**Dan Bernal** President

**Laurie Green, M.D.** Vice President

Edward A. Chow, M.D. Commissioner

**Susan Belinda Christian, J.D.** Commissioner

Cecilia Chung Commissioner

Suzanne Giraudo ED.D

Commissioner

Tessie M. Guillermo Commissioner

# HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

London N. Breed Mayor Department of Public Health



Grant Colfax, MD
Director of Health
Mark Morewitz, M.S.W.
Executive Secretary

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# MINUTES HEALTH COMMISSION MEETING Tuesday March 2, 2021 4:00 p.m. Remote Meeting via Webex Event

# 1) CALL TO ORDER

Present: Commissioner Dan Bernal President

Commissioner Laurie Green, MD, Vice President

Commissioner Edward A. Chow M.D. Commissioner Susan Belinda Christian, J.D. Commissioner Suzanne Giraudo, Ph.D Commissioner Tessie Guillermo

Excused: Commissioner Cecilia Chung

The meeting was called to order at 4:03pm.

# 2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF FEBRUARY 16, 2021.

Action Taken: The Health Commission unanimously approved the February 16, 2021 meeting

minutes.

### 3) DIRECTOR'S REPORT

Grant Colfax, Director of Health, gave the report, which can be viewed at: <a href="http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp">http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp</a>

San Francisco moves to Phase 1B of COVID-19 vaccinations, expands eligibility to educators, child care, emergency services, food and agriculture workers

Today, there are over 34,000 San Francisco residents with confirmed cases of COVID-19. And, sadly, a total of 422 San Franciscans have died. The San Francisco Department of Public Health (DPH) sends our condolences to their loved ones.

On February 24, San Francisco moved into Phase 1B of the State's COVID-19 vaccination prioritization plan. This move to Phase 1B expands vaccine eligibility to people who live or work in San Francisco in the following sectors: education and childcare, emergency services, and food and agriculture. Despite this expanded eligibility, vaccine doses remain in short supply, and healthcare providers have been advised to prioritize

second doses in the coming weeks. As such, appointments for first vaccine doses are limited, and people who are eligible may not be able to get appointments right away.

Phase 1B includes more than 168,000 individuals who live or work in San Francisco, in addition to the approximately 210,000 healthcare workers and people 65 and older who are already eligible. People who are eligible to be vaccinated can sign-up for an appointment as they become available at: SF.gov/getvaccinated.

The insufficient and inconsistent supply of COVID-19 vaccine continues to be the biggest barrier for vaccinating people quickly in San Francisco. The increase in second dose appointments puts additional strain on San Francisco's COVID-19 vaccination network.

Over the last week, an average of 4,000 to 4,500 second and first vaccine doses a day have been administered in San Francisco. Although this rate of vaccinations is lower than what San Francisco is capable of, health care providers and DPH are still making good progress, with 22% of San Franciscans 16 and older having received their first dose, and are ready to ramp up vaccinations as supply increases and becomes more predictable.

In addition to expanding vaccine eligibility to people in Phase 1B, San Francisco health care providers and the Department of Public Health continue to vaccinate people 65 and older. To date, San Francisco has vaccinated 80% of the approximately 210,000 healthcare workers and people 65 and older who are eligible under Phase 1A. Sixty-three percent of San Franciscans 65 and older have received at least one dose.

San Francisco also remains committed to an equitable vaccination strategy, with a specific focus on reaching populations that have been disproportionately impacted by COVID-19. To that end, the San Francisco Department of Public Health has been focused on reaching communities that have been hard-hit by the pandemic, including the Latino community and neighborhoods in the Southeast of the city.

San Francisco's COVID-19 Command Center recently published a new vaccine <u>dashboard</u> shows that DPH's focus on racial equity in vaccine distribution has been successful. A higher proportion of the DPH-administered vaccinations have gone to people of color than the total citywide vaccinations. For example, 18.3% of the DPH vaccine allocation has gone to the Latinx population compared with 9.3% of citywide vaccinations.

Anyone who works or lives in San Francisco can sign up for a notification when they are eligible for vaccination at <u>SF.gov/vaccinenotify</u>. The City will continue to provide regular updates to the public about the vaccine in San Francisco at: <u>SF.gov/covidvaccine</u>.

# San Francisco launches COVID-19 vaccination site at The SF Market in the Bayview

On February 16, Mayor London N. Breed, Board of Supervisors President Shamann Walton, and Director of Health Dr. Grant Colfax announced the launch of a third high volume vaccination site in San Francisco. The site, which opened at the SF Market in the Bayview Hunters Point neighborhood at 901 Rankin Street, advances San Francisco's efforts to get as many people vaccinated as quickly as possible. As with other vaccination sites in San Francisco, the SF Market location will initially offer vaccinations to people 65 and older and healthcare workers. Due to current supply constraints, the initial doses given per day will be limited, but the site is ready to expand rapidly once supply increases.

This new location, which is operated by the City and staffed in partnership with Sutter Health, is the third high-volume vaccination site that San Francisco and health care partners have opened in the past month. Two additional high-volume vaccination sites are located at the Moscone Center and the City College of San Francisco. These high-volume sites serve anyone who meets their eligibility requirements regardless of health coverage, by appointment only, and are part of San Francisco's network of vaccination sites to facilitate the quick and efficient delivery of COVID-19 vaccines.

Once vaccine supply becomes more available, appointments and hours at SF Market will expand. People 65 and older and healthcare workers can make an appointment regardless of their health coverage status or provider by going to <a href="SF.gov/getvaccinated">SF.gov/getvaccinated</a> and booking an appointment through <a href="State-out-supple-s

While vaccine supply remains the limiting factor in the short-term, the site will have the capacity to vaccinate more than 1,000 people per day once fully operational. Appointments are required and will remain limited in the short-term due to the constrained and unpredictable vaccine supply coming to San Francisco.

The SF Market location is designed to allow for multiple providers to provide vaccination concurrently.

The SF Market, formerly called the SF Wholesale Produce Market, is a wholesale marketplace that connects growers and their produce to food businesses throughout the Bay Area. The 23- acre campus is home to 28 merchant businesses and more than 1,000 employees. The vaccination site at 901 Rankin is an 82,000-square-foot LEED Gold Certified warehouse and was completed as part of the SF Market Reinvestment Project in 2014.

Anyone who works or lives in San Francisco can sign up for a notification when they are eligible for vaccination at <u>SF.gov/vaccinenotify</u>. The City will continue to provide regular updates to the public about the vaccine in San Francisco at: <u>SF.gov/covidvaccine</u>.

# Outdoor youth sports to return to San Francisco with safety precautions

On February 26, the San Francisco Department of Public Health and Recreation and Park Department announced the expansion of youth sports in San Francisco. The City's anticipated reassignment to the red tier this week will allow outdoor contact sports, organized and supervised through youth sports leagues, all with safety protocols. In order to put kids in the game as soon as possible, Rec and Park has launched a field allocation program in partnership with local youth sports leagues.

Based on analysis of San Francisco's current health indicators, the City will meet the state's <u>red tier criteria</u> on Tuesday, March 2. The Department of Public Health is preparing the amended Health Order and directives outlining allowable activities so the City can open as quickly as possible when the new tier reassignment takes effect, which under state rules is the next day, Wednesday, March 3. The eased outdoor youth sports guidelines for San Francisco largely align with the <u>state's</u>, with some additional safety precautions.

Under the new Health Order, outdoor moderate-contact sports such as such as baseball, softball, field hockey, gymnastics, cheerleading, and girls or women's lacrosse will be permitted with face coverings required at all times except when participants are playing in a competition and easily able to maintain at least six-feet apart from other participants and staff. The Order will also include outdoor high-contact sports permitted in the orange tier, including football, basketball, soccer, rugby, crew and boys' lacrosse with face coverings worn by participants, coaches and staff at all times.

Capacity for both moderate- and high-contact activities is generally limited to stable cohorts of up to 25 youth. No more than 25 players on each team can participate, including any players who are on the sidelines, with limited exceptions. Under the Order, youth may participate in only one outdoor sports team cohort at a time. Programs for outdoor moderate or high-contact sports must obtain the written informed consent from the parents or guardians of all youth participants, and spectators will be limited to parents or guardians as allowed

under state guidance. Snacks and post-game snacks are not allowed. No indoor sports will be permitted, at least while the City remains in the red tier. More details about youth sports in the forthcoming Order can be found below.

# Adult leagues

With practices beginning April 5 and running through nine weeks, a limited number of adult leagues will be permitted to play. Adult leagues are generally subject to the same safety protocols that apply to outdoor youth sports. Adult league play will run weeknights from April 5 up to Memorial Day, and weekends starting March 27 and 28 for nine weeks. More information can be found here.

# San Francisco lifts local 10-day quarantine order but urges against non-essential travel

Beginning February 23, San Franciscans who engage in non-essential travel outside the Bay Area region will no longer be required to quarantine for 10 days upon their arrival home. The Health Order was implemented in mid-December in response to a surge in cases from Thanksgiving travel. The lift comes at a time when the City has shown continued progress in managing the virus. The City is recording a seven-day average of 79 cases per day, which is down 79 percent from a high of a seven-day average of 374 cases per day at the peak of the most recent surge.

However, the City continues to strongly recommend that people follow the existing State travel advisory, which advises against non-essential travel anywhere outside of the state or 120 miles away from home. "Non-essential" travel includes travel that is considered tourism or recreational in nature. Destinations beyond the 120-mile radius might include Tahoe, Big Sur or Mount Shasta. Additionally, under the State travel advisory, people arriving in or returning to California from other states or countries should self-quarantine for 10 days after arrival. For a definition of essential travel, refer to the City's <u>Stay Safer at Home Order</u>.

Travel—especially the use of shared, enclosed vehicles in air, bus, or rail travel—can increase a person's chance of spreading and getting COVID-19. People arriving in California from other states or Californians returning from outside the state could potentially introduce new sources of infection, including new strains of the virus. Travel between different regions in California could also exacerbate community spread. Postponing travel and staying close to home is still a key practice to protect oneself and others from COVID-19. While San Francisco is lifting the travel quarantine, individual organizations such as schools or workplaces may require individuals to complete any travel quarantines already underway.

# Department of Public Health announces Luenna Kim as Director of Human Resources

The San Francisco Department of Public Health is pleased to announce the appointment of Luenna Kim as Director of Human Resources.

Luenna currently serves as the Director of Human Resources for the San Francisco Human Services Agency, a position she has held since 2013. She has a broad base of experience that spans over 20 years in human resources management, recruiting, labor relations, and social justice advocacy. She has worked as a labor relations manager for the San Francisco Department of Public Health, a human resources director for a large public school district and for a charter management organization, a legal recruiter for a Fortune 500 company, and a public defender. In 2019, she was part of a panel of thought leaders who offered an introduction to the topic of unconscious bias - how it impacts the workplace, and what to do about it - at the California Welfare Directors Association Annual Conference. She holds a bachelor's degree in psychology from Boston University and a law degree from Suffolk University School of Law.

Luenna Kim was selected for the position through an extensive national search process from a strong field of highly qualified candidates. Her anticipated start date is March 22, 2021. Her predecessor, Michael L. Brown, announced his planned retirement in late 2020. Some of Luenna's priorities will include partnering with the

Office of Health Equity to implement DPH's Racial Equity Action Plan, reducing hiring timelines, supporting staff engagement, and improving the experience for HR's customers.

#### **DPH** in the News

SF Chronicle, Feb 28 2021, Here's which San Francisco neighborhoods have the highest and lowest percentages of vaccinated people

https://www.sfchronicle.com/bayarea/article/Here-s-which-San-Francisco-neighborhoods-have-15985332.php

SF Chronicle, Feb 27 2021, California, Bay Area officials hail Johnson & Johnson vaccine authorization <a href="https://www.sfchronicle.com/health/article/Johnson-Johnson-s-coronavirus-vaccine-15985192.php">https://www.sfchronicle.com/health/article/Johnson-Johnson-s-coronavirus-vaccine-15985192.php</a>

ABC7, Feb 26 2021, One Medical cut off from vaccine supply in 5 counties https://abc7.com/one-medical-cut-off-from-vaccine-supply-in-5-counties/10373545/

KPIX, Feb 26 2021, COVID: restrictions: San Francisco to allow expanded outdoor youth sports with precautions <a href="https://sanfrancisco.cbslocal.com/2021/02/26/covid-restrictions-san-francisco-to-allow-expanded-outdoor-youth-sports-with-precautions/">https://sanfrancisco.cbslocal.com/2021/02/26/covid-restrictions-san-francisco-to-allow-expanded-outdoor-youth-sports-with-precautions/</a>

SF Public Press, Feb 26 2021, Community clinics cross language, digital divides to distribute vaccine <a href="https://www.sfpublicpress.org/community-clinics-cross-language-digital-divides-to-distribute-vaccine/">https://www.sfpublicpress.org/community-clinics-cross-language-digital-divides-to-distribute-vaccine/</a>

ABC7, Feb 25 2021, SF takes back vaccine supply from One Medical after report claims they let people 'skip' line

https://abc7news.com/one-medical-covid-19-vaccine-san-francisco-department-of-public-health-npr/10368988/

SF Chronicle, Feb 25 2021, One Medical's vaccine supply halted by 3 Bay Area counties for letting people cut the line

https://www.sfchronicle.com/bayarea/article/3-Bay-Area-counties-halt-COVID-vaccine-supply-to-15977627.php

KQED, Feb 24 2021, Many homebound people still waiting for vaccine <a href="https://www.kqed.org/coronavirusliveupdates">https://www.kqed.org/coronavirusliveupdates</a>

Market Watch, Feb 24 2021, San Francisco cuts off COVID vaccine doses to One Medical for vaccinating ineligible patients: report

 $\frac{https://www.marketwatch.com/story/san-francisco-cuts-off-covid-vaccine-doses-to-one-medical-for-vaccinating-ineligible-patients-report-11614226159$ 

NBC Bay Area, Feb 24 2021, SF penalizes One Medical for vaccinating ineligible patients <a href="https://www.nbcbayarea.com/investigations/sf-penalizes-one-medical-for-vaccinating-ineligible-patients/2476846/">https://www.nbcbayarea.com/investigations/sf-penalizes-one-medical-for-vaccinating-ineligible-patients/2476846/</a>

NPR, Feb 24 2021, High-end medical provider let ineligible people skip COVID-19 vaccine line <a href="https://www.npr.org/2021/02/24/970176532/high-end-medical-provider-let-ineligible-people-skip-covid-19-vaccine-line">https://www.npr.org/2021/02/24/970176532/high-end-medical-provider-let-ineligible-people-skip-covid-19-vaccine-line</a>

SF Chronicle, Feb 24 2021, Despite improved coronavirus numbers, San Francisco prep sports teams remain sidelined

https://www.sfchronicle.com/sports/article/Despite-improved-coronavirus-numbers-San-15977903.php

SF Chronicle, Feb 24 2021, S.F. teachers and grocery store workers are now eligible for the vaccine. But they may still wait weeks

https://www.sfchronicle.com/bayarea/article/S-F-teachers-and-grocery-store-workers-are-now-15975338.php

East Bay Times, Feb 23 2021, San Francisco won't commit to following California's reopening of football, outdoor prep sports

https://www.eastbaytimes.com/2021/02/23/coronavirus-san-francisco-will-not-allow-football-other-high-contact-sports-as-allowed-by-california/

LA Times, Feb 23 2021, California's rocky COVID-19 vaccine rollout dogged by poor communication, forecasting <a href="https://www.latimes.com/california/story/2021-02-23/california-covid-vaccine-rollout-worsened-poor-planning">https://www.latimes.com/california/story/2021-02-23/california-covid-vaccine-rollout-worsened-poor-planning</a>

Mission Local, Feb 23 2021, Ahead of expanded vaccine eligibility, volunteers go door-to-door to sign up Mission residents

https://missionlocal.org/2021/02/new-vaccine-eligibility-mission-residents-door-to-door/

SF Chronicle, Feb 23 2021, San Francisco lifts mandatory travel quarantine as coronavirus cases fall https://www.sfchronicle.com/health/article/San-Francisco-lifts-mandatory-travel-quarantine-15973856.php

ABC7, Feb 22 2021, San Francisco's Moscone Center vaccination site on 'pause' again <a href="https://abc7news.com/moscone-center-vaccine-appointments-sf-san-francisco-coronavirus-is-site-open/10362583/">https://abc7news.com/moscone-center-vaccine-appointments-sf-san-francisco-coronavirus-is-site-open/10362583/</a>

KQED, Feb 22 2021, Trusted leaders are fighting COVID-19 vaccine fears in Black and Latino communities <a href="https://www.kqed.org/news/11860883/trusted-leaders-are-fighting-covid-19-vaccine-fears-in-black-and-latino-communities">https://www.kqed.org/news/11860883/trusted-leaders-are-fighting-covid-19-vaccine-fears-in-black-and-latino-communities</a>

UCSF News, Feb 22 2021, COVID-19 study finds increase of coronavirus variants in San Francisco's Mission District

https://www.ucsf.edu/news/2021/02/419896/covid-19-study-finds-increase-coronavirus-variants-san-franciscos-mission

NBC Bay Area, Feb 21 2021, Zuckerberg Hospital hosts drop-in clinic for COVID-19 vaccinations <a href="https://www.nbcbayarea.com/news/local/san-francisco/zuckerberg-hospital-hosts-drop-in-clinic-for-covid-19-vaccinations/2473276/">https://www.nbcbayarea.com/news/local/san-francisco/zuckerberg-hospital-hosts-drop-in-clinic-for-covid-19-vaccinations/2473276/</a>

KRON, Feb 20 2021, San Franciscans take advantage of walk-up COVID-19 vaccine clinic <a href="https://www.kron4.com/news/san-franciscans-take-advantage-of-walk-up-covid-19-vaccine-clinic/">https://www.kron4.com/news/san-franciscans-take-advantage-of-walk-up-covid-19-vaccine-clinic/</a>

SF Chronicle, Feb 20 2021, In Bay Area nursing homes, 'the vaccine is already saving lives' <a href="https://www.sfchronicle.com/health/article/In-Bay-Area-nursing-homes-the-vaccine-is-15964916.php">https://www.sfchronicle.com/health/article/In-Bay-Area-nursing-homes-the-vaccine-is-15964916.php</a>

ABC7, Feb 19 2021, Bay Area counties could be in the red tier soon: Here's what will change https://abc7news.com/san-francisco-red-tier-meaning-bay-area-california-covid-tiers/10354133/

Asian Journal, Feb 18 2021, San Francisco launches COVID-19 vaccination site at the SF Market in the Bayview <a href="https://www.asianjournal.com/usa/northerncalifornia/san-francisco-launches-covid-19-vaccination-site-at-the-sf-market-in-the-bayview/">https://www.asianjournal.com/usa/northerncalifornia/san-francisco-launches-covid-19-vaccination-site-at-the-sf-market-in-the-bayview/</a>

San Francisco News, Feb 18 2021, San Francisco launches COVID vaccination site in Bayview https://www.thesfnews.com/san-francisco-launches-covid-vaccination-site-in-bayview/73800

KTVU, Feb 17 2021, Health inspections at 6 SF elementary schools completed, as district moves forward with reopenings

https://www.ktvu.com/news/health-inspections-at-6-sf-elementary-schools-completed-as-district-moves-forward-with-reopenings

## 4) COVID-19 UPDATE

Grant Colfax, MD, DPH Director of Health, presented the item.

#### **Public Comment:**

Avi Realm, No Neighborhood Council, said she wanted to draw attention to long term care facilities. Elderly residents in these facilities have not had contact with loved ones. She is disappointed that nothing is being done for these seniors during lockdown. She added that one designated family member should be able to visit.

Teresa Palmer, geriatrician and daughter of a nursing home resident, stated that families are willing to use PPE and get vaccinated in order to visit and care for loved ones. She demanded that the prohibition on visits be ended immediately as the City returns to the red tier. She added that isolation is now more a risk than COVID. She asked why the DPH is not asserting its authority to respond to this issue.

Patrick Monette-Shaw gave public comment and submitted the following summary:

Mayor Breed and DPH have shown reckless disregard for the rights of SNF residents to have in-person, in-facility indoor visitation. CMS issued guidance on September 17 (QSO-20-39-NH) allowing in-person visitation in SNF's provided that some conditions are met. CDPH's All Facilities Letter #20-22.5 issued on October 23 authorized infacility visitation of SNF residents in jurisdictions in the Red Tier. DPH and Breed's Health Officer has been studying how to expand visitation for going on nearly six months between September 4, 2020 and March 2021, with no solution in sight. Shame on your delay! Given LHH's rate of resident and staff vaccinations, now is clearly the appropriate time for the Health Commission to revise LHH's visitation policies to allow indoor visitation immediately. Since Mayor Breed is pushing to reopen indoor dining and reopen schools, the Health Commission should mandate that LHH be reopened for indoor visitation. After all, isolation kills, too.

#### **Commissioner Comments:**

Commissioner Giraudo suggested that the DPH consider a mobile vaccination team to serve those who are hard to reach, particularly unhoused individuals. Dr. Colfax stated that the DPH has prioritized homeless individuals over the age of 65. Staff continue to analyze data and logistics for how best to reach homeless individuals under the age of 65. He added that the COVID Command Center Information and Guidance Branch is looking into this issue.

Commissioner Giraudo stated that there will be certain neighborhoods for which residents have more difficulty with transportation to medical offices or vaccination sites. Dr. Colfax stated that the City has already reached out to long term care facilities and will continue to use mobile teams to address the areas that have the highest COVID-19 rates.

Commissioner Giraudo asked how residents will be notified of these vaccination efforts. Dr. Colfax stated that the COVID-19 Command Center has teams working with communities that can communicate best with those most in need.

Commissioner Guillermo asked how inspections for outdoor dining are occurring. She observed violations in regulations at several outdoor eating areas and is concerned about enforcement of regulations. Dr. Colfax

stated that the DPH plans to have Environmental Health inspectors conduct inspections after business hours to monitor this situation. He noted that at this point in the pandemic, the DPH will be stricter in its enforcement. He added that the DPH continues to work with the Golden Gate Restaurant Association in an effort to involve the industry in regulation adherence.

Commissioner Chow asked if partitions at outdoor dining areas installed in previous re-openings should be left intact. Dr. Susan Philip, Acting Health Officer, stated that the city allows existing barriers because some restaurants were allowed to construct these by the state. More recently, the state has removed language to allow barriers. The city is unclear on whether the state will allow the barriers to remain intact. The city, with input from the restaurant industry, decided to not allow the construction of additional barriers.

Commissioner Chow stated that he hopes the Johnson & Johnson vaccine will not require a deep freezer for storage. He noted that many private medical offices would like to have access to doses of this vaccine to give to patients. Dr. Colfax stated that the DPH is still in conversation with Blue Shield in regard to vaccine distribution; he noted that Blue Shield seems to be prioritizing southern California for its initial distribution efforts. He noted that the COVID-19 Command Center Information and Guidance Branch is working to determine the path for this vaccine distribution.

Commissioner Chow asked if it matters which vaccine access site San Franciscans use. Dr. Colfax stated that he hopes the San Francisco vaccine access site will feed into the state's "My Turn" vaccine access site.

Commissioner Chow noted that there continues to be a national discussion about the rate of Asian American COVID-19 deaths and noted San Francisco continues to show a disproportionate rate of Asian American deaths. He requested further analysis from the DPH on this topic.

Commissioner Chow requested an update on long-term care visitation policies at the next Health Commission meeting.

Commissioner Bernal asked if the state will likely change its tier system to include vaccination data as part of its criteria. Dr. Philip stated that it is likely that the state will revise its tier criteria to include vaccination rates in the future.

# 5) GENERAL PUBLIC COMMENT

Patrick Monette-Shaw gave public comment and submitted the following summary:

In response to the Commissioner who raised a question about enforcement of the Health Order allowing outdoor dining, let me report that Aces Bar at Sutter and Hyde is not in compliance with the rule that bars must be serving bona fide food. They are not. Aces has also set up folding card tables *outside* of its Shared Spaces Platform at least three times, exposing its paying clientele to street traffic. DPH's Environmental Inspections team should ramp up its enforcement activities by paying an undercover visit to Aces first, since it's clearly not in compliance with serving bona fide food! Opening SNF's for indoor visitation is an equity issue. Commissioner Chow thinks you're doing a marvelous job with vaccinations. But rather than doing a marvelous job solving patient isolation in SNF's due to lack of indoor visitation, DPH is doing a rotten job! The Health Commission should intervene, immediately.

An individual called to advocate for visitation for people living in long term care facilities. She noted that family and friends provide oversight for the care of their loved ones.

Avi Realm, No Neighborhood Council, stated that the greatest number of deaths are occurring at elderly care facilities and asked why this topic is not on the Health Commission agenda. She noted that allowing no visitations makes these facilities prisons, which impacts the physical and mental health of the residents.

# 6) FINANCE AND PLANNING COMMITTEE UPDATE

Commissioner Chow chaired the meeting; Commissioners Bernal and Giraudo also attended. Commissioner Chow stated that the Committee reviewed and recommended that the Health Commission approve all items on the Consent Calendar. He also noted that the Committee reviewed and gave feedback on the draft Charity Care Report. The final report will be presented to the full Health Commission on April 6, 2021.

# 7) CONSENT CALENDAR

# **Commissioner Comments:**

Commissioner Chow requested that the Chinese Hospital contract be extracted from the Consent Calendar and voted on separately; he noted that he has received income from the organization in the past year and therefore has a conflict. He recused himself from the vote on this contract and left the meeting during the discussion and vote on this item.

Action Taken: The Health Commission unanimously approved the following items:

- MARCH 2021 CONTRACTS REPORT
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH AEROSCOUT LLC FOR SOFTWARE LICENSING,
   SOFTWARE AND EQUIPMENT MAINTENANCE, AS WELL AS REQUIRED ACCOMPANYING PROFESSIONAL
   SERVICES TO MAINTAIN THE AEROSCOUT REAL TIME LOCATION SYSTEM (RTLS) IN GOOD REPAIR AND
   WELL-TUNED. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$1,680,013 WHICH INCLUDES A 12%
   CONTINGENCY FOR THE TERM OF JANUARY 1, 2021 THROUGH DECEMBER 31, 2025 (5 YEARS).
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH CORNERSTONE TECHNOLOGY PARTNERS II JV, TO PROVIDE A SOFTWARE SOLUTION THAT WILL MONITOR AND INVENTORY ALL MEDICAL "INTERNET OF THINGS" DEVICES CONNECTED TO THE SFDPH CLINICAL NETWORK. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$1,204,00 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERMS OF APRIL 1, 2021 THROUGH SEPTEMBER 30, 2024 (42 MONTHS)

<u>Action Taken</u>: The Health Commission, including Commissioners Bernal, Green, Christian,

Guillermo, and Giraudo, voted to approve the following item; Commissioner Chow

recused himself.

- REQUEST FOR APPROVAL OF AN EMERGENCY CONTRACT WITH CHINESE HOSPITAL ASSOCIATION TO PROVIDE EMERGENCY SURGE BEDS IN RESPONSE TO THE COVID-19 PANDEMIC. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$9,500,000 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERM OF DECEMBER 1, 2020 THROUGH JUNE 30, 2021 (7 MONTHS).
- 8) PROPOSITION Q HEARING: SUTTER MISSION BERNAL ADULT CLINIC AND PEDITRIAC CLINIC CLOSURE
  Claire Lindsay, MPH, Senior Program Planner, SFDPH Office of Policy and Planning; Tami Chin, Sutter Site
  Administrator and Senior Director of Ancillary Services, and Brenda Storey, Executive Director and
  CEO of Mission Neighborhood Health Center, presented the item.

#### **Public Comment:**

Mark Aaronson stated that the city negotiated with CPMC, in its Development Agreement, about what services it would include on its Bernal/Mission campus. He recommended that the City look at the impact beyond five years of this plan. He noted that CPMC focuses on revenue and disregards programs that are not profitable.

Teresa Palmer stated that CPMC has a pattern of bailing out of serving poor people while calling themselves the center for excellence. She recommended that CPMC fund the clinics at MHNC in perpetuity.

# **Commissioner Comments:**

Commissioner Giraudo recused herself from discussion of this item and left the meeting during the discussion. She noted that she is involved in planning logistics for psychologist interns involved in this program and therefore has a conflict.

Commissioner Christian, noting that she is a relatively new Health Commission, asked if CPMC is required to communicate its motivation for closing services for people who do not have private insurance. She stated a concern that this represents a disinvestment in the community. She noted that there have been many other service closures and hospitals built with no psychiatric beds. She asked what will happen in 5 years and whether there is a possibility that the City will have to contribute to the cost of maintaining the clinics at MNHC. She also asked what why 5 years was chosen as the time-frame for CPMC to end its financial support to MNHC for the clinics. Emily Web, Vice President for Sutter External Affairs, stated that it is an anomaly for a hospital to run outpatient primary care clinics. She noted that there is good reason for the clinics to exist in the community. In developing this plan, Sutter determined the best partner to provide the best care to this population. MNHC has a long track record of providing excellent care and will take over the clinics on the Sutter Bernal/Mission campus. She added that Sutter will continue to offer hospital services to this population. Sutter worked with MNHC on a financial model which showed that 5 years is the timeframe needed to make the clinics self-sustaining. Ms. Storey stated that MHNC and Sutter used a consultant to project financial information to ensure that the clinics could be self-sustaining within 5 years. As a federally qualified health center, MNHC receives malpractice insurance through the federal government and also gets a higher rate of reimbursement. She added that her organization obtained clinics from UCSF in the past, showing that there is precedent for MNHC to transition clinics from a hospital system.

Commissioner Christian requested additional information on the 5-year financial model for the next meeting.

Commissioner Guillermo noted that as someone who worked in a community health center in the East Bay for 8 years, she is a proponent of the community center model for its ability to provide the best care to the most vulnerable populations. She added that there will be a high proportion of privately insurance patients to MNHC, which primarily provides care to uninsured individuals. She also stated that contracts will have to be negotiated between the private insurance companies. She is concerned that MNHC receive the best rates and asked whether Sutter is assisting in these negotiations. Ms. Chin stated that Sutter has already connected MNHC with its staff with expertise in negotiating with health plans in order to set up contracts. Patty Caplan, MNHC COO, stated that the organization is working to set up these contracts now. She is confident that MNHC will be in a good position for reimbursement rates with private health plans. Commissioner Guillermo requested an update on the MNHC negotiations with private insurance companies at the March 16, 2021 Health Commission meeting.

Commissioner Guillermo requested race/ethnicity data on the clinic patient population, noting its importance for the successful planning for the transition of the clinic patients. Ms. Lindsay stated that the race/ethnicity data included in the DPH memo was gathered through the Office of Statewide Health Planning and Development and confirmed by Sutter. However, the information for the Mission/Bernal campus patients was missing or unknown. She will continue to work through Sutter to ascertain if there is more accurate data.

Commissioner Guillermo requested information on examples of other clinic transitions from hospitals to community organizations to better understand criteria for success and paths to avoid.

Commissioner Chow noted the importance of understanding the race and ethnicity of patients with private insurance in this type of transition. He added that in the City's 2013 Development Agreement with CPMC,

Sutter did not indicate it had issues with its community clinics. He requested more information on the 5-year financial projections to better understand what happens if the projections are not correct. He suggested that Sutter institute a safety net to ensure the clinics continue if the projections are not accurate. This safety net would include ensuring that the clinics could remain in the same location.

Commissioners Christian and Bernal agreed with Commissioner Chow's suggestion for a safety net plan to ensure the clinics continue to operate.

Commissioner Green stated that she is glad to see improved collaboration between Sutter and the community in this plan. She brought up the following issues:

- 1) Noting that after hours visits may be used more often by privately insured patients, she asked if there is a way to predict which patients are less likely to go to the MNHC clinics.
- 2) She requested information showing how the 5 year financial plan will result in the MNHC clinics being self-sustaining.
- 3) She is concerned for those patients who will likely not continue at the MNHC clinic, the Van Ness Sutter campus is complex to navigate. ZSFG will likely become the default hospital for this cohort.

Ms. Webb stated that Sutter will work with the DPH on the data requests. Regarding the financial model, she noted that neither Sutter nor MNHC wishes for the clinics to close in 5 years. Regarding the choice of hospital, there is no change for the patients in regard to where they will receive specialty care. The goal was to provide continuity on specialty care at Sutter hospitals. She noted that the only shift is in the primary care provider, but not the location of these clinics. Dr. Jaime Ruiz, MNHC Chief Medical Officer, stated that MNHC anticipates that the patients will continue accessing services at the clinics and noted that patients can access emergency services at any hospital.

Commissioner Bernal asked for more information regarding the plan for the physical clinic space after 5 years. Ms. Chin stated that Sutter has agreed to a 5 year lease and is open to letting MNHC continue the clinics in the space.

#### 9) DPH RACIAL EQUITY ACTION PLAN UPDATE

Ayanna Bennett, MD, Director, Office of Health Equity, presented the item.

#### Commissioner Comments:

Commissioner Chow thanked Dr. Bennett for the extensive overview of the Office of Health Equity. He asked for more information regarding how the DPH will be presenting health disparity information to the Health Commission. He suggested that the same paradigm used in the Black/African American Heath Initiative be used with other populations. He noted that the Asian population in San Francisco has historically high rates of TB and Hepatitis B, in addition to other unique health issues. Dr. Bennett stated that the DPH has been working to improve service quality. The Department cannot achieve quality if it has not achieved equity. She noted that A3s, which are Lean Change Management plans, are being developed for all health disparities noted in the Racial Equity Action Plan. She hopes the DPH can develop health initiatives for other populations. She added that smaller communities such as the Native American and Pacific Islander populations are so small that data is often difficult to find. However, the DPH can be more creative in how its uses existing data to better understand these populations so it can address the communities' needs. She also stated that data will lead the DPH to understand what it needs to improve and which programs need to be developed.

Commissioner Green commended Dr. Bennett and the Office of Health Equity team. She noted that it is remarkable that the DPH was able to develop the extensive plan during the pandemic. She hopes the plan motivates cultural changes at the DPH.

Commissioner Bernal stated that he looks forward to a time when the Commission can once again meet in the community for its annual community meeting. Dr. Bennett stated that she hopes when the Commission goes to the community, its members will hear that the DPH has already been listening to their needs.

Commissioner Guillermo thanked Dr. Bennett for developing the incredible Racial Equity Action Plan, which is an example of the thoughtfulness and rigor the Department will be taking on the issues contained in the plan. She looks forward to the evaluation of the plan. The Commission will be cheering on the DPH while it implements the plan.

Commissioner Guillermo stated that in order to full implement the plan, some elements involving community input will have to be done in person and therefore, timelines may need to be extended. She added that helping smaller communities understand their data is important. She encouraged the DPH to work with community researchers that excel in small sample sizes. She also noted that it is important for the DPH to put San Francisco in the context of larger public health issues in the Bay Area and the state. Dr. Bennett stated that the DPH has been doing equity work with regional partners for some time. She noted that the Pacific Islander Taskforce was part of three county health departments working with community. The DPH works with regional though partners on Black/African American public health issues. She also added that the DPH has been working closely with regional partners and the state on COVID-19 issues.

Commissioner Christian thanked Dr. Bennett for the astounding work and the deeply impressive Racial Equity Action Plan which will make structural change possible. In regard to disaggregating Asian-American population data and data for other smaller populations, she understands that it may take time to get data. She requested that presentations to the Health Commission include footnotes explaining the absence of data.

# 10) OTHER BUSINESS:

Commissioner Giraudo, Health Commission representative on the SFGH Foundation Board, stated that at its February 11<sup>th</sup> "Hearts in San Francisco, free event, \$1.6 million was raised.

#### 11) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS

Commissioner Chow, ZSFG JCC Chair, stated that at the February 23, 2021 ZSFG JCC, meeting, the Committee reviewed its standard reports which include the Regulatory report, CEO report, Human Resources report, and Medical Staff report. The Committee was notified that the hospital is expecting a Joint Commission 4-day survey at any time. During the CEO report, the committee discussed issues with psychiatric referrals for those at the hospital psychiatric emergency services and those with psychiatric issues in the Emergency Department. Currently PES has limited capacity due to COVID precautions so there is greater need for community referrals.

The committee also discussed the ZSFG Employee engagement survey. During the Medical Staff report, the Committee approved the Nurse Practitioner/Physician's Assistant Emergency Department and Clinical Decision Unite Standardized procedures in addition to reviewing a revised medical malpractice review form.

In closed session, the committee approved the Credentials Report and the PIPS minutes report.

### 12) CLOSED SESSION - Litigation

- A.) Public Comment on all matters pertaining to the closed session.
- B.) Vote on whether to hold a closed session regarding pending litigation (S.F. Administrative Code § 67.10(d).)
- C.) CONFERENCE WITH CITY ATTORNEY

Convene in Closed Session - Existing Litigation - Motion that the Health Commission convene in closed session with the City Attorney for the purpose of conferring with, or receiving advice from, the City Attorney regarding the following existing lawsuit in which a proposed settlement is being considered by the Health Commission, pursuant to San Francisco Administrative Code Section 67.10(d) and California Government Code Sections 54956.9 and 54956.9(e)(3) permit this closed session. Discussion in open session concerning these matters would likely and unavoidably prejudice the position of the City in the pending lawsuit listed below.

(After a closed session, if one occurs, the Health Commission shall adopt a motion either to disclose or not to disclose.)

1. Settlement of Litigation: <u>Elena Ruiz-Diaz</u>, City to pay \$600,000.00.

Elena Ruiz-Diaz, by and through her attorney-in-fact, Mercedes Arroyo, and Mercedes Arroyo, individually, plaintiffs vs. City and County of San Francisco; Laguna Honda Hospital and Rehabilitation Center; and Does 1-100, inclusive, defendants. Filed on July 30, 2020 (San Francisco Superior Court, Case No. CGC-20-585869)

#### **RECONVENE IN OPEN SESSION**

- A.) Possible report on actions taken in closed session (Cal. Government Code §54957.1(a)(2) and San Francisco Administrative Code §67.12(b)(2))
- B.) Vote to elect whether to disclose any or all discussions held in closed session (San Francisco Administrative Code §67.12(a).)

<u>Action taken</u>: The Health Commission unanimously voted to not disclosed discussions held in closed session.

# 13) ADJOURNMENT

The meeting was adjourned at 7:14pm.