

James M. Illig  
President

Sonia E. Melara  
Vice President

Edward A. Chow, M.D.  
Commissioner

Margine A. Sako  
Commissioner

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

Steven Tierney, Ed.D.  
Commissioner

Catherine M. Waters, R.N., Ph.D.  
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

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Acting Executive Secretary

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## MINUTES

### HEALTH COMMISSION MEETING

Tuesday, September 1, 2009

At

4:00 p.m.

101 GROVE STREET, ROOM 300 or ROOM 302  
San Francisco, CA 94102

#### 1) CALL TO ORDER

Commissioner Illig called the meeting to order at 4:12 p.m. and dedicated the meeting to Senator Ted Kennedy.

Present: Commissioner James M. Illig, President  
Commissioner Edward A. Chow, M.D.  
Commissioner Margine A. Sako  
Commissioner David J. Sanchez, Jr., Ph.D.  
Commissioner Catherine M. Waters, R.N., Ph.D.

Commissioner Illig gave the following opening remarks:

“America lost a great champion for public health last week when Senator Ted Kennedy died. Because this meeting of the Commission is addressing three public health issues that were important to him, I would like to dedicate this meeting to him, and adjourn in his memory.

Some of you know that I worked for Sen. Ted Kennedy throughout my four undergraduate years at Georgetown, and off and on through graduate school in DC. I was his personal aide, driver, and security staff, working in his Senate office and his home with Joan and Kara, Teddy and Patrick, and I had a unique opportunity to get to know him and what he felt was important.

Sen. Kennedy authored the first Ryan White Act for HIV treatment and support in 1990, with the input of this department and San Francisco’s first AIDS services providers, and secured bipartisan support for its passage and subsequent reauthorizations. He strongly supported the current efforts to

reauthorize Ryan White before it sunsets at the end of this month, and we will consider a resolution urging Congress to do that.

He would be as proud as we are about the success of our Healthy San Francisco program, showing the nation that universal health access for the uninsured is not only possible, but at practical and effective way to assure a medical home and comprehensive care for every San Franciscan who lacks health insurance. He'd be very interested in hearing what Tangerine will present to us in the Healthy San Francisco annual report.

And he would appreciate our support for the public option in any national healthcare reform, a cause that defined his life and was very personal to him---with his own broken back from a plane crash, his son Teddy's loss of a leg to bone cancer, his daughter Kara's lung cancer, and the struggles with addiction of his former wife Joan and his youngest son, Patrick. I know that he believed healthcare is a right, not a privilege, and that insuring our health should not be a for-profit business, but a fundamental service of our government.

This Commission's strong support for Ryan White reauthorization, Healthy San Francisco, and the public option in national healthcare reform, provides a lifting tribute to Senator Ted Kennedy, whom many believe was the greatest Senator of our time."

2) **APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF AUGUST 4 2009**

Action Taken: The Commission (Illig, Chow, Sako, Sanchez, Melara, Waters) approved the CPMC resolution presented at the 7/21 meeting and approved the 8/4 minutes with the following modifications: The Laguna Honda Hospital bylaws were approved with the changes made during the 8/4 meeting; the CPMC resolution was unanimously approved at the 7/21 meeting; Commissioner Illig appointed Commissioner Chow, Commissioner Melara and Commissioner Tierney to a task force regarding the CPMC resolution.

3) **DIRECTOR'S REPORT**

**Flu Forum Attracts 100**

This year's annual San Francisco Flu Forum held on August 27<sup>th</sup> attracted a large and mobilized group of individuals concerned about the upcoming flu season. Audience membership varied from clinicians to school personnel to business representatives. The event, cosponsored by the San Francisco Department of Public Health and the San Francisco Immunization Coalition, is designed to address preparations for the upcoming influenza season, along with strategies for prevention and important information about the flu such as vaccine development and availability. Because of the intense focus and public interest in both seasonal and H1N1 influenza, the Forum was also opened to reporters. Nearly 100 individuals attended the two-hour Forum with presentations from Susan Feryak, MD, Director of Communicable Disease Control & Prevention, Amy Pine, Director, Communicable Disease Prevention Unit, and Olivia Bruch, Infectious Disease Emergency Coordinator. Participants listened to the latest information and planning activities for the upcoming flu season and then had an opportunity to ask questions, voice concerns and network with others in San Francisco who are working to prevent the spread of influenza.

### **Revocation of Food Certificates**

On Tuesday, August 25, the San Francisco Department of Public Health (DPH) sent out 345 letters to San Francisco restaurants that their certification for food safety managers will no longer be recognized as valid as a result of inappropriate testing and certification procedures. We also informed state and county public health authorities throughout California of at least 183 additional restaurants outside of San Francisco whose certifications are similarly affected. Another 78 certifications whose holders list no address have also been identified.

This enforcement action follows an investigation initiated by DPH and conducted by City Attorney Dennis Herrera's office that uncovered significant irregularities in the administration of the exams by three DPH food inspectors working independently and without the authority of the Department.

Herrera's investigation found that numerous Food Safety Certifications had been issued to individuals who never actually took the examination. Other examinees were given the correct answers during the course of the exam, and in still other instances test materials and correct answers were shared with examinees before the test was administered. Two of the three DPH food inspectors are no longer employed with the City, and an investigation continues into the conduct of the third employee.

Restaurants out of compliance will have 60 days to get a new certificate. Environmental Health has scheduled several food safety classes and exams to help the restaurants come into compliance.

### **Laguna Honda Behavioral Health Services Assessment**

As part of the city's compliance with the *Chambers* settlement, Davis Y. Ja & Associates were contracted to perform an assessment of behavioral health services at Laguna Honda. Their report recommends program coordination between Laguna Honda and Community Behavioral Health Services.

The report suggests creation of a standardized assessment, treatment and discharge model for the Laguna Honda Integrated Wellness program (formerly the Psychosocial Program) to emphasize administrative and clinical coordination among the hospital's departments of medicine, psychiatry, nursing, social work, education and training and quality management.

Laguna Honda Administrative, Medical and Nursing executive staffs have prepared a four-part action plan in conjunction with CBHS set to begin in September.

- Implement additional quality improvement measures in the Integrated Wellness program: (a) standardized assessments, (b) standardized care and treatment protocols, (c) clinical standards of practice, (d) staffing models, and (e) staff training programs.
- Correct duplications in charting and database systems.
- Join Community Behavioral Health Services and Targeted Case Management to standardize discharge transition.
- Develop a quality assurance and performance improvement program to monitor outcomes.

### **Adult Immunization & Travel Clinic to Celebrate 10<sup>th</sup> Anniversary with Seasonal Flu Kick-Off**

Staff from the Adult Immunization & Travel Clinic will be kicking off its Seasonal Flu Vaccine program and its 10-year anniversary **on Thursday, September 3 at 11 a.m.** with a media event designed to bring attention to the importance of getting a seasonal flu shot.

“A decade of disease prevention at home and abroad” describes the work of what eventually was voted by the *SF Bay Guardian* to be the “Best Place to Get Shot(s)” in San Francisco. The Adult Immunization and Travel Clinic opened in 1999 in a cramped office space with a nurse, a health educator and a part time medical director. Today, the Adult Immunization and Travel Clinic occupies several rooms, has a staff of 18, including its own medical director, a nurse practitioner and 9 nurses, and is a highly-regarded fee-for-service clinic and high-volume provider of both travel health and general immunization services in San Francisco.

In the course of the past 10 years, AITC has provided preventive health care services for nearly 52,000 individuals visiting the clinic, seeking immunization against preventable diseases or requesting recommendations and medications to maintain their health during international travel. AITC nurses have administered over 150,000 vaccinations of all types, including nearly 50,000 seasonal flu shots given both at the main 101 Grove Street clinic and on-location at dozens of San Francisco businesses, schools, and organizations.

Because this year’s flu season will be arriving with additional strains of flu viruses—seasonal flu plus the newer novel H1N1 (swine) flu, each requiring separate vaccines—the Clinic staff anticipates a high demand for its services.

The Commissioners are welcome to join us for this event.

### ***Health Dialogues* Features Senior Health Inspector on Food Safety**

*Health Dialogues*, a weekly program on KQED 88.5 FM radio that features health-related topics of importance to Californians, spent a day with Senior Health Inspector Sheldon Lew for a special program on Food Safety. A reporter accompanied Inspector Lew as he visited a number of markets and restaurants during a routine day of inspections. The program also looked at how food inspection works at the federal level, new legislation that might affect California’s leafy green growers, and how to test garden soil for lead and other contaminants before growing your own food. The interview aired for 5 days beginning on August 20. An audio-slideshow of the food inspections and a podcast of the show are available at [www.HealthDialogues.org](http://www.HealthDialogues.org).

### **STD Outreach in BVHP**

The STD Section is collaborating with Internet Sexuality Information Services, Inc. to produce a series of events for youth aged 15-25 years old and their families who reside in Bayview-Hunters Point. Called **Get Live, Stay Live**, the series focuses on youth culture combined with sexual health awareness raising activities. The first event was held the end of July featuring local talent in a concert at the Bayview Opera House. Youth who got a sexual health check up at a local clinic were granted free admission and VIP access to the event. A mobile teen health van was also on site to provide education, testing and referral services.

### **STD Trial Recruits 100+ Participants**

The STD Section is participating in a multisite randomized trial of treatment of asymptomatic bacterial vaginosis in young women to determine if this might reduce the incidence of chlamydia and gonorrhea infections. In San Francisco, young women, particularly those of color, are among those at highest risk for chlamydia and gonorrhea. We are pleased to be able to participate in this study that has the potential to provide important data that could improve the sexual and reproductive

health of these young women. The STD Section has recruited over 100 women aged 18-25 to participate.

### **Food Guardian Program to Begin in September**

The Southeast Food Access (SEFA) Working Group, whose mission it is to support access to healthy food and create a robust, sustainable food system in the BVHP, will be launching its Food Guardian program in September. The Food Guardians, funded by the Department of Environment, will be residents of the BVHP recruited to help SEFA accomplish its mission. Specifically they will educate residents about healthy food systems, work with local retailers to improve their offerings and support the burgeoning flock of BVHP urban gardeners. SEFA is co-chaired by Mark Ghaly, MD, Director of SEHC, and Michael Janis, SF Wholesale Produce Market. Susana Hennessey-Lavery and Christina Goette staff the SEFA Working Group.

### **Don't Say Good Bye to Soda-Free Living**

So that everyone is reminded of the importance of maintaining healthy lifestyle choices throughout the year, the Soda Free Summer program wants to remind you that although Soda Free Summer may be drawing to a close, that doesn't mean its time to go back to drinking those sweetened beverages. Drink that great Hetch Hetchy water; flavor it with mint, cucumber or berries for an extra refreshing drink.

### **Journal of Pediatric Infectious Diseases**

Congratulations to Rita Shiao, MPH, Epidemiologist and Erica Pan, MD, MPH, Director, Bioterrorism and Infectious Disease Emergencies Unit, whose work was recently published in the *Journal of Pediatric Infectious Diseases* (JPID) under the title "Epidemiology of community-associated methicillin-resistant *Staphylococcus aureus* in San Francisco children." To see abstracts please visit webpage <http://iospress.metapress.com/content/h0k4753132x8/>.

Dr. Katz provided an update to the Director's Report regarding H1N1. He explained that the H1N1 is expected to become available around 10/20. The first priority group to receive the H1N1 vaccine includes children, pregnant women, and public safety workers. About twenty vaccination centers in San Francisco will be set up during the third and fourth weeks of October to make the vaccines available for the public. Dr. Katz praised the public messages associated with the "Infect Me Not" campaign.

### Commissioner Comment/Requests for Follow-Up:

Commissioner Chow asked about the reasons behind the reprioritization of the H1N1 vaccines compared to past prioritizations for the seasonal flu vaccines. Dr. Katz explained that children are of high priority to receive both the H1N1 vaccine and seasonal flu vaccine because they are of especially high risk this year. Unlike past flu seasons, seniors are not at high-risk for H1N1, although the supply of H1N1 vaccines may eventually become available for seniors.

Commissioner Illig asked if restaurant employees have been reeducated on certification procedures. Dr. Katz explained that the certification process is being reinforced and that restaurant employees will undergo the recertification process within 60 days.

Commissioner Chow asked when the restaurants with faulty certification will be reviewed again. Dr. Katz explained that the inspection process requires that every food establishment employ at least one person who passed the certification test and restaurants will be reviewed based on whether employees have taken the test. Dr. Katz also pointed out that at many food establishments, more than one employee has undergone the certification testing process.

#### 4) GENERAL PUBLIC COMMENT\*\*

Evelyn Morales of Laguna Honda Hospital asked the Commission to overturn the pay cut to CNAs. She expressed concern for the potential repercussions of the 17% pay cut on the quality of care.

Valoria Russell-Benson described the nature of work and care provided by CNAs in hospitals.

Dr. Derek Kerr, M.D, CNA of Laguna Honda Hospital elaborated on his experience working as a CNA and strongly spoke against the pay cut t.

Theresa Rutherford, a CNA at Laguna Honda Hospital, highlighted the challenges women face in the workplace. She explained that seeing as a majority of CNAs are women; the pay cuts send a discriminatory message to CNAs.

Mike Dingle of SFGH spoke out against the pay cut, citing that the paycut undermines the hard work CNAs provide patients everyday. He also felt it is unfair that CNA's are at the bottom of the current pay scale.

Damita Davis-Howard of SEIU 1021 stated that the pay cut is devaluing of clerical and CNAs and feels like a value judgment from the Commission. Davis-Howard said that CNAs are primarily women and people of color and feels that the pay cut is discriminatory.

Victor Frontillasn of SEIU 1021 said that the nature of a CNAs work is exhausting, poses a safety risk, and many CNAs work more than one job.

Brenda Veras of SFGH said it was devastating to lose clerks due to the pay cuts and the influx of new employees at the Healthy SF clinic she works has an impact on patient care and services.

Akil Fudail of Laguna Honda Hospital expressed how stressful the pay cuts are. This source of stress will comprise the quality of care CNAs can provide.

Shari Zinn of SEUI 1021 and SFGH expressed concern over how recent pay cuts could jeopardize the quality of care provided at the Avon Center.

Commissioner Illig praised the hard work performed by CNAs and expressed how declassification of CNA positions is undoubtedly difficult, yet better than losing the positions entirely. Commissioner Illig stated that the Mayor and Board of Supervisors have the authority to restore the cuts, not the Health Commission.

#### 5) FINANCE COMMITTEE: CONTRACTS REPORT

Jacquie Hale presented the Contracts Report.

##### Action Taken:

The Commission unanimously approved the Contracts Report.

**5A) Children's Health Council**– Request for approval of retroactive new contract with the Children's Health Council in the amount of \$60,000 per year to provide out-of-county residential

mental health services for children and youth for the period of July 1, 2009 through June 30, 2014, for a total contract value of \$336,000, including 12.0% contingency.

Action Taken:

The Commission unanimously approved the new contract with the Children's Health Council.

6) **PRESENTATION OF A RESOLUTION URGING CONGRESS TO REAUTHORIZE THE RYAN WHITE HIV/AIDS TREATMENT MODERNIZATION ACT**

Bill Blum, Interim Director, HIV Health Services, presented the resolution urging Congress to reauthorize the Ryan White HIV/AIDS Treatment Modernization Act.

Action Taken:

The Commission unanimously approved the resolution urging Congress to reauthorize the Ryan White HIV/AIDS Treatment Modernization Act.

Commission Comments/Requests for Follow-Up:

Commissioner Illig expressed concern about the sunset clause in the Ryan White HIV/AIDS Treatment Modernization Act and stressed the importance of the Ryan White HIV/AIDS Treatment Modernization Act.

7) **HEALTHY SAN FRANCISCO ANNUAL PROGRAM REPORT (FY 2008-09)**

Tangerine Brigham presented the Healthy San Francisco Annual Program Report. A copy of her presentation is attached and hereby incorporated into these minutes.

Public Comment:

Dick Hodgson of SFCCC praised the collection of patient feedback on Healthy San Francisco and believed Healthy San Francisco aligns with his clinic's mission. He felt that the clinics are beginning to adjust to the cuts but strive to meet Healthy San Francisco's objectives despite the decreased funding. Mr. Hodgson also praised Healthy Families and discouraged future budget cuts to its programs.

Commission Comments/Requests for Follow-Up:

Commissioner Chow asked about difference between Tables H1 and H2. Ms. Brigham explained that the figures Table H1 represent is what is currently being spent by the City and how new money is being spent, whereas as Table H2 represents how much the whole program costs the city. to operate. She also noted that Table H3 shows how Healthy San Francisco has become the primary program for the uninsured.

Dr. Katz praised Healthy San Francisco's ability to incorporate various preexisting programs into Healthy San Francisco's services.

Commissioner Chow praised Ms. Brigham's work on the report and suggested she explain how the program has maintained the same amount of government funding for the uninsured. Ms. Brigham agreed and said she will include a figure from 2007-2008 to represent the sliding scale payment for that year. Dr. Katz suggested this information be included under Table H2.

Commissioner Sako praised illustrating the costs of Healthy San Francisco in the report and asked if Healthy San Francisco patients who want to go to Chinese Hospital will be referred to or transferred to SFGH. Ms Brigham explained that Healthy San Francisco allows patients to seek care at Chinese Community Hospital.

Commissioner Sako inquired about the true total costs of the uninsured. Ms. Brigham explained that Healthy SF serves a charity care population and it does not cover the cost of inpatient care for Healthy SF Participants at private hospitals. Ms. Brigham stated that she receives data on the costs of services for each participant, but has yet to receive all of this data from hospitals.

Dr. Katz explained that the Health Department gives Chinese Hospital one lump sum of money and does not know how much pays for Healthy SF patients at Chinese Hospital or CPMC. Funding from the Health Department mostly covers expenses for outpatient side care.

Commissioner Illig asked if people who begin treatment under Medicaid are disenrolled from Healthy SF. Dr. Katz answered in the affirmative.

Commissioner Sako asked Ms. Brigham to clarify why mammograms are not included as preventive care under Healthy SF. Ms. Brigham explain that during a patient's visit for another issue, a doctor can recommend a mammogram, even though the primary reason for the medical appointment was not to have a mammogram. This process results in an underreporting in primary care visits. Dr. Katz explained that there is a hierarchy of preventive care. Visits that are preventive mean that someone has no illness prior to a medical appointment.

Commissioner Sanchez praised Ms. Brigham's work on data integration and the overall success of the program.

Commissioner Waters asked why Healthy SF rate of colorectal cancer screenings on Table D8 is lower than other types of preventive screenings. Ms. Brigham answered that Healthy SF is trying to improve this percentage.

Commissioner Illig praised the report and asked if there have been Healthy SF patients who have sought care outside of San Francisco. Ms. Brigham that someone could potentially receive care outside of San Francisco only if they present their Healthy SF card and the hospital attempted to get funding from Healthy SF. To date, there have been no requests from providers outside San Francisco for reimbursement. Dr. Katz added that the bulk of Healthy SF patients would not get charged at other county's hospital due to their income bracket.

Commissioner Illig asked if young workers are feeling that Healthy SF is a viable insurance option. Ms. Brigham stated that the program does not ask for participant's employment status, unless the insurance is provided through an employer.

Commissioner Illig asked should we encourage the Board of Supervisors to make changes to the employer spending requirements on health insurance. Ms. Brigham forwarded this question to Ms. Levitt of the city's office of labor standards enforcement. Department. Ms. Levitt explained that there is no definite answer. Similar legislation was rejected in Maryland and other areas based on the government's inability to dictate the types of benefits that result in higher employer spending requirements on health insurance.



Commissioner Illig expressed concern about data limitation in evaluating Healthy SF. He asked how the Health Commission could help encourage hospitals to show full costs and impacts of the program. Ms. Brigham explained she had great feedback from hospitals and feels that hospitals have done a great job documenting the information she asked for.

8) **FY 2009-10 STATE BUDGET IMPACT ON DPH**

Jim Soos presented the resolution urging the Mayor and Board of Supervisors to protect the Department of Public Health from additional cuts due to state budget reductions. A copy of his presentation is attached and hereby incorporated into these minutes.

Action Taken:

The Commission unanimously approved the resolution after amending the third clause so the amount listed reads \$16.4 million.

Commission Comments/Requests for Follow-Up:

Commissioner Illig noted that other agencies are facing major budget cuts in addition to the Department of Public Health.

9) **PRESENTATION OF A RESOLUTION URGING CONGRESS TO INCLUDE A PUBLIC OPTION IN HEALTH REFORM LEGISLATION**

Commissioner Melara presented a resolution encouraging Congress to include a public option in health reform legislation.

Action Taken:

The Commission unanimously passed the resolution.

10) **OTHER BUSINESS\*\*\***

**JOINT CONFERENCE COMMITTEE REPORTS**

None.

**COMMITTEE AGENDA SETTING**

Commissioner Illig announced that the next Joint meeting of the planning and health commissioner will be held on 9/17 to consider the CPMC IMP. Commissioner Illig asked Commissioner Melara if CHPEC wants to consider the budget principles. Commissioner Melara said the CHPEC agenda is full for 9/15. Commissioner Illig said the full Commission will consider the budget principles on 9/15.

Commissioner Sako requested a hearing on the status of paramedics in firehouses. She requested an overview of the program because DPH is still involved in the EMS system.

11) **CLOSED SESSION**

A) **Public Comments on All Matters Pertaining to the Closed Session**

No public comment.

B) **Vote on Whether to Hold a Closed Session (San Francisco Administrative Code Section 67.11)**

The Commission went into closed session at 6:50 p.m. Present in closed session were Commissioner Chow, Commissioner Illig, Commissioner Sako, Commissioner Sanchez, Commissioner Waters, Commissioner Melara, Mitchell H. Katz, M.D., and Deputy City Attorney Adelmise Roseme Warner.

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

**REVIEW OF GOLDEN GATE RESTAURANT ASSOCIATION V. CITY AND COUNTY OF SAN FRANCISCO;**

This item was postponed to the 9/15 Health Commission meeting.

**APPROVAL OF A SETTLEMENT, JEANNE SCHOENSTEIN V. CITY AND COUNTY OF SAN FRANCISCO, SAN FRANCISCO SUPERIOR COURT, CASE NO. CGC-08-477472;**

The Commission (Illig, Chow, Melara, Waters, Sanchez, Sako) approved the settlement of Jeanne Schoenstein V. City and County of San Francisco.

**PUBLIC EMPLOYEE PERFORMANCE EVALUATION, DIRECTOR OF HEALTH, MITCHELL H. KATZ, M.D.**

This item was postponed to the 9/15 Health Commission meeting.

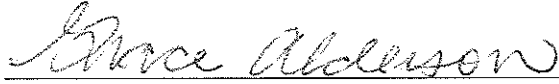
D) **Reconvene in Open Session**

The Commission (Illig, Chow, Waters, Sanchez, Sako, Melara) reconvened in open session at 7:20 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 Item)

12) ADJOURNMENT

The Commission adjourned in honor of Senator Ted Kennedy at 7:23pm.



Grace Alderson

Acting Health Commission Executive Secretary

**HEALTH COMMISSION**  
**City and County of San Francisco**  
**Resolution No.    11-09**

**URGING THE MAYOR AND THE BOARD OF SUPERVISORS  
TO PROTECT THE DEPARTMENT OF PUBLIC HEALTH  
FROM ADDITIONAL CUTS DUE TO STATE BUDGET REDUCTIONS**

WHEREAS, the State of California recently cut its FY 2009-10 budget by \$24 billion due to State General Fund revenue shortfalls, including statewide cuts of more than \$2.2 billion to health programs; and

WHEREAS, the Controller's Office is estimating that the City and County of San Francisco is facing a potential \$123.3 million General Fund impact as a result of the State budget cuts; and

WHEREAS, \$86.9 million of the \$123.3 million General Fund impact can be financed leaving a \$36.4 million impact against an \$18.0 million City reserve for State cuts, leaving an \$18.4 million citywide deficit; and

WHEREAS, the Department of Public Health (DPH) estimates that the impact to local health programs could be \$18.X million including reductions to Medi-Cal, Healthy Families, HIV Prevention and Health Services, Substance Abuse Treatment, County Health Services, and Public Health programs; and

WHEREAS, this reduction amounts to an additional 1.2% cut to DPH on top of the 6.5% cut that DPH made during the City's budget process; and

WHEREAS, DPH still faces \$12.3 million in structural shortfalls and unfunded items in its budget that will require mid-year program reductions and staff layoffs; and

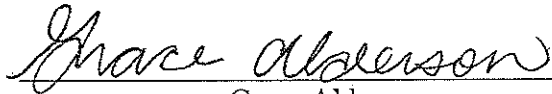
WHEREAS, hundreds of people testified before the Health Commission during the most recent budget season about the impact that proposed budget reductions would have on their lives and the lives of others; and

WHEREAS, the Health Commission has a responsibility to maintain the safety net and public health services for San Francisco's most vulnerable residents and is opposed to any cuts in current services that threaten the safety net, and furthermore has the responsibility to inform decision makers about critical health care needs; now, therefore, be it,

RESOLVED, that the Health Commission is deeply concerned about the extent of additional reductions resulting from State budget cuts and the impact on DPH's ability to provide the range of services critical to fulfilling its mission; and, be it

FURTHER RESOLVED, that the Health Commission strongly urges the Mayor and the Board of Supervisors to protect the Department of Public Health from additional cuts due to State budget reductions.

I hereby certify that the San Francisco Health Commission at its meeting of September 1, 2009 adopted the foregoing resolution.



Grace Alderson

Acting Executive Secretary to the Health Commission

**HEALTH COMMISSION**  
**City and County of San Francisco**  
**Resolution No. 13-09**

**URGING CONGRESS TO APPROVE THE THREE-YEAR RYAN WHITE  
HIV/AIDS TREATMENT MODERNIZATION ACT REAUTHORIZATION  
BEFORE SEPTEMBER 30, 2009**

WHEREAS, the CDC estimates that 250,000 to 300,000 individuals diagnosed with HIV infection still receive no HIV-related medical treatment, and another 180,000–240,000 do not even know they are infected, meaning that there are at least 430,000 people living with HIV in the U.S. who are not receiving HIV-related medical care; and,

WHEREAS, in 2008, the CDC estimated that approximately 56,300 people were newly infected with HIV in the previous year; and,

WHEREAS, the San Francisco Eligible Metropolitan Area has a population of 1.8 million and an estimated 23,000 people living with HIV/AIDS, approximately 19,000 of whom live in San Francisco; and,

WHEREAS, improved access to care and increasingly effective HIV treatments have resulted in a decline in deaths among persons living with HIV/AIDS, which, in turn, means that there are more people living with HIV/AIDS and, consequently, more people in need of services and adequate health insurance coverage for such services; and,

WHEREAS, the Ryan White Act, now funded at \$2.2 billion annually, is the largest federal discretionary response to the domestic HIV/AIDS epidemic; and,

WHEREAS, Ryan White programs play a pivotal role in providing uninsured or underinsured people living with HIV and AIDS with the care and treatment they need and deserve; and,

WHEREAS, the Ryan White Act addresses the unmet care and treatment needs of individuals living with HIV/AIDS by funding primary health care and support services that enhance access to and retention in care; and,

WHEREAS, Ryan White programs include legislative fixes supported by over 275 HIV/AIDS organizations in 45 states, Washington D.C. and Puerto Rico; and,

WHEREAS, Ryan White programs work with cities, states, and local community-based organization to provide services to more than half a million individuals each year; and,


WHEREAS, in December of 2006, the Ryan White Act was reauthorized for a three-year period with a sunset clause. Without action, this critically important legislation will expire on September 30, 2009; and,

WHEREAS, the reauthorization of Ryan White programs will guarantee uninterrupted access to care and treatment of HIV/AIDS for individuals utilizing Ryan White services; and,

WHEREAS, Congress has not addressed the reauthorization of the Ryan White legislation, despite the imminent termination date to ensure that Ryan White programs do not experience service disruptions; now, therefore be it,

RESOLVED, that the San Francisco Health Commission strongly urges Congress to approve the three-year Ryan White HIV/AIDS Treatment Modernization Act reauthorization before it expires on September 30, 2009.

I hereby certify that the San Francisco Health Commission at its meeting on September 1, 2009 adopted the foregoing resolution.



Grace Alderson

Acting Commission Executive Secretary

**HEALTH COMMISSION**  
**City and County of San Francisco**  
**Resolution No. \_\_\_\_\_ 12-09**

**URGING CONGRESS TO INCLUDE A PUBLIC OPTION IN HEALTHCARE  
REFORM LEGISLATION**

WHEREAS, healthcare costs in the United States consume 18 percent of the country's gross national product, more than any other industrialized nation in the world, yet the United States ranks 24<sup>th</sup> in life expectancy among developed countries; and,

WHEREAS, there are an estimated 47 million uninsured Americans and 62,000 uninsured San Franciscans; and,

WHEREAS, individuals who are uninsured delay seeking care when they are ill, thus causing greater complexity and more costly healthcare; and,

WHEREAS, uninsured individuals have greater difficulty obtaining needed medical care, have lower health status, and have a greater risk of death than do insured individuals; and,

WHEREAS, the high cost of health care premiums are the principle reason why many employers, particularly small employers, do not offer health care coverage and why many low-income working people cannot afford coverage on their own; and,

WHEREAS Mayor Newsom's 2005 State of the City pledge promised universal health care access to the city's uninsured population; and,

WHEREAS, the City and County of San Francisco has taken the following steps to expand health care coverage since the passage of Proposition J with a 65 percent majority in November 1998: (1) expanded health care coverage to In-Home Support Services (IHSS) workers, (2) launched a pilot program to offer health insurance to low-income child care providers, (3) launched the Healthy Kids program resulting in universal coverage for children in San Francisco, (4) drafted a proposed health insurance coverage component to the Minimum Compensation Ordinance, and (5) launched the Healthy San Francisco program; and,

WHEREAS, the San Francisco Department of Public Health implemented the Healthy San Francisco program in 2007 to make health care services accessible and affordable to uninsured San Francisco residents; and,

WHEREAS, prior to his election in November 2008, President Obama made a promise to prioritize an overhaul of the current healthcare system during his first year in office in order to ensure all Americans are provided with adequate coverage; and,

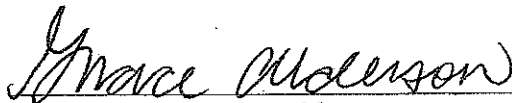


WHEREAS, in August 2009, President Obama proposed a public healthcare plan that would compete with private insurance companies to make healthcare more affordable for all Americans; and,

WHEREAS, President Obama's proposed public option strives to grant all Americans the security that quality and affordable healthcare will always be available; now, therefore be it,

RESOLVED, that the San Francisco Health Commission strongly urges Congress to support the inclusion of a public health insurance option as an essential component of comprehensive health care reform this year.

I hereby certify that the San Francisco Health Commission at its meeting on September 1, 2009 adopted the foregoing resolution.



Grace Alderson

Acting Commission Executive Secretary