

HEALTH COMMISSION
City and County of San Francisco
Resolution No. 05-11

RESOLUTION COMMENDING CHINESE HOSPITAL ASSOCIATION OF SAN FRANCISCO (CHASF) ON ITS PLAN TO REBUILD AND MAKING SPECIFIC RECOMMENDATIONS TO CHASF AS PART OF THE INSTITUTIONAL MASTER PLAN (IMP) PROCESS

WHEREAS, the Chinese Hospital Association of San Francisco (CHASF) has been providing health care services for the Chinese community in San Francisco since 1899; and,

WHEREAS, CHASF is the last remaining independent hospital in San Francisco; and,

WHEREAS, CHASF serves the highest percentage (87 percent) of care to Medicare- and Medi-Cal-eligible San Francisco residents outside of San Francisco General Hospital; and,

WHEREAS, CHASF participates in Healthy San Francisco, and is the second largest non-county group provider for the San Francisco Health Plan, thus serving Medi-Cal, Healthy Families, and Healthy Kids members with its physician partners; and,

WHEREAS the Board of Supervisors passed City Ordinance 279-07 in December 2007 revising City Planning Code Section 304.5 requiring the Department of Public Health (DPH) to hire an independent contractor to perform time-limited (90 day) health analyses of hospital revisions to their Institutional Master Plans (IMP) prior to the review of the Planning Department; and,

WHEREAS, in October 2010, CHASF submitted its IMP to DPH who solicited proposals from a pre-approved pool of contractors to conduct the IMP healthcare analysis; and,

WHEREAS, Resource Development Associates (RDA) was chosen to perform the analysis by an objective review panel; and,

WHEREAS, California Senate Bill 1953 (SB 1953) seismic requirements were mandated by the State of California in 1994 to ensure access to hospital care in the event of a major earthquake; and,

WHEREAS, CHASF will need to meet SB 1953 seismic standards in order to continue to operate as an acute care hospital; and,

WHEREAS, the CHASF IMP proposes to rebuild at 835 Jackson Street in Chinatown, and specifically:

- Build a new seismically compliant 100,000 square foot 54-bed acute care hospital;
- Add 22 new skilled-nursing beds in its new facility;
- Update its radiological equipment and services;
- Provide technological modernization; and

- Provide more efficient design and appropriate space for services; and,

WHEREAS, based on a review of the IMP details; analysis of California Office of Statewide Health Planning and Development (OSHPD) data, California Department of Finance data, U.S. Census data, CHASF financial and patient data, and DPH Charity Care data; interviews with community leaders and CHASF stakeholders; findings from a community meeting held by RDA in Chinatown on February 14; analysis of a CHASF patient survey conducted by RDA; and an assessment of city-wide healthcare needs, RDA concluded that the proposed CHASF IMP "will positively impact patient access in the long term;" and,

WHEREAS, the Health Commission understands CHASF's need for seismic upgrades and realizes that losing the culturally competent acute care hospital services at CHASF would be detrimental to the City's system of care; now THEREFORE BE IT,

RESOLVED, that the Health Commission commends CHASF on its plan to rebuild, and specifically its ongoing commitment to culturally competent care aimed at the monolingual Mandarin- and Cantonese-speaking communities of San Francisco, its proposal to add 22 new skilled-nursing beds given current and projected demand for skilled-nursing care in San Francisco, and its consistency with industry-wide trends, including movement toward outpatient services, private rooms, and technological updates; and be it,

FURTHER RESOLVED, that the Health Commission makes the following recommendations to CHASF as part of the IMP process:

- **Expand Behavioral Health Services in the Chinese Community:** Patients and community members report a perceived lack of mental health services. Given its position of trust among its patients, CHASF is in a unique position work with the Department of Public Health to assist in the integration of behavioral health issues in the medical setting in the Chinese community;
- **Develop LGBTQ-Focused Cultural Competencies within an Ethnically-Focused Community Health Setting:** There is an expressed need for greater cultural competency in high quality primary care services for the LGBTQ community. While it is unrealistic to expect CHASF to become the leading provider for LGBTQ Chinese, it is not unrealistic that these community members will rely upon CHASF, especially for services where CHASF has established significant expertise, such as Hepatitis B treatment;
- **Expand Cultural Competencies to a Broader API Patient Population within CHASF and use CHASF Expertise to Expand API Competency Across the Hospital System:** CHASF places a concerted focus on the specific needs of the Chinese community. Given that the hospital operates three community clinics in the Sunset District, Excelsior District, and Daly City that see a younger, more ethnically diverse population than is seen in the hospital, it is reasonable to expect that some of these patients would seek care at a rebuilt CHASF requiring the hospital to expand its definition of cultural competency to meet the needs of this patient population;
- **Continue to Enhance the Cultural Competency of Community Partners:** CHASF provides a valuable community service through its work to develop culturally appropriate information for patients in English, Mandarin, and Cantonese, and in pictographs for low-literacy patients and caregivers. CHASF has been generous in sharing these materials and other

technical assistance with community partners to enhance the care of Chinese patients. Such efforts provide an important service to Chinese health consumers throughout San Francisco, and should be encouraged; and

- **Increase the Level of Awareness of the Proposed Rebuild among CHASF Patients and Neighboring Communities:** In its analysis, RDA found low awareness among CHASF patients and neighboring communities regarding the planned hospital reconstruction. Although under CHASF's rebuild plan, patients can expect little or no disruption to the volume or variety of services offered by the hospital throughout the construction process, we recommend that CHASF communicate to patients and community partners both the construction timeline and the plan for ensuring continuous service delivery.

I hereby certify that the San Francisco Health Commission at its meeting of April 19, 2011 adopted the foregoing resolution.



Mark Morewitz, MSW

Health Commission Executive Secretary