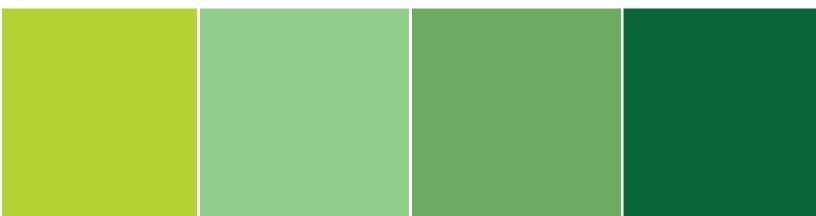
SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH





ANNUAL REPORT FY 2020-2021





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

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

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

SFDPH's Mission, Vision, and Five Strategic Priorities were presented to the Health Commission on January 7th, 2020.



San Francisco Department of Public Health 101 Grove Street San Francisco, CA 94102

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Message from the Director

Grant Colfax, MD

The San Francisco Department of Public Health's (DPH) Annual Report for Fiscal Year 2020-2021 captures what was once again a rollercoaster of a year. San Francisco has continued to be a national and global model in its response to the coronavirus pandemic (COVID-19). Despite multiple COVID surges leading to the reimplementation of societal restrictions, the year saw the release, and incredibly successful distribution, of several highly effective and safe vaccines. At the end of the fiscal year, the City's vaccination rates were among the highest in the nation and the world, with 76% having completed their initial vaccine series and over 80% of eligible San Franciscans having received at least one vaccine dose. Between Zuckerberg San Francisco General Hospital (ZSFG) and DPH neighborhood clinics, the San Francisco Health Network (SFHN) delivered over 200,000 of the more than one million vaccines administered in San Francisco.

The vaccine is the most important tool there is to battle the pandemic. Getting people protected from this virus has been a top priority of the Department and the City.

The City's response has followed the science, data, and facts every step of the way. DPH and other City agencies have put vulnerable populations at the forefront of our response, and we recognize there is more work to do to get as many residents vaccinated as possible, especially in communities disproportionately impacted by COVID-19 and where there are lower vaccination rates. Our DPH team has managed the pandemic with dedication, compassion and excellence all while continuing to provide world class health care.

Even during a pandemic, we have responded to other public health challenges, including a worsening overdose epidemic, climate driven hazard events like wildfire smoke, and rising AntiAsian violence. In winter 2020, DPH released its Racial Equity Action Plan (REAP), which is the Department's strategic plan to create a culture of equity and inclusion for its own staff, which will in turn, improve the way it delivers services to all San Franciscans. The Department has been working on equity for many years, but 2021 has been a time when, together, we have started a new chapter of rededication and shared commitment to advance racial equity.

Finally, this fiscal year marked another year of the Behavioral Health System's transformation. Despite the COVID-19 pandemic stretching public health and health care resources, and with the growing mental health and substance use challenges for San Franciscans, the City took early steps to launch key Mental Health SF initiatives. This included launching the Street Crisis Response Team, establishing the Office of Coordinated Care, expanding residential care and treatment by making new beds available, and initiating a Mental Health Service Center. The City's historic and unprecedented investment in behavioral health services will propel our ability to address the challenges faced by people experiencing homelessness who also have behavioral health challenges.

As our COVID-19 response enters its third year, the Department's work will remain as important as ever. There is no question about it; we are definitely not in normal times. By working together, we will meet and overcome these challenges. Everyone at the DPH is essential to our success. I thank all of our dedicated staff, community and city partners, and the Health Commission for their contributions, partnership, and service to the health of San Francisco.

Grant Colfax, MD Director of Health



Message from the Health Commission President

The Health Commission remains deeply grateful to Department of Public Health (DPH) staff for their heroic contributions to San Francisco's extensive and effective COVID-19 response, while maintaining health delivery services through the San Francisco Health Network, and core public health functions through the Population Health Division.

Under the effective leadership of Dr. Grant Colfax, DPH Director of Health, Dr. Susan Philip, San Francisco Health Officer, and Dr. Tomas Aragon, former San Francisco Health Officer, the DPH utilized its vast and multifaceted expertise to deliver the most effective COVID-19 response among major U.S. cities through prevention, treatment, and support services. The Health Commission recognizes that the success of these efforts was made possible by the bold leadership of Mayor London Breed and the Board of Supervisors, as well as the cooperation and sacrifice of the people of San Francisco.

The DPH and its community based organization partners provided an incredible array of COVID-19 related services to the San Francisco community, including: staffing Quarantine and Shelter-in-Place hotels; partnering with impacted communities to plan prevention messaging, treatment, and vaccine sites; developing health orders and monitoring businesses' compliance; collecting and analyzing case and vaccination data in order to direct resources to the most impacted communities; recruiting and training case investigators; expanding contracts with community based organizations to support the city's COVID-19 related activities; providing expanded food security services throughout the city; and providing medical treatment for individuals with COVID-19.

The Office of Health Equity staff and Equity Leaders, under the leadership of Dr. Ayanna Bennett, Director of the DPH Office of Health Equity, finalized the Department's robust Racial Equity Action Plan. The 133-page document outlines detailed actions to address the many health disparities and socioeconomic inequities that persist within our diverse communities and workforce equity issues, which directly impact the Department's 8,000 employees. The plan also requires education, training, and action by the Health Commission, including monitoring the DPH implementation of the plan on a quarterly basis. The plan represents the DPH's steadfast commitment to improve the health and wellbeing of all the city's residents.

The Health Commission extends its deep appreciation to every courageous DPH staff member for their extraordinary work during this challenging year. Each individual made a difference and helped the DPH provide broad and impactful spectrum of assistance to support and improve the health and wellbeing of all San Franciscans.

The Health Commission looks forward to our continued work with Mayor Breed and the Board of Supervisors to address San Francisco's most challenging public health issues such as mental health, substance use and overdose deaths, and people experiencing homelessness. We also recognize the vital partnerships between the DPH and other City Departments, non-profit organizations, and communities to protect the health of all San Franciscans.

Warm regards, Dan Bernal Health Commission President

ABOUT DPH

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

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

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

POPULATION HEALTH DIVISION



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

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

SAN FRANCISCO HEALTH NETWORK





San Francisco Health Network

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

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

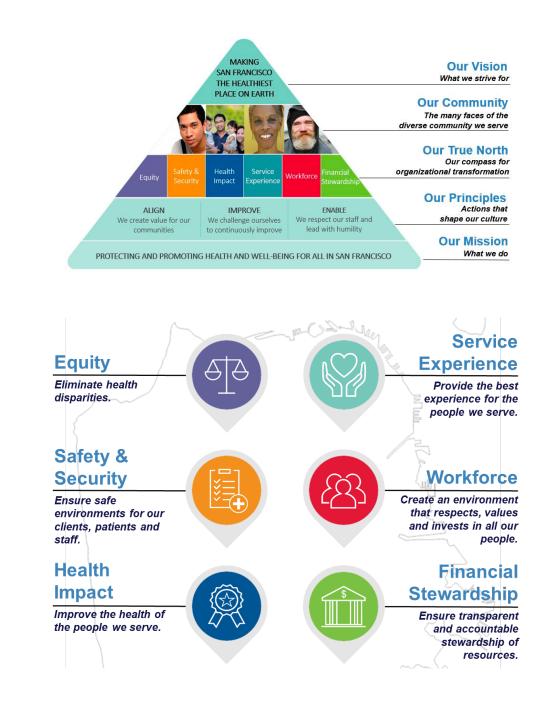
To learn more about San Francisco Health Network and the services we provide, please visit: www.sfhealthnetwork.org.

TRUE NORTH

DPH TRUE NORTH TRIANGLE

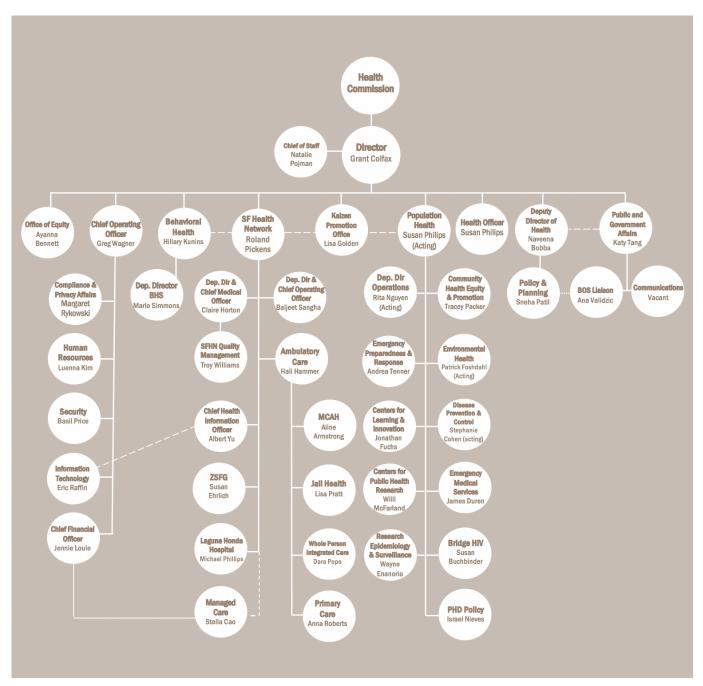
SIX TRUE NORTH PILLARS

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



ORGANIZATIONAL CHART

SFDPH's dedicated staff help realize the organization's mission of protecting and promoting the health of all San Franciscans. The San Francisco Health Network integrates our delivery system and focuses on providing high quality health care services. The Population Health Division leads SFDPH efforts in health protection, promotion, prevention, and disaster readiness. As part of the Department's Racial Equity Action Plan, demographic information for Senior Leadership is collected annually and included in the SFDPH Annual Report.

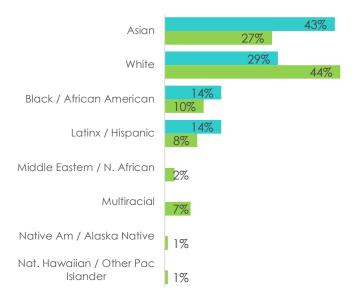


*Last updated on June 30th, 2021

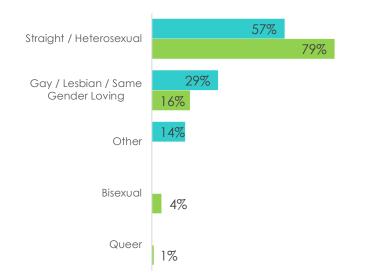
HEALTH COMMISSION & SENIOR LEADERSHIP DEMOGRAPHICS

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

RACE & ETHNICITY



SEXUAL ORIENTATION

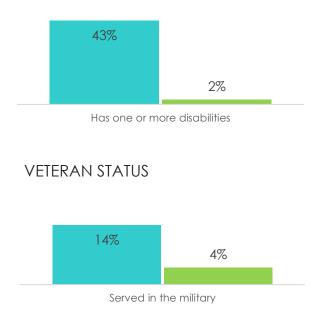


- Health Commission (n=7)
- Senior Leadership (n=122)





DISABILITY STATUS



*Defined as organizational chart leadership, MEA management, and medical and nursing directors.

SF HEALTH COMMISSION

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

The Health Commission's committee structure consists of:

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

The Health Commission also participates in the following external bodies:

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



DAN BERNAL, PRESIDENT

Commissioner Bernal is Chief of Staff for Speaker of the House Nancy Pelosi. He has dedicated his career to public service, having served in the White House under President Bill Clinton and as a presidential appointee at the U.S. Department of Education.

As Congress debated the Affordable Care Act, he supported Speaker Pelosi's efforts to build support for the legislation in California by convening diverse stakeholders and coordinating activities among Bay Area Members of Congress.

He continues to serve as a valuable resource to the California Democratic Congressional Delegation, key policy makers, and advocates in the fight to protect and improve the Affordable Care Act. He was appointed to the Health Commission in 2017.

*Section 4.110 of the City Charter



LAURIE GREEN, M.D., VICE PRESIDENT

Commissioner Green has delivered two generations of babies and practiced medicine in San Francisco for 40 years. In 1989 she co-founded Pacific Women's Obstetrics & Gynecology Medical Group, the second all-female OB/GYN practice in San Francisco, providing state-of-the-art, empathic obstetrics and gynecology care in a womanrun environment.

Dr. Green is also the Founder, President, and Chair of the Board of The MAVEN Project, which engages physicians to volunteer their clinical expertise via telehealth technology to medically under-resourced communities in the Bay Area and across the country.

Commissioner Green was appointed to the Health Commission in 2018 and is a member of the Joint Conference Committees of Laguna Honda Hospital and Zuckerberg San Francisco General Hospital, where she trained.



EDWARD A. CHOW, M.D.

Commissioner Chow is an internal medicine specialist who has been in practice in San Francisco for over fifty years. He is President and CEO of Jade Health Care Medical Group, affiliated with the Chinese Hospital Health System. Previously he was Executive Director of the Chinese Community Health Care Association, and Chief Medical Officer of the Chinese Community Health Plan.

Commissioner Chow currently chairs the Zuckerberg San Francisco General Hospital Joint Conference Committee; he is also a member of the Finance and Planning Committee and Laguna Honda Hospital Joint Conference Committee. He was appointed to the Health Commission in 1989.



SUSAN BELINDA CHRISTIAN, J.D.

Commissioner Christian is an Assistant District Attorney in San Francisco. She is currently a cochair of District Attorney Boudin's Community Health Advisory Committee. From 2012 through 2019, she was assigned to the Behavioral Health Court—a collaborative, multidisciplinary court providing treatment and rehabilitation for people whose criminal justice involvement is tied to behavioral health disorders.

In 2012, she was appointed to the San Francisco Human Rights Commission, where she served four terms as Commission Chair and worked with the Mayor's Office to create and implement a pilot program for Implicit Bias trainings for City employees.

Commissioner Christian is a member of the ZSFG Joint Conference Committee and the Community & Public Health Committee. She was appointed to the Health Commission in 2020.



CECILIA CHUNG

Commissioner Chung is nationally recognized as a civil rights leader, advocating for HIV/AIDS awareness and care, LGBT equality, and prisoner rights.

She is the Senior Strategist of Transgender Law Center and has served on a number of planning bodies, which includes the San Francisco HIV Health Services Planning Council, Transgender Community Advisory Board for UCSF TRANS and the Visioning Change Initiative of the California HIV/AIDS Research Program. She is a past member of the Presidential Advisory Council on HIV/AIDS.

Commissioner Chung chairs the Finance and Planning Committee and is a member of the Community and Public Health Committee. She was appointed to the Health Commission in 2012.



SUZANNE GIRAUDO, PH.D.

Dr. Giraudo is a psychologist and is the Clinical Director of the California Pacific Medical Center Department of Pediatrics Child Development Center.

In addition to her clinical expertise, Dr. Giaraudo's professional background includes development, administration, and supervision of pediatric clinical programs, grant administration, and teaching. She is the founder and trustee of the DeMarillac Academy, a Catholic school located in the Tenderloin, serving underserved children and families.

Commissioner Giraudo is chair of the Community and Public Health Committee and represents the Health Commission on the San Francisco General Hospital Foundation. She was appointed to the Health Commission in 2019.



TESSIE M. GUILLERMO

Commissioner Guillermo is the Chair of the Board of Directors of CommonSpirit, the largest national non-profit health system in the United States. She is the former President and CEO of ZeroDivide, a philanthropy and consultancy that developed innovative digital equity strategies in support of lowincome communities.

Commissioner Guillermo was the founding CEO of the Asian and Pacific Islander American Health Forum, leading this national minority health policy/advocacy organization for 15 years.

Commissioner Guillermo was appointed to the Health Commission in 2018 and chairs the Laguna Honda Hospital Joint Conference Committee.



MARK MOREWITZ, MSW, HEALTH COMMISSION SECRETARY

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

FY20-21 FEATURES & HIGHLIGHTS

IMPLEMENTATION OF MENTAL HEALTH SAN FRANCISCO BEGINS

On December 6, 2019, the San Francisco Board of Supervisors passed an ordinance to establish Mental Health San Francisco (Mental Health SF). Mental Health SF aims to reform San Francisco's behavioral health system by creating new and increased services, infrastructure and accountability. This initiative focuses on serving people who are homeless with serious mental illness or substance use disorders and prioritizes getting people off the street and into care.

Despite the COVID-19 pandemic stretching public health and health care resources, and with the growing mental health and substance use challenges among San Franciscans, the City still took early steps in launching key Mental Health SF initiatives in FY 2020-21. These steps included the Street Crisis Response Team, the Office of Coordinated Care, expansion of residential care and treatment by making new beds available, and the initiation of a Mental Health Service Center – see figure below for more info on these initiatives. The Ordinance also established the <u>Mental Health SF</u> <u>Implementation Working Group</u> to advise policymakers on these different initiatives, which launched in December 2020.

Proposition C, approved by voters in 2018, has provided a historic and unprecedented opportunity to invest in behavioral health services and support the implementation of Mental Health SF. To kickstart the implementation of Mental Health SF, DPH received an initial, ongoing investment of \$16.2 million in FY 20-21 through Proposition C funds. In addition, approximately \$93.1 million in Prop C funds are being allocated to DPH across FY 21-22 and FY 22-23 to expand behavioral health services, and \$130 million in one-time funding was allocated to acquire sites for residential care and treatment programs across the FY 20-23 budgets.

These new investments build on existing department resources and staffing to support the implementation of Mental Health SF and will propel our ability to address the challenges faced by people experiencing homelessness who also have behavioral health challenges.

OFFICE OF	STREET CRISIS	MENTAL HEALTH	NEW BEDS & FACILITIES
COORDINATED CARE	RESPONSE TEAM (SCRT)	SERVICE CENTER	
Provide case management and linkage services to clients. Streamline and organize the delivery of mental health and substance use services across the City.	Provide interventions and connections to ongoing care for people who experience behavioral health crises on the streets of San Francisco.	Expand Behavioral Health Access Center (BHAC) hours and other improvements - a first step toward the creation of a centralized drop-in Mental Health Services Center.	Residential care and treatment expansion – Prop C funding supports approximately 350 additional beds.

MENTAL HEALTH SF (MHSF) COMPONENTS

WHAT IS PROPOSITION C - OUR CITY, OUR HOME FUNDING?

In 2018, San Francisco voters approved Proposition C (Prop C), which imposed additional business taxes to create a dedicated fund (the Our City, Our Home Fund) to support services for people experiencing homelessness and to prevent homelessness. Under the measure, which is expected to raise \$250 million to \$300 million per year, at least 25% of funds are required to go to the Department of Public Health (DPH) for the creation of new mental health services designed for people experiencing homelessness who are severely impaired by behavioral health issues. The overarching goals of the Our City, Our Home Fund are to:

- Permanently house 4,000 adults, families, youth
- Provide behavioral health services for 4,500 people
- Prevent homelessness for 7,000 people
- Create emergency shelter and drop-in hygiene programs, creating 1,000 placements.

DPH RACIAL EQUITY ACTION PLAN 2021-2023

In winter 2020, DPH released its Racial Equity Action Plan (REAP), the Department's strategic plan to create a culture of equity and inclusion for its own staff, which will in turn, improve the way it delivers services to all San Franciscans. Citywide, all agencies are completing a REAP focused on improving equity for the city workforce. This plan aligns with DPH's ongoing commitment, since the early days of the Black/African American Health Initiative, to include workforce equity in our efforts. Over the last five years, with equity as a departmental priority, DPH has focused on adding leadership and processes to advance equity in clinical care and services and has seen some success. For example, the department has more than 700 leaders who have taken an intensive. 32-hour cultural humility class, and expect them to be key resources for us all as the Department implements the goals in this plan.

STRATEGY

As public health and health care professionals, DPH sees firsthand the unacceptable, unconscionable impact of racism on the health outcomes for its patients and in the communities it serves. The DPH's workforce is not immune to this negative impact. The REAP outlines DPH's effort to eliminate the racism that



"Illustration" by Lyubov Ivanova

its own staff experience. Over the next three years, the Department will hold itself accountable to strengthening its human resources policies so that it can improve diversity and inclusion of staff, and on fostering an inclusive, antiracist workplace culture.

The plan is a living document, and it will be modified and updated as DPH refines its efforts. The plan focuses on seven areas: hiring, promotion, discipline, equitable leadership, mobility, organizational culture, and Commission leadership. The main objectives will be to:

- Simplify the hiring process;
- Better recruit a diverse pool of candidates for positions;
- Create systems to alert us to potential bias in hiring, promotion, and discipline; create policies to affirmatively prevent bias wherever it is discovered; and
- Work with the Health Commission to hold DPH leaders and staff accountable for advancing equity and building anti-racist approaches into all its work and workplaces.

DPH has been working on equity for many years but 2021 was a time when, together, it started a new chapter of rededication and shared commitment to advance racial equity. The annual report on the progress of the REAP activities and goals will be released in Spring of 2022.

Please click here to view the full DPH Racial Equity Action Plan, 2021-2023.

"Not everything that is faced can be changed. But nothing can be changed until it is faced,"

– James Baldwin

DPH'S RESPONSE TO THE COVID-19 GLOBAL PANDEMIC

Throughout the 20-21 fiscal year, San Francisco continued to be a national and global model in its response to the coronavirus pandemic (COVID-19). The year was once again a rollercoaster which saw multiple COVID surges along with the attendant reimposition of societal restrictions. Most importantly, several highly effective and safe vaccines were released, which have become the most powerful tool in the fight against the virus.

The City's response has continued to follow the science, data, and facts every step of the way. The San Francisco Department of Public Health (DPH) and other City agencies have put vulnerable populations at the forefront of its response, but there is more work to do to get as many residents vaccinated as possible, especially in communities disproportionately impacted by COVID-19 and where there are lower vaccination rates.

The following provides an overview of the of the response during the 2020-21 fiscal year, along with highlights describing the work DPH has led and/or been involved with in the City's response to the pandemic. A timeline of the major milestones for the fiscal year is provided to the right.

SUMMER & WINTER SURGES

On July 6, 2020, the SF Department of Emergency Management (DEM), the DPH, and the San Francisco Human Services Agency (HSA) transitioned to the COVID Command Center (CCC), a revised and unified command structure to continue managing the City's response to the COVID-19 pandemic. This transition coincided with the onset of the 2020 summer surge of cases and hospitalizations across San Francisco, which delayed of the City's initial phased reopening process.

The surge was not unique to SF, with cases rising throughout the region, state, and country. While the City experienced a brief reprieve during the fall, which allowed for a loosening of restrictions and some schools reopening for in-person learning, the wintertime brought the City's 3rd major surge. This surge was the most serious to date and required a renewed commitment from residents to take protective action along with a roll back of allowed activities. Fortunately, due to the actions of residents and the City's response efforts, the local health system was not overwhelmed.

	 Onset of Summer Surge (2nd surge)
JUL	 (7/6) SF's emergency response efforts to COVID-19 restructured into COVID Command Center (CCC) with DEM, DPH, and HSA as the unified commanders. (7/7) SF Reopening Paused
SEP	 Schools allowed to open for in-person instruction with approval.
NOV	 Start of Winter Surge (3rd surge) – the most serious yet during the emergency. Society reopening rolled back.
DEC	(12/16) SF Administers first vaccination
JAN	 (1/21) One-year anniversary of COVID-19 emergency response mobilization. (1/22) In partnership with UCSF Health, SF launched the first of three planned high- volume vaccination sites at the City College of SF, Ocean Avenue Campus
APR	 Vaccine eligibility expanded to the 16+ population
JUN	 Phase 2 of COVID response begins.







doing your part to fight COVID 19

VACCINES

On December 11, 2020, the FDA issued an Emergency Use Authorization for the Pfizer-BioNTech COVID-19 Vaccine, and on December 16, the first dose of the vaccine was administered in the City at Zuckerberg San Francisco General Hospital (ZSFG).

The rapid development of multiple, highly effective and safe vaccines and their distribution is unlike anything this country or San Francisco has ever undertaken. Well before the federal government approved vaccines for widespread use, the City developed a robust, low-barrier vaccine distribution system to facilitate vaccination with a focus on ensuring access to communities disproportionally affected by COVID-19. The vaccine was offered through a network of high-volume vaccination sites, community access sites - in partnership with trusted community organizations, mobile vaccination teams, and pharmacies.

The City's vaccination rates are among the highest in the nation and the world. At the end of the fiscal year, over 80% of eligible San Franciscans have had a shot, including nearly 90% of people over the age of 65. Between ZSFG and neighborhood clinics, the San Francisco Health Network (SFHN) delivered over 200,000 of the more than one million shots administered.

The vaccine is the most important tool there is to fight the pandemic, and getting people protected from this virus has been a top priority of the Department and the City.



Mayor London Breed celebrating the demobilization of Moscone as the COVID Command Center.

HIGHLIGHTS FROM THE COVID RESPONSE

VACCINATION STRATEGY AND IMPACT

On December 15th, 2020, the City and County of San Francisco (CCSF) received the first shipments of COVID-19 vaccine after nearly a year of managing multiple COVID-19 cases and hospital surges. This was the beginning of the SF COVID Command Center Vaccine Branch's historic, multi-disciplinary effort to vaccinate San Francisco, The effort was mobilized by the principles of equity, speed, and partnerships. The Vaccine Branch relied on a three-pronged strategy that enabled a system capable of up to 20,000 vaccinations per day, maximized access, and ensured equitable distribution of COVID-19 vaccine to communities hardest hit by COVID-19. This multipronged strategy included:

- High-volume vaccine sites, in partnership with large health care systems serving the public and their own patients
- Community vaccine access sites, including community clinics, neighborhood sites, and mobile vaccination teams



 Pharmacies, including retail pharmacies (CVS, Rite Aid, Safeway, and Walgreens), as well as DPH-supported pharmacy partnerships.

By July 2021, high-volume vaccine sites had administered nearly 500,000 vaccination doses, with the San Francisco Health Network (SFHN) administering nearly 220,000 doses. The SFHN, which is directly responsible for the health care of 10% of the City's population, has administered over 20% of the vaccination doses, not only serving its patients, but also prioritizing patients who reside in low-income communities.

The Vaccine Branch's seven neighborhood sites administered nearly 50,000 vaccination doses across neighborhoods most impacted by COVID-19, and the Mobile Vaccine and Whole Person Integrated Care teams held nearly 500 onsite vaccine events, administering nearly 15,000 doses to residents who may not be reached by high-volume, clinic, and neighborhood sites.

As a result of this strategy, San Francisco became the first major US city to administer first doses to over 80% of the eligible population. From early in the vaccination roll-out, we have maintained high levels of vaccinations (at or above city-wide rate) in neighborhoods prioritized by high historical case rate and social vulnerability.

VACCINE BRANCH SPECIAL POPULATIONS TEAM



Beginning in March 2021, the San Francisco COVID-19 Command Center's Vaccine Branch Special Populations Team began to provide and coordinate COVID-19 vaccinations for people experiencing homelessness (PEH). The team used a client-centered, harm reduction, and trauma-informed approach similar to traditional street outreach. Team members are willing to have open and honest conversations ranging from substance use, life on the streets, and COVID-19 health. The model also included implementing various strategies for reaching PEH, including:

• **Easing access**: The team conducted pop-up style events at existing social service touchpoints in collaboration with those CBOs, weekly and asneeded street outreach paired with vaccinations, regular and on-going vaccination at housing sites (e.g., shelters, permanent supportive housing) and on-call vaccinations.

- Addressing hesitancy: Providing Q&A sessions for service provider staff and clients, along with training and renumerating shelter clients to be peer vaccine ambassadors.
- Addressing competing priorities: Providing referral and vaccination incentives in the form of gift cards.
- Partnering with community: The success of these efforts was made possible by collaborating with various community-based organizations including the SF Community Health Center, Glide, UCSF, Code Tenderloin, SF Street Outreach Services, Homeless Youth Alliance, SF Human Services Agency, the United Council of Human Services, SF AIDS Foundation, and SF Community Benefit Districts.

As on late 2021, the vaccination rate for unsheltered PEH was nearly 60 precent. This rate has exceeded rates achieved in other jurisdictions, and speaks to the tremendous, multipronged efforts by the department. While there are still many challenged to improving PEH vaccination rates, the SFDPH remains committed to reducing barriers to meeting the many unmet needs of unsheltered San Franciscans and bridging the gap between the epidemics of COVID-19, substance-use related overdose deaths, and homelessness.

PERSONS EXPERIENCING HOMELESSNESS



The City developed and implemented a city-wide public health response focused on Persons Experiencing Homelessness (PEH). This work has been led by a multidisciplinary team, and has included the following key components:

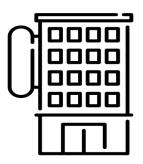
- Surveillance: Robust and active surveillance of cases including daily case reviews and screening testing in open congregate dormitory shelters;
- Investigation: Case/outbreaks investigation to determine drivers of transmission;

- Response: Case/outbreak response including rapid isolation to interrupt transmission and recommendations to improve prevention/mitigation efforts; and
- Vaccinations: Refer to the preceding section for more information about this work.

Critical to the success of this work has been partnering with the DPH's Community Health and Equity Program (CHEP), WPIC's street medicine/shelter health programs, Healthy Streets Operations Center (HSOC), Department of Homelessness and Supportive Housing (HSH), and CBO homeless service providers. Since March 2020, the response has been successful in preventing major outbreaks in shelters and encampments, and overall, throughout the pandemic, low rates of hospitalizations and deaths have been observed among PEH.

Despite these successes, this population still remains less vaccinated than the overall population and is still at risk for poor outcomes from COVID-19. Moving forward, continuing effective prevention and mitigation of encampments, shelters, and permeant supportive housing buildings, in combination with other public health work (i.e., overdose prevention, health access, Hep C/HIV prevention), will be key to protecting this vulnerable population.

COVID-19 ALTERNATIVE HOUSING



The COVID-19 Alternative Housing Program provided emergency, temporary housing and shelter options for individuals directly affected by the virus, or those who were are at high risk of serious illness if they contracted it. The two types housing supports were Shelter in Place (SIP) facilities and Isolation and Quarantine Hotels (I&Q).

 SIP facilities provided people experiencing homelessness (PEH) a safe and sheltered environment to social distancing. Teams of clinical DSWs worked at the sites to provide wraparound services for medication management, substance use support, and discharge coordination. Through June 2021, the SIP program provided temporary housing for 3,864 individuals in hotels/trailers and 1,833 in congregate sites. Many of these guests have transitioned into permanent housing. As the program slowly demobilizes, the City continues to seek permanent housing options for the remaining clients.

I&Q hotels provided individuals positive for COVID-19 or with a confirmed exposure the ability to isolate away from at-risk family members. Many of San Francisco's most vulnerable populations reside in dense housing with multi-generational families and sometimes even share bathrooms among multiple family units. Individuals living in these environments ran the risk of increased spread within their homes. I&Q hotels provided these highrisk individuals an alternate living space during their quarantine period.

Sites offer 24/7 clinical support with a team of health workers, nurses and physicians managing the physical and behavioral health needs of these clients. This enabled those with mild to moderate symptoms to avoid hospitalization or receive timely transfer to a higher level of care if needed. During the peak, the city operated eight I&Q hotels and were able to support over 650 clients monthly. Overall, the I&Q program saw more than 4,419 admissions during the operational phase thru June 2021.

COMMUNITY BRANCH RESPONSE HUBS



The Community Branch of the COVID Command Center mobilized teams to address health disparities surfacing throughout the pandemic to support communities most impacted by the virus. The Community Branch developed hubs to support residents in priority settings which included:

- Schools Hub
- Faith Based Organization Hub
- Community Based Organization (CBO) Hub
- Workplaces Hub
- Senior and Residential Hub
- People Experiencing Homelessness (PEH) Hub
- SRO Hub

Since March 2020, these hubs have provided site exposure notification, capacity building, COVID service linkages, and technical assistance on COVID prevention. These efforts are grounded in an equity lens prioritizing key neighborhoods and ensuring that they reach youth, seniors and disability communities, people experiencing homelessness, Black/African American, Latinx/e/a/o, Indigenous, API, and LGBTQ communities. Through this work, the DPH has strengthened relationships and trust with communities across the city.

COMMUNITY WELLNESS RESPONSE



In December 2020, the DPH partnered with and funded nine community-based organizations (CBOs) and a CBO training center to provide COVID-19 prevention, mitigation, and wellness services to racial/ethnic populations in priority neighborhoods that have the greatest COVID-19 disparities and vulnerabilities due to structural barriers to health.

Known as the Community Wellness Response, the CBOs, rooted in their communities, provide community-led, person centered, culturally/ linguistically competent, low barrier COVID-19 services such as community outreach, neighborhood testing and vaccination site support, case investigation/contact tracing, and community wellness services (isolation, quarantine, and recovery support).

These CBOs have conducted countless hours of community outreach to ensure their neighborhood residents stay informed about COVID-19 prevention and vaccination education and messaging, as well as supported and/or hosted neighborhood testing and vaccination events weekly, in addition to providing support for isolation and quarantine to people with COVID-19 and their families.

Funded CBOs included: Rafiki Coalition (Bayview-Hunters Point), FACES SF (Sunnydale/Visitacion Valley), Mission Neighborhood Health Center (Excelsior), Mission Language and Vocational School/Latino Task Force (Mission), SF Community Health Center (Tenderloin), SW Community Corp/IT Bookman (OMI), Booker T. Washington (Western Addition), Chinese Hospital (Chinatown), Urban Services YMCA (Potrero), and SF AIDS Foundation (CBO Training Center).

EQUITY & NEIGHBORHOODS TEAM



In the Fall of 2020, the Equity & Neighborhoods (E&N) team was created to bridge-build between the COVID Command Center (CCC) and community, and to apply an equity lens to the CCC's operational teams. The E&N team's work was informed by a *Community First* approach, which prioritizes community partnerships in the consideration of equity and resource allocation related to service delivery design, neighborhood strategies, and ensuring culturally competent, population relevant, and linguistically appropriate support. By engaging in authentic community partnerships, the health department can implement system's improvements to address the needs of those most impacted by the pandemic.

This approach was outlined by the Director of the Office on Racial Equity, Shakirah Smiley and implemented with the support of the Director of Invest in Neighborhoods, Diana Ponce de Leon.

One key and innovative aspect of this approach/service delivery model is the communication component, which prioritizes clear, timely, and transparent communication with community partners. One of the team's major achievements has been supporting the Latino Task Force, which is community-led and driven implementation of the *Community First* approach.

COVID-19 TESTING



The COVID-19 Testing Team quickly operationalized and expanded testing access by providing over 1,200 testing events to support community and outbreak testing. The Team, which had a core number of staff that never numbered more than 12, worked around the clock with the Public Health Lab (PHL) and entered into contracts with external vendors (Color, Virus Geeks, CityHealth, and Labcorp) to ensure that COVID-19 testing was available and accessible to the San Francisco community. The Team worked closely with community partners, not only to make testing available and accessible, but also to provide education and outreach around COVID-19. Below are some highlights of the work:

- Increased testing from 500 tests per day to 3,500-4,000 tests per day;
- Increased the number of sites from one site (Embarcadero) to between 10-15 community testing sites per week and two high volume sites;
- Organized and coordinated with Community partners to provide over 750 testing events;
- Provided the testing and results for over 500 outbreak testing events;
- Wrote the Test and Respond strategy and were the first to implement the strategy;
- Called over 500 patients to provide results and referral to I/ Q where necessary;
- Worked with SFHN's Primary Care to set-up and operate test sites; and
- Supported PHL to increase their capacity to 1,000 tests per day.

EMERGENCY RESPONSE COMMUNICATIONS



In 2021, The City's emergency communications team won a SF Design Week Award for Civic Design for its COVID response work. The Civic Design award honors thoughtful designs that ensure interaction between government and citizens is accessible, easy and effective. The San Francisco Design Week Awards is an international design competition and is considered the premier gathering of the world's most active design community. The entries for the awards were judged by a jury composed of leading Bay Area design professionals.

When San Francisco's first in the nation stay home order was issued, information about COVID had to be communicated immediately and clearly. Icons were chosen that were clear, recognizable, universal, and accessible to most San Franciscans, 40% of whom speak languages other than English at home. San Francisco's consistent design language helped reassure people that information was from official sources. Bold, high contrast colors were chosen that kept the messages simple. People were sent to SF.gov, a new, mobile-responsive website that could continuously be updated as new information became available. Printed and digital graphics were created in all languages, and templates were developed so the work could be quickly scaled and used by others. DPH's emergency outreach team and city partners posted the information in all SF neighborhoods. The information was clear, recognizable, provided in multiple languages, and it helped the City save lives.

TRANSITION PLANNING FOR A HEALTHY WORKFORCE & CITY



Balancing the return of Disaster Service Workers (DSW) to home departments while maintaining the City's COVID response operations drove the Department's COVID Command Center (CCC) demobilization and DSW deactivation efforts. Over the spring of 2021, the DPH Unified Commander, CCC Operations Manager, COVID Task Force Leads, and dozens of operational leads representing vaccine, testing, equity and neighborhoods, logistics, and several other service lines, contributed to the three areas of planning that ensured a smooth transition:

- Assuring support and clear communications to over 700 deactivating DSWs. An anonymous questionnaire was used to capture staff concerns to better inform deactivation strategies, and a weekly newsletter was disseminated to provide information.
- 2. Identifying staff to support the City's ongoing COVID response. Multiple meetings with the CCC service lines, City departments and the Mayor's Office led to a plan whereby quarterly needs were projected and filled with existing DSWs, TEX hires, and contractors.
- Creating standard operating procedures for the City's COVID response during a surge or for further demobilization. All DPH service lines described how their operations and staffing would be impacted by increased cases or decreased need for services.

The strategies and steps described above ensured DPH's support of the City's workforce and its transition back to home departments and preparations to keep its residents and workers safe. On June 30, 2021, we were able to celebrate the efforts of all of the CCC staff on their work to facilitate a smooth transition with the Mayor and DPH Director.

ENTERING NEW PHASE OF PANDEMIC RESPONSE

At the end of the fiscal year, the City embarked to fully reopen with the rest of the state. San Francisco's reopening and recovery is, in large part, due to the availability and successful rollout of vaccines in San Francisco. The effectiveness and availability of COVID-19 vaccines dramatically drove down case rates, hospitalizations and community spread.

With this reopening, the City response transitioned from the COVID Command Center (CCC) structure to a city-coordinated but department-led pandemic response. At DPH, this meant transitioning to the Departmental COVID Task Force (DCTF) – this structure aims to balance the anticipated needs of the COVID response with the growing needs of the City as it reopens. As the City entered the "new normal", DSWs were called back to help reopen their departments. With the transition, the City officially closed the COVID Command Center at Moscone shortly after the fiscal year. After serving as the headquarters for seventeen months, holding 500 plus pandemic response workers at its peak, the keys to Moscone were handed back to the city.

CONTINUING DPH'S KEY FUNCTIONS WHILE RESPONDING TO A PANDEMIC

Despite a massive activation of staff that impacted all areas of the Department, the DPH continued to carry out key functions necessary to protect and promote the health of all San Franciscans. This included activities ranging from providing necessary care to our patients across the SF Health Network to moving forward with key efforts like the transformation of our behavioral health system and establishment of the Office Health Equity.

Our Population Health Division continued basic services such as conducting environmental health inspections, preventing, and surveilling for communicable diseases, and preparing for climate change-driven hazards like extreme heat and wildfire smoke.

Throughout the pandemic, DPH staff have taken on new roles and stepped-up to take on the work of colleagues who were deployed, often in addition to their existing duties. This flexibility and commitment by staff allowed for these and other key DPH functions to continue.

COVID-19 RESPONSE: KEY METRICS AS OF JUNE 30, 2021

The City's role is to make informed choices based on data, science and evidence in partnership with public health experts, businesses, and the community. San Francisco's health indicators are an important tool to monitor the level of COVID-19 in the community and the ability of our health care system to meet the needs of residents. The Health Indicators monitor cases, hospital systems, testing, contact tracing and personal protective equipment. The following series of data point includes key indicators of the impact of COVID-19 on San Francisco through FY 20/21, along with data points to capture the scope of the response. The complete set of indicators and their statuses can be on the San Francisco COVID-19 Data Tracker.

AREA	DESCRIPTION	METRICS AS OF JUNE 30, 2021	
VACCINATIONS	Getting the COVID-19 vaccine is one of the most important ways to end the pandemic. Research shows it is very effective and safe. DPH strongly recommends all eligible residents to get the vaccine. Data includes all individuals that received at least one dose of the three available vaccines	TOTAL VACCINATION RECIPIENTS • % Administered by DPH % BY RACE/ETHNICITY (SF OVERALL) • Asian • Black or African American • Hispanic or Latino/a • Multi-racial • Native American • Native Hawaiian or Other PI • Other • Unknown • White % BY AGE (SF OVERALL) • 12-17 4.4% (4.3%) • 45-54 • 18-24 7.9% (7.9%) • 55-64	649,301 17% 35.2% (33.7%) 3.9% (5.2%) 14.6% (15.6%) 1.8% (5.2%) 0.2% (0.2%) 0.4% (0.4%) 4.9% (0.7%) 3.5% (0%) 35.6% (39.1%) 15.1% (14.6%) 14.0% (12.8%)
		• 25-34 22.2% (25.9%) • 65-74 • 35-44 18.2% (17.5%) • 75+	11.3% (9.4%) 7.9% (7.7%)
CASES	To monitor how the COVID-19 virus is spreading in our community, San Francisco public health officials are closely tracking the total number of confirmed COVID-19 cases, the total number of COVID-19 deaths, and the 7- day average of new cases confirmed each day. Case information is based on confirmed positive laboratory tests reported to DPH.	TOTAL CONFIRMED CASES% BY RACE/ETHNICITY (SF OVERALL)• Asian• Black or African American• Hispanic or Latino/a, all races• Multi-racial• Native American• Native Hawaiian or Other PI• Other/Unknown• White% BY GENDER (SF OVERALL)• Male• Trans Male• Female• Trans Female• Unknown% BY AGE (SF OVERALL)• <1818-3024.2%(13.4%)• 41-5014.8%(13.4%)• 81+	7.6% (10.6%)
		CASES BY PEOPLE EXPERIENCING HOMELESSNESS	1.8% (0.90%)

AREA	DESCRIPTION	METRICS AS C	OF JUNE 30, 2021	
	The deaths reported here are suspected to be associated with COVID-19 or have COVID-19 listed as the cause of death. Deaths are reported by medical providers and the medical examiner.	TOTAL DEATHS % BY RACE/ETHNICITY (SF OVERALL) • Asian • Black or African American • Hispanic or Latino/a, all races • Multi-racial • Native American • Native Hawaiian or Other PI • Other/Unknown • White	2	562 7.5% (33.7%) 7.8% (5.2%) 0.8% (15.6%) 0.5% (5.2%) 0.0% (0.2%) 0.7% (0.4%) 3.9% (0.7%) 8.6% (39.1%)
DEATHS		 % BY GENDER (SF OVERALL) Male Trans Male Female Trans Female Unknown % BY AGE (SF OVERALL) <18 0.0% (13.4%) 18-30 0.5% (18.3%) 31-40 1.8% (21.1%) 31-40 1.8% (21.1%) 41-50 3.6% (13.4%) % BY PEOPLE EXPERIENCING HOMELE % BY PEOPLE IN SKILLED NURSING FAULTION (18.3%) 	3 51-60 61-70 1 71-80 1 81+ 5 ESSNESS	0.3% (51%) 0.0% 9.3% (49%) 0.0% 0.0% 6.6% (12.2%) 3.5% (10.6%) 6.4% (6.5%) 7.7% (4.5%) 0.9% (0.90%) 21.5%
TESTING	Testing for COVID-19 is a critical part of San Francisco's response and readiness for reopening. The number of tests collected and the number of new cases per day tell us whether we are succeeding in our efforts to prevent infections and point to where more work is needed to protect the community. The test positivity rate shows the spread of COVID-19 in SF.	TOTAL TESTS Positivity Rate RACE/ETHNICITY Asian Black or African American Hispanic or Latino/a Multi-racial Native American Native Hawaiian or Other PI Unknown White	% TESTS (SF OVERALL) 24.0% (33.7%) 5.5% (5.2%) 11.3% (15.6%) 2.3% (5.2%) 0.3% (0.2%) 0.9% (0.4%) 19.2% (0.7%) 36.4% (39.1%)	2,090,531 2.26% POSITIVITY RATE 1.64% 2.43% 7.48% 1.76% 1.76% 1.78% 2.76% 1.61% 1.36%
	COVID-19 hospitalizations are an important indicator of the spread and severity of COVID-19 in San Francisco. The ability for our hospital system to take on surges in COVID-19 cases is a critical component of SF's response. Tracking hospital capacity enables public health officials to gauge the ability of our health care system to treat severe cases of COVID-19. *Point-in-time count of confirmed and suspect cases (ICU + Acute Care) on June 30, 2021	POINT-IN-TIME COVID-19 HOSPITALIZ/ TOTAL SYSTEM CAPACITY (BEDS) Intensive Care Unit Intensive Care Unit Surge Acute Care Acute Care Surge	ATIONS*	22 individuals 2,447 286 298 1,616 247

AREA	DESCRIPTION	METRICS AS OF JUNE 30, 2021	
ALTERNATIVE SHELTER PROGRAM	The City's response to COVID-19 included an Alternative Shelter Program. This program provided temporary shelter for people experiencing homelessness. The City used hotel rooms, trailers, congregate sites, and Safe Sleep tent sites. These spaces allowed residents to isolate, quarantine, or shelter-in-place. The data presented reflect the total number of people served by the program between March 2020 through June 2021.	 TOTAL GUESTS SERVED IN ALL SITES Guests served in SIP hotels/trailers Guests served in SIP Congregate Shelter Guests served in all I/Q Sites TOTAL CAPACITY FOR EACH PROGRAM AT THEIR HIGHEST CAPACITY SIP hotels/trailers SIP Congregate Shelter Beds I/Q Hotel Rooms and Congregate Beds 	9,093 3,864 1,833 4,419 2,408 1,072 538
SF DEMOGRAPHICS	Rates of vaccinations, testing, cases, and deaths were disaggregated by race/ethnicity, gender, age, and PEH status (when data was available). These rates were compared to each group's overall distribution across San Francisco. If all groups were impacted at the same rate, the percent of the indicator of interest (e.g., cases) would equal the population percentage. When a group's representation for an indicator differs than their overall population distribution, it indicates they are differentially impacted. Race/ethnicity data is from the 2020 Census, and age data is from the 2019 American Community Survey (ACS) 5-Year Estimates. The U.S. Census Bureau runs these data. *ACS does not capture gender identity data	TOTAL POPULATION% BY RACE/ETHNICITY• Asian• Black or African American• Hispanic or Latino/a• Multi-racial• Native American• Native Hawaiian or Other PI• Other• White% BY AGE% BY AGE* <18	874,787 33.7% 5.2% 15.6% 5.2% 0.2% 0.4% 0.7% 39.1% 51% 49% 0.90%

FY20-21 BY THE NUMBERS

In FY 20-21, SFDPH's budget was \$2,775,782,429 which was an increase of \$348,699,387 from the FY 19-20 budget. The General Fund subsidy from the City and County was \$883,580,138 which represents 32 percent of the total budget.

MAJOR INVESTMENTS

The following major investments were part of the DPH and/or the Mayor's budget proposal and were funded in FY 20-21.

\$216 MILLION Continuation and expansion of a comprehensive, datadriven, and public healthfocused response to the ongoing health threats and economic challenges posed by the COVID-19 pandemic.

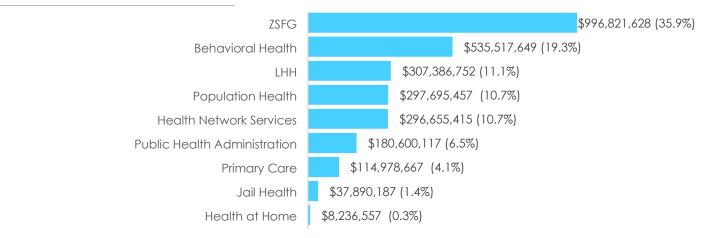


Annualizing to \$38.4 million annually to begin implementing Mental Health SF, a comprehensive reenvisioning of San Francisco's behavioral health system. The Budget also includes onetime investments of \$69.4M in FY2021 \$15.6 MILLION Reinvestment of public safety funds toward efforts to repair the legacy of racially disparate policies on health, housing, and economic outcomes for African Americans. And additional \$20.4 million was budgeted but will be re-directed to other City Departments.

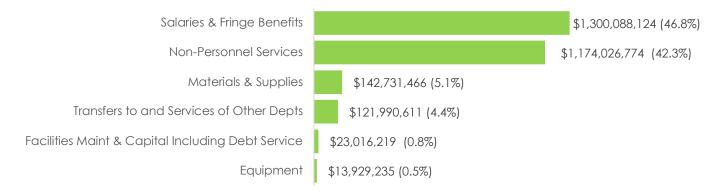
\$2.7 MILLION Investment in our DPH Human Resources infrastructure to support DPH's workforce needs which has grown and continues to grow with new initiatives.

\$2 MILLION Investment in SFHN Quality Management and DPH Office of Compliance and Privacy Affairs to further ensure appropriate coverage of regulatory and legal patient protections that are essential to providing quality care.

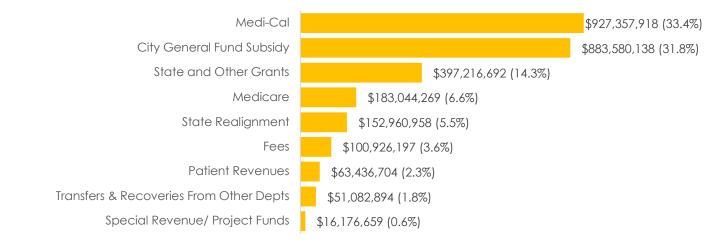
EXPENDITURES BY PROGRAM



EXPENDITURES BY TYPE



REVENUES BY SOURCE



SF HEALTH NETWORK METRICS

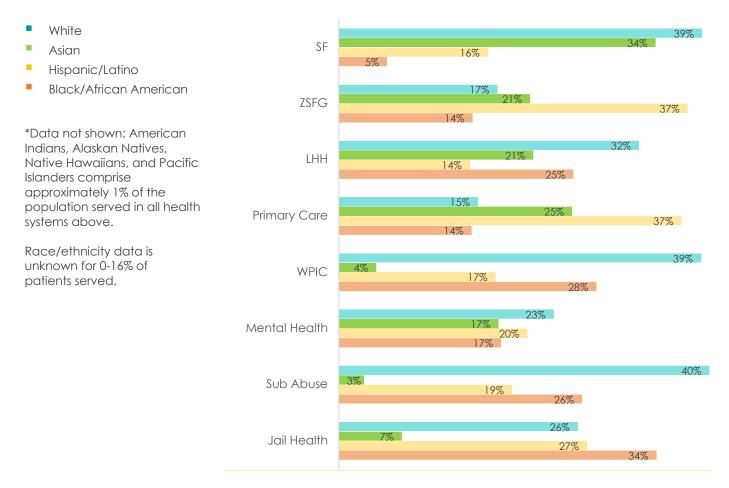
San Francisco Health Network provides a wide array of services across its continuum of care. San Francisco Health Network's direct service providers consist of Zuckerberg SF General (ZSFG); Laguna Honda Hospital (LHH); Primary Care (PC); Behavioral Health Services (BHS); Jail Health Services (JHS), Whole Person Integrated Care (WPIC), Home Health (HH); and Dental Care. See pages 35-37 for descriptions of these levels of care and notes on associated metrics

		UNIQUE	PATIENTS	ENCO	UNTERS
LEVEL OF CARE	ТҮРЕ	FY19-20	FY20-21	FY19-20	FY20-21
PRIMARY CARE		59,198	55,316	256,963	275,986
		10.070	1 ((10	(11.005	
BEHAVIORAL HEALTH SERVICES	Mental Health Substance Abuse	18,279 5,411	16,613	611,305 890,059	
		0,111	1,020	0,00,	
WHOLE PERSON INTEGRATED CARE			40,634		95,810
JAIL HEALTH SERVICES		11,132	7,264	16,964	11,015
DENTAL CARE		4,234	3,888	9,295	7,843
		-,20-	0,000	7,270	7,040
HOME HEALTH			1,111	16,220	30,713
	Medical	40,086	32,130	68,783	53,409
	% Admitted			16%	22.2%
EMERGENCY	Psychiatric	2,747	2,141	6,050	4,665
	% Admitted			13%	12.0%
	Trauma Center Activation		2,509	2,557	2,540
SPECIALTY CARE		35,360	37,407	170,594	171,444
URGENT CARE		22,764	20,518	34,809	30,210
DIAGNOSTIC & ANCILLARY		43,404	46,161	169,910	173,961

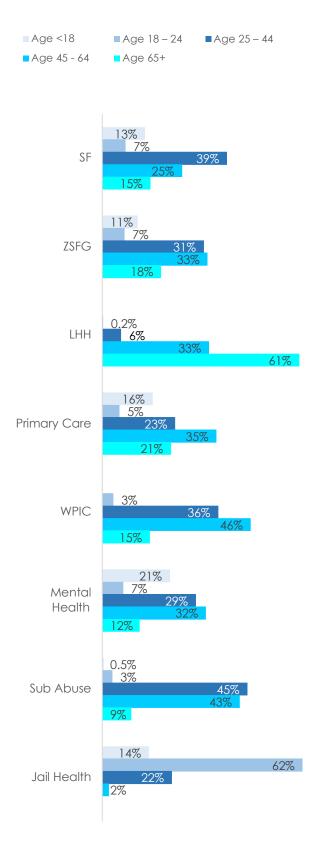
HOSPITAL - INPATIENT METRICS

		UNIQUE F	PATIENTS	PATIEN	t days
HOSPITAL	LEVEL OF CARE	FY19-20	FY20-21	FY19-20	FY20-21
	Acute Inpatient			98,192	96,426
ZUCKERBERG SF GENERAL	Medical	12,080	11,619	81,027	79,555
(ZSFG)	Psychiatric		643	17,165	16,871
· · · ·	Skilled Nursing		269	10,769	9,805
	Avg Stay (Days)			35	31
	Acute Inpatient		132	1,286	1,222
LAGUNA HONDA HOSPITAL (LHH)	Skilled Nursing		820	256,534	236,694
	Avg Stay (Days)			332	212

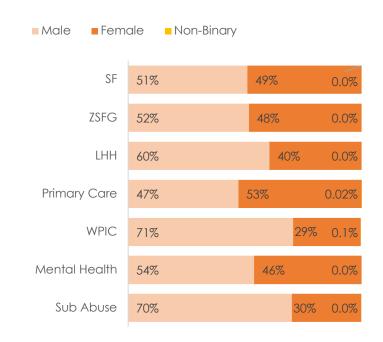
PATIENTS BY RACE/ETHNICITY



PATIENTS BY AGE



PATIENTS BY SEX



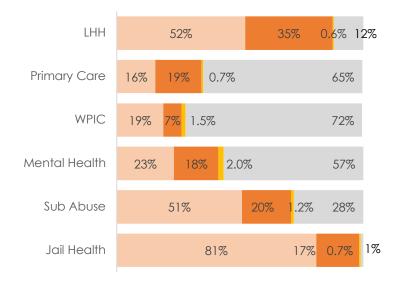
PATIENTS BY GENDER*

Male

Female

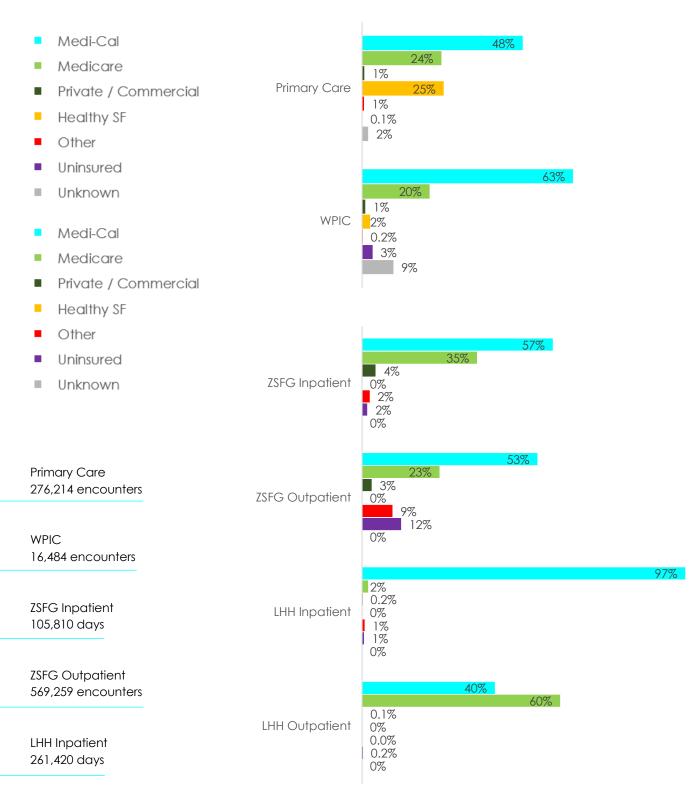
Transgender/Non-Binary/Gender Queer

Unknown



*ZSFG does not report by gender

PAYOR SOURCES BY SERVICE TYPE



LHH Outpatient 3,718 days

HEALTH COMMISSION RESOLUTIONS

2020

20-8	Approving the Appointment of Marlo Simmons MPH
	as the Interim Director of the SF Mental Health Plan

- 20-9 Health Equity Resolution: Declaring Anti-Black Racism a Human Rights and Public Health Crisis in San Francisco
- 20-10 Honoring Maria X Martinez
- 20-11 Honoring Tosan O. Boyo, MPH, FACHE
- 20-12 Resolution to Recommend to the Board of Supervisors to Authorize the DPH to Accept and Expend a Gift of \$200,000 to the Laguna Honda Gift Fund from the Joan Kelley-Ryder Trust
- 20-13 Honoring all Zuckerberg San Francisco General Hospital Staff Members

2021*

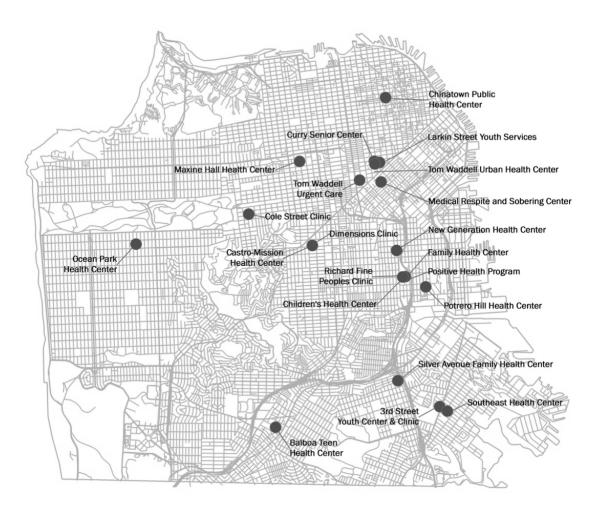
21-1	Honoring all Laguna Honda Hospital and
	Rehabilitation Center Staff Members and Residents

- 21-3 Honoring Tomas Aragon, MD, DrPH
- 21-4 Determining that the Closure of the Mission Bernal Adult and Mission Bernal Pediatric Clinics Will Not Have a Detrimental Impact on Health Care Services in the Community
- 21-5 In Support of Communities of Individuals of Asian and Pacific Islander Descent and Denouncing Racism and Violence Against These Communities
- 21-6 Approving the Appointment of Hillary Kunins, MD as Director of the San Francisco Mental Health Plan
- 21-7 San Francisco City Option Program Simplification

* No resolution exists for 21-2.

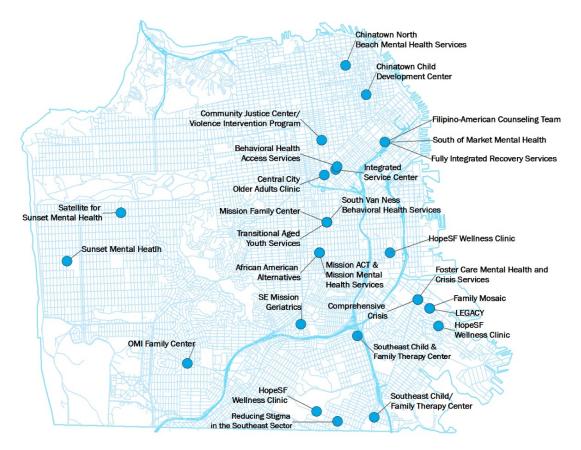
SFDPH SERVICE SITES

PRIMARY CARE SERVICES SITES



* Castro Mission Health Center temporarily relocated to ZSFG in July 2019, and will be at that location for the next 12-18 months **Maxine Hall Health Center temporarily relocated to Ella Hill Hutch Center during FY 20-21

BEHAVIORAL HEALTH SERVICES SITES



DESCRIPTIONS OF SFHN LEVELS OF CARE

The following section provides descriptions of SFHN's levels of care and notes on associated metrics presented in the SFHN metric table on page 29.

PRIMARY CARE

Primary Care is the healthcare foundation for the San Francisco Health Network. The division includes 10 community-based health centers, and four University of California, San Francisco academic clinics located at Zuckerberg San Francisco General Hospital. Primary Care teams are also imbedded in four Behavioral Health Homes. The clinics offer a fully integrated model of care which includes medical, nursing, behavioral health, psychiatry, podiatry, pharmacy, nutrition, acupuncture, population health, complex care management and a centralized call center. Primary Care supports a robust population health strategy and team as the network moves toward value-based care and reimbursement.

PRIMARY CARE VISITS

The number of encounters at a SFHN Primary Care health center including but not limited to medical, nursing, behavioral health, psychiatry, podiatry, pharmacy, nutrition, or acupuncture.

BEHAVIORAL HEALTH SERVICES (BHS)

BHS is the largest provider of mental health and substance use prevention, early intervention, and treatment services in the City and County of San Francisco. BHS is comprised of a network of more than 80 community-based contracted partners and civil service clinics providing direct services to clients with Specialty Mental Health Services (SMHS) and Substance Use Disorder (SUD) Treatment for San Francisco Medi-Cal beneficiaries, uninsured, and indigent residents.

SPECIALTY MENTAL HEALTH SERVICES (SMHS)

SMHS include individual, group, collateral, assessment, medication support, residential, crisis residential, crisis intervention, crisis stabilization, psychiatric inpatient, targeted case management, as well as performing outreach, engagement, and wellness services. services are provided by a network of county-run clinics and community-based organizations.

SUBSTANCE USE DISORDER (SUD) SERVICES

SUD services include individual, group, assessment, medication assisted treatment, methadone maintenance, residential, perinatal, withdrawal management, and case management. SUD services are provided by a network of community-based organizations.

WHOLE PERSON INTEGRATED CARE (WPIC)

WPIC is a newly formed section of the Ambulatory Care division that brings together existing nontraditional primary care, urgent care, and behavioral health clinical services primarily serving people experiencing homelessness. WPIC takes a data-driven, collaborative approach to caring for our highest risk patients and facilitating citywide care coordination, partnering frequently with staff from across DPH, the Department of Homelessness and Supportive Housing and San Francisco Fire Department. WPIC's programs include WPIC Urgent Care, Open Access Clinic, Shelter Health, Shelter in Place Health services, Street Medicine, Street Overdose Response Team (SORT), Alcohol Sobering Center/Managed Alcohol Program, Medical Respite, Permanent Supportive Housing Nursing, and Whole Person Care.

WPIC ENCOUNTERS

Encounters include scheduled and unscheduled services with clients at clinics and in the community, i.e., shelters, the street, Shelter in Place locations, syringe access sites. Due to the rapid set up of the COVID response for PEH, documentation systems were used that are not reflected within these service counts.

DENTAL SERVICES

Dental services provides basic dental care like cleaning, fillings and simple tooth removal to San Francisco residents through SFHN Primary Care clinics. These clinics include: Silver Avenue Family Health Center (children 0-20 and pregnant women), Chinatown Public Health Center (children 0-20 and pregnant women), Southeast Health Center (children 0-20, pregnant women, adults, homeless, HIV+), Potrero Hill Health Center (children 0-20, pregnant women, adults, homeless, HIV+), Tom Waddell Urgent Care (homeless, HIV+), and Juvenile Justice Center (incarcerated youth).

JAIL HEALTH SERVICES (JHS)

JHS provides comprehensive primary care, HIV, women's health, addiction medicine, and urgent care services to more than 8,000 patients annually. JHS is a 24/7 operation and utilizes a team-based approach to patient care via the behavioral health/psychiatry, reentry, medical, nursing, and prevention teams. Given the link between structural racism and incarceration, JHS has a unique opportunity to impact health equity for an especially vulnerable and often invisible population.

JHS ENCOUNTERS

Defined as unique Epic inpatient admission encounters within Jail Health. This number represents the total number of incarceration episodes for the patient within the defined time period.

HEALTH AT HOME (HH)

The licensed home health agency of the San Francisco Health Network. HH is committed to promoting the health and independence of its clients by providing high-quality and innovative health care services (registered nurses, medical social workers, physical therapists, occupational therapists, speech therapists, and home health aides) in the homes of the clients we serve. Home visits provide services such as symptom management, restorative care, nutrition education, wound & ostomy care, diabetic & respiratory care, palliative care services, HIV management, training in mobility & activities of daily living, home safety training, durable medical equipment evaluation, counseling, community referrals, eligibility assessments, emotional support, personal care, meal preparation, and caregiver education and training.

HH ENCOUNTERS

Defined as any encounter with a client who engaged with Health at Home.

ZUCKERBERG SF GENERAL HOSPITAL (ZSFG)

ZSFG is a licensed general acute care hospital, which is owned and operated by the City and County of San Francisco, Department of Public Health. ZSFG provides a full complement of inpatient, outpatient, emergency, skilled nursing, diagnostic, mental health and rehabilitation services for adults and children. It is the largest acute inpatient hospital for psychiatric patients in the city. Additionally, it is the only acute hospital in San Francisco that provides 24-hour psychiatric emergency services.

EMERGENCY SERVICES

ZSFG's emergency services include comprehensive care for severely injured patients.

PSYCHIATRIC EMERGENCY SERVICES (PES)

Provides crisis stabilization, complete medical and psychiatric assessment and evaluation services, and initial treatment, if appropriate. The staff, which includes physicians, nurses, and social workers, work closely with a number of community agencies to develop short and long-term treatment plans.

ACUTE INPATIENT SERVICES - ZSFG

Inpatient medical care and other related services for surgery, acute medical conditions or injuries (usually for a short-term illness or condition). Admission is necessary when the patient's severity of illness and intensity of medical services can only be performed in an inpatient setting.

ACUTE PSYCHIATRIC SERVICES

Acute psychiatric services provide high-intensity, acute psychiatric services 24 hours a day for individuals in acute psychiatric distress and experiencing acute psychiatric symptoms and/or at risk of harm to self or others.

LAGUNA HONDA HOSPTIAL (LHH)

LHH provides a full range of skilled nursing services to adult residents of San Francisco who are disabled or chronically ill, including specialized care for those with wounds, head trauma, stroke, spinal cord and orthopedic injuries, HIV/AIDS, and dementia. LHH is California's first green-certified hospital situated on a 62-acre campus. The facility is designed to offer choices for therapeutic healing, to encourage community involvement and to provide a therapeutic environment for 765 residents/patients in 13 specialized nursing and rehabilitation programs. Each program (Chinese Language, Complex Care, Dementia/Memory Care, Integrated Wellness, Palliative Care, Positive Care, Rehabilitation and Spanish Language), serves an average of 60 people. The LHH approach is to see the whole person, not just the individual; and to deliver individually-focused care that improves physical and emotional well-being, supports community integration and creates possibilities to help people engage with the world around them.

ACUTE INPATIENT SERVICES -LHH

Care provided to LHH residents who are in need of increased clinical monitoring and interventions in which services cannot be accommodated or maintain in the skilled nursing units. In addition, LHH's acute unit also provides acute rehabilitation services for patients needing extensive physical therapy and/or occupational or speech therapy for three hours a day, five days a week.

SKILLED NURSING LEVEL OF CARE

A resident who has existing physical and/or cognitive functional limitation requiring care that cannot be provided at a lower level (i.e. board and care, home). In addition, active and ongoing rehabilitation on an inpatient basis is needed aiming to raise functional status.

SPECIALTY CARE

Care received across SFHN's medical specialty care clinics which include: cardiology dermatology, diabetes, endocrinology, gastroenterology/ hepatology, general surgery, geriatrics, gynecology, hematology/oncology, infectious diseases, nephrology, neurology, neurosurgery, ophthalmology, oral and maxillofacial surgery orthopedics, otolaryngology, pain clinic, palliative care, pulmonary, rheumatology, vascular surgery, urology

URGENT CARE

Clinic where Adult and Pediatric patients are seen for same-day urgent medical care for illness or injuries that are not life threatening.

DIAGNOSTIC & ANCILLARY

High-volume diagnostic and therapeutic services that include: laboratory, pathology, radiology, rehabilitation, and wellness.

SFDPH CONTRACTOR

COMMUNITY-BASED ORGANIZATIONS (NON-PROFITS)

- 18 Reasons
- A Better Way, Inc.
- AGUILAS, Inc.
- AIDS2020
- AIDS Legal Referral Panel
- Alternative Family Services
- APA Family Support Services
- BAART Community Health Care
- Baker Places
- Bayview Hunters Point Foundation for Community Improvement
- Catholic Charities
- Center on Juvenile and Criminal Justice
- Central American Resource Center
- Central City Hospitality House
- Children's Council of San Francisco
- Community Forward SF (formerly Community Awareness and Treatment Services – CATS)
- Community Housing Partnership
- Community Music Center San Francisco
- Community Youth Center of San Francisco
- Conard House
- Curry Senior Center
- Dignity Health-Saint Francis Memorial Hospital
- Dignity Health-St. Mary's Medical Center
- Dignity Health-St. Mary's Medical Center-McAuley Adolescent Psychiatric Unit
- Dolores Street Community Services
- East Bay Agency for Children
- Edgewood Center for Children and Families
- Eldergivers
- Epiphany Center/Mount St. Joseph-St. Elizabeth
- Episcopal Community Services of San Francisco
- Family Service Agency of San Francisco
- Friendship House Association of American Indians of San Francisco
- FUSE Corps
- Glide Foundation, Board of Trustees of the
- Harm Reduction Coalition
- Harm Reduction Therapy Center
- HealthRIGHT 360
- Hearing and Speech Center of Northern California
- Heluna Health
- Homeless Children's Network
- Horizons Unlimited of San Francisco
- Huckleberry Youth Programs
- Hyde Street Community Services
- Instituto Familiar de la Raza
- Jamestown Community Center
- Japanese Community Youth Center
- Jewish Family and Children's Services
- Justice and Diversity Center of the Bar
- Larkin Street Youth Services

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 Lavender Youth Recreation and Information Center (LYRIC)

- Latino Commission
- Learning for Action
- Livable City
- Lutheran Social Services
- Maitri
- Marin City Health and Wellness Center
- Medical Clown Project
- Mental Health Association San Francisco
- Mission Council on Alcohol Abuse
- Mission Neighborhood Health Center
- National Alliance on Mental Illness (NAMI) San Francisco
- Native American Health Center
- NICOS Chinese Health Coalition
- North East Medical Services (NEMS)
- Oakes Children's Center, Inc.
- Positive Resource Center
- Progress Foundation
- Project Open Hand
- Public Health Institute
- Race Forward
- Rafiki Coalition
- Richmond Area Multi-Services (RAMS)
- Safe and Sound (formerly San Francisco Child Abuse Prevention Center)
- Salvation Army
- Samuel Merritt University
- San Francisco AIDS Foundation
- San Francisco Community Clinic Consortium
- San Francisco Community Health Authority
- San Francisco Community Health Center (formerly Asian and Pacific Islander Wellness Center)
- San Francisco Food Bank
- San Francisco LGBT Center
- San Francisco Mental Health Education Funds
- San Francisco Public Health Foundation
- San Francisco Study Center
- San Francisco Suicide Prevention
- Seneca Center
- Shanti Project
- Southeast Asian Development Center
- Special Service for Groups, Inc.
- St. Anthony's Medical Clinic
- St. James Infirmary
- Swords to Plowshares
- Tenderloin Neighborhood Development Corp

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Unity Care

YMCA

- Victor Treatment Centers
- Vision Academy

Yale University

WestCoast Children's Clinic
 Westside Community Mental Health Center

YMCA Urban Services

Youth Leadership Institute

PUBLIC AGENCIES

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

ADDITIONAL RESOURCES

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

DEPARTMENT OF PUBLIC HEALTH

SFDPH Webpage	Learn more about SFDPH services and programs and link to additional SFDPH reports – including past Annual Reports.
SF Health Commission	Read more about the SF Health Commission, the governing and policy-making body of the SFDPH.
SF Health Network	Learn more about the SF Health Network, the city's only complete care system.
Zuckerberg SF General (ZSFG) Annual Report	Learn more detailed information about ZSFG's services, accomplishments, and operations over the last fiscal year.
Laguna Honda Hospital (LHH)	Learn more detailed information about LHH's services, accomplishments, and operations

Annual over the last fiscal year.

CITY & COUNTY OF SAN FRANCISCO COVID-19 RESPONSE

Find out more information about SFDPH COVID-19 SFDPH's response to COVID-19, Response including all Health Orders and Directives: COVID-19 San Francisco's response to the Indicators coronavirus emergency is and Data grounded in data, science and facts. View the SF COVID-19 data Tracker page to see dashboards and data, including cases, tests, hospitalizations, and vaccines. SF GOV Find more information about the Citywide response to COVID-19 at sf.gov/coronavirus or call 311 and stay informed with the facts at https://www.cdc.gov/. FOUNDATIONS San Francisco Read about the San Francisco Public Health Public Health Foundation, a non-Foundation profit that strives to provide resources to San Francisco's public health community, facilitating the provision of high quality and cost-effective health care services. SF General Find out more about the SF General (SFGH) Foundation, a Hospital not-for-profit corporation that Foundation provides fundraising support to

ZSFG.

Report

Friends of Laguna Learn more about Friends of Laguna Honda, a non-profit organization founded in 1956, dedicated to enhancing the quality of life for the residents at Laguna Honda Hospital and Rehabilitation Center by funding non-medical programs and services that would otherwise be unavailable.

ACCESS TO COVERAGE & CARE

Healthy San Francisco Erancisco program, including information on eligibility and enrollment.

Get Covered Learn more about the various San health care options under the Francisco! Affordable Care Act.

COMMUNITY ORGANIZATIONS

San FranciscoLearn more about SFHIP, aHealthdynamic portal to theImprovementcommunity's priority health issuesPartnershipsand associated community(SFHIP)resources.

This report can be found online at <u>www.SFDPH.org</u> (415) 554-2500

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