City and County of San Francisco
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San Francisco Department of Public Health
San Francisco Health Commission
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- Edward A. Chow, MD
- Susan Belinda Christian, J.D.
- Suzanne Giraudo, ED.D
- Judy Guggenhime
- Karim Salgado

DPH Director of Health

Daniel Tsai

Health Commission Secretary

Mark Morewitz, MSW

Minutes for Joint Conference Committee for Zuckerberg San Francisco General Hospital and Trauma Center

Date and Time

July 27, 2026 3pm

1. Call to Order

Present: Commissioner Edward A. Chow, M.D., Chair
Commissioner Laurie Green, M.D.
Commissioner Susan Belinda Christian, J.D.

Staff: Gillian Otway, Emma Moore, Mary Mercer MD, Hemal Kanzaria MD, Angelica Journagin, Sabrina Robinson, Emma, Perez, Jennifer Magnusson, Emma Uwodukunda, Dana Freiser

The meeting was called to order at 3:03pm.

2. Approval of the Minutes of the ZSFG JCC Meeting of June 22, 2026.

Public Comment:
There was no public comment on this item.

Commissioner Comments:
There were no Commissioner comments on this item.

Action Taken: The ZSFG JCC unanimously voted to approve the June 22, 2026, minutes.

3. Regulatory Affairs Report

Emma Moore, MSN, RN, Regulatory Affairs RN, presented the item.

Public Comment:
There was no public comment on this item.

Commissioner Comments:
Commissioner Chow requested clarification on the January 2026 plan of correction. He noted that one of the five findings remains in the monitoring phase and sought greater detail on tracking compliance over time. He emphasized the importance of understanding the timeline required for completion and expressed concern about delays related to complaint receipt and voluntary submission. He asked for confirmation that the monitoring period would not create operational burdens for staff. Ms. Moore stated that ZSFG must provide three months of compliant data for each correction. She noted that due to the timeline of receiving the complaint, adequate time has not yet passed to meet the three-month threshold.

4. ZSFG Hiring and Vacancy Report

Jennifer Magnusson, Hiring and Selection Manager, presented the item.

Public Comment:
Jessica Pessecow expressed concern about vacancies that affect safety and security throughout the hospital. She recommended including hiring timelines for each position so commissioners can track how long it takes from application submission to start date. She also suggested adding recruitment methods for vacant positions to better understand outreach efforts. She thanked DPH and ZSFG for continuing to work diligently to fill essential roles.

Commissioner Comments:
President Green asked for information about the recruitment process for anesthetists and emphasized their critical importance to hospital operations. She requested clarity on required qualifications and on the availability of eligible candidates. She asked whether the current list of candidates aligns with anticipated hiring needs for the coming year. Ms. Perez explained that the list currently contains about nine eligible candidates and that licensure is the sole requirement for the role.

Commissioner Chow raised concerns about the 23% vacancy rate among psychiatric technicians. He asked how the vacancies affect both Psychiatric Emergency Services and inpatient psychiatric units. He expressed interest in understanding regional workforce shortages, noting that closures of training programs could worsen hiring challenges. He recommended exploring partnerships that might expand local training capacity. Gillian Otway, ZSFG Chief Nursing Officer, stated that these positions are primarily used in Psychiatric Emergency Services and inpatient psychiatry and noted that local schools have closed psychiatric technician programs. ZSFG is currently partnering with City College to develop a new training and certification program.

Commissioner Christian sought additional detail regarding vacant health worker positions. She asked what duties health workers perform and how their responsibilities vary across care settings. She also inquired about whether the Mayor's Office has approved the roles and if any health workers are assigned to the 7L inpatient forensic unit. She stressed the importance of adequate staffing in forensic and high-acuity areas. Ms. Otway stated that health worker duties vary by unit and that her understanding is the Mayor's Office has not yet approved many of these positions. She indicated she is unsure whether any of the positions staff the 7L unit.

President Green noted that the HR report was unclear regarding the definition of "budgeted" positions. She asked whether the term indicates full approval by the Mayor's Office or only inclusion in broader departmental planning. She expressed concern that approved positions may not yet be reconciled in city budget systems. She asked for an update on the reconciliation timeline in September. Ms. Perez stated that although the City budget is approved, reconciliation across systems occurs between July and August.

5. ZSFG Chief Executive Officer's Report, Emergency Department Newsletter and BERT Newsletter

Hemal Kanzaria, MD, Chief of Performance Excellence, presented the item.

Public Comment:
There was no public comment on this item.

Commissioner Comments:
Commissioner Christian asked for additional insight regarding discharge options for psychiatric patients. She highlighted gaps in resources for dual-diagnosis individuals and those with cognitive deficits such as dementia. She emphasized the importance of coordinated discharge planning to prevent extended stays due to system inadequacies. She sought detail on how specialized teams support complex cases. Dr. Kanzaria stated that resources remain limited for dual-diagnosis and cognitive deficit patients but confirmed a dedicated team is working on complex discharges.

President Green thanked staff for the report and expressed interest in better understanding the mental-health ecosystem. She noted that it is her understanding that psychiatrists serve as bottlenecks in areas such as MHRC and asked for more insight into system opportunities and constraints. She also requested clarity on revenue projections related to Medicare and Medi-Cal changes anticipated in 2027. She stressed that without initiating metric changes promptly, commissioners may struggle to interpret year-to-year shifts in financial performance. Dr. Kanzaria
reported that metric changes have been planned and that Eric Wu, ZSFG CFO, is working to optimize revenue. He stated that efforts are underway to strengthen billing practices and ensure consistency between expected and received payments in Epic.

Commissioner Chow asked about midnight emergency department census estimates and ideal occupancy levels. He requested information to contextualize capacity data relative to actual daily census patterns. He emphasized the importance of understanding both operating capacity and optimal census levels for patient safety. He also asked about oversight of AI-assisted breast screening tools. Dr. Kanzaria estimated a midnight emergency department census of about 200 and noted ideal occupancy is around 90%, although actual averages exceed 100%. He stated that AI flags high-risk cases (5–10%) for review by human radiologists.

6. Patient Safety Strategy Update

Mary Mercer, MD, Chief of Staff, and Dana Freiser, RN, Patient Safety Program Lead, presented the item.

Public Comment:
There was no public comment on this item.

Commissioner Comments:
Commissioner Christian asked about long-term injection treatment uptake and whether data exist regarding decline rates. She emphasized the need for longitudinal data to better understand patient trajectories. She suggested closer evaluation of how discharge planning teams engage patients effectively over time. She noted that gaps in follow-up may reduce treatment adherence. Dr. Mercer explained that teams are working to collect data that will help break cycles of disengagement and clarify patient trajectories.

President Green asked about strategies for increasing six-month engagement rates shown in the left-hand graph of the presentation. She noted that the 6% rate appears consistent across DPH services and questioned whether specific cohorts could be targeted for improved outcomes. She also asked how teams measure safety and incorporate best practices from other hospitals. She emphasized that consistent system design is critical for meaningful safety improvement. Dr. Mercer stated that teams are identifying cohorts to encourage better engagement. Ms. Freiser noted that participation in professional networks supports best-practice exchange. Dr. Mercer stated that data standardization and lean management tools are essential, and Ms. Freiser emphasized that measurable metrics are core to system improvement.

Commissioner Chow requested a transcript of staff remarks and asked specifically about overdose-prevention metrics. He asked how opioid overdose prevention fits into broader patient-safety goals and what progress has been made. He also asked about sepsis prevention as an additional safety priority. He emphasized the need for concrete metrics across departments. Dr. Mercer stated that preventing opioid overdose is a DPH-wide goal and confirmed sepsis is also a priority area.

7. Medical Staff Report

Mary Mercer, MD, Chief of Medical Staff, presented the item.

Public Comment:
There was no public comment on this item.

Commissioner Comments:
Commissioner Chow announced that Dr. John Luce, a former UCSF leader and physician passed away. He noted his deep respect for Dr. Luce's work.

Action Taken: The ZSFG JCC unanimously recommended that the full Health Commission approve the Neurosurgery standardized procedures and Cardiology Privilege list.

8. Other Business

Public Comment:
There was no public comment on this item.

Commissioner Comments:
There were no commissioner comments on this item.

9. Public Comment

10. Closed Session:

A) Public comments on all matters pertaining to the Closed Session

There was no public comment on this item.

B) Vote on whether to hold a Closed Session (San Francisco Administrative Code Section 67.11)

Action Taken: The Committee voted unanimously to go into closed session.

C) Closed Session pursuant to Evidence Code sections 1156, 1156.1, 1157, 1157.5, and 1157.6: Health and Safety Code section 1461; California Government Code Section 54954.5(h); and California Constitution, Article I, Section 1.

CONSIDERATION OF CREDENTIALING MATTERS

CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

RECONVENE IN OPEN SESSION

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 approved the Credentials Report and PIPS Minutes Report in closed session and voted to not disclose discussions held in closed session.

11. Adjournment

The meeting was adjourned at 5:11pm in the memory of Dr. John Luce, a former UCSF leader and physician.