



London Breed
Mayor

Carol Isen
Human Resources Director (Acting)

Date: November 20, 2020

To: The Honorable Civil Service Commission

Through: Carol Isen
Human Resources Director (Acting)

From: Cynthia Avakian, AIR
Stephanie Tang, PRT
Bill Irwin / Daniel Kwon, PUC
Joan Lubamersky, GSA
Jacquie Hale, DPH
Amy Nuque, MTA

Subject: **Personal Services Contracts Approval Request**

This report contains six (6) personal services contracts (PSCs) in accordance with the revised Civil Service Commission (CSC) procedures for processing PSCs that became effective on November 5, 2014.

The services proposed by these contracts have been reviewed by Department of Human Resources (DHR) staff to evaluate whether the requesting departments have complied with City policy and procedures regarding PSCs. The proposed PSCs have been posted on the DHR website for seven (7) calendar days. CSC procedures for processing PSCs require that any appeal of these contracts be filed in the office of the CSC, Executive Officer during the posting period.

No timely appeals have been filed regarding the PSCs contained in this report. These proposed PSCs are being submitted to the CSC for ratification/approval.

DHR has prepared the following cost summary for personal services contracts that have been processed through the Department of Human Resources Fiscal Year 20/21 to date:

Total of this Report	YTD Expedited Approvals FY2020-2021	Total for FY2020-2021
\$51,192,567	\$60,986,248	\$847,444,170

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POSTING FOR

December 07, 2020

PROPOSED PERSONAL SERVICES CONTRACTS – REGULAR

PSC No	Dept Designation	PSC Amount	Description of Work	PSC Estimate d Start Date	PSC Estimated End Date	Type of Approval
49726 - 20/21	AIRPORT COMMISSION	\$38,000,000.00	San Francisco International Airport (SFO or Airport) requires the assistance of consultants who will prepare complex environmental analyses requiring specialized expertise and extensive knowledge of federal, state, and local regulations in the context of a built airport environment and how airports function according to federal rules and regulations. Such tasks may include but are not limited to: assisting with consultation with agencies and stakeholder outreach; producing technical reports and studies to support environmental review; performing technical modeling (e.g., air quality, noise, transportation) in accordance with appropriate federal, state, and local regulations; conducting aircraft noise modeling for specialized Federal Aviation Administration (FAA) airport noise compatibility plans; assisting with strategic pre-planning on upcoming airport projects and assisting in obtaining federal and state environmental approvals; provide litigation support; and provide as-needed California Environmental Quality Act (CEQA) and National Environmental Policy Act (NEPA) planning support as new projects are introduced into the capital improvement plan. Services will be provided on an as-needed basis.	January 1, 2021	December 31, 2027	REGULAR

PSC No	Dept Designation	PSC Amount	Description of Work	PSC Estimate d Start Date	PSC Estimated End Date	Type of Approval
43660 - 20/21	PORT	\$450,000.00	Through this contract the Port is seeking as-needed public relations, communications and media services. These services will include, but are not limited to, working with the Port's Communications Director and Communications Division to develop and execute a proactive media relations campaign and comprehensive strategic marketing program for Port projects to target local, regional, national, and worldwide audiences. These services will support the Port in its on-going efforts to effectively and economically develop, utilize, and maintain its varied infrastructure and facility assets. Additionally, the contractors will work with the Port to provide effective communication and information around the Port's response to the COVID-19 pandemic.	February 1, 2021	January 31, 2025	REGULAR
42086 - 20/21	PUBLIC UTILITIES COMMISSION	\$1,800,000.00	To perform maintenance and upgrade services for Calgon- manufactured Sentinel Ultra Violet (UV) Treatment Systems located at SFPUC's Tesla facility. These systems are used to treat the SFPUC's drinking water supply and require monthly maintenance services including calibrations, replacement of parts, etc. This service is necessary to ensure reliable system operation, and is not intended to impede on duties typically performed by SFPUC employees. The contract is for services and replacement parts with approximately \$1,000,000 for services and \$800,000 for replacement parts. The services include three day visits once per month that include critical alarm rectification, hardware inspection, mains verification, electrical power-up verification, general observation observances, historical data analysis, lamp inspection and maintenance, general electrical inspection, wiper inspection, ballast function testing, UV duty sensor cleaning and inspection, UV duty sensor performance	December 1, 2020	November 30, 2025	REGULAR

PSC No	Dept Designation	PSC Amount	Description of Work	PSC Estimate d Start Date	PSC Estimated End Date	Type of Approval
			evaluations, and system performance evaluations. SFPUC Stationary Engineers perform day-to-day maintenance on these systems (lamp replacements, wiper replacement/cleanings, well lense replacements, addressing alarms) and contingent upon reliable operations of systems going forward, a review will be conducted prior to year 4 to explore transitioning more complex maintenance work such as, but not limited to, system re-builds to the SFPUC WST Stationary Engineers.			
45487 - 20/21	RENT ARBITRATION BOARD	\$380,000.00	The Rent Board (RNT) is funded by a special assessment on every rental unit subject to the Rent Ordinance. This fee is imposed in accordance with chapter 37A of the San Francisco Administrative Code, which was recently changed (Ordinance No. 196-19) to include units that were built after June 13, 1979 and those that were previously exempt due to Substantial Rehabilitation. The project is to assist RNT staff to obtain from City and County of San Francisco (CCSF) tax roll and Assessor's parcel data, as well as other sources, to research and identify all rental units currently subject to the special assessment. The vendor will develop a database of all units, exempt and non-exempt, using parcel and other information, including residential unit count, fee category and other relevant info to calculate annual Rent Board fee, in order to impose the special assessment and to develop a system to audit the data to capture changes in property use. The vendor will assist RNT by conducting research on any parcel where the residential unit data is missing or incomplete. Vendor will prepare master list of non-exempt parcels subject to RMT fee levy to the Controller before the deadline to include RB fee in annual property tax bills. Vendor to respond to inquiries from RNT staff, property owners,	November 22, 2020	June 30, 2025	REGULAR

PSC No	Dept Designation	PSC Amount	Description of Work	PSC Estimate d Start Date	PSC Estimated End Date	Type of Approval
			realtors, title/escrow companies, appraisers and any other interested party regarding the fee.			
42999 - 20/21	PUBLIC HEALTH	\$10,000,000.00	In response to the COVID-19 emergency, Chinese Hospital will admit up to a maximum of 23 patients from Zuckerberg San Francisco General Hospital (ZSFG) to free beds at ZSFG in order to be ready for any surge of COVID-19 patients needing treatment at ZSFG. The patients will be treated at Chinese Hospital for as long as medically necessary, providing uninterrupted services for the duration of the PSC. Initial services will be for acute care. Future services may also include skilled nursing facility care. While the initial need for these services is for a contract with Chinese Hospital, the need for acute inpatient care and skilled nursing facility care may need to be met by other San Francisco hospitals in the future, as well.	November 1, 2020	October 31, 2021	REGULAR

TOTAL AMOUNT \$50,630,000

Published on *Personal Services Request Database* (<http://apps.sfgov.org/dhrdrupal>)[Home](#) >

Posting For December 07, 2020

Proposed Modifications to Personal Services Contracts

Commission Hearing Date

APPLY

2020-12-07

PSC Number	Commission Hearing Date	Department	Additional Amount	Cumulative Total	Description	Start Date	End Date	Approval Type
					Provide separate professional parking garage operational services for 19 parking facilities organized into three groups as follows: Group A – 8 Facilities (Civic Center, Lombard, Mission Bartlett, Performing Arts, Pierce, Sutter Stockton and 16th & Hoff garages, and 7th & Harrison lot); Group B – 3 Facilities (Golden Gateway and St. Mary's Square garages, and Kezar Lot); Group C – 7 Facilities (SF General Hospital, Moscone Center, North Beach, Vallejo St., Ellis O'Farrell, Union Square and Polk Bush garages). In addition to the three groups, there is a standalone contract for 5th & Mission Garage.			

4033 - 11/12 - MODIFICATIONS	December 7, 2020	MUNICIPAL TRANSPORTATION AGENCY -- MTA	\$562,567	\$4,540,084	<p>Services include: providing qualified and experienced parking personnel for cashiering, janitorial and security. The Operator shall provide oversight of all aspects of administrative functions including, but not limited to, collection, reconciliation and deposit of all parking and non- parking revenue; repair and maintenance of facilities and revenue control equipment; compliance with insurance and bond requirements; providing valet or valet-assist parking services during special events. The term is for six (6) years, thereafter on a month-to-month basis, not to exceed 36 months. The amount of 4,540,084 represents the compensation paid to the parking firms for providing professional operational services at the 19 garages. The \$4,540,084 amount breaks down to approximately</p>	03/01/2021	02/02/2022	REGULAR
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\$590,000 (\$72,000 per year, with a 5% increase starting in year four) for each of the three groups. Operating expenses, including parking taxes, are funded through gross parking revenue collected, but is not part of the compensation paid to the parking firm.

TOTAL AMOUNT \$562,567

Regular/Continuing/Annual Personal Services Contracts

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: AIRPORT COMMISSION -- AIR

Dept. Code: AIR

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Environmental Planning Professional Services

Funding Source: Airport Capital and Operating Funds

PSC Duration: 7 years

PSC Amount: \$38,000,000

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

San Francisco International Airport (SFO or Airport) requires the assistance of consultants who will prepare complex environmental analyses requiring specialized expertise and extensive knowledge of federal, state, and local regulations in the context of a built airport environment and how airports function according to federal rules and regulations. Such tasks may include but are not limited to: assisting with consultation with agencies and stakeholder outreach; producing technical reports and studies to support environmental review; performing technical modeling (e.g., air quality, noise, transportation) in accordance with appropriate federal, state, and local regulations; conducting aircraft noise modeling for specialized Federal Aviation Administration (FAA) airport noise compatibility plans; assisting with strategic pre-planning on upcoming airport projects and assisting in obtaining federal and state environmental approvals; provide litigation support; and provide as-needed California Environmental Quality Act (CEQA) and National Environmental Policy Act (NEPA) planning support as new projects are introduced into the capital improvement plan. Services will be provided on an as-needed basis.

B. Explain why this service is necessary and the consequence of denial:

SFO is required to meet regulatory requirements of federal and state agencies. By law, the Airport as a public agency cannot initiate projects without fully conducting environmental analysis of a proposed project and disclosing the results of those analyses to decision makers and stakeholders through CEQA and NEPA. Failure to adhere to conditions pursuant to CEQA and/or NEPA clearance can result in fines and other legal actions.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

Services were previously provided under PSC# 48987 14/15.

D. Will the contract(s) be renewed?

If there continues to be a need for such services at the Airport.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.

Preparation of environmental analysis and subsequent public reviews for complex projects take several years to complete and obtain agency approvals. The requested duration of seven years would bridge several cycles of environmental reviews of projects that require both federal and state environmental approvals.

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Short-term or capital projects requiring diverse skills, expertise and/or knowledge.

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

B. Explain the qualifying circumstances:

We anticipate a number of short-term and capital projects that will require CEQA and/or NEPA review. These may include discrete maintenance projects to larger, longer-term capital projects. Thus, we require having consultants available to us with the specialized skills and airport expertise to meet CEQA and NEPA review requirements. The need for these services remains intermittent and depends on the scope of a project. A wide range of expertise is

needed to support project reviews and permitting remains as-needed in nature and not all technical expertise needed are the same for all projects. Some services require specialized permits.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: Ability to develop environmental review and analysis documents pursuant to CEQA and NEPA regulations. Experience with preparing complex environmental analyses and conducting specialized technical analysis including air quality, greenhouse gas, noise, and transportation analyses. Specialized expertise and extensive knowledge of federal, state, and local regulations, especially those pertaining to airports (i.e., FAA) and state CEQA guidelines. Familiarity with permitting process and consultation to ensure compliance with federal, state, regional, and local agency mandates
- B. Which, if any, civil service class(es) normally perform(s) this work? 5278, Planner 2; 5283, Planner 5; 5291, Planner 3; 5293, Planner 4; 5298, Planner 3-Environmental Review; 5299, Planner 4-Environmental Review;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

None. The work needed to be performed at the Airport is unique in context and setting. There are no civil service classes with this specialized expertise to conduct technical analysis and modeling of all the resource topics under CEQA and NEPA. Staff would continue to direct the analysis and provide reviews of consultant deliverables.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

- A. Explain why civil service classes are not applicable.
Existing classifications do not have the specialized knowledge and expertise required to conduct detailed analysis for all the resource topics.
- B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No, the specialized knowledge and expertise related to these services are intermittent in nature, and to be provided for on an as-needed basis, and thus do not support the development of a new classification.

6. Additional Information

- A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.
- B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.
No. No. There is no anticipated need for training given the specificity of the work.
- C. Are there legal mandates requiring the use of contractual services?
No.
- D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.
- E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No.
- F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

**7. Union Notification: On 09/25/2020, the Department notified the following employee organizations of this PSC/RFP request:
Prof & Tech Eng, Local 21**

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Cynthia Avakian Phone: 650-821-2014 Email: cynthia.avakian@flysfo.com

Address: P.O. Box 8097 San Francisco, CA 94128

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 49726 - 20/21

DHR Analysis/Recommendation:

Civil Service Commission Action:

Commission Approval Required

DHR Approved for 12/07/2020

Receipt of Union Notification(s)

Ricardo Valle (AIR)

From: dhr-psccordinator@sfgov.org on behalf of cynthia.avakian@flysfo.com
Sent: Friday, September 25, 2020 7:00 PM
To: Cynthia Avakian (AIR); WendyWong26@yahoo.com; wendywong26@yahoo.com; tmathews@ifpte21.org; kschumacher@ifpte21.org; pkim@ifpte21.org; amakayan@ifpte21.org; L21PSCReview@ifpte21.org; Ricardo Valle (AIR); DHR-PSCCoordinator, DHR (HRD)
Subject: Receipt of Notice for new PCS over \$100K PSC # 49726 - 20/21

RECEIPT for Union Notification for PSC 49726 - 20/21 more than \$100k

The AIRPORT COMMISSION -- AIR has submitted a request for a Personal Services Contract (PSC) 49726 - 20/21 for \$38,000,000 for Initial Request services for the period 01/01/2021 – 12/31/2027. Notification of 30 days (60 days for SEIU) is required.

After logging into the system please select link below, view the information and verify receipt:

<https://gcc01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fapps.sfgov.org%2Fdhrdrupal%2Fnode%2F15335&data=02%7C01%7Cricardo.e.valle%40flysfo.com%7C2b6779bdd73f463bd9e408d861c01488%7C22d5c2cfce3e443d9a7fdfcc0231f73f%7C0%7C0%7C637366824895847730&data=GIYq3eSJoSaA6BCdJulfKDjO2k%2Bwl92fEG%2FgykZhj1Q%3D&reserved=0> For union notification, please see the TO: field of the email to verify receipt. If you do not see all the unions you intended to contact, the PSC Coordinator must change the state back to NOT READY, make sure the classes and unions you want to notify are selected and SAVE. Then VIEW the record and verify the list of unions and emails. EDIT the document again , change the state back START UNION NOTIFICATION and SAVE. You should receive the email with all unions to the TO: field as intended

Additional Attachment(s)

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: AIRPORT COMMISSION -- AIR Dept. Code: AIRType of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)Type of Approval: ☐ Expedited ☒ Regular (☐ Omit Posting)Type of Service: Environmental Planning Professional ServicesFunding Source: Airport Operating/Capital Funds PSC Duration: 6 years 1 day
PSC Amount: \$3,500,000 PSC Est. Start Date: 01/01/2015 PSC Est. End Date: 12/31/2020**1. Description of Work****A. Scope of Work:**

Complex environmental analyses, compliance monitoring and reporting tasks requiring specialized expertise and extensive knowledge of federal, state, and local regulations, especially those pertaining to airports. These tasks may include, but are not limited to: obtaining regulatory permits; assisting with consultation with agencies and public outreach; producing environmental studies; performing specialized resource investigations; performing technical modeling; and monitoring of construction sites and project mitigation sites in accordance with appropriate federal, state, and local environmental regulations. Services will be provided on an as-needed basis.

B. Explain why this service is necessary and the consequence of denial:

San Francisco International Airport (SFO) is required to meet regulatory requirements of federal and state agencies. These agencies require mitigation of any impacts to wetlands, threatened and endangered species, and shoreline development. If the Airport fails to comply with these permit conditions, the Airport is subject to fines and other legal actions.

C. Has this service been provided in the past. If so, how? If the service was provided via a PSC, provide the most recently approved PSC # and upload a copy of the PSC.
Services were previously provided under PSC # 4152-08/09.

D. Will the contract(s) be renewed? If there continues to be a need for such services at the Airport.

2. Union Notification: On 09/22/2014, the Department notified the following employee organizations of this PSC/RFP request: Professional & Tech Engrs, Local 21,

FOR DEPARTMENT OF HUMAN RESOURCES USEPSC# 48987 - 14/15

DHR Analysis/Recommendation:

11/17/2014

Commission Approval Required

Approved by Civil Service Commission with cond

DHR Approved for 11/17/2014

Page 17/17/2014

July 2013

3. Description of Required Skills/Expertise**A. Specify required skills and/or expertise:**

Ability to develop environmental review/disclosure documents, obtain regulatory permits and approvals for development with wetland fill, perform specialized natural resource investigations and prepare related reports based on those studies. Monitor construction and maintenance of airport facilities, public access and environmental mitigation projects within an airport environment. Familiarity with permitting process and consultation to ensure compliance with federal, state, regional, and local agency mandates.

B. Which, if any, civil service class(es) normally perform(s) this work?

2483,2484,2485,5278,5291,5298,5293,5299,5283,

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If yes, explain:

No.

4. Why Classified Civil Service Cannot Perform**A. Explain why civil service classes are not applicable:**

Existing classifications do not have the specialized knowledge and expertise required to conduct this work in an airport environment. The various areas of technical expertise required to support Airport staff does not overlap. For example, a wetlands biologist will often not have the expertise in airport wildlife biology experience that requires Federal Aviation Administration (FAA) certification. However, these disparate biological resources are required for the Airport wetland permit authorization under the federal Clean Water Act and Endangered Species

B. Would it be practical to adopt a new civil service class to perform this work? Explain.

The specialized knowledge and expertise related to these services are intermittent in nature, and to be provided for on an as-needed basis, and thus do not support the development of a new classification.

5. Additional Information (if "yes", attach explanation)

YES NO

- | | | |
|--|--------------------------|-------------------------------------|
| A. Will the contractor directly supervise City and County employee? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| B. Will the contractor train City and County employee? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| C. Are there legal mandates requiring the use of contractual services? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| D. Are there federal or state grant requirements regarding the use of contractual services? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| E. Has a board or commission determined that contracting is the most effective way to provide this service? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

☒ THE ABOVE INFORMATION IS SUBMITTED AS COMPLETE AND ACCURATE ON BEHALF OF THE DEPARTMENT HEAD ON 10/22/2014 BY:

Name: Cynthia Avakian Phone: 650-821-2014 Email: cynthia.avakian@flysfo.com

Address: P.O. Box 8097 San Francisco, CA 94128

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PORT -- PRT

Dept. Code: PRT

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Professional Service: As-Needed Public Relations, Communications, and Media Services

Funding Source: Port Operating Budget

PSC Duration: 4 years

PSC Amount: \$450,000

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

Through this contract the Port is seeking as-needed public relations, communications and media services. These services will include, but are not limited to, working with the Port's Communications Director and Communications Division to develop and execute a proactive media relations campaign and comprehensive strategic marketing program for Port projects to target local, regional, national, and worldwide audiences. These services will support the Port in its on-going efforts to effectively and economically develop, utilize, and maintain its varied infrastructure and facility assets.

Additionally, the contractors will work with the Port to provide effective communication and information around the Port's response to the COVID-19 pandemic.

B. Explain why this service is necessary and the consequence of denial:

Existing staff resources are insufficient to support the above proposed work. If additional professional resources are not made available, the Port as an enterprise agency will not be positioned to market itself for current and future revenue generating opportunities and will not be able to effectively communicate its response and recovery plans from the pandemic.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

These services were provided through as-needed contracts under PSC # 45678 – 16/17.

D. Will the contract(s) be renewed?

At this time, the Port does not anticipate that the contract will be renewed.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.

Not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Short-term or capital projects requiring diverse skills, expertise and/or knowledge.

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

B. Explain the qualifying circumstances:

Short-term or capital projects requiring diverse skills, expertise and/or knowledge. • The services requested under this PSC are a series of short term services that requires specialized skills and experience in communication and media relations. Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload). • The services requested under this PSC are to fill projects on an as-needed basis. The projects are intermittent and sporadic.

3. Description of Required Skills/Expertise

A. Specify required skills and/or expertise: Consultants proposing for this opportunity will need to demonstrate experience as a community outreach, public relations/media, marketing, crisis communication firm. Proposers must have the capability to access media sources on a national, statewide and local scale. The ability to work with ethnic

media sources and to outreach to diverse communities within San Francisco is also required.

B. Which, if any, civil service class(es) normally perform(s) this work? 1312, Public Information Officer; 1314, Public Relations Officer;

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

There are no available resources within the City to provide the services. Effective delivery of the services requires the services of full time professional public relations and communications firms.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

The primary services provided through this contract include market research; marketing and advertising; strategic communications and public relations; public outreach and project engagement; innovative engagement; photography, video, and recording; graphic design; collateral production and distribution; translation and interpretive and accessibility standards under the Americans with Disabilities Act (ADA). This work is specialized and varied. Port staff anticipate the work demands will be sporadic and short term often during intense durations and therefore not applicable to the creation of civil service classes.

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. It would not be practical to adopt a new civil service class for work that will be sporadically needed or only needed for a single project.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.
No. It is not anticipated that Port employees will perform the work so there is no need to train them.

C. Are there legal mandates requiring the use of contractual services?
No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No.

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

7. Union Notification: On 09/24/2020, the Department notified the following employee organizations of this PSC/RFP request:

Prof & Tech Eng, Local 21; Professional & Tech Engrs, Local 21

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Albie Udom Phone: 4152740485 Email: Albie.udom@sfport.com

Address: Pier 1, The Embarcadero San Francisco, CA 94111

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 43660 - 20/21

DHR Analysis/Recommendation:

Commission Approval Required

DHR Approved for 12/07/2020

Civil Service Commission Action:

Receipt of Union Notification(s)

From: dhrrpscordinator@sfgov.org on behalf of Albie.udom@sfport.com
To: [Udom, Albie \(PRT\)](#); WendyWong26@yahoo.com; wendywong26@yahoo.com; tmathews@ifpte21.org; kschumacher@ifpte21.org; pkim@ifpte21.org; amakayan@ifpte21.org; L21PSCReview@ifpte21.org; [Udom, Albie \(PRT\)](#); [DHR-PSCCoordinator, DHR \(HRD\)](#)
Subject: Receipt of Notice for new PCS over \$100K PSC # 43660 - 20/21
Date: Thursday, September 24, 2020 11:27:17 AM

RECEIPT for Union Notification for PSC 43660 - 20/21 more than \$100k

The PORT -- PRT has submitted a request for a Personal Services Contract (PSC) 43660 - 20/21 for \$450,000 for Initial Request services for the period 02/01/2021 – 01/31/2025. Notification of 30 days (60 days for SEIU) is required.

After logging into the system please select link below, view the information and verify receipt:

<http://apps.sfgov.org/dhrrupal/node/15555> For union notification, please see the TO: field of the email to verify receipt. If you do not see all the unions you intended to contact, the PSC Coordinator must change the state back to NOT

READY, make sure the classes and unions you want to notify are selected and SAVE. Then VIEW the record and verify the list of unions and emails. EDIT the document again , change the state back START UNION NOTIFICATION and SAVE. You should receive the email with all unions to the TO: field as intended

Additional Attachment(s)

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PORT -- PRT

Dept. Code: PRT

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Professional Service: As-Needed Public Relations, Communications & Media Services

Funding Source: Port Operating Budget

PSC Duration: 4 years

PSC Amount: \$900,000

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

Through this contract the Port is seeking as-needed public relations, communications and media services. These services will include, but are not limited to, working with the Port's Communications Director and Communications Division to develop and execute a proactive media relations campaign and comprehensive strategic marketing program for Port projects to target local, regional, national, and worldwide audiences. These services will support the Port in its on-going efforts to effectively and economically develop, utilize, and maintain its varied infrastructure and facility assets.

B. Explain why this service is necessary and the consequence of denial:

Existing staff resources are insufficient to support the above proposed work. If additional professional resources are not made available, the Port as an enterprise agency will not be positioned to market itself for current and future revenue generating opportunities.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

These services have been provided through as-needed public relations contracts in the past. The Civil Services Commission previously approved these services through PSC #4113-10/11.

D. Will the contract(s) be renewed?

No, this contract will not be renewed.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.

not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

B. Explain the qualifying circumstances:

The services requested through this solicitation are as-needed to assist with and execute a proactive media relations campaign and comprehensive strategic marketing program for Port projects to target local, regional, national, and worldwide audiences. These services will support the Port in its on-going efforts to effectively and economically develop, utilize, and maintain its varied infrastructure and facility assets. Port staff has previously received Civil Service Commission to contract for this work in PSC #4113-10/11.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: Consultants proposing for this opportunity will need to demonstrate experience as a community outreach, public relations/media, marketing, crisis communication firm. Proposers must have the capability to access media sources on a national, statewide and local scale. The ability to work with ethnic media sources and to outreach to diverse communities within San Francisco is also required.
- B. Which, if any, civil service class(es) normally perform(s) this work? 1312, Public Information Officer; 1314, Public Relations Officer;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

Port staff requires the services of a full service public relations firms. These are not currently available through the City.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

- A. Explain why civil service classes are not applicable.
The primary services provided through this contract include market research; marketing and advertising; strategic communications and public relations; public outreach and project engagement; innovative engagement; photography, video, and recording; graphic design; collateral production and distribution; translation and interpretive and accessibility standards under the Americans with Disabilities Act (ADA). This work is specialized and varied. Port staff anticipate the work demands will be sporadic and short term often during intense durations and therefore not applicable to the creation of civil service classes.
- B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. It would not be practical to adopt new civil service classifications for work that will be sporadically needed or only needed for a single project.

6. Additional Information

- A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.

- B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.
No. The consultant will be required to provide on-call market research; marketing and advertising; strategic communications and public relations; public outreach and project engagement; innovative engagement; photography, video, and recording; graphic design; collateral production and distribution; and translation. There are no training opportunities available through this contract.
- C. Are there legal mandates requiring the use of contractual services?
No.
- D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.
- E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
Yes. See attached Port Commission Resolution
- F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

7. Union Notification: On 06/13/2017, the Department notified the following employee organizations of this PSC/RFP request:
Architect & Engineers, Local 21

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Lavena Holmes Phone: 415-274-0305 Email: lavena.holmes@sfport.com

Address: Pier 1, The Embarcadero San Francisco, CA 94111

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 45678 - 16/17

DHR Analysis/Recommendation:

action date: 08/07/2017

Commission Approval Required

Approved by Civil Service Commission

08/07/2017 DHR Approved for 08/07/2017

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC UTILITIES COMMISSION -- PUC

Dept. Code: PUC

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Calgon Carbon UV Technologies (19799)

Funding Source: Water Enterprise Operating Budget

PSC Duration: 5 years

PSC Amount: \$1,800,000

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

To perform maintenance and upgrade services for Calgon- manufactured Sentinel Ultra Violet (UV) Treatment Systems located at SFPUC's Tesla facility. These systems are used to treat the SFPUC's drinking water supply and require monthly maintenance services including calibrations, replacement of parts, etc. This service is necessary to ensure reliable system operation, and is not intended to impede on duties typically performed by SFPUC employees. The contract is for services and replacement parts with approximately \$1,000,000 for services and \$800,000 for replacement parts. The services include three day visits once per month that include critical alarm rectification, hardware inspection, mains verification, electrical power-up verification, general observation observances, historical data analysis, lamp inspection and maintenance, general electrical inspection, wiper inspection, ballast function testing, UV duty sensor cleaning and inspection, UV duty sensor performance evaluations, and system performance evaluations.

SFPUC Stationary Engineers perform day-to-day maintenance on these systems (lamp replacements, wiper replacement/cleanings, well lense replacements, addressing alarms) and contingent upon reliable operations of systems going forward, a review will be conducted prior to year 4 to explore transitioning more complex maintenance work such as, but not limited to, system re-builds to the SFPUC WST Stationary Engineers.

B. Explain why this service is necessary and the consequence of denial:

These systems provide primary disinfection for parasites to the drinking water supply. Calgon will provide system support, as-needed repair service on their proprietary system, and training to SFPUC employees to ensure safe and reliable system operation. Without these, the safety of the drinking water supply could be compromised and the SFPUC could be subject to State regulatory compliance findings.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

Yes, SFPUC has been using these services since 2011 when the UV treatment systems were procured from Calgon and installed. Contract #'s are 1000003767, 1000006476, and 1000009664. PSC 41960 - 18/19 Equipment Maintenance for Calgon Carbon Corp's UV System was approved by this Commission on April 1, 2019. PSC 35864 - 19/20 Equipment Maintenance for Calgon Carbon Corp's UV System(9664) received expedited approval on April 9, 2020. PSC 40336 - 19/20 Equipment Maintenance for Calgon Carbon Corp's UV System(17751) was approved by this Commission on July 6, 2020 for this contract. PSC 42086 - 20/21 Calgon Carbon UV Technologies (19799) is requested to replace PSC 40336 - 19/20 because the cost and duration estimates for the contract have been revised.

D. Will the contract(s) be renewed?

Yes.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

B. Explain the qualifying circumstances:

SFPUC does not have access to the technical knowledge needed to perform the service, but in addition, the work is only performed for 2-3 days per month, and would require less than 1/8 of a FTE to perform.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: Calgon is providing service technicians and engineers that have been trained specifically by Calgon on the maintenance and repair of these systems. They have access to proprietary knowledge not available to staff outside of Calgon. The departments PUC Chief Stationary Engineer has indicated that their group has been acquiring training from the vendor and can reliably perform many of the simpler, day-to-day maintenance activities in-between monthly visits from Calgon.
- B. Which, if any, civil service class(es) normally perform(s) this work? 7341, Statnry Eng Water Treat Plant; 7343, Sr Statnry Eng, Wtr Treat Plnt;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: The contractor will be providing replacement parts manufactured by Calgon.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

SFPUC Water Supply and Treatment staff are familiar with the systems but the technology/treatment process is fairly new. Water Supply staff has been working with Calgon to slowly gain the knowledge needed to conduct aspects of this service internally.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

- A. Explain why civil service classes are not applicable.
SFPUC trade groups do not have access to all of the required training needed to service these very sophisticated systems. Furthermore, the maintenance and repair of the systems require a significant number of replacement components/parts and allowing non-Calgon certified staff to perform this service would invalidate the warranties for these replacement components.
- B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No. There is not a enough work for even a single FTE, and the knowledge and skills required are not available enough to navigate turnover. Additionally, the service is only for 3 days per month.

6. Additional Information

- A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.
- B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contact? If so, please explain what that will entail; if not, explain why not.
Yes. Calgon has been, and will continue to provide training to WST Stationary Engineers for certain portions of the work (Changing lamps, well lense reports, responding to alarms). During periods of reliable operations, WST performs these day-to-day operations. During periods in which the systems incur lamp failures other other serious malfunctions, Calgon provides the neccessary support. Prior to year 4 of this contract, and based on reliable system operations, the SFPUC will endeavor to take over more complex maintenance of mechanical components of this scope including system re-builds while maintaining a contractual agreement to service the most sophisticated components (driveboards, electrical panels etc..).
- C. Are there legal mandates requiring the use of contractual services?
No.
- D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.
- E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No.

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

7. **Union Notification:** On 10/30/2020, the Department notified the following employee organizations of this PSC/RFP request:
Stationary Engineers, Local 39

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Bill Irwin Phone: 415-934-3975 Email: wirwin@sfgwater.org

Address: 525 Golden Gate Avenue 8th Floor San Francisco, CA 94102

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 42086 - 20/21

DHR Analysis/Recommendation:

Civil Service Commission Action:

Commission Approval Required

DHR Approved for 12/07/2020

Receipt of Union Notification(s)

From: dhrrpscordinator@sfgov.org on behalf of wirwin@sfgwater.org
To: [Irwin, William](mailto:Irwin.William); seichenberger@local39.org; MRainsford@local39.org; grojo@local39.org; [Irwin, William](mailto:Irwin.William); [DHR-PSCCoordinator, DHR \(HRD\)](#)
Subject: Receipt of Notice for new PCS over \$100K PSC # 42086 - 20/21
Date: Friday, October 30, 2020 3:35:55 PM

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

RECEIPT for Union Notification for PSC 42086 - 20/21 more than \$100k

The PUBLIC UTILITIES COMMISSION -- PUC has submitted a request for a Personal Services Contract (PSC) 42086 - 20/21 for \$1,800,000 for Initial Request services for the period 12/01/2020 – 11/30/2025. Notification of 30 days (60 days for SEIU) is required.

After logging into the system please select link below, view the information and verify receipt:

<http://apps.sfgov.org/dhrrupal/node/15688> For union notification, please see the TO: field of the email to verify receipt. If you do not see all the unions you intended to contact, the PSC Coordinator must change the state back to NOT

READY, make sure the classes and unions you want to notify are selected and SAVE. Then VIEW the record and verify the list of unions and emails. EDIT the document again , change the state back START UNION NOTIFICATION and SAVE. You should receive the email with all unions to the TO: field as intended

From: [Stan Eichenberger](#)
To: [Kyger, Todd](#)
Cc: [Irwin, William](#); [DHR-PSCCoordinator, DHR \(HRD\)](#)
Subject: RE: Receipt of Notice for new PCS over \$100K PSC # 42086 - 20/21
Date: Monday, November 9, 2020 6:59:45 PM
Attachments: [PSC Calgon 110920\[1\].docx](#)

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Todd,

Local 39 appreciates that the PUC has agreed to update the PSC based on the attached. Local 39 is ok with the PUC moving forward with Personal Services Contract (PSC) 42086 - 20/21.

Thank you,

Stan Eichenberger
Business Representative
IUOE - Stationary Engineers, Local 39

-----Original Message-----

From: Kyger, Todd <TKyger@sfgov.org>
Sent: Monday, November 9, 2020 6:00 PM
To: Stan Eichenberger <seichenberger@local39.org>
Cc: Irwin, William <WIrwin@sfgov.org>; DHR-PSCCoordinator, DHR (HRD) <dhr-psccordinator@sfgov.org>
Subject: Re: Receipt of Notice for new PCS over \$100K PSC # 42086 - 20/21

Hi Stan,

Based on our discussions and the updated PSC form attached, can you please provide Local 39's approval to move forward with Personal Services Contract (PSC) 42086 - 20/21 for \$1,800,000?

Thank you,

Todd Kyger

Workforce & Economic Programs
Infrastructure Division
San Francisco Water, Power, Sewer
415-308-0839 I tkyger@sfgov.org

On 11/3/20, 12:23 PM, "Stan Eichenberger" <seichenberger@local39.org> wrote:

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning Todd,

Thank you for reaching out to me yesterday and for bringing this PSC to my attention, and as a follow-up to the email below received on October 30, 2020.

It is of Local 39's understanding that the intent of this PSC is to replace PSC 40336 and to provide necessary training to Local 39 represented employees so general maintenance of the UV system can be performed internally with City employees. It is also recognized that this PSC also provides for ongoing, through the term of the PSC, Calgon provided service technicians and engineers to provide preparatory and specialty services that is not generally available to staff outside of Calgon.

Based on our prior discussions, and prior discussions with Chief Engineer Justin Sebring, regarding PSC 40336, it is understood that this UV system has had many failures over the recent years, primarily with the UV bulbs and their service life; failures that create service interruptions and prevent reliable system operation. In addition, failures that need to be further rectified by the manufacturer in order to maintain the manufacturer's warranty.

With this said, Local 39 appreciates that there is a plan to transfer the general maintenance of this system to City staff. However, it remains unclear as to what necessitates transferring such work over a five-year period. If it's the department's intent to transfer such general maintenance over a five-year period, can you please explain why the general maintenance cannot be transferred to City staff within one to two years? In addition, can you please provide us with the Department's understanding as to what general maintenance entails? Furthermore, can you please provide us with a better understanding as to the training that will be provided by the contractor; for example: is it hands-on training, onsite training, type of training materials, expected total hours and days of training to be provided to each employee, amount of employees that are expected to be trained, the classifications of employees that will receive training, etc?

Thank you,

Stan Eichenberger
Business Representative
IUOE - Stationary Engineers, Local 39
337 Valencia Street
San Francisco, CA 94103
Office: (415)861-1135
Fax: (415) 861-5264

-----Original Message-----

From: dhr-psccordinator@sfgov.org <dhr-psccordinator@sfgov.org> On Behalf Of wirwin@sfgwater.org
Sent: Friday, October 30, 2020 3:32 PM
To: wirwin@sfgwater.org; Stan Eichenberger <seichenberger@local39.org>; Michael Rainsford <mrainsford@local39.org>; grojo@local39.org; wirwin@sfgwater.org; dhr-psccordinator@sfgov.org
Subject: Receipt of Notice for new PCS over \$100K PSC # 42086 - 20/21

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

RECEIPT for Union Notification for PSC 42086 - 20/21 more than \$100k

The PUBLIC UTILITIES COMMISSION -- PUC has submitted a request for a Personal Services Contract (PSC) 42086 - 20/21 for \$1,800,000 for Initial Request services for the period 12/01/2020 – 11/30/2025. Notification of 30 days

(60

days for SEIU) is required.

After logging into the system please select link below, view the information and verify receipt:

<http://apps.sfgov.org/dhrdrupal/node/15688> For union notification, please see the TO: field of the email to verify receipt. If you do not see all the unions you intended to contact, the PSC Coordinator must change the state back to NOT READY, make sure the classes and unions you want to notify are selected and SAVE. Then VIEW the record

From: [Dobbs, Matthew](#)
To: [Irwin, William](#); [Kyger, Todd](#)
Subject: Re: Calgon Service Contract Update
Date: Tuesday, November 10, 2020 1:44:56 PM

Yes. They are all local 39

Get [Outlook for iOS](#)

From: Irwin, William <WIrwin@sflower.org>
Sent: Tuesday, November 10, 2020 1:38:47 PM
To: Dobbs, Matthew <MDobbs@sflower.org>; Kyger, Todd <TKyger@sflower.org>
Subject: RE: Calgon Service Contract Update

Hi Matt and Todd-

Is Local 39 ok with using 7341 and 7343 instead of 7334 and 7335?

Bill

Bill Irwin
SFPUC – Program Administration Bureau
525 Golden Gate Ave. 8th Floor
San Francisco, Ca. 94102
415-934-3975

From: Dobbs, Matthew <MDobbs@sflower.org>
Sent: Tuesday, November 10, 2020 8:54 AM
To: Kyger, Todd <TKyger@sflower.org>
Cc: Irwin, William <WIrwin@sflower.org>
Subject: FW: Calgon Service Contract Update

Good morning Todd,

Angela signed off. I have incorporated her one suggested change to the job classifications. We are ready to submit.

Thanks

From: Cheung, Angela <ACheung@sflower.org>
Sent: Tuesday, November 10, 2020 7:57 AM
To: Dobbs, Matthew <MDobbs@sflower.org>
Cc: Agam, David E <DAgam@sflower.org>; Kyger, Todd <TKyger@sflower.org>; Macaulay, Ryan

<RMacaulay@sfwater.org>

Subject: RE: Calgon Service Contract Update

I'm OK with the general language. Under 2B, wrong classification is stated. The classifications should be 7341 and 7343.

From: Dobbs, Matthew <MDobbs@sfwater.org>

Sent: Monday, November 09, 2020 8:39 PM

To: Cheung, Angela <ACheung@sfwater.org>

Cc: Agam, David E <DAgam@sfwater.org>; Kyger, Todd <TKyger@sfwater.org>

Subject: Calgon Service Contract Update

Hey Angela,

We (Me, Justin, and Todd Kyger from CAB) had the meeting with Local 39 today. The union is steadfast in desiring as much of the work as possible be transitioned to the SFPUC. They have agreed to support the five-year term under the premise that prior to year four there will be a review of services in relation to the overall performance of the system. I have attached the language for the PSC request form to be turned into the Civil Service Commission. The language was agreed upon by all parties on the call today. We wanted to run by you before we turn it into DHR/Commission. Let me know if you're okay with it.

Thanks

Matthew Dobbs

Business Services Manager
SFPUC-Water Quality Division
1657 Rollins Road
Burlingame, CA, 94010
Office - 650-652-3166
Cell – 415-961-3311
mdobbs@sfwater.org

Please consider the environment before printing this email.

San Francisco Water, Power, and Sewer | Services of the San Francisco Public Utilities Commission



Additional Attachment(s)

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC UTILITIES COMMISSION -- PUCDept. Code: PUCType of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)Type of Service: Equipment Maintenance for Calgon Carbon Corp's UV SystemFunding Source: WST Operating FundsPSC Duration: 3 yearsPSC Amount: \$670,000**1. Description of Work****A. Scope of Work/Services to be Contracted Out:**

The purpose of this contract is to provide additional funding to the contract established on June 1, 2017 for three years with Calgon Carbon Corp. (Calgon) for the maintenance of Calgon's proprietary ultraviolet light (UV) disinfection system at the San Francisco Public Utilities Commission's (SFPUC) Tesla Treatment Facility. The contract provides for field services by Calgon's trained field services technicians and purchase of proprietary parts that need to be replaced such as UV lamps, sleeves, ballasts, etc.

Services performed by Calgon:

- Calibration of current transducers and ballast drive boards
- UV sensor inspection and re-scale power settings as required
- UV sensor inspection and sensor well cleaning - inspect for scratches on all quartz surfaces, leaks in sensor wells, etc.
- Replace UV sensors and sensor wells as required
- Inspect power supply cabinets and ensure proper terminations on all PLC I/O cards
- Inspect lamps for deformation suspected to be from acoustic resonance at this time
- Replace UV lamps, as requested
- Replace quartz sleeves, as requested
- PLC programming

B. Explain why this service is necessary and the consequence of denial:

The contract provides for maintenance and related parts that are necessary to assure safe, reliable operation of the Tesla UV reactors and comply with regulatory requirements for the disinfection of Hetch

Hetchy water. Additional funding of the contract has become necessary because a higher level of maintenance support than originally anticipated has proven necessary to keep the UV reactors in good working order. The consequence of denial of the contract include decreased reliability of disinfection of Hetch Hetchy water and increased possibility of regulatory violation and interruption of Hetch Hetchy water delivery.

- C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.
This service has been provided in the past via purchase order (BPUW17000028).

- D. Will the contract(s) be renewed?
No.

- E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. **Reason(s) for the Request**

- A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Immediately needed services to address unanticipated or transitional situations, or services needed to address emergency situations.

- B. Explain the qualifying circumstances:

The amendment to the existing contract is needed to address an increase in immediately needed services that have been proven to be required in addition to previously anticipated maintenance activities required to assure reliable operation of the Tesla Treatment facility UV disinfection system.

3. **Description of Required Skills/Expertise**

- A. Specify required skills and/or expertise: UV Reactor Service Technicians must be highly skilled and trained to maintain and diagnose the needs of this highly specialized water treatment equipment. The UV system consists of a proprietary integration of electronic and mechanical equipment controlled by elaborate instrumentation and the manufacturer's programming, the complexity of which requires skilled technicians years to competently master. The technicians must be proficient in working on electronics, mechanical and lighting equipment, instrumentation and controls and pressure vessels and pipelines. The SFPUC trains its highly skilled water treatment operations staff in the operation and some of the more routine service required to maintain some of the system components, but they in turn must be proficient in the operation and maintenance of water treatment plants, a trade that is distinct from expertise in proprietary UV reactor components.
- B. Which, if any, civil service class(es) normally perform(s) this work? 7341, Statnry Eng Water Treat Plant; 7343, Sr Statnry Eng, Wtr Treat Plnt;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: Proprietary tools and equipment may be provided for use temporarily during service, but only replacement parts needed to maintain the system will be installed and left as City property.

4. **If applicable, what efforts has the department made to obtain these services through available resources within the City?**

The services cannot feasibly be provided by available resources within the City because the related specialty knowledge and proprietary information would be unreasonably expensive to procure, administer and maintain up-to-date in a fashion that would assure reliable, continuous operation of the UV disinfection system at the SFPUC's Tesla Treatment Facility.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

The Tesla Treatment Facility UV disinfection system is an integration of components that can be and are serviced by civil service staff, but the proper functioning of the system requires service by technicians who have expert knowledge and experience servicing the system's unique components. It would be unreasonably expensive to train Civil Service staff on the integration of this single, remote water treatment system. The relatively limited amount of work that requires services by the manufacturer's trained technicians does not merit the investment that would be needed for continual training to assure competence and retention and address attrition.

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. It would not be practical or feasible to adopt a new civil service class to perform this work because the amount of work is not enough to justify the cost of developing and administering a new class in addition to the cost of staffing overhead and training required to assure competence, retention and address attrition.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.

No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.

Yes. The Contractor will train the City's staff who are responsible for maintaining the Tesla Treatment Facility in the less complicated, more routine maintenance activities needed to operate and maintain the UV disinfection system. The training is intended for a team of 8 Water Treatment Stationary Engineers (classes 7341 & 7343) for 2 or 3 days and may include additional single-day training of Electronics Maintenance Technicians (classes 7318 & 7329), Electricians (classes 7345 & 7238) and/or an Information Services Engineer (class 1043) depending upon the evolving maintenance requirements of the system.

C. Are there legal mandates requiring the use of contractual services?

Yes. Continued reliable operation of the Tesla Treatment Facility UV disinfection system is necessary for SFPUC compliance with USEPA and State of California regulatory requirements for advanced disinfection of the Hetchy Hetchy drinking water, and contractual services are the only feasible approach to providing these services.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.

No.

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.

No.

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.

Yes. This is an amendment to the current contract with Calgon Carbon Corp. The original contract is \$400,000. The amendment is \$270,000. The previous contract was done via purchase order and there was no PSC obtained. We are asking CSC approval for the entire amount of \$670,000.

7. Union Notification: On 01/30/2019, the Department notified the following employee organizations of this PSC/RFP request:

Electrical Workers, Local 6; Prof & Tech Eng, Local 21; Professional & Tech Engrs, Local 21; Stationary Engineers, Local 39

☐ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Shamica Jackson Phone: 415-554-0727 Email: SJackson@sfgwater.org

Address: 525 Golden Gate Avenue, 8th Floor San Francisco, CA 94102

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 41960 - 18/19

DHR Analysis/Recommendation:

action date: 04/01/2019

Commission Approval Required

Approved by Civil Service Commission

04/01/2019 DHR Approved for 04/01/2019

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC UTILITIES COMMISSION -- PUC

Dept. Code: PUC

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☒ Expedited ☐ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Equipment Maintenance for Calgon Carbon Corp's UV System(9664)

Funding Source: Water Enterprise Operating Budget

PSC Amount: \$80,000

PSC Est. Start Date: 03/30/2018

PSC Est. End Date 06/30/2021

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

Provide maintenance and upgrade services to UV reactors located at SFPUC's Tesla site. Services include implementing a dynamic action spectrum correction factor calculation, control using T1 as a surrogate, implementing validation envelope limits, sensor calibration upgrades, lamp switching optimization, two-part sapphire window upgrade.

B. Explain why this service is necessary and the consequence of denial:

Maintaining and upgrading this equipment is essential to SFPUC operations that provide UV treatment to the drinking water supply. Denial of services will leave SFPUC in jeopardy of not complying with State regulatory guidelines. The SFPUC also has a sizable investment in this equipment that could be wasted if not properly maintained.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

This service has been provided through a general services contract. This is our first request for CSC approval for this equipment maintenance contract.

D. Will the contract(s) be renewed?

No.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

☒ Regulatory or legal requirements, or requirements or mandates of funding source(s) which limit or preclude the use of Civil Service Employees. Include a copy of the applicable requirement or mandate.

B. Explain the qualifying circumstances:

This service is to perform a limited scope of work requiring very specialized skills, and is required to maintain the warranty on the equipment.

3. Description of Required Skills/Expertise

A. Specify required skills and/or expertise: This service requires specialized knowledge of the equipment and proprietary technology that Calgon used to manufacture the equipment and parts. The technician will also need access to replacement parts only available through Calgon.

B. Which, if any, civil service class(es) normally perform(s) this work? none

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

Our engineering team has worked with engineering teams From SFPUC-Water Supply and Treatment to optimize this equipment but have determined that they need this service.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

They don't have access to Calgon replacement parts and/or Calgon proprietary technology. Contract Services are required to maintain the equipment warranty.

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No. The work is too limited in nature.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.
No. Training will not be provided.

C. Are there legal mandates requiring the use of contractual services?
No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No.

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

7. Union Notification: On 03/19/2020, the Department notified the following employee organizations of this PSC/RFP request:
all unions were notified

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Bill Irwin Phone: 415-934-3975 Email: wirwin@sfwater.org

Address: 525 Golden Gate Avenue 8th Floor San Francisco, CA 94102

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 35864 - 19/20

DHR Analysis/Recommendation:

Commission Approval Not Required

Approved by DHR on 04/09/2020

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC UTILITIES COMMISSION -- PUCDept. Code: PUCType of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)Type of Service: Equipment Maintenance for Calgon Carbon Corp's UV System(17751)Funding Source: Water Enterprise Operating BudgetPSC Duration: 3 yearsPSC Amount: \$900,000**1. Description of Work****A. Scope of Work/Services to be Contracted Out:**

The purpose of this contract is to provide three years with Calgon Carbon Corp. (Calgon) for the maintenance of Calgon Carbon UV Technology's ("Calgon") proprietary ultraviolet light (UV) disinfection system at the San Francisco Public Utilities Commission's (SFPUC) Tesla Treatment Facility. The contract provides for field services by Calgon's trained field services technicians and purchase of proprietary parts that need to be replaced such as UV lamps, sleeves, ballasts, etc.

Services performed by Calgon:

- Calibration of current transducers and ballast drive boards
- UV sensor inspection and rescale
- power settings as required
- UV sensor inspection and sensor well cleaning inspect
- for scratches on all quartz surfaces, leaks in
- sensor wells, etc.
- Replace UV sensors and sensor wells as required
- Inspect power supply cabinets and ensure proper terminations on all PLC I/O cards
- Inspect lamps for deformation suspected to be from acoustic resonance at this time
- Replace UV lamps, as requested
- Replace quartz sleeves, as requested
- PLC programming

B. Explain why this service is necessary and the consequence of denial:

The contract provides for maintenance and related parts that are necessary to assure safe, reliable

operation of the Tesla UV reactors and comply with regulatory requirements for the disinfection of Hetch Hetchy water. Additional funding of the contract has become necessary because a higher level of maintenance support than originally anticipated has proven necessary to keep the UV reactors in good working order. The consequence of denial of the contract include decreased reliability of disinfection of Hetch Hetchy water and increased possibility of regulatory violation and interruption of Hetch hetchy water delivery.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

Yes, from 6/1/2017 through 5/31/2020, under Contract ID 1000017359. See PSC# 41960 18/19 Equipment Maintenance for Calgon Carbon Corp's UV System.

D. Will the contract(s) be renewed?

No.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. **Reason(s) for the Request**

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Immediately needed services to address unanticipated or transitional situations, or services needed to address emergency situations.

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

☒ Services that require resources that the City lacks (e.g., office space, facilities or equipment with an operator).

B. Explain the qualifying circumstances:

The services cannot feasibly be provided by available resources within the City because the related specialty knowledge and proprietary information would be unreasonably expensive to procure, administer and maintain up-to-date in a fashion that would assure reliable, continuous operation of the UV disinfection system at the SFPUC's Tesla Treatment Facility. The UV disinfection system is an integration of components that can be and are serviced by civil service staff, but the proper functioning of the system requires maintenance service by technicians who have expert knowledge and experience servicing the system's unique components. It would be unreasonably expensive to train Civil Service staff on the integration of this single, remote water treatment system. The relatively limited amount of work that requires services by the manufacturer's trained technicians does not merit the investment that would be needed for continual training to assure competence and retention and address attrition. It would not be practical or feasible to adopt a new civil service class to perform this work because the amount of work is not enough to justify the cost of developing and administering a new class in addition to the cost of staffing, overhead, and training required to assure competence, retention and address attrition. There is a plan to transition most of this work back to the City. Senior Stationary Engineers and Stationary Engineers are qualified to perform this work; however, the UV reactors have suffered multiple lamp breaks over the course of the last 2 years which Calgon has been investigating. There has since not been an identifying root cause. This has resulted in unwanted regulatory fines and related costs to intercept water discharges related to the lamp breaks. While there have been positive results since Calgon has reduced the power levels in the reactors and provided alternative lamps to test and performed consistent maintenance, the SFPUC asserts that, until there is a definitive root cause, Calgon should be responsible for all of the defined work detailed in the scope of work.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: UV Reactor Service Technicians must be highly skilled and trained to maintain and diagnose the needs of this highly specialized water treatment equipment. The UV system consists of a proprietary integration of electronic and mechanical equipment controlled by elaborate instrumentation and the manufacturer's programming, the complexity of which requires skilled technicians years to competently master. The technicians must be proficient in working on electronics, mechanical and lighting equipment, instrumentation and controls and pressure vessels and pipelines. The SFPUC trains its highly skilled water treatment operations staff in the operation and some of the more routine service required to maintain some of the system components, but they in turn must be proficient in the operation and maintenance of water treatment plants, a trade that is distinct from expertise in proprietary UV reactor components.
- B. Which, if any, civil service class(es) normally perform(s) this work? 7341, Statnry Eng Water Treat Plant; 7343, Sr Statnry Eng, Wtr Treat Plnt;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: Proprietary tools and equipment may be provided for use temporarily during service, but only replacement parts needed to maintain the system will be installed and left as City property.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

The services cannot feasibly be provided by available resources within the City because the related specialty knowledge and proprietary information would be unreasonably expensive to procure, administer and maintain up-to-date in a fashion that would assure reliable, continuous operation of the UV disinfection system at the SFPUC's Tesla Treatment Facility.

5. **Why Civil Service Employees Cannot Perform the Services to be Contracted Out**

A. Explain why civil service classes are not applicable.

The Tesla Treatment Facility UV disinfection system is an integration of components that can be and are serviced by civil service staff, but the proper functioning of the system requires maintenance service by technicians who have expert knowledge and experience servicing the system's unique components. It would be unreasonably expensive to train Civil Service staff on the integration of this single, remote water treatment system. The relatively limited amount of work that requires services by the manufacturer's trained technicians does not merit the investment that would be needed for continual training to assure competence and retention and address attrition.

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No. It would not be practical or feasible to adopt a new civil service class to perform this work because the amount of work is not enough to justify the cost of developing and administering a new class in addition to the cost of staffing overhead and training required to assure competence, retention and address attrition.

6. **Additional Information**

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.

No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.

Yes. Yes. The Contractor will train the City's staff who are responsible for maintaining the Tesla Treatment Facility in the less complicated, more routine maintenance activities needed to operate and maintain the UV disinfection system. The training is intended for a team of 8 Water Treatment Stationary Engineers (classes 7341 & 7343) for 2 or 3 days and may include additional single day training of Electronics Maintenance Technicians (classes 7318 & 7329), Electricians (classes 7345 & 7238) and/or an Information Services Engineer (class 1043) depending upon the evolving maintenance requirements of the system.

C. Are there legal mandates requiring the use of contractual services?

No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.

No.

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.

No.

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.

Yes. Yes, PSC #41960 - 18/19 Equipment Maintenance for Calgon Carbon Corp's UV System is currently active.

7. **Union Notification:** On 04/27/2020, the Department notified the following employee organizations of this PSC/RFP request:

Stationary Engineers, Local 39

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Bill Irwin Phone: 415-934-3975 Email: wirwin@sfgwater.org

Address: 525 Golden Gate Avenue 8th Floor San Francisco, CA 94102

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 40336 - 19/20

DHR Analysis/Recommendation:

action date: 07/06/2020

Commission Approval Required

Approved by Civil Service Commission

07/06/2020 DHR Approved for 07/06/2020

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: RENT ARBITRATION BOARD -- RNT

Dept. Code: RNT

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Specialized Tax Consultant Services

Funding Source: Residential Rent Stabilization and Arbitra

PSC Duration: 4 years 31 weeks

PSC Amount: \$380,000

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

The Rent Board (RNT) is funded by a special assessment on every rental unit subject to the Rent Ordinance. This fee is imposed in accordance with chapter 37A of the San Francisco Administrative Code, which was recently changed (Ordinance No. 196-19) to include units that were built after June 13, 1979 and those that were previously exempt due to Substantial Rehabilitation. The project is to assist RNT staff to obtain from City and County of San Francisco (CCSF) tax roll and Assessor's parcel data, as well as other sources, to research and identify all rental units currently subject to the special assessment. The vendor will develop a database of all units, exempt and non-exempt, using parcel and other information, including residential unit count, fee category and other relevant info to calculate annual Rent Board fee, in order to impose the special assessment and to develop a system to audit the data to capture changes in property use. The vendor will assist RNT by conducting research on any parcel where the residential unit data is missing or incomplete. Vendor will prepare master list of non-exempt parcels subject to RMT fee levy to the Controller before the deadline to include RB fee in annual property tax bills. Vendor to respond to inquiries from RNT staff, property owners, realtors, title/escrow companies, appraisers and any other interested party regarding the fee.

B. Explain why this service is necessary and the consequence of denial:

The services provided are necessary to assist The Rent Stabilization and Arbitration Board (RNT) in collecting a special assessment that funds over 99% of its operations. A denial would lead to sub-optimal collections and a decrease in RNT's special fund which is used to fund its operations and/or an increase in the fee on the parcels currently charged the assessment to compensate for the lack of inclusion of new or changed parcels that should have been assessed the fee. The agency regulates rents and evictions on about 225,000 units in San Francisco, and provides counseling, mediation, and arbitration of rent disputes.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

In the past, the Treasurer-Tax Collector (TTX) had this service built into their information technology system. TTX has rebuilt their system, and these services are no longer included.

D. Will the contract(s) be renewed?

Unknown.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Short-term or capital projects requiring diverse skills, expertise and/or knowledge.

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

B. Explain the qualifying circumstances:

Services will be performed during the period between July and December of each year. There may be an additional tranche of work around April.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: Special tax consultant services that require knowledge and expertise in special assessments, including correct classification of parcel data, legal mandates for exclusions and exemptions as well as providing explanations to inquiries from relevant parties. The consultant is required to maintain current knowledge of codes, legal issues and similar matters in order to provide up-to-date advice to the City.
- B. Which, if any, civil service class(es) normally perform(s) this work? 1823, Senior Administrative Analyst; 1824, Pr Administrative Analyst;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

These services are not available from other City departments.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

- A. Explain why civil service classes are not applicable.
Classifications 1823 and 1824 might be able to perform these services, if they had extensive experience in and an expert understanding of special tax assessments, including correct classification of parcel data, legal mandates for exclusions and exemptions as well as providing explanations to inquiries from relevant parties, none currently perform this function.
- B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No. Work is seasonal, Highly specialized knowledge and skills are required

6. Additional Information

- A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.
- B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.
No. No training will be provided.
- C. Are there legal mandates requiring the use of contractual services?
No.
- D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.
- E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No.
- F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

7. Union Notification: On 09/21/2020, the Department notified the following employee organizations of this PSC/RFP request:
Architect & Engineers, Local 21

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Joan Lubamersky Phone: 4155544859 Email: joan.lubamersky@sfgov.org

Address: One Carlton B. Goodlett Place, Room 362 San Francisco, CA 94102

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 45487 - 20/21

DHR Analysis/Recommendation:

Civil Service Commission Action:

Commission Approval Required

DHR Approved for 12/07/2020

Receipt of Union Notification(s)

From: dhrrpscordinator@sfgov.org on behalf of joan.lubamersky@sfgov.org
To: [Lubamersky, Joan \(ADM\); ecassidy@ifpte21.com; WendyWong26@yahoo.com; wendywong26@yahoo.com; tmathews@ifpte21.org; kschumacher@ifpte21.org; kpage@ifpte21.org; eerbach@ifpte21.org; pkim@ifpte21.org; L21PSCReview@ifpte21.org; Lubamersky, Joan \(ADM\); DHR-PSCCoordinator, DHR \(HRD\)](mailto:Lubamersky,Joan(ADM);ecassidy@ifpte21.com;WendyWong26@yahoo.com;wendywong26@yahoo.com;tmathews@ifpte21.org;kschumacher@ifpte21.org;kpage@ifpte21.org;eerbach@ifpte21.org;pkim@ifpte21.org;L21PSCReview@ifpte21.org;Lubamersky,Joan(ADM);DHR-PSCCoordinator,DHR(HRD)@ifpte21.org)
Subject: Receipt of Notice for new PCS over \$100K PSC # 45487 - 20/21
Date: Monday, September 21, 2020 3:28:59 PM

RECEIPT for Union Notification for PSC 45487 - 20/21 more than \$100k

The RENT ARBITRATION BOARD -- RNT has submitted a request for a Personal Services Contract (PSC) 45487 - 20/21 for \$380,000 for Initial Request services for the period 11/22/2020 – 06/30/2025. Notification of 30 days (60 days for SEIU) is required.

After logging into the system please select link below, view the information and verify receipt:

<http://apps.sfgov.org/dhrdrupal/node/15532> For union notification, please see the TO: field of the email to verify receipt. If you do not see all the unions you intended to contact, the PSC Coordinator must change the state back to NOT

READY, make sure the classes and unions you want to notify are selected and SAVE. Then VIEW the record and verify the list of unions and emails. EDIT the document again , change the state back START UNION NOTIFICATION and SAVE. You should receive the email with all unions to the TO: field as intended

Additional Attachment(s)

From: [Lubamersky, Joan \(ADM\)](#)
To: [ecassidy@ifpte21.com](#); [WendyWong26@yahoo.com](#); [wendywong26@yahoo.com](#); [tmathews@ifpte21.org](#); [kschumacher@ifpte21.org](#); [kpage@ifpte21.org](#); [eerbach@ifpte21.org](#); [pkim@ifpte21.org](#); [L21PSCReview@ifpte21.org](#); ["DHR-PSCCoordinator, DHR \(dhr-psccordinator@sfgov.org\)"](#)
Subject: PSC 45487 incomplete description
Date: Tuesday, November 10, 2020 4:16:00 PM
Attachments: [To CSC Information missing PSC 45487.pdf](#)
[As posted PSC 45487.pdf](#)

To: Local 21

This email is to advise you of an incomplete response printed in PSC 45487 20-21. The scope of work did not appear correctly, however we believe that the work to be performed was clear from the rest of the information included in the document.

We wrote the attached memorandum to the Civil Service Commission about this matter. That memorandum and the PSC as originally posted are attached to this email and posted on the PSC website.

We hope that you agree the PSC, as originally posted, provided information sufficient to inform L21 and members of the public as to work to be performed.

Please let me know you have any questions. We plan for the PSC to be on the CSC agenda for December 7 as there is urgency in beginning the important fee research soon. If we don't hear from you by Monday, November 16, 2020, Noon, we will continue to ask that the item appear on the agenda for December 7.

I would be happy to respond to any questions you may have.

Best regards,

Joan

Joan Lubamersky
Contract Coordinator
Office of the City Administrator
One Carlton B. Goodlett Place, Room 362
San Francisco, CA 94102



OFFICE OF THE
CITY ADMINISTRATOR



London N. Breed, Mayor
Naomi M. Kelly, City Administrator

November 2, 2020

MEMORANDUM

TO: Honorable Civil Service Commission

FROM: Joan Lubamersky, Contract Coordinator
Office of the City Administrator

SUBJ: Error on PSC 45487 20.21

Due to an error we cannot explain, some information on this Personal Services Contract (PSC) was not published on the PSC website. Please see the Description of Services, the item 1A, Scope of Work.

Both the department representative from the Rent Board and I reviewed the PSC before it was posted. It is unlikely that neither of us noticed the response to Item 1A was not fully included. However, the PSC was published without a full response to 1A.

We have not received any questions about this PSC from IFPTE Local 21 or any other parties. We believe that the work as described in responses to other questions provides sufficient information about the project to inform the Commission and members of the public about what should have been included for 1A.

For your information, the following is what we believed we posted for 1A.

The Rent Board (RNT) is funded by a special assessment on every rental unit subject to the Rent Ordinance. This fee is imposed in accordance with chapter 37A of the San Francisco Administrative Code, which was recently changed (Ordinance No. 196-19) to include units that were built after June 13, 1979 and those that were previously exempt due to Substantial Rehabilitation. The project is to assist RNT staff to obtain from City and County of San Francisco (CCSF) tax roll and Assessor's parcel data, as well as other sources, to research and identify all rental units currently subject to the special assessment. The vendor will develop a database of all units, exempt and non-exempt, using parcel and other information, including residential unit count, fee category and other relevant info to calculate annual Rent Board fee, in order to impose the special assessment and to develop a system to audit the data to capture changes in property use. The vendor will assist RNT by conducting research on any parcel where the residential unit data is missing or incomplete. Vendor will prepare master list of non-exempt parcels subject to RMT fee levy to the Controller before the deadline to include RB fee in annual property tax bills. Vendor to respond to inquiries from RNT staff, property owners, realtors, title/escrow companies, appraisers and any other interested party regarding the fee.

We respectfully request that the Civil Service Commission determine that adequate information has been provided in the PSC. We are operating under a tight schedule requiring the vendor to start work soon in order for tax bills to include accurate information. If required to, we will repost the PSC and return to you at a later date.

Thank you for your consideration.

Copy to: Robert Collins, Rent Board

PSC 45487 as Originally posted

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: RENT ARBITRATION BOARD -- RNTDept. Code: RNTType of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)Type of Service: Specialized Tax Consultant ServicesFunding Source: Residential Rent Stabilization and Arbitra
PSC Amount: \$380,000PSC Duration: 4 years 31 weeks**1. Description of Work**

A. Scope of Work/Services to be Contracted Out:

Would work be part time?

Services will be provided between July and December of each year. There may be an additional tranche of work around April.

B. Explain why this service is necessary and the consequence of denial:

The services provided are necessary to assist The Rent Stabilization and Arbitration Board (RNT) in collecting a special assessment that funds over 99% of its operations. A denial would lead to sub-optimal collections and a decrease in RNT's special fund which is used to fund its operations and/or an increase in the fee on the parcels currently charged the assessment to compensate for the lack of inclusion of new or changed parcels that should have been assessed the fee. The agency regulates rents and evictions on about 225,000 units in San Francisco, and provides counseling, mediation, and arbitration of rent disputes.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

In the past, the Treasurer-Tax Collector (TTX) had this service built into their information technology system. TTX has rebuilt their system, and these services are no longer included.

D. Will the contract(s) be renewed?

Unknown.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Short-term or capital projects requiring diverse skills, expertise and/or knowledge.☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

B. Explain the qualifying circumstances:

Services will be performed during the period between July and December of each year. There may be an additional tranche of work around April.

3. Description of Required Skills/Expertise

A. Specify required skills and/or expertise: Special tax consultant services that require knowledge and expertise in special assessments, including correct classification of parcel data, legal mandates for exclusions and exemptions as well as providing explanations to inquiries from relevant parties. The consultant is required to maintain current

knowledge of codes, legal issues and similar matters in order to provide up-to-date advice to the City.

B. Which, if any, civil service class(es) normally perform(s) this work? 1823, Senior Administrative Analyst; 1824, Pr Administrative Analyst;

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

These services are not available from other City departments.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

Classifications 1823 and 1824 might be able to perform these services, if they had extensive experience in and an expert understanding of special tax assessments, including correct classification of parcel data, legal mandates for exclusions and exemptions as well as providing explanations to inquiries from relevant parties, none currently perform this function.

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No. Work is seasonal, Highly specialized knowledge and skills are required

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.

No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.

No. No training will be provided.

C. Are there legal mandates requiring the use of contractual services?

No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.

No.

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.

No.

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.

No.

7. Union Notification: On 09/21/2020, the Department notified the following employee organizations of this PSC/RFP request:

Architect & Engineers, Local 21

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Joan Lubamersky Phone: 4155544859 Email: joan.lubamersky@sfgov.org

Address: One Carlton B. Goodlett Place, Room 362 San Francisco, CA 94102

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 45487 - 20/21

DHR Analysis/Recommendation:

Civil Service Commission Action:

Commission Approval Required

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC HEALTH -- DPH

Dept. Code: DPH

Type of Request: ☒ Initial ☐ Modification of an existing PSC (PSC # _____)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: COVID-19 Acute Hospital and Skilled Nursing Facility Services

Funding Source: General Fund

PSC Duration: 52 weeks

PSC Amount: \$10,000,000

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

In response to the COVID-19 emergency, Chinese Hospital will admit up to a maximum of 23 patients from Zuckerberg San Francisco General Hospital (ZSFG) to free beds at ZSFG in order to be ready for any surge of COVID-19 patients needing treatment at ZSFG. The patients will be treated at Chinese Hospital for as long as medically necessary, providing uninterrupted services for the duration of the PSC. Initial services will be for acute care. Future services may also include skilled nursing facility care. While the initial need for these services is for a contract with Chinese Hospital, the need for acute inpatient care and skilled nursing facility care may need to be met by other San Francisco hospitals in the future, as well.

B. Explain why this service is necessary and the consequence of denial:

If approval is denied, the City's capacity to care for COVID-19 patients will be reduced, resulting in adverse health outcomes, serious medical complications, and the potential for increased patient deaths, as ZSFG will be at maximum capacity and will have no bed space to care for COVID-19 patients needing acute care.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

This is a new service.

D. Will the contract(s) be renewed?

Only if there is a continued need and funding available.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why.
not applicable

2. Reason(s) for the Request

A. Indicate all that apply (be specific and attach any relevant supporting documents):

☒ Immediately needed services to address unanticipated or transitional situations, or services needed to address emergency situations.

☒ Short-term or capital projects requiring diverse skills, expertise and/or knowledge.

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

☒ Services that require resources that the City lacks (e.g., office space, facilities or equipment with an operator).

B. Explain the qualifying circumstances:

The services are needed immediately in order to prepare adequately for a surge in COVID-19 admissions at ZSFG. The services will be provided to those patients who would usually be treated at ZSFG, in order to free beds for treatment of COVID-19 patients. The City does not have the capacity to provide the facility-dependent, highly regulated and specialized services in the volume needed. Once the need for this surge capacity has lessened, it is expected that the services under this PSC will be decreased until all patients being served under this PSC are discharged.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: Current ability and capacity to provide acute inpatient hospital care in San Francisco. The potential to be able to provide skilled nursing facility services in the future would be preferable.
- B. Which, if any, civil service class(es) normally perform(s) this work? 1095, IT Operations Support Admin V; 2114, Medical Records Tech Sprv; 2232, Senior Physician Specialist; 2233, Supervising Physician Spec; 2320, Registered Nurse; 2738, Porter Assistant Supervisor;
- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: Yes. The hospital(s) under this PSC will provide an acute care hospital and all related facilities and services, providing ZSFG with additional capacity to care for COVID-19 patients.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

ZSFG continues to explore ways to meet the need for temporarily expanded services due to COVID-19. Once the pandemic and related surge needs have ended, it is anticipated that these services will no longer be necessary for this purpose.

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

- A. Explain why civil service classes are not applicable.
Civil service classifications are applicable, but due to the unprecedented and unanticipated nature of the pandemic, current City capacity is not enough to maintain ongoing services and meet any surges in need for care created for COVID-19.
- B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain. No, since civil service classifications already exist. The contract is needed in order to meet surge needs due to capacity issues, not because new classifications are needed.

6. Additional Information

- A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.
- B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.
No. Training civil service employees is not part of the scope of this PSC.
- C. Are there legal mandates requiring the use of contractual services?
No.
- D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.
- E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No.
- F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
No.

7. Union Notification: On 09/18/2020, the Department notified the following employee organizations of this PSC/RFP request:

Architect & Engineers, Local 21; Municipal Executive Association; Physicians and Dentists - 11AA; Physicians and Dentists - 8CC; Prof & Tech Eng, Local 21; Professional & Tech Engrs, Local 21; SEIU 1021 Miscellaneous; SEIU Local 1021; SEIU, Local 1021 (Staff Nurse & Per Diem Nurse); Teamsters, Local 856 Supv Nurses

☐ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Jacque Hale Phone: (415) 554-2609 Email: jacque.hale@sfdph.org

Address: 1380 Howard Street, Room 421B San Francisco, CA 94103

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 42999 - 20/21

DHR Analysis/Recommendation:

Civil Service Commission Action:

Commission Approval Required

DHR Approved for 12/07/2020

Receipt of Union Notification(s)

Hale, Jacquie (DPH)

From: dhr-psccordinator@sfgov.org on behalf of jacquie.hale@sfdph.org
Sent: Friday, September 18, 2020 6:14 PM
To: Hale, Jacquie (DPH); mleach@ibt856.org; emathurin@cirseiu.org; abush@cirseiu.org; sbabaria@cirseiu.org; kcartermartinez@cirseiu.org; ablood@cirseiu.org; sarah.wilson@seiu1021.org; thomas.vitale@seiu1021.org; Sandeep.lal@seiu1021.me; leah.berlanga@seiu1021.org; Meyers, Julie (HSA); Ricardo.lopez@sfgov.org; Basconcillo, Katherine (PUC); pcamarillo_seiu@sbcglobal.net; Wendy.Frigillana@seiu1021.org; pscreview@seiu1021.org; ted.zarzecki@seiu1021.net; davidmkersten@gmail.com; xiumin.li@seiu1021.org; Poon, Sin Yee (HSA); david.canham@seiu1021.org; jtanner940@aol.com; amakayan@ifpte21.org; tjenkins@uapd.com; jduritz@uapd.com; Criss@SFMEA.com; camaguey@sfmea.com (contact); Christina@SFMEA.com; staff@SFMEA.com; ecassidy@ifpte21.com; WendyWong26@yahoo.com; wendywong26@yahoo.com; tmathews@ifpte21.org; kschumacher@ifpte21.org; kpage@ifpte21.org; eerbach@ifpte21.org; pkim@ifpte21.org; L21PSCReview@ifpte21.org; Hale, Jacquie (DPH); DHR-PSCCoordinator, DHR (HRD)
Subject: Receipt of Notice for new PCS over \$100K PSC # 42999 - 20/21

RECEIPT for Union Notification for PSC 42999 - 20/21 more than \$100k

The PUBLIC HEALTH -- DPH has submitted a request for a Personal Services Contract (PSC) 42999 - 20/21 for \$10,000,000 for Initial Request services for the period 11/01/2020 – 10/31/2021. Notification of 30 days (60 days for SEIU) is required.

After logging into the system please select link below, view the information and verify receipt:

<http://apps.sfgov.org/dhrdrupal/node/15533> For union notification, please see the TO: field of the email to verify receipt. If you do not see all the unions you intended to contact, the PSC Coordinator must change the state back to NOT READY, make sure the classes and unions you want to notify are selected and SAVE. Then VIEW the record and verify the list of unions and emails. EDIT the document again , change the state back START UNION NOTIFICATION and SAVE. You should receive the email with all unions to the TO: field as intended

Additional Attachment(s)

PSC 42999-20/21

List of Attachments to Memorandum from DPH to DHR

DPH-DHR Memorandum Requesting to Calendar for December 7, 2020 Meeting

DPH-SEIU Meeting of September 23, 2020:

- Emails re: DPH-SEIU meeting
- Email DPH to SEIU forwarding emergency agreement
- Email DPH to SEIU forwarding notes of meeting of 9/23/20

DPH-SEIU Meeting of October 2, 2020:

- Email DPH to SEIU forwarding notes of meeting of 10/02/20

DPH information provided to SEIU, October 2, 2020, through November 11, 2020, and October 7, 2020, Request for Waiver of Full Notification Period:

- Email DPH to SEIU forwarding information on spending, census
- Email DPH to Notified Unions requesting waiver of full notification period
- Email Teamsters to DPH declining waiver request
- Email Local 21 to DPH declining waiver request
- Emails SEIU to DPH with questions (2)
- Email DPH to SEIU forwarding responses to questions and LHH surge plan

Mayor's and DPH's News Releases:

- Mayor's Proclamation, Order of Health Officer, and News Releases regarding preparedness, restrictions on visitors at LHH and residential facilities, and COVID at LHH (combined file)



City and County of San Francisco
London Breed, Mayor

San Francisco Department of Public Health

Dr. Grant Colfax
Director of Health

DATE: November 11, 2020

TO: Suzanne Choi, DHR PSC Coordinator

FROM: Jacquie Hale, DPH PSC Coordinator

RE: PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and
Skilled Nursing Facility Services

This is to request that the above Personal Services Contract (PSC) be calendared for the December 7, 2020, meeting of the Civil Service Commission. For reference, we would appreciate it if this memorandum is included in the package that is posted and submitted to the Civil Service Commission.

The contract under this PSC continues services begun under an emergency agreement established in April 2020 between the Department of Public Health and Chinese Hospital in response to the COVID-19 pandemic, to be able to transfer patients from ZSFG in anticipation of a surge of COVID patients because patients could not be transferred to Laguna Honda Hospital (LHH) as COVID-19 had just been identified in LHH residents and staff. In accordance with the Mayor's proclamation of emergency, 13th supplement, DPH is in the process of transitioning emergency agreements to standard City contracts, including the current emergency contract with Chinese Hospital.

Under the emergency agreement, patients transferred to Chinese Hospital are to remain until such time as they may be discharged back to the community (e.g., home or residential care facility), back to ZSFGH (for acute care), to LHH (for skilled nursing care) or pass away. Those provisions are expected to continue in the standard agreement covered by this PSC, subject to clinical determinations as to whether or not they patients should be discharged or transferred.

Please note that due to the unpredictable nature of the pandemic, DPH submitted its request for approval of this PSC for a duration of one year. We have reviewed the status of the patients at Chinese Hospital and our current needs for surge capacity, and **respectfully request that the duration of the PSC be shortened to end June 30, 2021.**

SEIU requested to meet to obtain information on the PSC. DPH met with SEIU twice, and has been working in good faith to be able to respond to all of SEIU's requests. The information provided to date is enclosed and summarized below. DPH is committed to providing the remaining information requested to date, as well as to fulfilling our offer in meetings with SEIU to touch base with SEIU in **November** as to the status of the surge capacity needed and to meet again in **January** to provide information on the contract. DPH's responses to SEIU's questions are attached and included with this request.

The following describes the steps taken to date (please see documentation enclosed):

September 18, 2020	DPH notified unions
September 21, 2020	SEIU requested to meet
September 22, 2020	DPH met with SEIU
September 30, 2020	DPH sent meeting notes and information requested to SEIU
October 2, 2020	DPH met with SEIU
October 7, 2020	DPH sent notes of meeting of October 2 to SEIU, and additional information on spending to date and Chinese Hospital census
October 7, 2020	DPH requested waiver of full notification period of all notified unions; SEIU, Local 21, and Teamsters declined; MEA waived
October 7-8, 2020	SEIU submitted questions to DPH
October 7-8, 2020	DPH requested approval under Mayor's Proclamation; request denied
November 11, 2020	DPH sent information to SEIU (see summary below)

In summary, DPH has provided information to SEIU regarding:

- Census information as to current patients, new admissions, discharges, and bed days for ZSFG, LHH, and Chinese Hospital for April-September, 2020.
- Spending to date on the Chinese Hospital emergency agreement
- Surge plan for LHH
- Information on exit planning
- Other SNFs explored for placement outside of ZSFG and/or LHH
- Clarification of price tiers in emergency agreement
- Clarification of responsibilities of the parties to the emergency agreement
- Why civil service personnel cannot be mobilized
- Exploration of other facilities or bed availability

The information which we continue to gather that has been requested to date is summarized below. It focuses primarily on ending the contract and alternatives to create surge capacity. We are requesting that the duration of this PSC be shortened to end June 30, 2020, (from a contract term of 12 to 8 months), as our current expectations are that will be the duration that will be needed.

- Census information for October 2020
- Further information on exit planning for patients at Chinese Hospital
- Surge plan for ZSFG
- Number of P103, Per Diem Registered Nurses "assigned and qualified to cover medical-

surgical or skilled nursing in DPH,” and “how many of these are currently working for DPH during the pandemic and may be redeployed.”

- Staffing ratios for DPH beds at Chinese Hospital.

We respectfully request approval of this PSC. If you have any further questions or need more information, please let us know.

Thank you for your consideration.

cc: Sandra Eng, Executive Officer, Civil Service Commission
Kelly Hiramoto, Deputy to Unified Command, COVID-19 Command Center and
Special Projects Manager for Director of Health
Michelle Ruggels, Director, Business Office, DPH Finance

Attachments:

Union Notification

Emails re: DPH-SEIU meeting

Email DPH to SEIU forwarding emergency agreement

Email DPH to SEIU forwarding notes of meeting of 9/23/20

Email DPH to SEIU forwarding notes of meeting of 10/02/20

Email DPH to SEIU forwarding information on spending, census

Email DPH to Notified Unions requesting waiver of full notification period

Email Teamsters to DPH declining waiver request

Email Local 21 to DPH declining waiver request

Emails SEIU to DPH with questions (2)

Email DPH to SEIU forwarding responses to questions and LHH surge plan

Mayor's Proclamation, Order of Health Officer, and News Releases regarding preparedness, restrictions on visitors at LHH and residential facilities, and COVID at LHH (combined file)

DPH-SEIU Meeting of September 23, 2020

Hale, Jacquie (DPH)

From: Thomas Vitale <Thomas.Vitale@seiu1021.org>
Sent: Tuesday, September 22, 2020 1:38 PM
To: Hale, Jacquie (DPH)
Cc: Thomas Vitale; Jennifer Esteen; Hardy, Dellfinia (DPH); Williams, Johnnie (DPH)
Subject: RE: Receipt of Notice for new PCS over \$100K PSC # 42999 - 20/21

Hi Jacquie, Yes, I was able to reschedule another meeting. Please send us the teleconferencing information.

Thomas Vitale
SEIU 1021 Representative
Contact# 510-703-4081
Sign up to become a Union Member! Together We Rise Up!
<http://bit.ly/SFMembershipForm>

-----Original Message-----

From: Hale, Jacquie (DPH) <jacquie.hale@sfdph.org>
Sent: Monday, September 21, 2020 5:29 PM
To: Thomas Vitale <Thomas.Vitale@seiu1021.org>
Subject: FW: Receipt of Notice for new PCS over \$100K PSC # 42999 - 20/21

Great! Just checking -- would 3:00 p.m. on Wednesday, September 23, work for you?

-----Original Message-----

From: Thomas Vitale <Thomas.Vitale@seiu1021.org>
Sent: Monday, September 21, 2020 5:24 PM
To: Hale, Jacquie (DPH) <jacquie.hale@sfdph.org>
Subject: Re: Receipt of Notice for new PCS over \$100K PSC # 42999 - 20/21

Jacquie, I'm sure we can schedule something before the 29th.

Thomas Vitale
Field Representative
Seiu 1021
510-703-4081

> On Sep 21, 2020, at 4:48 PM, Hale, Jacquie (DPH) <jacquie.hale@sfdph.org> wrote:

>

> Thomas,

>

> We made the approval type for this PSC "omit posting" because we were targeting the October 5 CSC meeting, which means we need to submit this to the CSC by this Wednesday, September 23. We might only need half an hour for a meeting, and I'm happy to do the arrangements (meeting invitation, etc.) If there is no time at all to meet before Wednesday, will you be able to meet between September 23 and September 29? Also, please do send us any questions you may have in advance, to save time in the meeting.

>

> Please note that the purpose of this PSC is to care for 23 patients transferred from ZSFG to Chinese Hospital under the emergency declaration, to create capacity at ZSFG for a surge of COVID-19 patients. Those patients will remain at Chinese Hospital until discharged. Any additions to that immediate need are to provide flexibility in creating future capacity. Since we need to be able to respond so quickly to COVID-19, we are working to be prepared, and to provide a way to be able to utilize other hospital's beds if and when they are needed due to COVID-19, if and as appropriate. The services under this PSC are restricted to creating capacity within the SFDPH system to care for patients with COVID-19.

>

> I hope to hear from you soon about our availability. (Please also let
> me know if you prefer, MS Teams, Zoom, or WebEx.)

>

> Thank you,

>

> Jacquie
> (415) 255-3508

>

> -----Original Message-----

> From: Thomas Vitale <Thomas.Vitale@seiu1021.org>

> Sent: Monday, September 21, 2020 4:33 PM

> To: Hale, Jacquie (DPH) <jacquie.hale@sfdph.org>

> Subject: Re: Receipt of Notice for new PCS over \$100K PSC # 42999 -
> 20/21

>

> Hi Jacqui, Unfortunately I'm pretty much scheduled for this week.

>

> Thomas Vitale

> Field Representative

> Seiu 1021

> 510-703-4081

>

>> On Sep 21, 2020, at 3:04 PM, Hale, Jacquie (DPH) <jacquie.hale@sfdph.org> wrote:

>>

>> Thomas,

>>

>> Would you be able to meet (online) tomorrow late afternoon, at 3:30 p.m. or 4:00 p.m.?

>>

>> Thank you,

>>

>> Jacquie
>> (415) 255-3508

>>

>> -----Original Message-----

>> From: Hale, Jacquie (DPH)

>> Sent: Monday, September 21, 2020 2:10 PM

>> To: thomas.vitale@seiu1021.org

>> Subject: FW: Receipt of Notice for new PCS over \$100K PSC # 42999 -
>> 20/21

>>

>> Thomas,

>>

>> Thank you for your email. I'll contact staff who should be able to answer your questions and get their availability.

>>

>> Please know that we do not have authority to "meet and confer," only to meet and provide information on the PSC.

>>

>> If you have any specific questions you can share with us prior to the meeting, please send them to us and we'll try to respond prior to or at the meeting.

>>

>> Thanks again,

>>

>> Jacquie Hale

>> PSC Coordinator

>> Department of Public Health, City and County of San Francisco

>> 1380 Howard Street, Room 421b, San Francisco, CA 94103

>> (415) 255-3508

>> This e-mail is not a secured data transmission for Protected Health Information (PHI) as defined by the Healthcare Portability and Accountability Act (HIPAA), and it is the responsibility of all parties involved to take all reasonable actions to protect this message from non-authorized disclosure. This e-mail is intended for the recipient only. If you receive this e-mail in error, you should notify the sender and destroy the e-mail immediately. Disclosure of the information contained herein could subject to discloser to civil or criminal penalties under state and federal privacy laws.

>>

>> -----Original Message-----

>> From: Thomas Vitale <Thomas.Vitale@seiu1021.org>

>> Sent: Monday, September 21, 2020 10:45 AM

>> To: Hale, Jacquie (DPH) <jacquie.hale@sfdph.org>

>> Cc: Thomas Vitale <Thomas.Vitale@seiu1021.org>; Jennifer Esteen

>> <Jennifer.Esteen@seiu1021.org>; Hardy, Dellfinia (DPH)

>> <dellfinia.hardy@sfdph.org>; Williams, Johnnie (DPH)

>> <johnnie.williams@sfdph.org>; Alberto Mejia

>> <Alberto.Mejia@seiu1021.org>; Gustavo Corral

>> <Gustavo.Corral@seiu1021.org>

>> Subject: Re: Receipt of Notice for new PCS over \$100K PSC # 42999 -

>> 20/21

>>

>>

>> This message is from outside the City email system. Do not open links or attachments from untrusted sources.

>>

>>

>>

>> Jacquie, Seiu 1021 is officially requesting to meet and confer over the terms and conditions of the above PCS. Please send me dates of your availability.

>>

>> Thomas Vitale

>> Field Representative

>> Seiu 1021

>> 510-703-4081

>>

>>> On Sep 18, 2020, at 6:15 PM, "jacquie.hale@sfdph.org" <jacquie.hale@sfdph.org> wrote:

>>>

>>> RECEIPT for Union Notification for PSC 42999 - 20/21 more than \$100k

>>>

>>> The PUBLIC HEALTH -- DPH has submitted a request for a Personal

>>> Services Contract (PSC) 42999 - 20/21 for \$10,000,000 for Initial

>>> Request services for the period 11/01/2020 – 10/31/2021.

>>> Notification of 30 days (60 days for

>>> SEIU) is required.

>>>
>>> After logging into the system please select link below, view the
>>> information and verify receipt:
>>>
>>> <https://nam10.safelinks.protection.outlook.com/?url=http%3A%2F%2Fapps.sfgov.org%2Fdhrdrupal%2Fnode%2F15533&data=02%7C01%7C%7C42e21687e24a3f996408d85c397c92%7Ce35c5b2684f74b9ba7c591278c732568%7C0%7C0%7C6360749270547011&sdata=uEMexVAxZAUl2zaq%2BU5ivEsRTurEwMaEu%2F8EP7BypaA%3D&reserved=0>
>>> 6
>>> b
>>> 24a3f996408d85c397c92%7Ce35c5b2684f74b9ba7c591278c732568%7C0%7C0%7C6
>>> 3
>>> 7
>>> 360749270547011&sdata=uEMexVAxZAUl2zaq%2BU5ivEsRTurEwMaEu%2F8EP7
>>> %
>>> 2
>>> BypaA%3D&reserved=0 For union notification, please see the TO:
>>> field of the email to verify receipt. If you do not see all the
>>> unions you intended to contact, the PSC Coordinator must change the
>>> state back to NOT READY, make sure the classes and unions you want
>>> to notify are selected and SAVE. Then VIEW the record and verify the
>>> list of unions and emails. EDIT the document again , change the
>>> state back START UNION NOTIFICATION and SAVE. You should receive the
>>> email with all unions to the TO: field as intended

Hale, Jacquie (DPH)

From: Hale, Jacquie (DPH)
Sent: Wednesday, September 23, 2020 3:14 PM
To: Thomas Vitale
Cc: Hiramoto, Kelly (DPH); Longhitano, Robert (DPH)
Subject: PSC 42999-20/21 COVID-19 Acute Hospital and Skilled Nursing Facility Services - emergency contract
Attachments: DocuSign 1.11_Emergency_MOU_Chinese_Hospital.pdf

Per our discussion today.

Hale, Jacquie (DPH)

From: Hale, Jacquie (DPH)
Sent: Wednesday, September 30, 2020 4:09 PM
To: 'Thomas Vitale'
Cc: Esteen, Jennifer (DPH); Williams, Johnnie (DPH); Hiramoto, Kelly (DPH); Longhitano, Robert (DPH); DHR-PSCCoordinator, DHR (HRD)
Subject: PSC 42999-20/21, COVID-19 Acute Hospital and Skilled Nursing Facility Services - Notes from meeting 9/23/20; Request to Waive Notification Period
Attachments: 42999 - 2021 C19 Acute and SNF - SEIU Mtg Notes_.pdf; 42999 - 2021 C19 Acute and SNF.pdf

Importance: High

Tracking:

Recipient

Delivery

'Thomas Vitale'

Esteen, Jennifer (DPH)

Delivered: 9/30/2020 4:09 PM

Williams, Johnnie (DPH)

Delivered: 9/30/2020 4:09 PM

Hiramoto, Kelly (DPH)

Delivered: 9/30/2020 4:09 PM

Longhitano, Robert (DPH)

Delivered: 9/30/2020 4:09 PM

DHR-PSCCoordinator, DHR (HRD)

Delivered: 9/30/2020 4:09 PM

Ruggels, Michelle (DPH)

Delivered: 9/30/2020 4:09 PM

Thomas,

Here are the notes from our meeting of September 23, 2020, which include the Laguna Honda Hospital census information that you requested at the meeting. The PSC is also attached, for your reference.

We are planning to request that this PSC be calendared for the October 19, 2020, meeting of the Civil Service Commission.

Since we have had an opportunity to meet (thank you for being so prompt in requesting a meeting) and to provide the information requested—including a copy of the current agreement established under the mayoral proclamation of emergency—we respectfully request a waiver of the full notification period. We remain willing to provide further information about the services under this PSC, either before or after the Commission meeting, and hope you will be able to approve our waiver request for these urgently needed services.

Thank you for your consideration,

Jacquie Hale, PSC Coordinator
Department of Public Health, City and County of San Francisco
1380 Howard Street, Room 421b, San Francisco, CA 94103
(415) 255-3508

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PSC 42999-20/21 COVID-19 Acute Hospital and Skilled Nursing Facility Services

Union Information Meeting September 23, 2020

Attendance:

- Thomas Vitale, SEIU Local 1021
- Jennifer Esteen, SEIU Local 1021
- Johnnie Williams, SEIU Local 1021
- Kelly Hiramoto, Deputy, COVID-19 Command Center
- Rob Longhitano, Manager, DPH Contracts Office
- Jacquie Hale, PSC Coordinator, Manager, DPH Contracts Office

SEIU Questions, DPH Responses:

- Have you looked at using P103s?
 - The 23 patients in question were discharged from ZSFG and usually would have been transferred to LHH. An emergency agreement was established with Chinese Hospital in order to create immediate surge capacity at ZSFG and LHH. DPH is now planning to start a new, standard contract with Chinese Hospital to pay for the care of these patients until they are discharged.
- What is the census at LHH?

Note: The table below was not available at the time of this meeting, but was provided to SEIU on 9/30/20.

LHH Census/Admission Information requested by PCS								
2020 Quarters	Month	Ave Monthly Census	Capacity	Occupancy	New Admissions	Admission Sources		
					Count	ZSFG	CCH	Other
Q1	Jan	755.51	779	0.97	22	9	0	13
	Feb	757.41		0.97	13	8	0	5
	Mar (thru 24)	758		0.97	21	19	0	2
Q2	Apr	747.47	779	0.96	LHH on lockdown. No new admissions. New admissions resumed on 6/30/2020.			
	May	734.35		0.94				
	June <i>(resumed new admissions on 6/30)</i>	726.63		0.93	1	0	1	<i>Not taking new admissions from other hospitals, SNFs, B&C, homes, etc.</i>

- Since these patients may need care for longer than one year, the requested PSC duration, is there a plan for discharges before one year?
 - Since the impetus has been to create and maintain surge capacity, if there's a surge, we may not be able to transfer longer term SNF candidates to LHH.
 - We are also being optimistic and hoping there will not be a surge, and we will be able to discharge these patients to their homes or to LHH, as appropriate.
- Is there an exit plan or plan for patient movement? What would indicate that you do not plan to have this contract into perpetuity?
 - We will need to look at that and find a way to provide information without violating HIPAA, but we will work to provide that to you.
- We would like to get data about both Chinese Hospital and LHH month-by-month censuses. You may redact any information that would violate HIPAA, or, overall numbers are fine.
 - We will also check to see if LHH was on quarantine at the time of the client's discharge (not just a count of empty beds).
- What's the process if the emergency contract is exceeded and this process takes longer than anticipated?
 - The emergency contract is ending, but if we need to exceed it, we will go to the Board of Supervisors for approval, since the contract would be over \$10 million.
 - We are now in the process of post-COVID planning, since emergency contracts are limited to 12 months. We're looking at what needs to be done to "normalize" emergency contracts, what plans we have for immediately after emergency contracts end, which needs will be ongoing and can be met with a standard City contract, which emergency contracts will no longer be needed, which will need to be continued, and which may be transitioned out in the future.
 - The contract with Chinese Hospital is part of this effort. We are in the process of working to establish a standard City contract with Chinese Hospital under this PSC.

DPH-SEIU Meeting of October 2, 2020

Hale, Jacquie (DPH)

From: Hale, Jacquie (DPH)
Sent: Wednesday, October 07, 2020 1:13 PM
To: Thomas Vitale
Cc: Esteen, Jennifer (DPH); Williams, Johnnie (DPH); Hiramoto, Kelly (DPH); Longhitano, Robert (DPH); DHR-PSCCoordinator, DHR (HRD)
Subject: FW: PSC 42999-20/21, COVID-19 Acute Hospital and Skilled Nursing Facility Services - Notes from meeting 9/23/20; Request to Waive Notification Period
Attachments: 42999 - 2021 C19 Acute and SNF - SEIU Mtg 10-2-20.pdf

Tracking:	Recipient	Delivery
	Thomas Vitale	
	Esteen, Jennifer (DPH)	Delivered: 10/7/2020 1:13 PM
	Williams, Johnnie (DPH)	Delivered: 10/7/2020 1:13 PM
	Hiramoto, Kelly (DPH)	Delivered: 10/7/2020 1:13 PM
	Longhitano, Robert (DPH)	Delivered: 10/7/2020 1:13 PM
	DHR-PSCCoordinator, DHR (HRD)	Delivered: 10/7/2020 1:13 PM

Thomas,

Hi. Here are the notes from our meeting of October 2, 2020. We are continuing with our request to calendar this PSC for the Civil Service Commission meeting of October 19, 2020. If you have any questions before, during, or after the meeting, please let us know.

Thank you,
Jacquie Hale
PSC Coordinator
Department of Public Health, City and County of San Francisco
1380 Howard Street, Room 421b, San Francisco, CA 94103
(415) 255-3508

This e-mail is not a secured data transmission for Protected Health Information (PHI) as defined by the Healthcare Portability and Accountability Act (HIPAA), and it is the responsibility of all parties involved to take all reasonable actions to protect this message from non-authorized disclosure. This e-mail is intended for the recipient only. If you receive this e-mail in error, you should notify the sender and destroy the e-mail immediately. Disclosure of the information contained herein could subject to disclosure to civil or criminal penalties under state and federal privacy laws.

From: Hale, Jacquie (DPH)
Sent: Wednesday, September 30, 2020 4:09 PM
To: 'Thomas Vitale' <Thomas.Vitale@seiu1021.org>
Cc: Esteen, Jennifer (DPH) <jennifer.esteen@sfdph.org>; Williams, Johnnie (DPH) <johnnie.williams@sfdph.org>; Hiramoto, Kelly (DPH) <kelly.hiramoto@sfdph.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>; DHR-PSCCoordinator, DHR (HRD) <dhr-psccordinator@sfgov.org>
Subject: PSC 42999-20/21, COVID-19 Acute Hospital and Skilled Nursing Facility Services - Notes from meeting 9/23/20; Request to Waive Notification Period
Importance: High

Thomas,

Here are the notes from our meeting of September 23, 2020, which include the Laguna Honda Hospital census information that you requested at the meeting. The PSC is also attached, for your reference.

We are planning to request that this PSC be calendared for the October 19, 2020, meeting of the Civil Service Commission.

Since we have had an opportunity to meet (thank you for being so prompt in requesting a meeting) and to provide the information requested—including a copy of the current agreement established under the mayoral proclamation of emergency—we respectfully request a waiver of the full notification period. We remain willing to provide further information about the services under this PSC, either before or after the Commission meeting, and hope you will be able to approve our waiver request for these urgently needed services.

Thank you for your consideration,

Jacquie Hale, PSC Coordinator
Department of Public Health, City and County of San Francisco
1380 Howard Street, Room 421b, San Francisco, CA 94103
(415) 255-3508

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PSC 42999-20/21 COVID-19 Acute Hospital and Skilled Nursing Facility Services

Union Information Meeting October 2, 2020

Attendance:

- Thomas Vitale, SEIU Local 1021
- Jennifer Esteen, SEIU Local 1021
- Johnnie Williams, SEIU Local 1021
- Lucretia Bolin, SEIU Local 1021
- Kelly Hiramoto, Deputy, COVID-19 Command Center
- Jacquie Hale, PSC Coordinator, Manager, DPH Contracts Office

SEIU Requests

(If no response shown, response was not available at the time of the meeting.)

Summary:

DPH agreed to provide to SEIU:

- ☐ SNF custodial bed census information for ZSFG, LHH, and Chinese Hospital; why admissions halted
- ☐ Information on the cost to date under the emergency agreement and projected costs
- ☐ Surge plans for ZSFG and LHH
- ☐ Final amount of contract and whether Board of Supervisors approval will be required

DPH agreed to touch base with SEIU in November after more is known about the surge anticipated in October-November, and to meet with SEIU in January 2021 to discuss whether or not the contract is still needed, and how to wind down the contract if it anticipated to not be needed.

Detail:

- Number of DPH open custodial SNF beds, by month, for calendar year 2020, including Quarter 3, to date.
- Rationale for lockdowns (no admissions periods)
- Number of Chinese Hospital open custodial SNF beds, by month, for calendar year 2020, including Quarter 3, to date.
 - DPH: Of the total of 23 patients 3-4 required acute treatment, 1 patient died, and the remainder are in custodial care.
- Number of New admissions for ZSFG and how it changed in Quarter 3, to be able to see pattern of movement
- Amount spent to date on current agreement/emergency MOU
- Information on the average cost of SNF beds in San Francisco; \$2,600/day seems expensive
 - DPH: At the time the emergency MOU was established, we surveyed San Francisco Hospitals and went with Chinese Hospital because they had capacity.
- Did you look at other sources of SNF beds, for instance, Jewish Aging Services (formerly Jewish Home)?

- DPH: We did look at Jewish Aging Services, which was not much less expensive and was then in the process of creating a COVID unit, which we supported; we will look at their potential again to see if their rates may have changed.
- DPH:
 - There is the potential to need one more year after the currently requested duration end date of 6/30/21, depending on the severity of the surge(s) we experience. If the surge is exponential, for instance, we will certainly have a continued need for these services.
 - We will need to request \$13.7 million, rather than \$10 million, under this PSC, since we very recently learned that Chinese Hospital may not be able to bill Medi-Cal directly for some of the costs, so we must provide for additional funding in the contract.
- Why not just rent space, and utilize DPH staff?
 - DPH: We are required to place patients in a licensed destination. We would need a building that is licensed. CDPH is not doing any licensing now (due to COVID), or it's taking a very long time to get licensed (it typically can take over a year to get a facility licensed).
 - DPH: As you know, despite our best efforts, we continue to have vacancies in nursing staff positions, so we have no civil service staff to deploy. If we had surplus staff, we would certainly look at renting.
- It seems that we need to be able to mobilize more quickly to respond to disaster situations such as this. One possibility might be utilizing nursing staff such as Medical-Surgical nurses to do SNF work, or even using P103s. We need to find a way for DPH staff to provide these services.
- Have you considered providing a lower level of care? How will it be possible to take these beds away? Is it expected that there will be no new patients in these beds and the need for these services will decrease by attrition?
 - DPH: Our goal is to step people out of Chinese Hospital and not have to have this contract any longer. When we review our response to the pandemic, we might find that there was another way to meet this need.
- We need to start learning now from our experiences with COVID, and determine best practices. We need to anticipate and have a plan for 20/21.
 - DPH: We are doing better with testing and with treatment, so we hope to be able to exit the contract as quickly and safely as we can.
 - DPH: We are willing to commit to continue to have a close conversation to plan for the future.
- We would like to have a monthly conversation.
 - DPH: We can have a conversation in January, assuming the surge permits that.
 - DPH: We can touch base mid-November after we have a sense of the surge, and whether or not we will be able to wind down this contract sooner.
- Can we see the surge plan?
 - DPH: Surge numbers are on the DPH dashboard.
 - DPH: As far as a plan, we will have to get that for you.
- We would also like to know whether the contract under the PSC will require Board of Supervisors approval.
 - DPH: If the contract under the PSC exceeds \$10 million, it will require Board approval. We will let you know the amount of the contract when it is finalized.

**DPH information provided to SEIU,
October 2, 2020, through November 11, 2020,
and
October 7, 2020,
Request for Waiver of Full Notification Period**

Hale, Jacquie (DPH)

From: Hale, Jacquie (DPH)
Sent: Wednesday, October 07, 2020 5:08 PM
To: Thomas Vitale
Cc: DHR-PSCCoordinator, DHR (HRD); Longhitano, Robert (DPH); Hiramoto, Kelly (DPH)
Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

Thomas,

Thanks for calling me back about this PSC. I was able to get some of the information you requested.

- This is what has been spent to date (they're probably still working on September):

Billing Period	INVOICE AMOUNT
Apr-20	1,140,800
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Aug-20	1,140,800

- And here are quick census figures for Chinese Hospital:

Month	Census	Discharge	Bed Days
April	21	1	398
May	24	2	1,047
June	27	7	1,639
July	27	7	1,850
August	26	6	2,324
September	27	8	2,273

We will keep working on the census data, and will provide it as soon as we get it. If you're able to let me know if SEIU can waive the full notification period, that would be great.

Thank you,
Jacquie Hale
PSC Coordinator
Department of Public Health, City and County of San Francisco
1380 Howard Street, Room 421b, San Francisco, CA 94103
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From: Hale, Jacquie (DPH)
Sent: Wednesday, October 07, 2020 1:33 PM
To: Thomas Vitale <Thomas.Vitale@seiu1021.org>; Criss Romero <criss@sfmea.com>; mleach@ibt856.org; tjenkins@uapd.com; tmathews@ifpte21.org
Cc: DHR-PSCCoordinator, DHR (HRD) <dhr-psccordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>
Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

My apologies, with the email below I sent you an earlier version of our memo to the Civil Service Commission requesting calendaring. Attached is the current version.

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Cc: DHR-PSCCoordinator, DHR (HRD) <dhr-psccordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>
Subject: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services
Importance: High

To: Mark Leach, Teamsters Local 856; Thomas Vitale, SEIU Local 1021; Tim Jenkins, UAPD; Criss Romero, Municipal Employees Union; Timothy Mathews, IFPTE Local 21

This is to let you know that we have requested calendaring of the attached PSC 42999-20/21, COVID-19 Acute Hospital and Skilled Nursing Facility Services, for the October 19, 2020, Civil Service Commission meeting, and to request a waiver of the notification period for this PSC. A response at your earliest convenience would be appreciated.

We are happy to meet with you to provide information on this PSC before or after the Civil Service Commission meeting.

The purpose of this PSC is to continue services for 22 patients which were begun under an emergency agreement established in response to the COVID-19 pandemic in order to create bed capacity at Zuckerberg San Francisco General Hospital (ZSFGH) in preparation for the anticipated surge. Under that emergency MOU, patients transferred to CHASF are to stay at Chinese Hospital until such time they can be discharged back to the community, back to ZSFGH, to Laguna Honda Hospital (LHH) the skilled nursing facility for the City, or, have died.

DPH is presently in the process of transitioning these emergency services to a standard City contract to facilitate payment. We expect this new standard contract to end when the patients are discharged. The requested duration of this PSC is one year. If patients need further care and there is either no City-operated facilities available or it is not clinically recommended for the patient's care, the Department will return to the Commission, as required, to seek an extension of this request.

Thank you for your consideration. Please do contact me if you need further information.

Jacquie Hale
PSC Coordinator
Department of Public Health, City and County of San Francisco
1380 Howard Street, Room 421b, San Francisco, CA 94103
(415) 255-3508

Hale, Jacquie (DPH)

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Sent: Wednesday, October 07, 2020 1:33 PM
To: Thomas Vitale; Criss Romero; mleach@ibt856.org; tjenkins@uapd.com; tmathews@ifpte21.org
Cc: DHR-PSCCoordinator, DHR (HRD); Longhitano, Robert (DPH)
Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services
Attachments: 42999 - 2021 C19 Acute and SNF Req to Cal.pdf

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Thank you for your consideration. Please do contact me if you need further information.

Jacquie Hale
PSC Coordinator

Hale, Jacquie (DPH)

From: Criss Romero <criss@sfmea.com>
Sent: Wednesday, October 07, 2020 4:21 PM
To: Hale, Jacquie (DPH)
Cc: Christina Fong
Subject: Re: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Hello, Jacquie.

Thank you for following up on the status of Union Notification for PSC 42999 - 20/21. We waive the review of this PSC. Please let me know if you have any other questions. Thank you.

Criss Romero

Senior Labor Relations Representative



870 Market Street, Suite 490 ~ San Francisco, CA 94102

415.989.7244 voice | 415.989.7077 fax

Criss@SFMEA.com

[SFMEA Website](#)

On Wed, Oct 7, 2020 at 1:30 PM Hale, Jacquie (DPH) <jacquie.hale@sfdph.org> wrote:

To: Mark Leach, Teamsters Local 856; Thomas Vitale, SEIU Local 1021; Tim Jenkins, UAPD; Criss Romero, Municipal Employees Union; Timothy Mathews, IFPTE Local 21

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San Francisco General Hospital (ZSFGH) in preparation for the anticipated surge. Under that emergency MOU, patients transferred to CHASF are to stay at Chinese Hospital until such time they can be discharged back to the community, back to ZSFGH, to Laguna Honda Hospital (LHH) the skilled nursing facility for the City, or, have died.

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Thank you for your consideration. Please do contact me if you need further information.

Jacquie Hale

PSC Coordinator

Department of Public Health, City and County of San Francisco

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Hale, Jacquie (DPH)

From: Jennifer Esteen <Jennifer.Esteen@seiu1021.org>
Sent: Wednesday, October 07, 2020 7:08 PM
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Cc: Jason Klumb; Theresa Rutherford; criss@sfmea.com; mleach@ibt856.org; tjenkins@uapd.com; tmathews@ifpte21.org; Joseph Bryant
Subject: RE: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services
Attachments: 42999 - 2021 C19 Acute and SNF Req to Cal.pdf; 42999 - 2021 C19 Acute and SNF - SEIU Mtg Notes_.pdf; 42999 - 2021 C19 Acute and SNF.pdf; DocuSign 1.11 _Emergency_MOU_Chinese_Hospital.pdf

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Hi Jacquie,

I am writing to **decline** your request that SEIU 1021 waive the notification period for this PSC.

We have made multiple requests, first on 9/23/2020 then again on 10/2/2020, for data regarding this PSC but haven't received it.

Below is not a comprehensive list of our requests but the requests made include:

- 1) An up to date custodial bed census at SFGH, LHH and the current census of the beds at Chinese Hospital covered by the emergency contract for these 23 beds (below listed as 22 beds, it is unclear if this is an error or indicates a change, the original PSC request is attached for reference, as is the emergency MOU.)
- 2) Total amount spent on the emergency contract from the start of the MOU to today.
- 3) The exit plan for the 23 patients from Chinese Hospital to LHH, at the time of our last meeting it was stated that no pt. will be admitted to LHH unless they are currently at SFGH, which means this PSC will last forever.
- 4) When will these pt's be offered a bed at LHH? If they had not been discharged to Chinese Hospital, LHH would have been their traditional destination from SFGH.
- 5) What other SNF's have been explored for placement of custodial SNF patients, in order to create a competitive bidding process and save costs?

According to the attached emergency MOU, the grid of monthly invoiced costs sent in an email today is incomplete. Page 9 of the emergency MOU lists monthly costs of beds 14-23 at \$1,140,800. You have omitted the \$685,100 costs of beds 1-13. Please abide by our request for full transparency and include the total costs, and amount paid, of all 23 beds which, according to the MOU, totals \$1,825,900. This is a cost of \$2,646.23 per day for a single custodial SNF bed. According to the terms of the emergency MOU, the amount spent over the past 6 months (April – September) is \$10,955,400, which exceeds the \$10,000,000 limit set by Declaration 13. Now that this emergency contract has exceeded the limit, when will the SF Board of Supervisors take up this matter?

Thank you for your request and your attention to our requests for information. I look forward to clarification on this matter and continued discussion.

Jennifer Esteen, RN

SEIU 1021 Vice President of Organizing

Pronouns: She/Her

(415) 218-9675

From: Thomas Vitale

Sent: Wednesday, October 7, 2020 6:01 PM

To: Jennifer Esteen <Jennifer.Esteen@seiu1021.org>; johnnie.williams@sfdph.org; Lucretia Bolin <lubolin@icloud.com>

Cc: Thomas Vitale <Thomas.Vitale@seiu1021.org>

Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

FYI

From: Hale, Jacquie (DPH) <jacquie.hale@sfdph.org>

Sent: Wednesday, October 7, 2020 5:08 PM

To: Thomas Vitale <Thomas.Vitale@seiu1021.org>

Cc: DHR-PSCCoordinator, DHR (HRD) <dhrrpscordinator@sfgov.org>; Longhitano, Robert (DPH)

<robert.longhitano@sfdph.org>; Hiramoto, Kelly (DPH) <kelly.hiramoto@sfdph.org>

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Sent: Wednesday, October 07, 2020 1:30 PM

To: Thomas Vitale <Thomas.Vitale@seiu1021.org>; Criss Romero <criss@sfmea.com>; mleach@ibt856.org; tjenkins@uapd.com; tmathews@ifpte21.org

Cc: DHR-PSCCoordinator, DHR (HRD) <dh-psscordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>

Subject: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

Importance: High

To: Mark Leach, Teamsters Local 856; Thomas Vitale, SEIU Local 1021; Tim Jenkins, UAPD; Criss Romero, Municipal Employees Union; Timothy Mathews, IFPTE Local 21

This is to let you know that we have requested calendaring of the attached PSC 42999-20/21, COVID-19 Acute Hospital and Skilled Nursing Facility Services, for the October 19, 2020, Civil Service Commission meeting, and to request a waiver of the notification period for this PSC. A response at your earliest convenience would be appreciated.

We are happy to meet with you to provide information on this PSC before or after the Civil Service Commission meeting.

The purpose of this PSC is to continue services for 22 patients which were begun under an emergency agreement established in response to the COVID-19 pandemic in order to create bed capacity at Zuckerberg San Francisco General Hospital (ZSFGH) in preparation for the anticipated surge. Under that emergency MOU, patients transferred to CHASF are to stay at Chinese Hospital until such time they can be discharged back to the community, back to ZSFGH, to Laguna Honda Hospital (LHH) the skilled nursing facility for the City, or, have died.

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Thank you for your consideration. Please do contact me if you need further information.

Jacquie Hale
PSC Coordinator
Department of Public Health, City and County of San Francisco
1380 Howard Street, Room 421b, San Francisco, CA 94103
(415) 255-3508

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Hale, Jacquie (DPH)

From: Mark Leach <mleach@ibt856.org>
Sent: Wednesday, October 07, 2020 8:55 PM
To: Hale, Jacquie (DPH)
Cc: Tim Jenkins; tmathews@ifpte21.org; DHR-PSCCoordinator, DHR (HRD); Longhitano, Robert (DPH); Jennifer Esteen
Subject: Re: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

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Jacquie,

Teamster 856 declines your request to waive the notification period for this PSC.

Other affected unions have outstanding questions and requests for information that were asked on behalf of all labor and we won't be able to make a decision until that information has been provided.

I look forward to continued discussion on this matter.

Mark Leach

Representative

TEAMSTERS 856
453 San Mateo Ave. | San Bruno | CA | 94066
650.296.7887 | www.TEAMSTERS856.org

On Oct 7, 2020, at 4:43 PM, Hale, Jacquie (DPH) <jacquie.hale@sfdph.org> wrote:

To: Mark Leach, Teamsters Local 856; Tim Jenkins, UAPD; Timothy Mathews, IFPTE Local 21

Hi. This is to follow up on my email below, requesting a waiver of the full union notification period for the attached PSC. I also left you a voicemail message about this earlier this afternoon.
If you could please respond as to whether or not you are able to do this, we would appreciate it.

Thank you,
Jacquie Hale
PSC Coordinator
Department of Public Health, City and County of San Francisco
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Cc: DHR-PSCCoordinator, DHR (HRD) <dhrrpscordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>
Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

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Cc: DHR-PSCCoordinator, DHR (HRD) <dhrrpscordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>
Subject: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services
Importance: High

To: Mark Leach, Teamsters Local 856; Thomas Vitale, SEIU Local 1021; Tim Jenkins, UAPD; Criss Romero, Municipal Employees Union; Timothy Mathews, IFPTE Local 21

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<3. 42999 - 2021 Unions Notified 9-18-19.pdf>

Hale, Jacquie (DPH)

From: Timothy Mathews <tmathews@ifpte21.org>
Sent: Wednesday, October 07, 2020 9:25 PM
To: Mark Leach; Hale, Jacquie (DPH)
Cc: Tim Jenkins; DHR-PSCCoordinator, DHR (HRD); Longhitano, Robert (DPH); Jennifer Esteen
Subject: Re: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

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Jacquie,

Local 21 also declines to waive our review period.

As stated by other affected parties, this item raises many questions which remain to be answered and as such should not move forward through the PSC process.

Thank you.

For the Union,

-Timothy

Timothy Mathews
Pronouns: He/him/his
Research Specialist
IFPTE Local 21
1167 Mission Street, 2nd Floor
San Francisco, CA 94103
Office: 415-914-7345

From: Mark Leach <mleach@ibt856.org>
Sent: Wednesday, October 7, 2020 8:56 PM
To: Hale, Jacquie (DPH)
Cc: Tim Jenkins; Timothy Mathews; DHR; Longhitano, Robert (DPH); Jennifer Esteen
Subject: Re: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

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Thank you,

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PSC Coordinator

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Cc: DHR-PSCCoordinator, DHR (HRD) <dhr-psccordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>

Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

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Cc: DHR-PSCCoordinator, DHR (HRD) <dhrrpscordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>

Subject: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

Importance: High

To: Mark Leach, Teamsters Local 856; Thomas Vitale, SEIU Local 1021; Tim Jenkins, UAPD; Criss Romero, Municipal Employees Union; Timothy Mathews, IFPTE Local 21

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Thank you for your consideration. Please do contact me if you need further information.

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<3. 42999 - 2021 Unions Notified 9-18-19.pdf>

Hale, Jacquie (DPH)

From: Lucretia Bolin <lubolin@icloud.com>
Sent: Thursday, October 08, 2020 9:43 AM
To: Jennifer Esteen
Cc: Thomas Vitale; Williams, Johnnie (DPH); Longhitano, Robert (DPH); Hale, Jacquie (DPH); Hiramoto, Kelly (DPH); DHR-PSCCoordinator, DHR (HRD); Jason Klumb; Theresa Rutherford; criss@sfmea.com; mleach@ibt856.org; tjenkins@uapd.com; tmathews@ifpte21.org; Joseph Bryant
Subject: Re: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

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Dear Colleagues,

Thank you for this and forgive me for any redundancy. I'm going to also decline the request to waive the notification period. This is really out of an abundance of caution and concern for our patients, our members and our contract. It's also about due diligence. It in no way suggests opposition to the PSC. I have any more questions.

I am calling your attention to these aspects of the MOU under Responsibilities of SFDPH (2b) and Responsibilities of the hospital (3b). I still am remiss why we can't mobilize our own personnel? My ask is whether or not we can mobilize to provide the necessary personnel? I'd like to know how many P103 nurses are assigned and qualified to cover medical surgical or skilled nursing in DPH? How many of these nurses are currently working for DPH during the pandemic and can be redeployed? My understanding is that this option has not really been explored. I also understand that there has not been any exploration of other facilities or bed availability? Did I get that right? Can you share the the staffing ratios at Chinese for these contracted beds? I have no idea how much a custodial skill nursing bed should cost and \$2646.23 seems akin to a regular acute care bed. I apologize as I am really catching up with the PSC and the MOU. If I am way off track please excuse me.

I appreciate the follow up

On Oct 7, 2020, at 19:08, Jennifer Esteen <Jennifer.Esteen@seiu1021.org> wrote:

Hi Jacquie,

I am writing to **decline** your request that SEIU 1021 waive the notification period for this PSC. We have made multiple requests, first on 9/23/2020 then again on 10/2/2020, for data regarding this PSC but haven't received it.

Below is not a comprehensive list of our requests but the requests made include:

1. An up to date custodial bed census at SFGH, LHH and the current census of the beds at Chinese Hospital covered by the emergency contract for these 23 beds (below listed as 22 beds, it is unclear if this is an error or indicates a change, the original PSC request is attached for reference, as is the emergency MOU.)
2. Total amount spent on the emergency contract from the start of the MOU to today.
3. The exit plan for the 23 patients from Chinese Hospital to LHH, at the time of our last meeting it was stated that no pt. will be admitted to LHH unless they are currently at SFGH, which means this PSC will last forever.
4. When will these pt's be offered a bed at LHH? If they had not been discharged to Chinese Hospital, LHH would have been their traditional destination from SFGH.
5. What other SNF's have been explored for placement of custodial SNF patients, in order to create a competitive bidding process and save costs?

According to the attached emergency MOU, the grid of monthly invoiced costs sent in an email today is incomplete. Page 9 of the emergency MOU lists monthly costs of beds 14-23 at \$1,140,800. You have omitted the \$685,100 costs of beds 1-13. Please abide by our request for full transparency and include the total costs, and amount paid, of all 23 beds which, according to the MOU, totals \$1,825,900. This is a cost of \$2,646.23 per day for a single custodial SNF bed. According to the terms of the emergency MOU, the amount spent over the past 6 months (April – September) is \$10,955,400, which exceeds the \$10,000,000 limit set by Declaration 13. Now that this emergency contract has exceeded the limit, when will the SF Board of Supervisors take up this matter?

Thank you for your request and your attention to our requests for information. I look forward to clarification on this matter and continued discussion.

Jennifer Esteen, RN
SEIU 1021 Vice President of Organizing
Pronouns: She/Her
(415) 218-9675

From: Thomas Vitale
Sent: Wednesday, October 7, 2020 6:01 PM
To: Jennifer Esteen <Jennifer.Esteen@seiu1021.org>; johnnie.williams@sfdph.org; Lucretia Bolin <lubolin@icloud.com>
Cc: Thomas Vitale <Thomas.Vitale@seiu1021.org>
Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

FYI

From: Hale, Jacquie (DPH) <jacquie.hale@sfdph.org>
Sent: Wednesday, October 7, 2020 5:08 PM
To: Thomas Vitale <Thomas.Vitale@seiu1021.org>
Cc: DHR-PSCCoordinator, DHR (HRD) <dhr-psccordinator@sfgov.org>; Longhitano, Robert (DPH) <robert.longhitano@sfdph.org>; Hiramoto, Kelly (DPH) <kelly.hiramoto@sfdph.org>
Subject: FW: Request for Waiver of Notification Period for PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services

Thomas,

Thanks for calling me back about this PSC. I was able to get some of the information you requested.

- This is what has been spent to date (they're probably still working on September):

Billing Period	INVOICE AMOUNT
Apr-20	1,140,800
May-20	1,140,800
Jun-20	1,140,800
Jul-20	1,140,800
Aug-20	1,140,800

- And here are quick census figures for Chinese Hospital:

Month	Census	Discharge	Bed Days
April	21	1	398
May	24	2	1,047
June	27	7	1,639
July	27	7	1,850
August	26	6	2,324
September	27	8	2,273

We will keep working on the census data, and will provide it as soon as we get it. If you're able to let me know if SEIU can waive the full notification period, that would be great.

Thank you,
Jacquie Hale
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Thank you for your consideration. Please do contact me if you need further information.

Jacquie Hale

PSC Coordinator

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<42999 - 2021 C19 Acute and SNF Req to Cal.pdf><42999 - 2021 C19 Acute and SNF - SEIU Mtg Notes_.pdf><42999 - 2021 C19 Acute and SNF.pdf><DocuSign 1.11_Emergency_MOU_Chinese_Hospital.pdf>

Hale, Jacquie (DPH)

From: Hale, Jacquie (DPH)
Sent: Wednesday, November 11, 2020 4:14 PM
To: Thomas Vitale; Esteen, Jennifer (DPH); Lucretia Bolin; Lucretia Bolin; Williams, Johnnie (DPH)
Cc: Hiramoto, Kelly (DPH)
Subject: PSC 42999-20/21 Omit Posting COVID-19 Acute Hospital and Skilled Nursing Facility Services
Attachments: Laguna Honda Hospital Admissions Surge Plan (1).pdf; 42999-2021 DPH-SEIU Responses 11-11-20.pdf

Tracking:	Recipient	Delivery
	Thomas Vitale	
	Esteen, Jennifer (DPH)	Delivered: 11/11/2020 4:14 PM
	Lucretia Bolin	
	Lucretia Bolin	
	Williams, Johnnie (DPH)	Delivered: 11/11/2020 4:14 PM
	Hiramoto, Kelly (DPH)	Delivered: 11/11/2020 4:14 PM
	Ruggels, Michelle (DPH)	Delivered: 11/11/2020 4:14 PM

SEIU,

Please find attached our further responses to your questions related to PSC 42999-20/21.

We are continuing to gather information to respond to the following, and will send it as soon as it is received.

- Census information for October 2020
- Further information on exit planning for patients at Chinese Hospital
- Surge plan for ZSFG
- Number of P103, Per Diem Registered Nurses “assigned and qualified to cover medical-surgical or skilled nursing in DPH,” and “how many of these are currently working for DPH during the pandemic and may be redeployed.”
- Staffing ratios for DPH beds at Chinese Hospital.

We also would like to follow up on the offer we made when we met, to touch base in November as to the status of surge capacity and to meet further in January to provide more information on the contract.

If you could please send us 2-3 times/dates that would be good for you, we will be able to schedule online meetings.

Thank you,

Jacquie Hale, DPH PSC Coordinator
Manager, Pre-Award Unit, Office of Contracts Management and Compliance, DPH Business Office
1380 Howard Street, Room 421b, San Francisco, CA 94103
(415) 255-3508

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SFDPH PSC 42999-20/21 – SEIU Questions and Responses

Note: At SEIU's request, DPH met with SEIU on September 23, 2020, and October 2, 2020, to provide information on the PSC. The questions listed below are from subsequent emails received by DPH from SEIU, which essentially memorialized the questions which had been asked verbally at the meetings, unless otherwise noted. SEIU has noted that the questions below are not a comprehensive list. DPH has not noted any additional questions, in the meetings or in emails.

- 1. An up to date custodial bed census at SFGH, LHH and the current census of the beds at Chinese Hospital covered by the emergency contract for these 23 beds (below listed as 22 beds, it is unclear if this is an error or indicates a change, the original PSC request is attached for reference, as is the emergency MOU.)**

CENSUS INFORMATION

Month	Hospital	Census	New Adm.	Discharge	Bed Days
April	ZSFG (acute med-surg + ICU beds)	186	1,015	1,019	5,585
	LHH (SNF custodial beds)	735		9	22,240
	Chinese Hospital (acute beds)	21		1	398
May	ZSFG (acute med-surg + ICU beds)	188	992	947	5,842
	LHH (SNF custodial beds)	726		3	22,634
	Chinese Hospital (acute beds)	24		2	1,047
June	ZSFG (acute med-surg + ICU beds)	190	983	976	5,702
	LHH (SNF custodial beds)	723		1	21,674
	Chinese Hospital (acute beds)	27		7	1,639
July	ZSFG (acute med-surg + ICU beds)	193	1,019	1,002	6,003
	LHH (SNF custodial beds)	716	15	2	22,404
	Chinese Hospital (acute beds)	27		7	1,850
Aug	ZSFG (acute med-surg + ICU beds)	199	1,012	996	6,183
	LHH (SNF custodial beds)	720	8	3	22,404
	Chinese Hospital (acute beds)	26		6	2,324
Sept	ZSFG (acute med-surg + ICU beds)	182.4	1,006	1,002	5,473
	LHH (SNF custodial beds)	716	8	5	21,591
	Chinese Hospital (acute beds)	27		8	2,273
6 mo. total	ZSFG (acute med-surg + ICU beds)	Avg.: 190.1	6,027	5,942	34,788
	LHH (SNF custodial beds)	Avg.: 723	31	23	133,027
	Chinese Hospital (acute beds)	Avg.: 25		31	9,531

Notes:		
Field Name	Associated Metric	Definition
Census	Average Daily Census	Calculated value that takes the actual days and divides by total numbers of midnights in the month (28-31 days). For Current Month, the denominator is the number of midnights that lapsed.
Open	No known metric tracking open beds	N/A
New Adm.	Admissions by Unit/Service	Number of admissions into that statistic, aka: where the patient was located and service selected at the time the patient's account was converted into inpatient status. For most patients that enter from the ED then into a Med-Surg unit, the unit assigned to the admission was the ED as the patient was in the ED when the account was flipped to inpatient unless the account was a direct admission into a specific Unit.
Discharge	Discharges by Unit/Service type	Number of Discharges for that statistic.
Bed Days	Actual Days	Counts the number of inpatient midnights with each statistic. For service, this is the primary service associated with that midnight. Patients with inpatient status boarding in the ED are counted in ED census.

Additional Notes:

Med-Surg + ICU admissions may include Labor & Delivery or Pediatrics patients if patient was admitted from Emergency Department or OR. ED and OR numbers are included in Med-Surg + ICU definitions for Census, Admissions, Discharges and Bed Days

2. Total amount spent on the emergency contract from the start of the MOU to today.

Invoices for April-September 2020 (6 months) totaled \$8,404,800, leaving \$1,595,199 remaining, which at the current rate, will result in not being able to pay the contractor for all services delivered in November, or for the remainder of the contract term.

3. The exit plan for the 23 patients from Chinese Hospital to LHH, at the time of our last meeting it was stated that no patient will be admitted to LHH unless they are currently at SFGH, which means this PSC will last forever.

What was discussed was the continuation of the terms of the emergency MOU to the new contract that is under this PSC, which was planned and at that time expected to remain in place until all patients were discharged. We discussed that discharge is a clinical decision that must be based what is best to care for each patient. We also discussed that at the time, we were optimistic that the pandemic would ease,

hospital capacity would begin to return to normal, and we would be able to look at each patient's case and determine if they could be discharged to the community (home or a Residential Care Facility) and/or would be admitted to ZSFG or LHH.

4. What other SNF's have been explored for placement of custodial SNF patients, in order to create a competitive bidding process and save costs?

Since the emergency agreement was created under Chapter 21.15 of the San Francisco Administrative Code and the Mayor's proclamation of emergency, a competitive solicitation was not required¹. The contract under this PSC, because it is continuing the services begun under the emergency agreement, is a sole source contract. As with other services transitioning from emergency to standard contracts, if the services are expected to extend further, the Department intends to conduct a competitive solicitation.

The primary goal of the emergency agreement was to create capacity at ZSFG. The Department joined with other San Francisco hospitals and the Hospital Council of Northern and Central California to create a unified approach to responding to the pandemic, which gave DPH access to information on the ability of other hospitals to take patients. At the time of the emergency contract, no SNFs were admitting due to COVID-19 infection risks. However, the ability to assist the Department in responding to the pandemic immediately was the primary factor, in addition to cost.

5. Page 9 of the emergency MOU lists monthly costs of beds 14-23 at \$1,140,800. You have omitted the \$685,100 costs of beds 1-13. Please abide by our request for full transparency and include the total costs, and amount paid, of all 23 beds which, according to the MOU, totals \$1,825,900. This is a cost of \$2,646.23 per day for a single custodial SNF bed. According to the terms of the emergency MOU, the amount spent over the past 6 months (April – September) is \$10,955,400, which exceeds the \$10,000,000 limit set by Declaration 13. Now that this emergency contract has exceeded the limit, when will the SF Board of Supervisors take up this matter?

Please note that the emergency MOU shows a fee schedule based on the number of beds utilized, in two ranges, 1-13 beds, or 14-23 beds. As the number of patients transferred were 23, we have been billed according to the level for 14-23 beds. At an average census of 25 beds, this comes to an average of approximately \$1,868 per bed, per day. A copy of the fee schedule is pictured below, for reference.

Exhibit A Guaranty of Payment and Supplies		
# of Beds	Type of Patients	Guaranty Payment Per Month
1-13 Beds (2 nd Floor)	SNF/Custodial Patients	\$685,100
14-23 Beds (2 nd Floor)	SNF/Custodial Patients	\$1,140,800

¹ The emergency agreement states that it is "an emergency contract awarded pursuant to procedures applicable under the Local Emergency declared by Mayor London Breed on Tuesday, February 25, 2020 attached in Appendix G, in accordance with San Francisco Administrative Code Chapter 21."

As noted above and in our meeting, the emergency agreement's Not To Exceed amount is \$9,999,999, which was established in order to be available immediately. DPH does not plan to request BOS approval for the emergency contract, but to continue services under a standard contract. If the Not To Exceed amount of the standard contract exceeds \$10 million, the Department will be required to request Board of Supervisors approval.

6. I am calling your attention to these aspects of the MOU under Responsibilities of SFDPH (2b) and Responsibilities of the hospital (3b).

Those parts of the agreement were included in order to outline responsibilities for the transfer of patients from SFDPH to Chinese Hospital. They read as follows:

“2. RESPONSIBILITIES OF SFDPH. SFDPH shall be responsible for performing or ensuring performance of the following:... b. Arrange for appropriate and safe transportation and care of patient during transfer, in accordance with applicable federal and state laws and regulations...

3. RESPONSIBILITIES OF HOSPITAL. Hospital shall be responsible for performing or ensuring performance of the following: ...b. Provide, within its capabilities, appropriate personnel, equipment, and services to assist the receiving physician with the receipt and treatment of patient transferred...”

Should the emergency agreement require amendment to provide further for the discharge of patients from Chinese Hospital, DPH will request those amendments, however, at present the Department expects discharges to occur under the new, standard contract (that is under this PSC). Please also note that until the patients are discharged, the emergency agreement also provides that “h. For the avoidance of any doubt, Hospital shall be solely and completely responsible for patient immediately upon arrival.”

7. I still am remiss why we can't mobilize our own personnel? My ask is whether or not we can mobilize to provide the necessary personnel?

The Department is continuing to respond to the pandemic, and must maintain appropriate surge capacity at ZSFG. LHH only began admitting new patients very recently, and we are in the process of looking at whether any of the patients at Chinese Hospital can be transferred to LHH, which remains dependent on providing the best appropriate care to patients.

In our meeting, there was a question as to why DPH or the City could not buy, lease, or utilize an existing facility to provide care with civil service employees. The response was that we do not have the appropriate, approved facilities in which to provide the care that is needed. Facilities must be approved by the State before they can be used to provide services, a process which typically takes more than a year.

We also discussed the ongoing difficulties in filling all nursing staff vacancies. DPH has continued to work with DHR to expedite hiring as much as possible, including implementation of the Mayor's declaration to expedite hiring employees needed to respond to the COVID-19 local emergency. In order to respond to the pandemic, DPH has also utilized nursing registries, to meet the unprecedented peak workload demands.

8. I also understand that there has not been any exploration of other facilities or bed availability? Did I get that right?

Please see our response above regarding the original creation of the emergency agreement. We have not explored any other facilities or bed availability since originally contracting for these services as we do not want to transfer patients unless we are able to discharge them or to bring them back to ZSFG or LHH.

9. I have no idea how much a custodial skill nursing bed should cost and \$2646.23 seems akin to a regular acute care bed.

We are contracting for acute care beds, as Chinese Hospital is not licensed as a SNF. As noted above, the current average cost to DPH for the beds under the emergency contract is \$1,868 per day.

Laguna Honda Hospital Admissions Surge Plan

Level I

- Admit to all AOU empty beds (max of 6 patients)
- PMS patient rooms designated as break rooms: 47A, 47B, 59A & 59B (max of 4 patients)

Level II

- In addition to Level I
- Admit to all available empty beds not being utilized as part of LHH COVID-19 response (i.e. PUI rooms) (variable number)
- Admit to bed holds on general SNF units. Current Bed Holds may be moved to North Mezzanine vacant beds, if available. (variable number)
- Admit to Code Home bed (1 patient)
- Admit to Isolation Room S6 (1 patient)

Level III

- In addition to Level I
- In addition to Level II
- Admit to general SNF unit PUI rooms (max 12 patients)

Mayor's and DPH's News Releases



ORDER OF THE HEALTH OFFICER No. C19-03b

**ORDER OF THE HEALTH OFFICER
OF THE CITY AND COUNTY OF SAN FRANCISCO DIRECTING
RESIDENTIAL FACILITIES TO LIMIT VISITORS AND OTHER NON-
ESSENTIAL PERSONS AND TO PREPARE WRITTEN PROTOCOLS
REGARDING COVID-19, INCLUDING RESTRICTIONS ON AND
SCREENING OF VISITORS AND OTHER PROTECTIONS FOR
RESIDENTS, VISITORS, AND PERSONNEL**

(PUBLIC HEALTH EMERGENCY ORDER)

DATE OF ORDER: September 4, 2020

Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both. (California Health and Safety Code § 120275, 120295, *et seq.*; Cal. Penal Code §§ 69, 148(a)(1); San Francisco Administrative Code §7.17(b))

Summary: On February 25, 2020, the Mayor of the City and County of San Francisco (the “City”) declared a state of emergency to prepare for coronavirus disease 2019 (“COVID-19”). On March 5, 2020 there was the first reported case of COVID-19 in the City. On March 16, 2020, the City and five other Bay Area counties and the City of Berkeley, working together, were the first in the State to implement shelter-in-place orders in a collective effort to reduce the impact of SARS-CoV-2, the virus that causes COVID-19. That virus is easily transmitted, especially indoors or in group settings, and the disease can be extremely serious. It can require long hospital stays, and in some instances cause long-term health consequences or death. It can impact not only those who are older or have underlying health conditions and known to be at high risk, but also other people, regardless of age. And a major risk remains the spread of the virus that causes COVID-19 through asymptomatic and pre-symptomatic carriers, people who can spread the disease but do not even know they are infected and contagious. The spread of disease is a global pandemic causing untold societal, social, and economic harm.

On March 7, 2020, the City’s Health Officer issued Order No. C19-01, limiting visitors and non-essential personnel from Laguna Honda Hospital, one of the largest skilled nursing facilities in the country. On March 10, 2020, the first version of this Order, C19-03, was issued to extend similar restrictions and other safety measures to other skilled nursing and residential facilities in the City. Order No. C19-01 was expanded on March 11, 2020, to include the skilled nursing unit at Zuckerberg San Francisco General Hospital and add the additional safety requirements. On March 18, 2020, the Health Officer issued Order No. C19-09, extending similar restrictions and protections to other residential living facilities in the City. Collectively, these orders served to protect residents and staff at residential living facilities in the City.



ORDER OF THE HEALTH OFFICER No. C19-03b

Some residents of community living facilities are being treated for health conditions that make them particularly vulnerable to suffering the most serious complications of COVID-19, including death. Community living settings also make it easier for the virus to spread. And medical personnel and other essential staff of hospitals and residential facilities are experiencing increased stress associated with providing excellent support during this public health emergency. It is critical to protect all these populations from avoidable exposure to the disease and other pathogens. At the same time, allowing visitation in such settings is also important to the health and well-being of residents, many of whom have gone without in-person visits for almost six months. The Health Officer and the Department of Public Health ("DPH") have been reviewing the literature and data to help craft rules that will expand visitation in safer ways while also continuing to protect these populations.

Although our collective effort has had a positive impact on limiting the spread of the virus, key concerns remain. The number of infections and infection rate in the City remain high, and it is anticipated that infection rates will continue to increase as we enter the Fall (when the flu and colds could negatively impact health in these facilities) and other activities are further allowed under state and local orders. We are going to have to live with the threat of the virus for many months to come.

This Order expands visitation at Residential Facilities, accomplishing the purpose of strengthening our community social distancing response, protecting medical resources and healthcare providers, and supporting the well-being of residents by allowing for in-person visits when they can be done safely. The Order gives such facilities flexibility to allow three new kinds of visitation: outdoor visits (where resident and visitor are outside), vehicle-based visits (where the visitors remain in a vehicle), and facility window visits (where the resident remains in the building behind a window or door with a window). This Order lists many requirements for allowing such visits, including mandatory screening of visitors on the day of the visit, mandatory physical distancing, wearing a face covering as required by Health Officer Order No. C19-12c, a prohibition on direct exchange of gifts or other items between the resident and visitors, a requirement that visits be scheduled in advance, restrictions on the length of visits and how many visitors are allowed, and other protections. Residential Facilities are given leeway to determine how to safely offer such visits and what kinds of visits they wish to offer, although they must contact the California Department of Public Health ("CDPH") if they are unable to allow for some version of this expanded visitation.

This Order also makes other changes, cleaning up the prior requirements, adding a checklist of key visitation requirements, and requiring Residential Facilities to notify residents and authorized decision makers of these changes. This Order goes into effect at 9 a.m. on Saturday, September 5, 2020, revises and replaces the prior version (Order No. C19-03) as of that time and date, and will remain in effect until extended, rescinded, superseded, or amended in writing by the Health Officer.



ORDER OF THE HEALTH OFFICER No. C19-03b

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UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE
SECTIONS 101040, 101085, AND 120175, THE HEALTH OFFICER OF THE CITY AND
COUNTY OF SAN FRANCISCO (THE “HEALTH OFFICER”) ORDERS:

1. **Intent.** The intent of this Order is to ensure that residents, staff, and Visitors at each long-term care residential facility listed in Section 20 below (each a “Residential Facility”) are protected from the spread of COVID-19 to the greatest extent possible given how vulnerable most residents at Residential Facilities in the City are to the disease and how easy it is to transmit the SARS-CoV-2, the virus that causes COVID-19, especially from asymptomatic and pre-symptomatic people. Other capitalized terms in this Order are defined throughout this Order.
2. **General Requirements.** While this Order is in effect, each Residential Facility and the staff of each such Residential Facility must comply with the visitation and COVID-19 related protocols listed by this Order as well as all other requirements of this Order. Visitors allowed under this Order must comply with all conditions of visitation imposed by this Order and by the Residential Facility at the time of entry or access to the Premises.
3. **Visitation Restrictions and Requirements.** Each Residential Facility and its staff must exclude from entry or access to its Premises any Visitors and Non-Essential Personnel including, but not limited to, visitors of residents at the Residential Facility except as allowed by this Order. Such Visitors and Non-Essential Personnel, including but not limited to authorized decision-makers and family members of residents, are ordered not to visit any Residential Facility except as allowed by this Order.
4. **Types of Visitation.** This Order restricts onsite visits between Residential Facility residents and Visitors. When Visitors seek to visit or contact a resident, the Residential Facility may allow visitation or contact only in the following ways. First, each Residential Facility must make reasonable efforts to facilitate such contact by remote means such as telephone or videoconference that do not expose the resident to in-person contact. Second, each Residential Facility may authorize Allowed Visitation or Necessary Visitation on a case-by-case basis using the



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following protocols and other protocols regarding visitation it puts in place. Based on the context, a Residential Facility may refuse Allowed Visitation or Necessary Visitation when visits cannot occur in a manner that protects the health and welfare of the resident, the Visitor, and Residential Facility personnel. Each Residential Facility must monitor and ensure compliance with the requirements of this Order.

5. **Allowed Visitation.** The term “Allowed Visitation” means an in-person visit or contact that occurs between a resident and a Visitor under this Section 5. Allowed Visitation includes Facility Window Visits, Vehicle Visits, and Outdoor Visits, each as defined in this Section. Allowed Visitation, regardless of type, may only occur when the Residential Facility complies with all General Visitation Requirements listed below and also each requirement that applies to the specific type of visit. The checklist attached as **Appendix A** to this Order outlines most requirements for Allowed Visitation, but all requirements listed in the body of this Order must be met. Each Residential Facility should offer at least one type of Allowed Visitation except when that cannot be done safely and is encouraged to offer multiple types when staffing, resources, and the context permit doing so safely. **If a facility is unable to offer any form of Allowed Visitation (other than temporarily based on short-term staffing or other conditions), it must notify CDPH with an explanation of why it is unable to offer such visitation.** Safety considerations for visits include not only COVID-19-related issues but more typical resident safety issues to ensure that risks to resident safety and well-being are minimized whenever possible.

In relation to implementation of Allowed Visitation, a Residential Facility may utilize trained volunteers to help meet the requirements of this Order so long as such volunteers, if onsite, are screened and meet other applicable requirements for staff. Examples of each type of Allowed Visitation are included below, and these are for illustration purposes and are not intended to show the only way that visitation may occur. This Order gives discretion to each Residential Facility to implement visitation in the ways that make the most sense and that protect resident, staff, and Visitor safety in the facility’s unique setting.

- a. **General Visitation Requirements.** Each visit that occurs as an Allowed Visitation must comply with all of the following requirements (the “General Visitation Requirements”):
- i. All visits are subject to the COVID-19 Prerequisites and Outbreak Restrictions listed in Section 6 below.
 - ii. The visit must be supervised by Residential Facility staff or trained, screened volunteers for the duration of the visit.
 - iii. The visit must be planned in advance with the Residential Facility, and the Residential Facility may determine the visitation hours for each type of Allowed Visitation.



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- iv. The Residential Facility must designate an appropriate area for the type of Allowed Visitation. If the Residential Facility does not have an area that meets all requirements a specific type of Allowed Visitation, then the Residential Facility must not allow that type of Allowed Visitation to occur.
- v. When a resident moves to or is transported to any area designated for Allowed Visitation, the resident must wear a Face Covering (as tolerated) for that journey. Except as listed below, a resident must wear a Face Covering (as tolerated) for the duration of the visit. Except as listed below, each Visitor must wear a Face Covering at all times. The rules regarding Face Coverings are listed below in Section 11.
- vi. The Residential Facility must provide a telephone on request to any resident who remains inside the building during a visit so that Visitors can safely communicate with the resident, such as from afar or through closed windows.
- vii. Sharing items between Visitors and residents, including gifts, flowers, reading materials, games, food, drinks, or utensils, during any visit is not allowed. A Residential Facility may adopt a protocol for allowing Visitors or others to send or deliver items or gifts to residents through Residential Facility staff so long as the protocol addresses how to ensure resident safety and minimize the risk of disease transmission through surface contact. Such a protocol may not allow Visitors to hand such items directly to a resident during a visit.
- viii. Except as listed below, each Visitor and Visitor group must maintain at least six feet or more of physical distancing from all other groups and from all residents, including the resident they are visiting. No physical touching is allowed between a Visitor and any resident (meaning no hugging, hand-shaking, kissing, etc.). The Residential Facility must post signs outlining these rules, clearly mark spaces to prevent Visitor groups from being too close to each other or to residents, limit crowding, and increase the distance between groups as needed to ensure that people can hear each other without having to shout to be heard. Sample signs will be available online soon at <https://www.sfdcdp.org/infectious-diseases-a-to-z/coronavirus-2019-novel-coronavirus/coronavirus-2019-information-for-healthcare-providers> (under the "Long Term Care and Senior Care" list).
- ix. No more than four Visitors from the same household are allowed. If visitors are from different households, the group of Visitors must be limited to two people total (one per different household). Visitation



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group size can be limited by the Resident Facility based on facility space or other safety considerations to allow for proper distancing.

- x. The Residential Facility must screen visitors for COVID-19 Symptoms (as defined in Section 18.e below) prior to the start of the visit as outlined in Section 7 below. For Outdoor Visits, temperature screening of each Visitor is also required.
- xi. No visitor who answers a screening question indicating they have any of the COVID-19 Symptoms or who otherwise answers questions indicating that they have recent exposure to SARS-CoV-2 is allowed to visit.
- xii. Except for Vehicle Visits with Closed Facility Windows, the Residential Facility must require Visitors to perform hand hygiene in accordance with guidelines from the United States Centers for Disease Control and Prevention and provide supplies for hand hygiene such as hand sanitizer or a sink with soap, clean water, and towels as appropriate. More information on hand hygiene is available at <https://www.cdc.gov/handwashing/when-how-handwashing.html> and <https://www.cdc.gov/handwashing/hand-sanitizer-use.html>.
- xiii. The Residential Facility must routinely clean and disinfect all frequently touched surfaces under the control of the Residential Facility in any area used for visits.
- xiv. Each visit is limited to one hour, and a Residential Facility may impose shorter time limits if needed to accommodate residents while ensuring compliance with the requirements of this Order. A Residential Facility may also limit the number of visits per resident each week, month, or otherwise in order to ensure that all residents are able to have visitors in a fair and equitable manner and take into account the context of a given resident.
- xv. A visit may be cancelled by the Residential Facility due to relevant considerations that impact Visitor, staff, or resident safety.
- xvi. Whenever possible, visitation should take place without visitors walking through the interior of a Residential Facility. If visitors must travel through the interior of a Residential Facility, the facility should have them take the shortest route possible. By way of example, it is acceptable for Visitors to walk through a facility's lobby to get to an outdoor garden or courtyard where Outdoor Visitation occurs (so long as travel through the building is not restricted at the time under Section 6 below).



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- xvii. Shouting, singing, or playing instruments that use the human breath (such as woodwind or brass instruments) is prohibited except when everyone is behind closed windows.
 - xviii. Except for Vehicle Visitation, visitation by children is left to the discretion of the Residential Facility. If children are allowed to visit, all Visitors who are two years old and older must wear a face covering, and children must be under supervision at all times. Also, screening for any COVID-19 Symptoms must take into account the different list of symptoms for youths under 18 years old (see Section 18.e below).
- b. **Facility Window Visit Requirements.** The term “Facility Window Visit” refers a visit where the Visitor(s) are separated by a building window (or door with a window) from the resident. There are two types of Facility Window Visits: a **Facility Window Visit with an Open Window**, which is when the window separating the Visitor(s) and resident is open and the Visitor(s) are outdoors; and a **Facility Window Visit with a Closed Window**, which is when the window separating the Visitor(s) and the resident is closed so no airflow occurs between the two sides of the window. The following are examples of a Facility Window Visit with an Open Window: a resident in their room on the first floor with window open to a garden or walkway where the Visitors are located; a resident in part of a common area that has privacy and a window that opens out on a parking lot where the Visitors are located; and a resident in a recreation room that has a sliding glass door open to a patio that is accessible to the Visitors. The following are examples of a Facility Window Visit with a Closed Window: a resident in their room on the first floor behind a closed window talking by phone with Visitors who are outside on a walkway or in a garden; a resident in a part of the facility lobby that has large windows that do not open talking by phone with Visitors who are on the other side of the window and distant from other people entering the building; or a resident who is seated behind a door with a large window that is closed talking by phone with Visitors who are standing in a parking lot on the other side of the door.

Facility Window Visits may only occur when all listed requirements for that type of visit are met. Those requirements are:

- i. For Facility Window Visits with an Open Window:
 - 1. The Visitor(s) must be separated by a building window (or door with a window) from the resident.
 - 2. The window separating the Visitor(s) and the resident may be open and the Visitor(s) are outdoors.



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3. The resident must stay at least 3 feet back from the window.
4. Each Visitor must stay at least 3 feet back from the window.

ii. For Facility Window Visit with a Closed Window:

1. The Visitor(s) must be separated by a building window (or door with a window) from the resident.
2. All windows and doors separating the Visitor(s) and the resident are closed so that no airflow occurs between the two sides of the window.
3. Each Visitor is not required to maintain at least six feet or more of physical distancing the resident they are visiting because the windows and doors are closed.
4. Each Visitor is prohibited from walking through any building of the Residential Facility.

- c. **Vehicle Visit Requirements.** The term “Vehicle Visit” refers a visit where the Visitor(s) remain in a vehicle and the resident is at least six feet away from the vehicle. There are two types of Vehicle Visits: a Vehicle Visit with Open Windows, which is when any windows separating the Visitor(s) and resident are open; and a Vehicle Visit with Closed Facility Windows, which is when the resident is behind a closed window in the Residential Facility so no airflow occurs between the two sides of the window. The following are examples of a Vehicle Visit with Open Windows: a resident in a wheelchair is positioned on a walkway near a parked car talking through open car windows with Visitors who are seated in the car; and a resident sitting outside on the patio of their room talking with Visitors through open car windows of a car parked nearby. The following are examples of a Vehicle Visit with Closed Facility Windows: a resident standing at a window that does not open in the building lobby talking by phone with Visitors parked just outside in the parking lot; and a resident sitting at a closed window in their room talking by phone with Visitors parked on the street outside the window.

Vehicle Visits may only occur when all listed requirements for that type of visit are met. Those requirements are:

i. For Vehicle Visits with Open Windows:

1. The Visitor(s) must remain in a vehicle and the resident must be at least six feet away from any open window in the vehicle.



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The resident may be outdoors or indoors at the Residential Facility.

2. The window separating the Visitor(s) and the resident may be open and the vehicle remains outdoors.
3. If there is a pull-in area for vehicle visits, the visits must be scheduled to prevent crowding and keep at least six feet between residents and at least six feet between vehicles.
4. To reduce air flow to the resident from the vehicle, the vehicle window that is closest to the resident should remain closed, if possible.

ii. For Vehicle Visits with Closed Facility Windows (which is similar to a Facility Window Visit with a Closed Window):

1. The Visitor(s) must remain in a vehicle and the resident must be indoors at the Residential Facility and at least six feet away from the vehicle.
2. The Residential Facility windows separating the Visitor(s) and the resident must be closed so that no airflow occurs between the two sides of the window. The vehicle windows may be open or closed.
3. If the vehicle is parked or stopped in an area where other people will be passing, each Visitor in the vehicle must wear a Face Covering. If the vehicle windows remain closed at all times, a Face Covering is not required for Visitors in the vehicle.
4. Each Visitor is prohibited from walking through any building of the Residential Facility.

- d. **Outdoor Visit Requirements.** The term “Outdoor Visit” refers to a visit where the Visitor(s) and the resident are all in an outdoor setting. The following are examples of an Outdoor Visit: a resident who is brought to a garden in front of the facility where lines are marked to help keep them at least six feet away from Visitors who are outside in the same garden; a resident who is sitting in their wheelchair on a sidewalk where the resident is ten feet away from Visitors who are also on the sidewalk and behind an optional Plexiglas barrier that the facility has put up to help protect the resident; a resident who is seated in an interior courtyard that is open to the air where the Visitor is brought through the building lobby and then directed to remain at least six feet away during the outdoor visit; and a resident who is in the



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parking lot under a canopy tent that only has one wall for protection from the sun or other weather where the Visitor is also under the canopy at least six feet distant.

Outdoor Visits may only occur when all listed requirements are met. Those requirements are:

- i. The visit must occur outdoors. If the weather does not permit the Outdoor Visit to occur, the Residential Facility may postpone or cancel the visit or provide one of the other forms of visitation allowed by this Order in line with all listed requirements.
 - ii. In addition to symptom screening and asking other screening questions of all Visitors participating in an Outdoor Visit as required in Section 7 below, a Residential Facility must conduct temperature screening of all Visitors participating in an Outdoor Visit.
 - iii. If a Residential Facility uses a tent or other temporary structure in relation to an Outdoor Visit, the Residential Facility must follow the requirements of Health Officer Order No. C19-07h, including as that order is revised in the future. That order currently notes that operations under a tent, canopy, or other sun or weather shelter may occur only as long as no more than one side of the structure is closed, allowing sufficient outdoor air movement.
6. **COVID-19 Prerequisites and Outbreak Restrictions.** For Allowed Visitation, there are certain prerequisites that apply to different kinds of visits, and if there is a COVID-19 outbreak at the Residential Facility, there are certain visitation restrictions that apply until the outbreak is resolved. **Note that any Residential Facility that has multiple units or floors may contact the Department of Public Health Outbreak Management Group (“OMG”) for permission to treat each unit or floor as a separate Residential Facility for purposes of this Section 6.** OMG may be reached by phone by calling 415-554-2830, selecting Option 1, and then following the prompts for Senior Care Facilities.
- a. **Prerequisites.** For Facility Window Visits with an Open Window, Vehicle Visits with Open Windows, and Outdoor Visits:
 - i. No visit is allowed for any resident who has any of the COVID-19 Symptoms, is in isolation or quarantine related to COVID-19, or has a COVID-19 diagnosis; and
 - ii. There must be an absence of new COVID-19 cases or SARS-CoV-2 infections in the Residential Facility for the preceding 14 days (including residents and staff) and the Residential Facility must not be



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in the surveillance period for an active outbreak.

If these prerequisites are not met, then the types of visits listed in this subsection a. may not occur until the prerequisites are met.

As noted above, any Residential Facility that has multiple units or floors may contact OMG for permission to treat each unit or floor as a separate Residential Facility for purposes of this Section 6.

- b. **Visit-Related Outbreak Restrictions.** If there is reason to believe that the Residential Facility has had a new COVID-19 case or SARS-CoV-2 infection, the following restrictions apply:
- i. For Facility Window Visits with an Open Window, Vehicle Visits with Open Windows, and Outdoor Visits, Allowed Visitation must be postponed until the requirements of Section 6.a above are met. Residential Facilities with multiple units or floors may contact OMG to determine if the Residential Facility can safely cohort to allow visitation for residents in non-outbreak units.
 - ii. For Facility Window Visits with a Closed Window and Vehicle Visits with Closed Facility Windows, visitation may continue but each Visitor is prohibited from walking through any building of the Residential Facility.

Any Residential Facility that has questions about what constitutes an outbreak or other questions about this section may contact OMG.

7. **Necessary Visitation.** The term “Necessary Visitation” means a visit or contact that is based on urgent health, legal, or other issues that cannot wait and that needs to occur in addition to Allowed Visitation. If the needs and context of a particular request for Necessary Visitation justifies visitation in a manner other than Allowed Visitation, then the Residential Facility Administrator may arrange for Necessary Visitation of a resident. For purposes of this Order, the Residential Facility Administrator may act through a designee. The decision about whether the needs and context justify Necessary Visitation is left to the determination of the Residential Facility Administrator, who must make the decision based on this Order and the COVID-19 Guidance. Also, any Necessary Visitation allowed under this Section must be done subject to requirements of the COVID-19 Guidance and as otherwise deemed appropriate by the Residential Facility. All Visitors allowed under this Section 6 must comply with subsections v, vii, x, xii, xiii, and xvii of the General Visitation Requirements above.



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8. **Visitor Screening Procedures.** Each Residential Facility must use the following screening procedures for all Visitors. The Residential Facility must screen each Visitor on the day of the visit before the visit in a manner consistent with current DPH guidance (which takes into account guidance from CDPH and the United States Centers for Disease Control and Prevention (“CDC”)) regarding screening. At a minimum, the screening must address current or recent: actual or suspected COVID-19 diagnosis; actual or suspected SARS-CoV-2 infection; actual or suspected close contact with someone with the virus; and COVID-19 Symptoms (listed below in Section 18.e) consistent with SARS-CoV-2 infection, taking into account the age of the person being screened given different criteria for people under 18 years old. If a Visitor answers affirmatively to any screening question, they should, if appropriate, be referred for testing and directed to the DPH website with information about Health Officer directives on isolation and quarantine and explanatory material in multiple languages, available online at <https://www.sfdcp.org/covid19>. Screening may be done by phone, verbally in person ensuring at least six feet of physical distance, or using other methods such as text or email. It is up to the Residential Facility, at the discretion of the Administrator or designee, to decide which method(s) for screening work best for the context. A Residential Facility may use temperature checks consistent with DPH guidelines, and it must conduct temperature checks for Outdoor Visitation.
9. **Other COVID-19 Related Protocols.** The following sections list additional COVID-19 related protocols aimed at protecting residents, staff, and Visitors.
10. **Non-Essential Resident Movement is Discouraged.** Each Residential Facility must discourage Non-Essential Resident Movement, as defined in Section 18.c below, onto and off of Residential Facility Premises where feasible. Whenever a Residential Facility resident leaves the Residential Facility Premises, the resident is ordered to comply with Social Distancing Requirements listed in Section 8.o of the Stay-Safer-At-Home Order. At the time this Order was issued, the Social Distancing Requirements are:
 - a. Maintaining at least six-foot social distancing from individuals who are not part of the same Household;
 - b. Frequently washing hands with soap and water for at least 20 seconds, or using hand sanitizer that is recognized by the Centers for Disease Control and Prevention as effective in combatting COVID-19;
 - c. Covering coughs and sneezes with a tissue or fabric or, if not possible, into the sleeve or elbow (but not into hands);



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- d. Wearing a face covering when out in public, consistent with the orders or guidance of the Health Officer; and
- e. Avoiding all social interaction outside the Household when sick with a fever, cough, or other COVID-19 symptoms.

- 11. Face Coverings.** In general, all residents, staff, and Visitors must comply with Order No. C19-12c of the Health Officer, issued on July 22, 2020 (the “Face Covering Order”), including as that order is revised in the future. Residents, staff, and Visitors must also comply with any other requirements of the Residential Facility regarding wearing a mask or Face Covering or other Personal Protective Equipment (“PPE”). In addition to the exceptions to wearing a Face Covering listed in the Face Covering Order, a Face Covering is not required for any resident who, on account of dementia, grave mental illness, fear of/concern for suffocation, inability to remove a Face Covering, inability to call for help, physician order, or other circumstance should not wear a Face Covering. The Residential Facility must provide a Face Covering or other mask to any resident or Visitor on request. The Face Covering Order and this Order allow Residential Facilities to require and provide coverings that offer added protection such as an isolation mask or personal protective equipment (“PPE”), as appropriate in the circumstances.
- 12. Written COVID-19 Plan Requirement.** Each Residential Facility must update and continue to implement the written plan that was originally required by the prior version of this Order (the “COVID-19 Plan”). This Order does not require a Residential Facility to create any new documentation if it already has written policies or other written guidance that address the requirements for the COVID-19 Plan. The Residential Facility’s existing COVID-19 Plan may be used while a new version is prepared, and the COVID-19 Plan should be updated no later than September 15, 2020. The plan must comply with applicable guidance from the DPH regarding the screening of patients, personnel, and visitors for signs of COVID-19 or other illnesses. The COVID-19 Plan must also address other applicable COVID-19-related guidance, including steps to reduce the risk of COVID-19 transmission by authorized Visitors and Non-Essential Persons such as through hand washing, use of Face Coverings, imposition of the Social Distancing Requirements listed in Section 8.o of the Stay-Safe-At-Home Order, and limiting the duration of visits, as appropriate. Nothing in this Order prohibits a Residential Facility from taking steps more protective against transmission of COVID-19 than guidance provided by the CDC, CDPH, and DPH in its plan. Each Residential Facility must update its COVID-19 Plan when appropriate under new COVID-19 recommendations or requirements issued by DPH or as otherwise required by law. See the COVID-19 Guidance (discussed in Section 15 below) for more information about the COVID-19 Plan.



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13. **Staff Screening.** Each Residential Facility's COVID-19 Plan must also include a requirement that any employee or other staff member who is sick or does not pass the required screening must be immediately sent home and not return to work until they can do so safely under DPH guidance or authorized to return by a physician. If a Residential Facility is unable to immediately send home any such employee or staff member, the Residential Facility must (1) prevent that staff member from engaging in any resident care or contact and (2) immediately notify its respective licensing entity and seek guidance from that entity.
14. **Staff and Resident Testing.** On May 7, 2020, the Health Officer issued Order No. C19-13 regarding testing and infection control practices at congregate living facilities in the City, including each Residential Facility. Each Residential Facility is required to continue to comply with that order.
15. **COVID-19 Guidance.** Attached to this Order as **Appendix B** is written guidance to Residential Facilities ("COVID-19 Guidance") issued by the Health Officer. The Health Officer or designee may revise the COVID-19 Guidance in writing from time to time. Each Residential Facility must follow the COVID-19 Guidance.
16. **Non-Compliance.** If any Visitor or Non-Essential Person refuses to comply with this Order, then the Residential Facility may contact the San Francisco Police Department to request assistance in enforcing this Order. The Residential Facility shall take whatever steps are possible within the bounds of the law to protect residents from any such Visitor or person who refuses to comply with this Order. For example, a Residential Facility should contact facility security and ask the unauthorized visitor or person to comply with conditions of visitation imposed by the Residential Facility. Even if a Visitor or Non-Essential Person otherwise complies with the facility's visitation protocols as outlined in this paragraph, they are still in violation of this Order if their presence is not an Allowed Visitation or Necessary Visitation under this Order.
17. **No Restriction on First Responders, Others.** This Order does not restrict first responder access to Residential Facility Premises during an emergency. Further, this Order does not restrict state or federal officers, investigators, or medical or law enforcement personnel from carrying out their lawful duties on Residential Facility Premises. Persons other than first responders allowed access under this paragraph must comply with all conditions of visitation imposed by the Residential Facility at the time of entry or access to the Residential Facility Premises when feasible.
18. **Definitions:** For the purposes of this Order, the following initially capitalized terms have the meanings given below:
 - a. "Visitors" are people who come onsite to a Residential Facility to meet with a resident who are not staff of the facility. This term includes family members



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and loved ones of residents and those who have legal authority to make healthcare or other legal decisions for a resident. The Ombudsperson is an authorized visitor and is not included in this term, but the Ombudsperson must still follow all conditions of visitation imposed by the Residential Facility and should also try to avoid non-essential visits.

- b. “Non-Essential Personnel” are employees, contractors, or others who provide services onsite at a Residential Facility but who do not perform treatment, maintenance, support, or administrative tasks deemed essential to the healthcare mission of the Residential Facility. Refer to the COVID-19 Guidance for more information.
- c. “Non-Essential Resident Movement” means travel off or onto Residential Facility Premises by a resident other than for specific treatment or pressing legal purposes as described more fully in the COVID-19 Guidance.
- d. “Premises” includes without limitation the buildings, grounds, facilities, driveways, parking areas, and public spaces within the legal boundaries of each Residential Facility listed in Section 20 below.
- e. “COVID-19 Symptom” means a symptom consistent with SARS-CoV-2 infection. At the time this Order is issued, that list includes for individuals 18 years or older any of the following symptoms which is not explained by another condition or diagnosis: temperature greater than 100.4F (38.0C); cough; sore throat; shortness of breath; chills; headache; body aches; fatigue; loss of smell or taste; diarrhea; runny nose; nasal congestion; or other symptoms if there is associated clinical concern for COVID-19. For those younger than 18 years, “COVID-19 Symptom” means any of the following symptoms which is not explained by another condition or diagnosis: temperature greater than 100.4F (38.0C); sore throat; new uncontrolled cough that causes difficulty breathing (for youth with chronic allergic/asthmatic cough, a change in their cough from baseline); diarrhea, vomiting, or abdominal pain; new onset of severe headache, especially with a fever; or other symptoms if there is associated clinical concern for COVID-19.

19. Licensing Entity Notification. Each Residential Facility must within 12 hours of receipt of this Order notify its respective licensing entity (whether the California Department of Public Health or otherwise) of the existence of this Order regarding the Residential Facility. And as noted in Section 5 above, if a facility is unable to offer any form of Allowed Visitation (other than temporarily based on short-term staffing or other conditions), it must notify CDPH with an explanation of why it is unable to offer such visitation.



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20. List of Residential Facilities. This Order applies to each facility listed below (each a Residential Facility):

<u>Residential Facility Name</u>	<u>Street Address</u>	<u>ZIP</u>
Lawton Skilled Nursing & Rehabilitation Center	1575 7th Ave	94122
San Francisco Health Care	1477 Grove St	94117
Central Gardens Post Acute	1355 Ellis St	94115
San Francisco Post Acute	5767 Mission St	94112
Hayes Convalescent Hospital	1250 Hayes St	94117
Heritage on The Marina	3400 Laguna St	94123
The Avenues Transitional Care Center	2043 19th Ave	94116
Laurel Heights Community Care	2740 California St	94115
Pacific Heights Transitional Care Center	2707 Pine St	94115
Tunnell Skilled Nursing & Rehabilitation Center	1359 Pine St	94109
Sequoias San Francisco Convalescent Hospital	1400 Geary Blvd	94109
Sheffield Convalescent Hospital	1133 S Van Ness Ave	94110
St. Anne's Home	300 Lake St	94118
Victorian Post Acute	2121 Pine St	94115
California Pacific Medical Center - Davies Campus Hospital D/P SNF	601 Duboce Ave	94117
Jewish Home & Rehab Center D/P SNF	302 Silver Ave	94112
San Francisco Towers	1661 Pine St	94109
Kentfield San Francisco Hospital	450 Stanyan St, 6th Floor	94117
*Note: Laguna Honda Hospital and ZSFG D/P SNF are covered under a separate order		

21. Complaints. A Residential Facility resident or the resident's authorized lawful representative may contact a representative of the Residential Facility to seek clarification of any part of this Order by contacting the Administrator of the facility. If a resident or the resident's authorized lawful representative objects to the appropriateness of the limitation of access contained in this Order, the resident or lawful authorized representative must first raise their concern with the Residential Facility at issue. The Residential Facility is ordered to respond to the concern within 2 business days.

22. Continuing Severe Health and Safety Risk Posed by COVID-19. This Order is issued based on the need for continued protection of all Residential Facility Visitors, residents, and staff in the City. Due to the COVID-19 pandemic, there is a public



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health emergency throughout the City. Residents at Residential Facilities are among the most vulnerable and most likely to face serious outcomes, including death, from infection by SARS-CoV-2. There are currently only limited treatments and not approved vaccine for COVID-19, and there is a high risk of infection from asymptomatic and pre-symptomatic people who have the virus. Due to the length of time during which people with the virus can unknowingly infect others, it is imperative that all appropriate steps be taken to protect residents and staff who deal with residents from infection. Limiting visitors and requiring the other safety protections included in this Order will thereby slow virus transmission as much as possible in order to protect the most vulnerable, prevent infections and serious illness and death, and prevent the healthcare system from being overwhelmed.

23. Cases, Hospitalizations, and Deaths. As of September 1, 2020, there are 9,755 confirmed cases of COVID-19 in the City (up from 37 on March 16, 2020, the day before the first shelter-in-place order in the City went into effect) as well as at least 84 deaths (up from 1 death on March 17, 2020). This information, as well as information regarding hospitalizations and hospital capacity, is regularly updated on the San Francisco Department of Public Health's website at <https://data.sfgov.org/stories/s/fjki-2fab>.

24. Incorporation of State and Local Emergency Proclamations and State Health Orders.

- a. State and Local Emergency Proclamations. This Order is issued in accordance with, and incorporates by reference, the March 4, 2020 Proclamation of a State of Emergency issued by Governor Gavin Newsom, the March 12, 2020 Executive Order (Executive Order N-25-20) issued by Governor Gavin Newsom, the February 25, 2020 Proclamation by the Mayor Declaring the Existence of a Local Emergency issued by Mayor London Breed, as supplemented on March 11, 2020, the March 6, 2020 Declaration of Local Health Emergency Regarding Novel Coronavirus 2019 (COVID-19) issued by the Health Officer, and guidance issued by the California Department of Public Health, as each of them have been and may be supplemented.
- b. State Health Orders. This Order is also issued in light of the March 19, 2020 Order of the State Public Health Officer (the "State Shelter Order"), which set baseline statewide restrictions on non-residential Business activities, effective until further notice, the Governor's March 19, 2020 Executive Order N-33-20 directing California residents to follow the State Shelter Order, and the July 13, 2020 Order of the State Public Health Officer. The May 4, 2020 Executive Order issued by Governor Newsom and May 7, 2020 Order of the State Public Health Officer permit certain Businesses to reopen if a local health officer believes the conditions in that jurisdictions warrant it,



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but expressly acknowledge the authority of local health officers to establish and implement public health measures within their respective jurisdictions that are more restrictive than those implemented by the State Public Health Officer. Also on June 18, 2020, the State Department of Public Health issued guidance for the use of face coverings, requiring all people in the State to wear face coverings in certain high-risk situations, subject to limited exceptions.

25. **Effective Date.** This Order becomes effective at 9 a.m. on Saturday, September 5, 2020, and will continue to be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer. Effective as of 9 a.m. on September 5, 2020, this Order revises and replaces Health Officer Order No. C19-03, issued March 10, 2020.
26. **Reporting Violations.** Any person who believes this Order is being violated may contact 3-1-1 or go to www.sf.gov/report-health-order-violation to provide information about the alleged violation.
27. **Copies and Notice.** Each Residential Facility must promptly provide notice of this Order as follows: (1) by posting this Order on the Residential Facility website (if any); (2) by posting this Order at all entrances to the Residential Facility; (3) by providing a summary of this Order to each Residential Facility resident, indicating how the resident can obtain a full copy; (4) by providing a summary of this Order to any authorized decision maker for each Residential Facility resident if not the resident, including any conservator, indicating how the decision maker can obtain a full copy; (5) by providing this Order to the Residential Facility Ombudsperson (if any); and (6) by giving a copy to anyone who visits the Residential Facility or who contacts the Residential Facility seeking to visit.

The City must promptly provide copies of this Order as follows: (1) by posting on the Department of Public Health website at www.sfdph.org/healthorders; (2) by posting at City Hall, located at 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102; and (3) by providing to any member of the public requesting a copy.
28. **Severability.** If any provision of this Order or its application to any person or circumstance is held to be invalid, then the remainder of the Order, including the application of such part or provision to other people or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.
29. **Interpretation.** All provisions of this Order must be interpreted to effectuate the intent of this Order as described in Section 1 above. The summary at the beginning of this Order as well as the headings and subheadings of sections contained in this Order are for convenience only and may not be used to interpret this Order; in the



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event of any inconsistency between the summary, headings, or subheadings and the text of this Order, the text will control. Certain initially capitalized terms used in this Order have the meanings given them in this Order.

IT IS SO ORDERED:

A handwritten signature in blue ink that reads "Tomás Aragón".

Tomás J. Aragón, MD, DrPH,
Health Officer of the
City and County of San Francisco

Date: September 4, 2020

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Appendix A – Allowed Visitation Summary

Note: This document provides a summary for convenience of the requirements for Allowed Visitation under Section 5 of the Order. Each Residential Facility must comply with all requirements of the Order, regardless of what is listed below.

FACILITY VISITATION PREREQUISITES	
VISITATION TYPE	PREREQUISITES
Outdoor Visits	1.No visitation for residents with symptoms, in isolation or COVID+ and quarantine 2. Absence of any new COVID-19 cases in the facility for 14 days, either residents or staff, AND not currently in the surveillance period for an active outbreak
Facility Window Visits with an Open Window	
Vehicle Visits with Open Windows	
Facility Window Visit with a Closed Window / Vehicle Visits with Closed Facility Windows	Visitor(s) do not walk through the facility (Note that items 1. and 2. above do not apply for closed-window visits)

In the event of a new COVID-19 case at the facility, take the following actions until the following visitation prerequisites are met:	
VISITATION TYPE	ACTION
Outdoor Visits	Suspend/Postpone <i>For facilities with multiple units/floors, contact the DPH / OMG¹ to determine if the facility can safely cohort to allow visitation for residents in non-outbreak units.</i>
Facility Window Visits with an Open Window	
Vehicle Visits with Open Windows	
Facility Window Visit with a Closed Window / Vehicle Visits with Closed Facility Windows	Allow as long as the visitor(s) do not walk through the facility

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Appendix A – Allowed Visitation Summary

For **Outdoor Visits**, facilities must comply with the following parameters:

VISITATION TYPE	PARAMETERS
Outdoor Visits Definition: Visitor and Resident are both in an outdoor setting	<ul style="list-style-type: none"> <input type="checkbox"/> Visits must be supervised by facility staff at all times. <input type="checkbox"/> Visitation in outdoor settings only. <ul style="list-style-type: none"> ○ If weather does not permit, provide window or vehicle visits. <input type="checkbox"/> Visits must be scheduled in advance; facility can determine visiting hours. <input type="checkbox"/> Visitor(s) must wear masks. Residents must wear masks or other face coverings (as tolerated).² <input type="checkbox"/> 6-feet or more physical distancing (no physical touching between resident and visitor such as hugging, hand-shaking, etc.) It is the facility's responsibility to monitor and ensure compliance. It is required to put up signs and clearly mark areas to prevent visitor(s) groups from being too close to each other. <input type="checkbox"/> No more than 4 visitors from the same household. If visitors are from different households, the group should be limited to 2 visitors. Visitation group size can be determined based on facility space to allow for proper distancing and safety. <input type="checkbox"/> Visitation by children is left to the discretion of the facility. If children are allowed to visit, all visitors ages 2+ should wear a face covering, and children must be under supervision at all times. Screening should take into account age-specific symptoms. <input type="checkbox"/> Screen visitors for symptoms and related issues <u>and</u> conduct temperature check prior to visit. <input type="checkbox"/> Perform hand hygiene in accordance with CDC guidelines (provide supplies as needed). <input type="checkbox"/> Routinely clean and disinfect all frequently touched surfaces. <input type="checkbox"/> Sharing items, including food, drinks, or utensils, during any in-person visits is not permitted. If gifts are permitted under a separate policy, they must be approved by facility staff and processed by facility staff, providing an opportunity for disinfection and sanitization. Items or gifts may not be exchanged directly during the visit. <input type="checkbox"/> Visits must not exceed 1 hour and may be shorter if needed to accommodate residents while assuring compliance with visitation rules. <input type="checkbox"/> Whenever possible, visitation should take place without visitors walking through the facility or walking the shortest route through the facility.

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Appendix A – Allowed Visitation Summary

For Facility Window Visits, facilities must comply with the following parameters:

VISITATION TYPE	PARAMETERS
For All window visits:	<ul style="list-style-type: none"> <input type="checkbox"/> Visits must be supervised by facility staff at all times <input type="checkbox"/> Visits must be scheduled in advance; facility can determine visiting hours. <input type="checkbox"/> No more than 4 visitors from the same household. If visitors are from different households, the group should be limited to 2 visitors. Visitation group size can be determined based on facility space to allow for proper distancing and safety. <input type="checkbox"/> Screen visitors for symptoms and related issues prior to visit. <input type="checkbox"/> Facility should have a phone available to speak to resident at a safe distance. <input type="checkbox"/> If the resident must be taken to any of the designated areas, the resident must wear a mask (as tolerated)² for that journey. <input type="checkbox"/> Whenever possible, visitation should take place without visitor(s) walking through the facility or walking the shortest route through the facility. <input type="checkbox"/> Sharing items, including food, drinks, or utensils, during any in-person visits is not permitted. If gifts are permitted under a separate policy, they must be approved by facility staff and processed by facility staff, providing an opportunity for disinfection and sanitization. Items or gifts may not be exchanged directly during the visit. <input type="checkbox"/> Routinely clean and disinfect all frequently touched surfaces. <input type="checkbox"/> Visits must not exceed 1 hour and may be shorter if needed to accommodate residents while assuring compliance with visitation rules. <input type="checkbox"/> Visitation by children is left to the discretion of the facility. If children are allowed to visit, all visitors ages 2+ should wear a face covering, and children must be under supervision at all times. Screening should take into account age-specific symptoms.
Facility Window Visits with an Open Window Definition: Visitor and Resident are separated by and open window with the Resident on the Facility side of a window and Visitor(s) outside on the other side	<ul style="list-style-type: none"> <input type="checkbox"/> Resident must stay at least 3 feet back from the window and wear a mask (as tolerated).² <input type="checkbox"/> Visitor(s) must stay at least 3 feet back from the window and wear a mask. <input type="checkbox"/> Facility should ensure that visitors seeing different residents can also keep at least 6 feet apart (limit crowding) and farther if needed so people can hear without shouting. It is required to put up signs and clearly mark areas to prevent visitor(s) groups from being too close to each other.
Facility Window Visit with a Closed Window Definition: Visitor and Resident are separated by a Window. At all times, the facility window must remain closed so no air flow is exchanged	<ul style="list-style-type: none"> <input type="checkbox"/> If the visitor(s) is in an area where other people will be passing, the visitor(s) must wear masks.

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Appendix A – Allowed Visitation Summary

For **Vehicle Visits**, facilities must comply with the following parameters:

VISITATION TYPE	PARAMETERS
For All Vehicle Visits:	<ul style="list-style-type: none"> <input type="checkbox"/> Visits to be supervised by facility staff at all times. <input type="checkbox"/> Visits must be scheduled in advance; facility can determine visiting hours. <input type="checkbox"/> Screen visitors for symptoms and related issues prior to visit. <input type="checkbox"/> Facility should have a phone available to speak to resident at a safe distance. <input type="checkbox"/> If the resident must be taken to any of the designated areas, the resident must wear a mask (as tolerated)* for that journey. <input type="checkbox"/> Sharing items, including food, drinks, or utensils, during any in-person visits is not permitted. If gifts are permitted under a separate policy, they must be approved by facility staff and processed by facility staff, providing an opportunity for disinfection and sanitization. Items or gifts may not be exchanged directly during the visit. <input type="checkbox"/> Routinely clean and disinfect all frequently touched surfaces. <input type="checkbox"/> Visits must not exceed 1 hour and may be shorter if needed to accommodate residents while assuring compliance with visitation rules.
Vehicle Visits with Open Windows Definition: Visitor(s), in a vehicle, and Resident are separated by at least 6 feet of distance where the Resident is in either an outdoor space or in the Facility behind an open window	<ul style="list-style-type: none"> <input type="checkbox"/> Resident should stay at least 6 feet back from the vehicle window and wear a mask (as tolerated).² <input type="checkbox"/> Visitor(s) must wear a mask. <input type="checkbox"/> If there is a pull-in area for vehicle visits, the visits must be scheduled to prevent crowding and keep at least 6 feet between residents. <input type="checkbox"/> To reduce air flow to the resident, if possible, keep vehicle's window closest to the resident closed.
Vehicle Visits with Closed Facility Windows Definition: Visitor(s), in a vehicle, and Resident are separated by a Closed Facility Window. At all times, the facility window must remain closed so no air flow is exchanged.	<ul style="list-style-type: none"> <input type="checkbox"/> If the visitor(s) is in an area where other people will be passing, the visitor(s) must wear masks in the vehicle.

¹ Contact DPH Outbreak Management Group (OMG) with any specific questions for their sites and guidance. Call 415-554-2830, select Option 1, and then follow the prompts for Senior Care Facilities. See Section 6 of the Order for details.

² Requirements for masks or face coverings are relaxed for residents as follows and for related/similar issues: a diagnosis of dementia or grave mental illness; fear of/concern for suffocation, inability to remove or call for help OR ordered by physician. See Section 11 of the Order for details.



**APPENDIX B: WRITTEN GUIDANCE REGARDING COMPLIANCE
WITH HEALTH OFFICER ORDER No. C19-03b**
DATE ORDER ISSUED: September 4, 2020

This information (the “COVID-19 Guidance”) is meant to help each Residential Facility when implementing the Order to which it is attached. This document uses the terms defined in the Order.

1. For purposes of the Order, the term “Administrator” means the administrator of a Residential Facility or the administrator’s designee.
2. The Order does not prohibit a Residential Facility from being more restrictive in its operations and practices than is outlined in the Order. The Order also does not require allowing visitation when not otherwise required by applicable laws or regulations.
3. Guidance regarding Section 12 (the COVID-19 Plan): The Order requires the Residential Facility to create a COVID-19 Plan that addresses issues including: 1) screening of residents, staff, and Visitors for COVID-19 Symptoms or other illness; 2) conditions of visitation imposed by the Residential Facility at the time of entry or access to the Premises for authorized visitors that reduce the risk of infection, such as thorough hand washing, appropriate use of Personal Protective Equipment (PPE), maintaining at least six feet distance from other people, and limiting the duration of visits, as appropriate; 3) sending sick employees home immediately; 4) notifying DPH and other regulators of any positive SARS-CoV-2 result for a resident or staff member, including as required by law; and 5) other CDC or CDPH requirements. Note that the Order does not require a Residential Facility to create any new documentation if it already has policies or other guidance that address the requirements for the COVID-19 Plan.

The COVID-19 Plan should also address how the facility can reduce the risk of unnecessary exposure as outlined in the San Francisco Department of Public Health Social Distancing Protocol, attached as Appendix A to Health Officer Order No. C19-07h (or as that order is revised in the future). For example, the facility should avoid large in-person gatherings of residents or staff, instead holding smaller gatherings that still meet the facility’s mission and needs (*e.g.*, substituting unit-based activities for a facility-wide bingo event). Similarly, postponing large staff meetings or having meetings occur by phone can help when feasible.

Additionally, there may be areas that warrant limitations that are not normally in place. A Residential Facility may have a cafeteria or other concession that is normally available to residents, essential employees, other employees (such as others who share the building but are not associated with the healthcare mission of the facility), and Visitors. While this Order is in effect, the Residential Facility should consider whether a restriction on such use makes sense. One option might be to limit cafeteria visits to residents and essential staff and temporarily block other employees and Visitors from that area.



**WRITTEN GUIDANCE REGARDING COMPLIANCE WITH
HEALTH OFFICER ORDER No. C19-03b**

If the facility had plans to have vendors come onsite for meetings or to show sample products, those meetings should be conducted via remote communication, occur at another site that does not include a vulnerable population, or be postponed until after this emergency situation if possible.

4. Guidance regarding Section 4 (efforts to facilitate contact that is not in-person): The Order requires the Residential Facility to make reasonable efforts to facilitate contact that is not in person between a Visitor or Non-Essential Personnel and a resident. Such efforts include using technology to facilitate a remote connection with the resident when possible and would include telephone calls, telephone conferences involving multiple people, and video conferences using appropriate technology. Efforts are not reasonable if they interfere with the Residential Facility's healthcare mission or if they are not available or are cost prohibitive. The Residential Facility is encouraged to be creative in trying to facilitate contact that is not in-person so long as it complies with its other legal and regulatory obligations.
5. Guidance regarding Section 7 (Necessary Visitation): The term Necessary Visitation refers to a visit or contact that is based on urgent health, legal, or other issues that cannot wait until later. Nothing in the Order limits the standard healthcare that the Residential Facility provides to a resident. When medical care is appropriate or required, it is by definition permitted under the Order. Necessary Visitation refers to other types of visits or contact that are time-sensitive or critical. For example, a resident may be in the end stages of life. In that instance, family or loved ones should be allowed to be with the resident unless doing so would interfere with the Residential Facility's mission in light of the current emergency, such as during a serious outbreak of cases. Another example would be a resident who is updating their will or other legal papers and an in-person meeting with the lawyer or family members or a notary is required, again unless doing so would interfere with the Residential Facility's mission. But, a meeting with a lawyer to discuss future changes or other, non-urgent issues should generally be postponed or conducted via telephone or other means.

Anyone who is legally authorized to make decisions for the resident, whether by operation of a durable power of attorney or public or private conservatorship, must be given special consideration, especially if they need to meet in person with the resident to fulfill their role. This distinction is in place because decisions regarding care when there is a surrogate decision maker should not be delayed when in-person contact is needed, whereas visits by other family or loved ones are important but may not be time-sensitive. But such authorized decision-makers should be encouraged to use alternative methods of contacting the resident when possible in order to avoid exposing the resident and others.

Also, Necessary Visitation should not be granted for routine visits by decision makers, family, or loved ones, even if the resident very much looks forward to the visit or the visitor has a strong desire for the visit. Such routine visits put all residents at risk at this



**WRITTEN GUIDANCE REGARDING COMPLIANCE WITH
HEALTH OFFICER ORDER No. C19-03b**

time and may only occur as Allowed Visitation. But if a family member or loved one plays an essential role in providing care to a resident, without which the resident will suffer medical or clinical harm, Necessary Visitation may be appropriate.

There may be other unique situations that justify a Necessary Visitation based on the context. And as the situation evolves, the Residential Facility may need to restrict Necessary Visitation. This Order is intended to give the Administrator flexibility in making that determination so long as the decision is in line with the Order and this COVID-19 Guidance. The Administrator should not authorize Necessary Visitation for all or a majority of residents as that would likely reflect a violation of the intent of the Order to protect all residents from the risks of non-essential exposure to COVID-19.

All visits allowed as Necessary Visitation must occur subject to all conditions of visitation imposed by the Residential Facility at the time of entry or access to the Premises.

6. Guidance regarding Sections 3 and 18.b (Non-Essential Personnel): The Order defines Non-Essential Personnel as employees, contractors, or others who provide services onsite at a Residential Facility but who do not perform treatment, maintenance, support, or administrative tasks deemed essential to the healthcare mission of the Residential Facility. This term also includes employees of the Residential Facility or its vendors (and their employees) who are not needed in the short term for the facility to perform its healthcare mission. For example, a vendor that makes deliveries of large bottled water refill jugs is likely not essential. However, the facility should work to see if there are ways to permit delivery, such as on a loading dock, which would eliminate the need in the short term for someone to make visits all across the facility. This Order grants the Administrator authority to make judgment calls about how best to ensure the facility is able to operate during this emergency situation.
7. Guidance regarding Section 18.c (Non-Essential Resident Movement): The Order defines Non-Essential Resident Movement as travel off or onto Residential Facility Premises by a resident other than for specific treatment or pressing legal purposes. This is contrasted with situations when a resident leaves the facility for health-related purposes or as required by law, such as for a meeting or service mandated by a court. The goal of the Order is to encourage residents to limit Non-Essential Resident Movement.

* * *

Dated: September 4, 2020



FOR IMMEDIATE RELEASE:

Tuesday, February 25, 2020

Contact: Mayor's Office of Communications, 415-554-6131

***** PRESS RELEASE *****

**CITY OF SAN FRANCISCO MOVES PROACTIVELY TO
PREPARE FOR POSSIBLE NOVEL CORONAVIRUS ACTIVITY
IN THE COMMUNITY**

Although there are still zero confirmed cases of novel coronavirus in San Francisco residents, the global situation is changing rapidly. Mayor Breed, Department of Public Health, and Department of Emergency Management take action to protect community health.

San Francisco, CA — Mayor London N. Breed today made an emergency declaration to strengthen the City's preparedness to respond to COVID-19 (novel coronavirus). She was joined by Health Director Dr. Grant Colfax and Executive Director of the Department of Emergency Management Mary Ellen Carroll in this action to surge resources and capabilities, and ensure San Francisco is as ready as possible in the event that the new virus comes to our community.

"Although there are still zero confirmed cases in San Francisco residents, the global picture is changing rapidly, and we need to step-up preparedness," said Mayor Breed. "We see the virus spreading in new parts of the world every day, and we are taking the necessary steps to protect San Franciscans from harm."

"San Francisco is united and prepared to address any possible spread of the novel coronavirus to San Francisco," said Board of Supervisors President Norman Yee. "We have one of the most renowned medical systems of care here and we have a long and proven track record of being able to protect, treat, and care for our residents."

The declaration of a local emergency is a legal document that will mobilize City resources, accelerate emergency planning, streamline staffing, coordinate agencies across the city, allow for future reimbursement by the state and federal governments and raise awareness throughout San Francisco about how everyone can prepare in the event that COVID-19 (novel coronavirus) appears in our community. Santa Clara and San Diego counties have issued similar declarations to bolster their preparedness.

The San Francisco declaration is effective immediately for seven days, and it will be voted on by the Board of Supervisors on Tuesday, March 3rd.

San Francisco has been working diligently to prevent COVID-19, and to implement containment efforts if there are San Franciscans who test positive for the new virus. The Department of Public Health activated its Departmental Operations Center on January 21, marshalling internal resources and leadership to focus on the clinical, epidemiological, and community response. The Health Department has worked with local hospitals to identify isolation rooms, and health care

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clinics are screening patients for travel history and symptoms. The City opened its Emergency Operations Center (EOC) on January 27, bringing the strength of the entire San Francisco response system to focus on this developing situation.

San Francisco is further expanding the EOC because of today's emergency declaration. In addition to the establishment of the Community Branch, the EOC will expand the Planning Section, Logistics Section and the Health and Human Services Branch. As a result, the City can accelerate the development of emergency plans should COVID-19 emerge in San Francisco.

"This is a global outbreak that is entering a new phase, and we must be prepared," said Dr. Grant Colfax, Director of Health. "We have been working with elected officials, other city agencies, the public and private health care system, schools, businesses and community organizations to ensure that we as a city are well informed and positioned to respond and do our best to mitigate the impact of the new virus, if it emerges in San Francisco. Today's declaration reinforces that this is not business as usual. We must be confident that our local readiness efforts are as robust as possible to protect the health of San Francisco residents. This declaration gives us more tools to be even more prepared."

"Given the high volume of travel between San Francisco and mainland China, there is a growing likelihood that we will see cases of COVID-19 eventually," said Dr. Tomas Aragon, San Francisco Health Officer. "Most people who are in self-quarantine at home are eager to cooperate and understand the importance of these actions. We are prioritizing children, people who live in congregate settings and vulnerable populations as we plan to reduce the potential for harm from the virus in the community. We have been working closely with the Chinese community, who are so impacted by this situation, and also at risk for stigma and discrimination."

"Planning, responding and recovering from any emergency requires a whole community approach," said Mary Ellen Carroll, Executive Director, San Francisco Department of Emergency Management. "San Francisco is establishing a Community Branch in our Emergency Operations Center comprised of community, faith, business and education partners. As a result, community and government partners can work together to identify and coordinate our response to emerging issues."

Globally, there have been more than 80,000 cases and 2,700 deaths since the disease first emerged in Wuhan, China in December 2019. While the majority of cases and deaths have taken place in China, the epicenter of the illness, the virus has now spread to about 30 countries, including the United States. Currently, there are 53 confirmed cases in this country, including 10 in California. While San Francisco has no confirmed cases in city residents, three COVID-19 patients from other counties have been treated in San Francisco hospitals. Given the global patterns that are being seen, there is a growing likelihood of cases in San Francisco.

The federal government has worked to contain the virus by imposing strict travel restrictions for people returning from mainland China. As of February, foreign nationals who have traveled to China within the past 14 days are not permitted entry into the U.S., unless they are immediate

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family of U.S. citizens or permanent residents. All U.S. citizens returning from Hubei Province, China are subject to a mandatory 14-day quarantine by the federal government. U.S. citizens returning from other parts of mainland China who have symptoms (fever, cough, shortness of breath) are subject to a mandatory quarantine. Those returning from mainland China without symptoms are directed by the Centers for Disease Control and Prevention (CDC) to self-quarantine at home with monitoring by their local health department. In San Francisco, the Health Department is monitoring hundreds of returning travelers. Risk for the virus is based on travel history and contacts, not race, ethnicity, or culture.

If we experience a cluster of COVID-19 cases or a local outbreak, every sector of San Francisco will have a role to play in ensuring the community's health. Today's declaration provides a structure to support expanded efforts. For example, schools should be planning how they would manage potential closures, and businesses ought to look at their work-from-home policies and sick leave in order to support people who may need to self-quarantine.

The best way for all San Franciscans to reduce their risk of getting sick, as with seasonal colds or the flu, will still apply to prevent COVID-19 if it begins to circulate in the community:

- Wash hands with soap and water for at least 20 seconds;
- Cover your cough or sneeze;
- Stay home if you are sick;
- Get your flu shot to protect against flu or symptoms similar to COVID-19; and
- If you have recently returned from a country with ongoing COVID-19 infections, monitor your health and follow the instructions of public health officials.

You can also prepare for the possible disruption caused by an outbreak:

- Make sure you have a supply of all essential medications for your family;
- Make a child care plan if you or a care giver are sick;
- Make arrangements about how your family will manage a school closure; and
- Make a plan for how you can care for a sick family member without getting sick yourself.

Stay up to date on this rapidly evolving situation by visiting www.sfdph.org or www.sf72.org and the CDC's website: <https://www.cdc.gov/coronavirus/2019-ncov>.

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FOR IMMEDIATE RELEASE:

Thursday, March 12, 2020

Contact: San Francisco Joint Information Center, 415-558-2712, dempres@sfgov.org

***** PRESS RELEASE *****

**SAN FRANCISCO ISSUES RULES LIMITING VISITORS TO
LONG-TERM CARE FACILITIES TO SLOW SPREAD OF
COVID-19**

*The City and County of San Francisco issued a Public Health Order affecting rules at all listed
residential facilities within city limits*

Action protects vulnerable population of residents from exposure

San Francisco, CA — Mayor London N. Breed today announced that the Health Officer of the City and County of San Francisco has issued a [Public Health Order](#) prohibiting non-essential visitors from entering long-term care facilities within San Francisco city limits. This measure is necessary to slow the spread of novel coronavirus in the community. It builds on the City's public health recommendations and a prior [Public Health Order](#) issued on March 7th regarding City-owned and operated long-term care facilities at Laguna Honda and Zuckerberg San Francisco General hospitals.

Because of their age or medical conditions, residents of long-term care facilities are at elevated risk of getting seriously ill, or even dying, if they get COVID-19, the disease caused by the novel coronavirus. Since the virus is circulating in the community, visitors to those facilities may have it and have mild symptoms or be asymptomatic and, therefore, expose vulnerable residents to infection. This new Public Health Order requires 18 private long-term care facilities in the City to exclude non-essential visitors from entry or access. Laguna Honda Hospital and Zuckerberg San Francisco General Hospital's skilled nursing unit began restricting visitors as of March 7th.

"This Order is supported by our best scientific evidence and follows best practices for limiting the spread of the novel coronavirus," said Mayor Breed. "We're following the recommendations of public health officials to slow the spread of COVID-19 in our community and are taking steps to protect those who are most vulnerable to the virus."

"We know the hardship that this temporary limit on visitors will have on seniors and on their families and loved ones," said Board President Norman Yee. "We strongly encourage using other means of communication to stay in contact, such as phone calls, video calls, e-mail. As soon as our public health experts let us know that it is safe to do so, these protocols will be adjusted appropriately. Thank you to everyone who is keeping the health and safety of our most vulnerable populations in mind."

"We know that this virus has the greatest likelihood of harming elderly people and those with underlying health conditions and chronic illnesses," said Dr. Grant Colfax, San Francisco

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Director of Health. “Looking at the patterns of illness in California and Washington State, we have chosen to move aggressively to protect residents of long-term care facilities in our community by restricting visitors who could unwittingly bring exposure to the virus into the building with them.”

In addition to prohibiting non-essential visitors, the Order requires long-term care facilities to create a COVID-19 plan that addresses the screening of residents, staff and visitors for symptoms of COVID-19 or other illness. The Order also includes conditions for authorized visitors to reduce the risk of infection, such as hand washing, appropriate use of Personal Protective Equipment (PPE), maintaining at least six feet distance from other people, and limiting the duration of visits, sending sick employees home immediately and notifying DPH of any positive COVID-19 result for a resident or staff member.

Public Health Orders and recommendations from the San Francisco Department of Public Health can be found at www.sfdph.org/dph/alerts/coronavirus.asp along with up-to-date on coronavirus news and information. You can also call 311 and sign up for the City’s alert service for official updates: text COVID19SF to 888-777.

Remember, these are the best ways for all San Franciscans to reduce their risk of getting sick, and preventing COVID-19:

- Wash hands with soap and water for at least 20 seconds.
- Cover your cough or sneeze.
- Stay home if you are sick.
- Avoid touching your face.
- Try alternatives to shaking hands, like a wave.
- If you have recently returned from a country, state or region with ongoing COVID-19 infections, monitor your health and follow the instructions of public health officials.
- There is no recommendation to wear masks at this time to prevent yourself from getting sick.

You can also prepare for the possible disruption caused by an outbreak:

- Prepare to work from home if that is possible for your job, and your employer.
- Make sure you have a supply of all essential medications for your family.
- Prepare a child care plan if you or a caregiver are sick.
- Make arrangements about how your family will manage a school closure.
- Plan for how you can care for a sick family member without getting sick yourself.
- Take care of each other and check in by phone with friends, family and neighbors that are vulnerable to serious illness or death if they get COVID-19.
- Keep common spaces clean to help maintain a healthy environment for you and others. Frequently touched surfaces should be cleaned regularly with disinfecting sprays, wipes or common household cleaning products.

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FOR IMMEDIATE RELEASE:

Tuesday, March 17, 2020

Contact: San Francisco Joint Information Center, 415-558-2712, dempres@sfgov.org

***** PRESS RELEASE *****

**MAYOR LONDON BREED ANNOUNCES EXPEDITED HIRING
OF HEALTH CARE PROFESSIONALS TO SUPPORT COVID-19
RESPONSE**

Under the new policy, the Department of Public Health can hire qualified, licensed nurses more quickly. DPH will host an invite-only hiring fair at Zuckerberg San Francisco General Hospital this weekend.

San Francisco, CA — Mayor London N. Breed today announced a Declaration to expedite City hiring of employees that are necessary to respond to the COVID-19 local emergency. Mayor Breed's Declaration temporarily waives provisions of Civil Service Commission Rules and provisions of the Charter regarding hiring, in order to ensure continuity of City operations in response to COVID-19. Critical City employees include nurses and other public health professionals.

This Declaration allows the Department of Public Health (DPH) to hire nurses and other front line health care workers more quickly, which will help the health care system in San Francisco respond to the COVID-19 pandemic. Typically, the hiring process for nurses takes six months or more. This change allows the City to hire qualified, licensed nurses "on the spot," rather than through the normal months-long process.

"Our health workers are on the front lines of this public health emergency and as the situation evolves, we need to make sure we have enough nurses available to care for people who need medical care," said Mayor Breed. "We need to move swiftly to respond to the coronavirus, and one of the most important parts of that response is making sure we have enough nurses in our hospitals. I want to thank all the health care workers that have been working night and day to support our community, and we hope this new policy can relieve some of the pressure on our health care system."

"I strongly support Mayor Breed's Declaration to expedite the hiring of front line health care workers immediately," said Supervisor Catherine Stefani. "Our nurses and health care professionals are the brave people who run toward danger when the rest of us are in crisis. Earlier this year, I held a hearing on hiring critical positions to make sure that San Francisco had the capacity to ensure the safety of our residents. As we confront this pandemic, it is more important than ever that our public health and safety infrastructure is up to the task."

"Being fully staffed and prepared with critical front line nurses is one of the most critical aspects of dealing with this impending health crisis," said Supervisor Ahsha Safai. "I'm proud to have worked with our nurses and their union, SEIU 1021 and our Department of Human Resources to

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come up with an aggressive hiring plan in this time of need. We can't wait one more day to hire nurses."

Mayor Breed issued this Declaration under the powers of the Local Emergency she declared on February 25th. The Declaration will be in effect for 30 days, and can be extended by the Mayor for another 30 days through an Executive Order. If the Local Emergency declared by the Mayor is rescinded at any point, the Declaration will cease to be in effect.

DPH will host an invitation-only nurse hiring fair at Zuckerberg San Francisco General Hospital this weekend, and will continue hosting hiring fairs until all vacancies are filled. The hiring fair is not open to the public. Under the most recent Public Health Order, prospective DPH employees will be allowed to leave their homes to attend the hiring fair because hiring more health care workers is considered an essential service. Fair attendance will be staggered to allow for social distancing.

DPH Human Resources has begun contacting candidates who have already applied and are qualified to see if they are still interested. If they are interested and pass the pre-employment screen, they will be issued a conditional offer letter of employment and invited to the fair to complete the onboarding process. At the hiring fair, background checks, including fingerprints and medical screenings, will be conducted. Qualified candidates may be able to start work the following week, pending clearances.

This expedited hiring builds upon human resources improvements already underway at DPH and speeds up the Department's plan to hire nurses in 45 days or fewer.

"Supporting and protecting our health care workforce is a top priority," said Dr. Grant Colfax, Director of Health. "They are courageously on the front lines, keeping our community healthy and safe every day. Today's action will allow us to bring on more nurses quickly, to be prepared to meet the demands of the coronavirus response, and to augment the workforce that is currently here and working round the clock. We must provide our nurses, and all health care workers, with the support, protection and supplies they need to respond to COVID-19."

"The role that nursing plays in keeping our communities healthy and safe is invaluable," said Micki Callahan, Human Resources Director. "This expedited hiring plan focuses on hiring competent, qualified, and compassionate Registered Nurses quickly to provide relief to a healthcare system that is in high demand as we navigate the impacts of the Coronavirus on our City."

COVID-19 has put significant pressure on healthcare systems around the world. San Francisco is moving proactively to hire more healthcare workers so that the City can best respond to COVID-19.

The Health Officer of the City and County of San Francisco has issued a [Public Health Order](#) requiring that residents stay in their homes, with few exceptions, through April 7, 2020. This order is designed to protect community health by slowing the spread of the virus that causes

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COVID-19. These are systemic as well as individual changes that will make a difference in people's lives.

Even people engaged in the essential activities described in the order must practice the following to avoid getting sick and to prevent the spread of COVID-19.

- Stay at least 6 feet away from other people when on essential outings such as grocery shopping, riding public transit to an essential job, or walking your dog.
- Wash your hands with soap and water for at least 20 seconds.
- Cover your cough or sneeze.
- Avoid touching your face.
- Do not shake hands.
- Keep common spaces clean to help maintain a healthy environment for you and others. Frequently touched surfaces should be cleaned regularly with disinfecting sprays, wipes or common household cleaning products.

Stay home altogether if you are sick, 60+ years of age, and/or have certain underlying health conditions. Make sure you have a supply of essential medications for your family. Plan for how you can care for a sick family member without getting sick yourself. Take care of each other and check in by phone with friends, family and neighbors that are vulnerable to serious illness or death if they get COVID-19.

There is no recommendation to wear masks at this time to prevent yourself from getting sick. If you are sick, first call your health care provider; if you must leave your home to seek medical treatment, you may wear a mask or similar personal protective equipment (PPE) to prevent spreading illness to others.

Find the answers to frequently asked questions about the order at [SF.gov/coronavirus](https://sf.gov/coronavirus).

Other Public Health Orders and recommendations from DPH can be found at sfdph.org/dph/alerts/coronavirus.asp. Mayoral declarations regarding COVID-19 can be found at sfmayor.org/mayoral-declarations-regarding-covid-19.

For more information, you can also call 311. For official updates, sign up for the City's alert service: text COVID19SF to 888-777.

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City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

FOR IMMEDIATE RELEASE

March 25, 2020

Contact: San Francisco Joint Information Center

415-558-2712, dempres@sfgov.org

Increased protections ordered for Laguna Honda Residents and Staff

Department of Public Health continues to prioritize vulnerable populations in coronavirus response

Five staff have tested positive for COVID-19, no cases among residents at this time

The Health Officer of the City and County of San Francisco today ordered a protective quarantine for the campus of Laguna Honda Hospital and Rehabilitation Center. The order, which prohibits residents from leaving campus, strengthens previous protections for residents and staff. The order takes effect today at 5 p.m. and expires April 7.

From the beginning of the global outbreak, efforts by the City & County of San Francisco to prepare for the coronavirus have prioritized the most vulnerable members of the city's population – people 60 and over and those with certain underlying health conditions. The residents of Laguna Honda Hospital and Rehabilitation Center (LHH) are in the most vulnerable groups.

Laguna Honda Hospital remains a top priority in the city's response. Among the [first orders](#) issued by the city's Health Officer was one purposefully and carefully designed to protect the institution, its residents and staff. Visitor access was restricted there on March 6, immediately after the first two cases in the city were identified the day before (3/5), and on the same day a [local health emergency](#) was declared. The order restricting visitors was extended on March 12 to last until April 21.

Laguna Honda leadership has worked actively and diligently to train staff on COVID-19 procedures, including the use of personal protective equipment (PPE), thorough cleaning of common spaces and resident rooms, and other prevention techniques.

Even before the Health Officer orders, Laguna Honda implemented the following measures to protect and prepare for the possibility of COVID-19 circulating at Laguna Honda Hospital:

SFDPH | 101 Grove Street, Room 308, San Francisco, CA 94102



City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

- Restrict access to all non-essential personnel from entering the facility, including community groups, contractors and volunteers providing services that are not critical to resident care.
- Initiate a screening process for visitors, staff and residents.
- Improve infection control signage and provide specific COVID-19 education to ensure everyone at LHH is adhering to proper infection control standards regarding hand hygiene and the proper use of Personal Protective Equipment (PPE).

Last week, we learned of the first possible cases of COVID-19 among members of the Laguna Honda community. Currently, there are five members of the LHH staff with confirmed cases. Four of these five staff members worked in two units at the hospital, and one did not work in patient care and had no patient contact. Fifteen patients have been tested, and so far there are no positive cases. However, that could change as the contact investigations and testing continue and the virus continues to spread in the Bay Area.

We do not know whether the staff acquired COVID-19 at work, or in the community. We do know that COVID-19 is easily transmitted, especially in group settings, such as long-term care facilities and cruise ships.

At this time, 120 residents are quarantined in the South 4 and South 5 neighborhoods, where a total of four staff have tested positive for COVID-19. Monitoring of patients on both affected units has increased. Staff is also undergoing increased screening.

All staff are screened for symptoms of illness each time they start their shift.

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FOR IMMEDIATE RELEASE:

Wednesday, March 25, 2020

Contact: San Francisco Joint Information Center, 415-558-2712, dempres@sfgov.org

***** PRESS RELEASE *****

**MAYOR LONDON BREED AND SAN FRANCISCO HOSPITALS
UNIFIED IN PREPARATION FOR SURGE OF COVID-19
PATIENTS**

Mayor Breed and health officials call on federal and state support to meet need for ventilators and hospital beds and call on public to continue stay at home efforts to help slow the spread of COVID-19

San Francisco, CA — Mayor London N. Breed, Director of Health Dr. Grant Colfax, Dr. David Klein, President and CEO of Saint Francis Memorial Hospital and Chair of the San Francisco Section-Hospital Council Northern & Central California, and Mark R. Laret, President and Chief Executive Officer of UCSF Health, today joined with all San Francisco hospitals to present their unified COVID-19 surge plan and call for more federal and state support.

For weeks, San Francisco hospitals and public health officials have been working on a unified plan to relieve pressure on local hospitals and increase capacity during an expected surge in COVID-19 patients who will require hospitalization. While current efforts are sufficient to meet the needs of an initial surge of patients, the hospital system needs more support to meet a larger surge.

By analyzing the needs being called for in New York, where the hospital system is undergoing an unprecedented surge in COVID-19 patients, San Francisco estimates it could need as many as 1,500 more ventilators and 5,000 more hospital beds to meet a similar surge. Today, Mayor Breed officially requested more assistance from both the state and federal government to help local efforts to expand capacity in preparation for this surge. She also joined public health officials in calling on the public to continue to follow public health orders to stay home and limit outings to essential needs.

“From the beginning of the global coronavirus outbreak, we have been getting as prepared as possible in San Francisco,” said Mayor Breed. “Our entire hospital system has been doing the work to create a plan and to ramp up our resources, but we cannot do this alone. We need support from the state and from the federal government to have the tools we need, whether it’s more ventilators, more equipment, more hospital beds, or more medical staff to help operate these facilities, so that we can be ready for a surge that could overwhelm our system. We also need the public to do its part by staying home and helping us slow the spread of this virus. The more time we have to prepare, the better chance we have to meet the challenges posed by COVID-19. We all have a role and responsibility to slow the spread.”

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SAN FRANCISCO, CALIFORNIA 94102-4681
TELEPHONE: (415) 554-6141



Currently, San Francisco has about 1,300 staffed regular medical-surgical beds and 200 staffed intensive care unit (ICU) beds in its hospitals. These beds have appropriate staffing and supplies today to care for an initial surge of patients with COVID-19. The Department of Public Health and San Francisco's hospitals, acting together as part of the Hospital Council of Northern and Central California, are preparing to care for more patients than we could handle with our current capacity.

The call for more beds could include providing resources, logistical support, and funding to open pop-up hospitals, outfit existing spaces as medical facilities, and expand capacity at existing hospitals. As part of the hospitals' collaboration, Dignity Health's Saint Francis Memorial Hospital will open a new floor dedicated to COVID-19 patients in early April to add another 48 beds. San Francisco is also exploring expanding capacity by 150 beds.

While it's not possible to predict the exact timing or size of the surge, its severity will be diminished if San Franciscans strictly adhere to the Public Health Order to stay home. This is the single most important action that individuals can take to save lives, along with frequent hand washing.

"We know the virus is here. We are going to be dealing with its impact for some time, and we are doing everything we can to reduce its harms in our community," said Dr. Colfax. "In San Francisco, our approach is based on science, data and facts. We are attacking the problem of a hospital surge from two directions. The first is to decompress the hospital and health care system as much as possible now, to make room for new patients. The second is to have a strong, citywide plan for all hospitals that includes the right beds, staffing and supplies for multiple scenarios."

"A public health issue of this magnitude must be addressed with creative solutions, and there has never been a more important time for hospitals to work together," said David Klein, MD, MBA, President and CEO of Saint Francis Memorial Hospital, and chair of the San Francisco Section-Hospital Council Northern & Central California. "This collaborative effort to create a dedicated care center for COVID-19 patients is unprecedented and will help ensure hospital care is available for anyone who needs it."

"We appreciate the leadership of our San Francisco hospitals, Mayor Breed and the Department of Health in working collaboratively during such an unprecedented and challenging moment," said Bryan Bucklew, President and CEO, Hospital Council Northern & Central California. "Our hospitals are committed to providing the best care for our San Francisco community, the Bay Area and across the state."

"The public health threat we face as a city and a region calls for the highest level of collaboration among our hospitals," said Mark R. Laret, President and CEO of UCSF Health. "By coming together, we can respond to this crisis for San Francisco and also show communities across the country how to prepare for their response."

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The first step in surge planning, which is already underway, is to decompress the current health care system. Those activities include:

- [Ordering](#) San Franciscans—and Bay Area residents—to stay home to reduce the spread of the virus citywide, lessen infection among vulnerable populations, and diminish the demand on hospitals and the health system
- Restricting visitors to [hospitals](#), [long-term care facilities](#) and [residential facilities](#) to protect the health of vulnerable populations and reduce their risk of exposure, complications and extended or initial hospitalization.
- [Cancelling](#) or postponing of elective surgeries and routine medical appointments, moving services to telephone and video conference as appropriate to reduce the volume of patients in the health system
- Providing childcare for health care workers at hospitals across the city to make it easier for them to continue working during the shelter in place order
- Providing places outside the hospital for people with suspected or confirmed cases of COVID-19 to remain safe and isolated, to free up hospital beds that are not providing hospital-level care
- [Ordering](#) enhanced cleaning of SROs, expanded shelter hours and more meals served in shelters and navigation centers to improve the health and safety of vulnerable populations and reduce hospitalizations.

The second step is to build capacity in the hospital system to care for more patients. Those activities include:

- All hospitals in San Francisco have been jointly planning, sharing protocols and information, and developing a unified approach;
- Opening a dedicated COVID-19 floor at Saint Francis Memorial Hospital, with 40 medical-surgical beds and 8 ICU beds, that is equipped and staffed through contributions of Saint Francis, ZSFG and UCSF;
- Expedited hiring of DPH nurses that will add some 220 registered nurses to the workforce;
- Increasing hospital and staff capacity and coordinating supplies and equipment citywide; and
- Increasing the amount of supplies and equipment, including personal protective equipment (PPE), through advocacy at the state and federal level, supplemented by the support of donors.

###

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City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

FOR IMMEDIATE RELEASE

March 26, 2020

Contact: San Francisco Joint Information Center
415-558-2712, dempres@sfgov.org

*** UPDATE ***

New Developments at Laguna Honda Hospital

San Francisco, CA -- Now that the coronavirus is here in our community, the City and County of San Francisco and Department of Public Health continue to focus on protecting vulnerable populations and health care workers, and on slowing the spread of the disease. We do expect that there will be more cases of COVID-19 in the Laguna Honda community, among staff and residents, because it is now spreading throughout the Bay Area.

Today's Update:

- **Six staff at Laguna Honda now confirmed COVID-19**
Six members of the staff have tested positive for COVID-19. Most of these staff members were located in the South 4 neighborhood and the South 5 neighborhood. The other staff were not in patient-care positions. The affected neighborhoods are under quarantine.
- **All staff in the two affected patient care units being tested**
COVID-19 testing began today for staff of the South 4 neighborhood and the South 5 neighborhood, who may have been exposed. Although we do not know that their co-workers contracted the virus at work, we want to do everything we can to protect the health of our staff and the vulnerable patients they serve.
- **One patient at Laguna Honda confirmed COVID-19**
She has been placed in isolation and a contact investigation is underway.

We will continue to do everything we can to decrease the spread and reduce harm for Laguna Honda residents and staff.

We have taken a number of steps to protect our community and to respond to COVID-19. We have restricted non-essential visitors, screened staff for illness at the start of each shift and improved infection control. We have limited floating staff from one unit to another to reduce the opportunity for the virus to spread and increased our health checks on residents.

SFDPH | 101 Grove Street, Room 308, San Francisco, CA 94102



City and County of San Francisco
London N. Breed
Mayor

San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

FOR IMMEDIATE RELEASE

March 25, 2020

Contact: San Francisco Joint Information Center

415-558-2712, dempres@sfgov.org

Increased protections ordered for Laguna Honda Residents and Staff

Department of Public Health continues to prioritize vulnerable populations in coronavirus response

Five staff have tested positive for COVID-19, no cases among residents at this time

The Health Officer of the City and County of San Francisco today ordered a protective quarantine for the campus of Laguna Honda Hospital and Rehabilitation Center. The order, which prohibits residents from leaving campus, strengthens previous protections for residents and staff. The order takes effect today at 5 p.m. and expires April 7.

From the beginning of the global outbreak, efforts by the City & County of San Francisco to prepare for the coronavirus have prioritized the most vulnerable members of the city's population – people 60 and over and those with certain underlying health conditions. The residents of Laguna Honda Hospital and Rehabilitation Center (LHH) are in the most vulnerable groups.

Laguna Honda Hospital remains a top priority in the city's response. Among the first orders issued by the city's Health Officer was one purposefully and carefully designed to protect the institution, its residents and staff. Visitor access was restricted there on March 6, immediately after the first two cases in the city were identified the day before (3/5), and on the same day a local health emergency was declared. The order restricting visitors was extended on March 12 to last until April 21.

Laguna Honda leadership has worked actively and diligently to train staff on COVID-19 procedures, including the use of personal protective equipment (PPE), thorough cleaning of common spaces and resident rooms, and other prevention techniques.

SFDPH | 101 Grove Street, Room 308, San Francisco, CA 94102



San Francisco Department of Public Health

Grant Colfax, MD
Director of Health

City and County of San Francisco
London N. Breed
Mayor

Even before the Health Officer orders, Laguna Honda implemented the following measures to protect and prepare for the possibility of COVID- 19 circulating at Laguna Honda Hospital:

- Restrict access to all non-essential personnel from entering the facility, including community groups, contractors and volunteers providing services that are not critical to resident care.
- Initiate a screening process for visitors, staff and residents.
- Improve infection control signage and provide specific COVID-19 education to ensure everyone at LHH is adhering to proper infection control standards regarding hand hygiene and the proper use of Personal Protective Equipment (PPE).

Last week, we learned of the first possible cases of COVID-19 among members of the Laguna Honda community. Currently, there are five members of the LHH staff with confirmed cases. Four of these five staff members worked in two units at the hospital, and one did not work in patient care and had no patient contact. Fifteen patients have been tested, and so far there are no positive cases. However, that could change as the contact investigations and testing continue and the virus continues to spread in the Bay Area.

We do not know whether the staff acquired COVID-19 at work, or in the community. We do know that COVID-19 is easily transmitted, especially in group settings, such as long-term care facilities and cruise ships.

At this time, 120 residents are quarantined in the South 4 and South 5 neighborhoods, where a total of four staff have tested positive for COVID-19. Monitoring of patients on both affected units has increased. Staff is also undergoing increased screening.

All staff are screened for symptoms of illness each time they start their shift.

###

Office of the Mayor

News Releases

The latest news and announcements from Mayor London N. Breed

San Francisco Officials Provide Update on COVID-19 Cases at Laguna Honda Hospital

Posted Date: Monday, March 30, 2020

Infection control nurses, infectious disease physicians and epidemiologists are at Laguna Honda Hospital to assess the situation and make recommendations for the ongoing management of an outbreak that is expected to escalate

San Francisco, CA — Mayor London N. Breed and Dr. Grant Colfax, Director of Health, announced today the arrival of some state and federal assistance they have requested to strengthen the City's response to an outbreak of coronavirus at Laguna Honda Hospital. Infection control nurses from the California Department of Public Health and infectious disease physicians and epidemiologists with expertise in epidemics from the Centers for Disease Control and Prevention (CDC) are on campus as of today.

Along with state and federal teams assisting from off site, these six experts will assess the situation and make recommendations for the ongoing management of an outbreak that is expected to escalate. They also will work with the Department of Public Health to develop a prospective outbreak prevention and response plan for long-term care facilities in San Francisco.

Today, the state infection control nurses are creating expanded protocols on environmental cleaning, personal protective equipment (PPE), and staff safety. The CDC is intensifying the contact investigation to look for sources of infection and the pathway of spread. This will inform current actions and the further development of an outbreak prevention and response plan that takes coronavirus into account.

"From the very beginning, we've been extremely concerned about the potential for outbreaks in congregate living situations, especially locations with vulnerable populations like Laguna Honda, which is why our early actions were to restrict visitors from these locations," said Mayor Breed. "We have seen outbreaks in similar situations in other locations and we know that immediate action is needed to prevent the worst possible outcomes. On Friday, I requested over 100 specialized personnel from the federal government to be able to respond effectively, and while we appreciate the six experts that from the state and federal government who are helping, we need more assistance and we need it now. This virus does not wait and neither can we. We are committed to supporting the patients and staff at Laguna Hospital through this difficult time."

From the beginning of the global outbreak, efforts by the City and County of San Francisco to prepare for the coronavirus have prioritized the most vulnerable members of the city's population—residents who are over 60 years old and those with certain underlying health conditions and chronic diseases. The residents of Laguna Honda Hospital and Rehabilitation Center (LHH) are in the most vulnerable groups. Across the United States, long-term care facilities have been hit by the coronavirus including in California, Washington, Colorado, Minnesota, New York, Maryland, Virginia, and Texas.

Laguna Honda Hospital currently has 11 confirmed cases of COVID-19, the disease caused by the coronavirus. Nine of the confirmed cases are staff and two are residents. All are in good condition. Since March 26, the Department of Public Health has tested 158 staff and 54 residents for the virus. Among the 54 residents, two have tested positive, 51 negative, and one result is still pending. Among the 158 staff, two have tested positive and 156 have tested negative. 25 more staff tests are underway. Additionally, 35 staff at LHH were tested by their health care providers, independently of DPH, and seven staff tested positive. Those seven confirmed cases, along with the two staff and two residents confirmed positive by DPH brings the total number of confirmed cases at LHH to 11. We expect more cases of COVID-19 in the Laguna Honda community, among staff and residents, because the virus is now spreading throughout the Bay Area.

"From the start, we have been most concerned about protecting vulnerable populations from the harm that the coronavirus causes. As we look at the data and patterns around the world and in our country, we know that long-term care facilities are particularly at risk," said Dr. Grant Colfax, Director of Health. "Now, I am saddened to say that we are facing an outbreak at our own Laguna Honda Hospital and we are going to do everything we can to prevent harm to the residents and staff as the situation develops. We are drawing on all the resources we can muster, at the local, state and federal level to strengthen our response. We care deeply about the Laguna Honda community and are doing everything we can to protect their health and safety."

No local community is equipped to manage a coronavirus outbreak by itself. In addition to the infectious disease experts that arrived today, San Francisco has requested over 100 additional staff, ranging from infection control nurses to testing personnel and personal care aides, as well as equipment from the state and federal government and is awaiting a response.

Background on Laguna Honda efforts to date

Laguna Honda Hospital has been and remains a top priority in the City's preparation and response to coronavirus. The first Public Health Order, after declaring a local health emergency in early March, was to restrict visitors from Laguna Honda Hospital in order to protect the institution, its residents and staff. Laguna Honda leadership

has worked actively and diligently to train staff on COVID-19 procedures, including the use of PPE, thorough cleaning of common spaces and resident rooms, and other prevention techniques.

However, even the best efforts are no guarantee against the spread of the virus. There are currently 374 cases and six deaths due to COVID-19 in San Francisco. The City is currently preparing its hospital and health systems for an expected surge of hospital patients.

Here is a summary of steps that the City and Laguna Honda Hospital have taken to prepare for and respond to an outbreak on campus.

Steps the City has taken

- Issued Health Officer Orders restricting visitors to Laguna Honda.
- Issued additional Health Orders expanding that rule to all long-term care facilities and residential facilities in San Francisco, and to all hospitals in San Francisco.
- The Health Officer placed Laguna Honda Hospital under protective quarantine on March 24.
- The Health Department implemented a new mask policy requiring isolation masks for staff at Laguna Honda Hospital and other locations in the health system where staff have prolonged close contact with each other and with high-risk populations.
- The City and the Health Department have requested state and federal assistance for what is expected to be an escalating crisis at Laguna Honda.
- Issued Health Order requiring quarantine, isolation and testing for Laguna Honda South 4 and South 5 units.

Steps Laguna Honda Hospital has taken

Before COVID-19 cases were found on campus:

- Restricted access to all non-essential personnel from entering the facility, including community groups, contractors and volunteers providing services that are not critical to resident care.
- Initiated a medical screening process for visitors, staff and residents.
- Improved infection control signage and provided specific COVID-19 education to ensure everyone at LHH is adhering to proper infection control standards regarding hand hygiene and the proper use of PPE.
- Developed a COVID-19 Infection Control Plan that addresses clinical protocols, isolation room management, and surge capacity.

After COVID-19 cases were found on campus:

- Activated the hospital incident command system to manage the crisis.
- Quarantined the two units where cases have been found to date
 - Doors have been secured
 - San Francisco sheriffs at the door preventing residents from leaving and only allowing appropriate staff to enter
 - Residents being assessed for symptoms every shift
 - Staff being screened twice per shift
- Testing of all staff on two units where staff cases have been found
- Testing of all patients on the unit where patients cases have been found
- Laguna Honda is setting up a field care clinic on its grounds as a precaution, in case there is a need to separate groups of patients.

###

Modification

Personal Services Contracts

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: MUNICIPAL TRANSPORTATION AGENCY

Dept. Code: MTA

Type of Request: ☐ Initial ☒ Modification of an existing PSC (PSC # 4033 - 11/12)

Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)

Type of Service: Parking Garage Management Services for 13 Parking Facilities

Funding Source: garage revenues

PSC Original Approved Amount: \$1,770,000

PSC Original Approved Duration: 11/01/11 - 10/30/17 (6 years)

PSC Mod#1 Amount: \$655,000

PSC Mod#1 Duration: 08/29/12-01/31/18 (13 weeks 2 days)

PSC Mod#2 Amount: \$705,000

PSC Mod#2 Duration: 02/01/18-07/31/19 (1 year 25 weeks)

PSC Mod#3 Amount: \$847,517

PSC Mod#3 Duration: 08/01/19-02/28/21 (1 year 30 weeks)

PSC Mod#4 Amount: \$562,567

PSC Mod#4 Duration: 03/01/21-02/02/22 (48 weeks 3 days)

PSC Cumulative Amount Proposed: \$4,540,084

PSC Cumulative Duration Proposed: 10 years 13 weeks

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

Provide separate professional parking garage operational services for 19 parking facilities organized into three groups as follows: Group A – 8 Facilities (Civic Center, Lombard, Mission Bartlett, Performing Arts, Pierce, Sutter Stockton and 16th & Hoff garages, and 7th & Harrison lot); Group B – 3 Facilities (Golden Gateway and St. Mary's Square garages, and Kezar Lot); Group C – 7 Facilities (SF General Hospital, Moscone Center, North Beach, Vallejo St., Ellis O'Farrell, Union Square and Polk Bush garages). In addition to the three groups, there is a standalone contract for 5th & Mission Garage. Services include: providing qualified and experienced parking personnel for cashiering, janitorial and security. The Operator shall provide oversight of all aspects of administrative functions including, but not limited to, collection, reconciliation and deposit of all parking and non-parking revenue; repair and maintenance of facilities and revenue control equipment; compliance with insurance and bond requirements; providing valet or valet-assist parking services during special events. The term is for six (6) years, thereafter on a month-to-month basis, not to exceed 36 months. The amount of 4,540,084 represents the compensation paid to the parking firms for providing professional operational services at the 19 garages. The \$4,540,084 amount breaks down to approximately \$590,000 (\$72,000 per year, with a 5% increase starting in year four) for each of the three groups. Operating expenses, including parking taxes, are funded through gross parking revenue collected, but is not part of the compensation paid to the parking firm.

B. Explain why this service is necessary and the consequence of denial:

These services are necessary to provide public parking and operational service of parking facilities in the most efficient and cost-effective manner possible. The results of a benchmarking survey of comparable California cities and throughout the nation conducted by SFMTA staff concluded that the typical business model is to contract out the day-to-day operations of city-owned, off-street parking facilities. Consequences of denial will result in closing down all SFMTA-owned or operated facilities since there are no CCSF job classifications that can assume parking operation duties. In addition, denial of professional parking garage management will result in higher costs, and therefore reduced net income to support services provided by the SFMTA.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

No

D. Will the contract(s) be renewed?

No.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why:

The union that represents the parking garage employees approached us and asked us to extend the existing contracts by one year, which will allow us to defer a new Request for Proposal (RFP) for one year until summer 2021. We consulted with City Attorney, who confirmed that we could extend the existing contracts by one year, to a total duration of exactly 10 years. All in agency up through Department of Transportation (DOT), Jeffrey Tumlin have approved this plan.

2. Reason(s) for the Request

A. Display all that apply

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

Explain the qualifying circumstances:

This is a re-creation of an original. No access to the original, so no explanation is provided.

B. Reason for the request for modification:

Modification is requested to allow a one-year extension to operations contracts the San Francisco Municipal Transportation Agency (SFMTA) has with parking operations companies for managing day-to-day operations of City garages. These one-year extensions will result in the SFMTA extending four contracts out to a duration of 10 years, the maximum term allowed under SFMTA sole authority.

3. Description of Required Skills/Expertise

A. Specify required skills and/or expertise: The successful operation of each parking facility requires technical knowledge and experience in the use of automated pay stations; automated parking access and revenue control equipment and software; including such functions as information retrieval and report writing; managing parking operations staff working multiple shifts; maintenance of all facility equipment, including elevators, fire panels, and lighting; valet parking operations; cash handling, accounting, reconciliation and financial reporting, including operations

and capital improvement budgets; conducting rate surveys; target marketing to increase volume and customer base; maintenance and security of each parking facility.

B. Which, if any, civil service class(es) normally perform(s) this work? none

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

Not Applicable

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

There is no applicable Civil Service Classification that can provide complete professional operational services as described for SFMTA- or City-owned parking facilities

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain: No, the SFMTA is contracting out for the complete professional operational services of each parking facility, which is the most efficient, cost-effective and successful approach to provide public parking at SFMTA owned or operated facilities.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.

No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.

No, the contractor will be managing day-to-day operations of city-owned parking garages under the general oversight of city staff.

C. Are there legal mandates requiring the use of contractual services?

No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.

No

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.

No

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.

Yes, three separate contractors

7. **Union Notification:** On 08/04/20, the Department notified the following employee organizations of this PSC/RFP request:
all unions were notified

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Amy Nuque Phone: 415-646-2802 Email: amy.nuque@sfmta.com

Address: 1 S. Van Ness Avenue 6th Floor, San Francisco, CA 94103

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 4033 - 11/12

DHR Analysis/Recommendation:

Civil Service Commission Action:

Commission Approval Required

DHR Approved for 12/07/2020

Receipt of Union Notification(s)

Nuque, Amy

From: dhr-psccordinator@sfgov.org on behalf of amy.nuque@sfmta.com
Sent: Tuesday, August 4, 2020 4:27 PM
To: Nuque, Amy; Criss@SFMEA.com; Meyers, Julie (HSA); seichenberger@local39.org; Camaguey@SFMEA.com; ablood@cirseiu.org; kcartermartinez@cirseiu.org; ecassidy@ifpte21.com; WendyWong26@yahoo.com; wendywong26@yahoo.com; sarah.wilson@seiu1021.org; kschumacher@ifpte21.org; kpage@ifpte21.org; tjenkins@uapd.com; eerbach@ifpte21.org; tmathews@ifpte21.org; amakayan@ifpte21.org; jb@local16.org; Ricardo.lopez@sfgov.org; Basconcillo, Katherine (PUC); Sandeep.lal@seiu1021.me; pcamarillo_seiu@sbcglobal.net; MRainsford@local39.org; Wendy.Frigillana@seiu1021.org; pscreview@seiu1021.org; pkim@ifpte21.org; agonzalez@iam1414.org; ted.zarzecki@seiu1021.net; leah.berlanga@seiu1021.org; gail@sffdlocal798.org; cityworker@sfcwu.org; davidmkersten@gmail.com; djohnson@opcmialocal300.org; ramonliuna261@gmail.com; ablood@cirseiu.org; pkarinen@nccrc.org; tony@dc16.us; stevek@bac3-ca.org; xiumin.li@seiu1021.org; Sin.Yee.Poon@sfgov.org; smcgarry@nccrc.org; rmitchell@twusf.org; grojo@local39.org; jduritz@uapd.com; staff@SFMEA.com; mike@dc16.us; khughes@ibew6.org; L21PSCReview@ifpte21.org; sfsmsa@gmail.com; mshelley@dc16.us; david.canham@seiu1021.org; jtanner940@aol.com; Osha Ashworth; L21PSCReview@ifpte21.org; LiUNA.local261@gmail.com; local200twu; speedy4864@aol.com; Christina@SFMEA.com; ecdemvoter@aol.com; thomas.vitale@seiu1021.org; rod.goree@sfmta.com; DHR-PSCCoordinator, DHR (HRD)
Subject: Receipt of Modification Request to PSC # 4033 - 11/12 - MODIFICATIONS

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

PSC RECEIPT of Modification notification sent to Unions and DHR

The MUNICIPAL TRANSPORTATION AGENCY -- MTA has submitted a modification request for a Personal Services Contract (PSC) for \$562,567 for services for the period March 1, 2021 – February 2, 2022. For all Modification requests, there is a 7-Day noticed to the union(s) prior to DHR Review.

If SEIU is one of the unions that represents the classes you identified in the initial PSC and the cumulative amount of the request is over \$100,000, there is a 60 day review period for SEIU

After logging into the system please select link below:

<http://apps.sfgov.org/dhrdrupal/node/10411>

Email sent to the following addresses: staff@sfmea.com Christina@sfmea.com Camaguey@sfmea.com Criss@SFMEA.com L21PSCReview@ifpte21.org amakayan@ifpte21.org pkim@ifpte21.org kschumacher@ifpte21.org tmathews@ifpte21.org wendywong26@yahoo.com WendyWong26@yahoo.com jtanner940@aol.com david.canham@seiu1021.org Sin.Yee.Poon@sfgov.org xiumin.li@seiu1021.org ablood@cirseiu.org davidmkersten@gmail.com ted.zarzecki@seiu1021.net pscreview@seiu1021.org Wendy.Frigillana@seiu1021.org pcamarillo_seiu@sbcglobal.net Kbasconcillo@sfgwater.org Ricardo.lopez@sfgov.org Julie.Meyers@sfgov.org leah.berlanga@seiu1021.org Sandeep.lal@seiu1021.me thomas.vitale@seiu1021.org sarah.wilson@seiu1021.org

Additional Attachment(s)

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: MUNICIPAL TRANSPORTATION AGENCYDept. Code: MTAType of Request: ☐ Initial ☒ Modification of an existing PSC (PSC # 4033 - 11/12)Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)Type of Service: Parking Garage Management Services for 13 Parking FacilitiesFunding Source: garage revenuesPSC Original Approved Amount: \$1,770,000PSC Original Approved Duration: 11/01/11 - 10/30/17 (6 years)PSC Mod#1 Amount: \$655,000PSC Mod#1 Duration: 08/29/12-01/31/18 (13 weeks 2 days)PSC Mod#2 Amount: \$705,000PSC Mod#2 Duration: 02/01/18-07/31/19 (1 year 25 weeks)PSC Mod#3 Amount: \$847,517PSC Mod#3 Duration: 08/01/19-02/28/21 (1 year 30 weeks)PSC Cumulative Amount Proposed: \$3,977,517PSC Cumulative Duration Proposed: 9 years 17 weeks**1. Description of Work****A. Scope of Work/Services to be Contracted Out:**

Provide separate professional parking garage operational services for 13 parking facilities organized into three groups as follows: Group A – 6 Facilities (Civic Center, Lombard, Mission Bartlett, Performing Arts, and 16th & Hoff garages, and 7th & Harrison lot); Group B – 2 Facilities (Golden Gateway and St. Mary's Square garages); Group C – 5 Facilities (SF General Hospital, Moscone Center, North Beach, Vallejo St., and Polk Bush garages). Services include: providing qualified and experienced parking personnel for cashiering, janitorial and security. The Operator shall provide oversight of all aspects of administrative functions including, but not limited to, collection, reconciliation and deposit of all parking and non-parking revenue; repair and maintenance of facilities and revenue control equipment; compliance with insurance and bond requirements; providing valet or valet-assist parking services during special events. The term is for six (6) years, thereafter on a month-to-month basis, not to exceed 36 months. The amount of \$1,770,000 represents the compensation paid to the parking firms for providing professional operational services at the 13 garages. The \$1,770,000 amount breaks down to approximately \$590,000 (\$72,000 per year, with a 5% increase starting in year four) for each of the three groups. Operating expenses, including parking taxes, are funded through gross parking revenue collected, but is not part of the compensation paid to the parking firm.

B. Explain why this service is necessary and the consequence of denial:

These services are necessary to provide public parking and operational service of parking facilities in the most efficient and cost-effective manner possible. The results of a benchmarking survey of comparable California cities and throughout the nation conducted by SFMTA staff concluded that the

typical business model is to contract out the day-to-day operations of city-owned, off-street parking facilities. Consequences of denial will result in closing down all SFMTA-owned or operated facilities since there are no CCSF job classifications that can assume parking operation duties. In addition, denial of professional parking garage management will result in higher costs, and therefore reduced net income to support services provided by the SFMTA.

- C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

No

- D. Will the contract(s) be renewed?

No.

- E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why:

Modification 3 extends the contract an additional 19 months.

2. Reason(s) for the Request

- A. Display all that apply

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

Explain the qualifying circumstances:

This is a re-creation of an original. No access to the original, so no explanation is provided.

- B. Reason for the request for modification:

The modification is requested to cover the remaining extension terms in the several operations contracts the SFMTA has with parking operations companies for managing day-to-day operations of City garages.

3. Description of Required Skills/Expertise

- A. Specify required skills and/or expertise: The successful operation of each parking facility requires technical knowledge and experience in the use of automated pay stations; automated parking access and revenue control equipment and software; including such functions as information retrieval and report writing; managing parking operations staff working multiple shifts; maintenance of all facility equipment, including elevators, fire panels, and lighting; valet parking operations; cash handling, accounting, reconciliation and financial reporting, including operations and capital improvement budgets; conducting rate surveys; target marketing to increase volume and customer base; maintenance and security of each parking facility.

- B. Which, if any, civil service class(es) normally perform(s) this work? none

- C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

Not Applicable

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

There is no applicable Civil Service Classification that can provide complete professional operational services as described for SFMTA- or City-owned parking facilities

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain: No, the SFMTA is contracting out for the complete professional operational services of each parking facility, which is the most efficient, cost-effective and successful approach to provide public parking at SFMTA owned or operated facilities.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.

No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.

None

C. Are there legal mandates requiring the use of contractual services?

No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.

No

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.

No

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.

Yes, three separate contractors

7. Union Notification: On 01/29/19, the Department notified the following employee organizations of this PSC/RFP request:

all unions were notified

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Amy NUQUE Phone: 415-646-2802 Email: amy.nuque@sfmta.com

Address: 1 S. Van Ness Avenue 6th Floor, San Francisco, CA 94103

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 4033 - 11/12

DHR Analysis/Recommendation:

Commission Approval Not Required

Approved by DHR on 04/02/2019

PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: MUNICIPAL TRANSPORTATION AGENCYDept. Code: MTAType of Request: ☐ Initial ☒ Modification of an existing PSC (PSC # 4033 - 11/12)Type of Approval: ☐ Expedited ☒ Regular ☐ Annual ☐ Continuing ☐ (Omit Posting)Type of Service: Parking Garage Management Services for 13 Parking FacilitiesFunding Source: garage revenuesPSC Original Approved Amount: \$1,770,000PSC Original Approved Duration: 11/01/11 - 10/30/17 (6 years)PSC Mod#1 Amount: \$655,000PSC Mod#1 Duration: 08/29/12-01/31/18 (13 weeks 2 days)PSC Mod#2 Amount: \$705,000PSC Mod#2 Duration: 02/01/18-07/31/19 (1 year 25 weeks)PSC Cumulative Amount Proposed: \$3,130,000PSC Cumulative Duration Proposed: 7 years 39 weeks**1. Description of Work****A. Scope of Work/Services to be Contracted Out:**

Provide separate professional parking garage operational services for 13 parking facilities organized into three groups as follows: Group A – 6 Facilities (Civic Center, Lombard, Mission Bartlett, Performing Arts, and 16th & Hoff garages, and 7th & Harrison lot); Group B – 2 Facilities (Golden Gateway and St. Mary's Square garages); Group C – 5 Facilities (SF General Hospital, Moscone Center, North Beach, Vallejo St., and Polk Bush garages). Services include: providing qualified and experienced parking personnel for cashiering, janitorial and security. The Operator shall provide oversight of all aspects of administrative functions including, but not limited to, collection, reconciliation and deposit of all parking and non-parking revenue; repair and maintenance of facilities and revenue control equipment; compliance with insurance and bond requirements; providing valet or valet-assist parking services during special events. The term is for six (6) years, thereafter on a month-to-month basis, not to exceed 36 months. The amount of \$1,770,000 represents the compensation paid to the parking firms for providing professional operational services at the 13 garages. The \$1,770,000 amount breaks down to approximately \$590,000 (\$72,000 per year, with a 5% increase starting in year four) for each of the three groups. Operating expenses, including parking taxes, are funded through gross parking revenue collected, but is not part of the compensation paid to the parking firm.

Scope Change

The modified PSC amount of \$2,425,000 represents the compensation paid to the parking firms for providing professional operational services at the 13 approved facilities, plus compensation for the additional 3 facilities.

B. Explain why this service is necessary and the consequence of denial:

These services are necessary to provide public parking and operational service of parking facilities in

the most efficient and cost-effective manner possible. The results of a benchmarking survey of comparable California cities and throughout the nation conducted by SFMTA staff concluded that the typical business model is to contract out the day-to-day operations of city-owned, off-street parking facilities. Consequences of denial will result in closing down all SFMTA-owned or operated facilities since there are no CCSF job classifications that can assume parking operation duties. In addition, denial of professional parking garage management will result in higher costs, and therefore reduced net income to support services provided by the SFMTA.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.

No.

D. Will the contract(s) be renewed?

No.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why:

Modification 2 extends contract an additional 6 months.

2. Reason(s) for the Request

A. Display all that apply

☒ Services required on an as-needed, intermittent, or periodic basis (e.g., peaks in workload).

Explain the qualifying circumstances:

This is a re-creation of an original. No access to the original, so no explanation is provided.

B. Reason for the request for modification:

This is to add three additional parking facilities and to cover the additional extension through July 31, 2019.

3. Description of Required Skills/Expertise

A. Specify required skills and/or expertise: The successful operation of each parking facility requires technical knowledge and experience in the use of automated pay stations; automated parking access and revenue control equipment and software; including such functions as information retrieval and report writing; managing parking operations staff working multiple shifts; maintenance of all facility equipment, including elevators, fire panels, and lighting; valet parking operations; cash handling, accounting, reconciliation and financial reporting, including operations and capital improvement budgets; conducting rate surveys; target marketing to increase volume and customer base; maintenance and security of each parking facility.

B. Which, if any, civil service class(es) normally perform(s) this work? none

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: No.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

Not Applicable

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.

There is no applicable Civil Service Classification that can provide complete professional operational services as described for SFMTA- or City-owned parking facilities

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain: No, the SFMTA is contracting out for the complete professional operational services of each parking facility, which is the most efficient, cost-effective and successful approach to provide public parking at SFMTA owned or operated facilities.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.

No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contract? If so, please explain what that will entail; if not, explain why not.

None

C. Are there legal mandates requiring the use of contractual services?

No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.

No

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.

No

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.

Service in past for 13 facilities. Modification adds 3 facilities

7. Union Notification: On 12/05/17, the Department notified the following employee organizations of this PSC/RFP request:

all unions were notified

☒ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Rod Goree Phone: 415-646-2553 Email: rod.goree@sfmta.com

Address: 1 S. Van Ness Avenue 6th Floor, San Francisco, CA 94103

FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 4033 - 11/12

DHR Analysis/Recommendation:

01/22/2018

Commission Approval Required
conditions

Approved by Civil Service Commission with

01/22/2018 DHR Approved for 01/22/2018