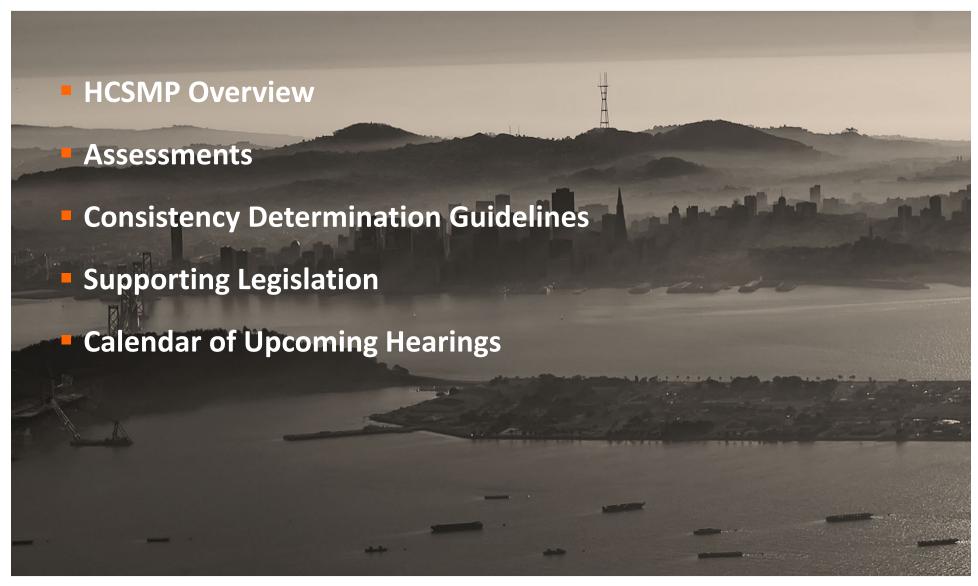






# Agenda





## **HCSMP** Purpose

- Identify current & future health care needs in SF, with a focus on improving access for vulnerable populations
- Identify an appropriate & equitable geographic distribution of facilities
- Provide a framework for reviewing future medical use development projects
- Provide other policy recommendations related to health care services as needed

# Outreach & Engagement



#### **Stakeholder Interviews**

with 33 individuals @ 25 organizations



### **Briefings**

with key stakeholders & advocacy organizations



Workshop with health care providers



**Online Survey** 



**Public Hearings** 

with Health Commission, Planning Commission, Board of Supervisors



**Public Comment Period** 

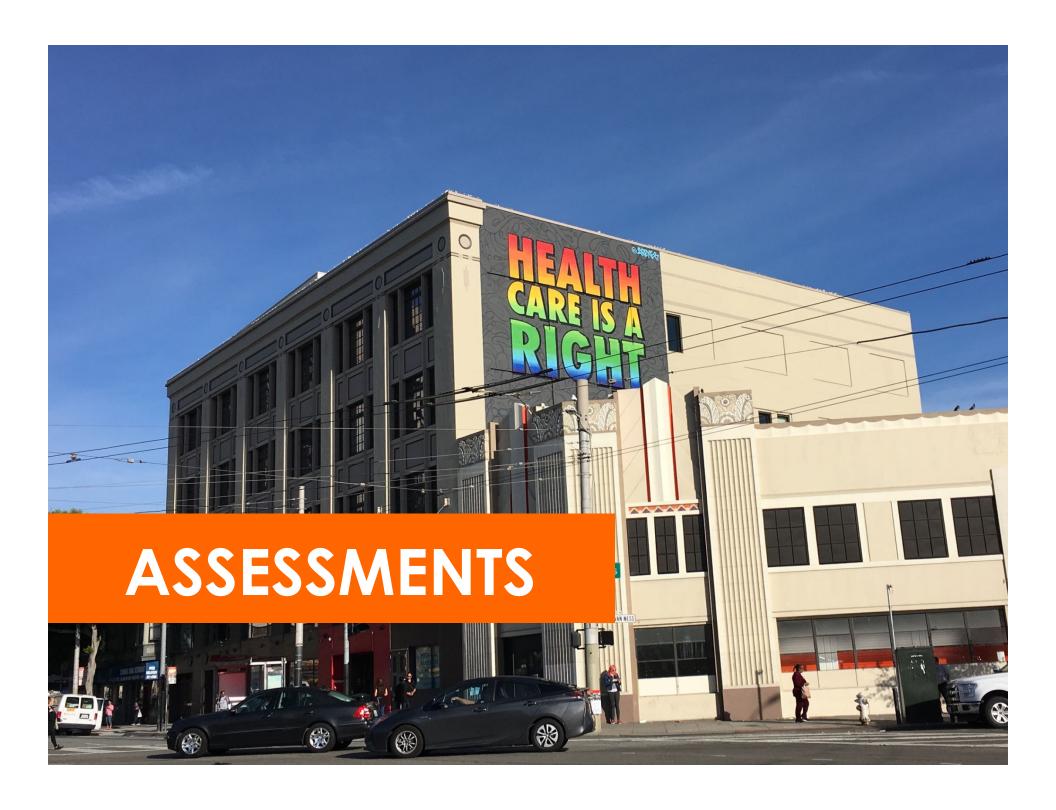
on Draft Plan (1/10/20-2/20/20)

# 2019 HCSMP Components

**ASSESSMENTS** 

CONSISTENCY DETERMINATION GUIDELINES

**SUPPORTING LEGISLATION** 



### 2019 HCSMP Assessments

# Community Health Assessment



Trends in morbidity and mortality; social determinants of health

# Capacity & Gap Assessment



Utilization and resource availability of health care; geographic, cultural, and linguistic access

# Health System Trends



Local, state, and national health care policy and trends impacting service delivery

#### Land Use Assessment



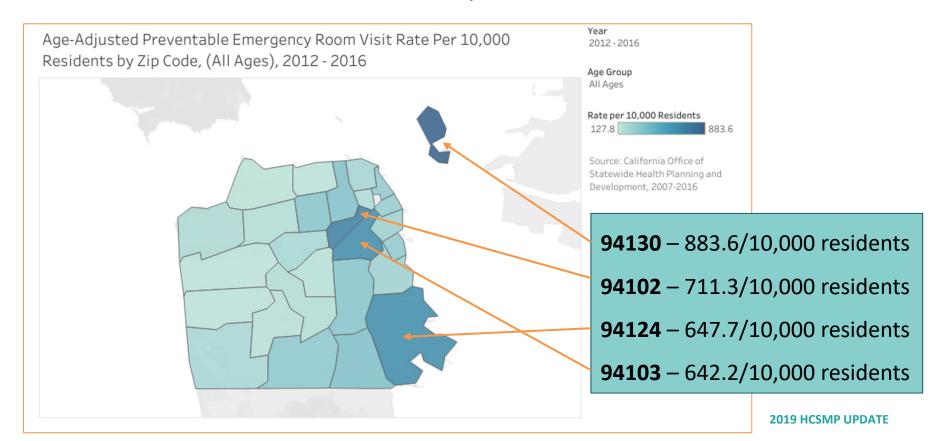
Supply of medical uses; demand and need for new medical uses; potential land use impacts

# Community Health Assessment

#### **Vulnerable Populations**

- Neighborhood
- Socioeconomic Status
- Age
- Race/Ethnicity

- Language
- LGBTQ
- Homeless

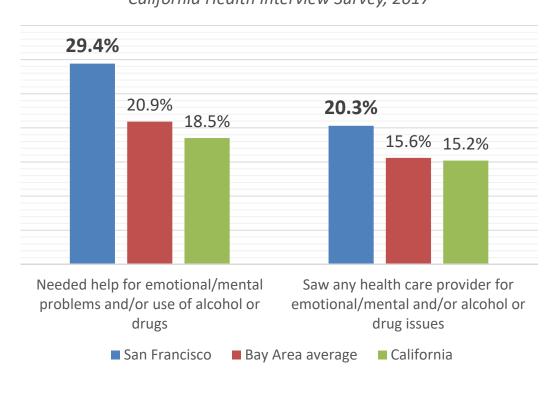


# Capacity & Gap Assessment

#### **Behavioral Health**

- Community-based services
- Workforce shortage of behavioral health professionals
- Identified Disparities

# Behavioral Health Questions California Health Interview Survey, 2017

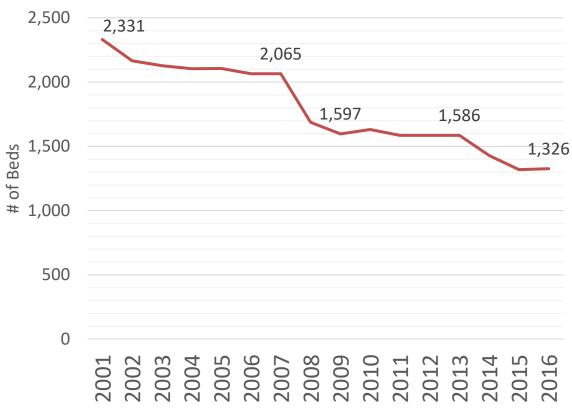


# Capacity & Gap Assessment

# Post-Acute & Long-Term Care

- Skilled Nursing Facilities (SNF)
- Subacute care
- Residential Care
   Facilities "board and care" homes

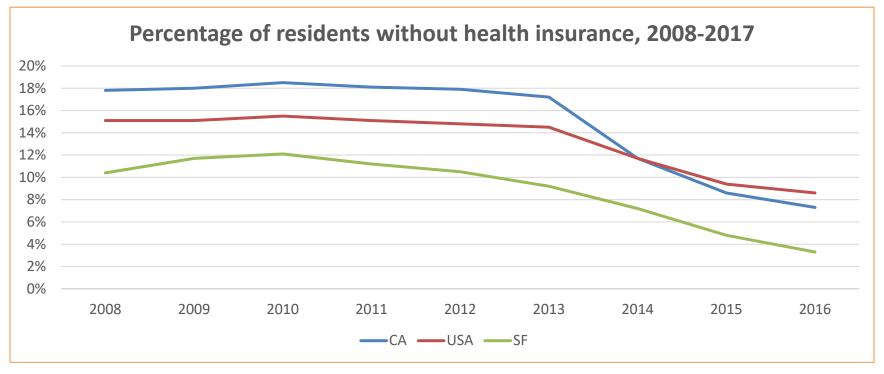
### San Francisco Hospital DP/SNF Beds, 2001-2016



# Health System Trends Assessment

#### **Health Care Coverage & Access**

- 140,000 San Franciscans enrolled in new health insurance options since
   2014 launch of ACA
- Health care delivery shifting to outpatient care



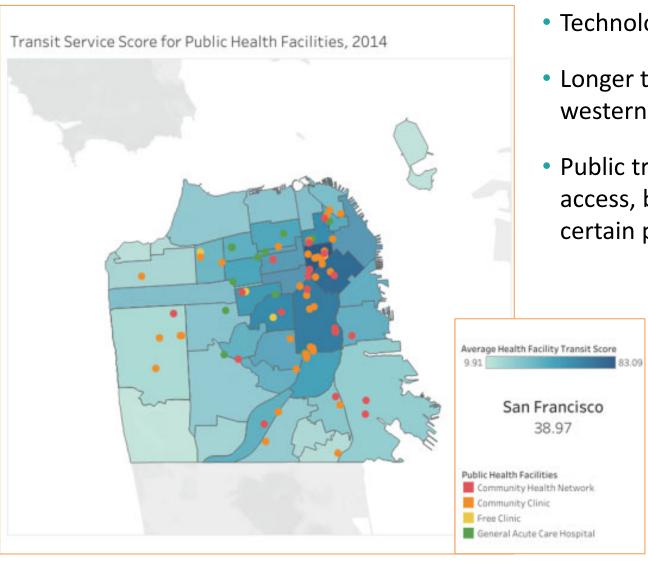
#### **Trends**

- 2.1 million sq ft. hospitals added since
   2013 (+236 beds)
- 348,907 sq. ft. major medical outpatient
- 12,360 **new jobs** since 2010
- **775,580 sq. ft** in pipeline



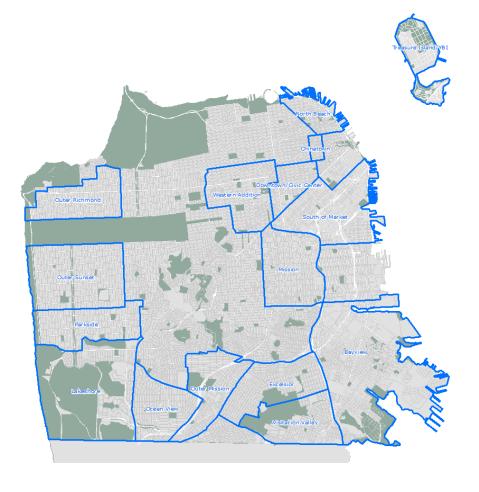






#### **Transportation & Technology**

- Technology can improve access
- Longer travel times for southern, western neighborhoods
- Public transportation improves access, but can be a barrier for certain populations



# Neighborhoods with At Risk Populations

- Bayview Hunters Point
- Tenderloin & adjacent SoMa
- Mission
- Chinatown
- Western Addition
- Western neighborhoods
- OMI, Excelsior, Visitation Valley
- Treasure Island
- Northern Waterfront

#### **Barriers to Health Care**

- Insurance status
- Cost of care
- Immigration status
- Transportation
- Knowledge of Services
- Linguistically/Culturally appropriate care
- Workforce gaps





### **Projected Growth**

- 4.3 4.7 million square feet
- Zoned capacity for growth



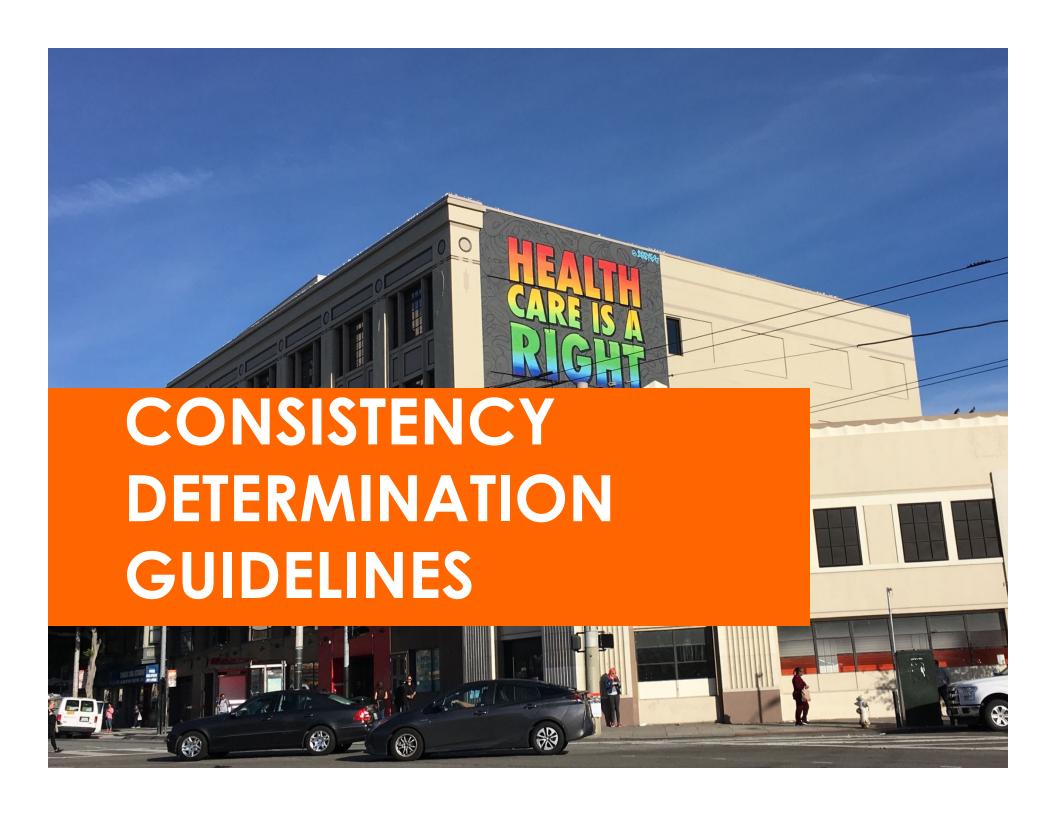
#### **Growth Caveats**

- Surplus in existing medical service
- Medical service delivery trends
- High rates of physician & beds per capita rates
- Regional & national hub for care
- Changing workforce composition
- Changing demographics





**2019 HCSMP UPDATE** 



# Consistency Determination Process

- Projects that must apply for a Consistency Determination
  - 5,000+ GSF new or added Medical Use
  - 10,000+ GSF change of use to Medical Use
- Guidelines developed by DPH and Planning Staff with Stakeholder input
- Not a checklist: providers select the Guidelines relevant to their project.
- Priority processing at Planning
- Inconsistent Applications
  - Health and Planning Commission Hearings

# **Consistency Determination Applications 2013-2019**

HealthRight 360
Jewish Home
Kaiser Permanente
Presidio Surgical Center
Planned Parenthood

### Recommended Updates

- **Consolidated / streamlined list** 
  - Removed tangential goals
  - New guidelines for behavioral health, longterm care
- **Process changes:** align HCSMP and the IMP by applying the requirement to institutions rather than individual facilities

### **2019 HCSMP** Consistency **Determination Process & Guidelines**

#### **PROCESS**

projects in San Francisco apply for a Consistency Determination from the Health Commission and

The Planning Department, in conjunction with SFDPH, must determine whether certain Medical Use projects, as defined by the Planning Code, align with the Health Care Services Master Plan (HCSMP) by making a "Consistency Determination."

#### **Projects Subject to HCSMP Requirements**

Projects that include Hospitals / Medical Centers (Planning Code Sections §102, §790.44, §890.44) or

Health Ser			
required to	Number	Guideline	Eligible for Incentive
• A	RECOMMENDATION 1. INCREASE ACCESS TO APPROPRIATE CARE FOR SAN FRANCISCO'S VULNERABLE POPULATIONS.		
Arr Consis NEITHER T ENTITLEM The proces		Increase the availability and accessibility of primary care in:  • low-income areas (i.e., areas where the percentage of low-income residents – defined as individuals living below 200% of the Census Poverty Threshold[i] – is greater than the San Francisco average),  • areas with documented high rates of health disparities (e.g., areas in which residents face the highest rates of morbidity or premature mortality) and/or areas with limited existing health care resources	YES
	12	Increase the availability and accessibility of culturally competent primary care among vulnerable subpopulations including but not limited to:  Medi-Cal beneficiaries, uninsured residents, limited English speakers, and populations with documented high rates of health disparities.	YES
	13	Increase the availability and accessibility of prenatal care within neighborhoods with:  • documented high rates of related health disparities.  • for subpopulations with documented high rates of related health disparities including but not limited to Black/African American residents	YES
	14	Increase the availability and accessibility of dental care in/among:  • low-income areas (i.e., areas where the percentage of low-income residents – defined as individuals living below 200% of the Census Poverty Threshold[i] – is greater than the San Francisco average) and  • reas with documented high rates of health disparities (e.g., areas in which residents face the highest rates of morbidity or premature mortality) among vulnerable subpopulations including but not limited to:  • Medi-Cal beneficiaries,  • uninsured residents,  • limited English speakers, and  • populations with documented high rates of health disparities.	YES



### SUPPORTING LEGISLATION

- Ten-year timeline for Plan updates with five-year Monitoring Report
- Updates to the General Plan
- Zoning Changes: Neighborhood Commercial controls
- Other policies: IMP process

### **Recent Legislation & Other Efforts**

- Simplified permitting for Residential Care
- Mental Health SF
- Meth Task Force
- Black/African American Health Initiative

# **Upcoming Dates**

January 10 - February 20, 2020: Public Comment Period Late January or Early February, 2020: Informational presentation to Health Commission February 6, 2020: Initiation of Supporting Legislation (tentative) March 12, 2020: Joint Hearing of Health and Planning **Commissions Spring 2020: Board of Supervisors** 

