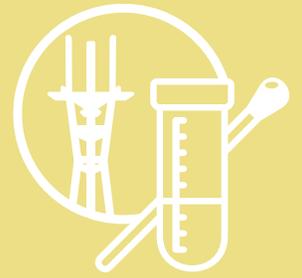




San Francisco  
Department of Public Health

# SAN FRANCISCO

DEPARTMENT OF PUBLIC HEALTH



ANNUAL REPORT  
2019-2020

## 2 MISSION AND VISION

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### **OUR MISSION**

Protecting and promoting health and well-being for all in San Francisco.

### **OUR VISION**

Making San Francisco the healthiest place on earth.

### **OUR STRATEGIC PRIORITIES**

For Fiscal Years 2019-2021, the San Francisco Department of Public Health (SFDPH) has chosen five broad-based and far-reaching strategic goals which directly align with its True North core values and reinforce the Department's commitment to its mission and vision.

- Strategy 1 – Advancing Equity
- Strategy 2 – Develop our People
- Strategy 3 – Lean Transformation
- Strategy 4 – Turning Data into Actionable Knowledge
- Strategy 5 – Homelessness & Behavioral Health

The SFDPH is committed to ensuring our patients, clients and colleagues are supported and informed in the face of uncertainty with healthcare.

SFDPH's commitment to provide quality health care and services for all San Franciscans has not changed, regardless of immigration or insurance status. We want all of our patients and clients to continue to seek services with their SFDPH providers, including care at our clinics and hospitals.

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## 4 MESSAGE FROM THE DIRECTOR

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Grant Colfax, MD

**DIRECTOR'S MESSAGE UNDER DEVELOPMENT**

Grant Colfax, MD  
Director of Health



Dan Bernal

When our fiscal year began in July 2019, we could not have anticipated how transformative the next twelve months would be for the Department of Public Health (DPH). It began with the San Francisco Health Network (SFHN) “Go Live” EPIC electronic health record system implementation at Laguna Honda Hospital and Rehabilitation Center (LHH), Zuckerberg San Francisco General Hospital (ZSFG), and the SFHN primary care clinics. Over 7,000 DPH staff were trained and 21 separate patient data systems were consolidated into one centralized system. In 2020, the Commission bid farewell to James Loyce, Jr., who served as Health Commission President, and welcomed Suzanne Giraud, Ph.D., and Susan Belinda Christian, J.D., as new Health Commissioners.

Within a matter of months, the DPH was closely tracking COVID-19 transmission throughout the world. On February 25, 2020, under the bold and effective leadership of Mayor London Breed, San Francisco declared a State of Emergency which prompted the DPH to activate its Department Operation Center, temporarily repurposing the City’s largest Department to respond to the pandemic while ensuring that the essential regular health delivery and public health functions continued.

Under the effective leadership of Dr. Grant Colfax, Department of Public Health (DPH) Director of Health, and Dr. Tomas Aragon, former San Francisco Health Officer, the DPH has led the City’s COVID-19 response using data-based decisions, innovation, dedication, and incredible courage.

Through the rest of the fiscal year, the DPH worked closely with the California Department of Public Health, U.S. Centers for Disease Control, other Bay Area counties, and San Francisco’s diverse communities, to coordinate prevention, obtain testing resources, and issue Stay-at-Home orders. Throughout this stressful period, the DPH staff developed strategies and resources, helping to keep our communities safe, healthy, and supported.

The COVID-19 pandemic revealed health and socioeconomic inequities as COVID-19 case and death rates were substantially higher in the Latinx, Black/African American, and Asian and Pacific Islander communities. The DPH has continued partnering with these communities most impacted by COVID-19 to establish testing centers and later vaccine sites. The murders of Black/African Americans including Ahmaud Arbery, Breonna Taylor, and George Floyd as a result of police brutality sparked outrage and an outcry for justice nationwide as crowds turned out for Black Lives Matter demonstrations. Through the impactful leadership of Dr. Ayanna Bennett, Director of the Office of Health Equity, the DPH began development of its Racial Equity Action Plan to rectify inequities within the Department while providing much needed resources to the community.

The Health Commission expresses its gratitude to every DPH employee for the vital contributions made each day to benefit the health and wellbeing of all San Franciscans, with special thanks and admiration to those working directly with members of the public in COVID-19 testing and vaccination centers, in our hospitals and medical clinics, in shelters and on the street. We are deeply grateful for the leadership that Mayor Breed and the Board of Supervisors bring to COVID-19 and other public health issues. We also acknowledge the importance of the many productive partnerships between the SFDPH with other City Departments and community-based organizations to protect the health of all San Franciscans.

Best Regards,

Dan Bernal  
Health Commission President

The mission of the San Francisco Department of Public Health (SFDPH) is to protect and promote the health of all San Franciscans. SFDPH is an integrated health department with two primary roles and two major divisions to fulfill its mission:

- Protecting the health of the population, which is the primary responsibility of SFDPH's Population Health Division; and
- Promoting the health of our patients, which is the primary responsibility of the San Francisco Health Network.

SFDPH's central administrative functions, such as finance, human resources, information technology, and policy and planning, support the work of SFDPH's two divisions and promote integration.



## POPULATION HEALTH DIVISION

SFDPH's Population Health Division (PHD) addresses public health concerns, including consumer safety, health promotion and prevention, the preparation and response to public health emergencies, and the monitoring of threats to the public's health. PHD implements traditional and innovative public health interventions. PHD staff inspect restaurants, promote improved air and water quality, track communicable diseases, and educate San Franciscans about the negative health impacts of tobacco. PHD staff also promote pedestrian safety, participate in an ambitious campaign to eliminate new HIV infections, and provide technical assistance to corner stores to increase healthy food options for residents. PHD contributes to the health of SFDPH's patients by contributing population health data and data analysis to the San Francisco Health Network.

PHD was granted public health accreditation in March of 2017, which specifically focuses on measurement of health department performance against a set of nationally recognized, practice-focused, and evidence-based standards based on the ten essential public health services, as well as management, administration, and governance.



## SAN FRANCISCO HEALTH NETWORK

The SF Health Network (SFHN) comprises the direct health services SFDPH provides to thousands of insured and uninsured residents of San Francisco, including those most socially and medically vulnerable. The San Francisco Health Network is a community of top-rated clinics, hospitals and programs operated by the Health Department. We connect San Franciscans to quality health care. Every year we serve more than 100,000 people in our clinics and hospitals, including Zuckerberg San Francisco General, the only trauma center serving all of San Francisco and northern San Mateo County, and Laguna Honda Hospital and Rehabilitation Center. We provide continuous care for people wherever they are – in clinics, hospitals, at home, in jail or transitional housing. As the city's public health system we also provide emergency, trauma, mental health and substance abuse care to any San Franciscan who needs it.

The Health Network celebrates the city's diversity, serving individuals and families of all backgrounds and identities, regardless of immigration or insurance status. The Health Network is dedicated to empowering all San Franciscans, without exception, to live the healthiest lives possible.

To learn more about San Francisco Health Network and the services we provide, please visit: [www.sfhealthnetwork.org](http://www.sfhealthnetwork.org).

True North is a precise, concise and universal set of ideals which, when taken together provide a compass that describes the DPH’s ideal or state of perfection that the department is continually striving towards. True North encompasses a broad scope of work and serves as the basis for strategic planning, guiding leadership in setting priorities and metrics across all levels of the organization. While departmental tactics and strategies may change True North does not change. SFDPH’s True North, Mission, and Vision are summarized in the following visual triangle.

**THE DPH TRUE NORTH TRIANGLE**



**THE SIX TRUE NORTH PILLARS ARE:**

**Safety & Security**

*Ensure safe environments for our clients, patients, and staff.*



**Health Impact**

*Improve the health of the people we serve.*



**Service Experience**

*Provide the best experience for the people we serve.*



**Workforce**

*Create an environment that respects, values, and invests in all our people.*



**Financial Stewardship**

*Ensure transparent and accountable stewardship of resources.*



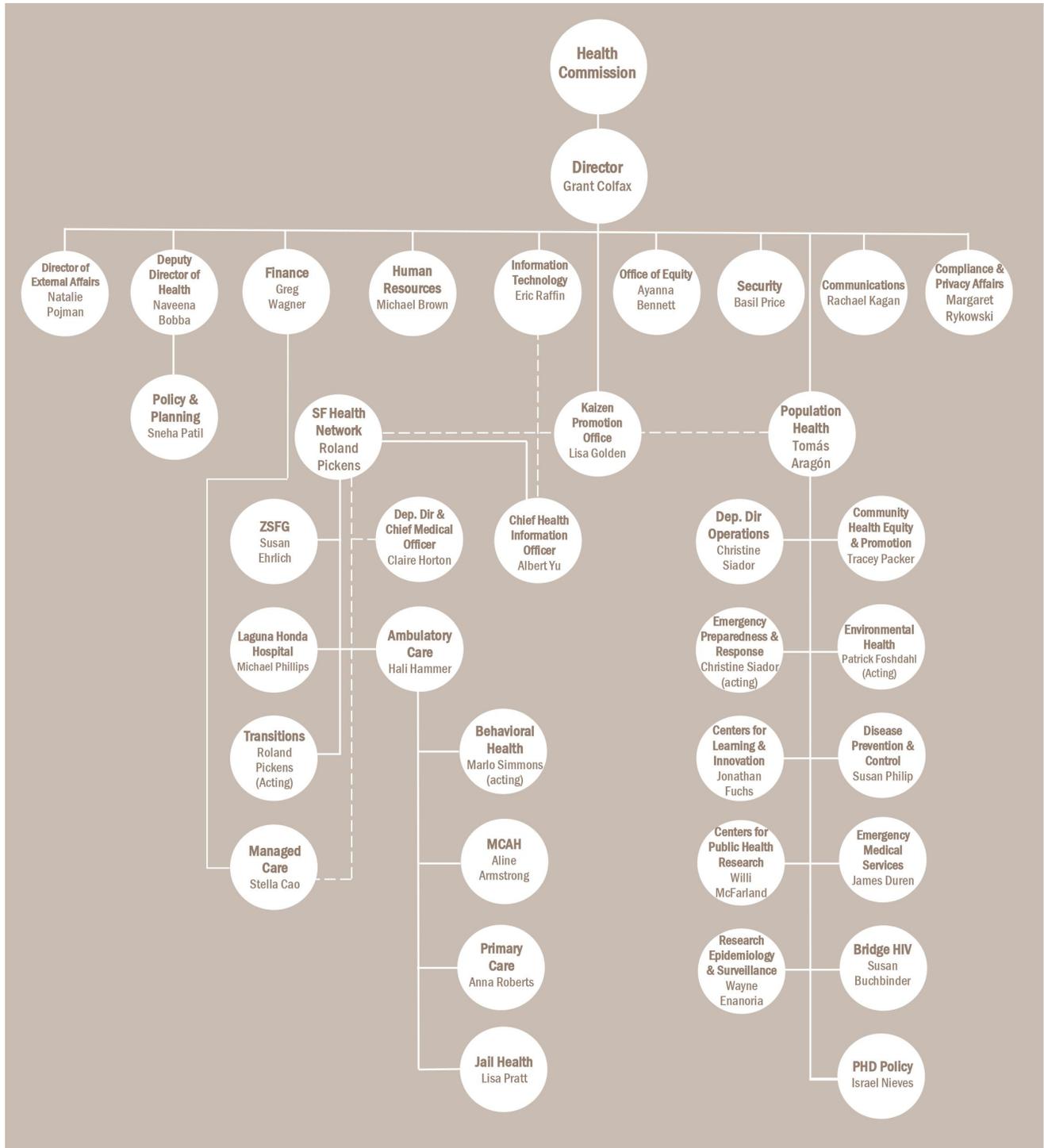
**Equity**

*Eliminate health disparities.*



ORGANIZATIONAL CHART

SFDPH’s dedicated staff help realize the organization’s mission of protecting and promoting the health of all San Franciscans. The San Francisco Health Network integrates our delivery system and focuses on providing high quality health care services. The Population Health Division leads SFDPH efforts in health protection, promotion, prevention and disaster readiness.



\*Updated as of June 30, 2020

As SFDPH’s governing and policy-making body, the **San Francisco Health Commission** is mandated by City and County Charter to manage and control the City and County hospitals, to monitor and regulate emergency medical services and all matters pertaining to the preservation, promotion and protection of the lives, health, and mental health of San Francisco residents. The full Health Commission meets on the first and third Tuesday of each month at 4:00 p.m. in Room 300 at 101 Grove Street.

The Health Commission’s committee structure consists of:

- The Zuckerberg SF General Joint Conference Committee
- The Laguna Honda Hospital Joint Conference Committee
- The Community and Public Health Committee
- The Finance and Planning Committee

The Health Commission also participates in the following external bodies:

- San Francisco Health Plan Board of Directors
- Zuckerberg SF General Foundation Board of Directors
- San Francisco Public Health Foundation Board of Directors
- In-Home Supportive Services Public Authority Governing Board

As part of the Department’s Racial Equity Action Plan, demographic information for the Health Commission is collected annually and included in the SFDPH Annual Report. These data are also required to be collected for every CCSF policy body every two years

Demographics of Health Commission Members*	
Race and Ethnicity	Count
Asian	3
Black/African American	1
Latinx/Hispanic	1
Middle Eastern/North African	
Multiracial	
Native American/Alaska Native	
Native Hawaiian/Other Pacific Islander	
White Caucasian	2
Disability Status	
Has one or more disabilities	3
Veteran Status	
Served in the military	1
Gender Identify	
Female	4
Trans Female	1
Genderqueer/Non-binary	
Male	2
Trans Male	
Other	
Sexual Orientation	
Bisexual	
Gay/Lesbian/Same Gender Loving	2
Questioning/Unsure	
Straight/Heterosexual	4
Other	1

\*Demographic categories derived from the Department of the Status of Women Biannual CCSF Policy Body Survey.



**Dan Bernal, President**

Commissioner Bernal is Chief of Staff for Speaker of the House Nancy Pelosi. He has dedicated his career to public service, having served in the White House under President Bill Clinton and as a presidential appointee at the U.S. Department of Education. As Congress debated the Affordable Care Act, he supported Speaker Pelosi's efforts to build support for the legislation in California by convening diverse stakeholders and coordinating activities among Bay Area Members of Congress. He continues to serve as a valuable resource to the California Democratic Congressional Delegation, key policy makers, and advocates in the fight to protect and improve the Affordable Care Act. Commissioner Bernal served as board president of AIDS Emergency Fund and spearheaded the creation of Breast Cancer Emergency Fund. He previously served on the board of directors of the Susan G. Komen Breast Cancer Foundation Bay Area Affiliate, the San Francisco AIDS Foundation, and the National AIDS Memorial. He was appointed to the Health Commission in 2017.



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

Commissioner Green has delivered two generations of babies and practiced medicine in San Francisco for 40 years. In 1989 she co-founded Pacific Women's Obstetrics & Gynecology Medical Group, the second all-female OB/GYN practice in San Francisco, providing state-of-the-art, empathic obstetrics and gynecology care in a woman-run environment. Dr. Green is also the Founder, President, and Chair of the Board of The MAVEN Project, which engages physicians to volunteer their clinical expertise via telehealth technology to medically under-resourced communities in the Bay Area and across the country. Locally, she has served as President of the California Academy of Medicine and San Francisco Gynecology Society. During her 20-year tenure in leadership positions on the Brown and Toland Medical Group Board of Directors, she helped develop multiple initiatives to improve physician communication and quality of care. She also served 7 years on the Harvard Medical School Alumni Association, including Presidency of the organization in 2014. Her focus included diversity and equity, student mentorship, and alumni volunteerism. For many years, she served as a media consultant and on-air reporter for medical issues at KTVU and other Bay Area television and radio stations. She is currently Vice-Chair of the OB/GYN Department at California Pacific Medical Center. Commissioner Green was appointed to the Health Commission in 2018 and is a member of the Joint Conference Committees of Laguna Honda Hospital and Zuckerberg San Francisco General Hospital, where she trained.



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

Commissioner Chow is an internal medicine specialist who has been in practice in San Francisco for over fifty years. He is President and CEO of Jade Health Care Medical Group, affiliated with the Chinese Hospital Health System. Previously he was Executive Director of the Chinese Community Health Care Association, and Chief Medical Officer of the Chinese Community Health Plan. He is a member-at-large of the Federation of Chinese American and Chinese Canadian Medical Societies Board of Directors; and founding member of the National Council of Asian Pacific Islander Physicians, the Asian Pacific American Health Forum and is past Chair of the Asian Americans, Native Hawaiians and Pacific Islander Diabetes Coalition. He has served as President of the San Francisco Medical Society and the California Society of Internal Medicine. He has received numerous awards for his work in health disparities and cultural competency, including the 2008 Alumni Merit Award from St. Louis University School of Medicine, Laureate Award from the American College of Physicians Northern California Chapter (2008), San Francisco Asian Pacific American Heritage Lifetime Achievement Award (2010), and the Silver SPUR award (2012) for enhancing the quality of life and vitality of the San Francisco Bay Area. Commissioner Chow currently chairs the Zuckerberg San Francisco General Hospital Joint Conference Committee; he is also a member of the Finance and Planning Committee and Laguna Honda Hospital Joint Conference Committee. He was appointed to the Health Commission in 1989.



**Tessie M. Guillermo**

Commissioner Guillermo is the Chair of the Board of Directors of CommonSpirit, the third largest national non-profit health system in the United States. She is the former President and CEO of ZeroDivide, a philanthropy and consultancy that developed innovative digital equity strategies in support of low-income communities. Commissioner Guillermo was the founding CEO of the Asian and Pacific Islander American Health Forum, leading this national minority health policy/advocacy organization for 15 years. In recognition of her national leadership, Commissioner Guillermo was appointed by President Bill Clinton to serve as an inaugural member of the President's Advisory Commission on Asian Americans and Pacific Islanders. She also currently serves on the boards of the Marguerite Casey Foundation, the Nonprofit Finance Fund, the Center for Asian American Media and the Smithsonian Museum's Asian Pacific American Center. Commissioner Guillermo is an alumnus of the University of California, Berkeley; and California State University East Bay, where she has been awarded recognition as a Distinguished Alumni of the School of Business and Economics. Commissioner Guillermo was appointed to the Health Commission in 2018 and chairs the Laguna Honda Hospital Joint Conference Committee.



**Cecilia Chung**

Commissioner Chung is nationally recognized as a civil rights leader, advocating for HIV/AIDS awareness and care, LGBT equality, and prisoner rights. She is the Senior Strategist of Transgender Law Center and has served on a number of planning bodies, which includes the San Francisco HIV Health Services Planning Council, Transgender Community Advisory Board for UCSF TRANS and the Visioning Change Initiative of the California HIV/AIDS Research Program. She is a past member of the Presidential Advisory Council on HIV/AIDS. Commissioner Chung chairs the Finance and Planning Committee and is a member of the Community and Public Health Committee. She was appointed to the Health Commission in 2012.



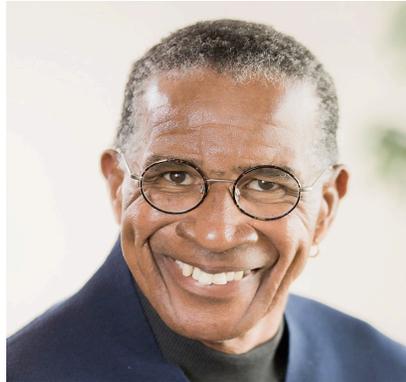
**Suzanne Giraudo, Ph.D.**

Dr. Giraudo is a psychologist and is the Clinical Director of the California Pacific Medical Center Department of Pediatrics Child Development Center. In addition to her clinical expertise, Dr. Giraudo's professional background includes development, administration, and supervision of pediatric clinical programs, grant administration, and teaching. She is the founder and trustee of the DeMarillac Academy, a Catholic school located in the Tenderloin, serving underserved children and families. Her other professional affiliations include San Francisco Families First Five Commission Chair, Home Away from Homelessness, St Anthony's Pediatric Clinic, Marin Community Pediatric Program, and the Northeast Medical Services Pediatric Clinics. Dr. Giraudo earned her Doctorate in Educational Psychology and Counseling from the University of San Francisco; a Master's degree in education from San Francisco State University, and her Bachelor Arts Degree from the University of San Francisco. Commissioner Giraudo is chair of the Community and Public Health Committee and represents the Health Commission on the San Francisco General Hospital Foundation. She was appointed to the Health Commission in 2019.



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

Commissioner Christian is an Assistant District Attorney in San Francisco. She has participated in initiatives focused on equity and was a principal organizer of District Attorney Kamala Harris’ national convention on combatting the “Gay Panic Defense.” She is currently a co-chair of District Attorney Boudin’s Community Health Advisory Committee. From 2012 through 2019, she was assigned to the Behavioral Health Court—a collaborative, multidisciplinary court providing treatment and rehabilitation for people whose criminal justice involvement is tied to behavioral health disorders. She also was one of several ADAs who staffed San Francisco’s Mental Health Diversion Court at its inception. She is a member of the Lawyers’ Committee for Civil Rights of the San Francisco Bay Area and has served on the Bar Association of San Francisco’s Criminal Justice Task Force. After receiving her B.A. and J.D. from Yale, she clerked for a Federal Judge and later worked as a Staff Attorney for the Ninth Circuit Court of Appeal. A former Co-Chair of the Alice B. Toklas LGBT Democratic Club, she continues to serve on its Board. She also received an Alumni Achievement Award from Outlaws, Yale Law School’s LGBTQ+ Student Organization. She has also served on the boards of directors for Walden House / HR 360, the Transgender Law Center and the governing board of Service Members Legal Defense Network, the national organization which led the successful effort to fully repeal “Don’t Ask, Don’t Tell.” She was selected to advise the transition team for then California Attorney General-elect Kamala D. Harris. In 2012, she was appointed to the San Francisco Human Rights Commission, where she served four terms as Commission Chair and worked with the Mayor’s Office to create and implement a pilot program for Implicit Bias trainings for City employees. Following San Francisco Mayor London N. Breed’s election, Commissioner Christian served on the Equity and Equality Subcommittee of the Policy Transition Team. Commissioner Christian is a member of the ZSFG Joint Conference Committee and the Community & Public Health Committee. She was appointed to the Health Commission in 2020.



**James Loyce Jr., M.S.**

Commissioner Loyce is a Public Health and Non-Profit professional and advocate with over 35 years of experience. He began his career in the Non-Profit Sector in clinical staff positions progressing over time to the role of Executive Director/CEO. His advocacy work included co-founding The Black Coalition on AIDS and serving on numerous Boards of Directors for Non-Profits. He also has been involved in local, state and federal health policy advocacy. In the public sector, Commissioner Loyce served the City and County of San Francisco in a variety of senior administrative roles that spanned health policy, budget development and advocacy at local, state and federal levels. He retired from the San Francisco Department of Public Health as a Deputy Director in 2007 after 20 years of service. Since his retirement, he has returned to Public Health and Non-Profit advocacy work serving on a number of San Francisco Bay Area and National Boards. He is also an Organizational Development Consultant to Non-Profits. Commissioner Loyce was appointed to the Health Commission in 2016 and was a member of the Community and Public Health Committee and the Zuckerberg San Francisco General Hospital Joint Conference Committee. His tenure ended in January, 2020.



**Mark Morewitz, MSW**  
Health Commission Secretary

Mr. Morewitz has worked in public health research, program development and evaluation; and non-profit administration. First hired at the SFDPH in 1992, he has worked in HIV service contracting and monitoring; provided social work services; and served as the Director of the SFDPH Jail Health Services Forensic AIDS Project. He has served as the Health Commission Executive Secretary since 2009.

**FISCAL YEAR 19/20**  
**FEATURES**

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## Behavioral Health Transformation

Fiscal Year 2019/20 marked the second year of San Francisco Department of Public Health’s Behavioral Health System transformation. The department continued its focus on better serving people experiencing homelessness who are also diagnosed with serious and severe behavioral health disorders, launched an innovative bed-inventory dashboard, and expanded treatment beds and low barrier care. This work follows the efforts that began in March 2019, with the appointment of Dr. Anton Nigusse Bland as the Director of Mental Health Reform, who has been tasked with developing strategies to improve San Francisco’s approach to mental health and substance use treatment for at-risk people experiencing homelessness.

Most significantly, this year saw the passage of Mental Health San Francisco (MHSF) legislation by the Board of Supervisors, which supports the current efforts to reform San Francisco’s behavioral health system. The legislation calls for new and increased services, infrastructure and accountability for behavioral health system in San Francisco. These efforts will focus on serving people who are homeless with serious mental illness or substance use disorders and will prioritize getting people off the street and into care.



Mayor Breed Announcing Passage of Mental Health SF Legislation

### Goals of Transformation

Department of Public Health provides behavioral health services to some 30,000 people across 300 programs. The department oversees approximately 2,000 beds in the behavioral health system across the continuum of care from crisis and acute inpatient care to residential treatment beds and board & cares. This system of care is complex, and changes take sustained effort and time to plan and implement.

To guide the transformation of the Behavioral Health System, four underlying goals have been established:

1. Create a unifying vision for the delivery of behavioral health services to homeless individuals;
2. Advance equity to eliminate health disparities in vulnerable populations;
3. Identify sustainable, systemic, innovative opportunities for improving SFDPH’s system of care for target population; and
4. Use data and evidence-based practices to inform decisions and guide discussions.

### Guiding Principles and the Transformative Work Underway

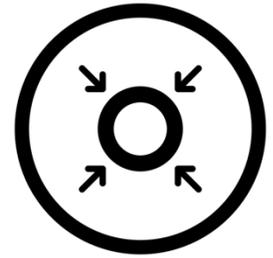
To achieve the goals of transforming the behavioral health system, the department is following three guiding principles: meet people where they are, make it easier to access care, and provide more treatment and respite locations. The following sections detail how the department has used these principles to begin to transform the behavioral health system and plan for future changes. Many of these efforts were identified as part of the work by Director of Mental Health Reform strategies, and will be supported through the Mental Health SF legislation.

## Behavioral Health Transformation – Continued

### Meet People Where They Are

SFDPH has a long history of providing harm reduction and community-based services. As part of the behavioral health transformation, the department has drawn on this experience to expand existing services and outreach efforts, and develop new and innovative programs. Over the previous fiscal year, work to better ensure the behavioral health system meets people where they are, included, but was not limited to:

- Expanding outreach to vulnerable populations by increasing behavioral health services in Shelter Health programming and providing clinical services in permanent supportive housing;
- Planning the establishment of a street Crisis Response Teams to engage persons on the street who are experiencing a mental health or substance use related crisis and connecting them with services; and
- Expanding Overdose Prevention services and programs.



### Make it Easier to Access Care

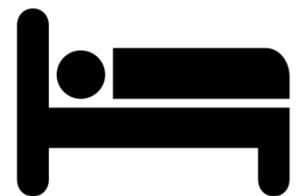
San Francisco's behavioral health system is complex and can be difficult to navigate. In order to make it easier for patients to access behavioral health care, over the previous fiscal year the department has begun planning to make the following key investments:



- Establish Office of Coordinated Care to oversee the seamless delivery of mental health care and substance use services across the City's behavioral health systems. The office would maintain an inventory of mental health programs funded by the City and provide case management to individuals accessing services;
- Design a Mental Health Service Center that's open 24-hours to assess incoming patients' care needs and provide urgent mental health care; and
- Create Homeless Resource Center that provides behavioral health services at a new drop-in center for people experiencing homelessness.

### Provide more Locations for Treatment and Respite

Despite the array of programs available, there is still a high need for certain treatment and respite services, especially for our most vulnerable populations. To address these needs, the department is committed to increasing locations that provide treatment and respite for people experiencing homelessness such as establishing a Drug Sobering Center and Managed Alcohol Program. In addition, based on recent analysis of behavioral health bed demand, there is needs for Substance Use Disorder Residential Step-Down services, Low Barrier TAY Residential services, Locked Subacute/Psych Skilled Nursing, Mental Health Residential Treatment, Board and Care, and Crisis Urgent Care. Work on establishing and expanding these programs will continue in the next fiscal year.

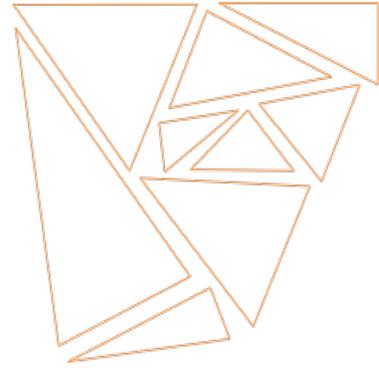


### Looking Ahead

Next year marks the third year of the behavioral health system's transformation journey. Fiscal Year 20-21 will see continued work on key components of reform, including the building of the Office of Coordinated Care within the Department, piloting the Street Crisis Response Team, and continuing to increase the City's capacity for mental health and substance use treatment beds. The year will also see the formation of the MHSF Implementation Working group, which will begin the process of developing recommendations on how best to reform and expand the City's mental health services. While the City's response to COVID-19 has delayed the implementation of certain pieces of reform, the Department is committed to continuing this important and necessary work.

## Office of Health Equity Established

The San Francisco Department of Public Health Office of Health Equity (OHE) was established in October of 2019. The Office is the culmination of years of work by leaders at all levels across SFDPH to elevate equity and anti-racism as priorities for action. OHE is tasked to work in partnership with the San Francisco Office of Racial Equity to ensure that SFDPH is advancing equity for our staff and the community. OHE acts as the principal liaison for the Office of Racial Equity, and is the owner of the annual equity plan and a matrixed source of oversight for equity staff across the department.



### Structure and Programming

OHE programs include many that have been ongoing for several years. The Black African American Health Initiative, with its leadership and staff, are part of the Office of Health Equity. The Trauma Informed Service program and its staff are also now part of this new team. The Office of Health Equity staff, along with training and equity staff across the department, are also tasked with offering trainings and forums for staff to learn more about health equity and how they can play a role in advancing equitable care and outcomes.

Two new training programs were launched in 2019-20, though both were disrupted by the demands of the COVID-19 response. The Equity Champions program launched in January 2020 with 80 champions from all areas of SFDPH. Champions applied with manager approval to do 30 hours of equity learning (trainings, self-education, etc.) and 30 hours of equity practice. Equity practice is defined as a meaningful project in their area that aligned with their division or section equity goals for the year. Proposals included patient surveys, data analysis, trainings, and quality improvement projects. The Equity Leaders Fellowship was launched in February 2019 and was only able to complete one of 6 sessions before COVID-19 efforts diverted staff. Fellows signed up for 6 full day trainings to learn practical skills for advancing equity. These included policy analysis, community engagement, data analysis and other topics. Neither program was able to be completed as designed. Both will be relaunched in 2021.

**“Not everything that is faced can be changed. But nothing can be changed until it is faced,”**

**– James Baldwin**

### Staffing and Looking Ahead

The Office of Health Equity is headed by Dr. Ayanna Bennett, a member of the executive team, reporting to Director Grant Colfax. The staff also includes Toni Rucker, Gavin Morrow-Hall, Vincent Fuqua, and Tanya Yared. A new position, planned for early 2020, was delayed into the 2020-2021 fiscal year. The Director of Workforce Equity, Dante King, has since been hired. In the future, OHE plans to expand in its core areas: workforce equity, community engagement, healthcare quality, and equity education.

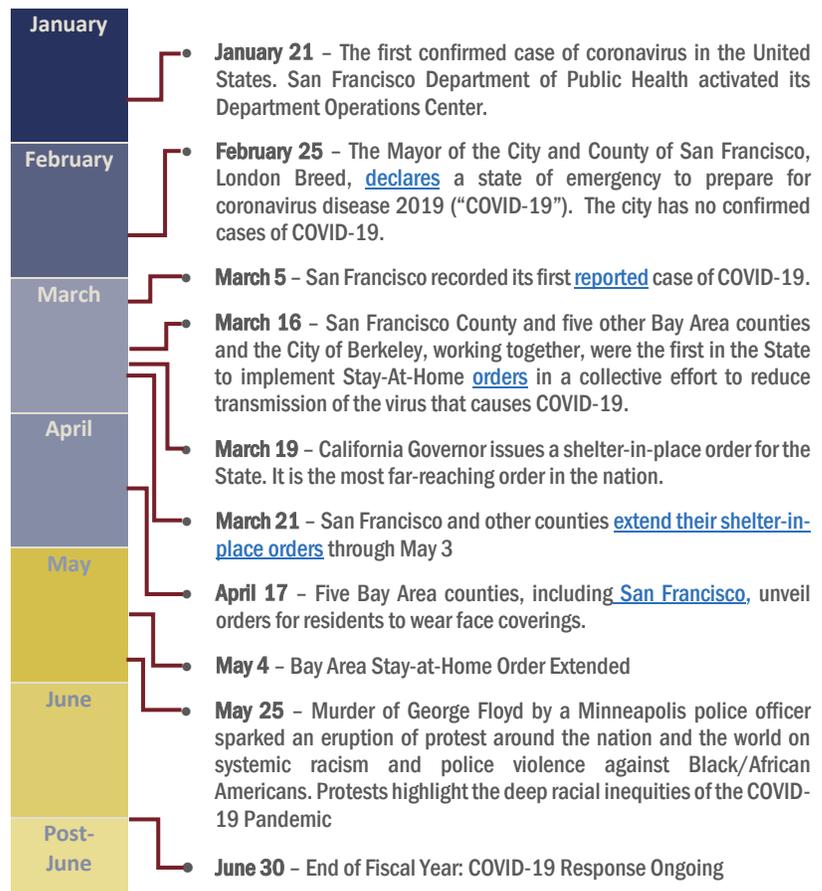
**San Francisco Office of Racial Equity** In July 2019, the Office of Racial Equity (ORE) ([Ordinance No 188-19](#)) was established by the Board of Supervisors as a Division of the San Francisco Human Rights Commission. ORE was legislated in response to the City’s growing racial disparities as a means to address the history of structural and institutional racism in San Francisco’s delivery of services to the public and our own internal practices and systems. Creating ORE was the result of successful advocacy and organizing by Black City workers, labor leaders, and community members. With the establishment of ORE, San Francisco joins a national movement to address the government’s role in resolving the inequitable outcomes it created.

The legislation mandates change through specific strategies, actions, and learning and evaluation through public-facing reports and scorecards. In addition, it requires that City departments designate employees as racial equity leaders acting as a liaison to the Office, and requires the Department of Human Resources to assess and prioritize racial equity with the City’s workforce

## Department of Public Health Response to the Covid-19 Global Pandemic

The global coronavirus pandemic (COVID-19) has transformed the daily lives of just about everyone, and brought significant health, social and economic consequences. On January 21<sup>st</sup>, 2020, the San Francisco Department of Public Health (DPH) activated its Department Operations Center (DOC), and began its official response to COVID-19. DPH, alongside other City agencies, coordinated efforts, mobilized resources, and created an entire infrastructure to respond to the pandemic. This response has been grounded in science, data and facts every step of the way, and the systems established continue to be improved and built upon. A timeline of the major milestones is provided to the right.

San Francisco is one of the largest metro areas in the U.S. to keep COVID-19 under control, despite surges occurring throughout the world. This is largely due to San Francisco and the surrounding region’s response to the pandemic – it’s [estimated](#) that nearly 38,000 hospitalizations were prevented due to public health efforts within the first 2-months of the stay-at-home orders. Despite these successes, certain populations in San Francisco have been disproportionately impacted by COVID-19 disease and death. The Latinx community has had a



disproportionately high rate of cases, Black/African Americans have experienced worse health outcomes, and Asians have been over-represented in COVID-19 deaths. Closures due to the pandemic have also resulted in mass unemployment and significant disruptions to the economy, replacing San Francisco’s budget surpluses with historic deficits.

More than 3,000 City employees have been activated as Disaster Service Workers (DSWs) since the COVID-19 response began (data through June 2020). DSWs from almost every City department have worked together to run the City’s response, staff temporary housing sites, assist at COVID-19 testing facilities, provide childcare for essential workers, distribute food and supplies to those in need, and much more. The following sections highlight some of the work DPH has led in the City’s response to the pandemic during the 2019-20 fiscal year.

### Overview of DPH Response to COVID

#### Advancing Health Equity

**Description** The hardships of the pandemic have not been evenly distributed – neither in health nor economic terms. COVID-19 has exploited the existing inequities in our society, with local and national data showing disproportionate impacts of the virus on communities of color. Health data reveal that the Latinx community, which represents 15 percent of San Francisco’s population, has accounted for about half of all COVID-positive cases in FY 19/20. While Whites, which account for 41 percent of the City’s population, only represented 5 percent of positive cases. The rate of infection for Native Hawaiian and Pacific Islanders was also high.

**FY 19/20 Activities** A core mission of DPH is to address health inequities, and we have a responsibility to focus efforts on populations disproportionately affected by COVID-19. From the start of the pandemic, DPH focused its coronavirus response on populations most vulnerable to COVID-19: people who are 60 or older or have underlying health conditions, people in congregate settings and communities that are

**“There can be no spectators. Addressing racism is a core part of everyone’s work”**

- Dr. Ayanna Bennet  
Director of Office of Health Equity

## COVID-19 RESPONSE – CONTINUED

disproportionately affected by the pandemic - the Latinx community, frontline essential workers, and Black and African American residents. This focus included conducting targeted community outreach in impacted communities and ensuring access to COVID-19 testing. In addition, San Francisco was one of the few counties in the country that included an Equity Officer and equity team embedded in its emergency operations center. The goal of this team, in collaboration with DPH partners, has been to ensure equity in the citywide response to COVID-19.

### Testing

**Description** Testing for COVID-19 has been a critical part of San Francisco’s response. DPH uses testing data to tell us whether we are succeeding in our efforts to prevent infections, and to point out where more work is needed to protect the community. Throughout the pandemic, DPH has focused its testing resources on populations most vulnerable for increased transmission, morbidity and mortality of COVID-19. These populations include patients in long-term care facilities, such as skilled nursing facilities (SNF), individuals living in single room occupancy hotels (SROs), sheltered and unsheltered persons experiencing homelessness (PEH), and individuals living in neighborhoods with significant health disparities.

**FY 19/20 Activities** The City’s COVID-19 testing locations are located throughout San Francisco. The City’s testing strategy has included large volume sites, pop-up temporary test sites, on-site targeted testing in congregate living settings, and community testing sites, which are done in collaboration with local community-based organization. Through July 2020, DPH’s testing resources had performed more than two-thirds of all testing done in San Francisco. San Francisco also worked with local hospital partners to increase their testing capacity to ensure private providers can test their patients. Overall, our testing strategy has been to provide low barrier COVID-19 testing, and our goal is universal access to testing for San Franciscans.

**Get Tested,  
San Francisco!**

**Stop the spread of COVID-19.  
Schedule your appointment today.**

- ✓ Testing is free
- ✓ No insurance or doctor’s note required
- ✓ Results in one to three days

To learn more about eligibility and details, visit [sf.gov/GetTestedSF](https://sf.gov/GetTestedSF) or call **311**.

City & County of San Francisco  
Department of Public Health

### Case Investigation and Contact Tracing Team

**Description** Case Investigation and Contact Tracing (CI/CT) is a core function of DPH’s Population Health Division in its response to various communicable diseases like COVID-19. The CI/CT team has conducted case investigation since the City’s first COVID-19 case was diagnosed. When conducting contact tracing, DPH works to identify people who have been in close contact with a confirmed case to interview, educate, and quarantine those that have been exposed to prevent further transmission of the disease. Isolating those who are infected (cases) and quarantining those who have been in contact with a case (contacts), is an effective public health approach for controlling the spread of the disease.

**FY 19/20 Activities** The need and value of contact tracing grew as widespread testing for COVID-19 occurred across different San Francisco neighborhoods and facilities. The case investigation and contact tracing team had over 20 activated DPH DSWs doing case investigation and over 100+ DSWs activated to do contact tracing. This included City Attorneys, Librarians, and Assessors which collaborated closely with a team from the UCSF Institute of Global Health Sciences.

The CI/CT program uses many client focused principles, including confidentiality, evidence-based, and cultural and linguistic competence. Language skills are critical for this work, and interviews are most successful when conducted in primary language of individuals. Between April and June 2020, the majority of case interviews were conducted in Spanish. During this time, interviews were also conducted in English, Cantonese, Tagalog, and Mandarin. San Francisco continues working to expand its ability to provide culturally and linguistically appropriate CI/CT services.

**COVID-19 Alternative Housing Program**

**Description** The City’s response to COVID-19 has included the establishment of the COVID-19 Alternative Housing Program to provide emergency, temporary housing and shelter options for individuals who are directly affected by the coronavirus, or who are at high risk of serious illness if they contract the virus. Housing options have included private hotels, congregate sites, trailers and recreational vehicles. Many sites have on-site medical and behavioral health staff as needed for guests.



**FY 19/20 Activities** About 3,000 alternative housing units were established through June 2020 for the City’s most vulnerable populations, including people experiencing homelessness (PEH) and marginally housed persons. The City provided about 380 units of temporary housing to people who work outside of their homes, including individuals on the front lines and individuals from communities with higher risk of COVID-19 transmission.

DPH has collaborated with partner agencies like the Department of Homelessness and Supportive Housing (HSH) and the Human Services Agency (HSA), to support PEH and who are unable to isolate. As of July 28<sup>th</sup>, San Francisco has acquired 2,734 hotel and RV units for COVID positive and vulnerable PEH. Many sites have on-site medical and behavioral health staff as needed for guests. For example, DPH in partnership with the Drug Overdose Prevention Education (DOPE) project and the San Francisco AIDS Foundation (SFAF) Syringe Access Services have been deployed to implement harm reduction policies including strategies to address overdoses. As part of this partnership, DOPE and SFAF installed wall-mounted and publicly accessible nasal naloxone kits on each floor of each SIP site, and as of August 27, 2020 there had been 150 naloxone stations set-up across 27 sites.

**Community Branch**

**Description** The Community Branch has worked to prevent and respond to COVID-19 in community settings and engage communities that are more vulnerable to infection and/or higher risk for outbreak due to structural barriers to health.

**FY 19/20 Activities** The Community Branch conducted the following key activities during the fiscal year:

- Disseminated COVID-19 information and guidance to each of the community priority settings through an equity lens by leveraging neighborhood and community partners.
- Responded to concerns and questions to connect neighborhoods and communities to their needs.
- Conducted COVID-19 site exposure notifications with managers utilizing an equity lens.
- Supported outbreak prevention and response in at-risk communities with a population, equity, and neighborhood lens.
- Integrated community voices and engaging CBOs into COVID-19 Command Center operations, and leveraging partnership in the community.

**"The community and city dedication to supporting community members has been incredible and inspiring. We have developed stronger partnerships across city departments and community and that will last and strengthen our work beyond COVID19."**

- Tracey Packer, Community Branch Lead

**"We need to hear more from the communities using our guidance, integrate that feedback, and produce better materials. We have an impressively dedicated team and are always pushing for better outcomes particularly for the communities most impacted."**

- Rite Nguyen, I&G Branch Chief

**Information & Guidance Branch**

**Description:** Info & Guidance (I&G) provides COVID-19 related guidance for all sectors of society – childcare, schools, service providers, employers of all types, healthcare, and the general public. The goal of this work is to provide and ensure accurate, science-based, stakeholder-informed information and guidance in order to prevent, contain, and mitigate COVID-19.

**FY 19/20 Activities:** Between January and November 2020, the branch created 294 guidance documents. I&G strives to write guidance through an equity lens and consider how the information affects those most vulnerable and impacted by COVID-19. All content is posted on [sfcdcp.org/covid19](https://sfcdcp.org/covid19).

### COVID-19 RESPONSE: KEY METRICS AS OF JUNE 30, 2020

The City's role is to make informed choices based on data, science and evidence in partnership with public health experts, businesses, and the community. San Francisco's health indicators are an important tool to monitor the level of COVID-19 in the community and the ability of our health care system to meet the needs of residents. The Health Indicators monitor cases, hospital system, testing, contact tracing and personal protective equipment.

The following series of data point includes key indicators of the impact of COVID-19 on San Francisco through FY19/20, along with data points to capture to scope of the response. The complete set of indicators and their statuses can be on the San Francisco [COVID-19 Data Tracker](#).

AREA	DESCRIPTION	METRIC			
<b>HOSPITAL</b> 	<p>The ability for our hospital system to take on the anticipated surge in COVID-19 cases is a critical component of San Francisco's response, and is one of our key indicators for reopening. Tracking hospital capacity enables public health officials to gauge the ability of our health care system to treat severe cases of COVID-19 and handle a potential surge of patients.</p>	<b>Total COVID-19 Hospitalizations</b>	79 individuals*		
		<b>Total System Capacity (beds)</b>	2,268		
		Intensive Care Unit	323		
		Intensive Care Unit Surge	268		
		Acute Care	1,399		
		Acute Care Surge	278		
		*Point-in-time count (ICU + Acute Care) on June 30, 2020			
		<b>CASES</b> 	<p>In order to monitor how the COVID-19 virus is spreading in our community, San Francisco public health officials are closely tracking the total number of confirmed COVID-19 cases, the total number of COVID-19 deaths, and the 7-day average of new cases confirmed each day.</p> <p>Case information is based on confirmed positive laboratory tests reported to the San Francisco Department of Public Health.</p>	<b>Total Deaths</b>	50
				<b>Total Confirmed Cases</b>	3,946
<b>Percent Cases by Gender</b>					
Male	58.18%				
Unknown	0.76%				
Trans Female	0.15%				
Female	40.91%				
<b>Percent Cases by Race/Ethnicity</b>					
Asian	11.9%				
Black or African American	5.2%				
Hispanic or Latino/a, all races	50.5%				
Multi-racial	1.7%				
Native American	0.4%				
Native Hawaiian or Other PI	1.0%				
Other/Unknown	13.7%				
White	15.7%				
<b>Percent Cases by Age</b>					
under 18	8.6%				
18-30	22.2%				
31-40	23.7%				
41-50	17.2%				
51-60	11.9%				
61-70	8.1%				
71-80	4.8%				
81+	3.5%				
<b>Cases by People Experiencing Homelessness</b>	5%				
<b>TESTING</b> 	<p>Testing for COVID-19 is a critical part of San Francisco's response and readiness for reopening. The number of tests collected and the number of new cases per day tell us whether we are succeeding in our efforts to prevent infections, and point to where more work is needed to protect the community. San Francisco set a goal of testing approximately 1,800 San Franciscans per day</p>	<b>Total Tests</b>	156,937		
		<b>Positivity Rate</b>	3.17%		
		<b>7-day Average Tests Collected per Day</b>	3,404		
		<b>Total Tests in Congregate Living</b>	25,323**		
		**Through July 28, 2020			

COVID-19 RESPONSE: KEY METRICS AS OF JUNE 30, 2020

AREA	DESCRIPTION	METRIC	
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">CONTACT TRACING</p> 	<p>Contact tracing is a core function of the San Francisco Department of Public Health and this expertise sits within our Population Health Division. When conducting contact tracing, DPH works to identify every person who has been in close contact with a confirmed case to interview, educate, and quarantine those that have been exposed to prevent further transmission of the disease. In the absence of a vaccine or effective treatment for COVID-19, isolation of those who are infected (cases) and quarantine of those who have been in contact with a case (contacts) are the most effective public health tools available.</p>	<p><b>Percent of Cases Reached for Contact Tracing over the Prior Two Weeks</b></p>	<p>85%</p>
	<p>San Francisco has set a goal to reach 90 percent of people who test positive for COVID-19 and reach 90 percent of the contacts that newly infected patients are able to identify</p>	<p><b>Percent of Named Contacts Reached for Contact Tracing over the Prior Two Weeks</b></p>	<p>86%</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">ALTERNATIVE HOUSING</p> 	<p>The City's response to COVID-19 includes establishing the COVID-19 Alternative Housing Program to provide emergency, temporary housing and shelter options for individuals who are directly affected by the coronavirus, or who are at high risk of serious illness if they contract the virus. Housing options include private hotels, congregate sites, trailers and recreational vehicles (RV). Many sites have on-site medical and behavioral health staff as needed for guests.</p>	<p><b>Alternative Housing for People Experiencing Homelessness (units)</b></p>	<p><b>Active Capacity</b> 3,003 <b>Occupied</b> 2,503 (83%)**</p>
		<p><b>Alternative Housing Health Care Workers (units)</b></p>	<p><b>Active Capacity</b> 380 <b>Occupied</b> 355 (93%)**</p>
		<p>*As of July 28<sup>th</sup>, 2020</p>	
		<p>**As of August 3, 2020</p>	

# **FISCAL YEAR 19/20**

# **BY THE NUMBERS**

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BUDGET

In FY 19-20, SFDPH's budget was \$2,427,029,042 which was an increase of \$57,130,814 from the FY 18-19 budget. The General Fund subsidy from the City and County was \$730,831,980 which represents 30% of the total budget.

**\$28 million** to add and extend funding for approximately 200 behavioral health beds treatment and recovery beds, including one-time startup costs.

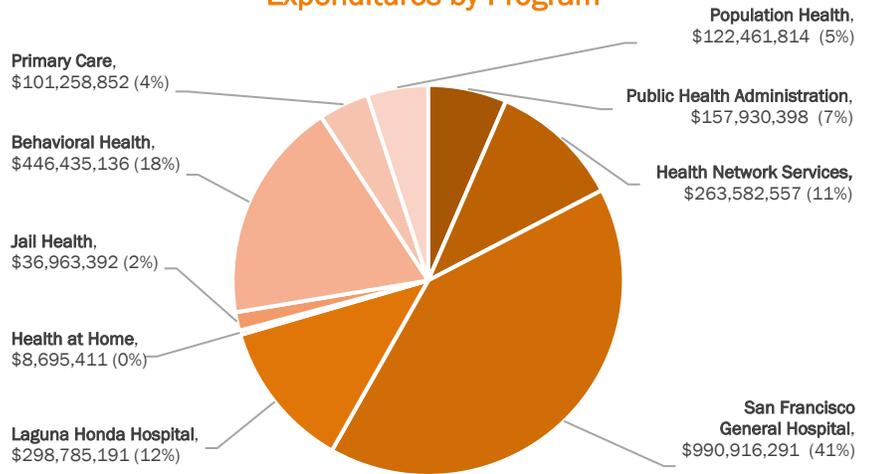
**\$600,000** to establish a new Office of Health Equity to address inequities in the community reflected in disparities in health outcomes for our patients, as well as inequities in our departmental culture and workforce.

**\$1.5 million** to converted 130 positions to "schegistrars" to support the reorganization of our workforce to reflect the workflow in Epic, improve patient satisfaction and create standard work throughout the department.

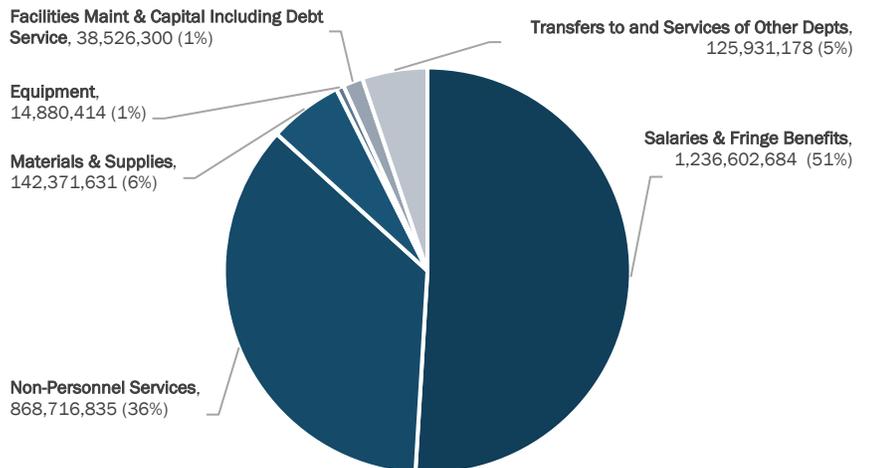
**\$5 million** to fund the multi-year project to replace Environmental Health's permit tracking system

**\$4.7 million** in salary adjustments to adequately reflect the costs of staffing at Zuckerberg San Francisco General and Laguna Honda Hospital

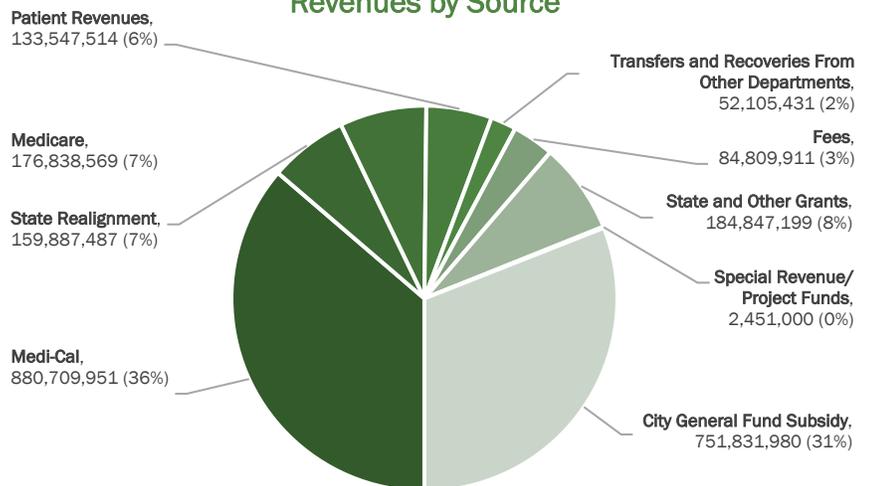
Expenditures by Program



Expenditures by Type



Revenues by Source



## 24 FISCAL YEAR 19/20 BY THE NUMBERS

### SF HEALTH NETWORK

San Francisco Health Network provides a wide array of services across its continuum of care. San Francisco Health Network's direct service providers consist of Zuckerberg SF General (ZSFG), which includes the Behavioral Health Center (BHC); Laguna Honda Hospital (LHH); Primary Care (PC); Health at Home (HAH); and Jail Health Services. Major service components include primary care, specialty care, acute care, home health care, long-term care, and emergency care.

### SF HEALTH NETWORK PATIENT ENCOUNTERS\*

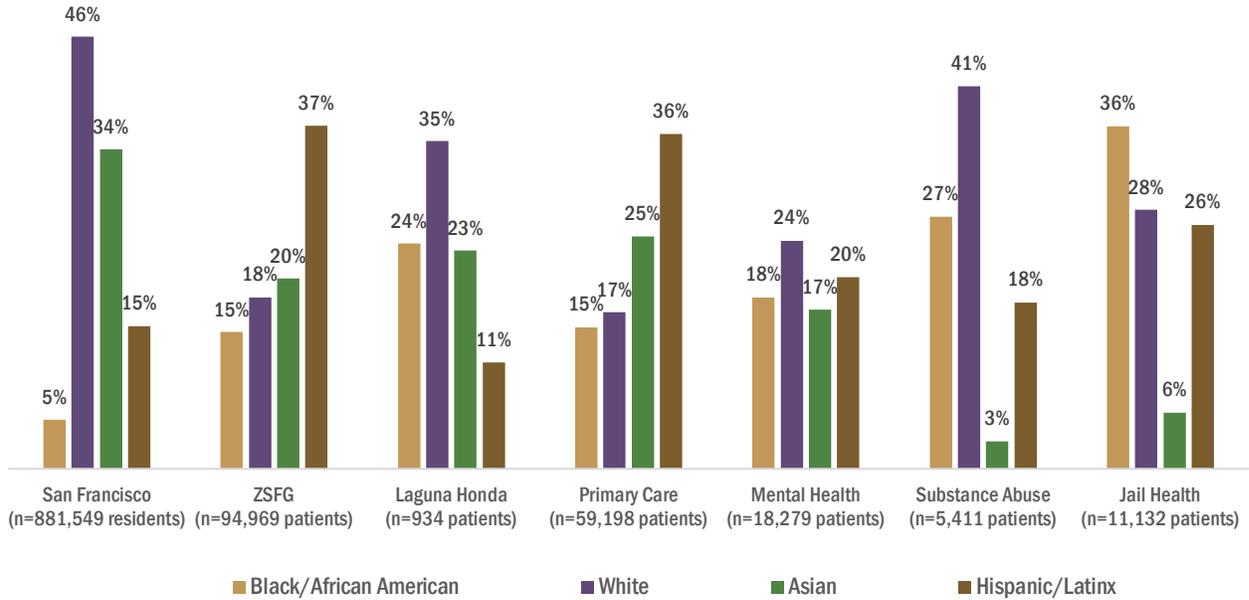
Visit Type	FY17-18 % or Number of Visits	FY18-19 % or Number of Visits	FY19-20 % or Number of Visits#
Primary Care	339,433	310,280	256,963
Specialty Care	219,999	213,226	170,594
Urgent Care	30,576	33,667	34,809
Dental Care	12,601	10,950	9,295
Encounters Requiring Trauma Center Services Activations	3,638	3,134	2,557
Diagnostic and Ancillary	135,070	129,447	169,910^
Home Health Care Visits	19,912	18,870	16,220
<b>Total Emergency Encounters</b>	<b>83,249</b>	<b>84,957</b>	<b>74,833</b>
Medical Encounters	76,130	77,795	68,783
Percent Admitted	16%	16%	16%
Psychiatric Encounters	7,118	7,164	6,050
Percent Admitted	17%	17%	17%
			<b>74,833</b>
<b>Total Acute Inpatient Days</b>	<b>86,349</b>	<b>89,179</b>	<b>81,645</b>
Actual Days at SFGH	85,504	88,747	81,027
Actual Days at LHH	845	432	618
<b>Total Skilled Nursing Care</b>	<b>285,068</b>	<b>284,902</b>	<b>280,233</b>
Actual Days at ZSFG	10,550	10,449	10,769
Actual Days at BHC	15,605	15,657	12,930
Actual Days at LHH	274,518	274,453	256,534

\* Table does not include specialty behavioral health services. Refer to page 27 for this data.

# Patient volumes for many services decreased between FY 2018 and 2019 due to the COVID-19 shelter-in place related health orders.

^ Due to changes with the electronic health record system this year, the Diagnostic and Other Services data capture process has changed, and this year's numbers cannot be directly compared to that of previous years.

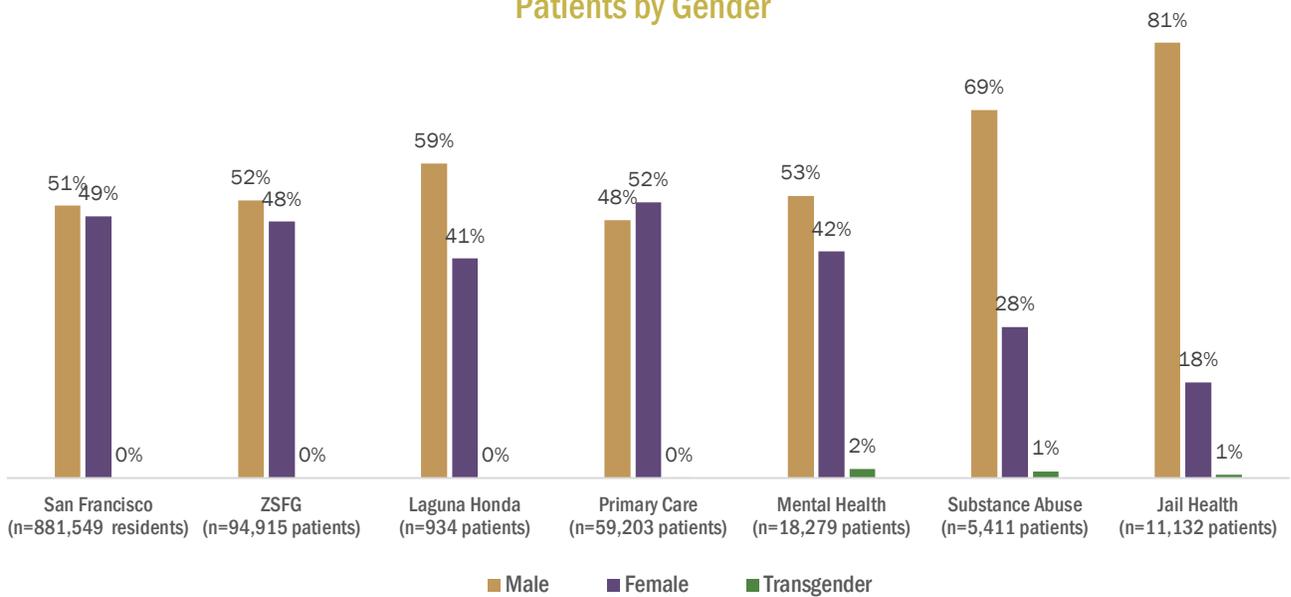
Patients by Race/Ethnicity



\*Data not shown: Native Americans and Pacific Islanders comprise approximately 1% the population served in all health systems above. Race/ethnicity data is unknown for 0-16% of patients served.

\*\*San Francisco data based on 5-year 2019 American Community Survey (ACS)

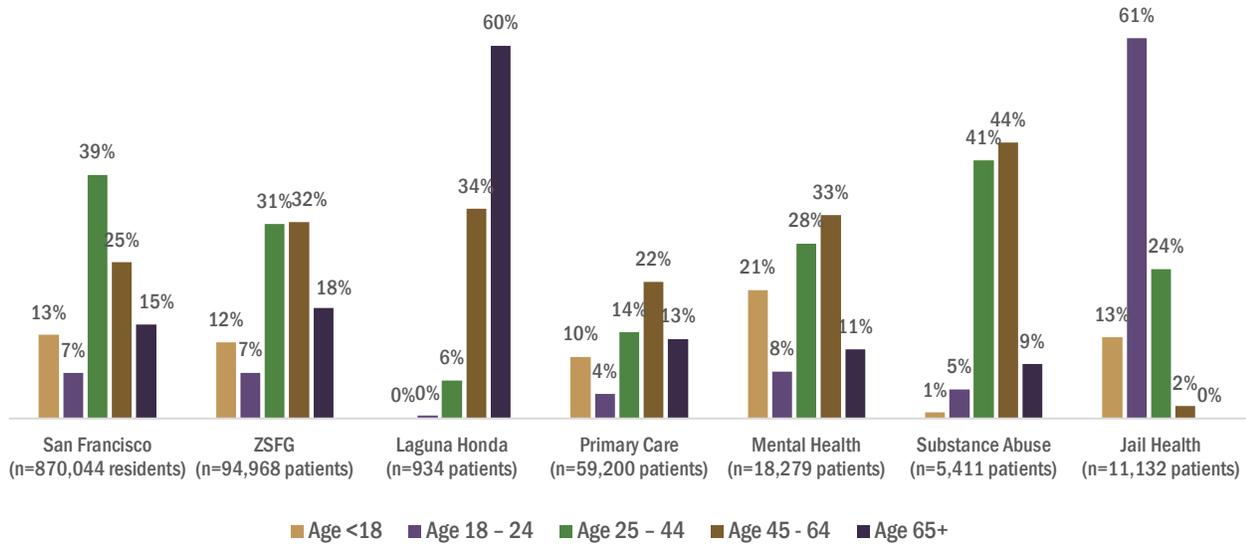
Patients by Gender



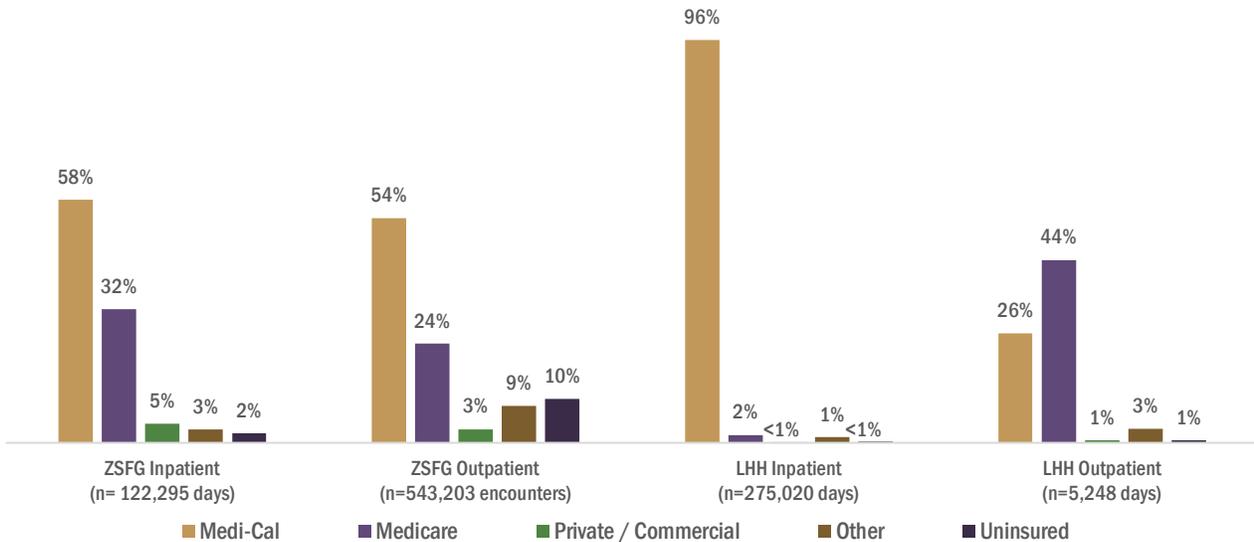
\* American Community Survey (ACS) data does not include estimates of individuals identifying as transgender.

\*\* Data on individuals who identify as Transgender only available for Jail Health and Behavioral Health Services patients.

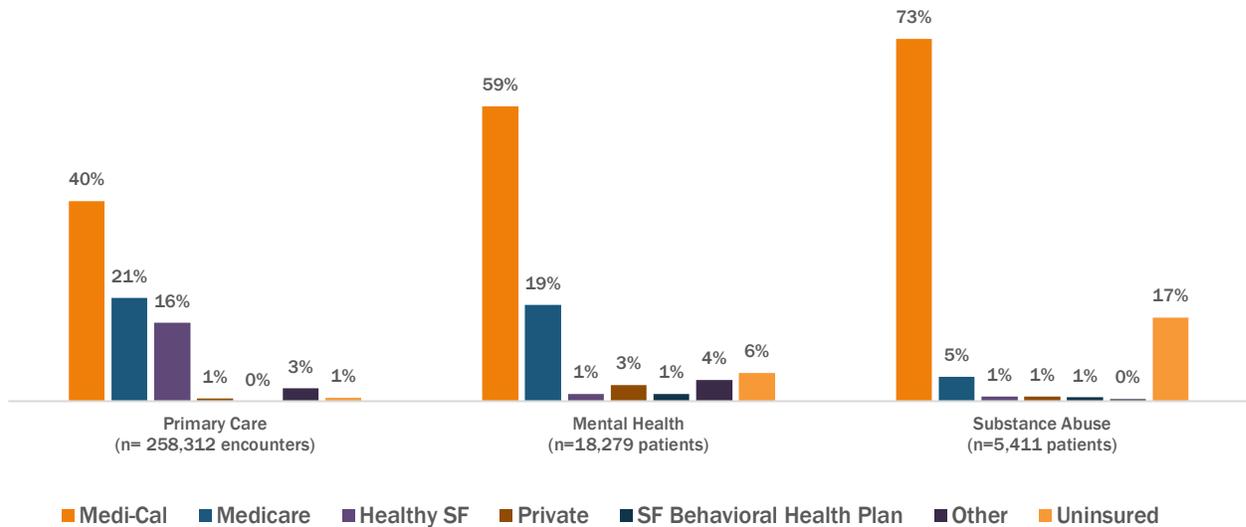
### Patients by Age



### Hospital Payer Source



### Primary Care & Behavioral Health Payer Source



Behavioral Health Services relies on a network of civil service and contracted providers to offer high-quality services to mental health and substance abuse clients. The tables below indicate the number of mental health and substance abuse clients served by contractors vs. civil service providers in FY 19/20.

#### CBHS Mental Health Clients Served

Provider	Unduplicated Client Count*
Contract Providers	11,227
Civil Service Providers (Incl. SFGH)	15,596
<b>TOTAL</b>	<b>26,823</b>

\* Clients can be seen in both Civil Service and Contract programs in the course of a year.

#### CBHS Substance Abuse Clients Served

Provider	Unduplicated Client Count
Contract Providers	5,411
Civil Service Providers*	NA

\*There are no Civil Service Substance Abuse programs in Behavioral Health Services.

## 28 FISCAL YEAR 19/20 BY THE NUMBERS

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### HEALTH COMMISSION RESOLUTIONS

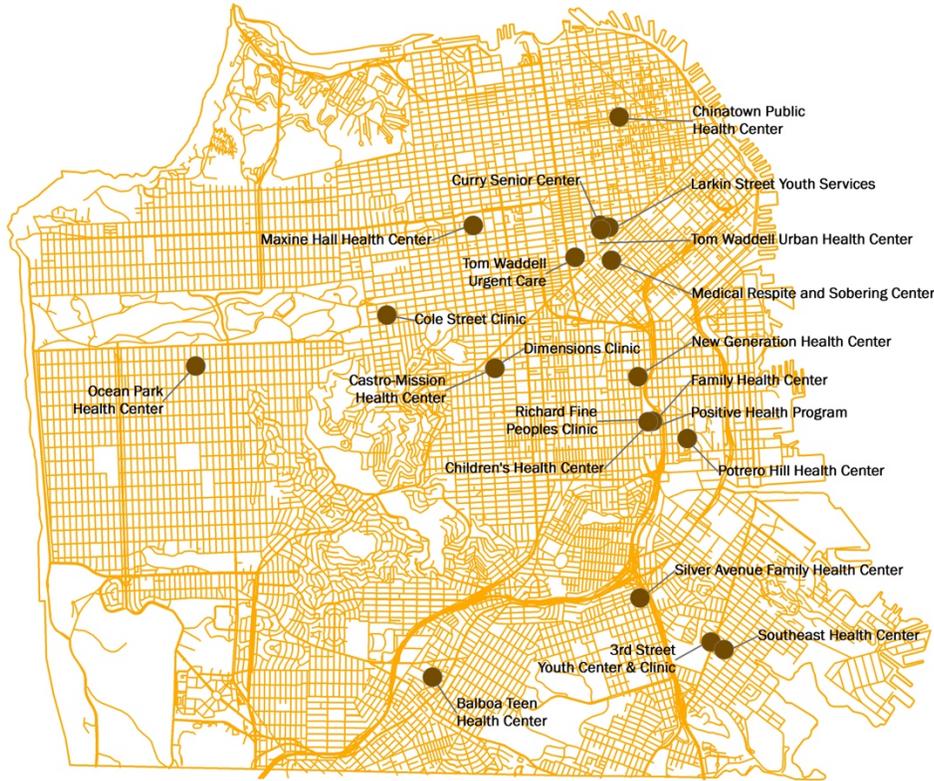
#### 2019

- 19-11 Determining that the Closure of St. Mary's Spine Center Will Not Have a Detrimental Impact on Health Care Services in the Community
- 19-12 Determining that the Closure of the Cardiovascular Surgery Program at St. Mary's Medical Center Will Have a Detrimental Impact on Health Care Services in the Community
- 19-13 Honoring Alice Chen

#### 2020

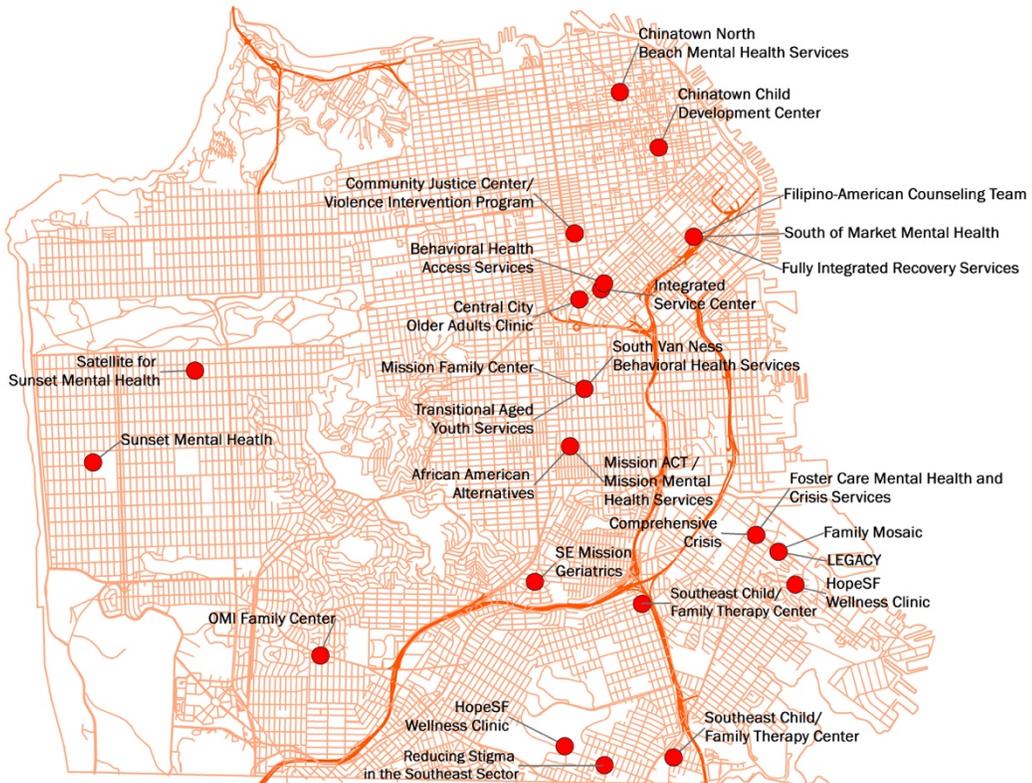
- 20-1 Honoring Winona Mindolovich
- 20-2 Approving the DPH 2020 State and Federal Legislative Plans
- 20-3 Honoring Health Commissioner James "Jimmy" Loyce for His Many Contributions to the San Francisco Department of Public Health
- 20-4 Resolution Authorizing the DPH to Recommend to the BOS to Accept and Expend a Gift of \$79,453 to the Laguna Honda Gift Fund from the Friends of Laguna Honda
- 20-5 Honoring the San Francisco Department of Public Health for Its Ongoing Response to the COVID-19 Health Crisis
- 20-6 Resolution Authorizing the DPH to Recommend to the BOS to Accept and Expend a Gift of \$79,453 to the Laguna Honda Gift Fund from the Friends of Laguna Honda
- 20-7 Honoring Stephanie Cushing, MSPH, CHMM, REHS

PRIMARY CARE SERVICES SITES



\* Castro Mission Health Center temporarily relocated to ZSFG in July 2019, and will be at that location for the next 12-18 months

BEHAVIORAL HEALTH SERVICES SITES



**Community Based Organizations (non-profits):**

- 18 Reasons
- A Better Way, Inc.
- AGUILAS, Inc.
- AIDS2020
- AIDS Legal Referral Panel
- Alternative Family Services
- APA Family Support Services
- BAART Community Health Care
- Baker Places
- Bayview Hunters Point Foundation for Community Improvement
- Catholic Charities
- Center on Juvenile and Criminal Justice
- Central American Resource Center
- Central City Hospitality House
- Children's Council of San Francisco
- Community Forward SF (formerly Community Awareness and Treatment Services) (CATS)
- Community Housing Partnership
- Community Music Center San Francisco
- Community Youth Center of San Francisco
- Conard House
- Curry Senior Center
- Dignity Health-Saint Francis Memorial Hospital
- Dignity Health-St. Mary's Medical Center
- Dignity Health-St. Mary's Medical Center-McAuley Adolescent Psychiatric Unit
- Dolores Street Community Services
- East Bay Agency for Children
- Edgewood Center for Children and Families
- Eldergivers
- Epiphany Center/Mount St. Joseph-St. Elizabeth
- Episcopal Community Services of San Francisco
- Family Service Agency of San Francisco
- Friendship House Association of American Indians of San Francisco
- FUSE Corps
- Glide Foundation, Board of Trustees of the
- Harm Reduction Coalition
- Harm Reduction Therapy Center
- HealthRIGHT 360
- Hearing and Speech Center of Northern California
- Heluna Health
- Homeless Children's Network
- Horizons Unlimited of San Francisco
- Huckleberry Youth Programs
- Hyde Street Community Services
- Instituto Familiar de la Raza
- Jamestown Community Center
- Japanese Community Youth Center
- Jewish Family and Children's Services
- Justice and Diversity Center of the Bar
- Larkin Street Youth Services
- Latino Commission
- Lavender Youth Recreation and Information Center (LYRIC)
- Learning for Action
- Livable City
- Lutheran Social Services
- Maitri
- Marin City Health and Wellness Center
- Medical Clown Project
- Mental Health Association San Francisco
- Mission Council on Alcohol Abuse
- Mission Neighborhood Health Center
- National Alliance on Mental Illness (NAMI) San Francisco
- Native American Health Center
- NICOS Chinese Health Coalition
- North East Medical Services (NEMS)
- Oakes Children's Center, Inc.
- Positive Resource Center
- Progress Foundation
- Project Open Hand
- Public Health Institute
- Race Forward
- Rafiki Coalition

**Community Based Organizations (non-profits)-  
Continued:**

- Richmond Area Multi-Services (RAMS)
- Safe and Sound (formerly San Francisco Child Abuse Prevention Center)
- Salvation Army
- Samuel Merritt University
- San Francisco AIDS Foundation
- San Francisco Community Clinic Consortium
- San Francisco Community Health Authority
- San Francisco Community Health Center (formerly Asian and Pacific Islander Wellness Center)
- San Francisco Food Bank
- San Francisco LGBT Center
- San Francisco Mental Health Education Funds
- San Francisco Public Health Foundation
- San Francisco Study Center
- San Francisco Suicide Prevention
- Seneca Center
- Shanti Project
- Southeast Asian Development Center
- Special Service for Groups, Inc.
- St. Anthony's Medical Clinic
- St. James Infirmary
- Swords to Plowshares
- Tenderloin Neighborhood Development Corp
- Tides

- Unity Care
- Victor Treatment Centers
- Vision Academy
- WestCoast Children's Clinic
- Westside Community Mental Health Center
- Yale University
- YMCA
- YMCA Urban Services
- Youth Leadership Institute

**Public Agencies:**

- City College of San Francisco
- San Francisco Unified School District
- Alameda County Behavioral Health Care Services
- Marin County Community Health and Prevention Services
- San Mateo County Health Services Agency
- Santa Cruz County
- Sonoma County
- San Francisco State University
- San Francisco Unified School District
- Superior Court of California-County of San Francisco
- University of California, Los Angeles
- University of California, San Diego
- University of California, San Francisco
- University of the Pacific School of Dentistry

## 32 ADDITIONAL RESOURCES

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To learn more about SFDPH efforts to protect and promote the health of all San Franciscans, please explore the following resources:

### DEPARTMENT OF PUBLIC HEALTH

- **SF Health Commission:** Read more about the SF Health Commission, the governing and policy-making body of the SFDPH. <https://www.sfdph.org/dph/comupg/aboutdph/hc/default.asp>
- **SFDPH Webpage:** Learn more about SFDPH services and programs and link to additional SFDPH reports – including past Annual Reports. [www.sfdph.org](http://www.sfdph.org)
- **SF Health Network:** Learn more about the SF Health Network, the city’s only complete care system. [www.sfhealthnetwork.org](http://www.sfhealthnetwork.org)
- **Zuckerberg SF General (ZSFG) Annual Report:** Learn more detailed information about ZSFG’s services, accomplishments, and operations over the last fiscal year. <https://www.sfdph.org/dph/comupg/oservices/medSvs/SFGH/SFGHAnnualReports.asp>
- **Laguna Honda Hospital (LHH) Annual Report:** Learn more detailed information about LHH’s services, accomplishments, and operations over the last fiscal year. <http://www.lagunahonda.org>

### CITY AND COUNTY OF SAN FRANCISCO COVID-19 RESPONSE

- **SFDPH COVID-19 Response:** Find out more information about SFDPH’s response to COVID-19, including all Health Orders and Directives: [www.sfdph.org/dph/alerts/coronavirus.asp](http://www.sfdph.org/dph/alerts/coronavirus.asp)
- **COVID-19 Indicators and Data Tracker:** San Francisco’s response to the coronavirus emergency is grounded in data, science and facts. View the SF COVID-19 Indicators at [datasf.org/healthindicators](http://datasf.org/healthindicators) and learn more at the San Francisco COVID-19 Data Tracker at [datasf.org/covid19](http://datasf.org/covid19)
- **SF GOV:** Find more information about the Citywide response to COVID-19 at [sf.gov/coronavirus](http://sf.gov/coronavirus) or call 311 and stay informed with the facts at [cdc.gov](http://cdc.gov).

### FOUNDATIONS

- **San Francisco Public Health Foundation:** Read about the San Francisco Public Health Foundation, a non-profit that strives to provide resources to San Francisco’s public health community, facilitating the provision of high quality and cost-effective health care services. <http://sfphf.org>
- **SF General Foundation:** Find out more about the SF General (SFGH) Foundation, a not-for-profit corporation that provides fundraising support to ZSFG. [www.sfghf.org](http://www.sfghf.org)
- **Friends of Laguna Honda:** Learn more about Friends of Laguna Honda, a non-profit organization founded in 1956, dedicated to enhancing the quality of life for the residents at Laguna Honda Hospital and Rehabilitation Center by funding non-medical programs and services that would otherwise be unavailable. [www.friendsoflagunahonda.org](http://www.friendsoflagunahonda.org)

### ACCESS TO COVERAGE AND CARE

- **Healthy San Francisco:** Learn about the Healthy San Francisco program, including information on eligibility and enrollment. [www.healthysanfrancisco.org](http://www.healthysanfrancisco.org)
- **Get Covered San Francisco!** Learn more about health care options under the Affordable Care Act. [www.sfgov.org/healthreform](http://www.sfgov.org/healthreform)

### COMMUNITY ORGANIZATIONS

- **San Francisco Health Improvement Partnerships (SFHIP):** Learn more about SFHIP, a dynamic portal to the community’s priority health issues and associated community resources. [www.sfhip.org](http://www.sfhip.org)



Report can be found online at [www.SFDPH.org](http://www.SFDPH.org)  
(415) 554-2500

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