BOARD of SUPERVISORS



City Hall 1 Dr. Carlton B. Goodlett Place, Room 244 San Francisco 94102-4689 Tel. No. 554-5184 Fax No. 554-5163 TDD/TTY No. 554-5227

June 6, 2019

The Honorable Anthony Portantino Chair of the California Senate Appropriations Committee California State Capitol Room 3086 Sacramento, CA 95814

Re: Board of Supervisors Resolution No. 257-19

Dear Chair Portantino:

On May 21, 2019, the Board of Supervisors of the City and County of San Francisco adopted Resolution No. 257-19 (Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019), which was enacted on May 31, 2019.

The Board of Supervisors directs the Clerk of the Board to forward the following document to your attention:

One certified copy of Resolution No. 257-19 (File No. 190551)

If you have any questions or require additional information, please contact the Office of the Clerk of the Board at (415) 554-5184, or by e-mail: board.of.supervisors@sfgov.org.

Sincerely,

Angela Calvillo Clerk of the Board

c. Members of the Board of Supervisors; Supervisors Matt Haney, Norman Yee, Hillary Ronen, Vallie Brown, and Rafael Mandelman Sophia Kittler, Mayor's Liaison to the Board of Supervisors Eddie McCaffrey, Mayor's Manager of State and Federal Legislative Affairs Andres Power, Mayor's Policy Director

Rebecca Peacock, Mayor's Office

Paul Yoder, Karen Lange, Erica Smith, City Lobbyists - Shaw/Yoder/Antwih Inc.



City and County of San Francisco Certified Copy

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

Resolution

190551

[Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019]

Sponsors: Haney; Yee, Ronen, Brown and Mandelman

Resolution supporting California State Senate Bill No. 464, the California Dignity in Pregnancy and Childbirth Act of 2019, introduced by Senator Holly Mitchell, which would require maternal healthcare providers to complete implicit bias training; require hospitals to provide patients with information on how to file a discrimination complaint; and would require the California Department of Public Health to track and publish data on maternal death and morbidity, disaggregated by county, facility, and racial and ethnic identity.

5/21/2019 Board of Supervisors - ADOPTED

Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

5/31/2019 Mayor - RETURNED UNSIGNED

STATE OF CALIFORNIA CITY AND COUNTY OF SAN FRANCISCO

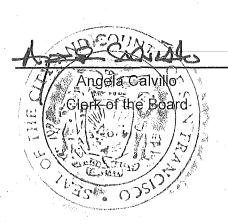
CLERK'S CERTIFICATE

I do hereby certify that the foregoing Resolution is a full, true, and correct copy of the original thereof on file in this office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the offical seal of the City and County of San Francisco.

June 05, 2019

Date



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[Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019

Resolution supporting California State Senate Bill No. 464, the California Dignity in Pregnancy and Childbirth Act of 2019, introduced by Senator Holly Mitchell, which would require maternal healthcare providers to complete implicit bias training; require hospitals to provide patients with information on how to file a discrimination complaint; and would require the California Department of Public Health to track and publish data on maternal death and morbidity, disaggregated by county, facility, and racial and ethnic identity.

WHEREAS, The United States has among the worst maternal mortality rates in the developed world; and

WHEREAS, The Centers for Disease Control and Prevention (CDC) reported that approximately 700 women die every year in the United States as a result of pregnancy or delivery complications, and the World Health Organization estimates the number to be closer to 1,200; and

WHEREAS, Maternal morbidity rates disproportionately impact American born Black women and Latina women born outside the United States; and

WHEREAS, A study published in the journal of Clinical Obstetrics and Gynecology found that Black women are three to four times more likely to die in a pregnancy-related death than white women, and identifies quality of health care as a major contributing factor to this disparity; and

WHEREAS, The California Pregnancy-Associated Mortality Review (CA-PAMR) published a report that while Black women make up only 5 percent of the state's birthing population, they account for more than 20 percent of pregnancy-related deaths; and

WHEREAS, Black women from middle and high income backgrounds have higher maternal morbidity rates than white women living in poverty; and

WHEREAS, Existing law requires the California Department of Public Health to maintain a program of maternal and child health, which may include, among other things, facilitating services directed toward reducing infant mortality and improving the health of mothers and children; and

WHEREAS, Existing law requires the Office of Health Equity within the Department of Public Health to serve as a resource for ensuring that programs collect and keep data and information regarding ethnic and racial health statistics, and to provide strategies and programs that address multicultural health issues, including, but not limited to, infant and maternal mortality; and

WHEREAS, The University of Virginia released a study identifying implicit bias as a contributing factor to poor maternal health outcomes for Black women; and

WHEREAS, California State Senate Bill No. 464 (SB 464) aims to reduce the effects of implicit bias in pregnancy, childbirth, and postnatal care so that all women are treated with dignity and respect by their healthcare providers; and

WHEREAS, SB 464 would make legislative findings relating to implicit bias and racial disparities in maternal mortality rates; and

WHEREAS, SB 464 would require hospitals that provide perinatal care, alternative birth centers, and primary clinics that provide services as an alternative birth center, to implement an evidence-based implicit bias training program for all health care providers involved in perinatal care of patients within those facilities; and

WHEREAS, The goal of implicit bias trainings is to limit the impact of bias on maternal health by hosting important discussions on race, historical and contemporary oppression of

minority communities, and health inequities that result in a higher mortality rates for Black women; and

WHEREAS, SB 464 would require health care providers to complete an initial basic implicit bias training through the program and a refresher course every 2 years thereafter, or on a more frequent basis if deemed necessary by the facility; and

WHEREAS, existing law requires that each death be registered with the local registrar of births and deaths in the district in which the death was officially pronounced or the body was found; and

WHEREAS, Existing law sets forth the persons responsible for completing the certificate of death and requires certain medical and health content on the certificate, including information indicating whether the decedent was pregnant at the time of death or within the year prior to the death, if known; and

WHEREAS, SB 464 would require the Department of Public Health to track and publish data on maternal death and severe morbidity, disaggregated by county, facility, and racial and ethnic identity; and

WHEREAS, Existing law requires hospitals to provide specified information regarding patient's rights to each patient upon admission or as soon as reasonably possible, including, among other things, information about the right to be informed of continuing health care requirements following discharge from the hospital and makes violations of these requirements a crime; and

WHEREAS, Patients have the right to be free of discrimination on the basis of race, color, religion, ancestry, national origin, disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, sexual-orientation, citizenship, primary language, or immigration status; and

WHEREAS, SB 464 would require hospitals to additionally provide patients with information on how to file a discrimination complaint with the hospital as well as state entities if the patient feels they were discriminated against on the basis of race, gender, age, class, sexual orientation, gender identity, disability, language proficiency, nationality, immigration status, gender expression, or religion; and

WHEREAS, SB 464 is already co-sponsored by ACT for Women and Girls, Black Women for Wellness, Western Center on Law & Poverty, and NARAL Pro-Choice California; now, therefore, be it

RESOLVED, That the San Francisco Board of Supervisors endorses SB 464, also known as the California Dignity in Pregnancy and Childbirth Act, introduced by Sen. Holly Mitchell (D-Los Angeles) and co-authored by Assembly Member Dr. Shirley Weber (D-San Diego); and be it

FURTHER RESOLVED, That the Clerk of the Board be directed to send a copy of this resolution to the offices of California State Senator Holly Mitchell; California State Assembly Member Shirley Weber; the Chair of the Senate Appropriations Committee; and Governor Gavin Newsom.



City and County of San Francisco Tails

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

Resolution

File Number:

190551

Date Passed: May 21, 2019

Resolution supporting California State Senate Bill No. 464, the California Dignity in Pregnancy and Childbirth Act of 2019, introduced by Senator Holly Mitchell, which would require maternal healthcare providers to complete implicit bias training; require hospitals to provide patients with information on how to file a discrimination complaint; and would require the California Department of Public Health to track and publish data on maternal death and morbidity, disaggregated by county, facility, and racial and ethnic identity.

May 21, 2019 Board of Supervisors - ADOPTED

Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

File No. 190551

I hereby certify that the foregoing Resolution was ADOPTED on 5/21/2019 by the Board of Supervisors of the City and County of San Francisco.

> Angela Calvillo Clerk of the Board

Unsigned

5/31/19

Date Approved

London N. Breed Mayor

I hereby certify that the foregoing resolution, not being signed by the Mayor within the time limit as set forth in Section 3.103 of the Charter, or time waived pursuant to Board Rule 2.14.2, became effective without her approval in accordance with the provision of said Section 3.103 of the Charter or Board Rule 2.14.2.

BOARD of SUPERVISORS



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TDD/TTY No. 554-5227

June 6, 2019

The Honorable Holly Mitchell California State Senator California State Capitol Room 5050 Sacramento, CA 95814

Re: Board of Supervisors Resolution No. 257-19

Dear Senator Mitchell:

On May 21, 2019, the Board of Supervisors of the City and County of San Francisco adopted Resolution No. 257-19 (Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019), which was enacted on May 31, 2019.

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Sincerely,

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Resolution

190551

[Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019]

Sponsors: Haney; Yee, Ronen, Brown and Mandelman

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Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

5/31/2019 Mayor - RETURNED UNSIGNED

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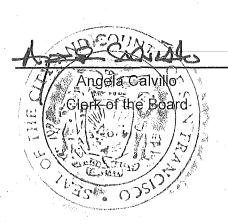
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June 05, 2019

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WHEREAS, The United States has among the worst maternal mortality rates in the developed world; and

WHEREAS, The Centers for Disease Control and Prevention (CDC) reported that approximately 700 women die every year in the United States as a result of pregnancy or delivery complications, and the World Health Organization estimates the number to be closer to 1,200; and

WHEREAS, Maternal morbidity rates disproportionately impact American born Black women and Latina women born outside the United States; and

WHEREAS, A study published in the journal of Clinical Obstetrics and Gynecology found that Black women are three to four times more likely to die in a pregnancy-related death than white women, and identifies quality of health care as a major contributing factor to this disparity; and

WHEREAS, The California Pregnancy-Associated Mortality Review (CA-PAMR) published a report that while Black women make up only 5 percent of the state's birthing population, they account for more than 20 percent of pregnancy-related deaths; and

WHEREAS, Black women from middle and high income backgrounds have higher maternal morbidity rates than white women living in poverty; and

WHEREAS, Existing law requires the California Department of Public Health to maintain a program of maternal and child health, which may include, among other things, facilitating services directed toward reducing infant mortality and improving the health of mothers and children; and

WHEREAS, Existing law requires the Office of Health Equity within the Department of Public Health to serve as a resource for ensuring that programs collect and keep data and information regarding ethnic and racial health statistics, and to provide strategies and programs that address multicultural health issues, including, but not limited to, infant and maternal mortality; and

WHEREAS, The University of Virginia released a study identifying implicit bias as a contributing factor to poor maternal health outcomes for Black women; and

WHEREAS, California State Senate Bill No. 464 (SB 464) aims to reduce the effects of implicit bias in pregnancy, childbirth, and postnatal care so that all women are treated with dignity and respect by their healthcare providers; and

WHEREAS, SB 464 would make legislative findings relating to implicit bias and racial disparities in maternal mortality rates; and

WHEREAS, SB 464 would require hospitals that provide perinatal care, alternative birth centers, and primary clinics that provide services as an alternative birth center, to implement an evidence-based implicit bias training program for all health care providers involved in perinatal care of patients within those facilities; and

WHEREAS, The goal of implicit bias trainings is to limit the impact of bias on maternal health by hosting important discussions on race, historical and contemporary oppression of

minority communities, and health inequities that result in a higher mortality rates for Black women; and

WHEREAS, SB 464 would require health care providers to complete an initial basic implicit bias training through the program and a refresher course every 2 years thereafter, or on a more frequent basis if deemed necessary by the facility; and

WHEREAS, existing law requires that each death be registered with the local registrar of births and deaths in the district in which the death was officially pronounced or the body was found; and

WHEREAS, Existing law sets forth the persons responsible for completing the certificate of death and requires certain medical and health content on the certificate, including information indicating whether the decedent was pregnant at the time of death or within the year prior to the death, if known; and

WHEREAS, SB 464 would require the Department of Public Health to track and publish data on maternal death and severe morbidity, disaggregated by county, facility, and racial and ethnic identity; and

WHEREAS, Existing law requires hospitals to provide specified information regarding patient's rights to each patient upon admission or as soon as reasonably possible, including, among other things, information about the right to be informed of continuing health care requirements following discharge from the hospital and makes violations of these requirements a crime; and

WHEREAS, Patients have the right to be free of discrimination on the basis of race, color, religion, ancestry, national origin, disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, sexual-orientation, citizenship, primary language, or immigration status; and

WHEREAS, SB 464 would require hospitals to additionally provide patients with information on how to file a discrimination complaint with the hospital as well as state entities if the patient feels they were discriminated against on the basis of race, gender, age, class, sexual orientation, gender identity, disability, language proficiency, nationality, immigration status, gender expression, or religion; and

WHEREAS, SB 464 is already co-sponsored by ACT for Women and Girls, Black Women for Wellness, Western Center on Law & Poverty, and NARAL Pro-Choice California; now, therefore, be it

RESOLVED, That the San Francisco Board of Supervisors endorses SB 464, also known as the California Dignity in Pregnancy and Childbirth Act, introduced by Sen. Holly Mitchell (D-Los Angeles) and co-authored by Assembly Member Dr. Shirley Weber (D-San Diego); and be it

FURTHER RESOLVED, That the Clerk of the Board be directed to send a copy of this resolution to the offices of California State Senator Holly Mitchell; California State Assembly Member Shirley Weber; the Chair of the Senate Appropriations Committee; and Governor Gavin Newsom.



City and County of San Francisco Tails

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

Resolution

File Number:

190551

Date Passed: May 21, 2019

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May 21, 2019 Board of Supervisors - ADOPTED

Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

File No. 190551

I hereby certify that the foregoing Resolution was ADOPTED on 5/21/2019 by the Board of Supervisors of the City and County of San Francisco.

> Angela Calvillo Clerk of the Board

Unsigned

5/31/19

Date Approved

London N. Breed Mayor

I hereby certify that the foregoing resolution, not being signed by the Mayor within the time limit as set forth in Section 3.103 of the Charter, or time waived pursuant to Board Rule 2.14.2, became effective without her approval in accordance with the provision of said Section 3.103 of the Charter or Board Rule 2.14.2.

BOARD of SUPERVISORS



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Tel. No. 554-5184
Fax No. 554-5163
TDD/TTY No. 554-5227

June 6, 2019

The Honorable Shirley Weber California State Assembly Member California State Capitol P.O. Box 942849 Sacramento, CA 94249-0079

Re: Board of Supervisors Resolution No. 257-19

Dear Assembly Member Weber:

On May 21, 2019, the Board of Supervisors of the City and County of San Francisco adopted Resolution No. 257-19 (Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019), which was enacted on May 31, 2019.

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Sincerely,

Angela Calvillo Clerk of the Board

c. Members of the Board of Supervisors; Supervisors Matt Haney, Norman Yee, Hillary Ronen, Vallie Brown, and Rafael Mandelman Sophia Kittler, Mayor's Liaison to the Board of Supervisors

Eddie McCaffrey, Mayor's Manager of State and Federal Legislative Affairs

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Resolution

190551

[Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019]

Sponsors: Haney; Yee, Ronen, Brown and Mandelman

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5/21/2019 Board of Supervisors - ADOPTED

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5/31/2019 Mayor - RETURNED UNSIGNED

STATE OF CALIFORNIA CITY AND COUNTY OF SAN FRANCISCO

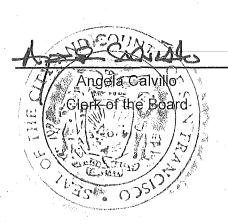
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June 05, 2019

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WHEREAS, The United States has among the worst maternal mortality rates in the developed world; and

WHEREAS, The Centers for Disease Control and Prevention (CDC) reported that approximately 700 women die every year in the United States as a result of pregnancy or delivery complications, and the World Health Organization estimates the number to be closer to 1,200; and

WHEREAS, Maternal morbidity rates disproportionately impact American born Black women and Latina women born outside the United States; and

WHEREAS, A study published in the journal of Clinical Obstetrics and Gynecology found that Black women are three to four times more likely to die in a pregnancy-related death than white women, and identifies quality of health care as a major contributing factor to this disparity; and

WHEREAS, The California Pregnancy-Associated Mortality Review (CA-PAMR) published a report that while Black women make up only 5 percent of the state's birthing population, they account for more than 20 percent of pregnancy-related deaths; and

WHEREAS, Black women from middle and high income backgrounds have higher maternal morbidity rates than white women living in poverty; and

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WHEREAS, The University of Virginia released a study identifying implicit bias as a contributing factor to poor maternal health outcomes for Black women; and

WHEREAS, California State Senate Bill No. 464 (SB 464) aims to reduce the effects of implicit bias in pregnancy, childbirth, and postnatal care so that all women are treated with dignity and respect by their healthcare providers; and

WHEREAS, SB 464 would make legislative findings relating to implicit bias and racial disparities in maternal mortality rates; and

WHEREAS, SB 464 would require hospitals that provide perinatal care, alternative birth centers, and primary clinics that provide services as an alternative birth center, to implement an evidence-based implicit bias training program for all health care providers involved in perinatal care of patients within those facilities; and

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WHEREAS, SB 464 is already co-sponsored by ACT for Women and Girls, Black Women for Wellness, Western Center on Law & Poverty, and NARAL Pro-Choice California; now, therefore, be it

RESOLVED, That the San Francisco Board of Supervisors endorses SB 464, also known as the California Dignity in Pregnancy and Childbirth Act, introduced by Sen. Holly Mitchell (D-Los Angeles) and co-authored by Assembly Member Dr. Shirley Weber (D-San Diego); and be it

FURTHER RESOLVED, That the Clerk of the Board be directed to send a copy of this resolution to the offices of California State Senator Holly Mitchell; California State Assembly Member Shirley Weber; the Chair of the Senate Appropriations Committee; and Governor Gavin Newsom.



City and County of San Francisco Tails

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

Resolution

File Number:

190551

Date Passed: May 21, 2019

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May 21, 2019 Board of Supervisors - ADOPTED

Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

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> Angela Calvillo Clerk of the Board

Unsigned

5/31/19

Date Approved

London N. Breed Mayor

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June 6, 2019

The Honorable Gavin Newsom Governor of the State of California 1303-10th Street, Suite 1173 Sacramento, CA 95814

Re: Board of Supervisors Resolution No. 257-19

Dear Governor Newsom:

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Sponsors: Haney; Yee, Ronen, Brown and Mandelman

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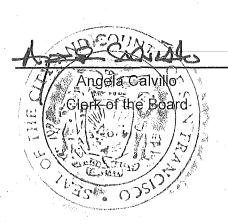
CLERK'S CERTIFICATE

I do hereby certify that the foregoing Resolution is a full, true, and correct copy of the original thereof on file in this office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the offical seal of the City and County of San Francisco.

June 05, 2019

Date



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[Supporting California State Senate Bill No. 464 (Mitchell) - California Dignity in Pregnancy and Childbirth Act of 2019

Resolution supporting California State Senate Bill No. 464, the California Dignity in Pregnancy and Childbirth Act of 2019, introduced by Senator Holly Mitchell, which would require maternal healthcare providers to complete implicit bias training; require hospitals to provide patients with information on how to file a discrimination complaint; and would require the California Department of Public Health to track and publish data on maternal death and morbidity, disaggregated by county, facility, and racial and ethnic identity.

WHEREAS, The United States has among the worst maternal mortality rates in the developed world; and

WHEREAS, The Centers for Disease Control and Prevention (CDC) reported that approximately 700 women die every year in the United States as a result of pregnancy or delivery complications, and the World Health Organization estimates the number to be closer to 1,200; and

WHEREAS, Maternal morbidity rates disproportionately impact American born Black women and Latina women born outside the United States; and

WHEREAS, A study published in the journal of Clinical Obstetrics and Gynecology found that Black women are three to four times more likely to die in a pregnancy-related death than white women, and identifies quality of health care as a major contributing factor to this disparity; and

WHEREAS, The California Pregnancy-Associated Mortality Review (CA-PAMR) published a report that while Black women make up only 5 percent of the state's birthing population, they account for more than 20 percent of pregnancy-related deaths; and

WHEREAS, Black women from middle and high income backgrounds have higher maternal morbidity rates than white women living in poverty; and

WHEREAS, Existing law requires the California Department of Public Health to maintain a program of maternal and child health, which may include, among other things, facilitating services directed toward reducing infant mortality and improving the health of mothers and children; and

WHEREAS, Existing law requires the Office of Health Equity within the Department of Public Health to serve as a resource for ensuring that programs collect and keep data and information regarding ethnic and racial health statistics, and to provide strategies and programs that address multicultural health issues, including, but not limited to, infant and maternal mortality; and

WHEREAS, The University of Virginia released a study identifying implicit bias as a contributing factor to poor maternal health outcomes for Black women; and

WHEREAS, California State Senate Bill No. 464 (SB 464) aims to reduce the effects of implicit bias in pregnancy, childbirth, and postnatal care so that all women are treated with dignity and respect by their healthcare providers; and

WHEREAS, SB 464 would make legislative findings relating to implicit bias and racial disparities in maternal mortality rates; and

WHEREAS, SB 464 would require hospitals that provide perinatal care, alternative birth centers, and primary clinics that provide services as an alternative birth center, to implement an evidence-based implicit bias training program for all health care providers involved in perinatal care of patients within those facilities; and

WHEREAS, The goal of implicit bias trainings is to limit the impact of bias on maternal health by hosting important discussions on race, historical and contemporary oppression of

minority communities, and health inequities that result in a higher mortality rates for Black women; and

WHEREAS, SB 464 would require health care providers to complete an initial basic implicit bias training through the program and a refresher course every 2 years thereafter, or on a more frequent basis if deemed necessary by the facility; and

WHEREAS, existing law requires that each death be registered with the local registrar of births and deaths in the district in which the death was officially pronounced or the body was found; and

WHEREAS, Existing law sets forth the persons responsible for completing the certificate of death and requires certain medical and health content on the certificate, including information indicating whether the decedent was pregnant at the time of death or within the year prior to the death, if known; and

WHEREAS, SB 464 would require the Department of Public Health to track and publish data on maternal death and severe morbidity, disaggregated by county, facility, and racial and ethnic identity; and

WHEREAS, Existing law requires hospitals to provide specified information regarding patient's rights to each patient upon admission or as soon as reasonably possible, including, among other things, information about the right to be informed of continuing health care requirements following discharge from the hospital and makes violations of these requirements a crime; and

WHEREAS, Patients have the right to be free of discrimination on the basis of race, color, religion, ancestry, national origin, disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, sexual-orientation, citizenship, primary language, or immigration status; and

WHEREAS, SB 464 would require hospitals to additionally provide patients with information on how to file a discrimination complaint with the hospital as well as state entities if the patient feels they were discriminated against on the basis of race, gender, age, class, sexual orientation, gender identity, disability, language proficiency, nationality, immigration status, gender expression, or religion; and

WHEREAS, SB 464 is already co-sponsored by ACT for Women and Girls, Black Women for Wellness, Western Center on Law & Poverty, and NARAL Pro-Choice California; now, therefore, be it

RESOLVED, That the San Francisco Board of Supervisors endorses SB 464, also known as the California Dignity in Pregnancy and Childbirth Act, introduced by Sen. Holly Mitchell (D-Los Angeles) and co-authored by Assembly Member Dr. Shirley Weber (D-San Diego); and be it

FURTHER RESOLVED, That the Clerk of the Board be directed to send a copy of this resolution to the offices of California State Senator Holly Mitchell; California State Assembly Member Shirley Weber; the Chair of the Senate Appropriations Committee; and Governor Gavin Newsom.



City and County of San Francisco Tails

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

Resolution

File Number:

190551

Date Passed: May 21, 2019

Resolution supporting California State Senate Bill No. 464, the California Dignity in Pregnancy and Childbirth Act of 2019, introduced by Senator Holly Mitchell, which would require maternal healthcare providers to complete implicit bias training; require hospitals to provide patients with information on how to file a discrimination complaint; and would require the California Department of Public Health to track and publish data on maternal death and morbidity, disaggregated by county, facility, and racial and ethnic identity.

May 21, 2019 Board of Supervisors - ADOPTED

Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

File No. 190551

I hereby certify that the foregoing Resolution was ADOPTED on 5/21/2019 by the Board of Supervisors of the City and County of San Francisco.

> Angela Calvillo Clerk of the Board

Unsigned

5/31/19

Date Approved

London N. Breed Mayor

I hereby certify that the foregoing resolution, not being signed by the Mayor within the time limit as set forth in Section 3.103 of the Charter, or time waived pursuant to Board Rule 2.14.2, became effective without her approval in accordance with the provision of said Section 3.103 of the Charter or Board Rule 2.14.2.