

February 7, 2018

Proposals for Action by the S.F. Board of Supervisors

1. Issue a resolution that Sutter/CPMC:
 - a. Accept new San Francisco-resident patients, both from within the CPMC system and from other San Francisco hospitals, into the SNF and SNF Sub-Acute Care Units at St. Luke's Hospital;
 - b. Maintain the number of medical personnel and other resources needed to operate at the highest quality level a 40-bed SNF Sub-Acute Care Unit at the old St. Luke's hospital site until its closure and then at an appropriate interim site on a CPMC campus;
 - c. Commit to the development and permanent operation of a successor hospital-based 39-bed post-acute SNF and 40-bed SNF sub-acute care facility as part of the construction of the planned new Medical Office Building on the St. Luke's site (CPMC's renamed Mission/Bernal Campus); and
 - d. Commit that the total currently open CPMC post-acute SNF beds will not be decreased to accommodate St. Luke's SNF or SNF sub-acute patients, i.e., the 79 SNF and SNF sub-acute beds previously licensed at St. Luke's will be re-opened and maintained in addition to the current 38 Davies Campus post-acute SNF beds. This should occur both during the interim period following the closure of St. Luke's Hospital and after the opening of a new SNF and sub-acute SNF facility on the Mission/Bernal Campus.
2. Issue a resolution that Sutter/CPMC live up to its representation that after the closure of the California Campus, the Swindells Alzheimer's Residential Care Program will be maintained in its entirety and relocated without any interruption in service to a suitable location on another CPMC campus.
3. Issue a resolution that there now is a crisis, which will worsen in the next several years, in the availability of hospital-based SNF, including sub-acute care beds, and affordable RCFEs, including those with memory care units, within the City and County of San Francisco and the San Francisco Bay Area.
4. Direct the Department of Public Health to prepare by April 30, 2018, a report identifying all space in San Francisco hospitals that are licensed or could be re-licensed for use as SNF beds, including for sub-acute care patients.
5. Direct the Department of Public Health to prepare by April 30, 2018, a report identifying the number of beds occupied and the number of beds unoccupied in RCFEs, including memory care units within San Francisco. This report should also clarify the current and review future uses of Medi-Cal waivers and patch funding to subsidize low- and moderate-income residents requiring RCFE services.

6. Direct the Department of Public Health to prepare by April 30, 2018, a report presenting discharge data for the past ten years obtained from each public and private sector hospital in San Francisco on the number of out-of-county discharges, and submit the report to the Board of Supervisors. In addition, DPH should continue to collect out-of-county discharges annually on an on-going basis and provide annual reports to the Board of Supervisors. Both the initial 10-year summary, and the on-going annual reports, should specifically include the number of discharges to each type of out-of-county placement facility.
7. Direct the Department of Public Health, in consultation with labor and grassroots community groups as well as healthcare providers and associations, to take actions to develop both short-term and long-term solutions for insuring a sufficient number and range of post-acute care beds and facilities within the City and County of San Francisco for San Francisco residents discharged from San Francisco hospitals.
8. Along with other potential approaches to the insufficient number and range of post-acute beds in San Francisco, direct the Department of Public Health specifically to analyze and prepare reports on the following policy proposals:
 - a. Cooperation agreements among private and public hospitals to operate and fund jointly hospital-based SNFs, including SNF sub-acute care units, within the City and County of San Francisco;
 - b. The enactment of local legislation requiring the imposition of fines whenever a private hospital or healthcare facility removes a SNF bed from service without guaranteeing beforehand the availability of a similarly staffed bed elsewhere within the City and County of San Francisco so that there is not a decrease in such beds in San Francisco; and
 - c. The enactment of local legislation that mandates a minimum number and range of hospital-based post-acute care beds that public and private hospitals within the City and County of San Francisco must create and maintain.