

Laurie Green, M.D.
President

Tessie M. Guillermo
Vice President

Edward A. Chow, M.D.
Commissioner

Susan Belinda Christian, J.D.
Commissioner

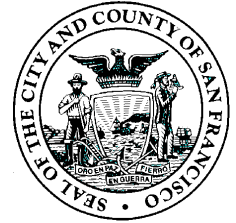
Suzanne Giraudo ED.D
Commissioner

Judy Guggenime
Commissioner

Karim Salgado
Commissioner

**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

Daniel Lurie Mayor
Department of Public Health



Daniel Tsai
Director of Health

Mark Morewitz, M.S.W.
Executive Secretary

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MINUTES

HEALTH COMMISSION MEETING

Monday March 16, 2026 4:00 p.m.

**1 Dr. Carlton B. Goodlett Place, City Hall, Room 408
San Francisco, CA 94102 & via Webex**

1) CALL TO ORDER

Present: President Laurie Green, MD, President
Vice President Tessie Guillermo
Commissioner Susan Belinda Christian, J.D.
Commissioner Suzanne Giraudo, Ph.D
Commissioner Judy Guggenime
Commissioner Karim Salgado

Excused: Commissioner Edward A. Chow M.D

The meeting was called to order at 4:04pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF MARCH 2, 2026

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

Commissioner Comments:
There were no Commissioner comments.

Action Taken: The Health Commission unanimously approved the March 2, 2026 minutes.

3) HONORING THE LIFE AND MEMORY OF ALBERTO RANGEL

Daniel Tsai, DPH Director of Health, and Susan Ehrlich, MD, MPP, ZSFG CEO, presented the item. Dr. Ehrlich described how devastating Alberto's loss had been for his colleagues, patients, and the entire public health community. She emphasized that although she did not know him personally, everything she learned painted a picture of a joyful, compassionate, and deeply service-oriented professional. Dr. Ehrlich also reaffirmed that ZSFG leadership is committed to improving workplace safety to prevent tragedies like this from ever happening again.

Director Tsai echoed Dr. Ehrlich's sentiments, noting that while he had not known Alberto directly, it was immediately clear how special he was to colleagues, patients, and the broader community. He reflected on the uniqueness of the tributes shared and the visible grief experienced across the department. Director Tsai underscored the importance of honoring Alberto by continuing to strengthen safety systems.

Stuart Moulder, Mr. Rangel's husband, speaking remotely from New Zealand, expressed deep gratitude for the Commission's tribute to Mr. Rangel. He shared that although the loss has been devastating for the family, the recognition provides comfort and honors Alberto's legacy of service. Stuart thanked the Commission for the thoughtful words and care shown.

Public Comment:

Patrick Monette-Shaw offered his condolences to Mr. Moulder on the death of Alberto and suggested that a memorial be established in a quiet part of Ward 86, where Alberto worked and died.

Commissioner Comments:

President Green: President Green spoke with deep respect about Alberto Rangel, noting that even those who had not known him personally felt his impact through the overwhelming stories and affection shared by colleagues and patients. She highlighted how Alberto embodied joy, compassion, and humility in his work with Ward 86 and the broader community. President Green expressed the Commission's commitment to honoring his legacy by supporting efforts to improve workplace safety.

Action Taken: The Health Commission unanimously approved the resolution. (See attachment A)

4) GENERAL PUBLIC COMMENT

Steve Solnit, DPH employee and member of Local 21, described how looming layoffs had created significant anxiety among IT staff, many of whom no longer know whether their jobs are secure. He explained that losing even one team member disrupts workflow and jeopardizes support for critical clinical systems. Mr. Solnit urged the Commission to eliminate unfilled positions rather than cutting active staff.

Daniela La Vargas, public health nurse and member of SEIU 1021, expressed deep concern that layoffs would immediately harm vulnerable mothers, infants, and families she serves. She spoke about the ethical responsibility to protect communities of color who already face health inequities. Ms. La Vargas urged the Commission to safeguard frontline positions.

Debbie Dobson, Laguna Honda employee and member of SEIU 1021, warned that staffing shortages already jeopardize resident care and safety. She emphasized that frontline workers are the ones who feed, bathe, comfort, and medicate residents daily. Ms. Dobson stated that cuts should target administrative levels rather than those providing hands-on care.

Chung Park, Stationary Engineers Local 39 member, urged the Commission to intervene to stop 95 planned layoffs. He noted that every position cut represents a real person whose work directly supports vulnerable patients. Mr. Park called for collaboration with unions and advocacy with the Mayor's Office.

Michelle O'Neill explained that eliminating 95 positions would harm San Franciscans who depend on public health services. She argued that the City should use the \$120 million Airbnb settlement to avoid layoffs. Ms. O'Neill stressed that staffing cuts reduce care capacity and disproportionately affect vulnerable populations.

John Thorn, DPH IT staff member, described ticket backlogs of up to 300% and patient-safety related issues caused by understaffing. He warned that reducing IT support further would jeopardize clinical operations. Mr. Thorn urged reinvesting settlement funds to protect IT staffing.

Vincent Cordero, Local 21, said that budget cuts will strain both DPH programs and community-based organizations. He reflected on national attacks on public health and expressed alarm that similar pressures appear locally. Mr. De Cordero asked the Commission to protect the integrity of the safety-net system.

Andrew Rodriguez, DPH staff member, stated that remaining staff are already stretched beyond capacity and cannot absorb the workload left behind by layoffs. He emphasized that the Commission has influential power and should advocate against the proposed cuts. Mr. Rodriguez underscored that every eliminated position reduces essential services.

Brenda Barros, DPH staff member, expressed frustration at political leadership and urged the use of the City's Rainy Day Fund to avoid harming patients. She described seeing delayed diagnoses and care due to current understaffing. Ms. Barros implored the Commission to prevent further erosion of public health services.

Bridquette Johnson, SEIU 1021, shared a personal story about her uncle's life being saved by ZSFG clinicians to illustrate the importance of public health. She warned that cutting revenue-cycle staff will undermine the department's ability to fund services. Ms. Johnson also noted warnings about a future pandemic and emphasized that the City must not downsize now.

Maximillian Baccarat, DPH staff member, described his work with individuals with severe mental illness and stressed that reducing mental health staff would cause significant harm. He reflected on San Francisco's leadership during the AIDS crisis and expressed sadness at the declining support for public health. Mr. Baccarat urged the Commission to protect behavioral health services.

Cherelle Jackson spoke emotionally about surviving multiple attacks and depending on public services for safety and recovery. She warned that reducing staff will make it harder for people like her to access trauma-informed care. Ms. Jackson urged the Commission not to make decisions that harm survivors.

Francine Austin, DPH staff member, described how staffing shortages and reduced non-profit funding are harming both clients and workers. She argued that replacing in-house security with contractors at some DPH sites has increased violence. Ms. Austin called for reinvestment in frontline staff.

David Carroll discussed the long hiring timelines and heavy probationary expectations for new engineers. He shared memories of working during the 1989 earthquake to emphasize how essential engineering staff are to safety. Mr. Carroll urged the Commission to avoid cuts that would compromise emergency readiness.

Cheryl Thornton, DPH Eligibility Supervisor and SEIU 1021 member, explained how her team resolves issues around insurance, housing, food access, and transportation that directly affect whether patients receive care. She gave examples of restoring Medi-Cal coverage to prevent catastrophic bills. Ms. Thornton emphasized that these services are lifesaving.

Jerry Knowles, DPH Eligibility worker, expressed concern that civil-service cuts would make it harder for families to access benefits. He highlighted his team's essential role in connecting patients to coverage. Mr. Knowles urged the Commission to protect these jobs to ensure continued access to care.

Patrick Monette-Shaw provided comment and submitted the following written summary:

I have followed the Health Commission's discussion about the LHH Senior Housing project since Mercy obtained the contract in 2020. This Commission hasn't been presented any information, or discussed, the severe shortage of Adult Day Health Care facilities in San Francisco and Greater Bay Area, in stark contrast to the deluge of information presented about the shortage of childcare facilities, skewing the debate. San Francisco is aging rapidly, with the 80-plus population expected to increase from 5.6% in 2020 to 16% by 2060, putting extreme pressure on existing ADHC facilities. Without sufficient ADHC services, many seniors are forced into higher-cost, more restrictive settings, such as nursing homes, sooner than necessary. The Health Commission has an ethical responsibility to hear a report from SFDPH's Office of Policy and Planning on the shortage of ADHC programming, before entering into an MOU for childcare facilities in the LHH senior housing project

5) DIRECTOR'S REPORT

Daniel Tsai, DPH Director of Health, presented the item.

LAGUNA HONDA HOSPITAL LAUNCHES MODEL NEIGHBORHOODS PILOT

DPH is pleased to share that Laguna Honda is launching a new pilot program called the Model Neighborhood. This initiative creates a focused space to test new ways of strengthening quality resident care and improving staff experience. This initiative came to life in part thanks to advocacy by labor partners to engage staff in meaningful ways that elevate their voices in improvement work and support their professional growth. It also reflects DPH's broader commitment to initiatives that center frontline expertise.

The Model Neighborhood will enhance Daily Management Systems to better support staff in identifying challenges, testing solutions, and sustaining improvements. This includes more intentional use of huddle boards, in-person check-ins, and unit-based huddles to guide Plan-Do-Study-Act cycles and standard work.

An advisory team comprised of DPH, Laguna Honda, and labor leaders will partner with North 3 to guide priorities and learning. The insights gained will inform future improvements across Laguna Honda and DPH.

DPH JOINS RIBBON CUTTING FOR NEW GLIDE PROGRAM

On March 5, DPH and GLIDE celebrated the opening of The Shop, an innovative and first-of-its-kind pilot program where people can access behavioral health care and social support in addition to free haircuts and shaves. The Shop welcomes and serves all ethnicities and populations within San Francisco with focused expertise to meet the unique cultural needs of older Black/African American men, a population that is dying of overdose at five times the city average. The Shop aims to reduce overdose deaths, increase linkages to care, and promote whole-person wellness through a trusted, culturally relevant therapeutic environment. One of San Francisco's favorite native sons, actor/producer/humanitarian Danny Glover, joined the kick-off celebration by volunteering for the first haircut and shave.

The Shop was created by DPH and GLIDE as a culturally relevant intervention to mitigate overdose disparities by addressing the underlying causes such as social isolation, mistrust in health care systems, trauma, and economic distress. Drawing inspiration from the historic role of barbershops in Black/African American communities as trusted, social, and therapeutic spaces, the licensed barbers at The Shop are also trained health advocates who turn everyday conversations in the barber's chair into opportunities for wellness and awareness.

Located in a highly visible space in the GLIDE hub at 330 Ellis St., The Shop is funded by DPH through the Opioid Settlement Grant with a budget of \$500K annually over a two-year pilot period.

INNOVATION AWARD WIN FOR ZSFG & SF HEALTH NETWORK

DPH is proud to announce that our Emergency Department at ZSFG Hospital has won the 2025 Innovation Award from the California Association of Public Hospitals and Health Systems, along with the California Health Care Safety Net Institute. This statewide award recognizes public hospitals that show outstanding leadership in improving quality, fairness, and innovation in patient care.

The award honors a project called “Sustaining Change at the Front Door,” which redesigned how patients first enter and move through the Emergency Department. This new approach helps ensure patients are assessed more quickly, move through the system more smoothly, and receive care more efficiently. It reflects the teamwork, creativity, and commitment to equity that guide the ED’s work every day. It also supports ZSFG’s broader goals of continuous improvement and high quality care.

Congratulations and thank you to Dr. Christopher Peabody and the entire Emergency Department team for their incredible work and leadership.

ZSFG CLINICAL LABORATORY LAUNCHES IMPROVED HEPATITIS C VIRUS TEST: HEPATITIS C ANTIBODY WITH REFLEX TO HCV VIRAL LOAD

The ZSFG Clinical Laboratory launched an improved Hepatitis C Antibody test on March 10, 2026. This new test, called Hepatitis C Antibody (with Reflex to HCV Viral Load), helps speed up the process of identifying Hepatitis C infection. If a patient’s initial antibody test is reactive or presumptive reactive, the lab will now automatically run a follow up test that looks for the actual virus (Hepatitis C (HCV) Viral Load)—no extra order or blood draw is needed. If the first test is non-reactive or equivocal, no additional testing is performed.

PUBLIC HEALTH EMERGENCY PREPAREDNESS HIGHLIGHTS

For the past six months, the DPH Public Health Emergency Preparedness & Response (PHEPR) Branch has planned and coordinated efforts across the department in preparation for the 2026 Super Bowl pre-game events that were hosted in San Francisco during the first week of February. PHEPR coordinated with multiple DPH partners who played critical roles in ensuring the safety and health of residents and visitors: Environmental Health, Communicable Disease, San Francisco Health Network, Street Teams, DPH Data Teams, Public Affairs, and Community Teams. Below are some notable PHEPR preparedness efforts that contributed to a successful Super Bowl week:

- **Emergency Communications:** Developed and prepared communication modalities for rapid response.
- **CBRNE Preparedness** (Chemical, Biological, Radiological, Nuclear, and Explosions): Assessed San Francisco hospitals’ decontamination capabilities and coordinated decontamination trainings to address capability gaps; exercised plans to access and distribute antidotes for nerve agents; and coordinated with federal partners to implement early warning systems for detecting airborne bioterrorism agents and radiation threats.
- **Trauma Care Capacity:** Trained more than 250 clinic staff members on trauma triage and management to increase the city’s ability to handle injury cases.
- **Operational Messaging:** Informed healthcare facilities about operational impacts related to events and road closures.
- **Disease Surveillance:** Assisted with communicable disease monitoring throughout the event period.
- **Community Outreach:** Messaged communities about potential health impacts, immigration concerns, and human trafficking risks associated with large-scale events.
- **Cybersecurity Support:** Provided critical threat information to DPH’s cyberattack preparedness team.
- **Regional Coordination:** Facilitated medical health information sharing across the region.

ZSFG INTRODUCES TRUE NORTH DASHBOARDS

ZSFG recently launched a new platform designed to help all staff participate in continuous improvement and to better track progress and goals. To help better visualize and track their progress, they recently launched the ZSFG True North Dashboard, also known as Project Phoenix. This new tool was developed by the Kaizen

Promotion Office (KPO), in close collaboration with the Quality Management (QM) Data Center, and the Metrics, Analytics and Data Integration (MADI) teams, to support our strategic planning and deployment efforts.

The new dashboard connects organization-wide priorities to operational teams and frontline work, creating a shared foundation for improvement. Using a human-centered design approach, the team gathered input from leaders, clinicians, and data partners who asked for clearer definitions, aligned data sources, and an easier way to link strategy to daily management.

STAFF CELEBRATE “THANK A RESIDENT” DAY

On Friday, February 27, ZSFG staff celebrated Thank a Resident Day to recognize the outstanding contributions of the residents and fellows who trained and cared for patients at ZSFG. Their dedication strengthened our mission and brought new ideas that helped ZSFG continually improve care for their community. Their partnership with UCSF continued to attract graduates from top medical schools nationwide, creating an exceptional training environment that shaped the next generation of physicians. This year, 800 residents and 230 clinical fellows rotated through ZSFG, providing essential, around the clock care in clinics, hospital units, operating rooms, and the Emergency Department. They also mentored medical students and led innovative projects that improved quality, safety, and the patient experience. From expanding access to treatment for conditions like hepatitis C and opioid use disorder to improving screening and communication processes, their impact was felt every day. The leadership of ZSFG and DPH are deeply grateful for their hard work and commitment.

COVID-19 UPDATE

As of 03/11:

- San Francisco’s 7-day rolling average of COVID test positivity is 0.8%.
- Twenty-four percent of SF residents are fully up to date on their COVID vaccinations and have received the updated vaccine.

Public Comment:

There was no public comment on this item.

Commissioner Comments:

Commissioner Christian asked whether the 45 new Treasure Island substance use residential beds would support co-occurring mental health needs. Director Tsai stated that the beds will be licensed for substance use disorder treatment; providers will coordinate mental health support (e.g., psych prescribing, therapy). The long-term goal is integrated dual-diagnosis residential treatment, subject to staffing ratios.

Commissioner Giraudo asked whether UCSF’s new subacute psychiatric beds at the Hyde campus would accept Medi-Cal. Director Tsai stated that most patients will be Medi-Cal enrolled; statutory limits constrain Medicaid reimbursement for certain long-stay settings. UCSF is committing these beds to safety-net patients with complex needs who are often conserved.

Commissioner Christian asked about UCSF’s contribution beyond the one-time state capital grants. Director Tsai stated that UCSF will staff and operate approximately 50 subacute beds on an ongoing basis for safety-net patients.

6) RESOLUTION TO AUTHORIZE THE DEPARTMENT OF PUBLIC HEALTH TO ACCEPT AND EXPEND A GIFT OF \$24,999 FROM HOMES FOR THE HOMELESS FUND LLC

Joanna Eveland, MD, Chief Medical Officer, Whole Person Integrated Care, presented the item.

Public Comment:

There was no public comment on this item.

Commissioner Comments:

There were no Commissioner comments.

Action Taken: The Health Commission unanimously approved the resolution. (See attachment B)

7) 2022-2024 CHARITY CARE REPORT

Miranda Brillante, DPH Office of Policy and Planning, presented the item..

Public Comment:

There was no public comment on this item.

Commissioner Comments:

President Green asked about Kaiser's sharp increase in unique charity care patients. Camille Cooley, Kaiser Medi-Cal Managed Care, stated that Kaiser expanded as a Medi-Cal plan in SF in 2024 and is now serving approximately 23,000 Medi-Cal members, which is approximately 9.8% of the county Medi-Cal membership.

Commissioner Giraudo asked if UCSF accepts Medi-Cal for behavioral health and how patients are handled. Antonio Fonseca, UCSF, stated that Langley Porter does not bill Medi-Cal for certain psychiatric services; those accounts are adjusted off rather than billed. For outpatient psychiatry, UCSF holds some managed Medi-Cal contracts at the Pritzker Mission Bay Psychiatry and is seeing Medi-Cal patients under those contracts. He will take back feedback to improve patient-facing clarity and signage.

Director Tsai added that UCSF recently executed its first outpatient managed Medi-Cal agreement for pediatric eating disorder services at the Pritzker facility and aims to expand access across services/ages; DPH to coordinate with Behavioral Health and intake teams on access pathways.

Commissioner Christian asked UCSF to ensure front-line staff understand coverage and avoid requesting payment up front when in network. Mr. Fonseca stated that UCSF is committed to review specific concerns, re-train staff, and clarify communications across the organization.

8) COMMUNITY AND PUBLIC HEALTH COMMITTEE UPDATE

Susan Christian, J.D., Chair, reported that the Committee welcomed Commissioner Guggenheim to her first meeting. The Committee received several presentations, including an extensive briefing from Dr. Susan Hahn, Director of the Communicable Disease Branch, and Dr. Anna Tobolowsky, Deputy Director, on protecting San Franciscans from communicable disease outbreaks.

Dr. Hahn and Dr. Tobolowsky reviewed the Branch's core goal of preventing communicable disease outbreaks, noting that the Department responded to approximately 150 outbreaks in the previous year. They outlined five pillars of their work:

1. Disease surveillance
2. Outbreak response
3. Collaboration and outreach
4. Equity
5. Vaccination

The presentation covered recent examples of respiratory, foodborne, and emerging diseases, including Shigella, H5N1 avian influenza, and measles. The presenters highlighted strong collaboration with local

hospitals and laboratories, and ongoing guidance provided to community partners. In the equity domain, they described outreach efforts focused on residential care and senior facilities, as well as free COVID-19 and influenza vaccinations for uninsured patients.

Regarding measles, they emphasized its high level of contagiousness and the importance of maintaining vaccination rates above 95 percent. Commissioners discussed national and statewide trends, preparations for potential outbreaks, and vaccination requirements for school- and daycare-age children. Staff noted that outreach remains active and effective, including home visits and engagement with families not enrolled in formal childcare.

The Committee also received a presentation on HIV services. Staff described the Department's role as a coordinating agency working with federal, state, and local partners to maintain a comprehensive and equitable HIV care system. Demographic data were reviewed with acknowledgement of limitations inherent in self-reported categories. Staff highlighted both the successes of long-standing HIV treatment efforts and ongoing challenges, including funding constraints and the increasing needs of an aging population living with HIV. They noted that survival is not equivalent to long-term wellbeing, as aging individuals face multiple comorbidities, high medication burdens, and barriers such as homelessness and discrimination.

The Committee discussed cross-training efforts among HIV and aging-services providers and reviewed current funding levels. While staff remain optimistic about progress toward "Getting to Zero," they noted that challenges are growing.

9) JOINT CONFERENCE COMMITTEE UPDATE

Vice President Tessie Guillermo, LHH JCC Chair, stated that at the March 9th Laguna Honda JCC meeting, the Committee discussed standard reports including the Regulatory Affairs and Human Resources reports. During the Executive Team report, the committee learned that the census is now approximately 600. A full census would be 636. Laguna Honda continues to work to decrease time to make admission decisions regarding ZSFG patients. The committee continues to receive data on admission denials to monitor trends. The Executive Team Report now includes a summary of Executive Staff vacancies. The hiring process for the two open Director of Nursing positions is almost complete. The committee participated in a robust discussion of the Senior Housing Project on the Laguna Honda campus. We are grateful that Commissioner Giraudo was able to participate and contribute to this discussion. She volunteered to review the RFP scoring criteria for the childcare provider for this project. The committee also discussed a presentation on Cultural Change and Change Management at Laguna Honda.

In closed session the committee approved the Credentials Report and PIPS Minutes Report and heard testimony from Health Services Advisory Group in regard to organizational assessment and survey readiness. The committee recommended that the full Commission approved the Laguna Honda policies on today's Consent Calendar.

Public Comment:

Patrick Monette-Shaw provided comment and submitted the following written summary:

The main courtyard area has increased by 875 square feet to 7,275 square feet, at the expense of reducing usable services space by 900 square feet. Two restrooms for residents and visitors have been eliminated from the residential entrance lobby. The Child Care program space has increased by 461 square feet, by eliminating Home Health Services programming for senior housing residents. Bi-Weekly Group meeting notes indicate LHH staff have concerns about sharing the shuttle bus services for LHH patients with residents of the housing project. The "LHH Gondola Feasibility Study" due by December 2025 hasn't been completed yet. This full Health Commission must be presented with the gondola feasibility analysis BEFORE approving the LHH housing project, so you know where the gondola will

disembark passengers. This Health Commission should NOT enter into any MOU's until a formal transportation study has been completed and included as part of a formal MOU.

Commissioner Comments:

There were no Commissioner comments on this item.

10) CONSENT CALENDAR

All matters listed under this item constitute a Consent Agenda are considered to be routine by the Health Commission and will be acted upon by a single roll call vote of the Health Commission. There will be no separate discussion of these items unless a member of the Commission requests discussion, in which event the matter shall be removed from the Consent Agenda and considered as a separate agenda item.

LHH Policies March 2026

<u>Item</u>	<u>Scope</u>	<u>Policy No.</u>	<u>Policy Title</u>
1	Facility-wide	26-02	Management of Dysphagia and Aspiration Risk
2	HIM	1.02	Protected Health Information Documentation
3	FNS	1.1	Food from Home or Outside Sources Served Directly to Residents

Public Comment:

There was no public comment on this item.

Commissioner Comments:

There were no Commissioner comments.

Action Taken: The Health Commission unanimously approved all items on the Consent Calendar.

11) OTHER BUSINESS

Public Comment:

There was no public comment on this item.

Commissioner Comments:

There were no Commissioner comments.

12) CLOSED SESSION:

Mr. Morewitz stated that the City Attorney's Office requested a postponement of this item to the April 6, 2026 meeting. Therefore, the Health Commission did not vote to go into closed session.

- a. Public comments on all matters pertaining to the closed session.
(San Francisco Administrative Code Section 67.15)

There was no public comment for this item.

- b. Vote on whether to hold a Closed Session.

The Health Commission will go into Closed Session to discuss the following item:

CONFERENCE WITH LEGAL COUNSEL - SETTLEMENT OF EXISTING LITIGATION (Government Code §54956.9, Administrative Code §67.10(d)) [DISCUSSION AND POSSIBLE ACTION]

In the matter filed by Chau Nancy Xiong against the City and County of San Francisco for \$285,000; the lawsuit was filed on September 6, 2023, in San Francisco Superior Court, Case No. CGC-23-608883; entitled Chau Nancy Xiong v. the City and County of San Francisco dba Zuckerberg San Francisco General Hospital and Trauma Center, et al.; the lawsuit involves an employment dispute.

RECONVENE IN OPEN SESSION

- i. Discussion and vote to elect whether to disclose any portion of the closed session discussion that is not confidential under Federal or State law, the San Francisco Charter, or non-waivable privilege.
(San Francisco Administrative Code Section 67.12(a))
- ii. Possible report on action taken in closed session.
(Government Code Sections 54957.1(a) and 54957.7(b) and San Francisco Administrative Code Section 67.12(b))

12) ADJOURNMENT

The meeting was adjourned at 6:11pm

Attachment A

**HEALTH COMMISSION
CITY AND COUNTY OF SAN FRANCISCO
Resolution No. 26-4**

HONORING THE LIFE AND MEMORY OF ALBERTO RANGEL

Whereas, Alberto Rangel, 51, a cherished Zuckerberg San Francisco General Hospital (ZSFG) and University of California San Francisco (UCSF) social worker and a beloved member of the public health care community, tragically passed away on Saturday, Dec. 6, 2025. Mr. Rangel was dedicated to making a real difference in the lives of his patients and their families; and

Whereas, Mr. Rangel died from injuries he suffered from an assault by a patient at the ZSFG Ward 86 HIV care unit on Thursday, Dec. 4, 2025 despite the heroic efforts of his Ward 86 colleagues and the ZSFG emergency, trauma, and intensive care teams; and

Whereas, Mr. Rangel was a Licensed Marriage and Family Therapist employed by UCSF and assigned as a social worker at the Ward 86 clinic. He previously worked at the Mission Neighborhood Health Center and the Trauma Recovery Center. He worked with vulnerable populations for more than 20 years, including the HIV community, specializing in trauma, depression and anxiety, multi-ethnic issues, and LGBTQIA+ issues. In addition, he assisted clients from Latin America, Mongolia and Eritrea with asylum applications to escape LGBTQIA+ persecution, gang violence, domestic violence, and political persecution; and

Whereas, Mr. Rangel was also a talented artist, portraying his cultural roots in everyday scenes. He exhibited his paintings in several venues throughout San Francisco, the city he loved; and

Whereas, Mr. Rangel was a native of Muscatine, Iowa, and lived in San Francisco with his husband of 20 years. He is survived by a large and loving family, including his husband Stuart, and his parents, siblings, nieces and nephews.

Whereas, Mr. Rangel was admired for his gentle spirit, the respect he showed every patient, and his commitment to seeing humanity in each person he encountered. He will be remembered for the quality of his work, the strength of his character, his joyous personality and his talent as an artist; and

RESOLVED, That the San Francisco Health Commission deeply honors Alberto Rangel for his life of service, creativity, and open heartedness. He will be forever missed by many people in San Francisco and the Bay Area.

I hereby certify that the San Francisco Health Commission at its meeting of March 16, 2026 adopted the foregoing resolution.

Laurie Green, MD
Health Commission President

Attachment B

**Health Commission
City and County of San Francisco
Resolution No. 24-03**

**RESOLUTION TO AUTHORIZE THE DEPARTMENT OF PUBLIC HEALTH TO ACCEPT AND EXPEND A GIFT OF
\$24,999 FROM HOMES FOR THE HOMELESS FUND LLC**

WHEREAS, The Homes for the Homeless Fund LLC (HHF) has donated to the Department of Public Health (DPH) a gift in the amount of \$24,999 for long-acting injectable (LAI) buprenorphine pilot safes; and

WHEREAS, The HHF has notified the DPH that proceeds from the gift will be distributed; and

WHEREAS, The gift will be in the form of funding to the DPH; and

WHEREAS, The HHF is a wholly owned subsidiary of the Housing Accelerator Fund (HAF); and

WHEREAS, The funding is to help purchase pilot safes for long-acting injectable (LAI) buprenorphine medication to help serve DPH patients; therefore, be it

RESOLVED, That the Health Commission authorizes the DPH to accept and expend a gift of up to twenty-four thousand nine hundred ninety-nine (\$24,999) to help DPH patients; and be it

FURTHER RESOLVED, That the gift will be accepted and expended consistent with San Francisco Administrative Code Sections governing the acceptance of gifts to the City and County of San Francisco, including San Francisco Administrative Code Section 10.100-201.

I hereby certify that the San Francisco Health Commission at its meeting on March 16, 2026, adopted the foregoing resolution.

Mark Morewitz, MSW
Health Commission Executive Secretary