

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

**Tessie M. Guillermo**  
Vice President

**Edward A. Chow, M.D.**  
Commissioner

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

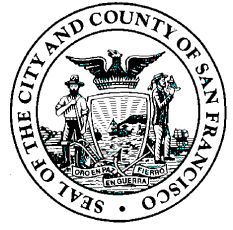
**Suzanne Giraud ED.D**  
Commissioner

**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

TEL (628) 754-6539

**MINUTES**

**HEALTH COMMISSION MEETING**

**Monday May 19, 2025 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 Edward A. Chow M.D  
Commissioner Suzanne Giraud, Ph.D  
Commissioner Judy Guggenime  
Commissioner Karim Salgado

Excused: Commissioner Susan Belinda Christian, J.D.

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

**2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF MAY 5, 2025.**

President Green noted that Mr. Morewitz sent out amended minutes with the following changes:

Page 2, "General Public Comment," first paragraph, fourth sentence, "However, several universities and providers placed him on surveillance to assimilate him and to attempt forced extortion on voting **living** arrangements.

Page 7, Director's Report Public Comment, last paragraph, fourth sentence, "~~Randy has a scar from a recent fall, second fall. Fractured bit and punctured lung taken to the hospital.~~"

**Public Comment:**

There was no public comment on this item.

**Commissioner Comments:**

There were no Commissioner comments on this item.

**Action Taken:** The Health Commission unanimously approved the amended minutes.

### 3) **GENERAL PUBLIC COMMENT**

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

A neighbor broke my heart yesterday. She's a woman in her sixties who lives on my same block. A couple of years back she had a stroke that paralyzed her right side. She uses her walker twice a day to walk up and down our block to strengthen her leg. Yesterday, she received notice her Meals on Wheels benefits are ending, due to cuts President "Combover" Trump and Elon "Chainsaw" Musk are taking to safety net benefits for people receiving SNAP and Medicaid benefit programs nationwide. I urge the Health Commission to work closely with San Francisco's Department of Disability and Aging Services, the Department of Homelessness and Housing Services, the Mayor's Budget Office, and Mayor Lurie to backfill Federal cuts to San Francisco's Meals on Wheels program, and other safety net services. Our City must do all we can to preserve these lifeline services for our most vulnerable neighbors.

### 4) **DIRECTOR'S REPORT**

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

#### **73 NEW TREATMENT BEDS ANNOUNCED**

Mayor Daniel Lurie announced a plan to significantly expand behavioral health care resources for people with some of the greatest or most complex mental health challenges. The plan includes 73 new treatment beds, with 57 locked subacute treatment beds for those with mental health disorders who are under a conservatorship and 16 dual diagnosis beds for those with substance use and behavioral health needs. These new resources will be funded by \$27.6 million in state Behavioral Health Continuum Infrastructure Program (BHCIP) funding.

DPH applied for capital funding under Proposition 1, passed by Californians in March 2024. As part of Proposition 1, the state authorized additional BHCIP funding and is awarding one-time behavioral health capital funding in two rounds, with \$3.3 billion awarded statewide and another \$1.1 billion to be awarded statewide by March 2026.

More information about the projects awarded:

#### **Locked Subacute Treatment (LSAT) Beds**

*\$21.3 million to expand capacity at the Behavioral Health Center on the Zuckerberg San Francisco General Hospital (ZSFG) campus by adding 57 additional locked subacute treatment beds*

Locked subacute treatment facilities, also known as Mental Health Rehabilitation Centers, offer 24/7 intensive psychiatric care, nursing care, and psychosocial rehabilitation services to adults with severe mental illness and/or placed under conservatorship. These facilities serve some of the most behaviorally complex clients, including individuals under conservatorship.

Locked treatment facilities are difficult to acquire or construct due to the high building standards required. The Behavioral Health Center at ZSFG was built as a locked treatment facility, and with BHCIP funding, DPH will complete critical renovations to expand the locked subacute treatment capacity at the Behavioral Health Center by 57 beds.

#### **Dual Diagnosis Treatment Beds**

*\$6.3 million for 16 residential treatment beds to serve individuals with both mental health and substance use disorders*

DPH will reopen the 7th Street Dual Diagnosis residential treatment program using the BHCIP capital funds to address maintenance needs and make the 16-bed facility ADA accessible. This facility location was previously operated as a behavioral health dual diagnosis program (formerly Jo Ruffin Place). It was acquired by the city in

2024 as part of the debt settlement with the prior provider. The BHCIP funds provide the city with a solution to reopen these much-needed services.

### **NATIONAL NURSES WEEK**

DPH was excited to inform, educate, and promote public awareness of 2025 National Nurses Week (May 6-12), and National Nurses Day (May 6). We honored the dedicated, knowledgeable, compassionate, and hardworking DPH nurses who bring care to the City's most vulnerable residents.

Representing nearly 40% of the entire DPH workforce, nurses serve across every division. Whether at the bedside, in the clinic, on the street, or behind the scenes, nurses deliver essential, lifesaving services to their patients every day—advocating for their needs, championing their dignity, and providing care with expertise and compassion.

To emphasize the importance of nursing roles in patient care in San Francisco, the Communications team released a multimedia internal and external communications campaign.

The team developed and supported over 25 communication deliverables and activities across all DPH divisions/branches to include:

- Director's communications
- Divisional leadership messages
- Proactive media stories highlighting nurses
  - Univision: ["I can help them heal": Latina nurse shares her struggle to achieve her dream in California](#)
  - KPIX: [Meet the Nurses Serving on the Frontlines of San Francisco's Homeless Crisis](#)
  - KCBS: [Experts say staffing nurses at SF shelters benefits public health](#)
- Three events (Nurses Week Research Symposium at ZSFG, and nursing awards events at Laguna Honda Hospital & ZSFG)
- [A video recap of the Nurses Week events](#)
- Two digital media marketing messages: DPH website & ZSFG video screens
- Two social media campaigns on all DPH & ZSFG platforms

### **LAGUNA HONDA HOSPITAL CONGRATULATES WINNERS OF NURSING AWARDS**

Laguna Honda Hospital honored the outstanding work of its nurses at its Nurses Week celebration on May 8. The following staff received awards for their compassion and dedication to Laguna Honda residents:

DAISY awards:

- Barbara Clark
- Namnama "Namie" Angeles
- Talivaimaila "Tali" Seumanutafa

The Ann Hughes Award

- Kathleen MacKerrow

Friends of Nursing Awards:

- Joel Igu
- Jennifer Carton-Wade

Unsung Hero Awards

- Maria Antoc
- Aye Hnin
- Shannon Bevett

- Dr. Lisa Hoo

#### Recognition for Recertification Efforts

- Terry Dentoni

#### **ZSFG CELEBRATES NURSES WEEK**

For Nurses Week, ZSFG celebrated its amazing nurses under the inspiring theme, “The Power of Nurses to Transform Health.” Throughout the week, hospital leaders and staff highlighted the dedication of nurses and the compassionate and high-quality care they provide patients, whether coordinating care, advocating for timely treatment, or simply offering a listening ear.

This year, ZSFG hosted its First Annual Nurses Week Research Symposium, featuring powerful presentations that highlighted how nurses are advancing care and tackling complex health challenges. Congratulations to the awardees:

- Catalyst Award: Dr. Monica R. McLemore
- Best Podium Presentations: Mavourneen Hoover, Alonn Ilan, Merjo Roca, Ann Caltagirone, Marisella Carranza, Vanessa Almaguer
- Best Poster: Adrian Smith and team

Thank you to organizers Jennifer Berke, Norlissa Cooper, and Rebecca Menza for a phenomenal event, and to Dr. Susan Ehrlich, Gillian Otway, and the ZSFG executive team for their leadership.

ZSFG capped off the week with a joyful appreciation ceremony honoring DAISY, BEE, Friends of Nurses, and Ambulatory Care Award recipients, whose work uplifts ZSFG’s mission. Congratulations to the awardees:

- DAISY Awards: Giovanni Palasigui, Cristina Abella, Brent Abel, Gabriella Bridges, Vannie Phan
- BEE Awards: Dorothy Carson, Chloe Yang, Indah Chan, Henry Viray, MJ Haney, Nhi Chau, Elina Durnell, Keith Turk, Brenda Gotera, Wutyi Hlaing, Yohannes Beyenne
- Friends of Nurses Award: Danyelle Diggs
- O’Connell Society Award: Rachel Perry Limon

#### **TOBACCO PROGRAM PILOT PROJECT**

Tobacco use remains the leading cause of preventable death in the US, killing more than 480,000 people each year. In San Francisco, the highest rate of smoking is among young adults (ages 18-24), 15.8% of whom smoke. DPH’s Environmental Health Branch enforces the San Francisco Health Codes, Art. 19P and California Penal Code, Section 308 which prohibits the sale of tobacco products to anyone under the age of 21. Typically, compliance is monitored by hiring a contractor under the age of 21 who attempts to purchase tobacco products from retail markets. However, this summer, the Tobacco Program at DPH is spearheading a new pilot project that will hire a student intern to assist with compliance monitoring operations. We are optimistic that this pilot project will both introduce potential future public health workers into the field while also supplementing DPH’s important enforcement work around proper tobacco retail practices.

#### **ZSFG’S CNO NAMED ONE OF THE MOST INFLUENTIAL WOMEN IN THE BAY AREA BY SF BUSINESS TIMES**

Congratulations to Gillian Otway, RN, Chief Nursing Officer at ZSFG for being named one of the Most Influential Women in the Bay Area by San Francisco Business Times.

As the hospital’s Chief Nursing Officer, Gillian leads by example—inspiring teams across the hospital to always lead with compassion. She is a strong believer that good leaders practice active listening because it creates stronger relationships, better collaboration and more effective problem-solving across all levels. Gillian shares, “Success is measured in trust earned, relationships built and the positive change created in people’s lives and communities. Fulfillment comes from purpose-driven work and being able to uplift those around me.” Her dedication to health equity, innovation, and advocacy for nursing excellence at the City’s safety-net hospital and only Level 1 Trauma Center continues to elevate quality care for communities who need it most.

Gillian Otway has been an exceptional nursing leader at ZSFG since 1998. As Chief Nursing Officer, she leads more than 1,000 nurses on the ZSFG campus, the largest single group of nurses in the Department of Public Health. Congratulations to Gillian.

### **JCC'S STROKE PROGRAM JOINT COMMISSION SURVEY CONCLUDES WITH PRAISE FOR ZSFG**

The Joint Commission recently concluded their review of the Advanced Primary Stroke Program at ZSFG and are contingently recertified pending resolution of RFIs (requirements for improvement). The surveyor was extremely complimentary of the stroke team and the many aspects of best practice care they provide—particularly highlighting the teamwork they witnessed during the visit. The survey is a testament to the entire team's commitment to the critical care the team provides leading to long-term success in improving positive patient outcomes.

Special appreciation for Sara Cole, Lawrence Chyall, Niko Absila, Tristen James and Dr. Claude Hemphill with the Stroke Team and to Adrian Smith and Emma Moore and the entire regulatory team for keeping teams at our hospital and Trauma Center Survey Ready.

### **RECOGNIZING INTERPRETERS AT ZSFG DURING NATIONAL INTERPRETER APPRECIATION DAY**

ZSFG recognized the dedicated Interpreter team consisting of 22 interpreters serving patients in Spanish, Cantonese, Mandarin, Toishanese, Vietnamese, Russian and more. The team provides phone and video interpretation services to city clinics across the DPH network-including WIC, Health at Home, the Nurse Advise Line, Laguna Honda Hospital, the Trauma Recovery Center, and many others.

Interpreters are present at nearly every stage of a DPH patient's journey and are the cultural and linguistic bridge between providers and patients, ensuring care is delivered with compassion and clarity. Whether it's helping a mother welcome new life into the world in Labor & Delivery, interpreting sensitive end-of-life conversations, or supporting patients with other needs such as financial services, dialysis, mental health, or spiritual care, the interpreters bring empathy, intelligence, and skill to their work. Thank you to our amazing team of interpreters at ZSFG.

### **COVID-19 UPDATE**

As of 4/30:

- San Francisco's 7-day rolling average of COVID test positivity is 2.4%.
- Thirty percent of SF residents are fully up to date on their COVID vaccinations and have received the updated vaccine.

### Public Comment:

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

It's unfortunate the 57 locked beds being put back into operation at the MHRF on SFGH's campus will cost \$27.6 million to remodel, to accommodate locked units for psych patients. The \$40 million MHRF had been built with locked beds when it opened! It's also unfortunate long-term care patient's needs are again being pitted against other patient population's needs. I congratulate Mayor Lurie for restoring the MHRF to the patient population it had been built for, with locked long-term psych beds. In 2015 former Director of Public Health, Barbara Garcia, began re-configuring the MHRF from permanent mental health beds into a short-term care facility for mentally-ill homeless. In September 2019, SFDPH and re-purposed 41 permanent mental health beds at the MHRF into temporary beds for the mentally ill homeless population by creating "Hummingbird Place," as part of the City's "navigation centers." This should teach a lesson to this Health Commission.

Commissioner Comments:

Commissioner Guggenlime asked if there is a plan to offer alternative options for the current residents of the Behavioral Health Center (BHC) , since the use of the building will be changing. Director Tsai stated that the goal of the DPH is to help the residents of the BHC live in the least restrictive housing that provides the appropriate amount of support. The BHC was built to be a locked unit and is one of few existing buildings in the city that meet regulatory requirements for a locked unit. The current goal is to convert the first and second floors of the BHC to be used as the locked unit. The DPH is adding several board and care facilities in two Hayes Valley buildings. Everyone currently residing at the BHC will be offered opportunities to move into these two buildings. DPH staff will also engage current BHC residents to determine if they may have preferences for other housing options. Resident transitions will not happen before the fall of this year.

Commissioner Chow stated that it is good news that the DPH has been awarded funding to add additional beds. He asked if the Health Commission could get a summary with a timeline of when each of the new beds will be coming online. He also requested an update to the DPH bed needs assessment which was conducted several years ago so the Health Commissioners and public can get a better understanding of what the current bed capacity is as it compares to the needs of the City. He appreciates that the current residents of the BHC will be offered housing alternatives.

President Green stated that she appreciates the continued good work and supported Commissioner Chow's request for an overview of the new DPH beds and timeline for implementation of each category.

**5) SAN FRANCISCO EMS AGENCY UPDATE**

Andrew Holcomb, EMS Director, and Amelia Breyre, MD, EMS Medical Director, presented the item.

Commissioner Comments:

Commissioner Giraudo thanked the presenters for responding to her written questions prior to the meeting and is grateful for their effective and impactful work.

Commissioner Chow asked if the Fire Department response time has impacted the CPR survival rate. Mr. Holcomb stated that there is obvious improvement of CPR in outcomes due to the responders receiving pre-arrival instructions and then implementing CPR right away.

Commissioner Chow asked for more information regarding the relationship between the Fire Department and the paramedics. Mr. Holcomb stated that the system is integrated, with responders arriving in a timely manner, and supervisors being effective. Through the regulator Volume Improvement meetings, they see that providers are working effectively together.

Commissioner Chow asked if the chart on slide 13, "Cardiac Arrest (CARES Summary)," indicates the success rate or number of cases related to cardiac arrest. Dr. Breyre stated that the survival rate of cardiac cases is 35% in San Francisco; the national survival rate is 25%. The chart to which Commissioner Chow refers shows bystander and automated external defibrillator CPR cases.

Commissioner Guggenlime stated that the improvements look exciting. She asked if there is anything on their wish list. Mr. Holcomb stated that data integration, tying EMSA data to hospital data, would be a good investment. Dr. Breyre stated that adding another trauma center in San Francisco would increase the City's capacity to respond to large and complex emergencies.

Vice President Guillermo is curious how planning occurs between DEM and DPH for the planned events and planning for emergencies. Mr. Holcomb stated EMSA and the DPH Public Health Emergency Preparedness and Response are aligned in their planning. The new platform allows for communication across all relevant city staff. The relevant leaders approve and review plans to ensure they match the assessment of a planned event.

In addition, leaders go out to ensure the plan submitted matches the set up. He noted that the APIC conference is an example in which all City Departments worked effectively together to ensure the important event was successful.

Vice President Guillermo asked if there are any current challenges in the relationship between DEM and the DPH. Mr. Holcomb stated that he views this relationship as very effective and productive.

Commissioner Girardo noted that in the past, EMSA encouraged training of high school students in CPR and encouraged this effort to be renewed in private and public schools. She added that the school wellness clinics can be a helpful resource and possible conduit for these trainings. Mr. Holcomb stated that EMSA is willing to partner with other organizations to implement community trainings and thanked her for the suggestion.

President Green encouraged EMSA to extend outreach and encouragement of people to sign up for PulsePoint. Mr. Holcomb stated that the team brings the Q code for PulsePoint when they conduct any outreach. President Green stated that older individuals that may not go out to participate in the EMSA activities may still be interested in knowing more about PulsePoint.

President Green asked if it is possible for EMSA to help other hospitals learn from ZSFG practices. Mr. Holcomb stated that the APOC Diversion Group is where best practices are shared. EMSA provides daily data on APOC times and notifies hospitals to alert them to changes and provide suggestions to help them utilize their resources effectively.

President Green how paramedics respond, in a non-urgent situation, to a patient's request to go to a specific hospital. Mr. Holcomb stated that EMSA has a hierarchy in which the most critical patient goes to the best facility and a non-urgent patient may go to their medical home or where they generally receive care.

**6) FY2025-26 and FY2026-27 PATIENT RATE ORDINANCE**

Matthew Sur, San Francisco Health Network Revenue Cycle and Reimbursement Director, presented the item. Drew Murrell, DPH Chief Financial Officer, introduced the item.

Commissioner Comments:

Commissioner Chow thanked Mr. Surr for the additional information and explanation. He noted that the intent of these rates is to bill commercial insurance companies for revenue. He added that the Medicare and Medi-Cal rates are determined by those entities. He also stated that the DPH used to be far behind commercial billing rates and the 2019 billing study helped align the Department with industry standards.

Commissioner Chow noted his concern for patients who may receive large bills. Director Tsai noted that the DPH billing policies are very favorable to patients. Mr. Surr stated that the DPH utilize balanced billing practices.

President Green stated concern that the DPH policies do not apply to physician fees. She noted that these fees can be substantial and asked about the relationship between DPH and UCSF in terms of billing policies. Mr. Murrell stated that billing for UCSF physicians is beyond the DPH policy. He noted that there are state and local regulations regarding physician balanced billing. President Green stated that she would appreciate additional information on this topic.

Action Taken: The Health Commission unanimously approved the FY2025-26 and FY2026-27 Patient Rate Ordinance.

**7) REVISIONS TO THE HEALTH COMMISSION RULES AND REGULATIONS**

President Green noted that this item had been introduced at the May 5, 2025 meeting and the City Attorney's Office made some requested revisions to the section which describes the process by which the Health Commission passes along names of nominees for the Director of Health position to the Mayor.

Public Comment:

There was no public comment on this item.

Commissioner Comments:

There were no Commissioner comments on this item.

Action Taken: The Health Commission unanimously approved the Revisions to the Health Commission Rules and Regulations.

**8) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS**

Vice President Guillermo stated that at the May 12<sup>th</sup> Laguna Honda Hospital Joint Conference meeting, the committee heard an update on the Senior Housing on the Laguna Honda Hospital Campus Project. This presentation included a timeline for actions and planning benchmarks between now and September, when the Commission will be asked to take its next action on this project. The group provided more details of the project including a glossary of terms to help educate the Commission so we can make informed decisions when we are asked to take action. The Commissioners on the committee remain generally supportive and yet concerned about many details of the project. The group did clarify for us that there is no other childcare project in the neighborhood. The committee discussed other standard reports including the Executive Team Report, Human Resource Report, and Regulatory Affairs Report. Director Tsia let us know that there has been no update or response from CMS on the bed waiver request. LHH was recently surveyed and generally performed well. The committee reviewed the policies on the Consent Calendar and recommended that the full Commission approve them.

Public Comment:

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

Regarding Commissioner Guillermo's report on the LHH-JCC's May 12 meeting, I can shed some light on the rabbit hole Mercy Housing had to climb into, about another childcare facility potentially being built near LHH. During the 4/21/2025 Health Commission meeting, George Wooding testified he had been at the Capital Planning Committee (CPC) meeting earlier that day and another \$10 million childcare center had been mentioned. Wooding stated, "yet Mercy Housing, which is right across the street, is also building a childcare center." Wooding's misguided testimony may have led Commissioner Chow to request clarification whether another childcare facility was being built. Chow suggested if another childcare facility was planned near LHH, Mercy should switch the "Adult Day Health Center" planned for Phase II, to Phase I, to bring the ADHC on-line sooner. There's no other childcare facility being built. This Commission should continue advocating the ADHC be moved to Phase I.

Commissioner Comments:

There were no Commissioner comments on this item.

**9) CONSENT CALENDAR**

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

### LHH Policies, and Procedures:

<u>Item</u>	<u>Scope</u>	<u>Policy No.</u>	<u>Policy Title</u>
1	Facility-wide	20-04	Discharge and Transfer Process
2	Facility-wide	20-07	Against Medical Advice
3	Facility-wide	20-13	Notification of Proposed Transfer/Discharge Due to Nonpayment for the Stay at the Facility
4	Facility-wide	23-01	Resident Care Plan (RCP), Resident Care Team (RCT) & Resident Care Conference
5	Facility-wide	23-02	Completion of Resident Assessment Instrument/ Minimum Data Set (RAI/MDS)
6	Facility-wide	25-15	Medication Administration
7	Facility-wide	27-09	Splint/ Brace Care Management Policy
8	Facility-wide	27-10	Transfer Techniques
9	Facility-wide	31-03	Clinical Product Andan Device Evaluation
10	Facility-wide	60-01	Quality Assurance Performance Improvement
11	Facility-wide	65-02	Monitoring of Third-Party Agreements
12	FNS	1.100	Labeling and Dating of Food
13	FNS	1.143	Food Supply & Storage
14	FNS	1.165	General Cleaning and Sanitizing work Surfaces and Kitchen or Galley Equipment
15	FNS	1.59	Authorized Personnel Only
16	FNS	1.60	Equipment Repair
17	FNS	1.61	Sanitation Inspections
18	FNS	1.93	Food Preparation Standards
19	NSPP	A 4.0	Nursing Clinical Competency Program
20	NSPP	A 6.0	Orientation of Nursing Personnel
21	NSPP	B 5.0	Resident Identification, Color Codes, and Safety Alerts
22	NSPP	D6 1.1	Appendix 1, 2 and 3
23	NSPP	J 1.1	Obtaining, Handling, and Storage of Medications
24	NSPP	K 9.0	Management of Residents on Hemodialysis
25	NSPP	D5 5.0	Application and Management of Braces
26	NSPP	D6 2.0	Transfer Techniques

#### **10) COMMUNITY AND PUBLIC HEALTH COMMITTEE**

Commissioner Giraudo, Chair, stated that the committee discussed two presentations. The first was an update from the Office of Equity and Community Engagement, a branch of the Population Health Division. The branch was developed after the DPH COVID-19 Taskforce was decommissioned. The team took the same community-engagement principles and relationships to work in community around issues of vaccinations and disease prevention efforts, Promotores/Community Health Workers, and Overdose Prevention Support. The group has coordinated vaccination clinics, provided training for 80 Promotores, and conducted overdose trainings for Black/African American, Latinx and Indigenous, and people experiencing homelessness.

The second presentation was an update from the Whole Person Integrative Care leadership team. This unit is a section of the San Francisco Health Network, under Ambulatory Care, and brings together low-barrier medical and behavioral health services, primarily serving people experiencing homelessness. The section's goal is to build a more responsive and proactive behavioral health system of care that will help people quickly move from the streets into effective treatment and sustained recovery. This includes innovative neighborhood street teams that have engaged over 22,000 people in the last 6 months.

#### Public Comment:

There was no public comment on this item.

Commissioner Comments:

Commissioner Salgado noted that one of the Promotores provided public comment and talked about how being involved and feeling like she is contributing to community boosts her mental health.

**11) OTHER BUSINESS**

Public Comment:

There was no public comment on this item.

Commissioner Comments:

None

**12) 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 Health Commission unanimously voted 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; and California Constitution, Article I, Section 1.

**CONSIDERATION OF ZSFG CREDENTIALING MATTERS**

**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 item)

Action Taken: The Health Commission approved the ZSFG Credentials Report and voted not to disclose discussions held in closed session.

**13) ADJOURNMENT**

The meeting was adjourned at 6:03pm.