



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

Stephen Follansbee, M.D.
President

Chris Canning
Vice President

Connie Chan
Supervisor (District 1)
Commissioner

Karen Breslin
Commissioner

Mary Hao
Commissioner

Randy Scott
Commissioner

Claire Zvanski
Commissioner

Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

TEL (628) 652-4646
FAX (628) 652-4703
<http://www.sfhss.org/>

HEALTH SERVICE BOARD

MEETING MINUTES DRAFT

Thursday, April 28, 2022, 1:00pm

San Francisco Main Library
Lower Level: Latino AB Room
100 Larkin Street,
San Francisco, CA 94102

and

In-Person Meeting and Virtual Webex

Please note, in addition to this notice, the agenda for this Special Meeting will be distributed and posted prior to the meeting in accordance with meeting laws.

Remote Meeting Access

Watch at 1:00 pm on April 28, 2022

Click the link to join the meeting - <https://bit.ly/3JMnbZu>

Public Comment Call-In: 415-655-0001 / Access Code: 2482 123 9217

Providing Public Comment:

Dial **415-655-0001** and then enter access code **2482 123 9217** then #

1. **Press #** again to enter the meeting as an ATTENDEE
2. You will hear a beep when you join the meeting as a participant.
 - a. Stop and LISTEN
 - b. Wait for Public Comment to be announced.
3. When Public Comment is called, dial * then **3** to be added to the speaker line.
4. You will then hear “You have raised your hand to ask a question, please wait to speak until the host calls on you.” Callers will hear silence when waiting for their turn to speak.
5. To withdraw your question, press * then **3**. – you will hear: “You have lowered your hand.”
6. When the system message says “Your line has been unmuted” - **THIS IS YOUR TIME TO SPEAK.**
7. When the President or Commission Secretary states “Welcome Caller,” you are encouraged to state your name clearly. As soon as you speak, you will have **3 minutes** to provide your comments.
8. Once your 3 minutes have expired, you will be moved out of the speaker line and back as a participant in the meeting. You will hear “Your line has been muted.”
9. Participants who wish to speak on other public comment periods can stay on the meeting line and listen for the next public comment opportunity.

Best Practices when calling in for Public Comment:

- Call from a quiet location
- Speak slowly and clearly
- Turn down any televisions or radios around you
- Address the Commission as a whole, do not address individual Commissioners

Written Public Comment

Persons unable to attend the meeting may submit written public comments regarding an agenda item. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. Written public comments expected to be part of the official record should be submitted to the Board email, health.service.board@sfgov.org, and **received by 5 pm on Wednesday, April 27th** before the meeting. Members can also call 628-652-4646 with any questions.

All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the body of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

The Health Service Board recording is available on [April 28, 2022, HSB Strategic Planning Special Meeting webpage](#), and visit the [SFGovTV webpage](#) for a full record of Regular Board meeting archives.

1. **CALL TO ORDER:** 1:02 pm

2. **ROLL CALL:**

President Stephen Follansbee, M.D- Present
Vice President Chris Canning-Present, departed at 3:00 pm
Commissioner Karen Breslin- Present, departed at 3:50 pm
Supervisor Connie Chan- Excused
Commissioner Mary Hao- Present
Commissioner Randy Scott- arrived at 1:26 pm
Commissioner Claire Zvanski-Present

Opening Remarks: President Follansbee thanked everyone for participating in the Health Service Systems' 2023-2025 Strategic Planning process meeting and acknowledged the success of the 2020-2022 Strategic Plan to start this process. President Follansbee recognized the current state challenges and future uncertainties which the plan will address and welcomed everyone to a productive afternoon. President Follansbee noted the recent City lifting of mask mandate in the setting of rising cases of COVID-19 and urged all HSB members and meeting attendees to employ as much caution as possible.

3. **Health Service System Strategic Planning: (Discussion)**

Opening Remarks: Executive Director Abbie Yant welcomed the Health Service Board and the public to the meeting to the Strategic Planning process. Executive Director Yant shared the meeting key objectives:

- Bring together a broad set of thinkers and perspectives to help shape current/future programs and services to best meet the needs of the diverse populations we serve.
- Identify important changes in our circumstances and knowledge that SFHSS can use to refresh our strategy and keep it relevant.
- Current State: Develop a shared understanding of the health of our population, the impact of social determinants of health, and the delivery of healthcare services. Recognize the forces impacting the healthcare environment that are both challenges and opportunities. Elevate core areas of focus including Primary Care, Mental Health, Population Health, Equity, and the state of the pharmaceutical industry.
- Future State: Guided by a Population Health approach we will acknowledge our sphere of influence and seek collaborative input for the 2023-2025 Strategic Goals.

Keynote Speakers

Dr. Deryk Van Brunt, CEO co-founder of CredibleMind, President and CEO of the Healthy Communities Foundation, and Professor at UC Berkeley School of Public Health, and Shimar Clements, MSW Research & Data Manager at CredibleMind.

The [Population Mental Health: Creating a Culture of Caring](#) presentation shared the following items:

- Understanding the Challenges
- Models of Mental Health
- Recommendations

Commissioner Zvanski asked what role the media and social media play in stress and how media impacts various cultures and communities of color. Dr. Van Brunt said media shares the world stresses like COVID, racial issues, economic uncertainty, and housing shifts and it's more a

reflection of what's going on than the cause. Dr. Van Brunt said there is also a tremendous amount of consumption on spiritual growth, nature, environmental issues, and at the same time. Dr. Van Brunt shared the impact of social media disproportionately affects youth and the impact on communities of color is likely underreported so difficult to know the impact.

President Follansbee asked for measurements and metrics recommendations when using data-driven and evidence-based practices. Dr. Van Brunt recommended measuring engagement using a broad set of topics and self-reporting options and then aligning with burnout records or claims data.

Commissioner Zvanski wondered how to resolve the lack of available therapists. Dr. Van Brunt said the lack of therapists is a national problem and will take time to resolve. Dr. Van Brunt suggested several actions to consider, 1. helping members start with self-assessment and self-help techniques as the first step so members know that self-help materials are readily available, 2. removing appointment system inefficiencies like missed appointments and offering more virtual appointments to remove timing barriers 3. peer-to-peer support and 4. Have members take a full panel mental health assessment with over 20 scale points to find out their risk level, then make all self-help materials clear and accessible to know resources are anonymous and safe, whether peer support, coaching, therapy, or clinical interventions.

Keynote Speaker

Dr. Kevin Grumbach, Hellman Endowed Professor and Chair at the UCSF Department of Family and Community Medicine

The [Revitalizing Primary Care](#) presentation shared the following items

- Primary care as an essential foundation for effective, equitable, and affordable
- The Precarious Foundation
- National and California Initiatives to Revitalize Primary Care
- Health Equity: Everyone's Responsibility

Commissioner Scott asked for clarification on team-based care. Dr. Grumbach said currently the model largely pays for licensed doctors to bill patients registered with a practice whereas a team-based care is a system that strives to move beyond the pure fee-for-service model. Dr. Grumbach offered an example, under a team-based model system, the fee wouldn't be based solely on the how the physician assigns the diagnosis, but payment could be based on if the physician is seeing a patient from a low SES census tract (likely to have more needs (higher risk score) than someone from a higher SES tract).

Commissioner Zvanski asked how physician's assistants or nurse aids could provide services when primary care physicians are not available. Dr. Grumbach said when he talks about primary care he includes physician's assistants, nurse practitioners, and other health professionals. Dr. Grumbach pointed out that income differences are evident, and the salary for a specialist is higher than a family doctor or physician's assistant so salary impacts the industry as well. Commissioner Zvanski noted many members often look at plans who have specialty doctors more so than the number of primary care physicians and wondered what efforts can be made to reeducate members that primary care is primary. Dr. Grumbach reiterated the message that the best care comes from highly accessible primary care that you can trust with access to specialists when needed. Dr. Grumbach suggested communications campaigns gathering member voices about why primary care is important to members and sharing those member voices on various marketing platforms and social media outlets.

Vice President Canning asked if capitation payment based on census track being been done or is it happening elsewhere. Dr. Grumbach said it's been proven and practiced in other countries; the dialog is starting to take place in the United States and strong proposals are coming forward, with

Federal recognition, particularly with Medicare.

President Follansbee recalled primary care doctors' schedules often go beyond 8 hours to respond to patients' online messages within a 48-hour timeframe, and this time would not be compensated. Dr. Grumbach said this activity, known as "pajama time" working after hours in your pajamas, is common and physicians choose specialty practices instead of primary care to have fixed hours and fixed expectations. President Follansbee also pointed out that an area might have numerous specialists but it's the access to specialists and whether the member can talk to a specialist that is important. President Follansbee said the system is so complicated and wondered where progress can be found. Dr. Grumbach agreed the system is complicated and reiterated the need to support primary care. Dr. Grumbach invited the Health Service System to prioritize primary care in contracts and to pressure health plans to improve primary care and ensure plans have the supports in place to better communicate with specialists.

Mike Clarke asked if there are any initiatives to try and make the educational process more affordable. Dr. Grumbach said among the Group of Seven (G7) countries-Japan, Germany, United Kingdom, United States, France, and Italy- medical education is virtually free in those countries except the United States. Dr. Grumbach said there are some California State loan repayment programs that prioritize primary care and the [California Health Workforce Education and Training Council](#) could be the place to amplify the repayment programs.

Break: 3:00 pm – 3:15 pm

ROLL CALL:

President Stephen Follansbee, M.D- Present
Vice President Chris Canning- Departed at 3:00 pm
Commissioner Karen Breslin- Present, departed at 3:50 pm
Supervisor Connie Chan- Excused
Commissioner Mary Hao- Present
Commissioner Randy Scott- Present
Commissioner Claire Zvanski-Present

Well-Being at Work Conversation

Leticia Harris, SFHSS Senior Health Program Planner, and Racial Equity Lead facilitated the conversation. Participants shared challenges and opportunities that uplift key issues and the voice of our membership in hopes to imagine the future state of SFHSS benefits and programs. The conversation involved a small group dialog among colleagues in full view of the larger group. Participants were provided with conversation cards to foster more dynamic participation while the audience actively listened without comment. This conversation brought together a broad set of thinkers and perspectives including:

- Sergeant Art Howard, Behavioral Science Unit, San Francisco Police Department (POL)
- Jennifer Brokaw MD, Supervising Physician, San Francisco Fire Department (FIR)
- Peggy Sugarman Ph.D., Director of Worker's Compensation, SF Department of Human Resources (DHR)
- Toni Bucker Ph.D., Office of Health Equity Senior Manager, Department of Public Health (DPH)
- Rosie Ortiz, Acting Manager of Learning and Organizational Development Team, Human Services Agency of San Francisco (HSA)
- Judy Choy, Shelter Office Supervisor, San Francisco Animal Care and Control (DPW)
- Carrie Beshears, Manager of Well-Being, San Francisco Health Service System (HSS)

Conversation Questions:

1. What concerns are you seeing/hearing about the health and well-being of your workforce?
2. What levers do you rely on to boost health access and engagement?
3. How can we collaborate around best practices for the future?

Sergeant Art Howard San Francisco Fire Department, said workforce concerns include, the pandemic, civil unrest, vaccine mandates, retention issues, and staff being vilified. Art Howard said the Fire Department worked with the Sheriff's Department (SHF), Department of Emergency Management (DEM), and the Health Service System (HSS) to gather resources and engage staff with well-being opportunities and most recently brought a clinician in to offer a 4-hour resiliency training. Art Howard also mentioned the long-standing peer-driven employee assistance program established in the 1980s and its successful partnership with HSS.

Dr. Jennifer Brokaw, San Francisco Fire Department said the workforce is seeing stressors from the pandemic, civil unrest, fentanyl drug crisis, mandated vaccine requirements, and there is a staffing shortage due to stress and mental health leave. Dr. Brokaw said the department has leveraged the very strong internal peer support-driven resources and the Physician's Office. Dr. Brokaw shared the Physician's Office was regarded as a role that could terminate a member's career or impair their role ability to work, and she's worked over the past two years to rebuild trust with the members to see the Physicians' Officer as a partner to help the member access the care they need. Dr. Brokaw acknowledged the partnership with Worker's Compensation as they supported so many members. Dr. Jennifer Brokaw believed Worker's Compensation is being overused in the Fire Department and noted the importance of working with members to get them the help they need before they require Worker's Compensation. She also said the department needs to work with the Health Service System to ensure primary care for members. Sergeant Art Howard also praised Workers' Compensation responsiveness for First Responders, especially for Post-Traumatic Stress Syndrome (PTSD), and agreed that primary care is essential for members' mental health.

Peggy Sugarman, Worker's Compensation with the Department of Human Resources, said the workforce is experiencing an increase in worker's compensation claims, employees staying off work longer, fear and anxiety around getting COVID-19, lack of mental health providers, and reluctance among providers to treat Worker's Compensation Patients, and fear among employees of being assaulted both in work settings and in general on the city streets. Peggy Sugarman pointed out the long-term effects of people being off work like losing connection to the workplace, peers, and physical health decline, studies that show the longer a person is away from work the less likely they are to return to work and less likely to recover from the financial impact of being on disability.

Toni Rucker, San Francisco Department of Public Health, said the workforce is seeing the physical mental and emotional toll, staff have pointed out that in addition to the pandemic the past two years, staff feel the stress of increased drug addiction crisis and homelessness. Toni Rucker emphasized the need to encourage members to take care of themselves, and reconnect with their primary care, access to services, and the extended networks of care.

Rosie Ortiz, Human Services Agency said the workforce experiences anxiety with the return to the office, increased workers' Compensation claims, and management feeling overwhelm in what resources staff need most.

Judy Choy, San Francisco Animal Care, and Control said the department continued to work in the office during the pandemic to continue to serve the public and animals in need of care so the

workforce didn't experience the same isolation as other departments. Judy Choy said stressors included relocating to a new building and switching from a drop-in basic to an appointment-only service. Judy Choy said the role of Supervisor often feels like a mental health provider both for animal caretakers whose pets need care as well as providing staff with mental health resources. Judy Choy offered staff physical activity by converting one of the largest on-site training rooms into a workout room and staff participated in the HSS Zumba and Bootcamp classes and received a grant for an electric bike.

Carrie Beshears, Health Service System, said burnout and exhaustion are high, concerns are different between members who telecommuted and members who continued to work in the field/office, increased anxiety around safety, and delayed access to care. Carrie Beshears said the departments can leverage those staff members who are [Key Players or Champions](#) to spread the well-being messages and resources. Carrie Beshears said participation is voluntary and during the pandemic, participation fluctuated due to DSW deployment, staff turnover, and general participation decreased. Carrie Beshears expressed the desire to have more members read Well-Being materials and wondered what avenues could reach more members. Carrie Beshears said ideally departments strive to embed well-being and mental health support within the department culture and hoped to collaborate, expand, and partner with departments to grow outreach opportunities for members to access resources. Carrie Beshears also agreed with Deryk Van Brunt and emphasized the importance of preventative care in relation to mental health.

Art Howard said leveraging leadership contribution makes a big difference and the department was fortunate to gain more staffing to address the issues being discussed today. Art Howard said the one-on-one interpersonal work is so important coupled with peer support and engaging the department's Champions. Art Howard also added that Policy recruitment includes two days of resiliency training with a clinician to address stress management, team building, health resources, and suicide prevention. Jennifer Brokaw said she started a weekly newsletter (now monthly) directly from the Physician's Office, offering telephone numbers for support resources like Employee Assistance Program (EAP), Worker's Compensation, COVID-19 status numbers, and further into the pandemic, also spotlighting a staff member on how they were coping with suggestions like gardening or time with their pets.

Jennifer Brokaw asked if departments feel well-staffed for mental health needs. Art Howard said the Police Department feels well-staffed and he felt fortunate that leadership embraced mental health education for the department. Rosie Ortiz said HSA lost staff during the pandemic and tried to fill the positions but positions have not been filled. Jennifer Brokaw said an administrative assistant in the Fire Department retired early in the pandemic and the position is still not filled, so she and staff fill in to complete the work of that position.

Rosie Ortiz said the Department of Disability and Aging Services is a model on how to leverage their Champion network but the HSA department is located among fourteen buildings so it's a challenge for one person to coordinate amongst different locations. Toni Rucker said DPH is also spread throughout the City as well and realized the landscape of the work has changed over the last few years so the Champion program is going to need to start over again and that will take time. Toni Rucker said the workforce feels depleted from trying to manage workloads and overwhelm in the workplace. Toni Rucker recognized strategic planning is needed to reconnect members to existing resources, even baseline needs like seeing your primary care doctor, can feel like a monumental task for staff to consider. Peggy Sugarman said the Workers' Compensation Department worked to leveraged existing resources for members, 1. expanded the 24/7 triage hotline function to provide information on COVID-19 prevention, exposure, and sickness, 2. partnered with HSS to bridge care between the time claim is filed and finding a practitioner for the

member and 3. leveraged telemedicine to expand the network of providers for mental health care services.

Peggy Sugarman stated some members were angry about mandated vaccination and there is still resentment which is probably affecting work engagement. Jennifer Brokaw said there is resentment from staff that complied with the vaccine mandate and felt aligned mentally and emotionally with those staff who lost their jobs. Art Howard said the Police Department held debriefs about the vaccine mandate and found members who didn't want to receive the vaccine were united in their convictions whereas members who were reluctant to receive the vaccine expressed a sense of violation.

Art Howard reiterated stated well-being and mental health programs must be supported by upper management to obtain the necessary resources and he suggested more education be brought to leadership and upper management to gain their commitment. Judy Choy agreed that it makes such a difference when management listens to and works to get the resources, like filling vacant positions, because it boosts staff morale. Judy Choy also advocated that everyone needs a pet, even departments can have an emotional support animal in the office. Carrie Beshears has seen the most success when leaders practice self-care with their staff, actually participating in activities together because it normalizes the practice and conversations for staff to engage.

(The audience was asked to share any reflections, points of view, or takeaways from the conversation.)

Denise Rodriguez, Kaiser Permanente was struck by everyone's willingness to face the national mental health crisis and burnout and was hopeful that solutions will be discovered with collaborative efforts and skills. Commissioner Zvanski asked if members expressed any needle phobia. Jennifer Brokaw said needle phobia has been underestimated and was optimistic about future options like nasal vaccines.

President Follansbee noted the strong reaction to the vaccine mandate and asked what support Health Service System can provide members support in advance of any future mandates. Jennifer Brokaw hosted a city vaccination site and said it was helpful to offer employees a choice of vaccine (Johnson&Johnson or Moderna) so they had the agency to select a preference. Peggy Sugarman said a portion of the American population will be anti-vaccination and a portion of our members will be anti-vaccination and that vaccine attitudes and beliefs are connected to culture. Rosie Ortiz agreed that culture influences understanding; she recalled misinformation and unreliable sources played a role in the perception of the vaccine and recommended that cultural aspects be considered in the future. Art Howard said the goal of informational and debrief sessions were not about trying to change a person's decision, instead it was an opportunity to support and engage the member through their decision-making process and in their final decision. Toni Rucker recognized the impact of historical inequities and oppression and the need to respect people, communities, and cultures that have not historically been able to participate or voice concerns. Toni Rucker encouraged future conversations with members to honestly and authentically participate in the process so that regardless of the outcome the member's experience is honored, they feel heard, and are respected.

President Follansbee noted that Animal Care and Control members united under a common mission and wondered how the Health Service System and the Health Service Board can help each department with their missions, and connect to the strategic planning process. Leticia Harris thanked the conversation participants and acknowledged the high value that narrative contributes to imaging the future state of our benefits and programs to move forward the mission, vision, and

values, and ultimately bring policy change on a broader level to best serve members.

Key Takeaways and Next Steps

Debrief Discussion:

Executive Director Yant shared the following highlights following the keynote speakers:

- Mental Health: SFHSS working with Health Plans to focus efforts
 - Clear Pathway to the right care at the right time
 - Diversity of care and providers
 - Outcome-based measurements improvements
 - Integrated care delivery within the primary care setting
 - Drive a culture of support
- Primary Care Alignment: SFHSS working with Covered California, CalPERS, and PBGH to align efforts
 - Influence IPA rebalancing of capitation payments to encourage continued development of team-based advanced primary care models and outcomes
 - Refine and/or broaden outcomes-based metrics, (physical and behavioral health)

Key Takeaways:

Anne Thompson, Aon shared the following key takeaways throughout the meeting:

- Recognizing individual department needs-meeting people where they are at
- Preventative care included in mental health and well-being
- Increase utilization of workers' compensation and disability- How can we be proactive versus reactive?
- Continue department partnerships-help lean on each other for support and keep a conversation going
- Reconnecting with the workforce: Program engagement is low so need to reconnect
- Understand the spectrum of care: needs to change and need to be flexible
- Leverage peer support: Fire Department has a successful model
- How do we provide care and support for each other outside the physician's office?
- Provide opportunities for member's voice and listening, especially around future mandates

Commissioner Hao added the need for communication and education on current benefits and how to utilize their benefits. Commissioner Hao also pointed out that we need to be sensitive to misinformation and how we can provide the information they need to make healthcare decisions. President Follansbee added that member outreach needs to be specific, rather than saying 24/7 access to care saying the concrete options within mental health, primary care, etc. President Follansbee also added the need to support and expand the Champion program as they offer peer support and engagement. President Follansbee suggested the Board request health plans provide data on the number of primary care physicians and the diversity of the primary care physicians. Commissioner Scott recognized the dedicated staff and leaders of the city and their continued efforts to serve the citizenry of the city as well as each other. Commissioner Scott asked what the next steps are for implementing the information gathered today into the strategic plan.

Abbie Yant said the June Board meeting will offer the final strategic planning education session, focusing on retiree health. HSS staff will meet internally to summarize feedback, and insights, to bridge the current state to the future state, including the focus of primary care and mental health discussed today; and then build refined objectives and Key Results goals (OKR)-tactics, measurements, implementations, and resources. Abbie Yant said the Strategic Plan draft will be presented to the Board in August seeking final approval in September.

PUBLIC COMMENT: None

4. ADJOURNMENT: 4:44 pm

Health Service Board and Health Service System Website: <http://www.sfhss.org>

Summary of Health Service Board Rules Regarding Public Comment

1. A member of the public has up to three (3) minutes to make pertinent public comments before action is taken on any agenda item.
2. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
3. Members may submit their comments by email to health.service.board@sfgov.org by 5 pm the day before the meeting start time. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the subject line of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

Knowing Your Rights Under the Sunshine Ordinance

Government's duty is to serve the public, reaching its decision in full view of the public. Commissions, boards, councils, and other agencies of the City and County of San Francisco exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance or to report a violation of the ordinance, visit the Sunshine Ordinance Task Force website at <http://www.sfgov.org/sunshine>.

Summary of Health Service Board Rules Regarding Cell Phones and Pagers

The ringing and use of cell phones, pagers, and similar sound-producing electronic devices are prohibited at Health Service Board and committee meetings. The Chair of the meeting may order the removal of any person(s) in violation of this rule from the meeting room. The Chair of the meeting may allow an expelled person to return to the meeting following an agreement to comply with this rule. The complete rules are outlined in Chapter 67A of the San Francisco Administrative Code.

Disability Access and Accommodation

Regular Health Service Board meetings are held at City Hall, 1 Dr. Carlton B. Goodlett Place, in Hearing Room 416 at 1:00 PM on the second Thursday of each month. The closest accessible BART station is Civic Center, three blocks from City Hall. Accessible MUNI lines serving this location are #42 Downtown Loop and the #71 Haight/Noriega and the F Line to Market and Van Ness and the Metro stations at Van Ness and Market and Civic Center. For more information about MUNI accessible services, call (415) 923-6142. There is accessible parking in the vicinity of City Hall at Civic Center Plaza adjacent to Davies Hall and the War Memorial Complex. Accessible seating for persons with disabilities (including those using wheelchairs) will be available. To obtain a disability-related modification or accommodation, including auxiliary aids or services, to participate in the meeting, please contact Holly Lopez, 628-652-4646 at least 48 hours before the meeting, except for Monday meetings, for which the deadline is 4:00 pm the previous Friday.

Sensitivity to Chemical-based Products

To assist the City's effort to accommodate persons with severe allergies, environmental illnesses, multiple chemical sensitivity, or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to various chemical-based products. Please help the City accommodate these individuals.

Location of Materials

If any materials related to an item on this agenda have been distributed to the Health Service Board after distribution of the agenda packet, those materials are available for public inspection at the Health Service System during normal office hours. For more information, please contact Holly Lopez at 628-652-4646 or email holly.lopez@sfgov.org. The following email has been established to contact all members of the Health Service Board: health.service.board@sfgov.org. Health Service Board telephone number: 628-652-4646

Lobbyist Registration and Reporting Requirements

Individuals and entities influencing or attempting to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code § 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102; telephone (415) 252-3100; fax (415) 252-3112; web site www.sfgov.org/ethics.