

Laurie Green, M.D.
President

Tessie M. Guillermo
Vice President

Edward A. Chow, M.D.
Commissioner

Susan Belinda Christian, J.D.
Commissioner

Cecilia Chung
Commissioner

Suzanne Giraud ED.D
Commissioner

Karim Salgado
Commissioner

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

**London N. Breed Mayor
Department of Public Health**



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MINUTES

HEALTH COMMISSION MEETING

**Tuesday September 17, 2024 4:00 p.m.
101 Grove Street, Room 300
San Francisco, CA 94102 & via Webex**

1) CALL TO ORDER

Present: Commissioner Laurie Green, MD, President
Commissioner Edward A. Chow M.D
Commissioner Susan Belinda Christian, J.D.
Commissioner Tessie Guillermo
Commissioner Suzanne Giraud, Ph.D
Commissioner Karim Salgado

Excused: Commissioner Cecilia Chung

The meeting was called to order at 4:02pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF SEPTEMBER 3, 2024.

Commissioner Comments:

Commissioner Chow noted that on the top of page 6 under Dr. Teresa Palmer's public comment, the word "curtail" should be changed to "curtain."

Action Taken: The Health Commission unanimously approved the September 3, 2024 meeting minutes with the correction noted above.

3) RESOLUTION TO HONOR BALJEET SANGHA

Roland Pickens, MHA, FACHE, San Francisco Health Network CEO, and Troy Williams, MSN, RN, CPHQ, CPHRM, CENP, San Francisco Health Network Chief Nursing Officer and Chief Quality Officer, presented the item.

Public Comment:

Patrick Monette-Shaw stated that Mr. Sangha will not be missed.

Commissioner Comments:

Commissioner Guillermo expressed deep gratitude for Mr. Sangha's leadership and dedication. She noted that he seemed to always be the first to get to a crisis and the last one to leave, ensuring things were in place and serving as an example to others. She is sad to see him leave the DPH but knows wherever he goes, the health and wellbeing of the population he will work with will be better for his involvement.

Commissioner Giraud stated that Mr. Sangha always gave the Commission confidence that LHH was moving in the right direction during the recertification process. She thanked him for all the work he has done at the DPH and for being an inspiration to so many others.

Commissioner Chow thanked Mr. Sangha for his many contributions to the DPH, especially his leadership during the COVID-19 pandemic and the LHH recertification process. He has hope that Mr. Sangha may choose to return to the DPH in the future.

Commissioner Christian associated herself with all the positive comments made by other Commissioners. She thanked Mr. Sangha for the confidence and competence that he ~~inhabited~~ exhibited when presenting and interacting with the Commissioners.

Commissioner Salgado noted that she is new to the Commission and did not have a chance to work with Mr. Sangha. She wished him well in his future endeavors.

Commissioner Green noted that during incredibly dire and stressful crises, Mr. Sangha utilized data, hard work, and perseverance to help the DPH achieve goals and outcomes that were necessary and important. He helped bring hope in dire situations and contributed to incredible outcomes for the DPH. She wished him well and hopes he will consider returning to the DPH in the future.

Mr. Morewitz stated that Mr. Sangha's has given his heart to the DPH through his hard work and dedication, and he hopes that wherever Mr. Sangha goes, that his heart is met in every way that it is needed.

Director Colfax thanked Ms. Sangha for returning to the DPH and contributing his talent and hard work to many important endeavors. He praised Mr. Sangha for being able to handle a broad portfolio and bring joy to his work.

Mr. Sangha noted that much work of the DPH is very difficult work; in addition to the complexity of the issues, staff are often told by the public, press, and politicians that they are doing things wrong without acknowledging any of the good work being done. He noted that the support of the Health Commission and DPH leadership is essential and makes a difference to DPH staff. He noted that San Francisco is a model for the rest of the country so what is done at the DPH has far reaching impact.

Action taken: The Health Commission unanimously approved the resolution. (Attachment)

4) GENERAL PUBLIC COMMENT

Chris Ward Cline thanked the Health Commissioners for giving him a venue and a voice over the past months to make public comment. After 2 years of public records requests, there has been positive movement in dealing with one of the systems he has concern about.

5) DIRECTOR'S REPORT

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

PHD AWARDED FIVE-YEAR GRANT TO CONTINUE OFFERING NATIONAL HIV-FOCUSED CAPACITY BUILDING ASSISTANCE (CBA) THROUGH ITS GETSFCBA PROGRAM

Over the past 10 years, the Center for Learning & Innovation (CLI) has hosted a CDC-funded HIV prevention-focused capacity building assistance program (CBA) to provide training and technical assistance to the HIV prevention workforce at health departments and community-based organizations across the U.S. Under CDC's latest five-year notice of funding opportunity, PS-24-020, the getSFcba program (getSFcba.org) successfully re-competed so it could continue leveraging PHD's expertise to address high priority needs identified by CDC-funded jurisdictions and agencies spanning the four Ending the HIV Epidemic pillars (diagnose, treat, prevent and respond). getSFcba will tackle inequities in outcomes by helping partners navigate key social determinants of health while focusing on syndemics such as sexually transmitted infections, hepatitis, and substance use disorders. In addition to providing technical assistance, getSFcba will create new opportunities to mentor early career managers at health departments nationwide and host Public Health Detailing Institutes to help departments engage clinical providers to increase the uptake of evidence-based HIV prevention practices.

PHD COLLABORATION IN COMMUNICABLE DISEASE RESPONSE

Last month, teams from across DPH's Population Health Division rapidly responded to an outbreak of Shigella that helped prevent further spread of infection. Shigella is a bacteria that causes a gastrointestinal infection called shigellosis. It can spread easily from person to person or by eating foods contaminated by infected people.

On August 28, DPH's Communicable Disease (CD) Branch identified that at least ten San Francisco residents who had Shigella, and who during interviews with CD staff, reported eating at the same restaurant less than a week earlier. CD immediately notified the Environmental Health Branch (EHB) and Public Health Lab (PHL) to conduct a coordinated investigation and response that same day.

Working closely with the restaurant management, the team inspected the restaurant, tested restaurant employees to identify anyone with Shigella, and excluded them from work to prevent the further spread of illness. They also worked to ensure that the facility was in compliance with all public health codes before reopening on August 30. Thank you to the CD, EHB, and PHL teams for putting public health into action and protecting our community.

ENVIRONMENTAL HEALTH RETAIL TOBACCO AND SMOKING PROGRAM ORDINANCE

Tobacco use continues to be among the leading causes of preventable deaths in San Francisco and reducing tobacco use continues to be a priority for the Department of Public Health. The Environmental Health Branch's Retail Tobacco and Smoking Program is responsible for enforcing all tobacco related provisions of the San Francisco Health Code. In 2014, the San Francisco Board of Supervisors unanimously passed the Tobacco Permit Density Reduction Ordinance. The goal of the ordinance was to reduce the number of permitted tobacco retail stores to no more than 45 per supervisorial district. Specifically, the ordinance prevents any new retail tobacco permits from being issued in any supervisorial district with more than 45 existing permits.

Since 2018, the Environmental Health Branch's Retail Tobacco and Smoking Program has seen a 21% decrease in the number of permitted retail tobacco establishments in San Francisco. During this time, San Francisco's retail tobacco permits have gone from 738 permits to 585. This year the city reached a milestone where, for the first time, all the supervisorial districts now have less than 100 retail tobacco permits. Supervisorial District 6 alone went from 123 retail tobacco permits down to 77 which is a decrease of 38%. The supervisorial district with the fewest permits is District 7 with 23 retail tobacco permits. San Francisco has now increased the number of supervisorial districts meeting the 45 or less retail tobacco permit cap requirements to 6 out of 11 districts. This is a huge accomplishment for San Francisco and the Environmental Health Branch in their efforts to reduce the availability of tobacco use and its related health impacts.

ENVIRONMENTAL HEALTH PRESENTATIONS TO GALILEO HIGH SCHOOL BIOTECHNOLOGY STUDENTS

Three Environmental Health Technicians gave presentations to students at Galileo High School this month. The presentations covered the topics of general vector control related to mosquitos and ticks and how biotechnology is being used to monitor these vectors and their arboviruses. The biotechnology class students were able to sequence DNA from mosquitos provided by the EHB employees and isolate the DNA from Wolbachia which is a bacterium used for mosquito control. Wolbachia is an extremely common bacteria that occurs naturally in many insects including mosquitoes. Once established in a mosquito population the bacteria is passed from one generation to the next through the insects eggs. Wolbachia blocks viruses like dengue, chikungunya and Zika from growing in the bodies of Aedes aegypti mosquitoes. Programs now exist to breed colonies of mosquitoes infected with the Wolbachia bacterium and release them into areas affected by mosquito-borne diseases. This was an opportunity for these high school kids to see this cutting-edge technology up close and hopefully some of these students will be inspired to pursue careers in public health.

ZSFG WELCOMES KPO FELLOWS

Every year, ZSFG brings on board a new cohort of fellows to join the Kaizen Promotion Office (KPO). The KPO creates a structured approach to how we improve patient care by identifying and analyzing problems, developing and implementing solutions, and reviewing results to establish new protocols and standards of care.

KPO Fellows will be embedded in departments across ZSFG, including Information Technology, Pediatrics, Quality Management, Medicine, Emergency Medicine, and Anesthesia and Perioperative Care departments.

They will be working on equity-informed projects aiming to remove pediatric health disparities, reduce sepsis infections, build data-informed electronic medical record tools to enhance patient care, use data to improve emergency care for vulnerable populations, and expand access to surgical care.

Fellows bring fresh perspectives, diverse experiences, and commitment to continuous improvement to care for our San Franciscan patient population. Please join me in welcoming this talented group to DPH.

ZSFG GETS A SHOUT OUT FROM THE SAN FRANCISCO 49ERS

The San Francisco 49ers recognized Zuckerberg San Francisco General at Monday Night Football on September 9 for their care of wide-receiver Ricky Pearsall. The spectacular ceremony included Dr. Lucy Kornblith, who received an official 49ers jersey on the field. The Trauma Care and Emergency Department teams were also acknowledged with a photo display for the thousands of fans in attendance.

This is a reminder that ZSFG's Level 1 Trauma Center is a critical part of our health network that is caring for all of San Francisco and northern San Mateo County, serving everyone with the same high quality, life-saving care. The evening ended with a Niner win.

COVID-19 UPDATE

As of 09/12:

- San Francisco's 7-day rolling average of COVID test positivity is 5.5%.
- Thirty-four percent of SF residents are fully up to date on their COVID vaccinations and have received the updated vaccine.

Commissioner Comments:

Commissioner Chow requested that more information be provided to the Health Commission in how Naloxone has been effective in SROs and on the street in reducing overdose deaths. Director Colfax stated that the preliminary data indicates a reduction in overdose deaths. He will continue to update the Commission on this important topic.

6) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS

Commissioner Tessie Guillermo, stated that the September 10, 2024 LHH JCC meeting was dismissed early due to malfunction of audio/visual equipment in room 300. She noted that since the meeting, the LHH JCC members have had a chance to review the responses of LHH staff to their policy questions. All LHH JCC members are in support of approving all LHH policies included in the next item.

7) LHH POLICIES

Carmen Trinh, Director of Performance Improvement, presented the item. Dureshehwar Swiger, Director of LHH and ZSFG Integrated Rehabilitation Services, stated that the Custom Wheelchair policy was updated to reflect the multi-disciplinary collaborative approach to the meet the needs of LHH residents in a more timely fashion.

Action Taken: The Health Commission unanimously approved the following policies.

<u>Item</u>	<u>Scope</u>	<u>Policy No.</u>	<u>Policy Title</u>
1	Facility-wide	20-12	Discharge Cleaning
2	Facility-wide	22-16	Effective Communications – Resident Who is Deaf
3	Facility-wide	24-11	Notification of Family / Surrogate Decision-Makers (SDMs) and/or Conservators of Change in Condition and/or Death
4	Facility-wide	29-05	Interpreter Services and Language Assistance
5	FNS	1.1	Food from Home or Outside Sources Served Directly to Residents
6	HIS	13.06	Patient Access to Health Records
7	Medicine	A00	E-Referral Consultation Procedure for Outpatient Clinic
8	Medicine	A01	Unsigned Electronic Health Record Notes
9	Medicine	CO1-01	Patient Expiration
10	Medicine	D10-02	Central Line Insertion
11	OPC	A1	Outpatient Clinic Services
12	Rehab	10-04	Patient Vs Resident Terminology
13	Rehab	10-05	Written Policies and Procedures for Rehabilitation Services
14	Rehab	20-01	Responsibility and Accountability of Rehabilitation Services
15	Rehab	20-02	Rehabilitation Center Staff
16	Rehab	20-05	Staff Orientation, In-service training, and continuing education
17	Rehab	30-05	Behavioral Health Services
18	Rehab	30-06	Social Work Services
19	Rehab	30-07	Activity Therapy Services
20	Rehab	30-08	Vocational Rehabilitation Services
21	Rehab	40-01	Rehabilitation Services for Rehabilitation Unit (Acute Rehab & SNF Rehab)
22	Rehab	40-02	Rehabilitation Services for Long Term Care SNF Unit Patients
23	Rehab	40-03	Rehabilitation Center – Goals and Objectives
24	Rehab	40-04	Rehabilitation Services and Medical Record
25	Rehab	40-05	Rehabilitation Case Conference
26	Rehab	40-06	Evaluation of Services
27	Rehab	40-07	Utilization Management
28	Rehab	40-08	Rehabilitation Assessment and Interdisciplinary Care Planning
29	Rehab	40-09	Treatment Authorization Request
30	Rehab	50-01	Admission and Eligibility Criteria for Acute Rehabilitation Services

31	Rehab	50-02	Admission and Eligibility Criteria for SNF-level Rehabilitation Services
32	Rehab	50-03	Sources and Forms Used for Referral of Patients
33	Rehab	60-01	Outpatient Rehabilitation Services
34	Rehab	60-02	Procedure for Outpatient Referral, and Treatment
35	Rehab	70-01	OT Services
36	Rehab	70-02	OT Staff
37	Rehab	70-04	Scope of Occupational Therapy Services
38	Rehab	70-05	Establishment of Treatment Programs and Documentation
39	Rehab	70-09	Occupational Therapy Service Equipment and Supplies
40	Rehab	80-01	Physical Therapy Service Definition
41	Rehab	80-02	Physical Therapy Staff
42	Rehab	80-03	Clinical Training for Physical Therapy Students or Interns
43	Rehab	80-04	Scope of Services
44	Rehab	80-07	Physical Therapy Service Equipment and Supplies
45	Rehab	80-08	Orthotics Clinic
46	Rehab	90-01	Speech Language Pathology Service Definition
47	Rehab	90-02	Speech Language Pathology Staff
48	Rehab	90-03	Speech Pathology Scope of Services
49	Rehab	90-04	Establishment of Treatment Programs and Documentation SLP
50	Rehab	90-05	Establishment of Treatment Programs and Documentation Dysphagia
51	Rehab	90-07	Establishment of Treatment Programs and Documentation – Audiology
52	Rehab	90-08	Hearing Aid Evaluation and Dispensing
53	Rehab	90-09	Speech Pathology Service Equipment and Supplies
54	Rehab	90-10	Audiology Service Definition
55	Rehab	90-11	Audiology Staff
56	Rehab	90-12	Audiology Scope of Services
57	Rehab	90-16	Audiology Service Equipment and Supplies
58	Rehab	100-01	Electrodiagnostic Studies
59	Rehab	100-02	Discharge planning and Durable Equipment
60	Rehab	100-03	Discharge planning and Emergency Preparedness
61	Rehab	100-04	Rehab Community Evaluation
62	Rehab	100-05	Rehab Home Evaluation
63	Rehab	110-02	Rehabilitation Center Equipment and Supplies
64	Rehab	110-03	Rehabilitation Center Equipment
65	Rehab	App. B	Appendix B: JD-Neuropsychologist, Rehabilitation Services
66	Rehab	App. B	Appendix B: JD-Staff Psychiatrist, Rehabilitation Services
67	Rehab	70-06	Custom Wheelchairs
68	Rehab	70-07	Wheelchair Clinic
69	Rehab	70-08	Connectivity Clinic
70	Rehab	80-06	Equipment Maintenance
71	Rehab	90-06	Hearing Screening revised

8) HUMAN RESOURCES FY23-24 UPDATE

Luenna Kim, Director, presented the information.

Public Comment:

Roger Wu, MD, DPH staff member and Union of American Physicians and Dentists Senior union representative, stated that he appreciated Ms. Kim's presentation, which included information regarding physician-related data. He noted that prior to the pandemic, there was a 10% vacancy rate in Medical Directors of the DPH Health Centers. He noted that currently, the vacancy rate is 70%. These vacancies impact all aspects of the health center functionality and adds enormous stress to staff covering these positions. He also stated that the Health Commission may be needed to help clear the bureaucratic underbrush that is delaying the hire of these positions.

Pierre King, Union of American Physicians and Dentist, stated that the union negotiated with DPH Human Resources leadership to present the data at the Commission meeting. The union is hoping to collaborate with the DPH to fill the Medical Director vacancies. He added that it is difficult for those staff who are serving as medical directors of two health centers.

Commissioner Comments:

Commissioner Guillermo thanked Ms. Kim for the presentation and the incredible progress. She appreciates receiving the information on the staff vacancies and she feels it is important to note the complexities of filling some positions. She noted that the nurses have the highest percentage of leaves and asked if there are sufficient nursing staff to cover for those out on leave. Ms. Kim stated that the Human Resource team meets with the Finance leadership and Nursing Administration regularly to review data on leaves. They estimate that there will be approximately 22% of nursing staff out of leave at any time so the budget number of positions accounts for this amount of leave coverage. The DPH leadership wants to ensure staff feel supported and that the Department has adequate coverage.

Commissioner Guillermo asked if there are staff training and staff retention metrics. Dr. Richa Dhanju, DPH Human Resources Director of Experience and Culture, stated that Human Resources leader wants to ensure all managers and supervisors complete manager orientation and the 24-hour manager training. There are new leadership development programs offered in an attempt to reach as many managers as possible. Currently trainings cannot be mandated due to the busy workload of the managers. Managers also receive a daily electronic digest which includes tools to assist in their job and training.

Commissioner Chow appreciates the progress made during the year. He appreciated hearing about the physician hiring issues, data, and public comment. He noted that physicians are so important within the San Francisco Health Network organizational structure. He looks forward to seeing the vacancies filled.

Commissioner Green expressed gratitude for the hard work of the Human Resources Department to make such progress during the past year. She agreed with Commissioner Chow that filling the physician positions is important. She noted that there is a lot of local competition for hiring nurses and physicians.

Director Colfax stated that he appreciates Director Kim's leadership and the successful work they have completed during the last year. He noted that during his visits to various DPH areas, the universal request from staff was for increased Human Resources support to assist in hiring staff.

9) SAN FRANCISCO HEALTH NETWORK UPDATE

Roland Pickens, MHA, FACHE, CEO, presented the information.

Commissioner Comments:

Commissioner Green thanked the Network leadership for their great work, noting that during the pandemic, Epic rollout, and LHH recertification, the Network made great progress.

Commissioner Guillermo associated herself with Commissioner Green’s comments. She noted that sometimes, crisis promotes motivation for change and evolution.

Commissioner Girauo thanked the Network leaders for the presentation. She requested that the next presentation include updates from the “Next Steps” slide of the current presentation.

Commissioner Chow thanked the presenters for the comprehensive overview. He hopes the newly created leadership positions will be integrative and collaborative instead of creating new silos; this will justify the costs of the new positions.

Director Colfax stated that as a provider in the San Francisco Health Network, he has seen from the inside the progress made and the positive impact on the patients.

10) COMMUNITY AND PUBLIC HEALTH COMMITTEE UPDATE

Commissioner Suzanne Girauo, Chair, stated the committee discussed a Community Health Equity and Promotion Branch of the Population Health Division. The branch is divided into the following areas of work: Community Wellness, Sexual and Drug User Health, and Grants and Administration. The main focus of the branch is to collaborate with the community and community organizations. Eighty percent of the funding is grants. There are 45 staff and 10 vacancies. One innovation the branch launched with community agencies in the last year are Health Access Points, which are low-barrier clinical and community services in welcoming spaces, free from stigma.

11) OTHER BUSINESS:

This topic was not discussed.

12) CLOSED SESSION

- A) Public comments on all matters pertaining to the Closed Session. (San Francisco Administrative Code Section 67.15).
- B) Vote on whether to hold a Closed Session.

Action taken: The Health Commission unanimously voted to hold a closed session.

- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5, 1157.6, and 1157.7; Health and Safety Code Section 1461; San Francisco Administrative Code Sections 67.5, 67.8, 67.8-1, and 67.10; and California Constitution, Article I, Section 1.

CONSIDERATION OF LHH MEDICAL STAFF CREDENTIALING MATTERS

CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

RECONVENE IN OPEN SESSION

1. Discussion and Vote to elect whether to disclose any portion of the closed session discussion that is not confidential under Federal or State law, The Charter, or Non- Waivable Privilege (San Francisco Administrative Code Section 67.12(a).) (Action item)
2. Possible report on action taken in closed session (Government Code Sections 54957.1(a) and 54957.7(b) and San Francisco Administrative Code Section 67.12(b).

13) POSSIBLE DISCLOSURE OF CLOSED SESSION INFORMATION

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

14) ADJOURNMENT

The meeting was adjourned at 6:27pm.

**HEALTH COMMISSION
CITY AND COUNTY OF SAN FRANCISCO
Resolution No. 24-15**

HONORING BALJEET SANGHA, MPH, FACHE

WHEREAS, Mr. Sangha began his career at the Department of Public Health (DPH) as a ZSFG Operations Intern in 2009 while enrolled in a UC Berkeley MPH program. During Mr. Sangha's initial DPH tenure, he served as ZSFG Director of Volunteer Services & Materials Management, ZSFG Associate Administrator in charge of Supply Chain & Materials Management, ZSFG Deputy Chief Operations Officer & Chief Experience Officer; and

WHEREAS, Mr. Sangha returned to the San Francisco Health Network (SFHN) in 2021 as the inaugural Chief Operating Officer; and

WHEREAS, Mr. Sangha served as the COVID -19 Vaccination Executive Sponsor for the City and County of San Francisco, co-leading a city-wide multi-health system response which championed health equity, that resulted in an 80% vaccination rate of San Francisco residents, well above state and federal averages of other cities; and

WHEREAS, Mr. Sangha served as Co-Incident Commander of the Centers for Medicare and Medicaid Recertification of Laguna Honda Hospital as the country's largest publicly funded skilled nursing facility. His unrelenting dedication to this endeavor was palpable, ensuring successful completion of milestones for the Centers for Medicare and Medicaid Services and SF City Attorney's Office Settlement agreement, and ongoing coordination with the U.S. Secretary of Health and Human Services' Office, California Department of Public Health, San Francisco Mayor's Office, and San Francisco's Federal Congressional delegation; and

WHEREAS, Mr. Sangha developed critical SFHN infrastructure leadership hiring and programmatic vision to put the Network on a path to be a fully integrated health care delivery system that meets and exceeds evidence based best practices. This includes growing an Operations division team with inaugural roles that are focused on improving the workforce and care experience for all of areas of the DPH; and

WHEREAS, Mr. Sangha received the 2023 SPUR Good Government Award for his critical work and leadership during the COVID-19 pandemic and the internationally prestigious American College of Healthcare Executives Hudgens Award in 2023, for the top healthcare executive in the country under 40; and

WHEREAS, Mr. Sangha's strategic foresight, commitment to equity, and unparalleled ability to forge authentic connections have motivated his team and propelled organizational success. He has been exceptionally dedicated to supporting those from underprivileged backgrounds pursuing healthcare careers and has been a beacon of inspiration and a catalyst for change. His empathy, compassion, dedication, positive outlook, and incredible competence have helped transform the San Francisco Health Network.

NOW, THEREFORE, BE RESOLVED, that the San Francisco Health Commission honors Baljeet Sangha for his many years of outstanding service contributing to the health and wellbeing of all San Franciscans, and wishes him well in his future endeavors.

I hereby certify that the San Francisco Health Commission at its meeting of September 17, 2024 adopted the foregoing resolution.

Mark Morewitz, MSW
Health Commission Executive Secretary

