

Lee Ann Monfredini
President

David J. Sánchez, Jr., Ph.D.
Vice President

Edward A. Chow, M.D.
Commissioner

Catherine Dodd, R.N., Ph.Dc
Commissioner

Roma P. Guy, M.S.W.
Commissioner

James M. Illig
Commissioner

Markus Watson, D.D.S.
Commissioner

HEALTH COMMISSION

CITY AND COUNTY OF SAN FRANCISCO

Gavin C. Newsom, Mayor

Department of Public Health



Mitchell H. Katz, M.D.
Director of Health

Rebekah R. Varela
Acting Executive Secretary

TEL (415) 554-2666
FAX (415) 554-2665

Web Site: <http://www.sfdph.org>

MINUTES

HEALTH COMMISSION MEETING

Tuesday, March 6, 2007

At

3:00 p.m.

101 Grove Street

Room 300

San Francisco, CA 94102

1) CALL TO ORDER

President Lee Ann Monfredini called the meeting to order at 3:06 p.m.

Present: Lee Ann Monfredini, President
David J. Sanchez, Jr., Ph.D., Vice President
Edward A. Chow, M.D.
Catherine Dodd, R.N., Ph.D.c
James M. Illig
Markus Watson, D.D.S

Absent: Roma P. Guy, M.S.W.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF FEBRUARY 20, 2007

Action Taken: The minutes were approved with the following changes: Item 3.1 should read "Axis 1 diagnosis" as opposed to "Access 1 diagnosis". On item 3.3, the first two comments are in relation to general questions regarding HIV Services awards and client satisfaction surveys, not specific to Project Open Hand. Also on item 3.3, the last comment should reflect that the contract did include General Fund dollars.

3) APPROVAL OF THE CONSENT CALENDAR OF THE BUDGET COMMITTEE

Commissioner Sanchez chaired and Commissioner Chow and Commissioner Watson attended the Budget Committee meeting.

Items for Discussion and Approval

3.1 DPH-Central Administration – Request for approval of a new sole source contract and a five-year software maintenance agreement with the Center to Promote HealthCare Access, in the amount of \$1,728,262, which includes a 12% contingency, to develop a web-based eligibility screening and determination system related to the Health Access Program, for the period of March 2007 through June 2012 (5 years).

* Contract summary

Commissioner Comment:

- Commissioner Chow asked about the contributions of the California Endowment and asked for comment on the Endowment and the California HealthCare Foundation working together on this project. Tangerine Brigham stated that this project fits with both the mission of the California Endowment and the California HealthCare Foundation and that they are both funders of this project.

3.2 PHP-Primary Care – Approval to retroactively accept and expend a new grant from the California Health Care Foundation in the amount of \$241,225, for the San Francisco Department of Public Health, Community Oriented Primary Care, to fund a project entitled “Improving the Quality of Primary Care in San Francisco; Department of Public Health Primary Care Quality Indicators Project”, for the period of March 15, 2007 through December 15, 2007.

* Grant summary, Grant information form

Commissioner Comment:

- Commissioner Chow asked how this database integrates patient care at multiple sites and how it is patient centered. Dr. Drennan stated that this is based on the concept of medical home, and that this will allow for clients to be tracked wherever they are in the DPH system. He added that this would not solve the problem of tracking clients that receive care outside of the DPH system.
- Commissioner Chow followed up by asking how this system will track patients who are receiving care outside of the primary care setting. Dr. Johnson stated that the databases will be multifaceted and will be focusing on sorting and organizing clients beyond the medical home.
- Commissioner Sanchez asked to confirm that this was transitional funding. Dr. Johnson confirmed that it was.

3.3 AIDS Office-HIV Prevention – Request for approval of a contract modification to increase funds for to PHFE Management Solutions, in the amount of \$20,002, for a new total of \$120,616, which includes a 12% contingency, to provide fiscal intermediary support for the Positive Reinforcement Opportunity Project, for the period of July 1, 2006 through June 30, 2007 (1 year).

* Contract summary, Monitoring report summary, Client demographic information form

Commissioner Comment:

- Commissioner Chow asked who would be creating the content. Wendy Wolf clarified that DPH would be in charge of the content and that PHFE would be the fiscal agent.
- Commissioner Chow asked how PHFE won the RFP process. Ms. Wolf responded that PHFE has been flexible with administrative costs and also was the lowest bidder in the original RFQ process. She added that PHFE had a full time dedicated San Francisco staff person.

3.4 AIDS Office-HIV Prevention – Request for approval of a retroactive renewal contract with PHFE Management Solutions, in the amount of \$248,856, which includes a 12% contingency, to provide fiscal intermediary support for the STD Prevention & Control “Syphilis Prevention Project”, for the period of January 1, 2007 through December 31, 2007 (1 year).

* Contract summary, Monitoring report summary, Client demographic information form

4) **DIRECTOR’S REPORT**

Mitch Katz, MD, Director of Health presented the Director’s Report.

Broadway Rockslide

Residents of the 400 block of Broadway began calling 9-1-1 February 27th about 3:30 in the morning complaining of loud noise and rushing water. Firefighters responded to the scene to discover that 75 feet of the Vallejo Street hill had slid into the properties on Broadway and Montgomery Street. The 44 unit condominium building on Vallejo was evacuated and red tagged. Four buildings on Broadway and three buildings on Montgomery were also red tagged. The slide displaced 120 people from 86 units.

After initial response efforts by Police, Fire and the Department of Building Inspection, DPH and the Human Services Agency were called to respond and evaluate the needs of the displaced tenants. Mary Macgosy, from EMS conducted the initial health assessment and found no immediate health needs. David Nakanishi from Community Programs represented DPH at the afternoon briefing to determine if mental health professionals should respond. Most of the displaced occupants had the resources to take care of their own needs. Approximately 25 tenants that live on Broadway were housed at the Chinese Recreation Center shelter (1199 Mason) established by the American Red Cross. Most of those at the shelter were Cantonese speaking. The Human Services Agency and DPH both offered linguistically competent staff to respond at the shelter and act as translators for the displaced tenants. No other special needs were identified among the shelter residents.

As a proactive measure, the Division of Emergency Services opened the Command Center on Turk Street Tuesday afternoon. Mary Ellen Carroll from Policy and Planning responded for the Department. It was identified that towels were needed, and John Kanaley was able to supply these at a moments notice. The shelter was closed on Friday and the Red Cross issued hotel vouchers to all the tenants who were still in need of temporary housing. Although the incident was devastating for those who lost their homes, it could have been much worse. No one was injured as a result of the rock slide, displaced residents were resourceful and City Departments all responded appropriately and in a timely fashion. I want to extend my thanks to everyone in the Department who had a role in this response effort.

Health Care Security Ordinance

On February 27, 2007, Supervisor Ammiano, with the support of Mayor Newsom, introduced legislation amending the Health Care Security Ordinance. The amendments: (1) authorize the Department to establish and maintain reimbursement accounts, (2) extend the operative date of the employer health care expenditure requirement to January 1, 2008, (3) clarify remedies for violations of the Ordinance and (4) make other technical changes. The amendments are designed to address issues that have arisen in the planning and implementation of the Health Access Program and the Employer Spending Requirement. The Department is supportive of the amendments. As the Health Commission is aware, in the joint Department/Office of Labor Standards and Enforcement status report on the implementation of the Ordinance, the Department recommended amending the legislation to create a spending account option under the Health Access Program for non-resident workers of employers subject to the Employer Spending Requirement based on feedback from focus groups of employers. The amendments do not change the operative date for the Health Access Program which is scheduled for phased implementation beginning July 1, 2007. The amended legislation will be heard before the Board of Supervisors' Budget and Fiscal Committee on Wednesday, March 7, 2007.

State Medical Marijuana Identification Card Program

The State Department of Health Services told counties in late December that it would raise its fee for the Medical Marijuana Identification cards from \$13 to \$142 for non Medi-Cal beneficiaries and from \$6.50 to \$71 for Medi-Cal beneficiaries beginning March 1, 2007. The letter stated the fee increase was necessary to comply with Health and Safety Code 11362.755 (a) of Senate Bill 420 which requires that the State's program be fully self supported by the fees it collects. In spite of the mandatory nature of the statewide program, only 24 counties in California implemented the MMCI card program, with San Francisco producing 40% of the State's revenues. The low compliance rate is the reason the State did not realize the revenues it expected from implementation of the program.

We received notice from the State the morning of March 1st that the fee increase would not go into effect until April 1st and the increase would now be \$66 for non Medi-Cal beneficiaries and \$33 for Medi-Cal beneficiaries. Including the costs DPH incurs processing the applications the charge for the new cards will be \$103 for non Medi-Cal beneficiaries and \$52 for Medi-Cal beneficiaries. The State requires the card be renewed on an annual basis. Part of the renewal requirement is a doctor's referral which costs anywhere from \$100 to \$250. This fee increase, though smaller than the original proposed increase, will cause significant financial hardship on many medical marijuana patients in San Francisco.

Jimmy Loyce Announces his Retirement

Jimmy Loyce, Director of the AIDS Office, announced his intent to retire as of May 1st. Jimmy has worked for DPH for more than 20 years and has served as Director of the AIDS Office since 2000. Mr. Loyce has been a true leader in the community to ensure that people living with HIV/AIDS receive the best services available. He has assured us that while he is leaving DPH, he remains committed to the ongoing work to help in the fight against the spread of HIV/AIDS. I know you all join me in wishing Jimmy the best in this new and exciting chapter of his life.

With Jimmy's retirement, we will be fully integrating the AIDS Office into Community Programs. As the Commissioners will remember, we have already taken two steps towards integration. We moved AIDS housing into Community Programs under Marc Trotz. Then last year we moved the

fiscal branch of the AIDS Office into Finance under Anne Okubo. Jimmy is in full support of these changes and will be helping Barbara Garcia and me to implement them in the next two months.

California Public Health Association Conference

I have been asked to deliver a keynote address at the 2007 Joint Biennial Southern and Northern California Public Health Association Biennial Meeting in Los Angeles this Thursday. The Conference theme is, "New Beginnings for Public Health in California." I will be presenting information on the San Francisco's Health Access Program (HAP).

Good News for Covering Kids in San Francisco

The results of the 2005 California Health Interview Survey (CHIS) are now available. CHIS is a biennial survey of more than 45,000 California households on health and health access issues searchable at the county level. It is a collaborative project of the UCLA Center for health Policy Research, the California Department of Health Services, and the Public Health Institute. Once again, the survey shows that more than 99 percent of children ages birth through 18 have health insurance coverage. In 2005 CHIS shows coverage rates of 99.7 percent for San Francisco children; in 2003 it showed 99.2 percent coverage. This result helps confirm that San Francisco has achieved and is maintaining universal coverage for its children. In addition the survey shows that coverage for young adults age 19 through 24 increased from 80.9 percent in 2003 to 91.1 percent in 2005.

We are proud of the hard work of our eligibility workers and application assistants citywide who work to determine program eligibility and assist families with the paperwork required to enroll children and young adults into the proper program. We are also pleased that these results help confirm the importance of local programs like the Healthy Kids & Young Adults (HKYA) program in accomplishing universal coverage. Thank you to the hard working staff of the San Francisco Health Plan, our very capable partner in the (HKYA) program. More information is available at www.chis.ucla.edu.

AIDS Funding: Title I

We have received the Formula portion of the CARE Title I Award for FY 07-08 (3/1/07 - 2/28/08) \$14,672,553. It is less than last year's Formula award by \$772,240. We anticipate receiving the Supplemental award by 4/30/07 and anticipate a reduction of unknown amount. Last year's award was \$12,520,071. The Title II award notification from the State should come around the same time. Last year's award was \$1,256,928. The Minority AIDS Initiative (part of Title I) will be a competitive process with a separate application which will be awarded by August 1, 2007. Last year's award was \$534,737.

CHART Data Public Today

Last week, the Commissioners received a memorandum regarding the California Hospital Assessment and Reporting Taskforce (CHART) data that were made public today. CHART was established in 2004 to develop a statewide hospital performance reporting system. Selected key aspects of hospital performance are measured and reported; and used to provide hospitals and clinicians with benchmarking data on which to base quality improvement efforts. San Francisco General Hospital rated well in almost all clinical aspects that were measured, especially in the areas of care of patients with Heart Attack Heart Failure, and Prevention of Pneumonia. The one clinical area that SFGH rated "poor" was Pneumonia care, and it was measured by whether patients with pneumonia were provided with antibiotics within a four-hour period from the time they present. As the only trauma center and the busiest Emergency Department in San Francisco, this has been a

challenge for us. We have looked at our existing systems, identified barriers and are putting action plans in place to improve our performance in this area.

Project Homeless Connect, 2006 Statistics

The Department of Public Health has been on the front lines of Project Homeless Connect (PHC) since it began in 2004. Last month marked the 15th Project Homeless Connect event at Bill Graham Auditorium and the number of volunteers helping and those seeking services continue to grow. Project Homeless Connect recently released its statistics for 2006. I thought these impressive numbers might be of interest to the Commission.

Project Homeless Connect: 2006 in Review

- 8,659 people volunteered at PHC
- 9,738 clients came through the PHC door
- 1,970 people received benefits assistance (SSI, Food stamps, GA)
- 1,142 were screened for employment opportunities and 39 individuals were hired through Safeway, CBS Outdoor, and SF Department of Human Services
- 1,735 people received medical care
- 1,036 received legal assistance
- 560 received methadone treatment
- 1,096 dental screenings were performed
- 520 received mental health and substance abuse services
- 99,089 lbs of groceries were given away by the SF Food Bank
- 73 people were reconnected to family or friends through Homeward Bound
- 902 people are off the streets and provided shelter and housing

In addition to the list of accomplishments, PHC also was instrumental in attracting a large number of corporate sponsors that donated everything from jeans to eye glasses and food. We continue to support PHC and are grateful to the many employees who have spent countless hours helping to improve the lives of those who live on the street.

Chinese New Year Grand Marshal

Lisa O'Malley, Principal Environmental Health Inspector was asked by the Chinese Chamber of Commerce to serve as the Grand Marshall in the Chinese New Year Festival and Parade. Over the past several years, Ms. O'Malley and her staff have worked closely within the Chinatown community to help restaurant owners raise their level of awareness and compliance with the City's health and sanitation codes. As a result, health inspection scores in Chinatown have been steadily rising and a number of restaurants received the new Symbol of Excellence. Rose Pak nominated Ms. O'Malley for this honor. I know the Commissioners join me in congratulating Ms. O'Malley and her staff for this recognition and thank them for the work they continue to do to help many of the new restaurant operators in Chinatown learn about and comply with the City's food service regulations.

Pedestrian Safety: Walk Your Bike

At last month's Health Commission, I reported on the activities the Department is participating in regarding pedestrian and bicycle safety. I am attaching a recent clipping from the *Chronicle* and a copy of the "Walk Your Bike on the Sidewalk" posters that are being distributed in critical areas of the City.

Commissioner Comment:

- Commissioner Dodd asked if the CHART database was adjusted for case mix. Gene O'Connell stated that it was not. Commissioner Dodd also asked what the standard of care was for pneumonia. Ms. O'Connell stated that they have not wanted to give antibiotics prior to a chest x-ray, and that they have changed the protocol so that the triage nurse can order a chest x-ray.
- Commissioner Dodd asked that the President of the Health Commission write a letter to the editor to clarify that we do very well once the client is diagnosed and to address the issues of case mix and protocol of pneumonia diagnosis. Commissioner Monfredini confirmed that she would do this with the assistance of Eileen Shields.
- Commissioner Chow stated that he would like SFGH to look at the standard of care and to see this as an opportunity to move in a positive way towards reviewing the existing standard of care.
- Commissioner Illig stated that he wanted to acknowledge Jimmy Loyce for his work. He added that he thinks it is an appropriate move to integrate the AIDS division into Community Programs.
- Commissioner Chow commented that there were articles in the Chinese newspapers on the inspections and that there was a grid on restaurant's that did not do as well.

5) **PUBLIC COMMENT**

None.

6) **CLOSED SESSION**

A) Public comments on all matters pertaining to the closed session

None.

B) Vote on whether to hold a closed session (San Francisco Administrative Code Section 67.11)

Action Taken: The Commission voted to hold a closed session.

The Committee went into closed session at 3:46 p.m. Present in the closed session were Commissioner Monfredini, Commissioner Sanchez, Commissioner Chow, Commissioner Dodd, Commissioner Illig, Commissioner Watson, Tangerine Brigham, Deputy Director of Health, Vince Chhabria, Deputy City Attorney, and Rebekah Varela, Acting Health Commission Executive Secretary.

C) Closed Session Pursuant to Government Code Section 54956.9 and San Francisco Administrative Code Section 67.10(d)

**1. REVIEW OF GOLDEN GATE RESTURANT
ASSOCIATION V. CITY AND COUNTY OF SAN
FRANCISCO**

2. DISCUSSION OF SPECIAL MEETING OF THE HEALTH COMMISSION

D) Reconvene in Open Session

The Committee reconvened in open session at 5:10 p.m.

1. Possible report on action taken in closed session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
2. Vote to elect whether to disclose any or all discussions held in closed session (San Francisco Administrative Code Section 67.12(a).)

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

7) ADJOURNMENT

The meeting was adjourned at 5:11 PM.

Rebekah R. Varela
Acting Executive Secretary to the Health Commission

Health Commission meeting minutes are approved by the Commission at the next regularly scheduled Health Commission meeting. Any changes or corrections to these minutes will be noted in the minutes of the next meeting.