

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

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

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



**Grant Colfax, MD**  
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**MINUTES**  
**HEALTH COMMISSION MEETING**  
**Tuesday November 15, 2022 4:00 p.m.**  
**101 Grove Street, Room 300**  
**San Francisco, CA 94102 & via Webex**

**1) CALL TO ORDER**

Present: Commissioner Dan Bernal President  
Commissioner Laurie Green, MD, Vice President  
Commissioner Edward A. Chow M.D.  
Commissioner Suzanne Giraud, Ph.D  
Commissioner Tessie Guillermo (*arrived at 4:15pm*)  
Excused: Commissioner Susan Belinda Christian, J.D.  
Commissioner Cecilia Chung

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

**2) GENERAL PUBLIC COMMENT**

Patrick Monette Shaw made verbal comments and submitted the following summary:

This testimony addresses other LHH issues as First Amendment free speech that shouldn't be censored or abridged, not the *LHH Closure and Recertification Plan*. Dr. Derek Kerr's November 2022 *Westside Observer* article — "*Laguna Honda's Settlement Agreement*" at <https://westsideobserver.com/news/watchdog.html#nov22-Laguna-Honda-Settlement-Agreement>) — notes that 18 years ago in 2004, San Francisco's Long-Term Care Ombudsman, Benson Nadell, testified to the Health Commission that "*LHH is a regulatory silo*" when the Commission was trying to break down various silo's within the Health Department to facilitate the SFGH "*flow project*" into LHH. Nadell did so knowing LHH is **required** to comply with CMS' SNF regulations — a regulatory silo. You wrongfully ignored Nadell's warning and failed to follow CMS' F-Tag regulations, leading to LHH's CMS de-certification, which is this Commission's own fault. Commissioners should read my October 25 article "*LHH Settlement Agreement Requires Re-Certification*" (<https://westsideobserver.com/news/patrick.html#aug22>), and my September 13 article "*Rising Costs to Rescue Laguna Honda Hospital*" (<https://westsideobserver.com/news/patrick.html#sep22-Rising-Costs-to-Rescue-Laguna-Honda-Hospital>).

Osbourne lives in a Baker Places/PRC co-op. He received a letter from Baker Places noting that the organization plans on pulling out of its DPH contracts. He is concerned about the status of his living situation. He and others living in the co-op have done a lot of personal work to get to a place where they could live in the co-op. He feels the City has failed them and he urged the Commission and DPH to prioritize the clients of this organization and their needs first. He also stated that the organization is a major DPH contractor and was in fiscal trouble, but the DPH did nothing. He asked for the Commission and DPH to put pressure on Baker Places/PRC to make decisions about the status of the co-op sooner than later.

Enrique is a client of Baker Places. After 10 years of instability in his life, including homelessness and substance use, he found a way to get his life back at Baker Places, which has been a very compassionate program. He has observed that the program has helped many participants and he urged the Commission to keep the program running.

### **3) LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER (LHH) CLOSURE PLAN AND CMS RECERTIFICATION UPDATE**

Baljeet Sangha, Chief Operating Officer, San Francisco Health Network, and Troy Williams, Chief Quality Officer, San Francisco Health Network, presented the item.

#### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Slide 13 on today's LHH's *Closure Plan* presentation specifically mentions that the disastrous "*Flow Project*" is being managed by the new "*Department of Care Coordination*" in LHH's Nursing Department. The *Flow Project* was implemented in 2004 to transfer behaviorally-challenged SFGH patients to LHH, who were largely responsible for the turmoil at LHH during the past 18 years. They should not be "*cohorted*" at LHH. The Health Commission should immediately step in and stop the *Flow Project*, as community advocates have long urged. City Attorney David Chiu's *Settlement Agreement* approved by the Health Commission and Board of Supervisors repeatedly references a "*Revised LHH Closure Plan.*" To the extent that Chiu negotiated terms of the *Revised Closure Plan* with CDPH before the *Settlement Agreement* was approved by CDPH, the Health Commission should release the *Revised Closure Plan* immediately. It's troubling the *Settlement Agreement* requires LHH resume patient discharges on February 2, 2023.

Dr. Teresa Palmer, geriatrician and former LHH physician, stated that it is laudable that the city is funding the effort and LHH is making the effort to save the facility. One of the problems with the effort is that so many levels of government are involved. She hopes to have a round table of federal, state, and DPH representatives to decide that recertification is decoupled from forced patient discharges. There is a dearth of SNF beds in the area. She urged the DPH, LHH, and city to do its share by not violating admission criteria. She feels that patients with substance use issues should be provided care elsewhere and the city needs to fund services for these populations in another location. She urged LHH to do everything it can to retain the 120 beds that could be lost.

#### Commissioner Comments:

Commissioner Chow asked how LHH staff will conduct patient surveys with individuals who do not use an I-Pad. Mr. Williams stated that LHH staff will go to the patient's bedside for patients who do not use an I-Pad.

Commissioner Guillermo thanked Mr. Sangha and Williams for the concise and clear update. She asked how LHH will participate in the Root Cause Analysis (RCA) process. Mr. Sangha stated that LHH staff are key to this process as well as reviewing plans of correction submitted to the state, in order to understand the true drivers of the current state.

Commissioner Guillermo noted that CDPH has not begun investigations on many facility reported incidents and asked how these uninvestigated incidents will be incorporated in the RCA process, and the recertification process. Mr. Sangha stated that the RCA process is prescriptive and lays out specific regulatory survey results to review. He noted that multiple LHH facility reported incidents are not listed in these surveys. He added that the consultants working with LHH may review these incidents as part of their RCA analysis.

Commissioner Bernal noted that LHH was just relicensed and asked which entity has authority for this process. Mr. Williams stated that the state licenses LHH on an annual basis.

#### 4) **CLOSED SESSION**

A) Public comments on all matters pertaining to the Closed Session. (San Francisco Administrative Code Section 67.15).

B)

Dr. Teresa Palmer urged LHH to do everything it can to retain the 120 beds that could be lost.

C) Vote on whether to hold a Closed Session. (Action Item)

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

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

#### **LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER QUALITY UPDATE REGARDING RECENT REGULATORY SURVEY ACTIVITY**

The Health Commission held a 60-minute closed session.

#### **RECONVENE IN OPEN SESSION**

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

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

#### 4) **APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF NOVEMBER 1, 2022.**

Action taken: The Health Commission approved the minutes of the November 1, 2022 meeting.

#### 5) **DIRECTOR'S REPORT**

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

#### **SAN FRANCISCANS URGED TO PREPARE FOR COVID-19 AND INFLUENZA AS HOLIDAY SEASON APPROACHES**

DPH encourages San Franciscans to prepare for the upcoming holiday season by taking simple measures to protect themselves and others against COVID-19 and influenza (flu).

This winter could bring a resurgence in influenza cases, and COVID-19 cases, now low, will likely increase as people travel and gather indoors. San Franciscans are encouraged to prepare by getting their COVID-19 bivalent booster, annual flu vaccine, and connecting to a health care provider to learn if you are eligible for COVID-19 treatments. Additionally, keeping items on hand such as masks and COVID-19 rapid test kits that can help prevent and manage illness while reducing the spread of viruses to loved ones and others.

For some people, COVID-19 can cause long term symptoms after infection. While vaccines can reduce these risks, they do not eliminate them. People should factor this into their prevention planning for the holidays. Additionally, this year there are special “senior” flu vaccines recommended for people ages 65 and older that are designed to generate a stronger immune response than the standard flu vaccine in older adults. COVID-19 and flu vaccines may be given together, and both vaccines are widely available across health systems, in pharmacies, and in community health clinics.

DPH is also aware of the rising cases of respiratory syncytial virus (RSV) in the United States. RSV is a common respiratory virus that usually causes mild, cold-like symptoms. While the vast majority of people with RSV recover without incident, it can sometimes result in more serious illness in infants and older adults.

While there is no vaccine for RSV, it is important to protect those who are at risk of severe RSV complications by getting vaccinated and boosted against COVID-19 and influenza if eligible, because being infected with more than one virus can increase the risk of severe disease. While very young infants cannot get vaccinated, those around them can.

DPH encourages people to prepare for the holidays in the following ways:

- Get the COVID-19 bivalent booster, now available for those aged five years and older if it has been at least two months since their last dose
- Get the influenza vaccine, available for those aged 6 months and older
- Get connected to a healthcare provider in case you get sick
- Know in advance if you are someone who would benefit from treatment with a medicine for COVID-19, as these medicines must be started early
- Stock up on COVID-19 rapid test kits. Those with insurance are able to get at-home tests for free or be reimbursed
- Keep a well-fitted mask on hand for crowded, indoor spaces (N95 or KN95 are best)
- Wash hands frequently
- Avoid contact with those at highest risk of getting sick, such as infants, if you have cold symptoms
- Make a backup plan for travel, caregiving, and other responsibilities
- Importantly, stay home when sick

Health care providers are the first place to go for health care needs related to COVID-19 and the flu. For those without health insurance or who face barriers in accessing care, DPH provides support, including vaccinations, through a network of DPH-affiliated sites. This includes several “test to treat” sites where people can be tested for COVID-19 and, if positive, receive antiviral treatment in the same visit if they meet the medical eligibility.

For more information about the COVID-19 bivalent booster, go to: [sf.gov/get-your-covid-19-booster](https://sf.gov/get-your-covid-19-booster)

For more information on how to access DPH-affiliated health sites if you are uninsured or face barriers to care, go to: [sf.gov/information/public-healthcare-sites-san-francisco](https://sf.gov/information/public-healthcare-sites-san-francisco)

For more information about flu vaccines, go to: [sf.gov/flu-vaccines](https://sf.gov/flu-vaccines)

For more information about RSV prevention, go to: [www.cdc.gov/rsv/about/prevention.html](https://www.cdc.gov/rsv/about/prevention.html)

### **ZSFG HOSTS UKRANIAN HEALTHCARE DELEGATION**

On November 7, Zuckerberg San Francisco General Hospital (ZSFG) hosted a delegation of Ukrainian doctors and hospital administrators who were in the Bay Area for a learning tour of the American healthcare system. Organized by the Concord Rotary Club and the Congressional Office for International Leadership, the delegation's visit to ZSFG promoted collaboration on best practices for health care administration as well as highlighted ZSFG's trauma, emergency room, and refugee services. We highlighted how immigration intersects with health care and reinforced the concept that successful resettlement starts with good coordinated and patient-centered healthcare.

We were thrilled to showcase our Emergency Department, Critical Care, and Med-Surg clinical units. To supplement the tour, the delegation received presentations on the Trauma Recovery Center, the Survivors International Program, and the Newcomers Health Program, which is housed within the Family Health Center. The group learned about the unique characteristics of Ukrainian refugees who have received services at ZSFG.

Thank you to Drs. Elena Fuentes-Afflick, Lukejohn Day, Christopher Colwell, Joseph Cuschieri, Mark Leary, Sarah Metz and Cristy Dieterich, Jeff Schmidt and Tatyana Vovchok for welcoming and touring the group and making the visit a successful collaborative event.

Participants included the Ukraine's Ministry of Health as well as doctors and representatives from several regional hospitals throughout Ukraine.

### **NEW TOBACCO SALES INFOGRAPHIC FOR SAN FRANCISCO RETAILERS**

The Environmental Health Branch's Retail Tobacco Program developed an infographic as educational material for online tobacco distributors and retailers called, "6 Things to Know about Tobacco Sales in San Francisco." This is the first educational and outreach material created by the program targeting online distribution and retail tobacco businesses. Tobacco consumption continues to be the number one preventable cause of death in the U.S. and claims nearly a half million lives each year. The funding for the creation of these outreach materials was provided through a Department of Justice grant. This innovative approach was lead by Senior Inspector Janine Young and developed by Environmental Health Branch Trainees, Brandon Lagman and Maribel Rodriguez, interns Kathy Dao, Sennua Hunter, and Ananya Wondyfraw hired through the Mayor's Opportunities for All program, and in partnership with the Community Health Equity & Prevention Branch's Tobacco Free Project. The "6 Things to Know about Tobacco Sales in San Francisco" will be found on the Environmental Health Branch's website and translated in several different languages in the coming months.

### **DPH STAFF RECOGNIZE DIA DE LOS MUERTOS**

On November 2, the Population Health Division and the COVID-19 Taskforce Equity and Community Engagement team led the Latine Heritage Month Celebration, celebrating and honoring DPH colleagues that have recently passed for Dia de los Muertos. Christina Sanz-Rodriguez emceed the event, Edgar Zamudio provided an overview of the significance and history of this celebration, and Dr. Berta Hernandez and Jazmin Barrera led the in-person ceremony and set up the altar. The following DPH staff's lives were honored and celebrated at this first of its kind team event: Israel Nieves-Rivera, Jose Maria Garza, Quijuan Maloof, and Maria X Martinez. Special thanks to Daisy Aguallo, Deputy Director of Population Health Division and Isela Ford, Deputy Director of Equity and Community Engagement, for their leadership and support.

## MPX UPDATE

LOCATION	TOTAL CASES AS OF 11/5/22 (probable and confirmed)
San Francisco	833
California	5,547
U.S.	28,881
Worldwide	79,231

## COVID-19 UPDATE

As of November 2:

- San Francisco's 7-day rolling average of new COVID cases per day is 89 and 48 people are hospitalized, including 8 in the ICU.
- San Francisco's remaining ICU capacity is 32.6% and remaining non-ICU capacity is 16.6%.
- Eighty-six percent of all SF residents have been vaccinated and 64% have received booster dose(s).

### [DPH in the News](#)

#### Commissioner Comments:

Commissioner Bernal thanked Dr. Colfax for the report.

#### **6) SEXUAL ORIENTATION AND GENDER IDENTITY DATA COLLECTION AND PROGRAMMATIC APPLICATIONS**

Hali Hammer MD, Director of Ambulatory Care, San Francisco Health Network, presented the item.

#### Commissioner Comments:

Commissioner Bernal thanked Dr. Hammer for the presentation. He asked if data is expected to improve in the future. Dr. Hammer stated that data is expected to improve with use of the new EPIC field and additional staff training.

Commissioner Bernal asked for clarification of the "No Entry" category on slide 12, noting he is unsure if the patient refused to give the information or whether staff did not ask the question. Dr. Hammer stated that this indicates that the patient skipped the question on the paper survey.

Commissioner Bernal stated that he is impressed with the application of SOGI data in the outreach for MPX vaccinations.

Commissioner Guillermo stated that she pleased with the progress on these data.

#### **7) COMMUNITY AND PUBLIC HEALTH COMMITTEE UPDATE**

Commissioner Giraud, Community and Public Health Committee chair, stated that Bridge HIV presented its annual update. She noted that the section is one of only two public health departments conducting NIH funded clinical trials. The areas covered in the presentation were the HIV Prevention Network, including vaccine clinical trials sites in US, Mexico, Peru, Argentina, Poland, Italy, and Spain.

#### **8) OTHER BUSINESS:**

This item was not discussed.

**9) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS**

Commissioner Guillermo, LHH JCC Chair, stated that at the November 8<sup>th</sup> meeting, the committee reviewed and gave feedback on the Executive Team report which was used as the basis of the presentation given to the full Commission today. LHH staff presented the finance and human resource reports as separate items; these had been presented as part of the Executive Team report in the past. She noted that Commissioner Chow voiced concerns about the time it takes to hire new staff. Karrie Johnson, the LHH Human Resource representative, stated that the DPH and City Human Resources are working diligently to decrease the time it takes to hire new staff. Commissioner Guillermo also stated that staff presented the annual PIPS review. In closed session, the committee approved the Credentials report and the PIPS minutes report.

**10) CLOSED SESSION (CONTINUATION IF NEEDED)**

The Health Commission completed its closed session business during item 3.

**11) ADJOURNMENT**

The meeting was adjourned at 6:31pm.