MEMORANDUM

DATE: July 12, 2018

TO: Dr. Edward Chow, Health Commission President, and Members of the Health Commission

THROUGH: Barbara A. Garcia, MPA, Director of Health

FROM: Sneha Patil, Acting Director, Office of Policy and Planning
       Krishna Patel, Health Program Planner, Office of Policy & Planning

RE: Proposition Q – CPMC’s Anticipated Changes in 2018

In accordance with the Community Health Care Planning Ordinance (Proposition Q, 1988), Warren Browner, MD, MPH, Chief Executive Officer of California Pacific Medical Center (CPMC), notified the Secretary of the Health Commission, in a letter dated April 15, 2018, of CPMC’s plans to 1) change the licensure of the Irene Swindells Alzheimer’s Day Program from CPMC and Institute on Aging (IOA) to solely IOA, 2) close Irene Swindells Alzheimer’s residential care facility at the California Campus, and 3) transfer management of five outpatient departments from CPMC to Sutter Pacific Medical Foundation (SPMF). This memo provides background regarding these planned changes for the Health Commission’s Proposition Q hearings that will take place on July 17, 2018 and August 21, 2018. Specifically, this memo covers each proposed plan individually and discusses the impacts, based on available information, that these may have on healthcare services in San Francisco.

I. PROPOSITION Q

Proposition Q, passed by San Francisco voters in November 1988, requires private hospitals in San Francisco to provide public notice prior to closing a hospital inpatient or outpatient facility, eliminating or reducing the level of services provided, or prior to the leasing, selling or transfer of management. Upon such notice, the Health Commission is required to hold a public hearing during which the hospital shall be afforded an opportunity to present any information relating to its proposed action and to respond to matters raised by any other persons during that hearing. At the conclusion of the public hearings, the Health Commission shall make findings based on evidence and testimony from the public hearings and any submitted written material that the proposed action will or will not have a detrimental impact on health care services in the San Francisco community.
II. SWINDELLS ALZHEIMER’S DAY PROGRAM LICENSURE CHANGE

A. Overview of the Swindells Alzheimer’s Day Program Licensure Change

The Swindells Alzheimer’s Day Program operates at CPMC’s California Campus. The program serves an estimated 70 unduplicated participants and an average of 30 participants per day who have mild to moderate dementia. The participants live at home, but benefit from a day program that allows participation in therapeutic activities to stimulate cognition, enhance quality of life, and provide socialization. Day programs provide non-medical programming for participants and provide much-needed respite to their caregivers and families. Currently, the Institute on Aging (IOA) fully manages the Alzheimer’s Day Program, while CPMC provides the physical space and facility support. The current Alzheimer’s Day Program is licensed by both CPMC and IOA.

With the proposed change, the Alzheimer’s Day Program will be independently licensed by IOA. Both CPMC and IOA are working through their Board approval processes, and will then work with the California Department of Social Services (CDSS) for the licensure change. CPMC reported that they are currently unable to provide a timeframe for when the licensure change will occur and will provide an update when they have a better understanding of the timeline. This licensure change will not occur prior to August 1, 2018. Though CPMC and IOA are working together to plan for the change in licensure, there is a possibility that the program may close if IOA is unable to find a suitable new space before the expected closure of the California campus in spring 2019.

B. Adult Day Programs in San Francisco

According to the 2016 Seniors and Adults with Disabilities Needs Assessment conducted by the Department of Aging and Adult Services, Adult Day Care provide a range of support services — social and psychological — that promote the quality of life for participants. These are non-medical programs licensed by the California Department of Social Services that provide services for less than 24 hours. Typically, participants attend a certain number of days per week and pay out-of-pocket. Under the licensed Adult Day Care framework, Alzheimer’s specific day care programs provide services for individuals with dementia or Alzheimer’s disease who are typically older adults. The main goals of these programs are to provide respite for families and caregivers, and to help support individuals with dementia or Alzheimer’s.¹

There are ten Licensed Adult Day Programs licensed in San Francisco, including Swindells (Exhibit 1).² California Community Care Licensing, a division of CDSS, was unable to provide detailed information regarding Adult Day Care Programs that serve older adults with dementia/Alzheimer’s clients in San Francisco. Therefore, in June 2018, DPH contacted each program individually to understand whether they serve clients with dementia/Alzheimer’s. Only two Adult Day Programs, aside from Swindells, cater to clients with dementia/Alzheimer’s clients – Catholic Charities Alzheimer’s Day Care Resource Center and Self Help for the Elderly. Catholic Charities’ program averages 18-21 clients per day, and is open from 9:30 am-3:00 pm Monday through Friday. Most pay out of pocket, but there is financial aid available to some, as necessary. The Department of Aging and Adult Services contracts with the three Adult Day Programs serving adults with dementia/Alzheimer’s.

² CA Community Care Licensing List of Adult Day Programs San Francisco County – obtained from CCL on 6/12/18
Exhibit 1: Licensed Adult Day Care Programs in San Francisco

<table>
<thead>
<tr>
<th>Adult Day Care Program</th>
<th>SF Neighborhood</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catholic Charities of San Francisco*</td>
<td>Oceanview/Ingleside</td>
</tr>
<tr>
<td>Creativity Explored of San Francisco</td>
<td>Mission</td>
</tr>
<tr>
<td>Creativity Explored II</td>
<td>Mission Bay</td>
</tr>
<tr>
<td>Irene Swindells Alzheimer’s Day Program*</td>
<td>Presidio Heights</td>
</tr>
<tr>
<td>Kimochi Home</td>
<td>Japoldio Heights</td>
</tr>
<tr>
<td>Opportunity Unlimited II</td>
<td>Richmond</td>
</tr>
<tr>
<td>Potrero Hill Neighborhood House Social Development Center</td>
<td>Potrero Hill</td>
</tr>
<tr>
<td>Progress Foundation Rypins Day Treatment</td>
<td>Mission</td>
</tr>
<tr>
<td>Self Help for the Elderly*</td>
<td>Richmond</td>
</tr>
<tr>
<td>The Janet Pomeroy Center**</td>
<td>Lakeshore</td>
</tr>
</tbody>
</table>

* Serves adults with dementia/Alzheimer’s Disease  
** Serves adults with developmental disabilities

There are also nine Adult Day Health Centers in San Francisco, licensed by the California Department of Public Health. Adult Day Health Centers are distinctly separate programs from Adult Day Care, since they provide health services like physical therapy and skilled nursing and can accept Medi-Cal for payment. Eight of these nine Adult Day Health Centers serve seniors with dementia/Alzheimer’s.

Exhibit 2: Licensed Adult Day Health Centers in San Francisco

<table>
<thead>
<tr>
<th>Adult Day Health Center</th>
<th>SF Neighborhood</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bayview Hunters Point Adult Day Health Care Center*</td>
<td>Bayview / Hunter’s Point</td>
</tr>
<tr>
<td>Circle of Friends Adult Day Health Care*</td>
<td>Japontown / Fillmore</td>
</tr>
<tr>
<td>Golden State Adult Day Health Care*</td>
<td>Outer Richmond / Ocean Beach</td>
</tr>
<tr>
<td>L’Chaim Adult Day Health Care</td>
<td>Sunset</td>
</tr>
<tr>
<td>Self Help for the Elderly Adult Day Services*</td>
<td>Richmond</td>
</tr>
<tr>
<td>SteppingStone Golden Gate Day Health*</td>
<td>Tenderloin</td>
</tr>
<tr>
<td>SteppingStone Mabini Day Health*</td>
<td>SOMA</td>
</tr>
<tr>
<td>SteppingStone Mission Creek Day Health*</td>
<td>Mission Bay</td>
</tr>
<tr>
<td>SteppingStone Presentation Day Health*</td>
<td>Tenderloin/Union Square</td>
</tr>
</tbody>
</table>

* Serves adults with dementia/Alzheimer’s Disease

C. Impact to Current Patients and Community

Approximately seventy patients may be impacted by the change in licensure at Swindells Alzheimer’s Day Program. CPMC has reported that there are no anticipated changes to the services provided or funding for services due to the licensure change. Since IOA has historically operated the program, and will continue to do so following the licensure change, participants should not experience any changes in services or the level of care provided. However, the location of the Alzheimer’s Day Program is still being determined as IOA is looking for a new space to relocate the program. Depending on where the relocation occurs, concerns around accessibility or transportation to the new program could arise from patients and their families. It is also unclear whether a new location will be up and running prior to the closure of the CPMC’s California campus, which could result in a loss or gap in services. If a suitable location is ready prior to early 2019, DPH believes that there may not be a detrimental impact since IOA has historically managed the program and there will be no gap in services for the

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3 California Department of Aging: [https://www.aging.ca.gov/ProgramsProviders/ADHC-CBAS/Program_Overview.aspx](https://www.aging.ca.gov/ProgramsProviders/ADHC-CBAS/Program_Overview.aspx)  
4 The representative from L’Chaim Adult Day Health Care Representative on 6/20/18 indicated they do not care for seniors with Alzheimer’s/dementia and only cater to Russian speakers.
current participants. However, due to the lack of information regarding the new location and timeline, DPH is unable to make a recommendation about the impact on the community and City’s healthcare services. If the program were to close, this would be a detrimental impact given the importance of the program and the limited number of Adult Day Programs that serve a population with dementia or Alzheimer’s.

III. CLOSURE OF SWINDELLS ALZHEIMER’S RESIDENTIAL CARE FACILITY

A. Overview of Swindells Alzheimer’s Residential Care Facility Closure

The Irene Swindells Alzheimer’s residential program provides 24/7 care for patients living with moderate to severe dementia who require assistance with activities of daily living such as eating, feeding, dressing, and bathing. The program is located on the third floor of the East California campus of CPMC. The program has 24 patient beds and has operated at full capacity for the past 20 years since opening in 1997. The Swindells program is unique, as there are no other hospital-based residential units for Alzheimer’s disease/dementia patients in the City or surrounding counties, and possibly in the state of California.

The Swindells Alzheimer’s residential care program is proposed to close by the end of 2018, but no earlier than September 30, 2018. CPMC has reported that it has been working with Elder Care Alliance (ECA) to establish a new unit (Oasis) at the ECA AlmaVia campus located in District 7 near Park Merced and Oceanview to care for residents with moderate to advanced stages of dementia and Alzheimer’s disease. There will be 14 new beds available at the Oasis unit at ECA’s AlmaVia. As of July 11, 2018, remodeling for the Oasis Unit is complete and 12 residents have voluntarily decided to move to AlmaVia. Two Swindells residents are planning to move to CPMC’s Coming Home Hospice in mid-July.

Elder Care Alliance is a non-profit organization serving older adults and families in California for approximately 20 years. ECA operates five older adult communities: Mercy Retirement and Care Center, AlmaVia of San Francisco, AlmaVia of San Rafael, AlmaVia of Camarillo, and The Villa at San Mateo. ECA communities offer a range of services including: assisted living, memory care, skilled nursing, and independent living.

B. Residential Care Facilities for the Elderly

One in ten people over the age of 65 and one in three people over the age of 85 have Alzheimer’s. By 2050, there will be approximately 14 million people in the US living with the disease. Alzheimer’s disease has become one of the top 10 leading causes of death in America, and is the only cause that cannot be prevented or cured. The Alzheimer’s Association estimates that approximately 27,000 adults in San Francisco over the age of 55 will have Alzheimer’s disease by 2030. For many with Alzheimer’s and dementias, care is provided at home by unpaid family caregivers. In the US, 16 million adult family caregivers provided care to someone with Alzheimer’s disease or other dementias in 2015. However, some people with Alzheimer’s or other dementias require more intensive care than can be provided at home.

Residential Care Facilities for the Elderly (RCFEs), also called “Assisted Living Facilities” or “Board and Care homes,” are non-medical facilities that provide personal care assistance, meals, housing, supervision, storage and distribution of medication. These facilities are typically private pay. Some RCFEs can obtain Dementia Waivers from the California Department of Social Services to provide specialized memory care and services for dementia or Alzheimer’s patients by fulfilling various requirements (i.e. preventing wandering). If an RCFE does not have a

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1 Alzheimer’s Association Facts: https://www.alz.org/facts/overview.asp
3 Alzheimer’s Association Facts: https://www.alz.org/facts/overview.asp
Dementia Waiver, residents who receive a dementia/Alzheimer’s diagnosis may need to move to a specialized facility – an RCFE with memory care or a skilled nursing facility.

As of July 2018, there are 66 licensed RCFEs in San Francisco, which operate 3,070 beds. Approximately 45 RCFEs have a dementia waiver through CDSS. In June 2018, DPH contacted 13 RCFEs in San Francisco that advertise memory care units specifically for dementia or Alzheimer’s patients to understand occupancy rates and the number of memory care beds available (Exhibit 3). Of the 13 RCFEs in this sample, all indicated high occupancy rates and at least 20 percent of all RCFE beds are dedicated for memory care patients (322 beds).

Exhibit 3: Sample of RCFEs with Memory Care Units

<table>
<thead>
<tr>
<th>Residential Care Facility for the Elderly Advertising Memory Care</th>
<th>Total Beds (N)</th>
<th>Occupancy Rate (%)</th>
<th>Memory Care Beds (N)</th>
<th>Occupancy Rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providence Place</td>
<td>34</td>
<td>100</td>
<td>34</td>
<td>100</td>
</tr>
<tr>
<td>Alma Via of San Francisco</td>
<td>175</td>
<td>-</td>
<td>41</td>
<td>100</td>
</tr>
<tr>
<td>Buena Vista</td>
<td>87</td>
<td>82</td>
<td>17</td>
<td>100</td>
</tr>
<tr>
<td>Sagebrook Senior Living</td>
<td>150</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>Victorian Manor</td>
<td>100</td>
<td>90</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>The Village at Hayes Valley*</td>
<td>103</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cypress at Golden Gate</td>
<td>138</td>
<td>98</td>
<td>17</td>
<td>100</td>
</tr>
<tr>
<td>Coventry Place</td>
<td>193</td>
<td>85</td>
<td>48</td>
<td>95</td>
</tr>
<tr>
<td>The Avenue (the Promenade)</td>
<td>145</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Rhoda Goldman Plaza</td>
<td>150</td>
<td>100</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Autumn Glow</td>
<td>15</td>
<td>-</td>
<td>15</td>
<td>n/a</td>
</tr>
<tr>
<td>The Sequoias</td>
<td>300</td>
<td>96</td>
<td>20</td>
<td>96</td>
</tr>
<tr>
<td><strong>Total Beds</strong></td>
<td><strong>1,590</strong></td>
<td>-</td>
<td><strong>322</strong></td>
<td>-</td>
</tr>
</tbody>
</table>

*License pending  
** - indicates that facility staff were unavailable or choose not to provide information

C. Impact to Current Patients and Staff

As of early June 2018, there were 15 residents remaining in the Swindells program (Exhibit 4). According to CPMC, the average length of stay at Swindells is approximately 3.5 years, with many residents transitioning to hospice care towards the end of life.

Exhibit 4: Swindells Demographic Breakdown, N=15 current residents

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>70-79 years</td>
<td>3</td>
<td>20%</td>
</tr>
<tr>
<td>80-89 years</td>
<td>7</td>
<td>47%</td>
</tr>
<tr>
<td>90-99 years</td>
<td>4</td>
<td>27%</td>
</tr>
<tr>
<td>100+ years</td>
<td>1</td>
<td>7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian</td>
<td>4</td>
<td>27%</td>
</tr>
<tr>
<td>African American</td>
<td>3</td>
<td>20%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>8</td>
<td>53%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex/Gender</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>9</td>
<td>60%</td>
</tr>
<tr>
<td>Male</td>
<td>6</td>
<td>40%</td>
</tr>
</tbody>
</table>
**Patient Costs**

CPMC has indicated that the current residents’ rates will remain fixed even after the transfer to ECA AlmaVia of San Francisco. If there are cost differentials between a residents’ rates that they were paying at CPMC and ECA’s typical costs, CPMC will subsidize these amounts for as long as necessary for their current residents that choose to move to Oasis. Therefore, DPH concludes that there should be no impact to residents’ costs for the Alzheimer’s care between CPMC and ECA.

**Staff Impacts**

There are 16 CPMC employees (14 C.N.As, 1 LVN, 1 coordinator) who are expected to be affected by the closure of Swindells Alzheimer’s Residential Care Facility program. CPMC has reported that all employees impacted from this closure will be placed in positions that are comparable.

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**D. Impact to San Francisco**

With the closure of the Swindells Alzheimer’s Residential care unit, there will be a net loss of 10 RCFE beds serving individuals with dementia or Alzheimer’s. Residential Care Facility for the Elderly beds have been declining in the City over the past several years. These declines are likely due to closures of smaller RCFEs (also known as Board and Care homes). In March 2018 DPH conducted interviews with a few operators of small RCFEs who noted financial and labor challenges due to the high cost of doing business, limited revenue from low-income clients using SSI, and the high cost of living in San Francisco. With a growing aging population and, therefore, increase in the number of residents with Alzheimer’s, a loss of RCFE beds in the City will have a negative impact in the long-term.

Currently at Swindells, patient rates are all-inclusive at $6,600 per month for a shared room and $8,700 for a private room. Swindells also offers a subsidy program for residents who may have difficulty paying (up to 60% of the cost). Currently there are four residents with a subsidy. DPH is not aware of any other facilities in San Francisco that provide a level of subsidy to offset a residents’ costs if they do not have the ability to pay. With the closure of Swindells, there will be even greater disparity for lower-to-middle income people who may not be able to afford rates at other memory care units at RCFEs.

CPMC has provided a viable and cost-neutral solution for the current residents at Swindells, which will ensure patients and families have a similar level of care and no additional costs at ECA. However, with the loss of 10 residential care facility beds serving dementia/Alzheimer’s patients, DPH believes this closure will have a detrimental impact on healthcare services in San Francisco.
IV. TRANSFER IN MANAGEMENT FROM CALIFORNIA PACIFIC MEDICAL CENTER TO SUTTER PACIFIC MEDICAL FOUNDATION

A. Overview of Management Transfer

Sutter Health is a not-for-profit health system headquartered in Northern California, providing healthcare services across California. Sutter Health has 24 hospitals, five medical foundations, and over 5,500 physicians as part of their Sutter medical network.

California Pacific Medical Center (CPMC) is Sutter Health’s hospital affiliate in San Francisco. As a tertiary referral center, CPMC provides a wide variety of services, including acute, post-acute and outpatient hospital care, home care and hospice services, preventive and complementary care, and health education at four campuses across San Francisco – California, Pacific, Davies, and St. Luke’s. Sutter Pacific Medical Foundation (SPMF) is Sutter Health’s physician foundation affiliate in San Francisco, Marin, and Sonoma counties. SPMF has over 240 doctors that provide primary and specialty professional services throughout clinic locations. Many SPMF doctors provide physician services at CPMC’s hospital campuses.

In its Prop Q notices, CPMC has indicated five outpatient departments at CPMC will be transferring management to SPMF across three campuses. California Pacific Medical Center noted that these transfers in management are planned due to the opening of the new hospitals and medical office building at Van Ness/Geary in 2019 and Mission/Bernal campuses in 2018.

Breast Health/Mammography Center at St. Luke’s campus
- Performs screening and diagnostic mammograms, breast ultrasounds, and biopsy procedures
- Expected transfer on August 5, 2018
- This clinic will be located at the CPMC Moneagle Medical Office located on the St. Luke’s campus

Non-Invasive Cardiology at St. Luke’s campus
- Performs echocardiograms and EKGs
- Expected transfer on August 5, 2018
- This clinic will be located at St. Luke’s campus

Diabetes Centers at St. Luke’s and California campuses
- Provides health education for prediabetes, Type 1 and Type 2 diabetes, and gestational diabetes
- CPMC is still determining where the California Campus Diabetes Center will be located. The expected transfer date is to be determined, but no earlier than July 15, 2018

Outpatient Psychiatry Clinic at Pacific campus
- Provides outpatient professional psychiatry services by resident and attending physicians
- Expected transfer date is still to be determined, but no earlier than May 1, 2019
- This clinic will be located at the CPMC Davies Campus
B. Impact to Patients, Staff, and Community

There are 7,497 patients impacted by this transfer - 5,802 patients at St. Luke’s, 292 patients at Pacific campus, and 1,403 patients at California campus. CPMC has reported that there will be no reduction in services provided at these outpatient departments due to the management transfer. Sutter Pacific Medical Foundation will continue to care for patients served at each outpatient department that CPMC operates today, and will continue to contract with the same insurances currently accepted by CPMC. CPMC has reported that SPMF physicians already provide services at CPMC campuses, both are non-profit affiliates with Sutter Health, and services, payor mix, and staffing models are not changing due to the transfer.

There are 15 staff (clinicians, non-clinicians, and technicians) affected by the transfer in management across the CPMC campuses: St. Luke’s – 5, Pacific – 1, and California – 9. Five staff are moving from CPMC to SPMF, two staff will remain with SPMF, and the location of eight other employees is still to be determined. CPMC has reported that they will work together with SPMF and the affected employees in an effort to find comparable jobs within CPMC, SPMF or other Sutter affiliates.

V. CONCLUSION

Based on the information provided in Sections II, III, and IV, the Department of Public Health recommends to the Health Commission the following regarding CPMC’s changes in 2018:

1) Swindells Alzheimer’s Day Program Licensure Change: If a suitable new location is ready prior to the closure of CPMC’s California campus in 2019, DPH believes that there may not be a detrimental impact since IOA has historically managed the Swindells Alzheimer’s Adult Day Program and there will be no gap in services for the current participants. If the program were to close, this would be a detrimental impact given the importance of the program and the limited number of Adult Day Programs that serve a population with dementia or Alzheimer’s in San Francisco.

2) Closure of Irene Swindells Residential Care Facility: The closure will result in a loss of 10 RCFE beds in San Francisco, which are an important long-term care option for residents with dementia/Alzheimer’s. San Francisco’s senior population and population with dementia or Alzheimer’s is projected to grow in future years. The closure of the CPMC Swindells Residential Care Facility will have a detrimental impact on the health care services in the community.

3) Transfer in Management from CPMC to Sutter Pacific Medical Foundation for Five Outpatient Departments: CPMC has reported that there will be no reduction in services at the five outpatient departments due to the management transfer. However, additional information may be necessary to determine the impact of this change such as the new location of the California Campus Diabetes Center and the ability and commitment from Sutter Health to retain these services in the future.

Three draft resolutions, one for each change listed above, are attached for your consideration.
HEALTH COMMISSION  
CITY AND COUNTY OF SAN FRANCISCO  
Resolution No. 18-3

DETERMINING THAT THE CHANGE IN LICENSURE OF THE CPMC IRENE SWINDELLS ADULT DAY PROGRAM FROM BOTH CPMC AND INSTITUTE ON AGING TO SOLELY THE INSTITUTE ON AGING WILL/WILL NOT HAVE A DETRIMENTAL IMPACT ON HEALTH CARE SERVICES IN THE COMMUNITY.

WHEREAS, California Pacific Medical Center (CPMC), a non-profit hospital and member of Sutter Health, operates acute care hospitals at four campuses in San Francisco: California Campus; Davies Campus; Pacific Campus; and St. Luke’s Campus; and

WHEREAS, The Irene Swindells Adult Day Program (Swindells) is located on the California campus, and serves participants with mild to moderate Alzheimer’s and dementia; and

WHEREAS, Swindells serves approximately 30 participants on any given day and has approximately 70 total unduplicated participants; and

WHEREAS, There are only two licensed Adult Day Care programs in San Francisco that serve participants with Alzheimer’s disease/dementia – Swindells and Catholic Charities of San Francisco; and

WHEREAS, These programs provide a range of social and psychological support services that promote the quality of life for people with Alzheimer’s disease/dementia, and provide respite for families and caregivers; and

WHEREAS, Swindells is licensed under both CPMC and the Institute on Aging (IOA), with IOA managing the program and services and CPMC providing the facility space and support only; and

WHEREAS, On April 15, 2018, in compliance with the Community Health Care Planning Ordinance (Proposition Q), CPMC notified the Health Commission that it plans to change licensure of the Irene Swindells Adult Day Program to solely IOA; and

WHEREAS, IOA is attempting to locate a space to relocate the Swindells program and plans to continue the program with similar capacity and services for participants; and

WHEREAS, In accordance with Proposition Q, the San Francisco Health Commission held public hearings on July 17, 2018 and August 21, 2018, regarding the change in licensure for the Irene Swindells Adult Day Program; and

NOW, THEREFORE, BE IT RESOLVED, that Adult Day Care services are important for seniors with Alzheimer’s disease/dementia to prolong institutionalization and provide much needed respite to caregivers and families; and

FURTHER RESOLVED, IOA should continue the Swindells program in a similar or expanded capacity and update the Health Commission once a location is confirmed; and

FURTHER RESOLVED, this change in licensure of the Irene Swindells Adult Day Program from CPMC and IOA to solely IOA will/will not have a detrimental impact on the health care services in the community.
I hereby certify that the San Francisco Health Commission at its meeting of August 21, 2018 adopted the foregoing resolution.

____________________________________
Mark Morewitz
Executive Secretary to the Health Commission
DETERMINING THAT THE CLOSURE OF THE CPMC IRENE SWINDELLS ALZHEIMER’S RESIDENTIAL CARE PROGRAM WILL HAVE A DETRIMENTAL IMPACT ON HEALTH CARE SERVICES IN THE COMMUNITY.

WHEREAS, California Pacific Medical Center (CPMC), a non-profit hospital and member of Sutter Health, operates acute care hospitals at four campuses in San Francisco: California Campus; Davies Campus; Pacific Campus; and St. Luke’s Campus; and

WHEREAS, the Irene Swindells Alzheimer’s Residential Care Program (Swindells) is located on the California campus, and serves residents with moderate to severe Alzheimer’s and dementia often through the end of life; and

WHEREAS, On April 15, 2018, in compliance with the Community Health Care Planning Ordinance (Proposition Q), CPMC notified the Health Commission that it plans to close Swindells by the end of 2018; and

WHEREAS, CPMC has been working with Elder Care Alliance (ECA) to open 14 new beds in a new neighborhood called the Oasis at the ECA AlmaVia of San Francisco campus;

WHEREAS, all Swindells residents will be given the option to move to the Oasis neighborhood of ECA AlmaVia of San Francisco campus with no changes to their patient rates for the duration of their stay; and

WHEREAS, the closure of the Swindells Alzheimer’s Residential care unit will result in a net loss of 10 RCFE beds in San Francisco serving patients with dementia or Alzheimer’s; and

WHEREAS, In accordance with Proposition Q, the San Francisco Health Commission held public hearings on July 17, 2018 and August 21, 2018, regarding the closure of the CPMC Irene Swindells Alzheimer’s Residential Care Program; and

NOW, THEREFORE, BE IT RESOLVED, that the CPMC Swindells closure will have a detrimental impact on the health care services in the community; and be it

NOW, THEREFORE, BE IT RESOLVED, that the CPMC Swindells closure will have a detrimental impact on the health care services in the community; and be it

NOW, THEREFORE, BE IT RESOLVED, that the CPMC Swindells closure will have a detrimental impact on the health care services in the community; and be it

I hereby certify that the San Francisco Health Commission at its meeting of August 21, 2018 adopted the foregoing resolution.

__________________________
Mark Morewitz
Executive Secretary to the Health Commission
HEALTH COMMISSION
CITY AND COUNTY OF SAN FRANCISCO
Resolution No. 18-5

DETERMINING THAT THE CHANGE IN MANAGEMENT OF FIVE OUTPATIENT DEPARTMENTS FROM CALIFORNIA PACIFIC MEDICAL CENTER TO SUTTER PACIFIC MEDICAL FOUNDATION WILL/WILL NOT HAVE A DETRIMENTAL IMPACT ON HEALTH CARE SERVICES IN THE COMMUNITY.

WHEREAS, California Pacific Medical Center (CPMC), a non-profit hospital and member of Sutter Health, operates acute care hospitals at four campuses in San Francisco: California Campus; Davies Campus; Pacific Campus; and St. Luke’s Campus; and

WHEREAS, Sutter Pacific Medical Foundation is Sutter Health’s physician foundation affiliate in San Francisco, Marin and Sonoma counties, and has over 240 physicians with some providing services at CPMC hospital campuses; and

WHEREAS, CPMC will be closing two of the four campuses – Pacific and California – with the expected opening of its new VanNess-Geary campus in 2019; and

WHEREAS, On April 15, 2018, in compliance with the Community Health Care Planning Ordinance (Proposition Q), CPMC notified the Health Commission that it plans to transfer management of the five outpatient departments to its physician affiliate, SPMF to prepare for the move to the new VanNess-Geary campus:

- Breast Health/Mammography Center at St. Luke’s campus
- Non-Invasive Cardiology at St. Luke’s campus
- Diabetes Centers at St. Luke’s and California campuses
- Outpatient Psychiatry Clinic at Pacific campus; and

WHEREAS, In accordance with Proposition Q, the San Francisco Health Commission held public hearings on July 17, 2018 and August 21, 2018, regarding the various outpatient departments’ change in management from CPMC to SPMF; and

NOW, THEREFORE, BE IT RESOLVED, that this change in management will/will not have a detrimental impact on the health care services in the community; and be it

FURTHER RESOLVED, That since both CPMC and SPMF are Sutter Health affiliates, physicians from SPMF provide services on CPMC’s campuses, and there are no changes to staffing models, payor mix, or services, it should not impact current or future patients needing care at these five outpatient clinics/departments.

I hereby certify that the San Francisco Health Commission at its meeting of August 21, 2018 adopted the foregoing resolution.

Mark Morewitz
Executive Secretary to the Health Commission