasibility of opening and operating such services; and

WHEREAS, The Task Force convened three public meetings, between June 2017 and August 2017, and discussed specific focus areas identified by DPH through the review of published literature and reports: types of safe injection service models, operations, services, location, and siting; and

WHEREAS, In addition to the public meetings, the San Francisco Department of Public Health sought a diverse set of perspectives from an array of San Franciscans through:

- a public online survey of more than 500 business owners, neighborhood groups, and residents
- 18 participants in 2 focus groups with business owners, neighborhood groups, and residents
- community survey with 40 people who inject drugs and 96 people in early recovery
- public comment at Task Force meetings; and

WHEREAS, The Task Force developed 17 total recommendations that support the creation of safe injection services in San Francisco, and address the need for legal analyses, program planning and management, delivery model, location considerations, community engagement and education, and identifying special populations; and

WHEREAS, The Board of Supervisors' Public Safety and Neighborhood Services Committee expressed their full support for the Task Force recommendations and for the Department of Public Health to implement safe injection services in San Francisco;

THEREFORE, BE IT RESOLVED, That the Health Commission endorses the Safe Injection Services Task Force's recommendations for operating safe injection services in San Francisco; and be it

FURTHER RESOLVED, That the Health Commission supports Assembly Bill 186; and be it

FURTHER RESOLVED, That the Health Commission supports the implementation of safe injection services, with continued integrity and due diligence.

I hereby certify that the San Francisco Health Commission adopted this resolution at its meeting of February 6, 2018.

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Mark Morewitz, MSW  
Health Commission Executive Secretary