

Dan Bernal
President
Laurie Green, M.D.
Vice President
Edward A. Chow, M.D.
Commissioner
Susan Belinda Christian, J.D.
Commissioner
Cecilia Chung
Commissioner
Suzanne Giraudo ED.D
Commissioner
Tessie M. Guillermo
Commissioner

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

London N. Breed Mayor
Department of Public Health



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

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MINUTES
HEALTH COMMISSION MEETING
Tuesday, October 5, 2021 4:00 p.m.
Remote Meeting via Webex Event

1) CALL TO ORDER

Present: Commissioner Dan Bernal President
Commissioner Laurie Green, MD, Vice President
Commissioner Edward A. Chow M.D.
Commissioner Cecilia Chung
Commissioner Susan Belinda Christian, J.D. (*Arrived at 4:12pm*)
Commissioner Suzanne Giraudo, Ph.D
Commissioner Tessie Guillermo

The meeting was called to order at 4:00 pm.

2) DPH EMPLOYEE RECOGNITION AWARDS

The following DPH teams were recognized by the Health Commission for their dedication and impactful contributions to the health and well being of all San Franciscans.

Environmental Health Branch Single Resident Occupancy Hotel Housing Inspectors

- Kevin Eng
- Olga Granado
- Amy Johnson
- Emma Coleman
- Stephan Scott
- Douglas Obana
- Allan Pere
- Julie Yang
- Andrea Leon
- Ivan Flores
- Corey Chrisman
- Eurich Santiago
- Joseph Ossai
- Rachel Cheng
- Timothy Louie
- Rochelle Veloso
- Tiffany Gonzalez-Ruiz
- Jesus Zapien
- Roberto Arevalo
- Mahanned Malhi
- Jennifer Kessler

Environmental Health Branch COVID-19 Health and Safety Team

- Jonathan Piakis
- June Weintraub
- Karen Yu
- Rachel Cheng
- Jennifer Callewaert
- Antoniette Flores
- Steven Scott
- Uzziel Prado
- Joanna Rivera
- Mina Mohmmadi

Environmental Health Branch Mobile Food Program Team

- Terry Hong
- John Castelli
- Mary Joanne Freitas

Environmental Health Branch After-Hours and Weekend Health Order Enforcement Team

- Jin Tang
- Seretha Brewer
- Janine Young
- Mary Freschet
- Uzziel Prado
- Mulenga Anderson
- Allan Pera
- Mohammed Malhi Cuevas
- Luz Brown
- Olga Granado
- Rawan Naser
- Kristine Der
- Kevin Eng
- Rochelle Veloso
- Joanna Huber
- Carolyn Lam
- Patrick Wood
- Sophia Huie
- Emma Coleman
- Timothy Louie
- Katherine Tuazon
- Kyle Chan
- Lauren Lwanga
- Christina Lam
- Patrick Wood
- Amy Johnson
- William Bajjalieh
- Japjit Deol
- Danny Nguyen
- Danny Lee
- Jesus Zapien
- Bill Puk
- Darryn Elder-Gotta
- Han Phan
- Ivan Flores
- Oneida Romero
- Abel Simon
- Farhan Khan
- Julie Yang
- Alvin Dang
- Jewel Ko
- Ryan Casey
- Humberto Quinonez
- Robert DeMarr

3) RESOLUTION MAKING FINDINGS TO ALLOW TELECONFERENCED MEETINGS UNDER CALIFORNIA GOVERNMENT CODE SECTION 54953(e)

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

4) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF SEPTEMBER 21, 2021.

Mr. Morewitz noted that minutes have been amended to indicate that Commissioner Guillermo was not present at the September 21, 2021 meeting.

Action Taken: The Health Commission unanimously approved the amended September 21, 2021 minutes.

5) DIRECTOR'S REPORT

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

City acquires two buildings for people with mental health and substance use disorders

Mayor London N. Breed and the San Francisco Department of Public Health (DPH) announced the acquisition of two buildings that will house people living with mental health and substance use disorders as part of the City's long-term plan to strengthen and expand access to behavioral health support. The two buildings, located on Florida Street in the Mission and Dore Street in the South of Market neighborhood, will be transformed into cooperative housing for twenty-six adults under the City's Cooperative Living for Mental Health (CLMH) Program.

The cooperative living model created under CLMH is a key part of San Francisco's work to provide housing and care for people with mental health and substance use disorders. Cooperative living allows people with mental health and substance use disorders to live in community with access to care, services, and treatment in spaces operated by local behavioral health service providers. The model can also assist in progress to independent living. Purchasing cooperative living buildings shields these spaces from market volatility, protecting clients and allowing the City's community-based organization partners to continue to offer much needed affordable housing.

In addition to these purchases that ensure the long-term affordability of existing beds, San Francisco is adding 400 new treatment beds for people experiencing mental health and substance use challenges. This represents a 20% increase in the City's residential treatment capacity. In 2021 alone, San Francisco will see 140 new beds opened, including the following:

- The 20-bed SOMA RISE Center, which will open this winter as part of the City's response to the drug overdose crisis. It will offer a safe indoor space for people who have used methamphetamine or other substances, monitor their health while intoxicated, and connecting them with other health and social services.
- A 10-bed residential treatment facility specifically designed to treat young adults with serious mental health and/or substance use disorders is under design.
- Neighborhood-based psychiatric respite facilities for people experiencing homelessness to shelter in a safe, supportive environment where they can also access ongoing care.

Nonprofit supportive housing and behavioral health care provider Conard House will own and operate the two CLMH properties on Florida and Dore Streets in partnership with DPH. Established in 1960 with the first transitional housing program in San Francisco, Conard House operates and provides social services at nine residential hotels and 19 private apartments across San Francisco, inclusive of the Florida and Dore Street locations.

1140-1142 Florida Street is located in the Mission District and will house eight adults in separate bedrooms, with access to shared kitchens, bathrooms, and a large backyard. 139-145 Dore Street in San Francisco's South of Market (SoMa) neighborhood, will consist of six 3-bedroom apartments that will accommodate 18 adults. In both locations, residents will have individual bedrooms but will share common spaces. Conard House will provide services and case management to residents to ensure success living in their new homes.

The acquisitions and most rehabilitations planned for each site were financed by the San Francisco Housing Accelerator Fund (HAF). The Mayor's Office of Housing and Community Development expects to provide HAF with permanent financing for the buildings in 2022 following the completion of repair improvements and upgrades.

For the latest update on San Francisco's residential care and treatment expansion, go to:
www.sf.gov/residential-care-and-treatment

San Francisco to open COVID-19 testing site for SFUSD students and staff

Mayor London N. Breed, DPH, and the San Francisco Recreation and Park Department will launch a new COVID-19 testing site in a parking lot near the Crocker Amazon sports complex, located at 799 Moscow Street and Geneva Street, in partnership with the San Francisco Unified School District (SFUSD).

With a capacity to administer 150 tests per day to SFUSD students and staff, the Crocker Amazon testing site will open on Tuesday, October 5, with operating hours of 8 a.m. to 12 p.m. on Tuesdays and Fridays. Walk-ups are encouraged, appointments are not required, and test results will be available within 24 to 48 hours. The SFUSD testing site is located near the club house and can be accessed from Moscow Street.

The site will exclusively serve SFUSD students and staff who are experiencing COVID-19 symptoms or are considered a close contact of someone who has a positive COVID test. SFUSD is contracting with Color Health, and the City and County of San Francisco is providing the Crocker Amazon sports complex site. A dedicated community testing site for the school district supports the need for schools to remain safely open with minimal disruptions while following DPH guidance. In addition, SFUSD students and staff have access to [free school-based COVID testing](#) through mobile sites across the City.

Earlier this month, the City and SFUSD opened vaccination sites at four schools in the district to make it convenient for anyone eligible in the school community to get vaccinated. Those vaccination sites will be able to expand to accommodate children ages 5-11 once they become eligible, possibly this fall.

SFUSD has partnered with Color Health to conduct the COVID tests to comply with DPH schools guidance, and San Francisco Recreation and Parks is providing the location.

To date, DPH data demonstrates schools remain safe settings for children and staff under COVID safety protocols. Cases among San Francisco residents under age 18 have remained low and stable throughout the pandemic.

SF health care providers prepare to deliver COVID-19 vaccines to children under 12 and booster doses

As health institutions serving the people who live, work, and seek services in San Francisco, DPH is proud of our collective accomplishments in response to the COVID-19 pandemic. In partnership with the communities that we serve, together we followed the science and have attained one of the highest vaccination rates in the world – with 83% of the eligible population fully vaccinated in San Francisco.

We have also responded effectively to emerging challenges like the rise of the Delta variant this summer and helped improve the health outcomes for our population by addressing health needs, continuing to vaccinate, and providing other essential services that have helped slow the spread of the disease and reduced hospitalizations.

As the Food and Drug Administration (FDA) has announced authorization of Pfizer booster doses for individuals 65 years and older and other high-risk groups and evaluates expanded eligibility of vaccines for children ages 5-11, we are preparing for the next stage in our vaccination efforts this fall based on these recommendations.

Upon further federal and state approvals, DPH will be prepared with a collaborative approach from the City's robust network of nearly 100 vaccination sites – from doctor's offices to clinics, pharmacies, and more. Many of these sites were thoughtfully established this year to enable a large proportion of San Franciscans to access a vaccination site within a 10 to 15-minute walk. A number of high-volume sites across the City, including those at all major health systems, have the capacity to administer 200 to 300 doses per day. These also include four

school-based sites that can expand to as many as 250 vaccines a day to support the school community as needed.

DPH anticipates a capacity to administer 25,000 vaccine doses per week across these sites to collectively meet demand from eligible children, adults seeking first-time vaccination, and third-dose boosters for those who qualify. We must underscore that our highest priority will be to ensure access to first and second doses for all members of our community, including children ages 5-11 when they become eligible.

For those who have already received the primary dose series, the COVID-19 vaccine continues to be highly effective in reducing risk of severe disease, hospitalization, and death. As anticipated federal and state recommendations begin allowing additional groups of people to receive booster doses, such as those who are 65 and older and potential high-risk groups, eligible individuals can work in their booster doses as time and availability allow over the course of several weeks.

Once the appropriate state and federal approvals are issued and individuals are eligible, we encourage people to make appointments for boosters and vaccinations at their health care homes. They may also receive vaccines at local pharmacies. This could also be an opportunity to receive wellness checks that may have been put on hold during the pandemic, or for other vaccination updates such as the annual flu vaccine.

To ensure access for the most highly impacted and vulnerable communities, DPH has numerous health access points within the San Francisco Health Network and Zuckerberg San Francisco General Hospital that should be reserved for highly impacted and vulnerable communities.

We look forward to continuing to serve the health needs of our communities and will provide further updates about the recommendations and how eligible individuals can receive their vaccines or booster doses when they are available.

CA becomes first state to announce plans to require student COVID vaccinations

After implementing first-in-the-nation school masking and staff vaccination measures, California is the first state to announce plans to require student vaccinations—adding the COVID-19 vaccine to list of vaccinations required for school, such as the vaccines for measles, mumps, and rubella.

In order to further protect students and staff and continue supporting a safe return to in-person instruction for all students, Governor Gavin Newsom directed the California Department of Public Health (CDPH) to follow the procedures established by the Legislature to add the COVID-19 vaccine to other vaccinations required for in-person school attendance pursuant to the Health and Safety Code. COVID-19 vaccine requirements will be phased-in by grade span, which will also promote smoother implementation.

Following existing statute, full approval of ages 12+ corresponds to grades 7-12, and full approval of ages 5-11 corresponds to grades K-6. COVID-19 vaccine requirements will be phased in by grade span, either grades K-6 and 7-12. Students who are under the age of full approval, but within the grade span, will be required to be vaccinated once they reach the age of full approval (with a reasonable period of time to receive both doses), consistent with existing procedures for other vaccines. The requirement will take effect at the start of the term following full approval of that grade span, to be defined as January 1st or July 1st, whichever comes first. Based on current information, the requirement is expected to apply to grades 7-12 starting on July 1, 2022. This will apply to all public, private, parochial and charter schools.

The Governor has also directed that adults be held to at least the same standards as students for the COVID-19 vaccine. All staff will be required to be vaccinated no later than when the requirement takes effect for students. The current verify-or-test requirement for staff will be converted to a vaccine mandate no later than when the first phase of the student requirement becomes effective.

Environmental Health's June Weintraub nominated to EPA Advisory Board

June Weintraub, ScD, Water Quality Program Manager of DPH's Environmental Health Branch, was nominated to serve as the Chair of the Environmental Protection Agency's (EPA's) National and Governmental Science Advisory Board Drinking Water Committee. One of June's roles will be overseeing the review of the current Contaminant Candidate List (CCL). The CCL is a list of water contaminants that are currently not subject to any proposed national drinking water regulations but are known to occur in public water systems. The Committee's work will help determine if these CCLs should be regulated under the Safe Drinking Water Act. This is a well-deserved honor, and it is great to see June's skills being applied on a national level.

SFDPH in the News

Commissioner Comments:

Commissioner Bernal thanked Director Colfax for the report.

6) COVID-19 UPDATE

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

Commissioner Comments:

Commissioner Bernal noted that the reproductive rate with the Delta variant was higher than other periods of the pandemic. Director Colfax stated that the Delta variant is much more infectious than other known variants of COVID-19. He also noted that as the Delta variant was spreading, society was reopening, which gave easier pathways for transmission. He added that vaccines prevent more COVID-19 deaths and hospitalizations.

Commissioner Girardo asked if there is data available comparing vaccinated and unvaccinated individuals who were hospitalized due to COVID-19. Director Colfax stated that the rate of hospitalizations for unvaccinated individuals is 8 times higher than those who are vaccinated.

7) GENERAL PUBLIC COMMENT

There was no general public comment.

8) TO ESTABLISH A SAN FRANCISCO HEALTH CARE FOR THE HOMELESS ("HCH") CO-APPLICANT BOARD ("CAB") COMPRISED OF 11 VOTING MEMBERS REPRESENTATIVE OF PATIENTS SERVED AND INTERESTED COMMUNITY MEMBERS, TO PROVIDE OVERSIGHT OF THE HCH PROGRAM IN ACCORDANCE WITH THE CITY CHARTER, MUNICIPAL CODE AND THE FEDERAL LAWS AND REQUIREMENTS GOVERNING THE HCH PROGRAM, AS MORE SPECIFICALLY SET FORTH IN THE CAB AGREEMENT AND CAB BYLAWS, ACCOMPANYING THIS AGENDA ITEM

Hali Hammer, MD, Director of Ambulatory Care, Bill Blum, Director of Programs, Primary Care, Beth Neary, Health Care for the Homeless Program Director, presented the item.

Commissioner Comments:

Commissioner Chow stated that he assumes, if approved, the co-applicant board (CAB) would submit budget recommendations to the DPH and the Health Commission would have final departmental budget oversight and approval. Greg Wagner, DPH COO, stated that the underlying authority for the DPH budget lies in the City Charter, which states that the DPH goes through the Health Commission, Mayor, and Board of Supervisors. The CAB will make budget recommendations to the DPH.

Commissioner Christian asked for clarification regarding the structure and authority of the CAB in relation to the Health Commission's oversight duties per the City Charter authority. Dr. Hammer stated that the CAB makes recommendations; the Health Commission retains its authority as the governing body to oversee and monitor the DPH budget.

Commissioner Christian asked if there were a situation in which the Health Commission felt that something had gone awry in this area, how would the Commission be able to address the issue. Ms. Neary stated that the Health Commission has authority to dissolve the CAB; the Director of Health may also dissolve the cooperative agreement that creates the CAB.

Commissioner Christian noted that there can be many points of view of policies related to health problems. Under the CAB framework, the Director of Health has no authority to impact who the CAB members are because the CAB chooses its own members. This seems to be at odds with the Health Commission requirement under the Charter to provide oversight of DPH activities. Mr. Wagner stated that the CAB framework does not give permission to the CAB regarding budgetary authority or appointing or managing staff.

Commissioner Christian stated that she is glad to understand that the CAB is an advisory board. This helps to clarify the role of the Health Commission to oversee the DPH; the Director of Health has responsibility to administer the activities of the department. She added that it will be important for the CAB to represent the history and knowledge of community members who have valuable and relevant lived experience.

Commissioner Chung stated that she is appreciative that HRSA allows the most impacted populations to be involved in the process but allows the DPH to govern its operations. Dr. Hammer noted that the DPH has already created community advisory board at each health center which give input on operational issues; the DPH can bring this experience to the CAB.

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

9) DPH HUMAN RESOURCE UPDATE

Luenna Kim, Chief Human Resources Officer, presented the item.

Commissioner Comments:

Commissioner Chung thanked Ms. Kim for presentation and her impactful work during the few months of her tenure.

Commissioner Green noted that as a member of the LHH and ZSFG Joint Conference Committees, she has observed that hiring times and shortages of applicants is an issue. She encouraged the DPH to do all it can to make its staff feel valued and heard as it evolves the Human Resource Department. Ms. Kim stated that the Human Resources Department is working closely with unions to answer vaccination mandates and build effective communication bridges.

Commissioner Chow noted that in his long tenure on the Health Commission, he has witnessed the DPH Human Resource Department going beyond hiring and now focuses on retention too. He encouraged caution in expectations regarding vast improvements in the hiring process timeline because the City bureaucracy is limited in its ability to expedite these processes on a permanent basis. He noted that hiring during the first period of the COVID-19 epidemic was rapid, but it has once again slowed. He requested that the Commission be updated as new changes are made in the hiring process timeline.

Commissioner Bernal thanked Ms. Kim for her innovation and dedication.

Director Colfax noted that Ms. Kim is relatively new to the DPH and in her short tenure, has already brought the use of best practices and data to manage the department to better outcomes.

10) FINANCE AND PLANNING COMMITTEE UPDATE

Commissioner Chung stated that the Committee reviewed all the items on the Consent Calendar and recommended that the full Commission approve all the items. She also stated that Dr. Ayanna Bennett, MD, Director of the DPH Office of Health Equity, DPH staff, and representatives from Glide Foundation presented a pilot of the draft DPH Health Equity Impact Assessment with Glide Foundation contract.

11) CONSENT CALENDAR

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

- **OCTOBER 2021 CONTRACTS REPORT**
- **REQUEST FOR APPROVAL OF A NEW CONTRACT WITH CROSS COUNTRY HEALTHCARE IN THE AMOUNT OF \$7,056,000, INCLUDING A 12% CONTINGENCY, FOR TEMPORARY TRAVELING CERTIFIED NURSING ASSISTANT AND PATIENT CARE ASSISTANT REGISTRY PERSONNEL IN SUPPORT OF THE DEPARTMENT'S COVID-19 RESPONSE AND FOR ONGOING OPERATIONAL NEEDS IN THE SAN FRANCISCO HEALTH NETWORK, ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL & TRAUMA CENTER (ZSFG), LAGUNA HONDA HOSPITAL (LHH) AND OTHER SAN FRANCISCO HEALTH NETWORK FACILITIES, FOR THE TERM OF OCTOBER 1, 2021 THROUGH JUNE 30, 2023 (21 MONTHS).**
- **REQUEST FOR APPROVAL OF A NEW CONTRACT WITH MAXIM HEALTHCARE STAFFING SERVICES, INC IN THE AMOUNT OF \$3,248,000, INCLUDING A 12% CONTINGENCY, FOR TEMPORARY TRAVELING CERTIFIED NURSING ASSISTANT AND PATIENT CARE ASSISTANT REGISTRY PERSONNEL IN SUPPORT OF THE DEPARTMENT'S COVID-19 RESPONSE AND FOR ONGOING OPERATIONAL NEEDS IN THE SAN FRANCISCO HEALTH NETWORK, ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL & TRAUMA CENTER (ZSFG), LAGUNA HONDA HOSPITAL (LHH) AND OTHER SAN FRANCISCO HEALTH NETWORK FACILITIES, FOR THE TERM OF OCTOBER 1, 2021 THROUGH JUNE 30, 2023 (21 MONTHS).**
- **REQUEST FOR APPROVAL OF A NEW CONTRACT WITH SUPPLEMENTAL HEALTH CARE SERVICES, INC IN THE AMOUNT OF \$3,248,000, INCLUDING A 12% CONTINGENCY, FOR TEMPORARY TRAVELING CERTIFIED NURSING ASSISTANT AND PATIENT CARE ASSISTANT REGISTRY PERSONNEL IN SUPPORT OF THE DEPARTMENT'S COVID-19 RESPONSE AND FOR ONGOING OPERATIONAL NEEDS IN THE SAN FRANCISCO HEALTH NETWORK, ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL & TRAUMA CENTER (ZSFG), LAGUNA HONDA HOSPITAL (LHH) AND OTHER SAN FRANCISCO HEALTH NETWORK FACILITIES, FOR THE TERM OF OCTOBER 1, 2021 THROUGH JUNE 30, 2023 (21 MONTHS).**
- **REQUEST FOR APPROVAL OF AN AMENDMENT WITH REGENTS OF THE UNIVERSITY OF CALIFORNIA/SF TO PROVIDE THE CITY AND THE DEPARTMENT OF PUBLIC HEALTH WITH EXPERTISE IN EPIDEMIOLOGY, SURVEILLANCE, CLINICAL SERVICES, DATA MODELLING, AND PUBLIC COMMUNICATIONS IN SUPPORT OF THE COVID-19 EMERGENCY RESPONSE EFFORTS. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$4,678,065 WHICH INCLUDES A 12% CONTINGENCY ON YEAR 2 OF THE BUDGET. THE TOTAL TERM OF THE CONTRACT IS FROM MARCH 12, 2020 THROUGH MARCH 11, 2022 (2 YEARS).**

12) OTHER BUSINESS:

This item was not discussed.

13) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS

Commissioner Chow, ZSFG JCC Chair, stated that at the September 28th ZSFG JCC meeting, the Committee discussed several important presentations:

- The Quality Data Reporting update included a review of the hospital's many required regulatory reporting metrics and the Quality Measure Scorecard.
- The True North Scorecard is another set of metrics which the hospital tracks in the following categories: Equity, Safety, Quality, Care Experience, Developing Our People, and Financial Stewardship.
- The presentation on "Developing Our People Strategic Plan" provided a roadmap for the hospital's "Thriving at Work" A3 document.

The Committee also reviewed standard open session reports, including the Regulatory Affairs report, CEO report, and Human Resources Report. During the Medical Staff report, the committee approved:

- The Family Medicine Inpatient Service Pharmacy Standardized Procedures
- Proposed addition to Pronouncing of Cardiac Death by Nurse Practitioners and Physician's Assistants in certain situations.
- Division of General Internal Medicine Privilege List

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

14) CLOSED SESSION:

- A) Public comments on all matters pertaining to the closed session
- B) Vote on whether to hold a closed session (San Francisco Administrative Code Section 67.11) and to invoke the attorney-client privilege (San Francisco Administrative Code Section 67.10 (d))
- C). Closed Session pursuant to Cal. Government Code Sections 54957(b) and S.F. Adm. Code Sec. 67.10(d):

PUBLIC EMPLOYEE PERFORMANCE EVALUATION:

- D) Reconvene in Open Session: Motions and vote on whether to disclose any or all of the closed session discussions, San Francisco Administrative Code Section 67.12(a)

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

15) ADJOURNMENT

The meeting was adjourned at 6:39pm.

Attachment A

Health Commission
Resolution 21-12

**RESOLUTION MAKING FINDINGS TO ALLOW TELECONFERENCED MEETINGS UNDER CALIFORNIA GOVERNMENT
CODE SECTION 54953(e)**

WHEREAS, California Government Code Section 54953(e) empowers local policy bodies to convene by teleconferencing technology during a proclaimed state of emergency under the State Emergency Services Act so long as certain conditions are met; and

WHEREAS, In March, 2020, the Governor of the State of California proclaimed a state of emergency in California in connection with the Coronavirus Disease 2019 (“COVID-19”) pandemic, and that state of emergency remains in effect; and

WHEREAS, On February 25, 2020, the Mayor of the City and County of San Francisco (the “City”) declared a local emergency, and on March 6, 2020 the City’s Health Officer declared a local health emergency, and both those declarations also remain in effect; and

WHEREAS, On March 11 and March 23, 2020, the Mayor issued emergency orders suspending select provisions of local law, including sections of the City Charter, that restrict teleconferencing by members of policy bodies; those orders remain in effect, so City law currently allows policy bodies to meet remotely if they comply with restrictions in State law regarding teleconference meetings; and

WHEREAS, On September 16, 2021, the Governor signed AB 361, a bill that amends the Brown Act to allow local policy bodies to continue to meet by teleconferencing during a state of emergency without complying with restrictions in State law that would otherwise apply, provided that the policy bodies make certain findings at least once every 30 days; and

WHEREAS, While federal, State, and local health officials emphasize the critical importance of vaccination and consistent mask-wearing to prevent the spread of COVID-19, the City’s Health Officer has issued at least one order (Health Officer Order No. C19-07y, available online at www.sfdph.org/healthorders) and one directive (Health Officer Directive No. 2020-33i, available online at www.sfdph.org/directives) that continue to recommend measures to promote physical distancing and other social distancing measures, such as masking, in certain contexts; and

WHEREAS, The California Department of Industrial Relations Division of Occupational Safety and Health (“Cal/OSHA”) has promulgated Section 3205 of Title 8 of the California Code of Regulations, which requires most employers in California, including in the City, to train and instruct employees about measures that can decrease the spread of COVID-19, including physical distancing and other social distancing measures; and

WHEREAS, Without limiting any requirements under applicable federal, state, or local pandemic-related rules, orders, or directives, the City’s Department of Public Health, in coordination with the City’s Health Officer, has advised that for group gatherings indoors, such as meetings of boards and commissions, people can increase safety and greatly reduce risks to the health and safety of attendees from COVID-19 by maximizing ventilation, wearing well-fitting masks (as required by Health Officer Order No. C19-07), using physical distancing where the vaccination status of attendees is not known, and considering holding the meeting remotely if feasible, especially for long meetings, with any attendees with unknown vaccination status and where ventilation may not be optimal; and

WHEREAS, On July 31, 2020, the Mayor issued an emergency order that, with limited exceptions, prohibited policy bodies other than the Board of Supervisors and its committees from meeting in person under any circumstances, so as to ensure the safety of policy body members, City staff, and the public; and

WHEREAS, The San Francisco Health Commission has met remotely during the COVID-19 pandemic and can continue to do so in a manner that allows public participation and transparency while minimizing health risks to members, staff, and the public that would be present with in-person meetings while this emergency continues; now, therefore, be it

RESOLVED, That San Francisco Health Commission finds as follows:

1. As described above, the State of California and the City remain in a state of emergency due to the COVID-19 pandemic. At this meeting, the San Francisco Health Commission has considered the circumstances of the state of emergency.
2. As described above, State and City officials continue to recommend measures to promote physical distancing and other social distancing measures, in some settings.
3. As described above, because of the COVID-19 pandemic, conducting meetings of this body and its committees, including the Zuckerberg San Francisco General Hospital and Laguna Honda Hospital Joint Conference Committees, in person would present imminent risks to the safety of attendees, and the state of emergency continues to directly impact the ability of members to meet safely in person; and be it

FURTHER RESOLVED, That for at least the next 30 days meetings of the San Francisco Health Commission and its committees, including the Zuckerberg San Francisco General Hospital and Laguna Honda Hospital Joint Conference Committees, will continue to occur exclusively by teleconferencing technology (and not by any in-person meetings or any other meetings with public access to the places where any policy body member is present for the meeting). Such meetings of the San Francisco Health Commission that occur by teleconferencing technology will provide an opportunity for members of the public to address this body and its committees, including the Zuckerberg San Francisco General Hospital and Laguna Honda Hospital Joint Conference Committees, and will otherwise occur in a manner that protects the statutory and constitutional rights of parties and the members of the public attending the meeting via teleconferencing; and, be it

FURTHER RESOLVED, That the Executive Secretary of the San Francisco Health Commission is directed to place a resolution substantially similar to this resolution on the agenda of a future meeting of the San Francisco Health Commission within the next 30 days. If the San Francisco Health Commission does not meet within the next 30 days, the Executive Secretary is directed to place a such resolution on the agenda of the next meeting of San Francisco Health Commission.

I hereby certify that the San Francisco Health Commission at its October 5, 2021 meeting adopt the foregoing resolution.

Mark Morewitz, MSW
Health Commission Executive Secretary

Attachment B

**Health Commission
City and County of San Francisco
Resolution 21-11**

TO ESTABLISH A SAN FRANCISCO HEALTH CARE FOR THE HOMELESS (“HCH”) CO-APPLICANT BOARD

WHEREAS, the San Francisco Community Clinic Consortium (“SFCCC”) has applied for and received grant funding from the United States Department of Health and Human Services, Health Resources and Services Administration (“HRSA”) pursuant to Section 330(h) of the Public Health Service Act (“Section 330”) to operate one or more Health Center Projects for homeless and formerly homeless individuals and families located in San Francisco; and

WHEREAS, SFCCC has entered into a subrecipient agreement with the City and County of San Francisco (“City”), a municipal corporation, through its Department of Public Health (“DPH”), under which SFCCC awards a portion of the HRSA grant funds to support the planning for, and delivery of, services to individuals served by the City’s Health Care for the Homeless Program through neighborhood community clinics operated by DPH (“HCH Program”); and

WHEREAS, Section 330 and its implementing regulations require the City to establish an HCH Program governing board, consistent with the requirements of Section 330, and applicable implementing regulations and Health Center Program Requirements as set forth in the Health Center Program Compliance Manual (the “Compliance Manual”), to qualify as a health center for purposes of federal law; and

WHEREAS, Section 330 and the Compliance Manual allow public entities to create co-applicant boards that meet Section 330’s requirements; and

WHEREAS, City Charter Section 4.110 charges the Health Commission, together with the Department of Public Health, with the management and control of the hospitals of the City, emergency medical services, and general preservation, promotion and protection of the physical and mental health of inhabitants of the City, while Charter Section 4.102 sets forth the duties of City Commissions, including the requirement that Commissions deal with administrative matters solely through the department head or their designees; and

WHEREAS, City Charter Section 4.126 and Administrative Code Section 2A.30 charge the department head with responsibility for the administration of their department, and designates the department head as the “appointing officer” under the civil service provisions of the Charter for the appointing, disciplining and removal of department employees. The Director of Health is the department head of the Department of Public Health; and

WHEREAS, the Health Commission and the Director of Health (“Director”) desire to create a co-applicant board to provide oversight, as specifically set forth in Section II of the Co-applicant Agreement attached to this resolution, and Article III of the Bylaws attached to this resolution, of the Health Care for the Homeless services provided by the City, in accordance with the City Charter and Municipal Code, and the requirements of Section 330 and applicable implementing regulations and program requirements governing the HCH Program, to the extent such operations are funded by any Health Care for the Homeless grant and governed by Section 330, and the implementing regulations, and other HRSA program requirements applicable to such grants; now, therefore, be it

RESOLVED, that the Health Commission and the Director establish the San Francisco Health Care for the Homeless Co-Applicant Board (“CAB”) consisting of eleven voting members initially appointed by the Director and the Director’s designee, as an ex officio non-voting member, and be it

FURTHER RESOLVED, that the majority of members shall be individuals who are, have been, or will be served by the HCH Program (“Consumer Members”). Consumer Members shall have received at least one service in the past 24 months that generated a health center visit, where both the service and the site at which the service was received are included within the HCH Program’s approved scope of project. The Consumer Members shall be representative of the geographical areas served by the HCH Program and, as a group, shall represent the HCH Program’s user population in terms of demographic factors such as ethnicity, location of residence, race,

gender, age, and economic status. DPH may request a waiver of the majority Consumer Member requirement and if DPH obtains such waiver, the CAB may modify the composition of its members to the extent authorized by the waiver, and be it

FURTHER RESOLVED, that the remainder of members shall be individuals who are representative of the community in which the HCH Program is located (“Non-Consumer Members”), that have a commitment to the populations that utilize the HCH Program and the special needs of those populations, and they shall possess expertise in community affairs, local government, finance and banking, legal affairs, trade unions, community service agencies, other commercial or industrial concerns, and/or social service agencies within the community. No more than one-half of these Non-Consumer Members may derive more than ten percent of their annual income from the health care industry, and be it

FURTHER RESOLVED, that the CAB adopt bylaws in substantially the same form as those attached to this resolution [Attachment 1]; and be it

FURTHER RESOLVED, that the Director enter into a Co-Applicant Board Agreement with the CAB when the CAB is seated and functioning, in substantially the same form as the one attached to this resolution [Attachment 2]; and be it

FURTHER RESOLVED, that Director shall report back to the Health Commission within 60 days on the establishment and membership of the CAB, adoption of bylaws, and the execution of a CAB Agreement.

Thereafter, the Director shall provide regular reports on the operations of the CAB; and be it

FURTHER RESOLVED, that the CAB shall remain in existence for as long as required for the City to remain eligible for receipt of funding under Section 330 or any successor law that requires the existence of the CAB. If the City no longer receives such funding, this Resolution No. 21-11, requires the CAB to terminate unless the Health Commission and the Director of Health act to maintain the CAB.

I hereby certify that the San Francisco Health Commission at its _____, 2021 meeting adopted the foregoing resolution.

Mark Morewitz, MSW
Health Commission Executive Secretary