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MINUTES
HEALTH COMMISSION COMMUNITY AND PUBLIC HEALTH COMMITTEE MEETING

Tuesday February 15, 2022 2:00 p.m.

Remote Meeting via Webex Event

1) CALL TO ORDER

Present: Commissioner Suzanne Giraud, Ph.D , Chair
Commissioner Cecilia Chung, Member
Commissioner Edward A. Chow, MD

Excused: Commissioner Susan Belinda Christian, J.D.

The meeting was called to order at 2:02pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION COMMUNITY AND PUBLIC HEALTH COMMITTEE MEETING OF JANUARY 11, 2022 MEETING

Action Taken: The Health Commission unanimously approved the January 11, 2022 meeting minutes.

3) TUBERCULOSIS PROGRAM UPDATE

Susannah Graves, MD, MPH, TB Prevention and Control Program, presented the item.

Commissioner Comments:

Commissioner Chow requested that data be disaggregated for Asian and Pacific Islanders, and the Mexican American populations. He asked what resources are needed to reduce the number of latent TB cases in the most impacted populations in San Francisco. Dr. Graves stated that the Chinatown Health Center has an integrated nurse case management program focusing on latent TB cases and the NEMS Chinatown clinic just received a CDC grant to focus on latent TB cases. She added that the DPH is partnering with NEMS on this initiative, in addition to its SRO outreach. She also stated that the San Francisco Health Network is focusing on linkage to primary care and testing, in addition to initiation of treatment. Commissioner Chow noted that primate practitioners are caring for many TB cases because the public sector and NEMS does not reach everyone. He requested an update on this presentation in approximately 6 months.

Commissioner Giraudo asked if there is focused outreach to those over 65 years of age with a wellness focus to combat anxiety about TB. Dr. Graves stated that there is not focused outreach to this population. However, the DPH partners with community-based organizations targeting older adults.

Commissioner Giraudo asked if there is a known understanding of the spike in cases in 20-21 year old individuals. Dr. Graves stated that there have been a higher proportion of young people presenting very ill during the earlier part of COVID-19 pandemic, when access to care was an issue.

4) BEHAVIORAL HEALTH SERVICES CHILDREN, YOUTH & FAMILY SYSTEMS OF CARE: UPDATE ON CLOSURE OF JUVENILE HALL

Farahnaz K. Faramand, Ph.D., Director BHS-CYF, and Mona Tahsini, LMFT, Director of SPY and AIIM Higher, presented the item.

Commissioner Comments:

Commissioner Giraudo is concerned that many of the youths incarcerated in the Youth Guidance Center (YGC) had not received mental, medica, or dental care previously; in addition, many are diagnosed with learning disabilities through testing at the Youth Guidance Center. She is concerned that this population still receive these testing and services through the community when the YGC is closed. She also noted concern that there are not enough behavioral health slots for youth and the availability of case management services for this population. Dr. Faramand stated that there remain many unknowns in the planning of services for this population. For example, the Special Programs for Youth staff, may be transferred to other clinics or stay in a new central hub of services for this population. The DPH staff involved in planning for the YGC closure strive to ensure continuity of care and are hopeful that a wellness hub will have integrated services. System Navigators are planned to help families understand the new array of services.

Commissioner Giraudo stated that diluting DPH services for this youth population would be detrimental to these adolescents.

Commissioner Chow asked for clarification regarding mixing pre and post adjudicated youth. Ms. Tahsini stated that currently pre and post adjudicated youth are being housed together, which is a radical change.

Commissioner Chow asked if the DPH would continue coordinating services for this population. Ms. Tahsini stated that decisions about this coordination remain unclear.

Commissioner Giraudo requested a follow-up on this topic in approximately 6 months.

5) EMERGING ISSUES

This item was not discussed.

6) PUBLIC COMMENT

There was no public comment.

7) ADJOURNMENT

The meeting was adjourned at 3:34pm.