



# SAN FRANCISCO

DEPARTMENT OF PUBLIC HEALTH



ANNUAL REPORT  
2018-2019

## 2 MISSION AND VISION

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### OUR MISSION

Protecting and promoting health and well-being for all in San Francisco.

### OUR VISION









Making San Francisco the healthiest place on earth.

### The San Francisco Department of Public Health shall:

- Assess and research the health of the community
- Develop and enforce health policy
- Prevent disease and injury
- Educate the public and train health care providers
- Provide quality, comprehensive, culturally proficient health services
- Ensure equal access to all

The San Francisco Department of Public Health (SFDPH) is committed to ensuring our patients, clients and colleagues are supported and informed in the face of uncertainty with healthcare.

SFDPH's commitment to provide quality health care and services for all San Franciscans has not changed, regardless of immigration or insurance status. We want all of our patients and clients to continue to seek services with their SFDPH providers, including care at our clinics and hospitals.

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## 4 MESSAGE FROM THE DIRECTOR

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Grant Colfax, MD

I am pleased to present the San Francisco Department of Public Health's (DPH) Annual Report for Fiscal Year 2018-2019 – highlighting the accomplishments of our programs and services throughout the City. I am honored to serve as the Director of Health, supporting the excellent work of the Department while ensuring that we meaningfully engage with and respond to the communities we serve. This past year has been action-packed, with many significant accomplishments and progress on critical issues for our patients, clients, staff and the City.

In May 2019, the Health Commission adopted 2019 Community Health Needs Assessment (CHNA). This assessment is an important tool in the ongoing community health improvement process. The CHNA provides data enabling identification of priority issues affecting health and is the foundation for citywide health planning processes including the Community Health Improvement Plan.

Our Behavioral Health System began a metamorphosis. In March 2019, Mental Health Reform in San Francisco launched with the mayoral appointment of Dr. Anton Nigusse Bland as director. Dr. Nigusse Bland worked within the Department and with the broader behavioral health community to define the vision, goals, and target population for the reform effort. Building on this initial charter and framework, the Mental Health Reform team began to make recommendations and to take actions to launch transformative reform.

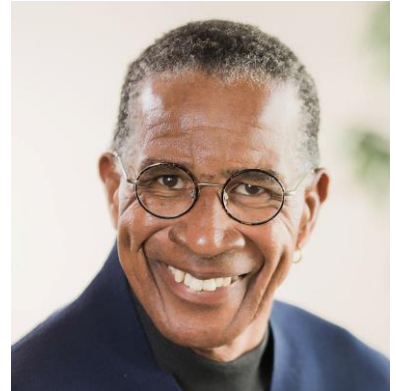
In March 2019, the San Francisco Health Commission unanimously adopted a resolution recognizing incarceration as a public health issue. Looking ahead, the Department is developing a set of recommendations to support citywide efforts to prevent and respond to issues related to incarceration.

This year also brought the troubling discovery of patient abuse by some staff members at Laguna Honda Hospital. Once detected, we informed our patients and their families, regulators and the San Francisco community. Leadership and staff have worked diligently to improve the reporting of conduct, medication management, culture and staff supervision. The work already is showing improvements, and the hospital is making significant progress to ensure safe and compassionate care for every resident.

This Annual Report also showcases multiple highlights from the Population Health Division and San Francisco Health Network. They demonstrate our dedication and tremendous work towards improving health in San Francisco. DPH remains steadfastly committed to providing quality health care and services for all San Franciscans.

Everyone at DPH is essential to our success. I thank all of our dedicated staff, community and city partners, and the Health Commission for their contributions, partnership, and service to the health of San Francisco. I am extremely proud of the Department's accomplishments this year, and I look forward to the important work ahead.

Grant Colfax, MD  
Director of Health



James E. Loyce, Jr., M.S.

The past year has been one of transition and evolution for the San Francisco Department of Public Health (DPH). The Department aptly dealt with the departure of several individuals in key executive leadership positions, including Barbara Garcia, the former Director of Health, who left the DPH after an impactful eight-year tenure. The Health Commission recognizes Ms. Garcia as an insightful and compassionate leader who greatly contributed to the many diverse San Francisco public health communities.

The Commission is grateful to Greg Wagner, who accepted the tremendous responsibility of Acting Director of Health while continuing in his role as Chief Financial Officer. We also wish to express our thanks to the Executive Staff, and all the DPH staff who worked as an effective team during this time.

We have been very pleased to welcome Dr. Grant Colfax back to the DPH as the new Director of Health. He brings many years of innovative leadership at the local and national level. The Health Commission has worked closely with him during his first months in this vital role.

The Health Commission is proud that the DPH continues to be one of the best public health departments in the nation due to the many dedicated individuals who work hard each day to deliver excellent services to those most in need.

During the year, the DPH continued its extensive planning and preparations to implement a San Francisco Health Network system-wide electronic health record, which was launched in August 2019. The Department has also worked diligently to improve its behavioral health services, including substance use services, to better meet the needs of the complex client populations in San Francisco. This includes an expansion of syringe disposal services to ensure used syringe litter is dealt with safely and swiftly.

We are deeply appreciative of the leadership of the Mayor and the Board of Supervisors on issues related to public health and also acknowledge the importance of the many productive partnerships between the Department of Public Health (DPH) with other City Departments and community-based organizations.

In 2019, the Commission bid farewell to David Sanchez, Jr., Ph.D, who proudly served as a Health Commissioner for 22 years. We look forward to working with a new Commissioner, to be appointed by Mayor Breed.

As we prepare for the many challenges ahead, it is important to recognize the vast array of incredible services offered through the innovation and commitment of many talented and compassionate individuals making up the San Francisco public health service system.

James E. Loyce, Jr., M.S.  
Health Commission President

## 6 ABOUT SFDPH

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The mission of the San Francisco Department of Public Health (SFDPH) is to protect and promote the health of all San Franciscans. SFDPH is an integrated health department with two primary roles and two major divisions to fulfill its mission:

- Protecting the health of the population, which is the primary responsibility of SFDPH's Population Health Division; and
- Promoting the health of our patients, which is the primary responsibility of the San Francisco Health Network.

SFDPH's central administrative functions, such as finance, human resources, information technology, and policy and planning, support the work of SFDPH's two divisions and promote integration.



### POPULATION HEALTH DIVISION

SFDPH's Population Health Division (PHD) addresses public health concerns, including consumer safety, health promotion and prevention, and the monitoring of threats to the public's health. PHD implements traditional and innovative public health interventions. PHD staff inspect restaurants, promote improved air and water quality, track communicable diseases, and educate San Franciscans about the negative health impacts of tobacco. PHD staff also promote pedestrian safety, participate in an ambitious campaign to eliminate new HIV infections, and provide technical assistance to corner stores to increase healthy food options for residents. PHD contributes to the health of SFDPH's patients by contributing population health data and data analysis to the San Francisco Health Network.

PHD was granted public health accreditation in March of 2017, which specifically focuses on measurement of health department performance against a set of nationally recognized, practice-focused, and evidence-based standards based on the ten essential public health services, as well as management, administration, and governance.



San Francisco  
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

### SAN FRANCISCO HEALTH NETWORK

The SF Health Network (SFHN) comprises the direct health services SFDPH provides to thousands of insured and uninsured residents of San Francisco, including those most socially and medically vulnerable. The San Francisco Health Network is a community of top-rated clinics, hospitals and programs operated by the Health Department. We connect San Franciscans to quality health care. Every year we serve more than 100,000 people in our clinics and hospitals, including Zuckerberg San Francisco General, the only trauma center serving all of San Francisco and northern San Mateo County, and Laguna Honda Hospital and Rehabilitation Center. We provide continuous care for people wherever they are – in clinics, hospitals, at home, in jail or transitional housing. As the city's public health system we also provide emergency, trauma, mental health and substance abuse care to any San Franciscan who needs it.

The Health Network celebrates the city's diversity, serving individuals and families of all backgrounds and identities, regardless of immigration or insurance status. The Health Network is dedicated to empowering all San Franciscans, without exception, to live the healthiest lives possible.

To learn more about San Francisco Health Network and the services we provide, please visit: [www.sfhealthnetwork.org](http://www.sfhealthnetwork.org).

True North is a precise, concise and universal set of ideals which, when taken together provide a compass that describes the DPH's ideal or state of perfection that the department is continually striving towards. True North encompasses a broad scope of work and serves as the basis for strategic planning, guiding leadership in setting priorities and metrics across all levels of the organization. While departmental tactics and strategies may change True North does not change. SFDPH's True North, Mission, and Vision are summarized in the following visual triangle.

The six True North Pillars are:

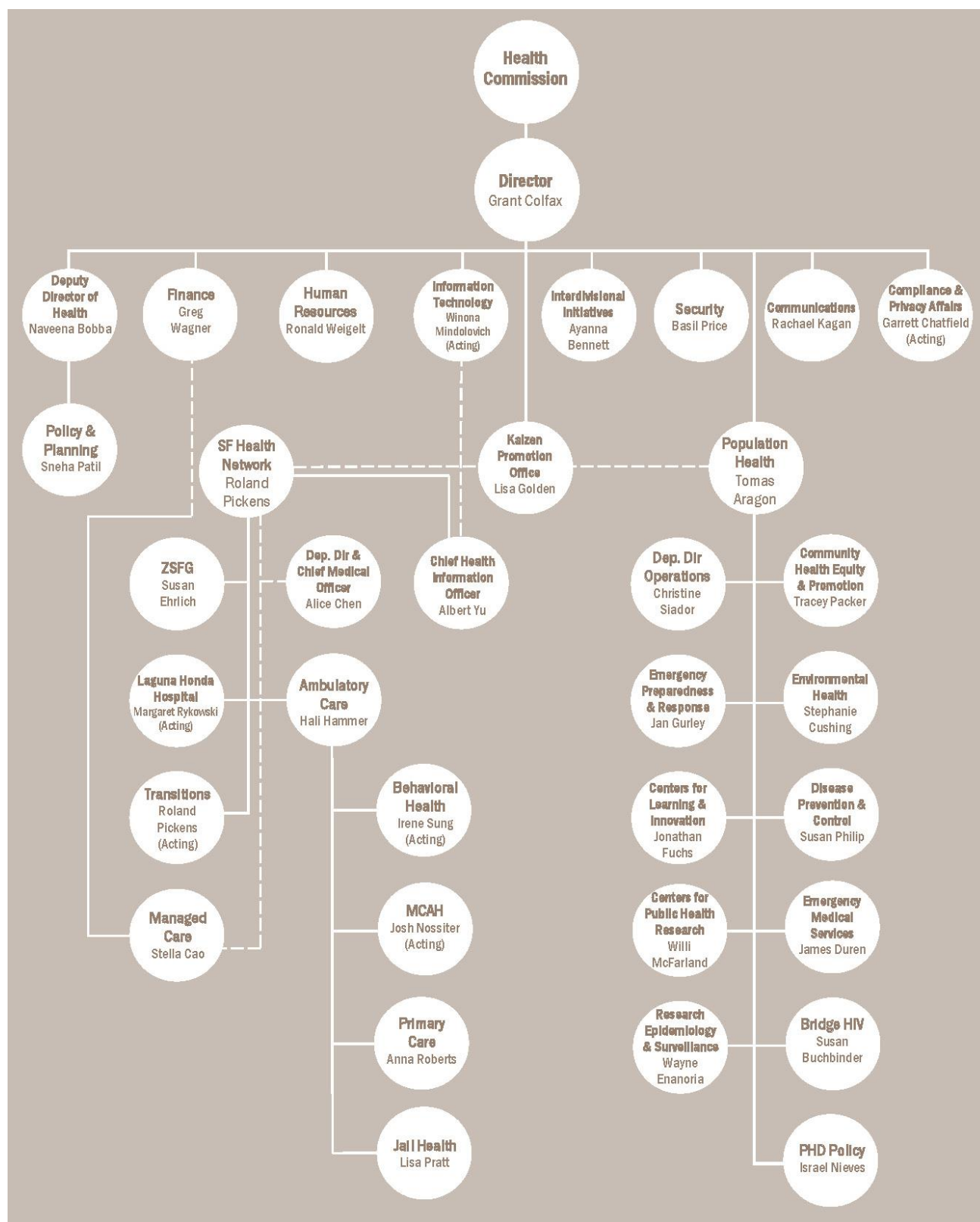
- Safety and Security: Ensure safe environments for our clients, patients, and staff
- Health Impact: Improve the health of the people we serve
- Service Experience: Provide the best experience for the people we serve
- Workforce: Create an environment that respects, values, and invests in all our people
- Financial Stewardship: Ensure transparent and accountable stewardship of resources
- Equity: Eliminate health disparities





## 8 SFDPH ORGANIZATION

SFDPH's dedicated staff help realize the organization's mission of protecting and promoting the health of all San Franciscans. The San Francisco Health Network integrates our delivery system and focuses on providing high quality health care services. The Population Health Division leads SFDPH efforts in health protection, promotion, prevention and disaster readiness.



\*Updated as of June 30, 2019



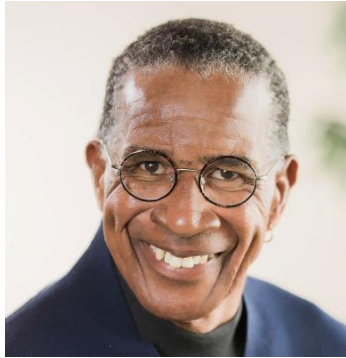
As SFPD's governing and policy-making body, the **San Francisco Health Commission** is mandated by City and County Charter to manage and control the City and County hospitals, to monitor and regulate emergency medical services and all matters pertaining to the preservation, promotion and protection of the lives, health, and mental health of San Francisco residents. The full Health Commission meets on the first and third Tuesday of each month at 4:00 p.m. in Room 300 at 101 Grove Street.

The Health Commission's committee structure consists of:

- The Zuckerberg SF General Joint Conference Committee
- The Laguna Honda Hospital Joint Conference Committee
- The Community and Public Health Committee
- The Finance and Planning Committee

The Health Commission also has designated seats on the following bodies:

- San Francisco Health Plan Board of Directors
- Zuckerberg SF General Foundation Board of Directors
- San Francisco Public Health Foundation Board of Directors
- In-Home Supportive Services Public Authority Governing Board



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

Mr. Loyce is a Public Health and Non-Profit professional and advocate with over 35 years of experience. He began his career in the Non-Profit Sector in clinical staff positions progressing over time to the role of Executive Director/CEO. His advocacy work included co-founding The Black Coalition on AIDS and serving on numerous Boards of Directors for Non-Profits. He also has been involved in local, state and federal health policy advocacy. In the public sector, Mr. Loyce served the City and County of San Francisco in a variety of senior administrative roles that spanned health policy, budget development and advocacy at local, state and federal levels. He retired from the San Francisco Department of Public Health as a Deputy Director in 2007 after 20 years of service. Since his retirement, he has returned to Public Health and Non-Profit advocacy work serving on a number of San Francisco Bay Area and National Boards. He also is an Organizational Development Consultant to Non-Profits.

Commissioner Loyce was a member of the Community and Public Health Committee and the Zuckerberg San Francisco General Hospital Joint Conference Committee. His Health Commission tenure began in 2016 and ended in 2020.



**Dan Bernal, Vice President**

Commissioner Bernal is Chief of Staff for Speaker of the House Nancy Pelosi. He has dedicated his career to public service, having served in the White House under President Bill Clinton and as a presidential appointee at the U.S. Department of Education. As Congress debated the Affordable Care Act, he supported Speaker Pelosi's efforts to build support for the legislation in California by convening diverse stakeholders and coordinating activities among Bay Area Members of Congress. He continues to serve as a valuable resource to the California Democratic Congressional Delegation, key policy makers, and advocates in the fight to protect and improve the Affordable Care Act. Commissioner Bernal served as board president of AIDS Emergency Fund and spearheaded the creation of Breast Cancer Emergency Fund. He previously served on the board of directors of the Susan G. Komen Breast Cancer Foundation Bay Area Affiliate, the San Francisco AIDS Foundation, and the National AIDS Memorial. He was appointed to the Health Commission in 2017. Commissioner Bernal is chair of the Community and Public Health Committee and is a member of the Finance and Planning Committee.



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

Commissioner Chow is an internal medicine specialist who has been in practice in San Francisco for over forty-five years. He is President and CEO of Jade Health Care Medical Group, affiliated with the Chinese Hospital Health System. Previously he was Executive Director of the Chinese Community Health Care Association, and Chief Medical Officer of the Chinese Community Health Plan. He is co-chair of the Asian American Native Hawaiian and Pacific Islander Diabetes Coalition; member-at-large of the Federation of Chinese American and Chinese Canadian Medical Societies Board of Directors; and founding member of the National Council of Asian Pacific Islander Physicians. He has received numerous awards for his work in health disparities and cultural competency, including the 2008 Alumni Merit Award from St. Louis University School of Medicine, Laureate Award from the American College of Physicians Northern California Chapter (2008), San Francisco Asian Pacific American Heritage Lifetime Achievement Award (2010), and the Silver SPUR award (2012) for enhancing the quality of life and vitality of the San Francisco Bay Area.

Dr. Chow currently chairs the Zuckerberg San Francisco General Hospital Joint Conference Committee and is a member of the Finance and Planning and Laguna Honda Hospital Joint Conference Committees. He is serving his eighth term on the Commission.



**Cecilia Chung**

Commissioner Chung is nationally recognized as a civil rights leader, advocating for HIV/AIDS awareness and care, LGBT equality, and prisoner rights. She is the Senior Strategist of Transgender Law Center and has served on a number of planning bodies, which includes the San Francisco HIV Health Services Planning Council, Transgender Community Advisory Board for UCSF TRANS and the Visioning Change Initiative of the California HIV/AIDS Research Program. She is currently serving on the Presidential Advisory Council on HIV/AIDS.

Commissioner Chung chairs the Finance and Planning Committee and is a member of the Community and Public Health Committee. She was appointed to the Health Commission in 2012.



**Laurie Green, M.D.**

Dr. Green has practiced medicine for 38 years. She is the founding partner of Pacific Women's Obstetrics & Gynecology Medical Group, which was founded in 1989 with the goal of providing state-of-the-art, empathic obstetrics and gynecology care in a woman-run, visually beautiful environment. Dr. Green is also the Founder, President, and Chair of the Board of The MAVEN Project, which engages physicians to volunteer their clinical expertise via telehealth technology to medically under-resourced communities across the country. In addition to Presidency of the California Academy of Medicine and San Francisco Gynecology Society, she has served in board leadership positions in the Brown and Toland Medical Group, the San Francisco Medical Society, the San Francisco Gynecology Society, and the California Academy of Medicine. She has served on the Board of Directors of Brown and Toland Medical Group for the past 16 years, and has been responsible for many initiatives to improve physician communication and quality of care. She is currently Vice-Chair of the OB/GYN Department at California Pacific Medical Center. For many years, she served as a media consultant and on air reporter for medical issues at KTVU and other Bay Area television and radio stations.

Commissioner Green was appointed to the Health Commission in 2018. She is a member of the Zuckerberg San Francisco General Hospital Joint Conference Committee.



**Tessie M. Guillermo**

Ms. Guillermo is the former President and CEO of ZeroDivide, a philanthropy and consultancy that developed innovative digital equity strategies in support of low-income communities. Ms. Guillermo served in this capacity for 13 years. Prior to ZeroDivide, Ms. Guillermo was the founding CEO of the Asian and Pacific Islander American Health Forum, leading this national minority health policy/advocacy organization for 15 years. In recognition of her national leadership, Ms. Guillermo was appointed by President Bill Clinton to serve as an inaugural member of the President's Advisory Commission on Asian Americans and Pacific Islanders. She currently serves as Board Chairwoman for Dignity Health, and serves on the boards of the Marguerite Casey Foundation, the Nonprofit Finance Fund, the Center for Asian American Media and the Smithsonian Museum's Asian Pacific American Center. Ms. Guillermo is an alumnus of the University of California, Berkeley; and California State University East Bay, where she has been awarded recognition as a Distinguished Alumni of the School of Business and Economics.

Commissioner Guillermo was appointed to the Health Commission in 2018. She is a member of the Laguna Honda Hospital Joint Conference Committee.



**Suzanne Giraudo, Ph.D.**

Dr. Giraudo is a psychologist and is the Clinical Director of the California Pacific Medical Center Department of Pediatrics Child Development Center. In addition to her clinical expertise, Dr. Giraudo's professional background includes development, administration, and supervision of pediatric clinical programs, grant administration, and teaching. She is the founder and trustee of the DeMarillac Academy, a Catholic school located in the Tenderloin, serving underserved children and families. Her other professional affiliations include San Francisco Families First Five Commission Chair, Home Away from Homelessness, St Anthony's Pediatric Clinic, Marin Community Pediatric Program, and the Northeast Medical Services Pediatric Clinics. Dr. Giraudo earned her Doctorate in Educational Psychology and Counseling from the University of San Francisco; a Master's degree in education from San Francisco State University, and her Bachelor Arts Degree from the University of San Francisco

Commissioner Giraudo was appointed to the Health Commission in October 2019. She is a member of the Community and Public Health Committee and represents the Commission on the San Francisco General Hospital Foundation Board of Directors.



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

Commissioner Sanchez is Professor Emeritus at University of California, San Francisco. Commissioner Sanchez is a member of the San Francisco General Hospital Joint Conference Committee and the Chair of the Laguna Honda Hospital Joint Conference Committee. He is a member of the San Francisco General Hospital Foundation Board. He has also served on the San Francisco Board of Education and the Community College Board, the San Francisco Police Commission, and is Trustee Emeritus of the San Francisco Foundation. He was appointed to the California Commission on Aging in 2013.

Commissioner Sanchez's tenure on the Health Commission ended March 2019 after serving 22 years as a valued member. He was chair of the Laguna Honda Hospital Joint Conference Committee, a member of the Zuckerberg San Francisco General Hospital Joint Conference Committee, and a member of the San Francisco General Foundation.



**Mark Morewitz, MSW**  
Health Commission Secretary

# FISCAL YEAR 18/19 HIGHLIGHTS

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## 2019 COMMUNITY HEALTH NEEDS ASSESSMENT

On May 21st, 2019, the Health Commission formally adopted the 2019 Community Health Needs Assessment (CHNA). This assessment is an important tool in the ongoing community health improvement process. The CHNA provides data enabling identification of priority issues affecting health and is the foundation for citywide health planning processes including the Community Health Improvement Plan, the San Francisco's Health Care Services Master Plan, the San Francisco Department of Public Health's Population Health Division's Strategic Plan, and each of San Francisco's non-profit hospitals' Community Health Needs Assessments and Hospital Community Benefit Plans. It is also required for Public Health Accreditation.



The 2019 CHNA was completed in collaboration with community partners through the San Francisco Health Improvement Partnership (SFHIP) – a unique cross-sector collaboration with the hospital community benefit leaders, the Hospital Council, and the UCSF Clinical and Translational Science Institute, the Department of Public Health community racial/ethnic coalitions, SF Unified School District, and other stakeholders. Additionally, community groups played a key role to bring the voices of community members to this process. The 2019 CHNA takes a comprehensive look at the health of San Franciscans through an extensive data review of a broad range of variables affecting health outcomes. Through this process, key health needs in San Francisco were identified, and health disparities and inequities were revealed.

The 2019 CHNA included four components- a community health status assessment, an assessment of prior assessments, community engagement, and a health need identification process. Through this process, two foundational issues were identified: Poverty, and Racial Health Inequities—which affect health at every level and must be addressed to improve health for all San Franciscans.

In addition, the 2019 CHNA identified five health needs that heavily impact disease and death in San Francisco – access to coordinated, culturally and linguistically appropriate care and services; food security, healthy eating and active living; housing security and an end to homelessness; safety from violence and trauma; and social, emotional, and behavioral health.

The 2019 CHNA informs the Community Health Improvement Plan in which objectives and strategies to address the health needs and foundational issues are developed. The 2019 CHNA as well as the data pages are available at: [www.sfhip.org](http://www.sfhip.org).



### Mental Health Reform

In March 2019, Mental Health Reform in San Francisco launched with the mayoral appointment of Dr. Anton Nigusse Bland as director. Through this appointment, Mayor London N. Breed sought to identify solutions for behavioral health challenges faced by the City, especially those linked to increasing homelessness. With this charge, the Director of Mental Health Reform worked within the San Francisco Department of Public Health and with the broader behavioral health community to define the vision, goals, and target population for the reform effort. Building on this initial charter and framework, the Mental Health Reform team began to make recommendations and to take actions to launch transformative reform.

Through an in-depth data analysis, the Mental Health Reform team found that approximately 18,000 adults experienced homelessness in San Francisco in fiscal year 2018-19, nearly 4,000 whom also suffer with a history of co-occurring psychosis and substance use disorders. Thirty-five percent of the population identifies as Black/African American, compared to 5 percent of the population of San Francisco. Another notable characteristic is that 95 percent of the cohort has a history of alcohol use disorder, which far exceeds the other common substance use disorders: methamphetamine use (54%) and opiate use disorder (29%). The team concluded that this vulnerable population would be the focus of reform efforts and that solving for these highest-risk, highest-need individuals would improve access and flow throughout the behavioral health system.



### Reform Framework

After many meetings with key stakeholders, two community engagement sessions, and a literature review of the past 10 years of related reports and strategic planning sessions, the Director of Mental Health Reform identified five key areas for reform:

1. Improve Care Coordination
2. Expand Service Sites
3. Increase Harm Reduction Services
4. Develop the Behavioral Health Workforce
5. Bolster Public Awareness and Advocacy

In 2019, the Mental Health Reform team has helped lay the foundation for a transformation of the behavioral health care system in San Francisco so that it better serves the most vulnerable people on our streets. Among the early milestones of Mental Health Reform was the development of the new behavioral health bed availability website, [FindTreatmentSF.org](https://www.findtreatment.org), symbolizing a new era of transparency for DPH. Identifying the target population of 4,000 people facilitated the creation of a DPH, Department of Homelessness and Supportive Housing (HSH) and Human Services Agency (HSA) shared priority list of 237 people who are the first cohort to receive intensive interagency coordination services.

### Looking Ahead

In its second year, the team expects to collaborate with other City leaders and departments on the implementation of the Mental Health SF legislation and on the quality improvement work in DPH Behavioral Health Services, while also championing some of Dr. Nigusse Bland's own, complementary recommendations for reform. This approach is designed to ensure the success of Mental Health SF, the transformation of BHS, and most importantly the stability and wellness of our population experiencing homelessness, mental illness and substance use disorder. As always, Dr. Nigusse Bland and the Mental Health Reform team will conduct this work with the guiding principles of equity, transparency and accountability.

## Incarceration as a Public Health Issue

On March 19, 2019, the San Francisco Health Commission unanimously adopted a resolution recognizing incarceration as a public health issue. Through the resolution, the Health Commission directs the San Francisco Public Health Department (SFPDH) to develop proposals to prevent incarceration, improve data collection and analysis, expand discharge planning and coordination with programs within and outside the department that serve the populations most impacted by incarceration.

The resolution recognizes that incarceration impacts the health and wellbeing of those imprisoned along with their families and communities, with particular impact on low-income communities, people of color, including African American men, cisgender and transgender women, transitional age youth (18 to 25 years-old) and people experiencing homelessness. These groups are disproportionately represented in the San Francisco County Jail (SFCJ) population. Approximately 40 percent of those incarcerated in SFCJ are homeless or marginally housed. Transitional age youth are 17 percent of the jail population. Black/African-Americans represent 38 percent of those booked at the SFCJ, comprise approximately 50 percent of those who remain incarcerated in SFCJ, and are the racial group that is incarcerated in the SFCJ for the longest duration.

*“Criminalization of homelessness and poverty, substance use disorders, and mental illness leads to incarceration”*

**- SF Health Commission Resolution**



Behavioral Health Services staff meeting

There are multiple social determinants of health that affect criminal justice involvement. **Structural and institutional racism** has led to over-policing of black communities and disproportionate involvement of people of color throughout the justice system. **Environmental toxins** such as lead exposure in childhood can cause developmental delays, behavioral issues, and criminal behavior. **Adverse Childhood Experiences**, such as exposure to violence in the community, homelessness, or incarceration of a parent, can lead to behavioral issues in school and beyond, substance abuse, as well as mental health disorders.

SFPDH is committed to working with departments and community agencies across the city to provide health interventions for individuals incarcerated that are dealing with trauma and other health needs. In 2018, approximately 22 percent of individuals incarcerated in SFCJ at any given time are diagnosed as seriously mentally ill (SMI); and 80 percent of bookings in SFCJ involved individuals who reported substance use. The Department's Jail Health Services (JHS) partners with the SF Sheriff's Department to provide medical and behavioral health care to individuals in the custody. In 2017-2018, JHS served 11,964 unique individuals who completed a medical intake while incarcerated at SFCJ.



Jail Health Services staff

## Looking Ahead

Looking ahead, the Department is developing a set of recommendations to support citywide efforts to prevent and respond to issues related to incarceration. This work will focus on strategies within DPH's control to prevent individuals from being incarcerated, including enhancing and expanding post-release discharge planning, linkage to relevant services in the community, and other reentry services.



# 16 FISCAL YEAR 18/19 HIGHLIGHTS

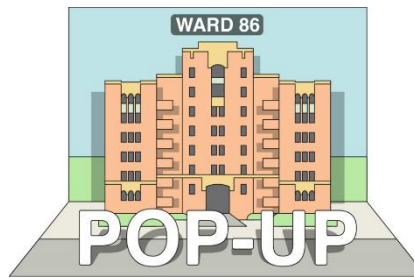
## BUILDING INFRASTRUCTURE



### ADULT URGENT CARE GRAND OPENING

On February 12, 2019, Zuckerberg San Francisco General (ZSFG) celebrated the opening of the relocated Adult Urgent Care Center in the first floor of Building 5, unit 1E. Mayor London Breed led the ribbon-cutting ceremony to preview the opening. In addition to the ZSFG community, DPH and SF Public Works leaders and staff, and Patient Advisory Committee members participated and toured the clinic. The newly expanded clinic has 12 patient rooms – 3 additional rooms than the previous space. The \$1.8 million capital project was partially funded by the 2016 Public Health and Safety Bond (Prop A) and the City's Capital Budget. The clinic will provide same day services for adults 18 years and older in San Francisco needing same-day urgent medical care for illnesses or injuries that are not life-threatening.

The clinic officially opened for patients on Wednesday, February 21. Many thanks to the Facilities, Capital and Urgent Care Center teams for the wonderful accomplishment.



### POSITIVE HEALTH ONSITE PROGRAM- UNSTABLY HOUSE POPULATIONS (POP-UP)

ZSFG has been at the forefront of groundbreaking, compassionate care for people with HIV and AIDS. POP-UP (Positive health Onsite Program - Unstably housed Populations) is Ward 86's newest innovation, perfectly focused on where we are in the epidemic today. POP-UP aims to reduce health disparities among homeless and unstably housed individuals living with HIV in San Francisco. The innovative clinic attempts to provide a different model of care for those who are unstably housed and have high viral loads by allowing drop-in (no appointment) primary care for these patients at Ward 86 and providing a multidisciplinary team to help meet each enrolled patients' unique life and medical needs.



### EXPANSION OF MIDWIFERY ACCESS

After three years of diligent work and negotiations, San Francisco Health Network established a contract with Canopy Health - a physician and hospital owned medical alliance - that will expand hospital-based midwifery access by providing services to those with commercial health plan coverage. This contract marks the first time that women with private insurance will have the option of delivering their babies at Zuckerberg San Francisco General Hospital (ZSFGH), which is designated a "Baby- Friendly Hospital" by the World Health Organization and UNICEF. Our hope is that down the road we can expand access to more of our services to Canopy Health and other commercially insured patients.

Congratulations to ZSFGH Operations, Finance, IT, Communications, and the Office of Policy and Planning for all their hard work to establish our first ever commercial insurance contract. Let us raise our glasses and congratulate the team! We look forward to expanding our patient population and serving more families.



### MURAL CELEBRATION AT LAGUNA HONDA

On April 20<sup>th</sup>, 2019, Laguna Honda Hospital celebrated the completion of their mural, "150 Years of Dedicated and Compassionate Service to the Community". The mural project was jump-started in 2015 by Board of Supervisor Norman Yee's Participatory Budgeting Program, when more than 1,600 District 7 residents voted to fund the project. The mural was also funded by the Fleishhacker Foundation, Zellerbach Family Foundation, and the Tides Foundation. Supervisor Yee and Precita Eyes Muralists artists, Yuka Ezoe and Elaine Chu, hosted the celebration. At the celebration, attendees were invited to the Art Studio to kick off the festivities and participate in a community walking tour of the mural. The completed mural, which spans more than 700 feet, took two years to complete and required three distinct phases of development by the muralists and volunteers.



### ASSISTED OUTPATIENT TREATMENT PROGRAM

In FY 2018/19, Assisted Outpatient Treatment (AOT) completed its third year and is thrilled to be celebrating significant success! Highlights for the fiscal year include:

- 74% of AOT participants were successful in reducing or avoiding PES contact.
- 91% were successful in reducing or avoiding time spent in inpatient psychiatric hospitalization.
- 88% were successful in reducing or avoiding time spent incarcerated.
- Only 13% of cases move forward with a court order to participate in treatment, with most individuals accepting voluntary services.

In June 2019, Senate Bill 1045 was adopted by the San Francisco Board of Supervisors. This legislation aims to support some of our most vulnerable citizens by allowing conservatorship, which is followed by guaranteed permanent supportive housing, in cases where an individual is unable to care for their basic needs, has both a serious mental illness and substance use disorder, and has a minimum of eight involuntary holds in the last 12 months. AOT will be at the forefront of this project and we look forward to continuing to serve our existing community members as well as assisting clients eligible for SB 1045.



### WHOLE PERSON CARE

In FY 2018/19, San Francisco Whole Person Care (WPC) focused on three main areas: citywide care coordination, citywide data sharing infrastructure, and specialized clinical initiatives. DPH has continued its WPC partnerships with HSA, HSH, SFFD, SFPD, and Mayor's Office, as well as both county Medi-Cal health plans (SFHP and Anthem), and several contracted non-profits. In spring 2019, interagency workgroups met to create and design a citywide prioritization process for shared clients. The workgroups reviewed and adopted HSH's Coordinated Entry housing prioritization tool, which uses social determinants and health scores to stratify access to permanent supportive housing. This methodology will help to improve interagency care focus and coordination.

WPC also began implementing Citywide pilot projects that focus on transitional care while clients wait for housing placement. These projects include:

- Ensuring that individuals experiencing psychosis related conditions receive a Coordinated Entry assessment.
- Implementing a "clinical review" process to re-evaluate individuals not prioritized by Coordinated Entry, but have significant medical and psychosocial needs.
- Streamlining connections to resources for highly vulnerable individuals prioritized by Coordinated Entry whose health needs are a barrier to their being connected to permanent supportive housing.



### COMMUNITY HEALTH RESPONSE TEAM (CHRT)

DPH has several outreach and engagement teams that work to improve street conditions and connect individuals on the street to health services, including behavioral health services. The Community Health Response Team (CHRT) in the Community Health Equity and Promotion Branch provides regularly scheduled syringe clean-up, community engagement, and outreach in areas considered "hot-spots" within the Tenderloin, Civic Center, and South of Market neighborhoods. The team also does regular outreach and engagement in the Bayview with partners from Glide, San Francisco AIDS Foundation, and Street Medicine. CHRT engages with people on the streets by building trust and rapport, which strengthens relationships. Team members distribute syringe disposal supplies, provide HIV, Hepatitis C, and overdose prevention education, distribute Narcan, and provide resources and referrals to other services. During the FY 2018/19, CHRT:

- engaged with over 3,735 people during outreach;
- provided 1,491 overdose prevention and Narcan trainings with community members;
- distributed 992 doses of Narcan to community members;
- participated and organized 14 encampment health fairs; and
- partnered with Street Medicine on 39 outreach shifts.

CHRT is another example of SFDPH's commitment to harm reduction, community engagement, and responsiveness to the needs of the community.

# 18 FISCAL YEAR 18/19 HIGHLIGHTS

## PROTECTING AND PROMOTING HEALTH



### SEXUAL ORIENTATION AND GENDER IDENTITY (SO/GI) DATA COLLECTION

In 2018, DPH began implementing new Sexual Orientation and Gender Identity (SO/GI) data collection procedures with patients as an opportunity to improve care for LGBTQ+ populations. As part of this work, the Department crafted an initiative to provide sensitivity training for staff, as well as training of correct name and pronoun collection and documentation for transgender and gender non-binary patients.

In FY 2018-19, the Department demonstrated improved SO/GI data collection in Community Oriented Primary Care Sites, Specialty Care, Laguna Honda Hospital, Behavioral Health Services, Psychiatric Emergency Services, and Jail Health Services. In FY19-20, these data collection efforts will occur across all San Francisco Health Network sites and Population Health programs. Armed with this type of data for the first time, the Department can begin to ensure health equity for LGBTQ patients. Preliminary analysis of data collected to date shows disparities in depression and homelessness between gender minority populations and cisgender patients. Similar disparities were identified among sexual minority patients when compared to heterosexually identified patients. This data reflects national health disparity trends of higher prevalence of depression and homelessness among LGBTQ+ patients.

As more data is collected, we hope to be able to stratify certain health conditions by sexual orientation and gender identity, with preliminary analyses already being conducted on conditions like depression and cervical cancer screening.



### OPPORTUNITY TO SCREEN AND TREAT SEXUALLY TRANSMITTED DISEASES (STD) IN JAIL

Since 2013, there has been a steep increase in the rate of sexually transmitted diseases (STDs) in San Francisco. To combat this epidemic along with the public health crisis of congenital syphilis, Jail Health Services partnered with San Francisco City Clinic and the Population Health Division to implement immediate, on-site STD screening at the San Francisco jail. For the first time, this technology has been deployed to test and treat patients coming into the jail, even if briefly. Instead of obtaining specimens and shipping to a DPH lab, we can test patients at the jail and treat them in a matter of hours. The technology includes the use of a new mini lab to test for Chlamydia and Gonorrhea and a separate rapid test for Syphilis.

Jail Health is in the implementation phase of this initiative but expect to show improved rates of patients tested when coming into the jail and treated prior to leaving.



### HYPERTENSION EQUITY FOR BLACK/AFRICAN AMERICAN PATIENTS

The San Francisco Health Network's Primary Care, in partnership with the Population Health Division, met and exceeded their True North Equity Goal for FY 2018-19. This metric focuses on the percentage of Black/African American patients with hypertension whose last blood pressure was controlled in the past year. From January 2015 to June 2019, hypertension control for Black/African American patients improved from 53% (n= 4,029) to 67% (n= 3,627). Additionally, the disparity gap between the overall population compared to Black/African American population has decreased from 8% to 3%. This is a huge step towards reducing health disparities in the city of San Francisco!

The foundations for success of this work included messaging equity as a priority, utilizing Lean methodology and emphasizing patient advisor and community partner involvement. Based on these underpinnings, the work focused on aligning two key interventions to address the hypertension disparity:

- Targeting clinical outcomes and reinforcing team-based care during nurse/pharmacist chronic care visits.
- Addressing food insecurity and supporting nutritional health with Food Pharmacies.

We look forward to sustaining these gains and continuing to reduce disparities for our Black/African American patients.





### CHILDREN'S MEDICAL SERVICES

The Maternal, Child, and Adolescent Health (MCAH) branch's Child Health and Disability Prevention (CHDP) Program, Medical Therapy Program, California Children's Services (CCS), and Family and Children's Services (FCS) Nursing Unit operate under the umbrella of Children's Medical Services (CMS). Key FY 2018-19 CMS highlights included:

- FCS Nursing Unit worked to decrease Comprehensive Intake Exam (CIE) no-shows within the Health Care Program for Children in Foster Care (HCPFC) by introducing new online scheduling and appointment confirmation processes and increasing intra-departmental collaboration.
- CHDP participated in the State Medical Record Review and Facility Review Audit Tools revision process. These tools are used to review CHDP clinic facilities that serve MCAH's most vulnerable Medi-Cal populations.
- CCS formed a data inquiry workgroup with San Francisco Unified School District (SFUSD), which saw initial success tracking Social Emotional Learning Survey data to assess wellbeing of children with IEPs and 504 Plans.
- CCS partnered with Support for Families of Children with Disabilities (SFCD) and SFUSD to run Community Feedback Sessions with English, Spanish, and Chinese Families of children with special health. This feedback will shape the MCAH Needs Assessment.
- CCS hosted two interagency meetings of the Children and Youth with Special Health Care Needs (CYSHCN) Child to Adult Transition Workgroup (C2A) connecting institutions that serve transition aged youth with special health needs.



### WHEELCHAIR BASKETBALL ADAPTIVE SPORTS CLINIC

In June 2019, 13 children and youth with physical disabilities, along with their typically developing siblings, cousins and friends, participated in a Wheelchair Basketball Adaptive Sports Clinic at the Gene Friend Recreation Center in SOMA. The participants with physical disabilities are clients of Maternal, Child, and Adolescent Health (MCAH) branch's California Children's Services Medical Therapy Program (CCS MTP). The event was inspired by a 14-year-old ambulatory teen with spastic diplegic cerebral palsy who has been playing wheelchair basketball since the age of six. His passion for the sport and desire to build a community of youth wheelchair basketball players in San Francisco led to a partnership between him and his parents, MCAH's CCS MTP, SF Recreation and Parks Therapeutic Recreation, and Inclusion Services Department to plan the clinic.

The Clinic was not about impairments or disabilities or barriers, but rather, about kids of all ages learning a new sport and playing together, as well as parents meeting other parents of children with special care needs and cheering them on. The 14-year-old took the lead as the Coach, and the consensus was that the Clinic was a great success, and that Coach did a phenomenal job! We look forward to planning a follow-up wheelchair basketball clinic to continue building the community envisioned by Coach.



### ZSFG PRE-LITERACY PROGRAM

In October 2018, Chelsea Clinton and a team from the Clinton Foundation visited ZSFG to see progress with our pediatric team's results with the early brain development program: Talk, Read, Sing (TRS), which is part of the Clinton Foundation's Too Small to Fail initiative, supporting early brain and language development in children ages 0-5. TRS promotes early language and brain development and support parents with tools to talk, read, and sing with their young children beginning at birth. Leveraging a multidisciplinary team at well-baby discharge, this project empowers parents to make even small moments meaningful. A pilot program using talk, read, sing messaging and materials in our Children's Health Center was overwhelmingly successful, with 84% of parents noticing a positive change in their child's behavior after receiving an early literacy toolkit from their pediatrician.

## 20 FISCAL YEAR 18/19 HIGHLIGHTS

### PROTECTING AND PROMOTING HEALTH



#### PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE

The Public Health Emergency Preparedness and Response (PHEPR) Branch serves DPH, the public, and community partners through health emergency preparedness, response, and recovery efforts. In FY 2018-19, there was tremendous growth for healthcare/community partnerships, preparedness, and coordinating complex, multi-agency responses:

- Responded to 27 major emergencies and events, totaling 112 days.
- Earned “Promising Practice Award” from National Association of City and County Health Officials (NACCHO) for the innovative Medication Assisted Treatment Workgroup, which strategizes continuity of care to people receiving opioid medication assisted treatment during an emergency.
- Developed and coordinated 38 preparedness exercises and 52 trainings for community members, organizations, and city agencies.
- Participated in the Statewide Medical and Health Exercise with over 75 healthcare & emergency organizations to test and strengthen coordinated responses to an epidemic influenza emergency scenario.
- Responded to the Mayor’s Directives on Air Quality (AQ), which included participating in AQ plan revisioning and regional messaging toolkit development.
- Through the SF Emergency Preparedness Healthcare Coalition (HCC), launched the SF Healthcare Preparedness Pulse newsletter, connecting healthcare partners to planning resources.
- Worked closely with agency partners to define, extend and pilot wellness checks on vulnerable populations during extreme weather emergencies.



Module 1:  
**Global Climate Change, Local Health Impacts**  
San Francisco Department of Public Health | Climate and Health Program

#### CLINICIAN CLIMATE AND HEALTH TRAINING

Climate change is one of the greatest public health challenges of the 21st century. In San Francisco, climate change means extreme heat, wildfire smoke and air pollution, extreme storms, sea level rise, and flooding-- and these climate impacts have cascading effects on public health. During the last year, the Climate and Health Program has worked to address these health impacts through research and assessment, data analysis and mapping, outreach and engagement, and planning and interdepartmental collaboration.

In FY 2018-19, the Climate and Health Program developed and released online interactive training modules to engage local San Francisco clinicians about the 1) intersection between climate change and public health; 2) how to discuss climate health preparedness with their patients, and; 3) sustainability in the health care sector. Clinicians often act as a first point of contact to the San Franciscans most vulnerable to the health impacts of climate-related extreme weather events. The aim of these modules is to increase the capacity of our local health services to respond to these changes and work collaboratively to develop new climate health interventions.

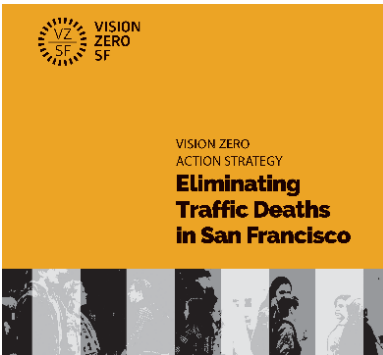
The Clinician Climate and Health Training Modules are available for Continuing Medical Education (CME) credits and can be accessed through the Climate and Health Program website:  
[sfclimatehealth.org/modules](https://sfclimatehealth.org/modules)



#### NEW INNOVATION PROJECTS TO ADDRESS SAN FRANCISCO'S MENTAL HEALTH NEEDS

In FY 2018-19, three new San Francisco mental health innovation projects were awarded funding under the Mental Health Services Act (MHSA). Innovation projects are creative and innovative mental health practices or strategies that test new approaches, contribute to learning, and can inform current and future mental health programs. These three projects will be overseen by San Francisco’s MHSA program and seek to address unmet mental health needs of transitional age youth, transgender adults, unhoused individuals, and newly immigrated Latinx youth. Each of these projects was developed and shaped by community stakeholder feedback, including input from community partners and mental health consumers. These projects include:

- **Technology-Assisted Mental Health Solutions** will utilize a new approach to public mental health service delivery using technology to increase access to care and improve support for all individuals in San Francisco. The program will focus on transition age youth (TAY) ages 16-24 and socially isolated transgender adults. The
- **Wellness in the Streets (WITS)** adapts existing mental health approaches in order to increase access to underserved groups, specifically, providing peer-to-peer counseling and peer interventions to unhoused individuals where they are at and directly on the streets.
- **Fuerte** is a unique intervention culturally tailored to address the needs of newly immigrated Latinx youth, ages 12 to 18. It consists of a school-based group prevention program which uses a sociocultural, ecological lens and an evidence-based Attachment Regulation and Competency (ARC) framework.



### VISION ZERO SAN FRANCISCO

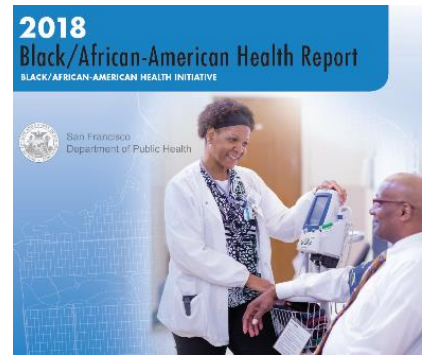
Vision Zero SF (VZSF) is the City's commitment to eliminating traffic deaths. DPH co-chairs the Mayor's VZSF Task Force and works with Municipal Transportation Agency (MTA), other city agencies and community stakeholders to target engineering, education, enforcement and policy efforts. In FY 2018-19, key VZSF highlights included:

- VZSF released the [2019 Vision Zero SF Action Strategy](#), with data-driven strategic actions and transformative policies to elevate equity and save lives.
- [2018 traffic deaths were the second lowest](#) in 100 years, with 23 traffic deaths. Traffic deaths have increased again in 2019 in contrast with these lows.
- DPH's Safe Streets for Seniors Program staff reached over 2,000 seniors/service providers in English, Chinese, Spanish, and Tagalog, and funded 7 CBOs to conduct in-depth engagement.
- DPH [mapped injuries and key areas for seniors and people with disabilities](#), now informing targeted SFMTA safety improvements.
- DPH issued the [first VZSF annual report on severe transportation-related injuries](#).
- DPH coordinates an [inter-agency Crisis Response Team to provide support to families](#) who lose a loved one to a crash.
- DPH's [VZSF Injury Prevention Research Collaborative](#) – which includes epidemiologists, trauma surgeons, emergency physicians, and nurses – developed and implemented a nationally-leading [methodology](#) to track injuries from micromobility, [covered by the New York Times](#).



### SUGAR SWEETEN BEVERAGE REPORT

In 2016, San Francisco voters passed the Sugary Drinks Distributor Tax (SDDT) or “soda tax” as one strategy to help reduce obesity, type 2 diabetes, dental caries and other diet-related illnesses that disproportionately impact low-income communities and people of color. The ordinance created the 16-member SDDT Advisory Committee (SDDTAC) which makes budget recommendations and reports on the effects of the tax. Department of Public Health (DPH) appoints three seats to the Committee to represent food security, oral health, and chronic disease. In FY 2018-19, the Mayor's Office allocated over \$7 million of the \$15-16 million in tax revenue to DPH to support the SDDTAC's work and ensure the funds benefited the communities most impacted by sugary beverage consumption. Through collaborative effort across DPH, these funds are being distributed to support healthy food purchasing supplements (PHD); chronic disease prevention strategies including health eating/active living opportunities as well as policy, systems, and environmental change (CHEP); community oral health task force (MCAH); applying dental sealants (SFHN); supporting the ordinance's evaluation mandates (DPC, PHD); and providing infrastructure to support funded organizations (CHEP). Across DPH, we are committed to ensuring the funds collected from the tax are responsive to the communities most impacted by sugary beverage consumption.



### BAAHI PUBLISHES BLACK/ AFRICAN AMERICAN HEALTH REPORT

In Fall 2018, the Black/African American Health Initiative (B/AAHI) issued its 2018 Report on the Health of Black/African Americans (B/AA) in San Francisco. Although San Franciscans are healthier than Americans in many other parts of the country, B/AA San Franciscans have persistently had poorer health than their fellow residents. Based on the most recent data, B/AA infants are five times more likely than White infants to die before their first birthday. This health disparity continues through adulthood. Life expectancy for B/AA is the lowest of all race/ethnicities in San Francisco, with B/AA residents expected to live 72 years, nearly 10 years less than White, Asian, and Latino residents, who can expect to live into their 80s.

Since the report's publication, it has been cited and used by Department of Public Health (DPH) staff and local community groups. The report was shared publicly at two community forums in 2018-19 and will form the basis of continued outreach both within the department and in the community. The hope is that the report will persuade the broader community that widespread coordinated efforts to improve B/AA health are urgently needed from all sectors.



# 22 FISCAL YEAR 18/19 HIGHLIGHTS

## ADMINISTRATION



### Security Services

The scope of DPH Security Services is to assure the ongoing provision of a safe, accessible, and secure environment across all divisions of the Department. In FY 2018/19, Security Services accomplished the following:

- Developed and maintained three Safety and Security Committees with representatives from across SF Health Network and Population Health to ensure security management is aligned with the Department's Mission and True North Safety and Security Metrics.
- In collaboration with Facility Services, installed electronic security and access control enhancements at SFDPH hospitals and clinics.
- Developed and maintained working partnerships with San Francisco Police, UCSF Police, the UCSF Threat Management Team, CalTrans, and San Francisco Urban Riders in their interactions with complex SFDPH settings.
- Responded to 20,189 calls for service that involved patient/medical assist, patient standby, and patient restraint/support incidents.
- Confiscated 3,527 weapons and contraband through ZSFG Emergency Department Security Weapons Screening.
- Investigated and mitigated risk in 54-threat/workplace violence incidents.
- Saw reduced serious incident crimes by 57% from 2014-2015.
- Decreased law enforcement use-of-force incidents on DPH premises by 61% from 2015-2016.



### Occupational Safety and Health Division

The safety and well-being of DPH employees is very important, and to guard them, the City tries to identify and eliminate employee exposures to avoidable hazards and conditions that can lead to injury, illness or accidents. Human Resources Occupational Safety and Health (OSH) Division supports these efforts, and in FY 2018/19 highlights from the Division included:

- Collaborated with the Department of Human Resources to develop an on-line, on-demand, Office Ergonomic Awareness Training class for City employees. Employees can access the training through the SF Employee Portal.
- Developed a new poster detailing the importance of wearing blood and body fluid splash protective equipment, and providing part numbers for ordering the equipment in support of the Department's Safe Devices/Bloodborne Pathogen Committee.
- Provided independent health and safety support under work order agreements with other City agencies, including full time positions for the San Francisco Police and Fire Departments. For the Fire Department, OSH supported the development and implementation of decontamination policies and identifying diesel particulate removal technology for fire response vehicles to address firefighter concerns regarding cancer rates and prevention.



### Learning & Development

The People Development Team (PDT) focuses on keeping DPH workforce informed and updated about various Human Resources policies and procedures through interactive trainings and informational products. Key highlights for FY 2018/19 included:

- Bi-weekly brown bags held on a variety of HR topics offered at three locations across DPH that reached 200+ staff from across the department.
- Bi-Monthly Manager Learning & Development Sessions held to educate managers about HR policies, rules, expectations and systems of support. Sessions reached 200 plus managers and supervisors.
- Crucial Conversations workshops facilitated by HR trainers in coordination with DHR every quarter. These workshops reach 60 staff.
- Management Coaching provided to support new managers with HR information, training opportunities and confidential consultation. This is a new initiative. Through individual consultation and new manager cohort facilitation, 40 managers were reached.
- Career Coaching to support retention and professional advancement of our committed staff. This is an ongoing program and reached 100 plus staff over the last fiscal year.
- Supported HR process improvement and equity initiatives.



# FISCAL YEAR 18/19 BY THE NUMBERS

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## 24 FISCAL YEAR 18/19 BY THE NUMBERS

### BUDGET

In FY 18-19, SFDPH's budget was \$2,369,898,228 which was an increase of \$171,717,041 from the FY 17-18 budget. The General Fund subsidy from the City and County was \$738,781,992 which represents 31% of the total budget.

**\$3 million** annually to expand the Street Medicine to provide Buprenorphine prescriptions to help individuals facing opioid addiction on the streets.

**\$7.8 million** to support higher than budgeted census at ZSFG and LHH.

**\$600,000** to continue the Behavioral Health Engagement Team, who engage individuals on the street with mental health and/or substance use disorders.

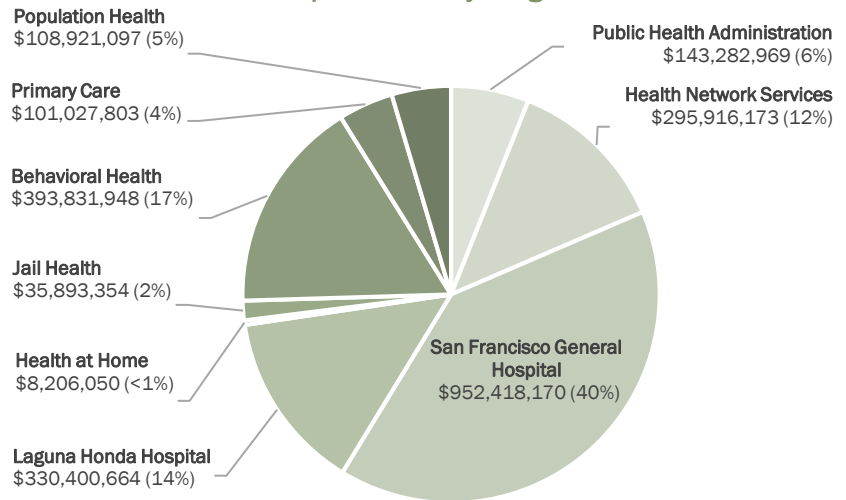
**\$3.4 million** to expand Substance Use Services under the Drug Medi-Cal Organized Delivery System Pilot.

**\$500,000** to support Emergency Medical Services staffing.

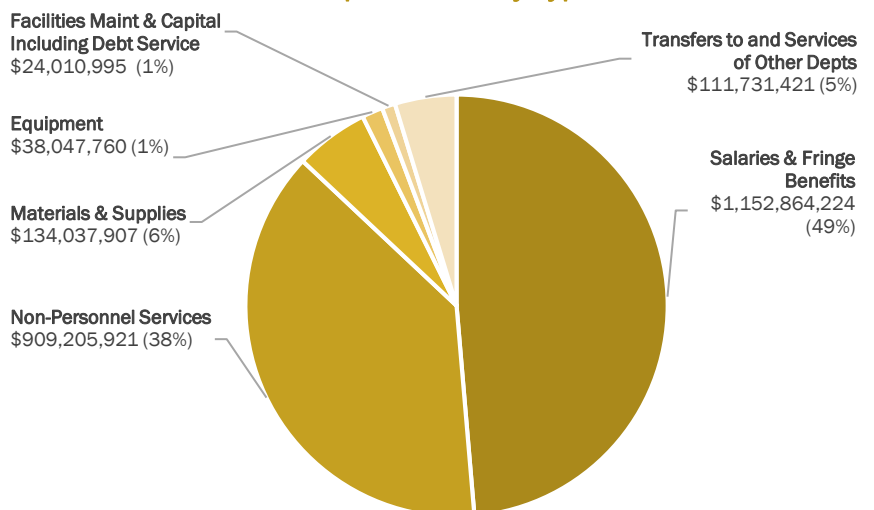
**\$1.4 million** to backfill federal reductions to HIV prevention and research.

**\$6.5 million** of funding from Sugar Sweetened Beverage Fee for new health outreach grants and programs.

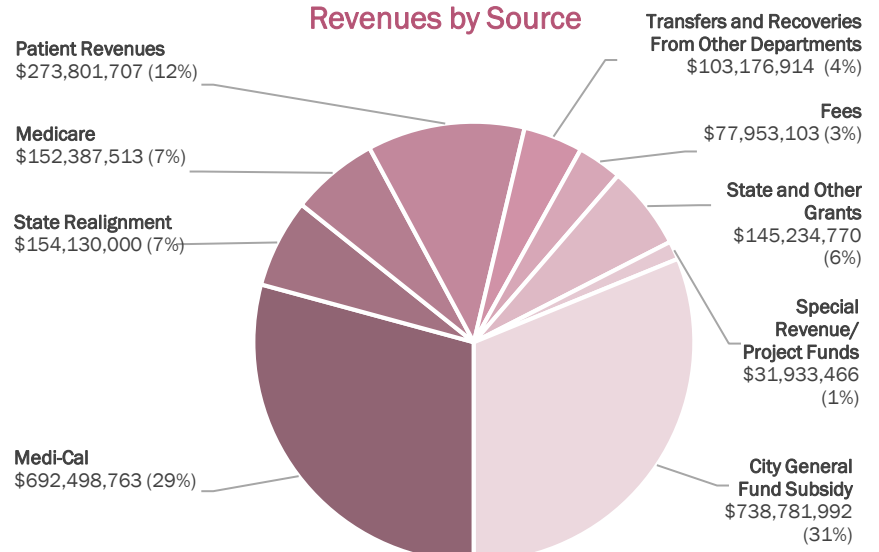
### Expenditures by Program



### Expenditures by Type



### Revenues by Source



San Francisco Health Network provides a wide array of services across its continuum of care. San Francisco Health Network's direct service providers consist of Zuckerberg SF General (ZSFG), which includes the Behavioral Health Center (BHC); Laguna Honda Hospital (LHH); Primary Care (PC); Health at Home (HAH); and Jail Health Services. Major service components include primary care, specialty care, acute care, home health care, long-term care, and emergency care.

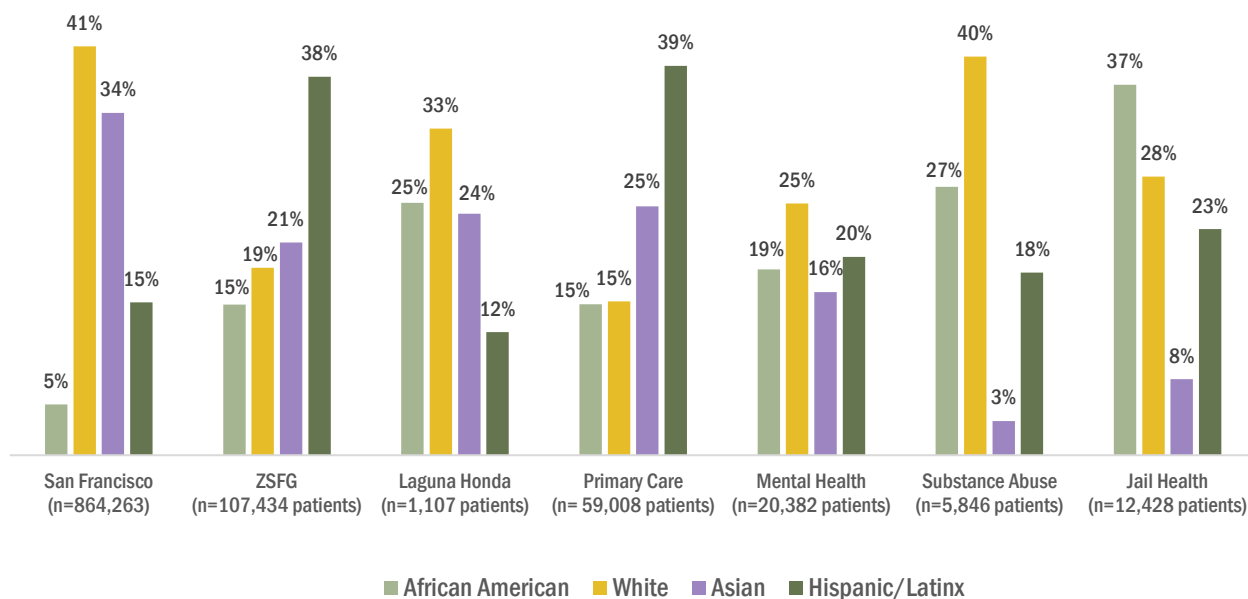
## SF HEALTH NETWORK PATIENT ENCOUNTERS

Visit Type	FY16-17 % or Number of Visits	FY17-18 % or Number of Visits	FY18-19 % or Number of Visits
Primary Care	369,130	339,433	310,280
Specialty Care	209,769	219,999	213,226
Urgent Care	19,077	30,576	33,667
Dental Care	12,494	12,601	10,950
Encounters Requiring Trauma Center Services Activations	3,836	3,638	3,134
Diagnostic and Ancillary	137,667	135,070	129,447
Home Health Care Visits	21,032	19,912	18,870
<b>Total Emergency Encounters</b>	<b>76,059</b>	<b>83,249</b>	<b>84,957</b>
Medical Encounters	69,490	76,130	77,795
Percent Admitted	15%	16%	16%
Psychiatric Encounters	6,570	7,118	7,164
Percent Admitted	16%	17%	17%
<b>Total Acute Inpatient Days</b>	<b>82,706</b>	<b>86,349</b>	<b>89,179</b>
Actual Days at SFGH	81,810	85,504	88,747
Actual Days at LHH	896	845	432
<b>Total Skilled Nursing Care</b>	<b>283,222</b>	<b>285,068</b>	<b>284,902</b>
Actual Days at ZSFG	9,639	10,550	10,449
Actual Days at BHC	16,148	15,605	15,657
Actual Days at LHH	273,583	274,518	274,453

## 26 FISCAL YEAR 18/19 BY THE NUMBERS

### SF HEALTH NETWORK

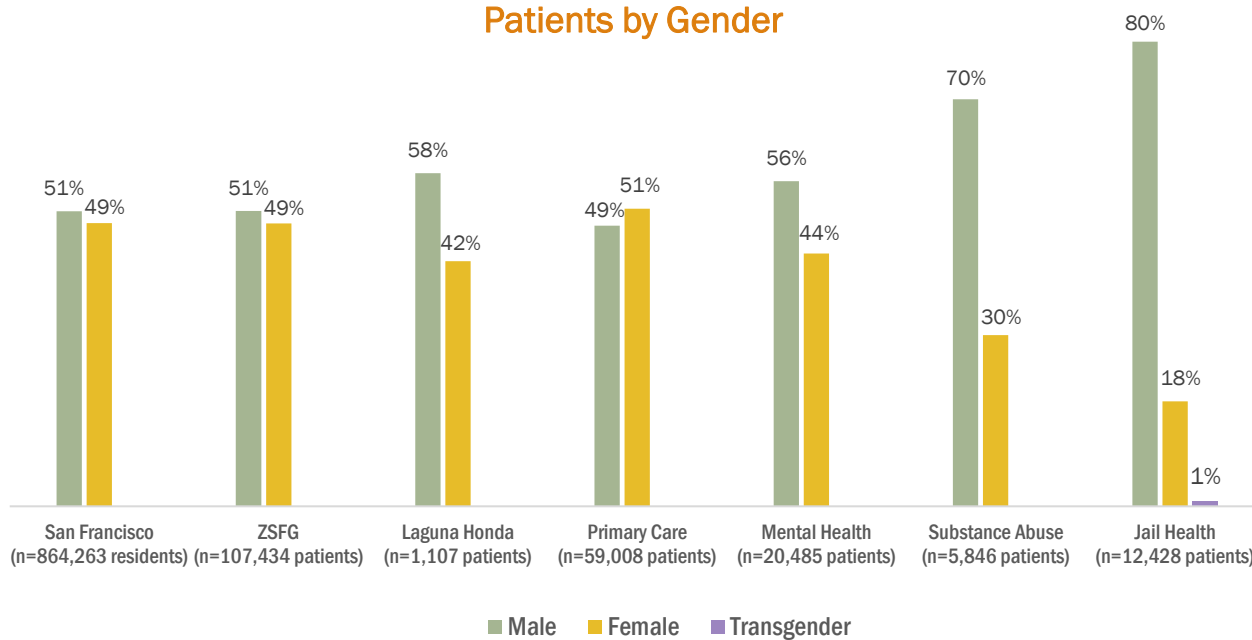
#### Patients by Race/Ethnicity



\*Data not shown: Native Americans and Pacific Islanders comprise approximately 1% the population served in all health systems above. Race/ethnicity data is unknown for 0-16% of patients served.

\*\*San Francisco data based on 5-year 2017 American Community Survey (ACS)

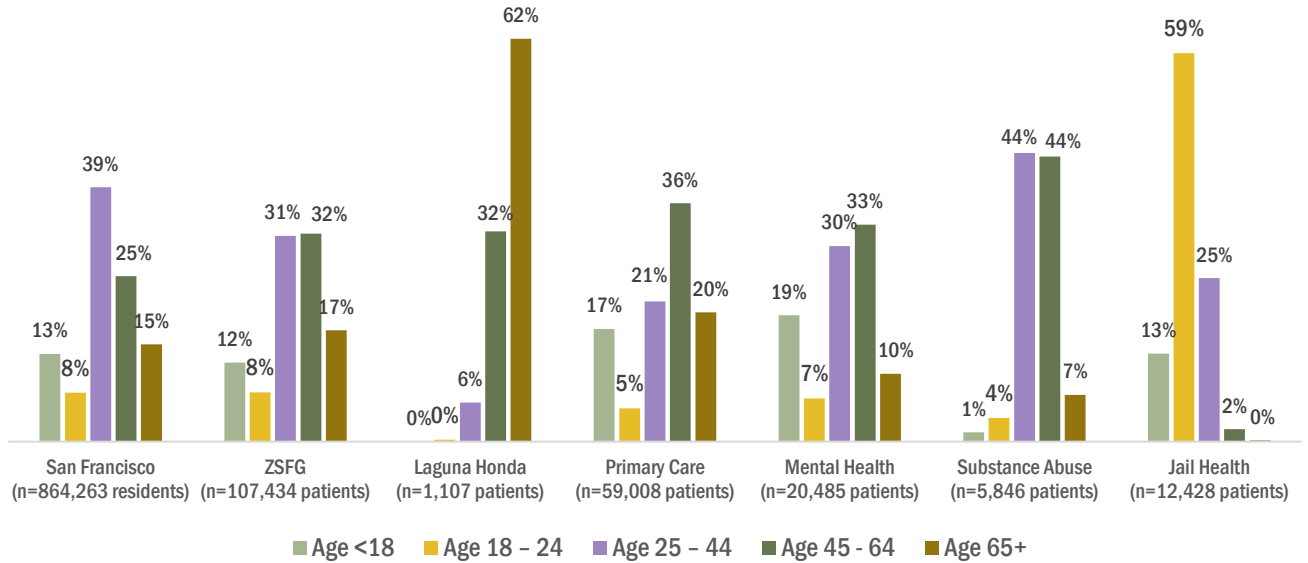
#### Patients by Gender



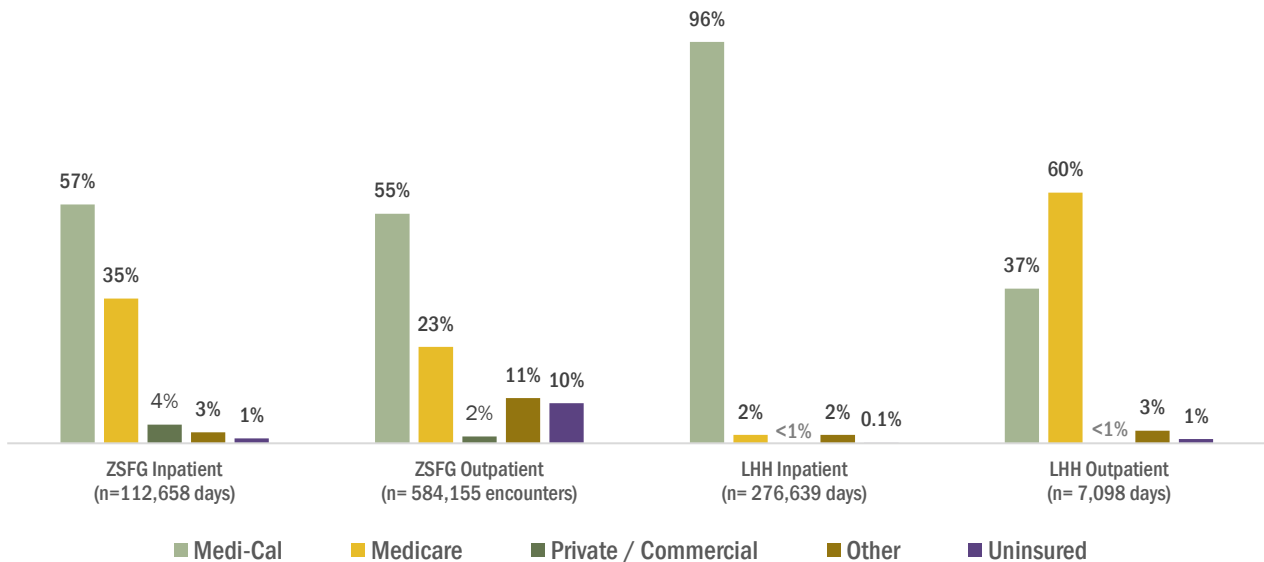
\* American Community Survey (ACS) data does not include estimates of individuals identifying as transgender.

\*\* Data on individuals who identify as Transgender only available for Jail Health patients.

### Patients by Age



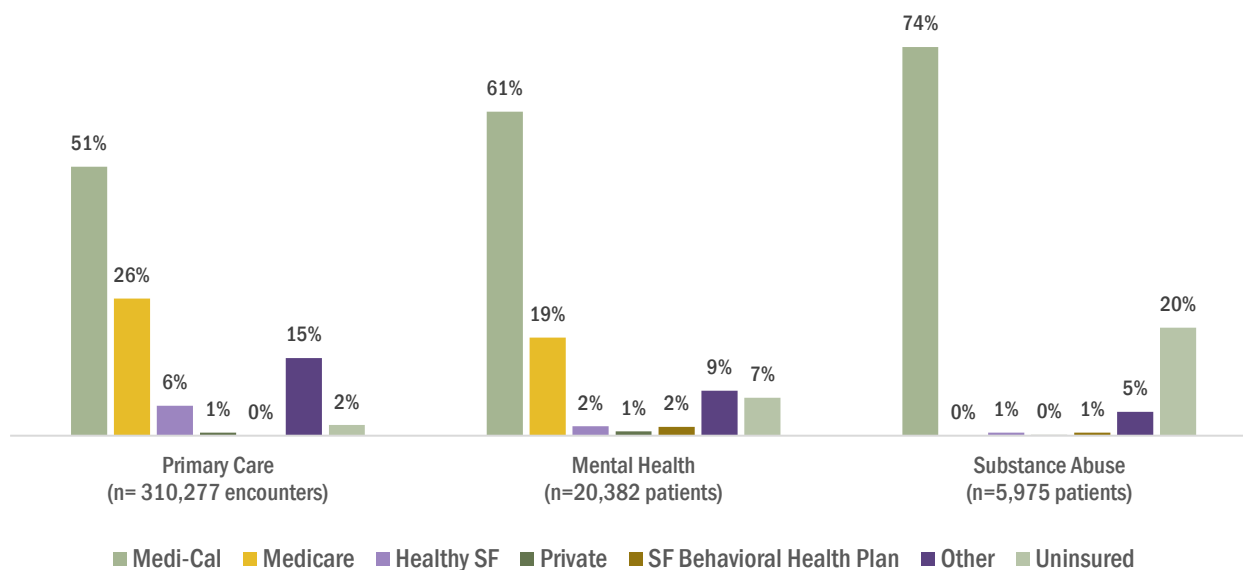
### Hospital Payor Source



## 28 FISCAL YEAR 18/19 BY THE NUMBERS

### SF HEALTH NETWORK

#### Primary Care & Behavioral Health Payer Source



Behavioral Health Services relies on a network of civil service and contracted providers to offer high-quality services to mental health and substance abuse clients. The tables below indicate the number of mental health and substance abuse clients served by contractors vs. civil service providers in FY 18/19.

#### CBHS Mental Health Clients Served

Provider	Unduplicated Client Count*
Contract Providers	12,604
Civil Service Providers (Incl. SFGH)	10,810
<b>TOTAL</b>	<b>20,382</b>

\* Clients can be seen in both Civil Service and Contract programs in the course of a year.

#### CBHS Substance Abuse Clients Served

Provider	Unduplicated Client Count
Contract Providers	5,975
Civil Service Providers*	NA

\*There are no Civil Service Substance Abuse programs in Behavioral Health Services.

SFDPH has been a leader in the field of public health for decades, providing important innovations in interventions and programs. However, in spite of these successes, San Francisco faces many health challenges: a striking epidemic of adult and youth obesity and its complications (e.g., childhood type 2 diabetes and hypertension); high rates of infant mortality, and persistent health inequities related to ethnic, social, economic, and environmental factors. SFDPH's ongoing efforts to meet emerging challenges are reflected in the Strategic Plan for our Population Health Division. In Fiscal Year 18/19, PHD conducted the following key programmatic activities that support PHD's strategic plan focus areas. Unless otherwise noted, data points are for FY 18/19.



SAFE & HEALTHY  
LIVING  
ENVIRONMENTS



HEALTHY EATING  
& PHYSICAL



ACCESS TO  
QUALITY CARE &  
SERVICES



BLACK/AFRICAN  
AMERICAN  
HEALTH



MATERNAL,  
CHILD,  
ADOLESCENT  
HEALTH



HIV PREVENTION



CHILDREN'S  
ENVIRONMENTAL  
HEALTH

**245** FAMILIES RECEIVED LEAD OR ASTHMA HOME ASSESSMENTS



TOBACCO & SMOKING

**208** PROVIDERS TRAINED ON TOBACCO CESSATION COMMUNITY RESOURCES THROUGH 31 TRAINING

**23** VIOLATIONS UNCOVERED ON ILLEGALS SALES OF FLAVORED TOBACCO PRODUCTS TO PEOPLE UNDER AGE 21



HEALTHY ENIRONMENT

**9,944** FOOD SAFETY PROGRAM INSPECTIONS

**5,548** HEALTHY HOUSING PROGRAM INSPECTIONS

**59** EMERGENCY RESPONSES INVOLVING HAZARDDOUS MATERIALS



VISION ZERO

**23** TRAFFIC RELATED DEATHS# - SECOND LEAST DEADLY YEAR ON RECORD

**19,850** ELEMENTARY SCHOOL STUDENTS PARTICIPATED IN SAFE ROUTES TO SCHOOL EVENTS

# CALENDAR YEAR 2018



## 30 FISCAL YEAR 18/19 BY THE NUMBERS

### POPULATION HEALTH



#### HEALTHY RETAIL

**2** STORES WERE REDESIGNED, CREATING A TOTAL OF 12 STORES THAT HAVE PARTICIPATED IN TENDERLOIN, BAYVIEW, AND OCEANVIEW NEIGHBORHOODS IN FIVE YEARS OF PROGRAMMING.

**39%** INCREASE IN ADDITIONAL UNITS OF PRODUCE ON AVERAGE OVER A THREE-YEAR PERIOD AMONG 5 STORES.



#### SHAPE UP SF

**1,000** PEOPLE EDUCATED ON SUGARY DRINKS AND HEALTHY CHOICES AT HEALTH FAIRS AND MEETINGS



#### EMERGENCY RESPONSE AND PREPAREDNESS

**27** MAJOR EMERGENCIES & EVENTS RESPONDED TO- EQUALING 112 TOTAL DAYS



#### NEWCOMERS HEALTH PROGRAM

**127** REFUGEES LINKED TO PRIMARY CARE AT 14 OUTREACH EVENTS

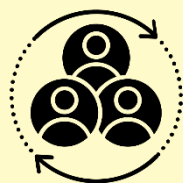


#### RESEARCH, EPIDEMIOLOGY, & SURVEILLANCE

**42** DISEASE OUTBREAK INVESTIGATIONS WERE CONDUCTED BY COMMUNICABLE DISEASE CONTROL AND PREVENTION

**81%** OF NEWLY HIV DIAGNOSED PATIENTS WERE LINKED TO CARE WITHIN ONE MONTH\*

**65%** DECREASE IN NEW HIV DIAGNOSES SINCE 2006\*



#### STAFF TRAINING

**119** DPH STAFF PARTICIPATED IN RACIAL HUMILITY TRAININGS

\* From 2018 HIV Surveillance Report, containing 2017 data (most recent available data)

## **2018**

- 18-2 Amending the Healthcare Accountability Ordinance Minimum Standards
- 18-3 Determining the Impact of the Change in Licensure of CPMC Irene Swindells Adult Day Program From Both CPMC and Institute on Aging to Solely the Institute on Aging
- 18-4 Determining that the Closure of the CPMC Irene Swindells Alzheimer Residential Care Program Will Have a Detrimental Impact on Health Care Services in the Community
- 18-5 Determining the Impact of the Change in Management of Five Outpatient Departments from California Pacific Medical Center to Sutter Pacific Medical Foundation
- 18-6 Acknowledging the Work of Barbara Garcia and Honoring Her Many Contributions to the San Francisco Department of Public Health

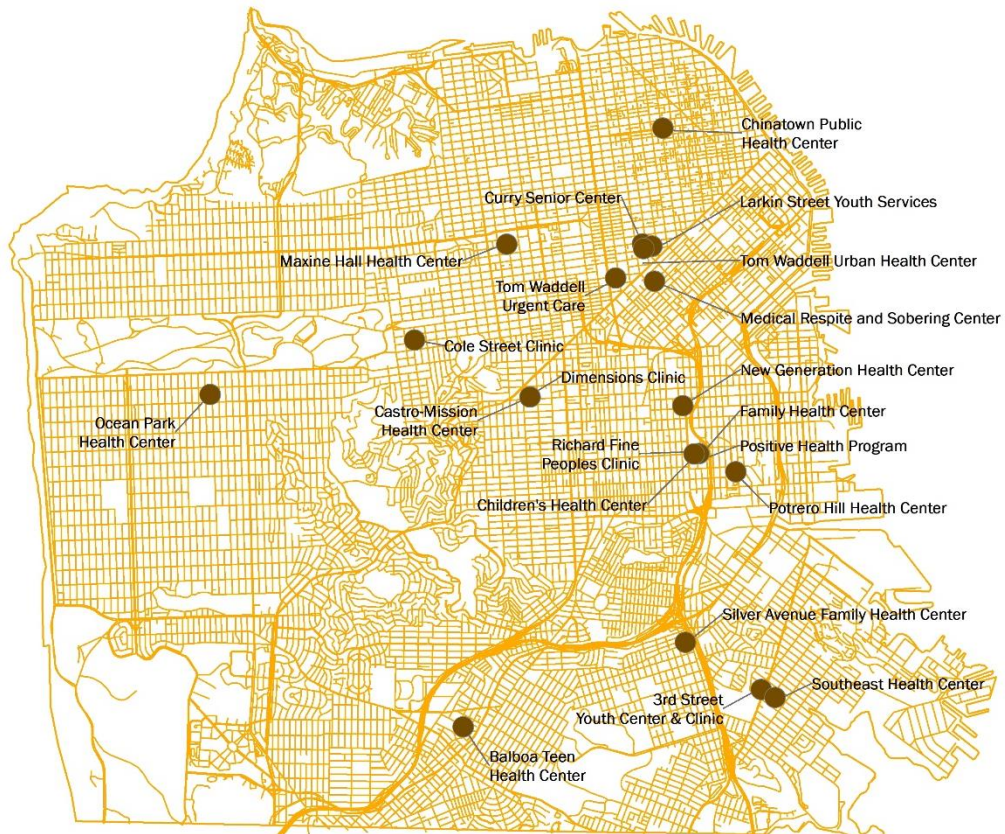
## **2019**

- 19-1 Resolution Authorizing the DPH to Recommend to the BOS to Accept and Expend Retroactively a Gift of \$141,000.00 to the LHH Gift Fund from the Friends of Laguna Honda
- 19-2 Resolution Supporting Food Security in San Francisco and Endorsing the Recommendations of the Food Security Task Force 2018 Assessment of Food Security in San Francisco
- 19-3 Approving the SFDPH's 2019 State and Federal Legislative Plans
- 19-4 Resolution to Recommend to the BOS to Authorize the DPH to Accept and Expend a Gift of \$200,000.00 to the LHH Gift Fund from the Richard and Bonnie Green Survivor's Trust
- 19-5 Incarceration Is a Public Health Issue
- 19-6 Resolution Honoring David J. Sanchez, Jr., Ph.D.
- 19-7 Resolution of Commitment to Trauma Care
- 19-8 Approving Changes to the Sliding Scale Program and Endorsing Changes to Patient Billing and Financial Assistance Programs
- 19-9 Resolution in Support of the 2019 Community Health Needs Assessment
- 19-10 Approving the Appointment of Irene Sung, MD as Interim Director of the San Francisco Mental Health Plan

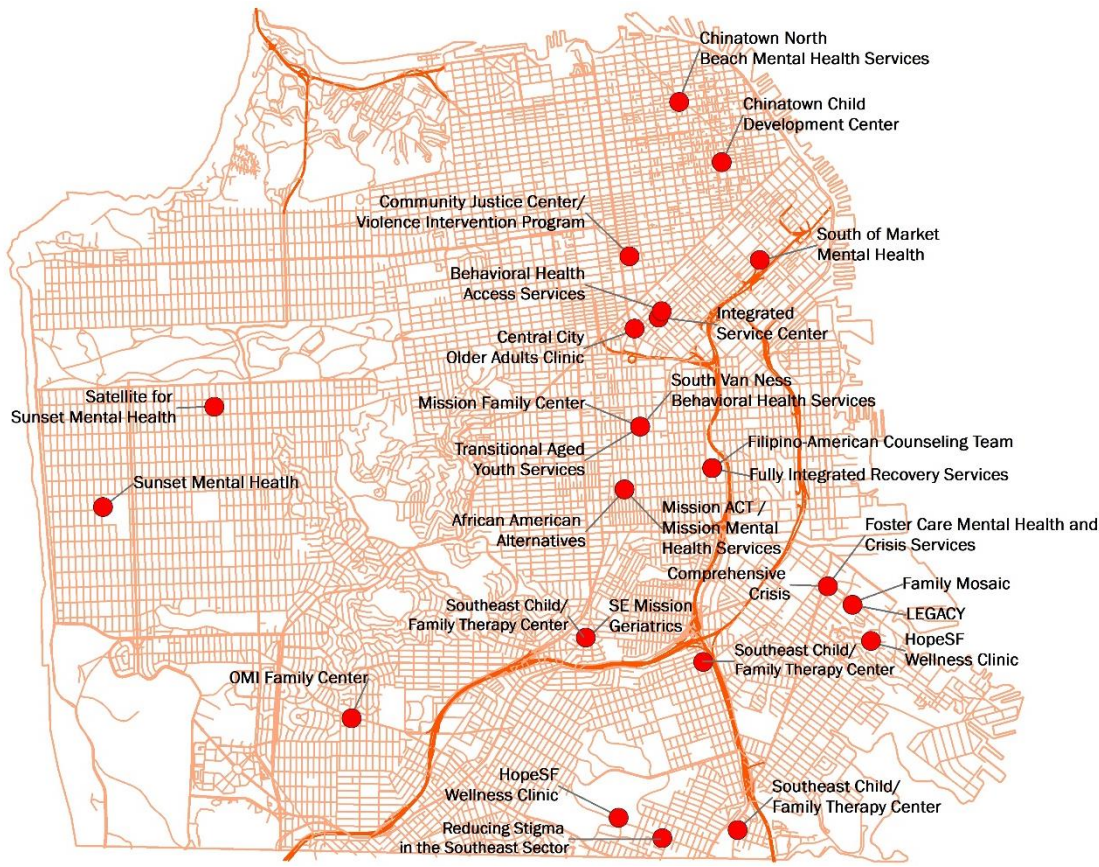
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SERVICE SITES

PRIMARY CARE SERVICES SITES



BEHAVIORAL HEALTH SERVICES SITES





- 18 Reasons
- A Better Way
- AGUILAS
- AIDS Legal Referral Panel of the SF Bay Area
- Alternative Family Services
- APA Family Support Services
- Asian American Recovery Services
- Asian and Pacific Islander Wellness Center
- Baker Places
- Bay Area Communication Access
- Bay Area Young Positives
- Bayview Hunters Point Foundation for Community Improvement
- Bayview Hunters Point Multipurpose Senior Services
- Catholic Charities CYO of the Archdiocese of San Francisco
- Center on Juvenile and Criminal Justice
- Central American Resource Center of Northern California
- Central City Hospitality House
- Chamberlain Children Center
- Children's Council of San Francisco
- Community Awareness & Treatment Services (CATS)
- Community Housing Partnership
- Community Initiatives
- Community Music Center San Francisco
- Community Youth Center San Francisco
- Conard House
- Curry Senior Center
- Dolores Street Community Services
- East Bay Agency for Children
- Edgewood Center for Children and Families
- Eldergivers
- Episcopal Community Services of San Francisco
- Family Service Agency of San Francisco
- Fort Help LLC
- Fred Finch Youth Center
- Friendship House Assn. of American Indians
- Glide Foundation
- Harm Reduction Coalition
- HealthRIGHT 360
- Heluna Health
- Homeless Children's Network
- Homeless Prenatal Program
- Horizons Unlimited of San Francisco
- Huckleberry Youth Programs
- Hyde Street Community Services
- Institute for Community Health Outreach
- Institute on Aging
- Instituto Familiar de la Raza
- International Institute of the Bay Area
- Japanese Community Youth Council
- Jelani House
- Jewish Family and Children's Services
- Larkin Street Youth Center
- Latino Commission
- Lavender Youth Recreation & Information Center (LYRIC)
- Learning for Action
- Livable City
- Lutheran Social Services
- Maitri AIDS Hospice
- Medical Clown Project
- Mental Health Association of San Francisco
- Mission Council on Alcohol Abuse for the Spanish-speaking
- Mission Neighborhood Health Center
- Mt St. Joseph – St. Elizabeth
- National Alliance on Mental Illness (NAMI) San Francisco
- Native American Health Center
- NICOS Chinese Health Coalition
- Oakes Children's Center
- Positive Resource Center
- Progress Foundation
- Project Open Hand
- Public Health Institute (PHI)
- Rafiki Coalition
- Richmond Area Multi-Services
- Safe & Sound
- Salvation Army
- San Francisco AIDS Foundation
- San Francisco Community Clinic Consortium
- San Francisco Food Bank
- San Francisco Mental Health Educational Funds
- San Francisco Public Health Foundation
- San Francisco Society for the Prevention of Cruelty to Animals
- San Francisco Study Center
- San Francisco Suicide Prevention
- Self-Help for the Elderly
- Seneca Center
- Shanti Project
- Special Service for Groups
- St. James Infirmary
- Steppingstone
- Swords to Plowshares
- Thunder Road Adolescent Treatment Centers
- Tides Center
- Unity Care
- University of the Pacific
- WestCoast Children's Clinic
- Westside Community Mental Health Center
- Women's Community Clinic
- YMCA of San Francisco Bayview Hunters Point
- YMCA of San Francisco Urban Services
- Youth Leadership Institute

## 34 ADDITIONAL RESOURCES

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To learn more about SFDPH efforts to protect and promote the health of all San Franciscans, please explore the following resources:

### DEPARTMENT OF PUBLIC HEALTH

- **SF Health Commission:** Read more about the SF Health Commission, the governing and policy-making body of the SFDPH. <https://www.sfdph.org/dph/comupg/aboutdph/hc/default.asp>
- **SFDPH Webpage:** Learn more about SFDPH services and programs and link to additional SFDPH reports – including past Annual Reports. [www.sfdph.org](http://www.sfdph.org)
- **SF Health Network:** Learn more about the SF Health Network, the city’s only complete care system. [www.sfhealthnetwork.org](http://www.sfhealthnetwork.org)
- **Zuckerberg SF General (ZSFG) Annual Report:** Learn more detailed information about ZSFG’s services, accomplishments, and operations over the last fiscal year. <https://www.sfdph.org/dph/comupg/oservices/medSvs/SFGH/SFGHAnnualReports.asp>
- **Laguna Honda Hospital (LHH) Annual Report:** Learn more detailed information about LHH’s services, accomplishments, and operations over the last fiscal year. <http://www.lagunahonda.org>

### FOUNDATIONS

- **San Francisco Public Health Foundation:** Read about the San Francisco Public Health Foundation, a non-profit that strives to provide resources to San Francisco’s public health community, facilitating the provision of high quality and cost-effective health care services. <http://sfphf.org>
- **SF General Foundation:** Find out more about the SF General (SFGH) Foundation, a not-for-profit corporation that provides fundraising support to ZSFG. [www.sfghf.org](http://www.sfghf.org)
- **Friends of Laguna Honda:** Learn more about Friends of Laguna Honda, a non-profit organization founded in 1956, dedicated to enhancing the quality of life for the residents at Laguna Honda Hospital and Rehabilitation Center by funding non-medical programs and services that would otherwise be unavailable. [www.friendsoflagunahonda.org](http://www.friendsoflagunahonda.org)

### ACCESS TO COVERAGE AND CARE

- **Healthy San Francisco:** Learn about the Healthy San Francisco program, including information on eligibility and enrollment. [www.healthysanfrancisco.org](http://www.healthysanfrancisco.org)
- **Get Covered San Francisco!** Learn more about health care options under the Affordable Care Act. [www.sfgov.org/healthreform](http://www.sfgov.org/healthreform)

### COMMUNITY ORGANIZATIONS

- **San Francisco Health Improvement Partnerships (SFHIP):** Learn more about SFHIP, a dynamic portal to the community’s priority health issues and associated community resources. [www.sfhip.org](http://www.sfhip.org)





Report can be found online at [www.SFDPH.org](http://www.SFDPH.org)  
(415) 554-2500

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