

Laurie Green, M.D.
President

Tessie M. Guillermo
Vice President

Edward A. Chow, M.D.
Commissioner

Susan Belinda Christian, J.D.
Commissioner

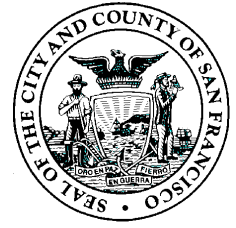
Cecilia Chung
Commissioner

Suzanne Giraudo ED.D
Commissioner

Karim Salgado
Commissioner

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MINUTES

HEALTH COMMISSION MEETING

Tuesday October 1, 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 Cecilia Chung
Commissioner Susan Belinda Christian, J.D.
Commissioner Suzanne Giraudo, Ph.D

Excused: Commissioner Tessie Guillermo
Commissioner Karim Salgado

The meeting was called to order at 4:03pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF SEPTEMBER 17, 2024.

Action Taken: The Health Commission unanimously approved the September 17, 2024 meeting minutes with the correction noted above.

3) GENERAL PUBLIC COMMENT

Malena Mackey Cabada, Walk SF Campaign Associate, stated that Walk SF believes in the Vision Zero is an important campaign. She noted that over 500 people in San Francisco are hurt or killed each year in the city due to pedestrian or bike-related incidents. She urged the Health Commission to push the DPH to again be a leading partner in this effort.

Raya Moya, resident of the Bayview, living in an RV. She stated that last Thursday, the EPA and Navy issued broad decisions about Parcel F, which is 300 yards away from an RV parking site. There have been recent soil disturbances near the RV parking site. The community is concerned because they joined the Hunter's Point community biomonitoring project with Dr. Sumchai. Ms. Moya has breast cancer and is disabled. She feels her health is highly at risk. It is s toxic location to house people at that RV site because the dirt nearby has not been effectively covered. The wind is strong in that location and the tarps are not effective. There is a man living in

an RV covered his vehicle in black plastic and may not be getting enough air. She requested that this issue be put on agenda for a future Health Commission meeting.

4) DIRECTOR'S REPORT

Navenna Bobba, MD, DPH, Deputy Director of Health, presented the item. She noted that Governor Newsom signed AB2115, which was sponsored by the SFDPH and Assemblymember Matt Haney. This bill will increase access to methadone in hospital or clinic settings. Local clinics are hoping to implement the expanded access immediately. Dr. Bobba also noted that a heat advisory is still in effect.

NEW DPH REPORT SHOWS HIV DIAGNOSES IN SAN FRANCISCO DECLINE IN 2023

DPH released its 2023 HIV Epidemiology Annual Report, which shows that the number of new HIV diagnoses have declined in San Francisco.

In 2023, there were 133 new HIV diagnoses, a 20% decrease from 2022 when 167 diagnoses were reported. Since 2014, the number of new HIV diagnoses in San Francisco has declined by 59%, while nationally, new HIV diagnoses have only declined by 3% in the past decade.

Declines in new diagnoses were specifically reported among Latino individuals living in the City. In 2023, there were 40 new HIV diagnoses among Latino individuals, a 46% decrease from the previous year when 74 new diagnoses were reported, and a 59% decrease since 2014. Importantly, there has been an overall decline in the number of new HIV diagnoses for all racial and ethnic groups from 2014 through 2023.

Levels of linkage to care and viral suppression after diagnoses have returned to or exceeded the pre-COVID-19 pandemic levels. In 2023, 95% of individuals diagnosed in San Francisco were linked to care within one month and 84% of people diagnosed the first nine months of 2023 were virally suppressed within six months.

DPH's expanded services in 2023 include the HIV/STI home testing program [Take Me Home](#), which reported an increase in participation from 533 HIV test kits ordered in 2022 compared to 843 in 2023. In a testament to the effectiveness of public awareness efforts through many years, an estimated 97% of people living with HIV in San Francisco are aware of their status, compared with 87% in the United States.

Pre-exposure prophylaxis (PrEP) also became more widely available, including an injectable form of PrEP. The medication's use among men who have sex with men (MSM) living without HIV has increased for all race/ethnicities from 2015 to 2023 among San Francisco City Clinic patients who were San Francisco residents. In 2015, PrEP use ranged from 22% to 27% among MSM living without HIV across all race/ethnicities; by 2023, it increased to between 71% to 78%.

While much progress has been made, challenges remain. Nationally and in San Francisco, Black/African American MSM have lower PrEP use compared with MSM of other race/ethnicities. A key priority of [Getting to Zero San Francisco](#), a consortium of over 300 members including DPH, is to scale-up efforts in providing access to HIV PrEP and to ensure linkage to and engagement in HIV care for Latino, and Black/African American communities, as well as to people experiencing homelessness (PEH) and people who use drugs.

PEH comprise an elevated proportion of new diagnoses each year, accounting for 23% of 2023 diagnoses. Among PEH who were last unhoused in San Francisco, only two-thirds were virally suppressed in 2023. Additionally, while people living with HIV continue to live longer, drug overdoses accounted for 19% of deaths among that population in between the years 2019 and 2022.

To address these challenges, DPH's Community Equity Health and Promotion Branch coordinated with community partners to open seven [Health Access Points](#) (HAPs). The HAPs provide equity-focused, stigma-free, and low barrier HIV prevention, care and treatment services, as well as for other sexually transmitted

infections, Hepatitis C, and overdose prevention. While everyone is welcome at the HAPs, each HAP is designed to address the specific health needs of priority populations, including Latinos, people who use drugs, Trans Women, and Black/African Americans. In addition, DPH's renowned San Francisco City Clinic provides comprehensive prevention and care HIV services with bilingual staff.

DPH also manages a robust network of programs to help ensure that PEH get and remain connected with their care, such as LINCS (Linkage, Integration, Navigation and Comprehensive Services), Whole Person Integrated Care, and Zuckerberg San Francisco General Hospital's Ward 86 POP-UP clinic and new HAP, "The Lobby".

The 2023 HIV Epidemiology Report Annual and can be accessed [here](#).

ZSFG HOSTS NURSE HIRING EVENT

On Saturday, September 14, more than 43 candidates interested in working at ZSFG attended a meet-and-greet with ZSFG leadership, nursing staff and medical departments. CEO Susan Ehrlich, Chief Nursing Officer Gillian Otway, and others partnered with DPH Human Resources to present an overview of ZSFG, its mission and its important role as the City's only Level 1 Trauma Center at the open house hosted by DPH. The recruits toured the campus, visiting the Emergency Department, Med-Surg, Critical Care, Psychiatry, Maternal Child Health, perioperative services, and specialty clinics for an up-close look at the hospital teams and environment. DPH aims to be the employer of choice for the best and brightest medical staff personnel and several offers of employment were made as a result of the event. Special thanks to Norlissa Cooper, RN for supporting this event by touring and answering questions that candidates posed.

DPH HOSTS FIRST SF PROMOTORES CONFERENCE

DPH hosted the first City of San Francisco Community Health Worker Conference on Saturday, September 21, 2024, at the Mission Neighborhood Center. The event was the culmination of a joint effort of the Promotores Program Coordinators representing community-based organizations throughout San Francisco and DPH.

DPH's Dr. Berta Hernandez and Isela Ford co-led this full-day event that offered an opportunity for promotores who contributed to the City's COVID-19 pandemic response to come together and learn about the current state of promotores as a profession throughout the county and in the State of California as a whole. Mayor London N. Breed shared words of appreciation for the work that promotores did during the COVID-19 pandemic and continue to do today to support community wellness. Dr. Susan Philip, San Francisco Health Officer and Population Health Director, welcomed the participants and Amelia Martinez of the Human Rights Commission provided opening remarks.

The conference concluded with selecting a delegation to represent SF promotores at the Vision and Commitment (Vision y Compromiso) conference October 3-5 2024, in Los Angeles.

DPH LEADERS RECEIVE PSYCHIATRY AWARD

Ana Gonzalez, DO, and Lisa Inman, MD, Co-Chief Medical Officers for DPH Behavioral Health Services, were recently honored for their commitment to serving the community by the UCSF School of Medicine through the [Dr. J Elliot Royer Award for Excellence in Community Psychiatry](#). Through the dedicated and compassionate leadership of doctors Gonzalez and Inman, the Department has rapidly evolved and scaled programs and services to address the evolving behavioral health needs of San Franciscans, including the COVID-19 pandemic, the fentanyl epidemic, and other challenges. Together, they have led or contributed to the successful implementation of critical initiatives such as Medi-Cal policy and documentation reform, CARE Court, SB43, and a new electronic health record. In the community, they are regarded as local experts who aim to provide the best care possible. Congratulations to them both on this recognition.

PROJECT REACH

DPH Whole Person Integrated Care (WPIC) and ZSFG Surgery have received a \$100,000 Equity and Innovation Grant to support Project REACH (Reducing barriers to Equitable surgical Access for people experiencing Homelessness at ZSFG).

This project strengthens an existing collaboration between the ZSFG Division of Surgery, DPH WPIC, and The Better Lab (UCSF) to improve access to care, patient experience, and outcomes of people experiencing homelessness who need surgical and post-injury care at ZSFG using a human-centered design approach.

The interventions they have proposed are novel and creative for surgical teams, though they have been modeled successfully in other departments. The primary clinic-based interventions we will include a drop-in clinic, as-needed clinic appointments, as-needed telehealth via Street Medicine iPads, and a surgical team presence at Maria X Martinez Health Resource Center.

The potential impact of the project is significant. People experiencing homelessness comprise around 20% of ZSFG trauma activations (100-150 people) per year.

Measurements to evaluate the project include: clinic attendance and no-shows after referral or hospital discharge compared to pre-intervention historical controls; patient experience and clinical outcomes including emergency room visits, emergency operations, and/or hospital admissions; and early implementation outcomes (acceptability, appropriateness, and feasibility).

LATINE/X HERITAGE MONTH

DPH honored the diverse cultural backgrounds of the Latine/x community at “Celebrating our Roots/Celebrando Nuestras Raíces,” an event held at Potrero del Sol/La Raza Park on September 25. The Latine/x Heritage Month celebration featured a dance group, a traditional Mesoamerican blessing, and remarks from keynote speaker Gloria Romero, Executive Director at Instituto Familiar de la Raza, Inc. To demonstrate inclusiveness, DPH is using the term “Latine/x” in Latine/x Heritage Month because it is gender neutral, while the terms “Latino” and “Latina” are gendered in Spanish. DPH continues to advance health equity by addressing systemic and institutional barriers such as language access, culturally responsive care and health care access.

ZSFG CELEBRATES WORLD PATIENT SAFETY DAY

ZSFG recognized international World Patient Safety Day on September 17, a global event that recognizes the vital role played by healthcare providers and leaders in ensuring safe care. ZSFG’s teams are making significant progress on many fronts to keep patients safer. Using Lean principles, several taskforces and interdisciplinary teams, ZSFG is addressing Falls with Injury, Eliminating Pressure Injuries, and Reducing Catheter Associated Urinary Tract Infections (CAUTI). ZSFG is making progress. For instance, for Falls with Injury improvements continue to be launched in Med Surg, Psychiatry, 4A, and the Emergency Department where over 80% of fall events occur. The staff on H76/78 limited falls with injury to just one event in the first six months of 2024.

Another example is the hospital’s work to eliminate pressure injuries. Using Lean principles, ZSFG studied staff workflows and used data to determine root causes of pressure injuries, developed measures to maintain bed equipment, enhance wound care training, and closely tracked patient conditions in EPIC. ZSFG has reached its performance targets, and the ICU has had just one reportable pressure injury since February 2023. And, last May the hospital met its target for the number of CAUTI cases for the first time in several years. This achievement is due to hard work by an interdisciplinary taskforce that includes Infection Control, ICU leadership, Med-Surg leadership, Patient Safety, and Performance Improvement analysts.

ZSFG RECOGNIZES EVS WEEK

During Environmental Services Week (EVS Week)—September 8-14—ZSFG celebrated the team of nearly 200 EVS staff members who walk every inch of the hospital campus daily. Whether they're cleaning and disinfecting to prevent the spread of infectious diseases, collecting recyclables and trash, sweeping the hallways and hospital floors, polishing 10,000+ windows and hundreds of handrails, managing all the hospital linens, and more, ZSFG shines because of our EVS team that takes care of all the details. The Environmental Services team consistently provides a clean, safe and healthy environment to all patients, staff and visitors at the hospital. They take pride in the care they provide, and it shows in the work they do every day—prioritizing patient and staff safety and wellness. We are grateful to the team and the important care they provide.

COVID-19 UPDATE

As of 09/26:

- San Francisco's 7-day rolling average of COVID test positivity is 4.1%.
- Twenty-six percent of SF residents are fully up to date on their COVID vaccinations and have received the updated vaccine.

Commissioner Comments:

Commissioner Giraudo asked if the state will be rolling out a media campaign to let parents know that children can get the COVID-19 vaccine. Dr. Bobba stated that the SFDPH will implement a social media and media campaign to encourage everyone 6 months and older to get the vaccine.

Commissioner Chow asked for information regarding DPH actions related to the heat wave. Dr. Bobba stated that the DPH monitors its buildings known to heat up so it can determine if it is too hot to continue services on that day. Hospitals are monitoring temperatures to ensure all operations are functioning properly. The DPH will continue to reach out the community-based organizations working with elderly and very young populations. The DPH also coordinates distribution of water to homeless people living on the streets; these populations are also encouraged to the libraries or other public buildings to cool down.

5) HEALTH INFORMATION TECHNOLOGY UPDATE

Eric Raffin, CIO; and Jeff Scarafia, Deputy CIO, presented the item.

Commissioner Comments:

Commissioner Giraudo asked for more information regarding DPH community-based partners and their interface with EPIC. Mr. Scarafia stated that most community-based partners are using EPIC. For those still using their own system, there is some data integration.

Commissioner Christian asked for more information regarding how the DPH will handle substance use and treatment information in EPIC moving forward. Mr. Scarafia stated that the DPH plan for EPIC originally included substance use and treatment information but was halted due to concerns with adhering to 42CFR privacy regulations. The DPH is striving to put out to bid a new system to replace AVATAR to maintain substance use and treatment information.

Commissioner Christian asked if the DPH is attempting to advocate with the federal government about the need to include substance use and treatment information into the same system as all other patient records. Dr. Bobba stated that the DPH continues to advocate to put the patients first. Dr. Neda Ratanawongsa, San Francisco Health Network, stated that designing a universal consent process is the best way to conform to 42CFR regulations.

Commissioner Chow asked if the DPH worked with the City Attorney on its interpretation of 42CFR. Dr. Neda Ratanawongsa, stated that the DPH worked in partnership with the City Attorney's Office on its interpretation of 42CFR. Mr. Scarafia stated that providers' licenses are held accountable for adhering to 42CFR. In addition to the City Attorney, the DPH Office of Compliance and Privacy Affairs, and medical teams were involved in the process.

Commissioner Chow asked if users of My Chart who choose Chinese or Spanish would interact fully in that language. Mr. Scarafia stated that all navigation menus, some medical problem lists, medications, and test results are shown in that language. However, messaging in the system does not translate that that is only done in English.

Commissioner Green asked what would happen if a patient on methadone at a San Francisco Health Network site was taken to a non DPH hospital for an emergency; would the providers know that the patient is on methadone. Mr. Scarafia stated that unless the patient gave consent for the hospital to have access to their San Francisco Health Network record, the hospital would not know about the methadone unless they did a toxicology screening.

Regarding the AI policy, Commissioner Christian challenged the use of the words "Should" and "Must" as interchangeable because they have different meanings. She urged the use of "Shall" to indicate that individual DPH staff members should not feel they have a choice in regard to the tenets put forth in the important policy. Mr. Raffin noted that some use of AI may not relate to issues of equity issues such training programs for staff to get comfortable with using AI; this is why the use of "should" was decided upon. Commissioner Christian stated that she remains concerned that the DPH do all it can to eliminate systemic gender and racial inequalities, and the language it uses in this policy may have strong impact on individual's understanding their responsibility in this regard. She added that it will be clear to DPH staff members utilizing AI whether the specific work will be equity-related. She reiterated her request for the word "Should" to be removed from the policy.

Commissioner Giraudo asked if specific staff are assigned to AI. Mr. Raffin stated that staff working in existing areas of DPH IT have also been assigned to work on AI initiatives.

Commissioner Chung noted that she does not want AI replacing any DPH staff. Mr. Raffin stated that replacing DPH staff with AI is not a goal. Commissioner Chung noted the importance of talking about ethics of using AI in healthcare and public health.

Commissioner Chow asked for more information on the strategy of doing research with AI, noting that data on some populations is lacking or does not exist. How does AI evaluate a metric evenly without consistent data on all populations. Mr. Raffin stated that the first step is ensuring that data the DPH collects is as complete as possible. He noted that EPIC offers the opportunity for the DPH to see unidentified data from other organizations so it can better understand data on various topics.

Commissioner Green asked if AI will be used for financial modeling. In order to invest in AI, the DPH has to prove it would be cost effective. Mr. Raffin stated that the DPH will strive to find ways to flatten cost trajectories of using AI as needed. Mr. Scarafia stated that AI can scan a patient record and make a summary for a provide to prepare for a visit, but this costs 25 cents per report. This cost would add up quickly so the DPH is attempting to look at the most efficient ways to utilize this type of functionality.

Commissioner Green noted that the DPH does not have to be the entity to break ground in this field. Mr. Raffin agreed and stated that the DPH strives to be efficient users of solutions that others have developed and tested.

Deputy Director Bobba stated that the DPH understands that data are often biased. DPH leaders want to be careful not to worsen any existing inequities. She added that DPH Office of Health Equity was included in the review of this policy.

6) FINANCE AND PLANNING COMMITTEE UPDATE

Commissioner Cecilia Chung, Chair, stated that the committee reviewed and recommends that the full Health Commission approve all contract-related items on the Consent Calendar.

7) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS

Commissioner Edward A. Chow, MD, ZSFG JCC Chair, stated that at the September 24th ZSFG JCC meeting, the committee, reviewed and discussed standard reports including the Regulatory Affairs Report and Human Resources reports. During the CEO report, the Commissioners gave feedback to Dr. Ehrlich regarding new data tied to True North strategic goals, which is now included in the CEO report. The committee reviewed a presentation on the new ZSFG True North metrics, which are reported on each quarter. As expected, the ZSFG team has developed thoughtful goals and metrics to push the hospital forward in its evolution. During the Medical Staff Report, the committee recommended that the full Commission approve the Laboratory Medicine Rules and Regulations, which are on the Consent Calendar today. In closed session, the committee approved the Credentials Report and the PIPS Minutes report.

8) CONSENT CALENDAR

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

- **October Monthly Contracts Report**
- **Request for approval of a new Grant Agreement with Tides Center for Delivering Innovation in Supportive Housing (DISH) a project of Tides Center to create a Peer Led Overdose Prevention Educator program that focuses on reducing fatal overdoses in Permanent Supportive Housing sites in San Francisco. The total proposed agreement amount is \$4,091,846 which includes a 12% contingency for the term of 08/01/2024 through 07/31/2029 (5 years).**
- **ZSFG Policies and Procedures:**
 - Request for approval of the following ZSFG-related item, which was recommended for approval by the ZSFG JCC at its September 24, 2024 meeting
 - Laboratory Medicine Rules and Regulations

9) OTHER BUSINESS:

This item was not discussed.

10) ADJOURNMENT

The meeting was adjourned at 5:52pm.