SAN FRANCISCO
PLANNING DEPARTMENT

Memo to the Planning and Health Commissions

HEARING DATE: SEPTEMBER 6, 2018

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Date:	August 27, 2018
Case No.:	**2012.0403W and 2016-004775MCM**
Project:	**CPMC - 2017 Annual Compliance Statement**
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Recommendation:	**Informational Only**

BACKGROUND

The item before you is an informational presentation in keeping with the Annual Review Process required by the Development Agreement (DA) with California Pacific Medical Center (CPMC).

Annual Review Process

The DA requires an annual review process to ensure that both the City and CPMC are in compliance with their respective obligations and that the specified community benefits are being delivered. The annual review requires that CPMC submit an Annual Compliance Statement to the City no later than 150 days after the end of their fiscal year (currently, the calendar year). The City is then required to post CPMC's statement and receive public comment for 30 days. At the conclusion of the public comment period, the City has 45 days to publish a report on whether CPMC is in compliance with the Development Agreement. The Health and Planning Commissions typically hold a joint hearing on CPMC's compliance with 60 days' notice to the public. After the hearing, the Planning and Health Directors will forward their findings onto the independent third party monitor. The monitor will have 30 days to review the findings and evidence of CPMC's compliance with the DA before sending a letter to the Board of Supervisors stating whether or not he or she concurs with the Directors' findings. If the Directors find CPMC not to be in material compliance with the terms of the Development Agreement, they will immediately notify the City Attorney for consideration and pursuit of appropriate action in accordance with Chapter 56 of the Administrative Code and remedies outlined in the Development Agreement.

The City's Annual Report for the reporting period of January 1 – December 31, 2017 indicates that CPMC was **in compliance** on each of the obligations contained in the DA. Many of the community benefit action item obligations are multi-year commitments and are still in the process of being completed.

Issues to Highlight

Several areas of concern identified during previous reporting periods were addressed during the current 2017 compliance reporting period. These issues will be discussed in more detail during the presentation at the hearing.

- Baseline Charity Care patients:
  - CPMC continues to meet its baseline charity care commitment, and has no shortfall under the two-year rolling average provision.
- Status of Tenderloin Medi-Cal Managed Care provider:
  - The DA requires CPMC to contract with an existing Management Services Organization (MSO) to care for 1,500 new Medi-Cal enrollees, and with a new MSO with its primary care provider base located in the Tenderloin to care for new enrollees if and when such an MSO is available. Because no Tenderloin-based MSO was available, CPMC, North East Medical Services (NEMS) and St. Anthony's Medical Clinic entered into a partnership in 2015 to provide services to Medi-Cal patients. As of May 2018, only 173 new Medi-Cal beneficiaries and 3 Healthy Kids beneficiaries had enrolled in the partnership, well short of the ultimate goal of 1,500 new beneficiaries.
- Culturally and linguistically appropriate services (CLAS):
  - In previous years, the City's annual review resulted in recommendations for substantial improvements in such services, particularly at the St. Luke's Diabetes Clinic, where the patient population has historically included many monolingual Spanish-speaking patients. In April 2016, CPMC and the Department of Public Health (DPH) agreed on improvements needed to meet CLAS standards at St. Luke's Diabetes Clinic. CPMC has maintained the progress reported in 2016, with the hiring of Spanish-speaking staff, the start of Spanish classes in 2017, and continued collaboration with the HealthFirst program.
  - The DPH/CPMC discussion also noted that reception staff would improve patient care and experience at the Diabetes Clinic. CPMC does not presently plan to add a dedicated receptionist at the clinic. CPMC has indicated that it continues to monitor patient access through a question on the bilingual patient satisfaction survey to assess if there are access challenges caused by not having a receptionist.
- Status of CityBuild Hiring Program Entry-level apprentice construction positions and First Source Hiring Program entry-level non-construction positions shortfall:
  - CPMC was below the overall 30 percent local workforce hour requirement for hiring local journey and apprentice level workers, and was also below the 50 percent goal for new entry-level apprentice referrals through the system. However, CPMC has demonstrated good faith efforts working with CityBuild to reach out to, recruit, train, and employ economically disadvantaged residents through the system referral.
  - CPMC met the goal for entry-level non-construction positions in 2017. As of July 2018, CPMC has continued to meet the operational hiring goal.
- Health Services Systems and CPMC engaged an actuary to evaluate negotiated fee for service increases for CPMC in its role as a provider of services to HSS members. This evaluation found that CPMC is in compliance with the requirement that the Annual Rate Increase must be less

than or equal to 5 percent from 2014 to 2015. The actuary is currently evaluating the year-on-year increases from 2015 to 2016 and from 2016 to 2017.

- St. Luke's Subacute and Skilled Nursing Facility (SNF) services:
  - The DA required CPMC to make good-faith efforts to address sub-acute SNF beds in San Francisco, but the provision of SNF beds is not required under the DA and thus is not evaluated in the annual reporting process. However, the Health and Planning Commissions and the public have expressed concerns about the loss of SNF and sub-acute SNF beds at Sutter's CPMC facilities at previous public hearings.
  - Since the 2016 review process was completed, Sutter has announced the closure of all SNF and subacute SNF beds at St. Luke's and, subsequently, that current subacute SNF patients at St. Luke's would be transferred to its Davies Campus. No new subacute SNF patients would be accepted at St. Luke's, and no SNF or sub-acute SNF beds are included in the new Mission Bernal hospital.

Public comments received to date consisted of a letter sent to the Planning Department on June 29, 2018 by San Franciscans for Healthcare, Housing, Jobs & Justice (the "Coalition"). This letter is included as an attachment.

REQUIRED COMMISSION ACTION

None; this is an informational hearing only.

RECOMMENDATION:	**Informational Only**

Attachments:
CPMC Long Range Development Plan Development Agreement - 2017 Compliance Statement
2017 City Report
Public Comments
CPMC St. Luke's Hospital Updated Schedule, July 2018

CALIFORNIA PACIFIC MEDICAL CENTER
LONG RANGE DEVELOPMENT PLAN
DEVELOPMENT AGREEMENT

2017 COMPLIANCE STATEMENT

and

INCLUDING HEALTHCARE COMPLIANCE REPORT

(January 1, 2017 - December 31, 2017)

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1. COMPLIANCE STATEMENT

This Compliance Statement is submitted under Section 8 of the Development Agreement (DA) demonstrating compliance with the DA obligations, including, without limitations, (i) the Hospital Commitment, (ii) each of the Community Commitments, including each of the Healthcare Obligations described in Exhibit F of the DA, and (iii) reimbursement of City Costs. See Section 8.2.1.[1] Compliance with the Healthcare Obligations is separately addressed and described in the Healthcare Compliance Report, attached hereto as Attachment 1.

2. SCHEDULE AND PHASING PLAN – HOSPITAL COMMITMENT

2.1 Construction Schedules

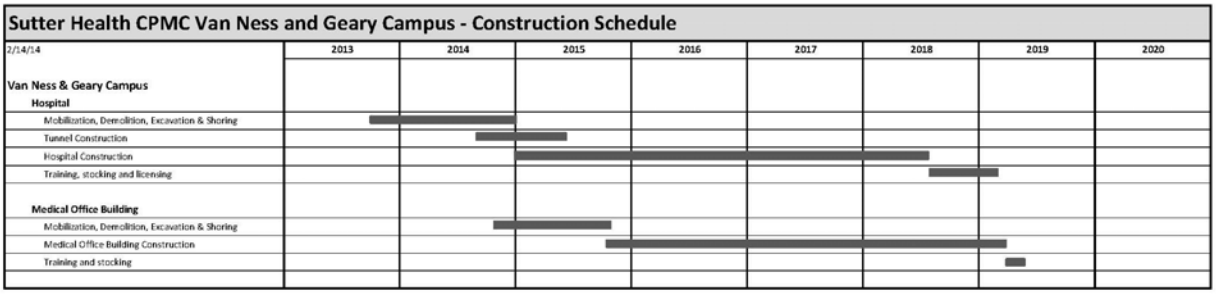
CPMC has, in accordance with Section 4.2.3, kept the City informed of its progress in satisfying the Hospital Commitment by reporting on the timing/progress of construction at the St. Luke's Campus and the Van Ness and Geary Campus, as described below.

a. Van Ness and Geary Campus - Construction Activity

i. Hospital – Interior work continued through all of 2017

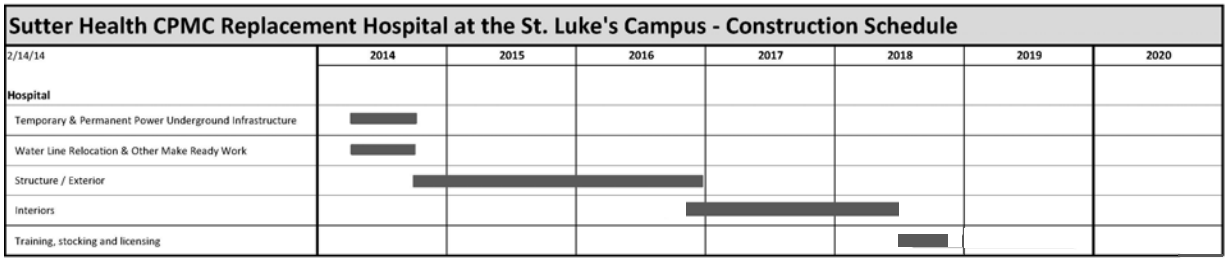
ii. Medical Office Building - Steel superstructure was completed in 2017
Exterior panel installation commenced in October 2017

Schedule 1 – Van Ness and Geary Campus



b. Replacement Hospital at CPMC St. Luke's Campus– Construction Activity
Interior work continued through all of 2017

Schedule 2 – St. Luke's Campus



[1] All Section and Exhibit references are to the Development Agreement unless otherwise noted. Unless separately defined, capitalized terms have the meaning provided in the Development Agreement.

2.2 Milestones

a. Milestone Completion Notice. As indicated in the Milestone Table below, the completion of exterior work on the St. Luke's Campus Hospital occurred in November and, accordingly, this Milestone is satisfied. There are no anticipated material delays in meeting future milestones, assuming continued cooperation with OSHPD.

b. Milestone Table. The Milestone Table below describes CPMC's Compliance with the Schedule and Phasing Plan as noted in Development Agreement Exhibit C.

Date	Milestone	Status
On or before May 11, 2016	Completion of the San Jose Avenue City Project	Completed - 7/29/13
On or before the later of February 1, 2015 or 18 months from the Effective Date	Submit St. Luke's Increment 1 to OSHPD for the replacement hospital at CPMC St. Luke's	Completed - 2/3/14
On or before twelve (12) months after submission of Increment 1 to OSHPD for the replacement hospital at CPMC St. Luke's Campus	Commencement of construction of the San Jose Avenue CPMC Project	Commenced - 5/5/14
On or before eighteen (18) months after submission of Increment 1 to OSHPD for the replacement hospital at CPMC St. Luke's	Receipt of Increment 1 permit from OSHPD for the replacement hospital at CPMC St. Luke's	Completed - 8/5/14
On or before three (3) months after receipt of Increment 1 permit from OSHPD for the replacement hospital at CPMC St. Luke's Campus	Commencement of Shoring /Excavation work for the replacement hospital at CPMC St. Luke's Campus	Commenced - 10/21/14
On or before twenty (20) months from Commencement of Shoring/Excavation work for the replacement hospital at CPMC St. Luke's Campus	Completion of Exterior Work for the replacement hospital at CPMC St. Luke's Campus	Completed – 11/1/16
On or before forty-two (42) months from receipt of Increment 1 permit from OSHPD for the replacement hospital at CPMC St. Luke's Campus	Notice of Completion of Construction of replacement hospital at CPMC St. Luke's Campus provided to the City	Not yet due
St. Luke's Hospital Opening Deadline: On or before twenty four (24) months from the Opening of the Cathedral Hill Campus Hospital	Notice of Opening of the replacement hospital at CPMC St. Luke's Campus provided to the	Not yet due

3. COMMUNITY COMMITMENTS

3.1 Workforce Agreement (Exhibit E)

a. First Source Entry Level Hiring

CPMC is in compliance and, in coordination with First Source, is making the required good faith efforts regarding the Entry Level Hiring Goal. What constitutes good faith efforts is stated in DA Exhibit E, Sections 5 and 9. CPMC achieved a 58% entry level First Source hiring rate for calendar year 2017. See Attachment 3 for specifics on entry level hiring for hospital operations.

CPMC continues to work with the City and its Healthcare and Hospitality Academies to develop the process that will enhance opportunity for targeted groups and accelerate the progress toward the 40% First Source hiring goal.

b. Construction Hiring. CPMC is in compliance and, in coordination with CityBuild, is making the required good faith efforts regarding the Construction Hiring Goal. See Attachment 4 for specifics on construction hiring.

Construction hiring goals are to have 30% of the total hire hours performed by San Francisco Workforce, including 50% for new apprentice positions. Construction contractors on the hospital replacement projects hired San Francisco residents for 25% of the total 2017 construction hours. 30% of apprentice opportunities were filled by San Francisco residents.

c. Local Business Enterprise. CPMC, in coordination with the City's Contract Monitoring Division, is making the required good faith efforts and receiving technical assistance on developing and reporting Local Business Enterprise (LBE) program goals. See Attachment 4 for specifics on the LBE program.

The goal for the LBE program is 14% San Francisco based business contracting. 17% of the total construction work in 2017 was been performed by San Francisco based businesses.

3.2 Community Healthcare Program (Exhibit F)

CPMC is meeting its Community Health Care obligations. See Attachment 1, Healthcare Compliance Report.

a. Payments. CPMC has met its DA obligations to provide funds for the Healthcare Innovation program.

-The fifth installment of $1,125,000 was paid on 11/8/2017;

See Attachment 2, Development Agreement Payments Schedule.

3.3 Housing Program (Exhibit G)

CPMC has met its Housing Program obligations by making the payments described below and as outlined in Attachment 2 to this Compliance Statement:

a. Affordable Housing Payments. CPMC made the required Affordable Housing payments as follows:

-The fifth installment of $3,475,000 was paid on 11/08/2017.

3.4 Transportation Program (Exhibit K)

a. Payments. CPMC has made all required payments as follows:

-The fifth installment of $2,500,000 was paid on 11/08/2017.

b. TDM. CPMC is implementing the enhanced Transportation Demand Management (TDM) Plan. The elements of the TDM program that are being implemented include employee, visitor and patient parking management, transit subsidies, pre-tax commute benefit program, carpool, carshare, bicycle, emergency ride and courtesy ride home programs. See Attachment 5.

4. PAYMENT SCHEDULE AND REIMBURSEMENT OF CITY COSTS

a. Payments. CPMC has made all required payments to date. Attachment 2 outlines CPMC compliance with all of its payment obligations, including payment obligations under Exhibit F Healthcare Program, and as further described in Attachment 1, Healthcare Compliance Report.

b. Reimbursements. CPMC has made all required reimbursement payments. In calendar year 2017, The City (OEWD, City Attorney and the Planning Department) invoiced CPMC a total of $181,268.25. (Jan.-Dec.) Said sum was paid in full. See Attachment 2.

5. INSTITUTIONAL MASTER PLAN UPDATE

The Development Agreement provides that the Compliance Statement generally satisfies the requirements for and is submitted in lieu of any IMP Update otherwise required pursuant to Planning Code Section 304.5(b). The Compliance Statement and this Agreement shall also satisfy the requirements of Health Commission Resolution No. 02-10.

a. Property Transactions. In December of 2017 the sale of 2395 Sacramento Street was completed. The City consented to the Assignment and Assumption Agreement entered into by CPMC in connection with this transfer.

Sutter Health
CPMC
We Plus You

ATTACHMENT 1
Compliance Statement Summary and Healthcare Compliance Report

CPMC Development Agreement

DA Compliance Statement Summary

Fiscal Year 2017

Item	Section	Commitment	Commitment Start Date[1]	Commitment End Date	Compliance Statement	Supporting Documentation
Compliance Statement	DA 8.2.1	Within 150 days following the end of year, CPMC shall provide a report to the Planning Director showing compliance, if and to the extent required under this Agreement, with (i) the Hospital Commitment, (ii) each of the Community Commitments, including the Healthcare Compliance Report and (iii) the provisions of this Agreement regarding reimbursement of City Costs.	11/08/2013	11/08/2023	In compliance. Compliance Statement submitted 5/31/17	Compliance Statement and Attachments 1-5
Construction Schedule	DA 4.2.3	Keep the City informed of progress in satisfying the Hospital Commitment by reporting to the City on the timing and progress of the construction at the St. Luke's Campus and the Van Ness and Geary Campus	11/08/2013	11/08/2023	In compliance. Both VN and STL projects on schedule	Compliance Statement, Construction Schedules
Milestone Completion Notice	DA 4.2.3	Provide notice to the City confirming the completion of milestones	11/08/2013	11/08/2019	In compliance. No milestones in 2017	Compliance Statement
Schedule and Phasing Milestone Table	Exhibit C	Update Milestone Table with schedule and phasing updates as information becomes availble	11/08/2013	11/08/2019	In compliance. Construction schedule/phasing table is current	Compliance Statement, Milestone Table
First Source Entry Level Hiring	Exhibit E C.3	Good faith efforts to fill 40% of available entry level positions with System Referrals	11/08/2013	11/08/2023	In complaince at 58%. CPMC, in coordination with OEWD, is making the required good faith efforts regarding the First Source Entry Level Hiring Goal	Compliance Statement Attachment 3
Workforce Training Payment	Exhibit E D	Provide $1,000,000 to the City as a contribution to the City's programs that provide workforce training to economically disadvantaged residents. Such payments shall be payable as follows: $1,000,000 paid to OEWD within thirty days after the Effective Date, and managed by OEWD/CityBuild. The remainder of $3,000,000 shall be paid to the San Francisco Foundation in accordance with Payment Schedule, Exhibit N	11/08/2013	11/08/2014	In compliance	Compliance Statement Attachment 2
Construction Hiring	Exhibit E A.5a	Good faith efforts to fill 50% of new entry-level positions for non-union administrative and engineering candidates	11/08/2013	11/08/2023	In compliance, 83%	Compliance Statement, Attachment 4
Construction Hiring	Exhibit E A.5b	Good faith efforts to fill 50% of new entry-level positions for administrative and engineering internship candidates	11/08/2013	11/08/2023	In compliance, 60%	Compliance Statement, Attachment 4
Construction Hiring	Exhibit E A.5d	Good faith efforts to fill 30% of trade hours worked by new and core opportunities for union journeymen and apprentices	11/08/2013	11/08/2023	In compliance, 25%	Compliance Statement, Attachment 4
Construction Hiring	Exhibit E A.6e	Good faith efforts to fill 21% of hours for new union apprentices by System Referrals	11/08/2013	11/08/2023	In compliance, 36%	Compliance Statement, Attachment 4
Construction Hiring	Exhibit E A.7b	Good faith efforts to fill 50% of new Entry-Level Positions for union apprentice candidates	11/08/2013	11/08/2023	In compliance, 30%	Compliance Statement, Attachment 4
Construction	Exhibit E B.4	Good faith effort to Contract with Local Business Enterprises 14% of the value of all Contracts	11/08/2013	11/08/2023	In compliance, 17% or $204,586,409 total	Compliance Statement, Attachment 4
Construction	Exhibit E B.4b(i)	Create Workforce Development Group	11/08/2013	11/08/2023	In compliance. Conducted various meetings between CityBuild, trade partners, CPMC/Sutter (see Attachment 4)	Compliance Statement, Attachment 4
Community Health Program	Exhibit F	23 various commitments	Varies	Varies	In compliance. $1.125M paid 11/8/17. See following pages	Compliance Statement, Attachment 1
Housing Program	Exhibit G	City replacement fees for demolition of existing residential units at the site of the Cathedral Hill MOB and Affordable Housing payments	11/08/2013	11/08/2017	In compliance, $3.475M paid 11/8/17	Compliance Statement, Attachment 2
Public Improvements	Exhibit H	Public Improvements and pedestrian safety measures	11/08/2013	11/08/2016	In compliance, no payments due	Compliance Statement, Attachment 2
Transportation Progran	Exhibit K	Payments for transit improvements	11/08/2013	11/08/2023	In compliance, $2.500M paid 11/8/17	Compliance Statement, Attachments 2 and 5
Payment Schedule and Reiumbursement of City Costs	DA 4.7	Pay City costs incurred for review of annual DA compliance	11/08/2013	11/08/2023	In compliance, $181,268 paid in 2017	Compliance Statement, Attachment 2
Institutional Master Plan Update	DA 8.2.1	Compliance Statement satisfies the requirements for and is submitted in lieu of IMP Update	11/08/2013	11/08/2023	In compliance. Notified City of 2395 Sacramento Street transaction	Compliance Statement, IMP Update

[1] 8/10/2013 indicates commitments on the Development Agreement Effective Date
11/8/2013 indicates commencement on the date Approvals were Finally Granted

CPMC Development Agreement

Healthcare Compliance Report

Fiscal Year 2017

Item	Section	Commitment	Commitment Start Date[1]	Commitment End Date	Compliance Statement	Supporting Documentation
Baseline Commitment	1a	Unduplicated Patient Commitment: Care for a total of not less than 30,445 Unduplicated Patients.	11/08/2013	11/08/2023	In compliance. CPMC served a total of 39,569 Unduplicated Patients between 1/1/2017 and 12/31/2017. This is a surplus of 9,123 Unduplicated Patients for 2017.	Deloitte & Touche Report
	1a	Baseline Expenditure Commitment: Spend at least $8,000,000 for Community Benefits in San Francisco.	11/08/2013	11/08/2023	In compliance. CPMC substantially exceeded the $8,000,000 Baseline Expenditure Commitment. In 2017 CPMC spent a total of $12,503,772 for Community Benefits in San Francisco.	Deloitte & Touche Report
	1d	Transition to Affordable Care Act: Maintain Charity Care policies through 12/31/2015 that are no more restrictive than Charity Care policies in fiscal year 2011.	11/08/2013	12/31/2015	Commitment completed.	
	1d	Transition to Affordable Care Act: Ensure Charity Care policies comply with California law and do not deny Charity Care patients access to inpatient services.	01/01/2016	11/08/2023	In compliance. CPMC maintained Charity Care policies that comply with California law and ensured access to Charity Care patients to inpatient services.	2017 Charity Care Policy
	1e	Bayview Child Health Center: Provide financial and operational support for comprehensive pediatric primary care to residents of the Bayview area through the Center in a manner and amount generally consistent with the level of support in fiscal year 2011-2012.	11/08/2013	11/08/2023	In compliance. CPMC provided financial and operational support for the Bayview Child Health Center consistent with 2011-2012 levels. In November 2013, South of Market Health Center (SMHC), in collaboration with CPMC and the Sutter Pacific Medical Foundation, received funding from the federal Health Resources and Services Administration to transfer ownership of the Bayview Child Health Center to SMHC. The transfer was effective 9/1/14. The Development Agreement provides that CPMC may "sell, lease or transfer programs, services or service lines to meet evolving community needs, operational cost-effectiveness, or quality standards." CPMC provided the following support to the SMHC and the clinic as part of the Baseline Commitment in the Development Agreement: 1. Financial support through an operations grant each year for five years as the clinic becomes sustainable under the Federally Qualified Health Center model; 2. Leased the former BCHC Medical Director to SMHC through the end of 2015 to promote continuity of care; 3. Transferred all assets to SMHC at no cost; 4. Invested over $1,000,000 in tenant improvements to bring the clinic to OSHPD 3 compliance; and, 5. Remains the clinic's specialty and hospital partner-- providing Bayview children with comprehensive services across the care continuum.	
	2a	Continue to participate with a standard services agreement in the San Francisco Health Plan Medi-Cal managed care program in accordance with Section 2b.	08/10/2013	08/10/2023	In compliance. CPMC continues to have a standard services agreement with San Francisco Health Plan.	
	2b	Accept responsibility for providing hospital services for 5,400 additional Medi-Cal managed care beneficiaries and shall remain open to accepting all New Enrollees until the 5,400 additional Medi-Cal managed care beneficiaries are enrolled.	08/10/2013	08/10/2023	In compliance. CPMC met the 5,400 additional Medi-Cal beneficiaries commitment in 2014 and continues to exceed it. As of December 2017, CPMC had a total 32,739 Medi-Cal managed care beneficiaries enrolled in its partnership, which exceeds the development agreement commitment by 15,199 beneficiaries.	San Francisco Health Plan Capitation Report

Item	Section	Commitment	Commitment Start Date[1]	Commitment End Date	Compliance Statement	Supporting Documentation
New Medi-Cal Beneficiaries Commitment	2f	Contract with at least 2 management services organizations (MSO) or equivalent participating in the Medi-Cal program. If an MSO becomes available with a primary care provider base in the Tenderloin before 12/31/2015, CPMC must contract with the MSO to care for 1,500 new enrollees.	08/10/2013	12/31/2015.	In compliance. There continues to be no available MSO with a primary care provider based in the Tenderloin and despite efforts by CPMC to support the creation of one, it was deemed financially unfeasible by clinic partners. CPMC is contracted with one MSO, North East Medical Services, and worked with NEMS and St. Anthony's Clinic, a primary care provider in the Tenderloin, to have St. Anthony's join the NEMS MSO. Thus, through forging this new partnership CPMC is the hospital partner for one of St. Anthony's participating medical groups and will work with them to grow enrollment to 1,500 members. CPMC continues to work with St. Anthony's leadership to develop a path to sustainability and support outreach efforts, funded through the Healthcare Innovation Fund. To date, St. Anthony's conducts ongoing outreach events to Tenderloin residents through the St. Anthony's Dining Room, Tenderloin family serving providers, Project Homeless Connect and enhanced Medi-Cal eligibility screening and enrollment at the clinic.	
Innovation Fund	3a	Executed Innovation Fund Agreement in the form provided with The San Francisco Foundation. Create a committee of fund advisors to advise the Innovation Fund Foundation.	08/10/2013	10/07/2017	In compliance. CPMC executed the agreement with The San Francisco Foundation. The Committee was formed and CPMC continues to participate via an appointed a member to provide disbursement advice.	
	3b	CPMC shall pay to the Innovation Fund Foundation $8,600,000 in accordance with Exhibit N.	08/10/2013	10/07/2017	In compliance. Per Exhibit N, CPMC paid the Innovation Fund $1,125,000 in 2017. The payment was made on time.	Innovation Fund Report.
	3c	Distribution of the Innovation Fund	08/10/2013	10/07/2017	In compliance. See Innovation Fund Report for distributions made in 2017.	Innovation Fund Report.
Sub-Acute Care Services	4	CPMC shall work with SFDPH and other hospital operators in good faith to develop specific proposals for providing Sub-Acute Care Services in San Francisco and present to the Health Commission by 6/30/2014, or such date as the participating hospitals and the Health Commission determine.	08/10/2013	06/30/2014 or such date as participating hospitals and Health Commission determine	In compliance. CPMC engaged a consultant and worked with hospitals, post acute providers and city departments to conduct a comprehensive assessment of the post acute care landscape in San Francisco, including sub acute services. The report included specific recommendations to meet the post acute, including sub acute, care needs in San Francisco. CPMC and the team presented the report to the Health Commission on 2/16/2016. CPMC and the other San Francisco hospitals have convened a Post Acute Care Collaborative to work towards implementing recommendations outlined in the report.	
Hospitals at the St. Luke's and Cathedral Hill Campuses	5a	St. Luke's Campus Hospital will be a 120-bed General Acute Care Hospital with comprehensive emergency services.	Within 24 months of the Opening of Cathedral Hill Hospital.	10 years	In compliance. CPMC expects to meet the St. Luke's Campus Hospital Opening Commitment. See Development Agreement Compliance Statement for construction and Milestone timeline. CPMC noticed the Health Commission of closures, eliminations or reductions in the level of service provided, and transfers management through the city's Proposition Q process. CPMC is not including services that are moving between CPMC campuses or consolidating at a CPMC campus.	
	5b	Additional 30 bed Space: The "shelled" space at Cathedral Hill Campus Hospital shall not be built-out for and placed into operation 30 licensed acute care beds until after the St. Luke's Campus Hospital is opened and has a daily census as outlined in Section 5b of Exhibit F.	Refer to Section 5b of Exhibit F.	10 years	Not yet applicable. Subject to completion of Cathedral Hill Campus Hospital and St. Luke's Campus Hospital utilization.	
	6a(i)	Provide the services listed in Section 6aiA-C at St. Luke's Campus Hospital.	Opening of St. Luke's Campus Hospital.	10 years	Not yet applicable. Obligation commences after St. Luke's Campus Hospital Opens.	
	6a(ii)	Establish, operate, and maintain a Center of Excellence in Community Health at the St. Luke's Campus.	Opening of St. Luke's Campus Hospital.	10 years	Not yet applicable. Obligation commences after St. Luke's Campus Hospital Opens.	

Item	Section	Commitment	Commitment Start Date[1]	Commitment End Date	Compliance Statement	Supporting Documentation
St. Luke's Campus	6a(iii)	Establish, operate, and maintain a Center of Excellence in Senior Health at the St. Luke's Campus.	Opening of St. Luke's Campus Hospital.	10 years	Not yet applicable. Obligation commences after St. Luke's Campus Hospital Opens.	
	6b	St. Luke's Campus Medical Office Building: CPMC shall submit a proposal for development at the St. Luke's Campus Medical Office Building to the Sutter West Bay Board or give the City the option if construction has not started within 5 years after the Opening of the St. Luke's Campus Hospital.	Refer to Section 6b(i)	10/08/2023	Not yet applicable. Obligation commences after St. Luke's Campus Hospital Opens.	
Integration of St. Luke's Medical Staff and Patient Quality Outcomes	7	CPMC shall continue its good faith efforts at the clinical integration of medical staffs at the St. Luke's Campus, with the medical staffs at its other campuses, and on quality improvement initiatives for the purpose of improving patient quality of care at all of the CPMC Campuses.	10/08/2013	10/08/2023	Commitment completed in 2016. CPMC now has a single medical staff at all four campuses, including St. Luke's. The integration of medical staff was complete following votes in 2016 of the St. Luke's and CPMC medical staffs, and approval of the hospital's Board. CPMC's quality improvement inititiatives are also run across the four campuses.	
Participation in the Community Benefits Partnership	8	CPMC shall continue to actively participate in the Community Benefits Partnership, or its successor, to prepare a community benefit plan for submittal to OSHPD.	10/08/2013	10/08/2023	In compliance. CPMC actively participated in the Building a Healthier San Francisco (BHSF) Task Force and needs assessment process for submission to OSHPD. CPMC also actively participates in BHSF's successor, San Francisco Health Improvement Partnership (SFHIP) and the needs assessment process.	
Service Agreements with Chinese Hospital	9	CPMC shall continue to provide pediatric, obstetric, and certain tertiary services to Chinese Hospital patients in a manner generally consistent with existing service agreements.	08/10/2013	08/10/2023	In compliance. During the period covered by this report, CPMC has continued to provide services generally consistent with existing service agreements. CPMC maintained its agreement with Chinese Community Health Plan (CCHP) for their Commercial HMO population and added a new contract in 2014 for their Covered California population. CPMC also maintained its longstanding Transfer Agreement and contract for high risk OB/GYN care with Chinese Hospital.	
Culturally and Linguistically Appropriate Services	10	CPMC shall deliver at all campuses culturally and linguistically appropriate services that are representative of San Francisco's diverse communities and are in accordance with the mandates, guidelines and recommendations of the National Standards on Culturally and Linguistically Appropriate Services (CLAS).	08/10/2013	08/10/2023	In compliance. CPMC delivers services at all campuses that are culturally and linguistically appropriate and in accordance with the mandates, guidelines, and recommendations of the National Standards on Culturally and Linguistically Appropriate Services (CLAS). In 2015 CPMC conducted a CLAS Assessment and provided the assessment to DPH in September 2015. CPMC continued efforts to implement assessment recommendations and improve cultural and linguistic access to services across our four campuses.	CLAS Report
City Health Services System	11	For the period from 1/1/2014 to 12/31/2016, the negotiated fee for service increase for CPMC shall not exceed 5% annually as compared to the prior calendar year fee for service rates, and for the following 7 years CPMC shall limit annualized increases to no more than the Medical Rate of Inflation plus 1.5%.	01/01/2014	12/31/2024	In compliance. The negotiated fee for service rates in 2017 are at or below a the Medical Rate of Inflation plus 1.5% as compared to 2016. The independent actuary report verified the 2015 compiance with this provision. The City formally requested the independent actuary verification for 2016 and 2017 and this work is in process.	

[1] 8/10/2013 indicates commitments on the Development Agreement Effective Date
11/8/2013 indicates commencement on the date Approvals were Finally Granted

[2] There is a clerical error at the end of Sec.2.b. of Exhibit F, in that the number of existing enrollees as of January 1, 2012, should be stated to be 12,140, rather than 14,850. CPMC would suggest that this figure be corrected for future reference. The 14,850 figure referenced in the Development Agreement double counts Healthy Families members-- including Healthy Families as a separate count and as part of the Medi-Cal enrollees. This clerical correction does not affect CPMC's New Medi-Cal Beneficiaries Commitment, which remains at 5,400.

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EXHIBIT A

Deloitte.

Deloitte & Touche LLP
555 Mission St
San Francisco CA 94105
USA

Tel: +1 415 783 4000

www.deloitte.com

April 2, 2018

Mr. Henry Yu
CFO California Pacific Medical Center (CPMC)
2351 Clay Street
San Francisco, CA 94115

Dear Mr. Yu:

In accordance with our statement of work ("SOW") dated March 30, 2017, this report summarizes the results of the assessment of unduplicated patients performed by Deloitte & Touche LLP ("Advisor" or "we" or "us") as requested by Sutter Health for its subsidiary California Pacific Medical Center (collectively "Company" or "Sutter" or "CPMC").

At your request, we performed an assessment of the unduplicated patients to be reported by CPMC to the City of San Francisco related to the entitlement CPMC is seeking from the City of San Francisco to build a new hospital on the CPMC campus. This assessment of unduplicated patients, as defined in the agreement between CPMC and the City of San Francisco, included evaluating whether the number of unduplicated patients treated at the following CPMC campuses: California, Davies, Pacific and St. Luke's, from the period of January 1st, 2017 to December 31st, 2017, reasonably represents and are supported by CPMC's Patient Accounting records.

Our procedures included the following:

• Advisor conducted interviews with business managers to understand the process and calculations of unduplicated patients to identify Medi-Cal and Charity Care patients, and consider whether the process is consistent with the prior year and as previously understood by Advisor.

• Advisor obtained from CPMC the patient details from the period for Medi-Cal and Charity Care patients and performed data analytics on the received data to determine the number of unduplicated Medi-Cal and Charity Care patients.

• Advisor performed data analysis on the unduplicated patient listings, starting with raw data extracted from the patient accounting system, to evaluate whether duplicate patients are included in the listings for calendar year 2017.

• Advisor selected a random sample of 25 patients from calendar year 2017 and evaluated supporting documentation provided by CPMC that supports CPMC's classification of the patient as a Medi-Cal or Charity Care recipient.

• Advisor's methodology used in the procedures were consistent with those used in the review of the baseline periods for calendar years 2009 through 2012.

This report is intended solely for the information and internal use of Sutter Health and its subsidiary California Pacific Medical Center, and should not be used or relied upon by any other person or entity.

CPMC is subject under the Development Agreement to an "Unduplicated Patient Commitment" of 30,446 Unduplicated Patients (as defined.) This amount is not to include utilization attributable to the 5,400 additional "New Beneficiaries Commitment." It is our understanding that CPMC and the City of San Francisco have agreed to an adjustment of 837 unduplicated patients as the number necessary to exclude the utilization of the 5,400 additional Medi-Cal managed care enrollees from the commitment.

Based on the procedures performed above, the total unduplicated patient count is 40,406. With the subtraction of the agreed 837 unduplicated patients, the allowable number of unduplicated patients for 2017 is 39,569, representing a surplus of 9,123 for 2017. This net unduplicated patient count developed by CPMC appears reasonable and reflects the number of Medi-Cal and Charity Care patients treated the period of January 1, 2017 to December 31, 2017 at the California, Davies, Pacific and St. Luke's campuses of CPMC as reflected in the CPMC Patient Accounting records.

****

Advisor did not make any management decisions, perform any management functions, or assume any management responsibilities. Our observations and recommendations are based solely on the results of our assessment of the unduplicated patient listings. Our services were performed in accordance with the Statement on Standards for Consulting Services that is issued by the American Institute of Certified Public Accountants. We are providing our observations, advice, and recommendations. However, our services do not constitute an engagement to provide audit, compilation, review, or attestation services as described in the pronouncements on professional standards issued by the American Institute of Certified Public Accountants, and, therefore, we do not express an opinion or other form of assurance with respect to our services.

In addition, we did not provide any legal advice regarding our services nor did we provide any assurance regarding the outcome of any future audit or regulatory examination or other regulatory action; the responsibility for all legal issues with respect to these matters, such as reviewing all deliverables and work product for any legal implications to CPMC, is CPMC's. It is further understood that CPMC management has responsibility for, among other things, identifying and ensuring compliance with laws and regulations applicable to CPMC's activities and for establishing and maintaining effective internal control to assure such compliance. CPMC has responsibility for reviewing and approving any reports and/or deliverables.

Advisor's services may include advice and recommendations, but all decisions in connection with the implementation of such advice and recommendations is the responsibility of, and made by, CPMC.

In connection with this assessment, CPMC has informed Advisor that the Company has been requested by the City of San Francisco (the "Recipient") to provide it with a paper copy or portable document format (PDF) of the Deliverable for informational purposes. Advisor hereby authorizes CPMC to provide the Recipient with a copy of this report ("Deliverable") for such purpose. CPMC acknowledges and agrees that Advisor has no responsibility to CPMC with respect to the provision of this Deliverable to the Recipient or with respect to its contents.

CPMC acknowledges that neither the services nor the Deliverable express or will express an opinion or any other form of assurance. The engagement is limited in nature and does not comprehend all matters relating to CPMC that might be pertinent or necessary to CPMC or the Recipient. CPMC acknowledges that it is solely responsible for providing accurate and complete information requested by Advisor for its services under the Engagement Letter dated November 22, 2013 and the corresponding Statement of Work dated March 30, 2017. The Deliverable may not address all the questions that the Recipient may have. The Deliverable cannot be relied on to disclose errors or fraud should they exist. The Deliverable also may

contain sensitive and candid comments about CPMC, Sutter or the engagement that may be subject to interpretation.

Very truly yours,

Deloitte & Touche LLP

By:

Ed Byers
Principal

This report is intended solely for the information and internal use of Sutter Health and its subsidiary California Pacific Medical Center, and should not be used or relied upon by any other person or entity.

Sutter Health
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EXHIBIT B

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April 2, 2018

Mr. Henry Yu
CFO California Pacific Medical Center (CPMC)
2351 Clay Street
San Francisco, CA 94115

Dear Mr. Yu:

In accordance with our statement of work ("SOW") dated March 30, 2017, this report summarizes the results of the assessment of community benefits expense performed by Deloitte & Touche LLP ("Advisor" or "we" or "us") as requested by Sutter Health for its subsidiary California Pacific Medical Center ("Company" or "Sutter" or "CPMC").

At your request, we performed an assessment of the processes and internal controls over the recording of "community benefit" Category 3 costs, including a reconciliation of incurred costs from the period of January 1st, 2017 to December 31st, 2017 and whether they meet, at a minimum, the $8,000,000 threshold established by the city of San Francisco. The assessment also included an analysis to determine that the expense items and their categories align to community health benefits category guidelines from the City of San Francisco.

Our procedures included the following:

- Advisor reviewed the Community Healthcare Program contract to understand the contractual requirements between CPMC and the City of San Francisco. Advisor also reviewed the city guidelines charter to determine what expenses can and should be considered Category 3 expenses as defined in the Catholic Health Association of the United States publication, A Guideline for Planning and Reporting Community Benefits (CBISA).

- Advisor obtained the list of expenses from CPMC under the Community Health Benefits expense categories and gained an understanding of the process for recording costs. We evaluated the data for reasonableness through walkthroughs and assessment of written processes of accounting for program funding and costs.

- Leveraging the full list of community benefit expenses (reported as $12,503,772), Advisor then performed the following procedures:
  - Selected individual projects, which in summary exceeded $8,000,000.
  - Obtained transaction detail for each of these individual projects.
  - Selected 45 random transaction samples across the projects and performed the following procedures:

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- Compared the accuracy and completeness of the costs to the supporting documentation (e.g., accounting data, checks, invoices, etc.).
- Assessed whether each of these 45 samples were valid category 3 CBISA expenses.

Based on the procedures performed above, the community health benefits expenses incurred by CPMC appear reasonable and reflect that at least the minimum amount of USD $8,000,000 was spent on valid community health benefits program as required by the City of San Francisco.

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Advisor did not make any management decisions, perform any management functions, or assume any management responsibilities. Our observations and recommendations are based solely on the results of our assessment of the unduplicated patient listings. Our services were performed in accordance with the Statement on Standards for Consulting Services that is issued by the American Institute of Certified Public Accountants. We are providing our observations, advice, and recommendations. However, our services do not constitute an engagement to provide audit, compilation, review, or attestation services as described in the pronouncements on professional standards issued by the American Institute of Certified Public Accountants, and, therefore, we do not express an opinion or other form of assurance with respect to our services.

In addition, we did not provide any legal advice regarding our services nor did we provide any assurance regarding the outcome of any future audit or regulatory examination or other regulatory action; the responsibility for all legal issues with respect to these matters, such as reviewing all deliverables and work product for any legal implications to CPMC, is CPMC's. It is further understood that CPMC management has responsibility for, among other things, identifying and ensuring compliance with laws and regulations applicable to CPMC's activities and for establishing and maintaining effective internal control to assure such compliance. CPMC has responsibility for reviewing and approving any reports and/or deliverables.

Advisor's services may include advice and recommendations, but all decisions in connection with the implementation of such advice and recommendations is the responsibility of, and made by, CPMC.

In connection with this assessment, CPMC has informed Advisor that the Company has been requested by the City of San Francisco (the "Recipient") to provide it with a paper copy or portable document format (PDF) of the Deliverable for informational purposes. Advisor hereby authorizes CPMC to provide the Recipient with a copy of this report ("Deliverable") for such purpose. CPMC acknowledges and agrees that Advisor has no responsibility to CPMC with respect to the provision of this Deliverable to the Recipient or with respect to its contents.

CPMC acknowledges that neither the services nor the Deliverable express or will express an opinion or any other form of assurance. The engagement is limited in nature and does not comprehend all matters relating to CPMC that might be pertinent or necessary to CPMC or the Recipient. CPMC acknowledges that it is solely responsible for providing accurate and complete information requested by Advisor for its services under the Engagement Letter dated November 22, 2013 and the corresponding Statement of Work dated March 30, 2017. The Deliverable may not address all the questions that the Recipient may have. The Deliverable cannot be relied on to disclose errors or fraud should they exist. The Deliverable also may contain sensitive and candid comments about CPMC, Sutter or the engagement that may be subject to interpretation.

Very truly yours,

Deloitte & Touche LLP

By:

Ed Byers
Principal

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EXHIBIT C

	DRAFT POLICY DATE Effective Date: Final Approved Date: Revised Date: Next Review Date:	11/18//28/2015 01/01/2016 12/31/2015 1/1/2019
	Owner:	Jeff Sprague, CFO
	Policy Area:	Finance
Finance Policy: Supersedes Policy	References:	

POLICY ON FINANCIAL ASSISTANCE (CHARITY CARE)

PURPOSE

The purpose of the policy is to provide patients with information on the Financial Assistance (Charity Care) available at Sutter Health hospital facilities and to outline the process for determining eligibility for Financial Assistance.

POLICY

It is the policy of Sutter Health to provide patients with understandable written information regarding Financial Assistance to provide income-based Financial Assistance (Charity Care) to qualified patients.

SCOPE

This policy applies to all licensed hospital facilities operated by Sutter Health or an Affiliated Entity (as that term is defined in the bylaws of Sutter Health), and all other hospitals in which Sutter Health and/or an Affiliated Entity has a direct or indirect voting control or equity interest of greater than 50% (hereafter referred to as "Hospital" or "Sutter Health Hospitals" (as listed in Appendix G). Unless otherwise specified, this policy does not apply to physicians or other medical providers, including emergency room physicians, anesthesiologists, radiologists, hospitalists, pathologists, etc., whose services are not included in a Hospital's bill. This policy does not create an obligation for the Hospital to pay for such physicians' or other medical providers' services. In California, an emergency physician who provides emergency services in a hospital is required to provide discounts to uninsured patients or patients with high medical costs who are at or below 350 percent of the federal poverty level.

DEFINITIONS

Complex/Specialized Services: "Complex/Specialized Services" are services that Sutter Health or a Hospital determines are complex and specialized (e.g., transplants, experimental and investigational services) as well as certain elective services that are typically excluded from coverage under health plan coverage agreements (e.g., cosmetic procedures).

Federal Poverty Level (FPL): The "Federal Poverty Level" of "FPL" is the measure of income level that is published annually by the United States Department of Health and Human Services (HHS) and is used by Hospitals for determining eligibility for Financial Assistance.

Financial Assistance: "Financial Assistance" refers to Full Charity Care and High Medical Cost Charity Care (as outlined in section A.1 Eligibility).

Hospital Services: "Hospital Services" are all services that a Hospital is licensed to provide, including emergency and other medically necessary care (excluding Complex/Specialized Services).

Primary Language of Hospital's Service Area: A "Primary Language of Hospital's Service Area" is a language used by the lesser of 1,000 people or 5% of the community served by the Hospital based upon the most recent Community Health Needs Assessment performed by Hospital.

Uninsured Patient: An "Uninsured Patient" is a patient who has no third-party source of payment for any portion of their medical expenses, including without limitation, commercial or other insurance, government sponsored healthcare benefit programs, or third party liability, and includes a patient whose benefits under all potential sources of payment have been exhausted prior to an admission.

Insured Patient: An "Insured Patient" is a patient who has a third-party source of payment for a portion of their medical expenses, but excludes patients who are covered by Medi-Cal.

Patient Responsibility: "Patient Responsibility" is the amount that an Insured Patient is responsible to pay out-of-pocket after the patient's third-party coverage has determined the amount of the patient's benefits.

PROCEDURES

A. ELIGIBILITY

1. Eligibility Criteria: During the application process set forth in sections B and C below, Hospitals shall apply the following eligibility criteria for Financial Assistance:

Financial Assistance Category	Patient Eligibility Criteria	Available Discount
FULL CHARITY CARE	Patient is an Uninsured Patient with a Family Income (as defined below) at or below 400% of the most recent FPL	Full write off of all charges for Hospital Services
HIGH MEDICAL COST CHARITY CARE (for Insured Patients)	1. Patient is an Insured Patient with a Family Income (as defined below) at or below 400% of the most recent FPL; **and** 2. Medical expenses for themselves or their family (incurred at the Hospital or paid to other providers in the past 12 months) exceed 10% of the patient's Family Income.	A write off of the Patient Responsibility amount for Hospital Services

2. Calculating Family Income: To determine a patient's eligibility for Financial Assistance, the Hospital shall first calculate the patient's Family Income, as follows:

    a) Patient Family: The Patient Family shall be determined as follows:

        (i) Adult Patients: For patients over 18 years of age, the Patient Family includes their spouse, domestic partner, and dependent children less than 21 years of age, whether living at home or not.

        (ii) Minor Patients: For patients under 18 years of age, the Patient Family includes their parents, caretaker relatives, and other children less than 21 years of age of the parent(s) or caretaker relatives.

    b) Proof of Family Income: Patient shall only be required to provide recent pay stubs or tax returns as proof of income. Family Income is annual earnings of all members of the Patient Family from the prior 12 months or prior tax year as shown by the recent pay stubs or income tax returns, less payments made for alimony and child support. Income included in this calculation is every form of income, e.g., salaries and wages, retirement income, near cash government transfers like food stamps, and investment gains. Annual income may be determined by annualizing year-to-date Family Income. Sutter may validate income by using external presumptive eligibility service providers. provided that such service only determines eligibility using only information permitted by this policy.

    c) Calculating Family Income for Expired Patients: Expired patients, with no surviving spouse, may be deemed to have no income for purposes of calculation of Family Income. Documentation of income is not required for expired patients; however, documentation of estate assets may be required. The surviving spouse of an expired patient may apply for Financial Assistance

3. Calculating Family Income as a Percentage of FPL: After determining Family Income, Hospital shall calculate the Family Income level in comparison to the FPL, expressed as a percentage of the FPL. For example, if the federal poverty level for a family of three is $20,000, and a patient's Family Income is $60,000, the Hospital shall calculate the patient's Family Income to be 300% of the FPL. Hospitals shall use this calculation during the application process to determine whether a patient meets the income criteria for Financial Assistance.

4. Special Circumstance – Benefits Exhausted During Inpatient Stay: When an Insured Patient's third-party coverage pays only a portion of the expected reimbursement for the patient's stay because the patient exhausted their benefits during the stay, the Hospital should collect from the patient the balance of the expected reimbursement that would have been due from the third-party coverage if the benefits were not exhausted. A Hospital shall not pursue from the patient any amount in excess of the amount that would have been due from the third-party coverage if the benefits were not exhausted, plus the patient's share of cost or co-insurance. A patient who exceeded their benefit cap during a stay is eligible to apply for Financial Assistance. If the patient is eligible for Financial Assistance, the Hospital shall write off all charges for services that the Hospital provided after the patient exceeded the benefit cap.

5. Financial Assistance Exclusions/Disqualification: The following are circumstances in which Financial Assistance is not available under this policy:

a) Uninsured Patient seeks Complex/Specialized Services: Generally, Uninsured Patients who seek Complex/Specialized services (e.g. transplants, experimental or investigational procedures), and seek to receive Financial Assistance for such services, must receive administrative approval from the individual responsible for finance at the Hospital (or designee) prior to the provision of such services in order to be eligible for Financial Assistance. Hospitals shall develop a process for patients to seek prior administrative approval for services that require such approval. Elective services that are normally exclusions from coverage under health plan coverage agreements (e.g., cosmetic procedures) are not eligible for Financial Assistance.

b) Medi-Cal Patients with Share of Cost: Medi-Cal patients who are responsible to pay share of cost are not eligible to apply for Financial Assistance to reduce the amount of Share of Cost owed. Hospitals shall seek to collect these amounts from the patients.

c) Patient declines covered services: An Insured Patient who elects to seek services that are not covered under the patient's benefit agreement (such as an HMO patient who seeks out-of-network services from Sutter, or a patient refuses to transfer from a Sutter hospital to an in-network facility) is not eligible for Financial Assistance

d) Insured Patient does not cooperate with third-party payer: An Insured Patient who is insured by a third-party payer that refuses to pay for services because the patient failed to provide information to the third-party payer necessary to determine the third-party payer's liability is not eligible for Financial Assistance.

e) Payer pays patient directly: If a patient receives payment for services directly from an indemnity, Medicare Supplement, or other payer, the patient is not eligible for Financial Assistance for the services.

f) Information falsification: Hospitals may refuse to award Financial Assistance to patients who falsify information regarding Family Income, household size or other information in their eligibility application.

g) Third party recoveries: If the patient receives a financial settlement or judgment from a third-party tortfeasor that caused the patient's injury, the patient must use the settlement or judgment amount to satisfy any patient account balances, and is not eligible for Financial Assistance.

h) Professional (physician) Services: Services of physicians such as anesthesiologists, radiologists, hospitalists, pathologists, etc. are not covered under this policy. Any exceptions are set forth in Exhibit A. Many physicians have charity care policies that allow patients to apply for free or discounted care. Patients should obtain information about a physician's charity care policy directly from their physician.

B. APPLICATION PROCESS

1. Each Hospital shall make all reasonable efforts to obtain from the patient or his or her representative information about whether private or public health insurance may fully or partially cover the charges for care rendered by the Hospital to a patient. A patient who indicates at any time the financial inability to pay a bill for Hospital Services shall be

evaluated for Financial Assistance. In order to qualify as an Uninsured Patient, the patient or the patient's guarantor must verify that he or she is not aware of any right to insurance or government program benefits that would cover or discount the bill. All patients should be encouraged to investigate their potential eligibility for government program assistance if they have not already done so.

2. Patients who wish to apply for Financial Assistance shall use the Sutter Health standardized application form, the "Application for Financial Assistance", Exhibit B.

3. Patients may request assistance with completing the Application for Financial Assistance in person at the Sutter Health Hospitals listed on Exhibit A, over the phone at 855-398-1633, through the mail, or via the Sutter Health website (www.sutterhealth.org).

4. Patients should mail Applications for Financial Assistance to Sutter Health, P. O. Box 619010, Roseville, CA 95661-9998 Attn: Charity Care Application.

5. Patients should complete the Application for Financial Assistance as soon as possible after receiving Hospital Services. Failure to complete and return the application within 240 days of the date the Hospital first sent a post-discharge bill to the patient may result in the denial of Financial Assistance.

C. FINANCIAL ASSISTANCE DETERMINATION

1. The Hospital will consider each applicant's Application for Financial Assistance and grant Financial Assistance when the patient meets the eligibility criteria set forth in section A.1 and has received (or will receive) Hospital Service(s).

2. Patients also may apply for governmental program assistance, which may be prudent if the particular patient requires ongoing services.

    a) The Hospital should assist patients in determining if they are eligible for any governmental or other assistance, or if a patient is eligible to enroll with plans in the California Health Benefit Exchange (i.e. Covered California).

    b) If a patient applies, or has a pending application, for another health coverage program at the same time that he or she applies for Financial Assistance, the application for coverage under another health coverage program shall not preclude the patient's eligibility for Financial Assistance.

3. Once a Full Charity Care or High Medical Cost Charity Care determination has been made, a "Notification Form" (Exhibit D) will be sent to each applicant advising them of the Hospital's decision.

4. Patients are presumed to be eligible for Financial Assistance for a period of one year after the Hospital issues the Notification Form to the patient. After one year, patients must re-apply for Financial Assistance.

5. If the Financial Assistance determination creates a credit balance in favor of a patient, the refund of the credit balance shall include interest on the amount of the overpayment from the date of the patient's payment at the statutory rate (10% per annum) pursuant to Health and Safety Code section 127440, provided that Hospitals are not required to refund a credit balance that is, together with interest, less than five dollars ($5).

D. DISPUTES

A patient may seek review of any decision by the Hospital to deny Financial Assistance by notifying the individual responsible for finance at the Hospital or designee, of the basis of the dispute and the desired relief within thirty (30) days of the patient receiving notice of the circumstances giving rise to the dispute. Patients may submit the dispute orally or in writing. The individual responsible for finance at the Hospital or designee shall review the patient's dispute as soon as possible and inform the patient of any decision in writing.

E. AVAILABILITY OF FINANCIAL ASSISTANCE INFORMATION

1. **Languages**: This Policy shall be available in the Primary Language(s) of Hospital's Service Area. In addition, all notices/communications provided in this section shall be available in Primary Language(s) of Hospital's Service Area and in a manner consistent with all applicable federal and state laws and regulations.

2. **Information Provided to Patients During the Provision of Hospital Services**:

   a) Preadmission or Registration: During preadmission or registration (or as soon thereafter as practicable) Hospitals shall provide all patients with a copy of Exhibit E, which includes a plain language summary of the Financial Assistance policy and also contains information regarding their right to request an estimate of their financial responsibility for services. Hospitals shall identify the department that Patients can visit to receive information about, and assistance with applying for, Financial Assistance.

   b) Financial Assistance Counselors: Patients who may be Uninsured Patients shall be assigned Financial Counselors, who shall visit with the patients in person at the hospital. Financial Counselors shall give such patients a Financial Assistance application, as well as contact information for hospital personnel who can provide additional information about this Financial Assistance policy, and assist with the application process.

   c) Emergency Services: In the case of emergency services, Hospitals shall provide all patients a plain language summary of the Financial Assistance policy as soon as practicable after stabilization of the patient's emergency medical condition or upon discharge.

   d) Applications Provided at Discharge: At the time of discharge, Hospitals shall provide all Patients with a copy of Exhibit E, which includes a plain language summary of the Financial Assistance policy and all Uninsured Patients with applications for Medi-Cal and California Children's Services or any other potentially applicable government program.

3. **Information Provide to Patients at Other Times**:

   a) Contact Information: Patients may call 1-855-398-1633 or contact the Hospital department listed on Exhibit G to obtain additional information about Financial Assistance and assistance with the application process.

   b) Billing Statements: Hospitals shall bill patients in accordance with the Sutter Health Hospital Billing and Collections Policy. Billing statements to patients shall include Exhibit E, which contains a plain language summary of the Financial Assistance policy, a phone number for patients to call with questions about Financial Assistance, and the website address where patients can obtain

additional information about Financial Assistance including the Financial Assistance Policy, a plain language summary of the policy, and the Application for Financial Assistance. A summary of your legal rights is included in Exhibit F, and also included on the patient's final billing statement.

c) Upon Request: Hospitals shall provide patients with paper copies of the Financial Assistance Policy, the Application for Financial Assistance, and the plain language summary of the Financial Assistance Policy upon request and without charge.

4. **Publicity of Financial Assistance Information**:

a) Public Posting: Hospitals shall post copies of the Financial Assistance Policy, the Application for Financial Assistance, and the plain language summary of the Financial Assistance Policy in a prominent location in the emergency room, admissions area, and any other location in the hospital where there is a high volume of patient traffic, including but not limited to the waiting rooms, billing offices, and hospital outpatient service settings. These public notices shall include information about the right to request an estimate of financial responsibility for services.

b) Website: The Financial Assistance Policy, Application for Financial Assistance and plain language summary shall be available in a prominent place on the Sutter Health website (www.sutterhealth.org) and on each individual Hospital's website. Persons seeking information about Financial Assistance shall not be required to create an account or provide any personal information before receiving information about Financial Assistance.

c) Mail: Patients may request a copy of the Financial Assistance Policy, Application for Financial Assistance and plain language summary be sent by mail, at no cost to the Patient.

d) Advertisements/Press Releases: As necessary, and as least on an annual basis Sutter Health will place an advertisement regarding of the availability of Financial Assistance at Hospitals in the principal newspaper(s) in the communities served by Sutter Health, or when doing so is not practical, Sutter will issue a Press Release containing this information, or use other means that Sutter Health concludes will widely publicize the availability of the policy to affected patients in our communities.

e) Community Awareness: Sutter Health will work with affiliated organizations, physicians, community clinics and other health care providers to notify members of the community (especially those who are most likely to require Financial Assistance) about the availability of Financial Assistance.

F. MISCELLANEOUS

1. **Recordkeeping**:
Records relating to Financial Assistance must be readily accessible. Hospital must maintain information regarding the number of Uninsured Patients who have received services from hospital, the number of Financial Assistance applications completed, the number approved, the estimated dollar value of the benefits provided, the number of applications denied, and the reasons for denial. In addition, notes relating to a patient's approval or denial for Financial Assistance should be entered into the patient's account.

2. **Payment Plans**:

Patients may be eligible for a payment plan. Payment plan shall be offered and negiotiated per the Sutter Health Hospital Billing and Collections Policy.

3. **Billing and Collections**:
Hospitals may employ reasonable collection efforts to obtain payment from Patients. Information obtained during the application process for Financial Assistance may not be used in the collection process, either by Hospital or by any collection agency engaged by Hospital. General collection activities may include issuing patient statements, phone calls, and referral of statements have been sent to the patient or guarantor. Affiliates and Revenue Cycle departments must develop procedures to ensure that patient questions and complaints about bills are researched and corrected where appropriate, with timely follow up with the patient. Hospital or collection agencies will not engage in any extraordinary collection actions (as defined by the Sutter Health Hospitals' Billing and Collection Policy). Copies of the Hosptial Billing and Collection policy may be obtained free of charge on the Sutter Health website at www.sutterhealth.org , by calling 855-398-1633 or within the Hospital Patient Registration, Patient Financial Services offices and the emergency department.

4. **Submission to OSHPD**:
Sutter Health Hospitals will submit Financial Assistance policies to the Office of Statewide Planning and Healthcare Development (OSHPD. Policies can be located on the OSHPD website located here: https://syfphr.oshpd.ca.gov/

5. **Amounts Generally Billed:**
In accordance with Internal Revenue Code Section1. 501(r)-5, Sutter adopts the prospective Medicare method for amounts generally billed; however, patients who are eligible for financial assistance are not financially responsible for more than the amounts generally billed because eligible patients do not pay any amount.

REFERENCE

Internal Revenue Code section 501(r)

26 Code of Federal Regulations 1.501(r)-1 through 1.501(r)-7

California Health and Safety Code section 124700 through 127446

This policy is intended to be read with the Sutter Health Billing and ollection Policy (Finance Policy 14-227).

ATTACHMENTS

Exhibit A – Providers Covered and Not Covered by Policy
Exhibit B – Application for Financial Assistance
Exhibit C – Financial Assistance Calculation Worksheet
Exhibit D – Notification Form Sutter Health Eligibility Determination for Charity Care
Exhibit E – Important Billing Information for Patients
Exhibit F – Notice of Rights
Exhibit G – Sutter Health Affiliate Hospitals, Physical Address and Website Address for Financial Assistance

Exhibit A

Providers Covered and Not Covered by Policy

The providers listed at http://www.sutterhealth.org/communitybenefit/financial-assistance.html are **covered** under this Policy.

The providers listed at http://www.sutterhealth.org/communitybenefit/financial-assistance.html that are **NOT covered** under this Policy

Exhibit B
APPLICATION FOR FINANCIAL ASSISTANCE

PATIENT NAME _____
SPOUSE _____
ADDRESS _____
PHONE _____
ACCOUNT# _____ SNN _____ _____

(PATIENT) (SPOUSE)

FAMILY STATUS: List any spouse, domestic partner, or children under the age of 21. If patient is a minor, list all parents, caretaker relatives, and siblings under 21

Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT AND OCCUPATION

Employer: _____ Position:_____

Contact Person & Telephone:

_____

If Self-Employed, Name of Business:

_____

Spouse Employer: _____ Position: _____

Contact Person & Telephone:

_____

If Self-Employed, Name of Business:

_____

CURRENT MONTHLY INCOME

		Patient	Other Family
	Gross Pay (before deductions)		
Add:	Income from Operating Business (if Self-Employed)	_____	_____
Add:	Other Income:		
	Interest and Dividends	_____	_____
	From Real Estate or Personal Property	_____	_____
	Social Security	_____	_____
	Other (specify):	_____	_____
	Alimony or Support Payments Received	_____	_____
Subtract:	Alimony, Support Payments Paid	_____	_____
Equals:	Current Monthly Income	_____	_____
	Total Current Monthly Income (add Patient + Spouse)	_____	_____
	Income from above	_____	_____

FAMILY SIZE

Total Family Members _____
(Add patient, parents (for minor patients), spouse and children from above)

	Yes	No
Do you have health insurance?	☐	☐
Do you have other Insurance that may apply (such as an auto policy)?	☐	☐
Were your injuries caused by a third party (such as during a car accident or slip and fall)?	☐	☐

By signing this form, I agree to allow Sutter Health to check employment for the purpose of determining my eligibility for a financing discount, I understand that I may be required to provide proof of the information I am providing.

_____ _____
(Signature of Patient or Guarantor) (Date)

_____ _____
(Signature of Spouse) (Date)

Exhibit C
FINANCIAL ASSSISTANCE CALCULATION WORKSHEET

Patient Name: _____ Patient Account #: _____
Hospital: _____

Special Considerations/Circumstances: _____
_____
_____
_____

	Yes	No
Does Patient have Health Insurance?	☐	☐
Is Patient Eligible for Medicare?	☐	☐
Is Patient Eligible for Medi-Cal?	☐	☐
Is Patient Eligible for Other Government Programs (i.e. Crime Victims, etc.)?	☐	☐

If the patient applies, or has a pending application, for another health coverage program at the same time that he or she applies for a hospital charity care or discount payment program, neither application shall preclude eligibility for the other program.

Does Patient have other insurance (i.e. auto medpay)?	☐	☐
Was Patient inured by a third party?	☐	☐
Is Patient Self-Pay??	☐	☐

Financial Assistance Calculation:
Total Combined Current Monthly Family Income (From Application for Financial Assistance) $_____

Family Size (From Application for Financial Assistance) _____

Qualification for Financial Assistance Met ☐ Yes ☐ No

Exhibit D

NOTIFICATION FORM
SUTTER HEALTH
ELIGIBILITY DETERMINATION FOR FINANCIAL ASSISTANCE

Sutter Health has conducted an eligibility determination for financial assistance for:

_____	_____	_____
PATIENTS NAME	ACCOUNT NUMBER	DATE(S) OF SERVICE

The request for financial assistance was made by the patient or on behalf of the patient on_____.
This determination was completed on _____.

Based on the information supplied by the patient or on behalf of the patient, the following determination has been made:

Your request for financial assistance has been approved for services rendered on_____.
After applying the financial assistance reduction, the amount owed is $_____.

Your request for financial assistance is pending approval. However, the following information is required before any adjustment can be applied to your account:

_____
_____
_____
_____
_____

Your request for financial assistance has been denied because:

REASON:
_____
_____
_____
_____
_____

Granting of financial assistance is conditioned on the completeness and accuracy of the information provided to the hospital. In the event the hospital discovers you were injured by another person, you have additional income, you have additional insurance or provided incomplete or inaccurate information regarding your ability to pay for the services provided, the hospital may revoke its determination to grant Financial Assistance and hold the you and/or third parties responsible for the hospital's charges.

If an application has been submitted for another health coverage program at the same time that you submit an application for Financial Assistance, neither application shall preclude eligibility for the other program.

If you have any questions on this determination, please contact:

_____
Patient Financial Services
855-398-1633

Exhibit E

Important Billing Information for Patients
Financial Assistance Plain Language Summary

Thank you for choosing Sutter Health. This handout is designed to help our patients understand the Financial Assistance that is available to eligible patients, the application process for Financial Assistance, and your payment options. Your hospital bill will not include any bill for services you may receive during your hospital stay from physicians, anesthesiologists, clinical professionals, ambulance companies, and other providers that may bill you separately for their services. If you wish to seek assistance with paying your bills from these other providers, you will need to contact the providers directly.

Emergency Services: If you received emergency services at the hospital, you will receive a separate bill for the emergency room physician. Any questions pertaining to the emergency room physician's services should be directed to the physician. An emergency room physician, as defined in Section 127450 of the Health and Safety Code, who provides emergency medical services in a hospital that provides emergency care is required by law to provide discounts to uninsured patients or insured patients with high medical costs who are at or below 350% of the federal poverty level.

Payment Options: Sutter Health has many options to assist you with payment of your hospital bill.

Payment Plans: Patient account balances are due upon receipt. Patients may elect to make payment arrangements for their hospital bill. A Financial Agreement must be signed before the Patient Financial Services office can accept payment arrangements that allow patients to pay their hospital bills over time. These arrangements are interest-free for low income uninsured patients and certain income-eligible patients with high medical costs. The payment plan is negotiated between the Hospital and the patient.

Medi-Cal & Government Program Eligibility: You may be eligible for a government-sponsored health benefit program. Sutter Health has staff available to assist you with applying for government programs like Medi-Cal. Please contact Patient Financial Assistance at (855) 398-1633 if you would like additional information about government programs, or need assistance with applying for such programs. This facility also contracts with organizations that may assist you further with applying for government assistance, if needed.

Covered California: You may be eligible for health care coverage under Covered California, which is California's health benefit exchange under the Affordable Care Act. Contact the hospital financial assistance department at (855) 398-1633 for more detail and assistance to see if you quality for health care coverage through Covered California.

Summary of Financial Assistance (Charity Care): Sutter Health is committed to providing financial assistance to qualified low income patients and patients who have insurance that requires the patient to pay significant portion of their care. The following is a summary of the eligibility requirements for Financial Assistance and the application process for patient who wish to seek Financial Assistance. The following are categories of patients who are eligible for Financial Assistance:

- Patients who have no third-party source of payment, such as an insurance company or government program, for any portion of their medical expenses **and** have a family income at or below 400% of the federal poverty level.

- Patients who are covered by insurance but have (i) family income at or below 400% of the federal poverty level; **and** (ii) medical expenses for themselves or their family (incurred at

the hospital affiliate or paid to other providers in the past 12 months) that exceed 10% of the patient's family income.

- Patients who are covered by insurance but exhaust their benefits either before or during their stay at the hospital, and have a family income at or below 400% of the federal poverty level.

You may apply for Financial Assistance using the application form that is available from Patient Financial Services, which is located within the Patient Access / Registration Departments at the Hospital or by calling Patient Financial Services at 855-398-1633, or on the Sutter Health or Hospital website (www.sutterhealth.org). You may also submit an application by speaking with a representative from Patient Financial Services, who will assist you with completing the application. During the application process you will be asked to provide information regarding the number of people in your family, your monthly income, and other information that will assist the hospital with determining your eligibility for Financial Assistance. You may be asked to provide a pay stub or tax records to assist Sutter with verifying your income.

After you submit the application, the hospital will review the information and notify you in writing regarding your eligibility. If you have any questions during the application process, you may contact the Patient Financial Services office at (855) 398-1633.

If you disagree with the hospital's decision, you may submit a dispute to the Patient Financial Services office.

Copies of this Hospital's Financial Assistance Policy, the Plain Language Summary and Application, as well as government program applications are available in multiple languages in person at our Patient Registration and Patient Financial Services offices as well as at www.sutterhealth.org and available by mail. We can also send you a copy of the Financial Assistance Policy free of charge if you contact our Patient Financial Services office at 855-398-1633.

In accordance with Internal Revenue Code Section 1.501(r)-5, Sutter Health adopts the prospective Medicare method for amounts generally billed; however, patients who are eligible for financial assistance are not financially responsible for more than the amounts generally billed because eligible patients do not pay any amount.

Pending applications: If an application has been submitted for another health coverage program at the same time that you submit an application for charity care, neither application shall preclude eligibility for the other program.

Notice of Availability of Financial Estimates: You may request a written estimate of your financial responsibility for hospital services. Requests for estimates must be made during business hours. The estimate will provide you with an estimate of the amount the hospital will require the patient to pay for health care services, procedures, and supplies that are reasonably expected to be provided by the hospital. Estimates are based on the average length of stay and services provided for the patient's diagnosis. They are not promises to provide services at fixed costs. A patient's financial responsibility may be more or less than the estimate based on the services the patient actually receives.

The hospital can provide estimates of the amount of hospital services only. There may be additional charges for services that will be provided by physicians during a patient's stay in the hospital, such as bills from personal physicians, and any anesthesiologists, pathologists, radiologists, ambulance companies or other medical professionals who are not employees of the hospital. Patients will receive a separate bill for these services.

If you have any questions about written estimates, please contact Patient Access at 855-398-1637. If you have any questions, or if you would like to pay by telephone, please contact the Patient Financial Services at 855-398-1633.

Exhibit F

Notice of Rights

Thank you for selecting Sutter Health for your recent services. Enclosed please find a statement of the charges for your hospital visit. **Payment is due immediately.** You may be entitled to discounts if you meet certain financial qualifications, discussed below, or if you submit payment promptly.

Please be aware that this is the bill for hospital services only. There may be additional charges for services that will be provided by physicians during your stay in the hospital, such as bills from physicians, and any anesthesiologists, pathologists, radiologists, ambulance services, or other medical professionals who are not employees of the hospital. You may receive a separate bill for their services.

Summary of Your Rights: State and federal law require debt collectors to treat you fairly and prohibit debt collectors from making false statements or threats of violence, using obscene or profane language, or making improper communications with third parties, including your employer. Except under unusual circumstances, debt collectors may not contact you before 8:00 a.m. or after 9:00 p.m. In general, a debt collector may not give information about your debt to another person, other than your attorney or spouse. A debt collector may contact another person to confirm your location or to enforce a judgment. For more information about debt collection activities, you may contact the Federal Trade Commission by telephone at 1-877-FTC-HELP (328-4357) or online at www.ftc.gov.

Nonprofit credit counseling services, as well as consumer assistance from local legal services offices, may be available in your area. Please contact Patient Financial Services office at 855-398-1633 for a referral

Sutter Health has agreements with external collection agencies to collect payments from patients. Collection Agencies are required to comply with the hospital's policies. Collection Agencies are also required to recognize and adhere to any payments plans agreed upon by the hospital and the patient.

Financial Assistance (Charity Care): Sutter Health is committed to providing financial assistance to qualified low income patients and patients who have insurance that requires the patient to pay significant portion of their care. The following is a summary of the eligibility requirements for Financial Assistance and the application process for patient who wish to seek Financial Assistance. The following categories of patients who are eligible for Financial Assistance:

- Patients who have no third-party source of payment, such as an insurance company or government program, for any portion of their medical expenses **and** have a family income at or below 400% of the federal poverty level.

- Patients who are covered by insurance but have (i) family income at or below 400% of the federal poverty level; **and** (ii) medical expenses for themselves or their family (incurred at the hospital affiliate or paid to other providers in the past 12 months) that exceed 10% of the patient's family income.

- Patients who are covered by insurance but exhaust their benefits either before or during their stay at the hospital, and have a family income at or below 400% of the federal poverty level.

You may apply for Financial Assistance using the application form that is available from Patient Financial Services, which is located at located within the Patient Access / Registration Departments at the Hospital, or by calling Patient Financial Services at 855-398-1633, or on the Sutter Health or Hospital website (www.sutterhealth.org). You may also submit an application by speaking with a

representative from Patient Financial Services, who will assist you with completing the application. During the application process you will be asked to provide information regarding the number of people in your family, your monthly income, and other information that will assist the hospital with determining your eligibility for Financial Assistance. You may be asked to provide a pay stub or tax records to assist Sutter with verifying your income.

After you submit the application, the hospital will review the information and notify you in writing regarding your eligibility. If you have any questions during the application process, you may contact the Patient Financial Services office at (855) 398-1633.

If you disagree with the hospital's decision, you may submit a dispute to the Patient Financial Services office.

Copies of this Hospital's Financial Assistance Policy, the Plain Language Summary and Application, as well as government program applications are available in multiple languages in person at our Patient Registration or Patient Financial Services offices, as well as at sutterhealth.org and available by mail. We can also send you a copy of the Financial Assistance Policy free of charge if you contact our Patient Financial Services office at 855-398-1633.

In accordance with Internal Revenue Code Section 1.501(r)-5, Sutter Health adopts the prospective Medicare method for amounts generally billed; however, patients who are eligible for financial assistance are not financially responsible for more than the amounts generally billed because eligible patients do not pay any amount.

Pending applications: If an application has been submitted for another health coverage program at the same time that you submit an application for charity care, neither application shall preclude eligibility for the other program.

Health Insurance/Government Program Coverage/Financial Assistance: If you have health insurance coverage, Medicare, Medi-Cal, California Children's Services, or any other source of payment for this bill, please contact Patient Financial Services at 855-398-1633. If appropriate, Patient Financial Services will bill those entities for your care.

If you do not have health insurance or coverage through a government program like Medi-Cal or Medicare, you may be eligible for government program assistance. Patient Financial Services can provide you with application forms, and assist you with the application process.

If you have received an award of Financial Assistance from the Hospital that you believe covers the services that are the subject of this bill, please contact Patient Financial Services at 855-398-1633.

California Health Benefit Exchange: You may be eligible for health care coverage under Covered California. Contact the hospital Business Services for more detail and assistance to see if you quality for health care coverage through Covered California.

Contact Information: Patient Financial Services is available to answer questions you may have about your hospital bill, or would like to apply for Financial Assistance or government program. The telephone number is 855-398-1633. Our telephone hours are 8:00 A.M. to 5:00 P.M., Monday through Friday.

Exhibit G

Sutter Health Affiliate Hospitals, Physical Address and Website Address for Financial Assistance

Alta Bates Summit Medical Center

Patient Access/Registration

Ashby Campus
2450 Ashby Avenue
Berkeley, CA 94705
510-204-4444

Herrick Campus
2001 Dwight Way
Berkeley, CA 94704
510-204-4444

Summit Campus
350 Hawthorne Avenue
Oakland, CA 94609
510-655-4000

http://www.altabatessummit.org

California Pacific Medical Center

Patient Access/Registration

California Campus
3700 California Street
San Francisco, CA 94118
415-600-6000

Pacific Campus
2333 Buchanan Street
San Francisco, CA 94115
415-600-6000

Davies Campus
Castro and Duboce
San Francisco, CA 94114
415-600-6000

St. Luke's Campus
3555 Cesar Chavez St.
San Francisco, CA 94110
415-647-8600

http://www.cpmc.org

Eden Medical Center

Patient Access/Registration

Eden Campus
20103 Lake Chabot Road
Castro Valley, CA 94546
510-537-1234

http://www.edenmedicalcenter.org

Kahi Mohala, A Behavioral Healthcare System

Patient Access/Registration

91-2301 Fort Weaver Road
Ewa Beach, HI 96706
808-671-8511

http://www.kahimohala.org

Memorial Medical Center

Patient Access/Registration

1700 Coffee Road
Modesto, CA 95355
209-526-4500

http://www.memorialmedicalcenter.org

Memorial Hospital, Los Banos

Patient Access/Registration

520 I Street
Los Banos, CA 93635
209-826-0591

http://www.memoriallosbanos.org

Menlo Park Surgical Hospital

Patient Access/Registration

570 Willow Road
Menlo Park, CA 94025
650-324-8500

http://www.pamf.org/mpsh

Mills-Peninsula Health Services

Patient Access/Registration

1501 Trousdale Drive
Burlingame, CA 94010
(650) 696-5400

http://www.mills-peninsula.org

Novato Community Hospital

Patient Access/Registration

180 Rowland Way
Novato, CA 94945
415-897-3111

http://www.novatocommunity.org

Sutter Amador Hospital

Patient Access/Registration

200 Mission Blvd.
Jackson, CA 95642
209-223-7500

http://www.sutteramador.org

Sutter Auburn Faith Hospital

Patient Access/Registration

11815 Education Street
Auburn, CA 95602
530-888-4500

http://www.sutterauburnfaith.org

Sutter Coast Hospital

Patient Access/Registration

800 East Washington Blvd.
Crescent City, CA 95531
707-464-8511

http://www.suttercoast.org

Sutter Davis Hospital

Patient Access/Registration

2000 Sutter Place
(P.O. Box 1617)
Davis, CA 95617
530-756-6440

http://www.sutterdavis.org

Sutter Delta Medical Center

Patient Access/Registration

3901 Lone Tree Way
Antioch, CA 94509
925-779-7200

http://www.sutterdelta.org

Sutter Lakeside Hospital and Center for Health

Patient Access/Registration

5176 Hill Road East
Lakeport, CA 95453
707-262-5000

http://www.sutterlakeside.org

Sutter Maternity & Surgery Center of Santa Cruz

Patient Access/Registration

2900 Chanticleer Avenue
Santa Cruz, CA 95065-1816
831-477-2200

http://www.suttersantacruz.org

Sutter Medical Center, Sacramento

Patient Access/Registration

Sutter General Hospital
2801 L Street
Sacramento, CA 95816
916-454-2222

Sutter Memorial Hospital
5151 F Street
Sacramento, CA 95819
916-454-3333

Sutter Center for Psychiatry
7700 Folsom Blvd.
Sacramento, CA 95826
916-386-3000

http://www.suttermedicalcenter.org

Sutter Roseville Medical Center

Patient Access/Registration

One Medical Plaza
Roseville, CA 95661
916-781-1000

http://www.sutterroseville.org

Sutter Santa Rosa Regional Hospital

Patient Access/Registration

30 Mark West Springs Road
Santa Rosa, CA 95403
707-576-4000

http://www.suttersantarosa.org

Sutter Solano Medical Center

Patient Access/Registration

300 Hospital Drive
Vallejo, CA 94589
707-554-4444

http://www.suttersolano.org

Sutter Tracy Community Hospital

Patient Access/Registration

1420 N. Tracy Boulevard
Tracy, CA 95376-3497
209-835-1500

http://www.suttertracy.org

Sutter Health
CPMC
We Plus You

EXHIBIT D

Capitation Support - Medi - Cal

December-17

CPMC (CAL)NEM

	Cap less Stop Loss	Cap Rate Eff 1/1/17	Cap Rate Jul - Dec 16	Total Member Months	Retro	Retro Jan 16 - Jun 16	Retro Jul - Dec 16	Retro 2017	Dec-17
Family/Foster/Refugee				-					
Aged				1,557				(19)	1,576
Disabled / Blind				899			2	79	818
Indigent Child				-					
Indigent Adult				-					
BCCTP				2					2
Aged - Dual				2,055				37	2,018
Blind/Disabled - Dual				368				8	360
Child Converting from HF				3,591			1	20	3,570
Child 18				6,161				18	6,143
MCE				13,748			(1)	(49)	13,798
Adult19				4,450				(4)	4,454
				32,831	-	-	2	90	32,739
					OK **Total Net Retro**	92			

Retro MCE rate change $ -

Stop Loss Premium paid on behalf of Provider

Sutter Health
CPMC
We Plus You

EXHIBIT E

THE
SAN
FRANCISCO
FOUNDATION

May 2018

The San Francisco Foundation's Report on the activities-to-date of the Community Health Innovation Fund and the Workforce Fund.

COMMUNITY HEALTH INNOVATION FUND

Sutter West Bay Hospitals, a California nonprofit corporation doing business as California Pacific Medical Center (CPMC), entered into a development agreement with the City and County of San Francisco related to the construction of CPMC's medical facilities. In July 2013, representatives from CPMC's Community Health Programs, San Francisco Department of Public Health, and The San Francisco Foundation (TSFF) formed a Committee to oversee the strategy for granting $8,600,000 of the Community Health Innovation Fund monies. To date, The San Francisco Foundation has received six payments totaling $8,600,000.

2013
Grants

The first round of grants was awarded to organizations focused on 1) Affordable Care Act reform readiness for community clinics; 2) strategic opportunities to improve services to people with HIV/AIDS; and 3) expansion of comprehensive mental health services in San Francisco. The grants were made to the **San Francisco AIDS Foundation** ($465,000), Curry Senior Center ($185,000), **Mission Neighborhood Health Center** ($128,700), and **San Francisco Community Clinic Consortium** ($186,000).

Outcomes

The grant supported the construction of the **San Francisco AIDS Foundation** new site. SFAF opened the doors of its new facility in 2016 and is in the process of completing the OSHA requirements necessary to relocate their clinical services. The new, 14,700 square-foot, three-story building will enable The AIDS Foundation to expand case management services by 25%, mental health counseling by 25%, substance use and harm reduction counseling by 50%, and HIV and STI screening up to 40%.

Curry Senior Center successfully completed organizational requirements for compliance, which resulted in their ability to be certified for Medicare reimbursement. They were also able to expand their diabetes educational services, hire a Spanish-speaking Health Coach, and provide Aftercare Group Sessions on self-care.

Funding allowed **Mission Neighborhood Health Center** and the **SF Community Clinic Consortium** to conduct a financial assessment and business planning process to test the feasibility of the Clinic Consortium to create an Independent Practice Association as a strategy to maximize reimbursement rates under the new ACA. The Clinic Consortium also provided training to over 120 clinic staff on ACA, enrollment and eligibility regulations, and alternative payment methodologies. Clinic staff in turn, enrolled thousands of San Francisco patients into Healthy San Francisco, Medicare, Medi-Cal, and Covered California.

2014
Grants

In 2014, two-year grants were awarded to nine community-based clinics to enhance care coordination with the goal of reducing re-hospitalization rates for high risk patients. Each of the following clinics received $220,588 totaling $1,985,292: **HealthRight 360, Glide Foundation, Lyon-Martin Women's Health Services, Mission Neighborhood Health Center, Native American Health Center, North East Medical Services, St. Anthony Foundation, SF Medical Center Outpatient Clinic, and the Women's Community Clinic**. **HR360** received an additional $25,000 to provide technical assistance to align Coordinated Care Protocols for all clinic partners. Funds were also allocated to the **Progress Foundation** ($280,000) to establish a stronger partnership with the San Francisco Police Department to transport homeless individuals suffering from mental illness to Dore Urgent Care Clinic, a community-based health and mental health treatment facility rather than to private and public hospital emergency rooms.

Outcomes

The **Progress Foundation** was able to hire additional staff to expand to 24-hour care and establish a stronger partnership with the San Francisco Police Department regarding transport of homeless and mentally ill patients. The number of clients who received immediate clinical treatment increased by 90%.

First year results from **HealthRight360, Glide Foundation, Lyon-Martin Women's Health Services, Mission Neighborhood Health Center, Native American Health Center, North East Medical Services, St. Anthony Foundation, SF Medical Center Outpatient Clinic and the Women's Community Clinic** reported utilization of funds to hire additional staff to improve their data management systems and to provide targeted outreach and follow-up for patients discharged from hospitals and the emergency room. An average of 75% of patients identified as hospital discharge patients and 70% of emergency room patients were contacted following their release for follow-up appointments within 7 days. Some clinics reported up to 95% of known hospital discharges were contacted and 94% of known emergency room discharges contacted within the 7 day timeframe. The funding also required improvement of their response time to non-scheduled patient referrals to be opened and reviewed within 10 days. The majority of clinics reported an improved time response rate of 99%.

In general, the grant reports reflect significant improvements from prior years of operation. The clinics continue to work towards achieving "clean and updated" data as cost efficiently as possible and also continue their efforts to reconcile the limitations of the Lifetime Clinical Report (software platform utilized by SF General and some hospital systems) to receive timely notification on hospitalization and emergency room visits of clinic patients. The majority of clinics have hired Referral and Care Coordinators or Nurse Case Managers who can provide the "high-touch" needed to insure clinic patients adhere to their appointments. One clinic reported that of the 1,483 referrals initiated between January-March, only 4% were no-shows, a dramatic

improvement from prior reports. Funding has allowed clinics to utilize technology and pioneer innovative strategies. Two clinics (St. Anthony's Foundation and North East Medical Services) have instituted a Home Visitation program for patients identified as high risk and who face logistical and social barriers to meeting their appointments. St. Anthony's Foundation is employing virtual consultations with their physician using Apple's FaceTime. In addition, St. Anthony's has instituted Care Messaging to all of its patients. A consistent challenge cited by the majority of clinics is in the recruitment, hiring and retention of qualified staff to provide Care Coordination largely due to the low salary structure and high cost of living in the Bay Area. The final reports for this set of grants will be submitted by the clinics in early July, 2017.

2015
Grants

In 2015, the Community Health Innovation Fund Committee identified the need for direct funding to community-based organizations focused on mental health services for high-risk populations and improved quality of life for low-income seniors. Grants were made to the following organizations:

Bayview-Hunter's Point Multipurpose Senior Services: to increase access to mental health services for vulnerable seniors and adults with disabilities in low-income, underserved communities through piloting a Community-Based Health Home ($150,000) and to build operational capacity for the Senior Ex-Offender Program to provide expanded services to aging formerly incarcerated African American males. ($100,000)

Stepping Stone Senior Services: to increase access to Mental Health Services for vulnerable Seniors and Adults with Disabilities in underserved communities through a pilot of the Community-Based Home Health model. ($150,000)

Central City Hospitality House: to support the Community Building Program to ameliorate the negative impact of trauma exposure on community and CCHH staff members by increasing access to a range of mental health and support services. ($150,000)

Westside Mental Health Services: to provide African American low and moderate-income children, youth, and families with culturally based mental health services including healing circles and linkages to outpatient and primary care treatment that will help them take control of their recovery and healing from mental illness, substance abuse, violence, racism, and trauma. ($90,000)

St. Anthony Foundation: to support infrastructure needs to increase the delivery of comprehensive, high quality healthcare services at no cost to low-income residents of San Francisco's Tenderloin neighborhood. ($420,000)

Progress Foundation: to sustain their 24-hour clinical services and to align their billing system to capture MediCal reimbursement for mental health services. ($72,000)

Outcomes

Over the course of their grant, **Bayview-Hunters Point Multipurpose Senior Services** and **Stepping Stone Senior Services** each identified 10-15 seniors, targeting formerly homeless with mental health diagnosis or living alone without existing social support. The target population utilized the Emergency Room as their primary source of care. Both organizations hired a RN

Navigator who addressed immediate crises, provided health/mental health assessment and education, medication management, accompaniment to health appointments, follow-up care and referral for specialty services. Results point to improved health, mental health, and reduction in ER visits and hospitalizations when compared with the baseline data that was collected. Of 17 seniors enrolled in the Bayview-Hunters Point MSSP project, eight participated in weekly professional counseling sessions resulting in improvement in their quality of life and decreased depression and isolation. The funding also supported participation by both agencies in a State cohort of senior service organizations working to design an Adult Day Healthcare/Community-Based Health Home model. Continued funding support for both projects was a major challenge. Both organizations cited the passage of the City's Prop I (Dignity Fund), would provide a funding stream to sustain the service, however, in the case of **Stepping Stone**, funds were not available to continue the program.

Bayview-Hunters Point Multipurpose Senior Services also received funds to strengthen their Senior Ex-Offender Program. Funds for dedicated staff time allowed them to purchase 1768 Newcomb for $1.6 million and to raise $80,000 from new funding sources. The building (an old police station) will allow them to provide transitional housing for14 formerly incarcerated and homeless residents. This project will be supported by funds from the SF Department of Probation.

Central City Hospitality House exceeded their goal of providing 16 community events (goal was four) focused on violence prevention, increasing community cohesion and ability to respond to and recover from trauma. The events engaged 345 community members (goal was 150). In addition, 80 participants were assessed and referred to behavioral health services. "Talking Tech in the Tenderloin" provided a discussion series between tech company representatives and community members addressing displacement and workforce needs. CCHH also provided two 17-week sessions on Healing, Organizing and Leadership Development for 16 interns (Peer Advocates). Training graduates stated that the sessions reduced isolation, helped them develop new leadership skills, and increased social connection to the Tenderloin community. Through the Harm Reduction Therapy Center, therapists provided services to 84 participants of which 77% maintained sufficient engagement to achieve at least one Wellness goal. For CCHH staff who experienced an increased level of crisis and trauma over the prior year, funds were used to engage Blooming Willow Coaching which brought together a team of over 30 Bay Area coaches, therapists and trainers to provide individual wellness coaching and skills building workshops. The evaluation survey found that 92% reported having built new skills to support their navigation of unsafe and stressful environments at the workplace and 92% increased skills in supporting their peers. Blooming Willow established a Culture Keepers Committee, a peer-based wellness support group within the agency to sustain the gains made in improving staff cohesion and morale. Having built staff cohesion, the agency was able to move forward on the implementation of their new theory of change and commitment to their mission.

Westside Community Services provided 196 culturally-based healing circles to over 164 community residents who were suffering from trauma-inflicted depression and other psychoses. Though falling short of their goal of engaging 400 participants, the project cited success in bringing first responder survivors of violence to address their own self-care. The grant also supported training of Healing Circle Facilitators (community leaders/residents) trained by the Bay Area Association of Black Psychologists and the Copeland Center's Wellness Recovery Action Planning. Facilitators received the Community Inclusion Peer Facilitator Certification. Healing Circles were provided to targeted populations: Women in Recovery, People Living with HIV, Ajani Youth, Westside Man Up Project (formerly incarcerated African American men), and parents of murdered children. Eighty-seven percent (87%) reported positive outcomes and

improvement in their mental health and a decrease of negative impacts of trauma. The grant allowed Westside Community Services to provide the rationale for culturally based healing circles as a valid treatment protocol. The services have continued with a grant from the Office of Children, Youth and their Families. The healing circles have been built in as a component of a larger collaborative of nine African American partner agencies working to provide comprehensive care for high-risk African American youth and their families.

St. Anthony Foundation received a two-year grant to help meet the system requirements as a new Federally Qualified Health Center. With these funds, they have been able to enroll 500 new patients, design and implement a sliding fee scale, and hire a new Clinical Social Worker to address the complex health and mental health needs of patients. They are working to connect patients being discharged from homeless shelters by providing transportation support (Uber, Lyft) to attend medical appointments. The clinic currently has 300 Medi-Cal managed patients waiting assignment to a provider network. In Year 2 of their grant (2017) they will need to fully implement the HRSA Program Requirements and accounting systems as well as strengthen their outreach to high risk patients.

Funding to keep the **Progress Foundation's** Dore Urgent Care Clinic open everyday for 24 hours increased referrals from SFPD by 56% and reduced referrals to SFGH Psychiatric Emergency Services (PES) resulting in a 50% drop in "Red Alert Days" where PES was challenged with the large number of incoming patients and limited medical staff. There was also a significant reduction in the number of individuals transported to private hospital emergency rooms. The Progress Foundation Urgent Care Clinic was instrumental as a model and in providing data in the passage of SB 82 establishing a funding source for community-based psychiatric clinics in other counties.

2016
Grants

Drug Policy Alliance: to support planning and implementation of a multi-departmental pre-booking diversion program that will reduce incarceration and increase access to health and mental health services for SF high risk populations and to complete a proposal for $5.9 million in funding from the California Board of State and Community Corrections. ($250,000 over 12 months)

Central City Hospitality House: to support and train peer health volunteers, staff, and outreach teams to enhance their ability to engage other community members, leading to a healthier neighborhood with people seeing themselves as part of the solution. ($500,000 over 2 years)

North of Market Tenderloin Community Benefit Corporation: to improve the stability, livability and sustainability of the Tenderloin through the Tenderloin Community Benefit Corporation Healthy Neighborhood Initiative. ($150,000 over 24 months)

Public Health Foundation Enterprises: to reduce unnecessary use of hospital emergency room services by providing transportation to the Sobering Center. ($35,000 over 12 months)

Outcomes

Drug Policy Alliance has completed the planning and implementation of a multi-departmental pre-booking diversion program to reduce the recidivism rate for drug and alcohol offenders and strengthened collaboration across city departments with community-based organizations. An

MOU was established delineating shared principles and identified roles and responsibilities of each of the participating organizations (Department of Public Health, Police Department, District Attorney, Public Defender, Sheriff's Department, BART Police, Sentencing Commission, Adult Probation, Glide Foundation, Fenton Institute and the Drug Policy Alliance). To date, the Law Enforcement Assisted Diversion or LEAD is operating in the Tenderloin/Civic Center and Mission neighborhoods. For each neighborhood, a team of law enforcement officers and a complementary team of social service providers, including outreach workers and case managers, work to provide assistance to high-risk individuals referred by SFPD and BART Police. As of March 2018, 62 individuals have been referred for services. The goal of the program is to serve 250 individuals over the next 2 years. This grant also provided support to submit a proposal for $5.9million to the California Board of State and Community Corrections on behalf of the City. The City was awarded the full $5.9 million and scored the highest of all applications received.

Central City Hospitality House has completed 12 months of their 24-month grant. This grant will end on June 30, 2019. They have made significant progress in reaching their 3 primary outcomes by hiring a Training & Volunteer Coordinator and Deputy Director of Programs. Funding also continues to provide peer staff support and training that has resulted in an increased level of services to community residents. The increased level of coaching support for staff has resulted in a reduction of police involvement and increased staff's capacity to identify, intervene and de-escalate potential crisis situations. In the first year, over 75 volunteers enrolled in 38 trainings contributing 2,500 service hours in one or more of the agency's six programs. Additionally 140 community members (their goal was 75) have participated in community-building activities including neighborhood forums on public safety, gentrification and voter education. Ten peer staff (formerly homeless) was promoted (goal was 3 staff) within the agency and agency partnerships strengthened with the Tenderloin CBD and Mayor's Office of Civic Engagement multi-neighborhood ambassadors. Funding has strengthened their capacity to offer joint training activities, team meetings and develop one-on-one support. Twenty-one in-service trainings have been provided (goal was 12) on harm reduction techniques, client engagement, conflict prevention/de- escalation, resource referrals, etc. with 105 individuals participating in at least 1 training and 70 participated in multiple trainings. More activities are planned for the second year.

North of Market Tenderloin Community Benefit Corporation (NMTCBC)
In their 1st year report (of a 2 year grant) NMTCBC completed their strategic plan to guide them to 2020 and they are now in the process of an Executive search that they hope to complete by mid-2018. Staff has expanded from 2 part-time to 3 full-time positions. They have moved to a storefront office on Ellis Street to be more accessible to the Tenderloin community. Half of the new office space is designed as a community meeting place. NMTCBC has hosted over 20 meetings during the grant period. They successfully negotiated a new street cleaning contract with a new vendor reducing cost by $185,000. The new vendor (Downtown Streets Team) provides an employment path for homeless individuals. Assessment rates have increased and cleaning costs reduced creating an income stream to support the new program staff. The fundraising goal was $325,000. The actual amount raised through grants and earned income was $651,500. The Safe Senior program is in place. Over 26,000 seniors and 17,945 children were assisted with safe street crossings in the first year. Six Safe Senior Ambassadors have been hired. The Safe Route to School program is in the pilot stage. Neighborhood improvements are more visible, 70 positive street banners have been installed and over 100 residents have participated in each of their community meetings.

Public Health Foundation Enterprises – Sobering Center

This grant provided critical transportation services to divert individuals from hospital emergency rooms to the Sobering Center where they are offered additional services to promote medical detoxification, recovery and case management. Funds allowed the Center and its services to be open 24 hours a day. During the 2016-17 fiscal year, the Center received 1,125 total calls for transport, 981calls were made from emergency rooms and 144 from shelters, clinics, treatment programs. The Center anticipates the numbers will increase in FY 2017-18.

2017
Grants

Reports for 2017 grants are not due until July 2018, therefore progress on the grants mentioned below will appear in the May 2019 report.

Public Health Foundation-Sobering Center Transport: to provide interim support to maintain transport services. ($150,000 one year)

St. Anthony's Foundation: to increase part-time Outreach Worker position to full-time to increase patient referral to their clinic. ($35,000 one year)

Central City Hospitality House: to support housing placement, case management, and leadership development of Tenderloin residents to advocate for improved living conditions and access to services. ($167,000 one year)

Garden 2 Table: to support the Camelot Green Kitchen project and cultural events to promote healthy living for SRO residents in the Tenderloin community. ($125,000 one year)

Neighborhood Empowerment Network: to engage Bayview community agencies and residents in a community planning process to ensure the health and safety of residents. ($150,000 one year)

Women's Community Clinic: to provide infrastructure support for updated financial and patient tracking software and staff time to complete the merger with HR360. ($50,000 one year)

The San Francisco Foundation to CPMC - Community Health Innovation Fund						
	FY 2014	**FY 2015**	**FY 2016**	**FY 2017**	**FY 2018**	**Total Budget**
	7/1/2013 - 6/30/2014	**7/1/2014 - 6/30/2015**	**7/1/2015 - 6/30/2016**	**7/1/2016 - 6/30/2017**	**7/1/2017 - 6/30/2018**	
Beginning Balance	**$ 8,600,000.00**	**$ 6,760,566.41**	**$ 4,044,949.84**	**$ 3,634,050.59**	**$ 2,661,976.36**	**$ 8,600,000.00**
Revenues						
Income - Cash Receeived	$ 8,600,000.00					$ 8,600,000.00
Interest	$ 10,049.71	$ 10,417.93	$ 11,512.35	$ 15,212.63	$ 16,666.92	$ 63,859.54
Total Revenues	$ 8,610,049.71	$ 10,417.93	$ 11,512.35	$ 15,212.63	$ 16,666.92	$ 8,663,859.54
Expenses						
Grants Made	$ 1,244,700.00	$ 2,722,292.00	$ 420,000.00	$ 985,000.00	$ 627,000.00	$ 5,998,992.00
Fees	$ 604,783.30	$ 3,742.50	$ 2,411.60	$ 2,286.86	$ 2,125.28	$ 615,349.54
Total Expenses	$ 1,849,483.30	$ 2,726,034.50	$ 422,411.60	$ 987,286.86	$ 629,125.28	$ 6,614,341.54
Remaining Balance	**$ 6,760,566.41**	**$ 4,044,949.84**	**$ 3,634,050.59**	**$ 2,661,976.36**	**$ 2,049,518.00**	**$ 2,049,518.00**

WORKFORCE DEVELOPMENT FUND

As a companion to the Community Health Innovation Fund, Sutter West Bay Hospital, a California nonprofit corporation doing business as California Pacific Medical Center (CPMC) entered into a Workforce Fund Grant Agreement with The San Francisco Foundation on October 9, 2013. As part of the development agreement, a Workforce Fund of $3,000,000 was created to provide grants to educational institutions and non-profit organizations in communities that are impacted by CPMC's hospital renovation and construction project. The goal of the fund is to engage in barrier reduction and job training for employment opportunities with CPMC, in accordance with the terms of the Workforce Fund Agreement. The affected communities include the Western Addition, Tenderloin, Mission/SOMA, Outer Mission/Excelsior, Chinatown and Southeastern neighborhoods in the City of San Francisco.

To manage the Workforce Fund, a committee of fund advisors (Workforce Development Committee) was created and consists of a representative from the Office of Economic and Workforce Development (OEWD) on behalf of the City, a representative from CPMC, and a representative from The San Francisco Foundation (TSFF). TSFF received its first payment of $2,000,000 towards the Workforce Fund on November 26, 2013, and a second payment of $1,000,000 on November 25, 2014, completing the $3,000,000 pledge. As part of the Development Agreement, TSFF took a combined seven percent management fee of $210,000.

Since the last report in May 2016, the six Barrier Reduction grantees, Jewish Vocational Services (JVS), Mission Hiring Hall (MHH), Positive Resource Center (PRC), Self-Help for the Elderly (SHE), Young Community Developers (YCD), and Success Center SF (SCSF), and the Workforce Development Committee have continued to meet quarterly. The original four grantees, JVS, MHH, PRC and SHE will complete their second year of funding on April 30, 2017. YCD and SCSF will have completed their first year of funding, also on April 30, 2017.

FY 2015 & FY 2016 Grants:

In determining how best to allocate the grant making funds, to help reduce barriers to accessing jobs at CPMC, the Workforce Committee engaged a local consulting firm, KDG Enterprises to plan, coordinate and facilitate a series of eight focus group meetings. The focus group meetings provided the Workforce Committee with essential input on structural issues which present barriers for entry-level job seekers. This input was invaluable in our design of prospective grants to improve systems that provide training, workforce experience and skill building. The Foundation issued a Request for Proposal (RFP) in late 2014 that was developed based on the recommendations from the focus group meetings. The purpose of the RFP was to solicit proposals from experienced, educational and nonprofit organizations with a proven track record of providing integrated and coordinated, case-managed barrier removal, training and workforce preparedness services for non-construction, non-managerial and non-supervisory, entry-level employment at CPMC and/or other medical settings. Specifically, grantees were selected to provide Job Readiness Training, and/or On-the-Job Training services which were recommended during the focus group meetings.

Of the 13 proposals submitted, four organizations were approved for funding totaling $540,000:

1. **Jewish Vocational Services:** To provide program support for job readiness training supported paid work experience, and placement assistance into living wage jobs to low-income San Franciscan residents at CPMC, and/or other health care facilities in San Francisco. ($150,000)

2. **Mission Hiring Hall:** To provide program support for job readiness training and placement services designed to overcome barriers to employment for low income, minority, and underserved San Francisco residents. ($150,000)
3. **Positive Resource Center:** To provide program support for job readiness training and placement in employment for disabled, low-income job seekers in San Francisco County. ($90,000)
4. **Self-Help for the Elderly:** To provide program support to ensure employment barrier reduction, job preparedness and placement for immigrant, Limited English Proficient, Asian Pacific Islander older adults and high needs youth in the City and County of San Francisco. ($150,000)

Upon receiving the funds, the funded organizations worked with the Workforce Committee and the San Francisco workforce system to do outreach to potential program participants in the targeted communities. The organizations were required to meet quarterly as a cohort to share lessons learned and provide peer support to each other for the duration of their grants.

The first quarterly meeting was conducted in April 2015 and was an opportunity for the grantees and Committee to meet and establish short, intermediate, and long-term goals. It was also an opportunity to establish and create a collaborative relationship. The cohort created the following goals:

Goals:

Short-term goals:

- Conducting a site visit at CPMC and meeting with CPMC hiring managers to facilitate relationship building with CPMC;
- Collaborative marketing and communications materials in order to facilitate identification of clients who may be ready for immediate employment opportunities, and to also prevent duplicate efforts in marketing and communication materials.

Intermediate goals:

- Assessment by CPMC with the grantees in order to address curriculum design and project implementation;
- Developing referral relationships;
- CPMC will develop a branding video about who they are, roots, history, value and value added of working for the organization.

Long-term goals:

- Grant implementation, i.e., hiring and training San Francisco residents in the targeted neighborhoods as noted in the Development Agreement;
- Quarterly meetings which include sharing best practices among the group, sharing to reduce duplication of efforts and continued collaborative efforts and learnings among the cohort members;
- Rotation of meeting at offices of different grantees and partners to continue the collaborative working relationship and learning opportunities.

FY 2015 & FY 2016 Outcomes:

Through the collaborative effort between the four grantees and the Committee over two fiscal years (July 1, 2014 – June 30, 2016), 519 San Francisco residents received either paid work experience, demonstrated gains in workplace competencies (i.e. computer/administrative training, academic skills and language skills), job readiness training or on-the-job training. 347 clients from the targeted neighborhoods have been placed in entry-level positions either at

CPMC or other healthcare employers in San Francisco and the Bay Area. Of the 347 clients, 53 have been placed directly at CPMC medical facilities.

FY 2017 Grants:

In FY17, the Committee renewed the original four grantees but noted two neighborhoods lacked direct grantee representation: The Southeastern and Western Addition neighborhoods. Responding to this, the Committee released a duplicate RFP focused on these two specific neighborhoods and approved two additional grants to the following organizations for a total of $250,000:

1. **Success Center SF:** To create a Healthcare Pathway for low-income residents in the Western Addition neighborhood of San Francisco, who face multiple barriers to employment to obtain and retain jobs in healthcare. ($125,000)
2. **Young Community Developers:** To deliver job readiness training and associated placement services for residents of the Southeast sector of San Francisco with CPMC, and/or other health care facilities in San Francisco. ($125,000)

Additionally, in 2017 grants to the original four grantees were renewed for another year for a total of $500,000:

1. **Jewish Vocational Services:** To provide program support for job readiness training, supported paid work experience, and placement assistance into living wage jobs to low-income San Franciscan residents at CPMC, and/or other health care facilities in San Francisco. ($125,000)
2. **Mission Hiring Hall:** To provide program support for job readiness training and placement services designed to overcome barriers to employment for low income, minority, and underserved San Francisco residents. ($125,000)
3. **Positive Resource Center:** To provide program support for job readiness training and placement in employment for disabled, low-income job seekers in San Francisco County. ($125,000)
4. **Self-Help for the Elderly:** To provide program support to ensure employment barrier reduction, job preparedness and placement for immigrant, Limited English Proficient, Asian Pacific Islander older adults and high needs youth in the City and County of San Francisco. ($125,000)

Goals:

The goals of the FY2017 grant portfolio were similar to the goals of the FY2016 grant portfolio, with variance within the short-term goals.

Short-term goals:

- Familiarize grantees new to the cohort with the hiring process of CPMC and facilitate relationships between the CPMC Recruitment Services Team Member and the CPMC hiring managers.
- Align program curriculum and training with the required qualifications of open CPMC positions.
- Share marketing and communications materials to facilitate identification of clients who may be ready for immediate employment opportunities or identify clients that require different types and levels of training, as well as to prevent duplicative efforts.

- Orient new staff members of the individual organization to existing practices of the cohort and the relationship between the cohort, CMPC, OEWD and TSFF.

Intermediate goals:

- Continued alignment and assessment by CPMC with the grantees to address curriculum design and project implementation;
- Develop referral relationships;
- CPMC to develop a branding video about CPMC, i.e., who CPMC is, its roots, history, value and value added of working for the organization.
- Continued alignment between hiring projections for CPMC and required placements by grantees.

Long-term goals:

- Grant implementation, i.e., hiring and training San Francisco residents in the targeted neighborhoods as required by the Development Agreement;
- Quarterly meetings which include sharing best practices among the group, sharing to reduce duplication of efforts and continued collaborative efforts and learnings among the cohort members;
- Rotation of meeting at offices of different grantees and partners to continue the collaborative working relationship and learning opportunities.
- Strengthen the workforce training and services infrastructure in the Tenderloin Neighborhood to increase healthcare job placements for Tenderloin residents.

FY 2017 Outcomes:

CPMC and OEWD have played an integral role in the overall process. CPMC continues to work closely with each of the grantees from coordinating meetings with their hiring managers, to working directly with the grantees to discuss CPMC's hiring needs and strengthening the relationship between the grantees and hiring managers, as well as partnering with the Office of Economic and Workforce Development and The San Francisco Foundation to identify new grantees.

Through collaborative efforts between the six grantees and the Committee over the FY17 grant period (May 1, 2016 – April 30, 2017), 476 San Francisco residents received either paid work experience, demonstrated gains in workplace competencies (i.e. computer/administrative training, academic skills, language skills, Medical Assistant training), barrier removal services, job readiness training or on-the-job training.

330 clients from the targeted neighborhoods have been placed in entry-level positions either at CPMC or other healthcare employers in San Francisco and the Bay Area. Grantees of the CPMC cohort exceed their overall placement goal of 192 by 172%. Of the 330 placements, 22 of those were placed at CPMC facilities. The Committee and the grantee cohort will continue to strategize to meet CPMC's overall job placement goals for target neighborhood residents.

Due to poor performance metrics and placements at CPMC healthcare facilities, the Committee discontinued its funding for Positive Resource Center (PRC) and Mission Hiring Hall (MHH) at the end of the 2017 grant period. The target population of PRC was not the best fit for the per diem initial hiring period of the CPMC hiring process. PRC's clients are largely from the disabled population and have stated to PRC that they lose significant health care and other benefits when they accept per diem employment that has uncertain working hours and total compensation before being hired permanently. The wage uncertainty created issues around paying rent and other living expenses upon which their overall livelihood depends. MHH has

suffered significant staff turnover during the two years they participated in the cohort, and this turnover has significantly affected its ability to meet the goals it set for its CPMC Workforce Development grants.

FY 2018 Grants:

In 2018, the committee decided to renew four of the six FY 2017 grantees and added one new organization, which has attained high numbers in job placements through CPMC in the past. The Committee also changed the timing for grant awards to align The San Francisco Foundation's grant period with the contracting period of the Committee member OEWD, which begins July 1st of each calendar year. As a result, the grant period was shortened to a six-month grant period (January 1, 2018 – June 30, 2018). The Committee decided to prorate the grant amount from $365,000 to $182,500 since the grant period was reduced by half. In addition, the Committee decided to reduce the numerical metrics for workforce training services and job placements by half as well.

The resulting four grantees were renewed for an interim period through June 30, 2018 for funding totaling $182,500:

1. **Jewish Vocational Services:** To provide job readiness training and placement assistance for low-income San Franciscan residents into living wage jobs at CPMC, and/or other health care facilities in San Francisco. ($42,500)

2. **Success Centers:** To create a Healthcare Pathway for low-income residents in the Western Addition neighborhood of San Francisco, who face multiple barriers to employment to obtain and retain jobs in healthcare. ($32,500)

3. **Young Community Developers:** To deliver job readiness training and associated placement services for residents of the Southeast sector of San Francisco with CPMC, and/or other health care facilities in San Francisco. ($32,500)

4. **Self-Help for the Elderly:** To provide program support to ensure employment barrier reduction, job preparedness and placement for immigrant, Limited English Proficient, Asian Pacific Islander job seekers in the City and County of San Francisco. ($42,500)

The committee added FACES SF to the list of grantees with $32,500 in interim funding:

1. **FACES SF:** To provide job readiness and placement assistance services for low-income residents of the Southeast Sector of San Francisco to attain clinical or non-clinical employment at CPMC and/or other health care facilities in San Francisco.

FY 2018 Outcomes:

In terms of the financial report, funds from The San Francisco Foundation were not disbursed in FY 2017 due to the change in the grant period at the request of the Committee to begin the grant period on July 1st. In addition, delays in decision-making at the Committee level and staff transitions at The San Francisco Foundation caused the FY 2018 grants to begin on January 1, 2018 rather than July 1, 2017.

As of March 31, 2018, the cohort collectively provided some form of workforce training to 250 San Francisco residents. 71 residents from the targeted neighborhoods as well as other San

Francisco neighborhoods were placed in entry-level jobs in the healthcare sector. Of the 71 placements, 20 of those were placed directly at CPMC facilities.

The complete outcomes for this grant period are not yet available due to the timing of this report. The report above is representative of the grant's first quarter (January 1, 2018 – March 31, 2018).

Three Year Outcomes:

The Foundation, CPMC and OEWD collaboratively have played an integral role in the quarterly meetings and overall process, which are facilitated by consultants hired by the Foundation. CPMC worked with each of the grantees from hosting onsite visits to CPMC and coordinating meetings with their hiring managers, to working directly with the grantees to discuss CPMC's hiring needs and strengthening their relationship between the grantees and hiring managers.

Through this collaborative effort between a total of seven grantees and the Committee over the last three years (FY 2015 – FY18), 920 clients from the targeted neighborhoods and from other neighborhoods have been placed in entry-level positions either at CPMC or other healthcare employers in San Francisco and the Bay Area. *(Please note these numbers do not include the final quarter numbers which are due June 30, 2018)* Of the 920 clients, 95 have been placed directly with CPMC.

The San Francisco Foundation to CPMC - Workforce Development Financial Report						
	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	Total Budget
	7/1/2013 - 6/30/2014	7/1/2014 - 6/30/2015	7/1/2015 - 6/30/2016	7/1/2016 - 6/30/2017	7/1/2017 - 6/30/2018	
Beginning Balance	**$ 3,000,000.00**	**$2,793,911.49**	**$2,250,347.13**	**$1,465,353.37**	**$1,476,459.47**	**$ 3,000,000.00**
Revenues						
Income - Cash Receiv	$3,000,000.00	$0.00	$0.00	$0.00	$0.00	$3,000,000.00
Interest	$5,528.69	$10,034.64	$15,483.88	$15,782.32	$11,855.16	$58,684.69
Total	$3,005,528.69	$2,803,946.13	$2,265,831.01	$1,481,135.69	$1,488,314.63	$3,058,684.69
Expenses						
Grants Expense	$0.00	$550,000.00	$788,000.00	$0.00	$182,500.00	$1,520,500.00
Fee	$211,617.20	$3,599.00	$3,553.89	$2,451.45	$1,502.05	$222,723.59
Expenses	$0.00	$0.00	$8,923.75	$2,224.77	$0.00	$11,148.52
Total	$211,617.20	$553,599.00	$800,477.64	$4,676.22	$184,002.05	$1,754,372.11
Remaining Balance	**$2,793,911.49**	**$2,250,347.13**	**$1,465,353.37**	**$1,476,459.47**	**$1,304,312.58**	**$1,304,312.58**

Sutter Health
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EXHIBIT F

CPMC: Culturally and Linguistically Appropriate Services Action Plan

2017 Report to the City

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Organizational Values and Principles	***ORGANIZATIONAL FOCUS - OPERATIONAL EXCELLENCE: Critical to delivering an outstanding patient experience. We Strive to clarify priorities, enable efficient, faster decision-making and spread best practices.***		
1. Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.	a) Maintained a CLAS Action Planning committee, to support the improvement, monitoring, and development of culturally and linguistically appropriate services. b) Maintained an ADA Steering Committee to support the improvement, monitoring, and development of ADA accessible and appropriate services at CPMC c) Initiated or continued partnership between the CLAS Action Planning Team and the following hospital departments: Nursing Education, Quality and Safety, Interpreter Services, Volunteer Services, Community Benefit, Data and Management, Human Resources, Patient Relations, Spiritual Care Services, and Nursing. Note: Standards 2 through 15 represent the practices and policies intended to be the fundamental building blocks of culturally and linguistically appropriate services that are necessary to achieve Standard 1. Therefore, the strategies in which CLAS care is addressed will be further discussed in the following standards. This includes the result components and action steps of the CLAS assessment as well.	**KEY INDICATORS:** a) Establish safe and welcoming environment at every point of contact that both fosters appreciation of the diversity of individuals and provides patient- and family-centered care b) Ensure that all individuals receiving health care and services experience culturally and linguistically appropriate encounters c) Meet communication needs so that individuals understand the health care and services they are receiving, can participate effectively in their own care, and make informed decisions d) Intentional effort to eliminate discrimination and disparities	1. Held regular meetings with the CLAS Action Planning committee, to support the improvement, monitoring, and development of culturally and linguistically appropriate services. 2. Continued review of policy, procedures and programs through CLAS Action Planning. 3. Continued review of Continued Medical Education (CME) course offerings to ensure educational activities addressed health disparities and/or cultural/language barriers. 4. Developed a CLAS Quality Improvement Assessment (A3 Thinking and Planning) for 2016-2017 Improvement Initiatives.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Governance, Leadership and Workforce:	***ORGANIZATIONAL FOCUS - OPERATIONAL EXCELLENCE: Critical to delivering an outstanding patient experience. We Strive to clarify priorities, enable efficient, faster decision-making and spread best practices.***		
2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.	a) Designated Senior leadership that supports and promotes CLAS through policies, practices and allocated resources. Discussed with the senior leadership and directors of Community Benefit the ways in which CLAS standards could be further integrated into the systems and structures of CPMC. b) Continued partnership with grassroots community organizations and advocacy groups to bridge the gap of cultural competency within healthcare. Presented the St. Luke's Hospital Health First community clinic as a model and best practice of care to the Sutter System. c) Reviewed the Patient Relations, Community Benefit and Patient Education departmental budgets which document financial contributions to the provision of systems that support culturally and linguistically appropriate services for patients and community partners (2017). d) Developed relationships at the Sutter System level to support the following areas (continued from 2016): • Patient Family Advisory committees • Staff educational training on diversity, inclusion and unconscious bias. • Research and analysis on patient health outcomes to inform potential racial disparities in care. e) Initiated communications with the CPMC developmental planning teams to inform on topics such as bilingual signage, inclusive artwork/décor, staff training and policy development at the new Van Ness and Mission Bernal Campuses. f) Hospital CEO, Dr, Warren Browner, presented CLAS and the importance of being culturally sensitive to all staff at the quarterly Town Halls for all four CPMC campuses (February 2017). g) Initiated or continued partnership between the CLAS Action Planning Team and the following hospital departments: Nursing Education, Quality and Safety, Interpreter Services, Volunteer Services, Community Benefit, Data and Management, Human Resources, Patient Relations, Spiritual Care Services, and Nursing.	**KEY INDICATORS:** a) Provision of appropriate resources and accountability b) Organization's demonstrated appreciation and respect for diverse beliefs and practices c) Supports transparency and communication between the service setting and the populations that it serves	1. Continued to have a process in place in which policies and procedures are routinely reviewed. 2. Updated senior management on CLAS implementations and progress by way of regular Senior Management meetings. 3. Budgeted resources to support CLAS related services in the Interpreter Services, Nursing Education and Community Benefit Departments.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Governance, Leadership and Workforce:	***ORGANIZATIONAL FOCUS - OPERATIONAL EXCELLENCE: Critical to delivering an outstanding patient experience. We Strive to clarify priorities, enable efficient, faster decision-making and spread best practices.***		
3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.	a) Reviewed policies on Equal Employment and Employee Relations in the Health Equality Index survey, documenting CPMC's intent to respect diversity within gender, gender identity, and sexual orientation and to recognize and value each employee's uniqueness and contributions to a productive workforce. b) Continued promoting workforce recruitment in diverse populations and developed new engagements with the LGBT community in SF to promote our hiring efforts via "Out&Equal" job site. c) Assessed the diversity of senior leadership, clinical staff, ancillary staff and administrative staff via an all staff bi-lingual survey which allowed staff to self-report as bi-lingual. Developed recognition system and guidelines for 2017. d) Engaged staff in various trainings and development opportunities surrounding CLAS including: 1. CNA Trainings - Cultural Sensitivity & Spiritual Care: 5 - 1 hour trainings to all CNAs 2. Ethics Summer Symposium Presentation: Patient Centered Cultural Competence 3. Spiritual Care Week - Cultivating Inclusivity 4. BiWeekly Interfaith Services - Davies Rehab & SNF Units 5. Tea for the Soul - Specific Nursing Units 6. Nurses Week Blessing of Hands 7. Educational Program - Developing awareness & sensitivity to patient cultural issues. e) Participated in Sutter System Sponsored Inclusion dialogs facilitated to engage employee feedback on topics of Diversity and Inclusion. f) Participated in the Sutter level inclusion resource groups focusing on creating an inclusive environment for staff who support or identify with LGBTQ and ADA issues. g) Continued to partner with Human resources to generate report on overall staff diversity overall and throughout the various management levels for Affirmative Action planning.	**KEY INDICATORS:** a) Environment in which culturally diverse individuals feel welcomed and valuedb) Trust and engagement with the communities and populations servedc) Workforce reflects populations served	1. Documented and monitor demographics across the various levels of senior leadership and management staff to assess diversity representation. 2. Reviewed policies on Equal Employment and Employee Relations documenting CPMC's intent to respect cultural diversity and to recognize and value each employee's uniqueness and contributions to a productive workforce. 3. Reviewed the Organizational Leadership Chart and the Board of Trustees containing hospital staff, clinicians and community members to assess diversity representation in senior leadership and board. 4. Implemented recognition system and follow set guidelines for conversationally competent bi-lingual staff, to encourage informal conversation in a patient's primary language.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
EDUCATION & TRAINING	***ORGANIZATIONAL FOCUS - OPERATIONAL EXCELLENCE: Critical to delivering an outstanding patient experience. We Strive to clarify priorities, enable efficient, faster decision-making and speed spread best practices.***		
4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.	a) Completed annual cultural competence, diversity and inclusion training for all staff via online learning portal (Healthstream) to ensure knowledge/adoption of organizational cultural competency, including why it is important to our patients, visitors and staff. b) Continued to integrate culturally competent specific criteria in staff registration training to capture patient religion, race/ethnicity/ancestry, primary language, spiritual preference, geographic data, insurance coverage, and interpreter need at patient admission. c) Developed training opportunities for staff and senior leadership in the areas of cultural competency, diversity and inclusion: 1. CEO Town Halls presentation regarding CLAS and the importance of cultural and linguistic sensitivity (February 2017) 2. Transgender health symposium with patient panel (October 2017) 3. Internal Medicine grand rounds focusing on issues related to cultural sensitivity and cultural competency. 4. Interactive, online LGBTQ training made available to all staff free of cost (June-September 2017) 5. CNA Trainings - Cultural Sensitivity & Spiritual Care: 5 - 1 hour trainings to all CNAs 6. Ethics Summer Symposium Presentation: Patient Centered Cultural Competence 7. Spiritual Care Week - Cultivating Inclusivity 8. Educational Program - Developing awareness & sensitivity to patient cultural issues. 9. Annual Cultural Competency Healthstream Course (2013-2017) 10. Appreciating Differences course to managers (throughout 2014-2017) 11. Began research and development of training regarding safety for Limited English Proficient (LEP) patients. d) Began partnership with Nursing Education to discuss integrating CLAS in all educational trainings. e) Developed grant to produce new nursing training involving Integrative Healing Arts and mindfulness practices, in partnership with the Sutter System.	**KEY INDICATORS:** a) Workforce demonstrates the attitudes, knowledge, and skills necessary to provide care to diverse populations b) Capacity of staff to provide services that are culturally and linguistic and supports health literacy c) Education and training programs that address the impact of culture on health and health care	1. Monitor and track percentage of Nursing Education training opportunities for staff that involve topics related to cultural competency, diversity and inclusion. 2. Developed an Educational Strategic Action Planning team via the CLAS Assessment to: a) Review and evaluate existing educational programs and materials that support cultural competence, diversity and inclusion. b) Research, evaluate and identify new educational programs and materials based on identified gaps within existing programs/materials. c) Increase promotion of cultural competence education and training resources available to all staff and volunteers. d) Enhance education for senior management and leadership.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Communication and Language Assistance:	***ORGANIZATIONAL FOCUS - PATIENT EXPERIENCE:*** ***Delivering a consistently excellent patient experience through the eyes of our patients.***		
5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.	a) Provided interpreter services at no cost to patients with Limited English Proficiency (LEP) patients or who are deaf or hard-of-hearing, in order to enhance effective communication and ensure access to health care information and services in accordance with Federal, State and Local regulations. b) Offered language assistance at different points of service and levels of care e.g. emergency area, outpatient and inpatient. Interpretation methods include: in person interpreting, over-the-phone interpreting. c) Informed all staff on how to use the electronic health record system to record patient's need for interpreters, and use of the institution's interpreter services to offer language assistance as needed. d) Reviewed Interpreter Services program and process to ensure quality, access and efficiency. Implemented the system wide Tiered System for increased efficiency and service access. e) Continued to provide certified medical interpreter vendor services with ability to deliver language assistance in over 200 languages to complement internal staff interpreters. f) Continued to provide internal certified medical staff interpreters for the following languages: Chinese dialects, Spanish, Russian, Vietnamese, Japanese and Korean.	**KEY INDICATORS:** a) Individuals with limited English proficiency and/or other communication needs have equitable access to health services b) Individuals understand their care and service options and participate in decisions regarding their health and health care c) Improved patient safety and reduce medical error related to miscommunication	1. Monitored and track both pre-scheduled and same day scheduled interpreting activities by language groups & interpreting modalities (i.e. in person, telephonic, remote video) 2. Monitored LEP census by campus for common languages. 3. Identified incorrect LEP needs in the Sutter Electronic Health Record are reported for correction on regular basis. 4. Educated on Interpreter Services to inform all staff on how to use the electronic health record system to record patient's need for interpreters 5. Reviewed industry best practices for interpreter services including remote video interpreting and telephonic interpreting. 6. Maintained practices and policies compliant with Health and Safety Code Section 1259.
6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.	a) Continued to identify language needs at registration and inform patents of the availability of language assistance resources at no cost. b) Updated regulation signage notifying patients of interpreter services available free of charge. c) Continued to communicate with staff the availability of telephonic interpreter services and their ability to utilize the services to communicate with patients in over 200 languages 24 hours 7 days a week. d) Continued to follow-up and report any concerns or issues with the telephonic interpreter system to our vendor. e) Provided written notices in the top 13 languages in all outpatient locations to advise patients and their families of the availability of interpreters in accordance with Health and Safety Code Section 1259. f) Developed and piloted a mobile survey tool via MyRounding to round on LEP patients. Collected data from interpreter rounds to inform on process of communicating the availability of language assistance services.	**KEY INDICATORS:** a) Individuals with limited English proficiency are informed, in their preferred language, that language services are readily available at no cost to them b) Coordinated and facilitated access to language services	1. Notified patients of the availability of language assistance services at no cost to them and continued regular audits of posted language notifications. Posted multilingual signage in all outpatient facilities to notify patients of free interpretation services. 2. Continued to monitor and maintain policies and procedures related to informing patients of language/ interpretation services. 3. Collected data from LEP patient rounds to inform on the frequency of use and communications regarding the availability of language services.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Communication and Language Assistance:	***ORGANIZATIONAL FOCUS - PATIENT EXPERIENCE: Delivering a consistently excellent patient experience through the eyes of our patients.***		
7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.	a) Continued to have a process to evaluate the language competency of qualified bilingual staff for language assistance. b) Continued to audit and monitor vendor interpreters for quality; periodically screened interpreters as needed. c) Continued to offer educational opportunities to staff medical interpreters to maintain and enhance their skill levels. d) Developed new process for identifying bi-lingual staff and expanded the process to recognize and evaluate the competencies of bi-lingual staff. e) Constructed and disseminated communications on the restrictions of recognized conversationally competent bi-lingual staff—no medical interpreting. f) Developed and piloted a mobile survey tool via MyRounding to round on LEP patients. Collected data from interpreter rounds to inform on quality of care and interpreter services provided to LEP patients.	**KEY INDICATORS:** a) Accurate and effective communication between individuals and providers b) Individuals are empowered to negotiate and advocate, on their own behalf, for important services via effective and accurate communication with health and health care staff	1. Maintained and publicized up-to-date information about Qualified Bilingual Staff (certified at Medical/Basic level by external independent agency) on the institutional intranet 2. Established a quality assurance program to ensure and validate the competency of our vendor interpreters. 3. Monitored our certified interpreter's activities as related to their efficiency and competency. 4. Reviewed vendor translation process for quality control. 5. Collected data from LEP patient rounds to inform on the quality of interpreter use and potential use of untrained individuals.
8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.	a) Continued to provide signage in our common languages: Chinese, Spanish, Russian and Tagalog (including St Luke's). b) Continued to make available translation resources to staff. The hospital departments and care providers determine which translated documents and languages are needed based on patient population. c) Initiated the development of way finding team to address signage and way finding on each campus. d) Audited the multilingual signage and interpreter notification postings. Walked through every patient facing area to ensure multilingual information was posted notifying patients of their right to free interpreter services in accordance with Health and Safety Code Section 1259. e) Initiated communications with CPMC 2020 planning for the Van Ness and Mission Bernal Campus to discuss topics such as bilingual digital signage and wayfinding. f) Translated appropriate patient education materials and intake documents. Completed additional translation of: a. Patient welcome video and welcome packet b. Physical Medicine and Rehabilitation class materials c. Pulmonary rehabilitation program documents d. Transplant procedure materials	**KEY INDICATORS:** a) Readers of other languages and individuals with various health literacy levels are able to access care and service b) Individuals are able to make informed decisions about their health care/service options	1. Completed periodic reviews by Staff interpreters to audit the accuracy and adequacy of multi-lingual signs 2. Initiated the development of way finding team to address signage and way finding on each campus. 3. Audited the multilingual signage and interpreter notification postings. Walk through every patient facing area to ensure multilingual information was posted notifying patients of their right to free interpreter services

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Continuous Improvement and Evaluation:	***ORGANIZATIONAL FOCUS – FUTURE: Continually reimagine the way we deliver care to best serve the needs of our patients.***		
9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.	a) Reviewed department level goals & policies for Interpreter Services, Patient Relations to support management accountability and infuse cultural & linguistic elements in planning/operations. b) Completed Health Equality Index to review CPMC policies and practices that surround the LGBTQ community including community outreach, staff education, signage and patient rights. c) Participated in Sutter System Sponsored Inclusion dialogs facilitated to engage employee feedback on issues of Diversity and Inclusion. d) Participated in the Sutter level inclusion resource groups focusing on creating an inclusive environment for staff who support or identify with LGBTQ and ADA issues and/or community. e) Designated Senior leadership that supports and promotes CLAS through policies, practices and allocated resources. Discussed with the senior leadership and directors of Community Benefit the ways in which CLAS standards could be further integrated into the systems and structures of CPMC.	**KEY INDICATORS:** a) CLAS integrated within service, administrative, and supportive functions b) CLAS integrated within organization's strategic goals and priorities c) CLAS integrated within organizational planning, development and related to outcomes accountability	1. Continued to have a process in place in which policies and procedures are routinely reviewed. 2. Monitored departmental level goals and success indicators through the Performance Success and Development Process (PSDP). 3. Developed and regularly met with the CLAS Action planning committee to review the structural framework surrounding CLAS and the organizational capacity to deliver CLAS. 4. Reviewed Human Resources policies and programming on Equal Employment, Employee Relations and Employee Benefits documenting CPMC's intent to respect cultural diversity and value each employee's uniqueness and contributions to a productive workforce. Reviewed Interpreter services policy, patient rights and responsibility policy, chaplaincy policy, HR policy, CME procedure
10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.	a) Utilized the CLAS Action planning committee to ensure that CLAS standards were reflected and infused in services provided to the diverse patient population. b) Analyzed a CLAS Quality Assessment (A3 Thinking & Planning) to review the organization's CLAS-related activities and integrate CLAS-related measures into continuous quality improvement activities. c) Re-analyzed the in-person and over-the-phone interpretation data in the Interpreter Services Quality to make interpretation services more efficient and improve the quality of service for patients. Identified strengths and areas for improvement. d) Continued tracking the percentage of staff educational opportunities that integrate components of cultural competency into training via partnership with Nursing Education. e) Partnered with the Quality and Safety team to assess the impact of CLAS related implementations and programs on patient safety and health outcomes. f) Identified and monitored the various areas of the hospital practices that fulfill the CLAS standards.	**KEY INDICATORS:** a) Assessment of performance and progress in implementing CLAS Standards b) Assess the value of CLAS-related activities relative to the fulfillment of governance, leadership, and workforce responsibilities	1. Continued development in the CLAS Action Planning focus areas (Framework Development, Education/Staff Development, Data Collection/ Measurement, Communication Engagement) for quality improvement and data collection. 2. Tracked the percentage of CEU training events that integrate components of cultural competency in training material.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Continuous Improvement and Evaluation:	***ORGANIZATIONAL FOCUS – FUTURE: Continually reimagine the way we deliver care to best serve the needs of our patients.***		
11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.	a) Used Electronic Health Record system to collect/record demographic data and language needs of patients. Interpreter department level assessment was completed to validate language services provided as indicated. b) Generated Sutter Electronic Health Record LEP Census Reports by campus to analyze interpreter usage frequency. c) Continued to collect demographic data, spiritual preferences and educational needs at intake by entering information into the electronic health record system during Pre-registration. d) Continued to provide LEP patient census tool for staff interpreters to locate LEP patients by language as needed. e) Aligned CPMC efforts with the Sutter System Advancing Health Equity project analyzing patient health outcomes by demographics to inform potential racial disparities in care outcomes. f) Partnered with Data Management team to generate personalized demographic reports on patient diversity and health outcomes. Made reports available to staff via internal intranet. 1. Patient REAL Demographics 2. Patient Readmission by Race & Primary Language 3. ED visit by Patient race and Primary language 4. Bi-lingual staff report 5. Staff REAL Demographics 6. Staff Turnover by Race/Ethnicity g) Continued to partner with Human resources to generate report on overall staff diversity and diversity throughout the various management levels for Affirmative Action planning.	**KEY INDICATORS:** a) Accurately identify population groups within a service area monitor individual needs, access, utilization, quality of care, and outcome patterns b) Improved service planning that enhances access and coordination of care c) Measurement to what extent health care services are provided equitably	1. LEP Census Reports generated by staff interpreters to locate LEP patients and provide appropriate services. 2. Generated weekly/monthly dashboard reports that monitor request volume, cancellation, and vendor dependency. 3. Conducted monthly analysis of over the phone interpretation. 4. Attended regular meetings with the Sutter System on the Advancing Health Equity Project. 5. Generated monthly patient demographic reports. 6. Continued to capture patient religion, race/ethnicity/ancestry, primary language, spiritual preference, geographic data, insurance coverage, and interpreter need at patient admission.
12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.	a) Community Benefit department participated in the 2016 community health needs assessment in partnership with SFHIP and other community based organizations, San Francisco Hospitals and the San Francisco Department of Public Health. Began implementation of the plan developed in 2016 including components of trauma informed care. b) Community Benefit department continued the advancement the annual implementation plan to respond to needs identified in 2016 SF Community Health Needs Assessment. c) Evaluated Interpreter Services geographic language demographics & needs data as well as CPMC's LEP census reports and planned the provision of language assistance accordingly.	**KEY INDICATORS:** a) Determination of service assets and needs of populations in service areas (needs assessment) to support resource inventory and gap analysis b) Analysis of demographic, cultural, linguistic, and epidemiological baseline data (quantitative and qualitative) of populations served	1. Participated in SFHIP on an ongoing basis through the Community Benefit Steering Committee. 2. Continued partnership with SFHIP to address needs identified in the needs assessment. 3. Ensured community health programs investments align with needs assessment and SFHIP priorities.

CLAS Standards	Strategies/Tactics	Reference/Key Indicator	Internal Monitoring/Metric(s)
Community Engagement:	***ORGANIZATIONAL FOCUS – MARKET: Develop an integrated approach to serving our patients and other customers through partnerships with providers and payers.***		
13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.	a) Community Benefit department participated in the 2016 community health needs assessment in partnership with SFHIP and other community based organizations. b) Reviewed community partners: Over 70 organizations and their descriptions as well as the nature of their partnership with CPMC. Many of the organizations represent racial/ethnic/gender minority groups which focus on increasing access to care and preventative services for diverse groups in the Bay area. c) Continued receiving input from the patient population via the Patient Family Advisory Committee.	**KEY INDICATORS:** a) Provided responsive and appropriate service delivery informed and guided by community interests, expertise, and needs b) Increased appropriate use of services by engaging by underserved minority groups to design and services their needs and desires c) Empower members of underserved minority communities become active participants in the health and health care process	1. Participated in SFHIP on an ongoing basis through the Community Benefit Steering Committee. 2. Ensured CPMC"s community health programs investments align with needs assessment and SFHIP priorities, including priority neighborhoods and communities with identified health disparities.
14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.	a) Continued to process complaints & grievances of all nature with commitment to service excellence and quality personalized care by Patient & Customer Relations Department. Process ensures that patient is contacted within 7 days with resolutions and next steps and or need for mediation and final response is given within 30 days. b) Continued to track cultural/diversity complaints as an Event Type in our Online Occurrence Report system. Additionally began to review patient complaint information via primary language. All complaints and grievances are investigated. c) Began process to track Language and ADA access complaints as an Event Type in our Online Occurrence Report system.	**KEY INDICATORS:** a) Facilitate open and transparent two-way communication/feedback that meets federal and/or state level regulations that address topics such as grievance procedures, the use of ombudspersons, and discrimination policies and procedures	1. Continued to track cultural/diversity complaints as an Event Type in our Online Occurrence Report system. 2. Investigated all complaints and grievances. In compliance with CMS, grievances are acknowledged within 7 days and final response given within 30 days.
15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.	a) Continued to inform the city with up to date information on the hiring in accordance with the development agreement b) Identified external communications documents such as the Interpreter Services Availability notice, Patients/ Visitors with Disabilities Policy & Procedure, Pre-Registration, Intake and Admitting policy, Side by Side Magazine, and the 2016 Report to the Community. Internal communications documents were also reviewed including Hands on Healing, Take 5 and the internal intranet/portal for information reported to staff. From this information, the CLAS action Planning committee re-developed a 2017 Communication plan to address the ways in which communication around CLAS can be enhanced and expanded.	**KEY INDICATORS:** a) Information conveyed to intended audiences about efforts and accomplishments in meeting the National CLAS Standards to meet community benefits and other reporting requirements, including accountability for meeting health care objectives in addressing the needs of diverse individuals or groups	1. Communicate CLAS related community benefits and language assistance to Senior Management 2. Broadcast updates through internal and external channels. 3. Improve and update internal and external CLAS communications via the efforts of the CLAS Action Planning committee. -Internal dashboard reporting/ CEO town halls, and external Community Benefit communications via CPMC website

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ATTACHMENT 2
Development Agreement Payments Schedule/CPMC Payments

	Agency	Effective Date + 30 days	First Installment[1]	Second Installment	Third Installment	Fourth Installment	Fifth Installment	11/08/17 CPMC Payments	TOTAL
Affordable Housing Payment[2]	MOH	2,400,000	6,700,000	7,000,000	8,825,000	8,100,000	3,475,000	Completed	36,500,000
Healthcare Innovation Fund[3]	Foundation	2,000,000	1,500,000	1,125,000	1,125,000	1,725,000	1,125,000	Completed	8,600,000
Bus Rapid Transit contribution[4]	MTA		2,100,000	2,900,000					5,000,000
Transit Fee[5]	MTA				1,500,000	2,500,000	2,500,000	Completed	6,500,000
Bicycle Studies Contribution[5]	MTA	400,000							400,000
Workforce training payment[5]	Foundation	1,000,000	2,000,000	1,000,000					4,000,000
Tenderloin sidewalk widening and pedestrian lighting improvements[6]	DPW/PUC	400,000	1,200,000	1,275,000	1,275,000	100,000			4,250,000
Tenderloin Safe Passage Grant[7]	OEWD	200,000							200,000
Transit and safety improvements in neighborhoods around the Cathedral Hill Campus[7]	MTA	200,000	200,000		575,000	575,000			1,550,000
Enforcement & traffic safety measures around Pacific & California Campuses[7]	MTA	300,000	300,000	700,000	700,000	1,000,000			3,000,000
Total		6,900,000	14,000,000	14,000,000	14,000,000	14,000,000	7,100,000		70,000,000

[1] First Installment is due thirty (30) days after the earlier of the date the Approvals are Finally Granted or the date the Cathedral Hill Campus Hospital Commences Construction, and each following Installment is due on each anniversary thereafter.

[2] As set forth in Exhibit G.

[3] The "Innovation Fund" is defined in Exhibit F.

[4] As set forth in Exhibit K.

[5] As set forth in Exhibit E.

[6] As set forth in Exhibit H.

Sutter Health
CPMC
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Enterprise Development

California Campus
3700 California Street

Pacific Campus
2333 Buchanan Street

Mailing Address
P.O. Box 7999
San Francisco, CA
94120
415.600.6000

Davies Campus
Castro & Duboce
Streets

St. Luke's Campus
3555 Cesar Chavez
Street

To. **The San Francisco Foundation**
1 Embarcadero Center, Suite 1400
San Francisco, CA 94111
Attention: Landon Williams

Date: **November 14, 2017**

From **Vahram Massehian**
Senior Project Manager Enterprise Development
California Pacific Medical Center
633 Folsom Street, 1st Floor
San Francisco, CA 94107
415-600-7325

Re: **Innovation Fund Fifth Installment**

By Hand Delivery

Remarks:

Pursuant to instructions, we are delivering Check No. 4380039 in the amount of One Million One Hundred and Twenty-Five and 00/100 Dollars ($1,125,000.00) in satisfaction of the Fifth Installment payment due under Section 3(b) of Exhibit F (aka "The Innovation Fund") of the Development Agreement Relating to the Construction and Reconstruction of Healthcare Facilities in Furtherance of the California Pacific Medical Center Long Range Development Plan by and between the City and County of San Francisco and Sutter Health, and the associated Innovation Fund Agreement.

If anything in the above is in error, please immediately contact me.

Kind Regards,

Vahram Massehian

I, Landon Williams, acknowledge receipt on behalf of the San Francisco Foundation.
[Print Name]

x _____ Signature

CC:
Robin Havens, Mayor's Office of Economic and Workforce Development (w/o Enclosure)
Henry Yu, California Pacific Medical Center (w/o Enclosure)

Sutter Health CPMC
We Plus You

Enterprise Development

California Campus
3700 California Street

Pacific Campus
2333 Buchanan Street

Mailing Address
P.O. Box 7999
San Francisco, CA
94120
415.600.6000

Davies Campus
Castro & Duboce
Streets

St. Luke's Campus
3555 Cesar Chavez
Street

To. **Tom Shanahan**
Office of Economic and Workforce Development
1 Dr. Carlton B. Goodlett Place, Room 448
San Francisco, CA 94102

Date: **November 08, 2017**

From **Vahram Massehian**
Senior Project Manager Enterprise Development
California Pacific Medical Center
633 Folsom Street, 1st Floor
San Francisco, CA 94107
415-600-7325

Re: **Development Agreement Fifth Installment Payment**

By Hand Delivery

Remarks:

Pursuit to instructions we are delivering Check No. 4380038 totaling in the amount of Five Million Nine Hundred Seventy-Five and 00/100 Dollars ($5,975,000.00) to the City and County of San Francisco, in satisfaction of the Fifth Installment payment due under the following sections of the Development Agreement Relating to the Construction and Reconstruction of Healthcare Facilities in Furtherance of the California Pacific Medical Center Long Range Development Plan by and between the City and County of San Francisco and Sutter Health:

Exhibit G – Housing Program

Affordable Housing Payment: **$3,475,000**

Exhibit K – Transportation Program

Transit Fee: **$2,500,000**

November 08, 2017

If anything in the above is in error, please immediately contact me.

Kind Regards,

Vahram Massehian

I, Thomas Shanahan, acknowledge receipt on behalf of the City and County of San Francisco.
[Print Name]

x Thomas Shanahan Signature

CC:
Henry Yu, California Pacific Medical Center (w/o Enclosure)

RECEIPT DATE 11/8/2017 **No.** 715205

RECEIVED FROM Sutter Health $5,975,000.00

Five Million, Nine Hundred Seventy-Five Thousand Dollars DOLLARS

○ FOR RENT
○ FOR CPMC

ACCOUNT		○ CASH
PAYMENT		○ CHECK
BAL. DUE		○ MONEY ORDER
		○ CREDIT CARD

FROM _____ TO OEWD

BY Thomas Shanahan 3-11

SAN FRANCISCO
Office of Economic and Workforce Development

City and County of San Francisco :: Edwin M. Lee, Mayor
Economic and Workforce Development :: Todd Rufo, Director

May 30, 2017

Vahram Massehian
Senior Project Manager
California Pacific Medical Center
P.O. Box 619110
Roseville, CA 95661-9110

Dear Mr. Massehian,

Pursuant to the Memorandum of Understanding between California Pacific Medical Center and the City and County of San Francisco — please find enclosed invoices from City Agencies for work performed on the California Pacific Medical Center project.

Payment should be made out to the Office of Economic and Workforce Development and mailed to the attention of Phillip C. Wong (address below) for distribution amongst City Agencies and City Contractors.

Office of Economic and Workforce Development
Attn: Phillip C. Wong
City Hall, Rm. 448
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102-4653

Department	Invoice #	Invoice Period (Q3 FY 16-17)	Total
OEWD	CPMC11-025	January 2017 – March 2017	**$ 34,420.00**
City Attorney	#24, 1100299	January 2017 – March 2017	**$ 2,090.00**
Contract Monitoring Division	FY 16-17, Q3	January 2017 – March 2017	**$ 611.13**
SF Planning	01/01/17-03/31/17	January 2017 – March 2017	**$ 9,714.22**
		TOTAL AMOUNT DUE:	**$ 46,835.35**

Sincerely,

Signature:

Email: merrick.pascual@sfgov.org

Merrick Pascual
Chief Financial Officer
Office of Economic and Workforce Development

DocuSign Envelope ID: 0303E8A2-6012-43CB-AD04-9254998A0E1A

SAN FRANCISCO
Office of Economic and Workforce Development

City and County of San Francisco :: Edwin M. Lee, Mayor
Economic and Workforce Development :: Todd Rufo, Director

July 27, 2017

Vahram Massehian
California Pacific Medical Center
P.O. Box 619110
Roseville, CA 95661

Dear Mr. Massehian:

Pursuant to the Development Agreement between California Pacific Medical Center and the City and County of San Francisco — please find enclosed invoices from City Agencies and City Contractors for work performed on the California Pacific Medical Center project.

Payment should be made out directly to the Office of Economic and Workforce Development in **one (1) consolidated check**, and mailed to the attention of Thomas Shanahan (address below) for distribution amongst City Agencies and City Contractors

Office of Economic and Workforce Development
Attn: Thomas Shanahan
City Hall, Rm. 448
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Department	Invoice Number	Invoice Period	Total
OEWD	OEWDCPMC11_26	April 2017 - June 2017	$ 27,082.00
Contract Monitoring Division	FY 16-17, Q4	April 2017 - June 2017	$ 470.64
City Attorney	1100299	April 2017 - June 2017	$ 190.00
SF Planning	4/01/17-6/30/17	April 2017 - June 2017	$ 8,427.28
		Total Amount Due:	**$ 36,169.92**

Sincerely,

DocuSigned by:
8687E129144B45D...

Merrick Pascual
Chief Financial Officer
Office of Economic and Workforce Development

DocuSign Envelope ID: 4A76EC1D-0DD6-4A0A-A1FA-AC9F6E2B4B67

SAN FRANCISCO
Office of Economic and Workforce Development

City and County of San Francisco :: Edwin M. Lee, Mayor
Economic and Workforce Development :: Todd Rufo, Director

Date: December 4, 2017

To: Vahram Massehian
California Pacific Medical Center
P.O. Box 619110
Roseville, CA 95661

CC: Thomas Shanahan

From: Merrick Pascual

Subject: CPMC, OEWD Invoice No.: OEWDCPMC11_26, Q4 FY 16-17, SUPPLEMENT

This is a payment request for Q4 FY 16-17 (April 1, 2017 - June 30, 2017) in the amount of $16,599.42

Please make the check payable to the CCSF – Office of Economic & Workforce Development. If you have questions or need additional information do not hesitate to contact me at (415) 701-4811 or merrick.pascual@sfgov.org. Thank you.

DocuSigned by:
8687E129144B45D...

Merrick Pascual
Chief Financial Officer
Office of Economic and Workforce Development
1 South Van Ness, San Francisco, CA 94103-5416

DocuSign Envelope ID: 4A76EC1D-0DD6-4A0A-A1FA-AC9F6E2B4B67

SAN FRANCISCO
Office of Economic and Workforce Development

City and County of San Francisco :: Edwin M. Lee, Mayor
Economic and Workforce Development :: Todd Rufo, Director

December 4, 2017

Vahram Massehian
California Pacific Medical Center
P.O. Box 619110
Roseville, CA 95661

Dear Mr. Massehian:

Pursuant to the Development Agreement between California Pacific Medical Center and the City and County of San Francisco — please find enclosed invoices from City Agencies and City Contractors for work performed on the California Pacific Medical Center project.

Payment should be made out directly to the Office of Economic and Workforce Development in **one (1) consolidated check**, and mailed to the attention of Thomas Shanahan (address below) for distribution amongst City Agencies and City Contractors

Office of Economic and Workforce Development
Attn: Thomas Shanahan
City Hall, Rm. 448
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Department	Invoice Number	Invoice Period	Total
OEWD	OEWDCPMC11_27	July 2017 - September 2017	$ 33,584.80
Contract Monitoring Division	FY 17-18, Q1	July 2017 - September 2017	$ 1,230.07
City Attorney	1100299	July 2017 - September 2017	$ 190.00
SF Planning	7/01/17-9/30/17	July 2017 - September 2017	$ 13,479.70
		Total Amount Due:	**$ 48,484.57**

Sincerely,

DocuSigned by:
8687E129144B45D...

Merrick Pascual
Chief Financial Officer
Office of Economic and Workforce Development

DocuSign Envelope ID: 67144229-4675-4DD7-B7D0-0AA845742E8A

SAN FRANCISCO
Office of Economic and Workforce Development

City and County of San Francisco :: Mark Farrell, Mayor
Economic and Workforce Development :: Todd Rufo, Director

March 5, 2018

Vahram Massehian
California Pacific Medical Center
P.O. Box 619110
Roseville, CA 95661

Dear Mr. Massehian:

Pursuant to the Development Agreement between California Pacific Medical Center and the City and County of San Francisco — please find enclosed invoices from City Agencies and City Contractors for work performed on the California Pacific Medical Center project.

Payment should be made out directly to the Office of Economic and Workforce Development in **one (1) consolidated check**, and mailed to the attention of Thomas Shanahan (address below) for distribution amongst City Agencies and City Contractors

Office of Economic and Workforce Development
Attn: Thomas Shanahan
City Hall, Rm. 448
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Department	Invoice Number	Invoice Period	Total
OEWD	OEWDCPMC11_28	October 2017 - December 2017	$ 38,342.40
SF Planning	10/01/17-12/31/17	October 2017 - December 2017	$ 3,924.51

Less: Credit from Q1	$ 9,087.92
Total Amount Due:	**$ 33,178.99**

Sincerely,

DocuSigned by:
8687E129144B45D...

Merrick Pascual
Chief Financial Officer
Office of Economic and Workforce Development

Sutter Health
CPMC
We Plus You

ATTACHMENT 3
Entry Level Operational Hiring

Sutter Health
CPMC
We Plus You

Process with SFOEWD/First Source Hiring Program

CPMC, in coordination with OEWD, is making the required good faith efforts regarding the First Source (FS) Entry Level Hiring Goal.

CPMC has been working with OEWD and its network of providers to build off 2016 and further refine the hiring processes and procedures that will enhance opportunities for targeted groups and accelerate the progress toward the 40% local hiring goal. The recruitment team at CPMC meets regularly with OEWD. We have developed a foundation and mutually shared vision for working together throughout the term of the Development Agreement.

Below is a summary of how CPMC has demonstrated good faith efforts to date:

Hiring	• CPMC made 57 entry level hires in 2017. To reach the 40% goal, 23 FS hires were needed. CPMC hired 33 FS candidates in 2017. • 73% of FS hires came from targeted neighborhoods in 2017. • Thru the first four months of 2018 CPMC has a 46% FS hiring rate, 11 FS hires out of 24 total hires. • Thru the first four months of 2018, 64% of FS hires came from targeted neighborhoods. • CPMC is actively referring every San Francisco candidate to OEWD to improve their chances for employment, whether at CPMC or elsewhere. • Exhibit A charts the local hiring percentage for 2017. • Exhibit B charts the percentage of those hires from targeted neighborhoods in 2017. • Exhibit C charts the local hiring percentage for the first four months in 2018. • Exhibit D charts the percentage of those hires from targeted neighborhoods in the first four months of 2018.
Active Engagement and Resource Allocation	• Weekly meetings with hiring managers with constant reminders on the importance of the workforce agreement. • Engaged in approx. 24 job fairs, employer spotlights, meetings/workshops in 2017. At the time of this submittal CPMC has participated in an additional 8 engagements in 2018, see Exhibit E.

	• In addition to one full time recruiter designated to entry level hiring, CPMC applied additional resources to effectively evaluate and process referrals.
Hiring Projections	• Detailed Hiring Projections for Aug. 2017 thru Aug. 2018 were provided to OEWD, see Exhibit F. • Detailed Hiring Projections for Aug. 2018 thru Aug. 2019 will be provided to OEWD in August 2018.

Priorities for 2017

In addition to meeting the minimum good faith efforts of providing OEWD with hiring projections, notifying OEWD of all entry level positions, giving OEWD an exclusive 10 days to refer candidates for entry level positions, considering candidates referred by the workforce system, working to meet the hiring goal of 40%, and continuing to fine-tune the systems put in place thus far, CPMC has also committed to the following:

- Participating in regular weekly check-ins with OEWD and its sector leads.
- Attending various community job fairs/events sponsored by OEWD and various CBOs targeting the priority areas noted in the Development Agreement.
- Applying approximately 50 hours per week in time and resources to monitor, track, capture, report, and effectively evaluate and process referrals.
- Prioritizing system referrals past the minimum 10 days if a requisition has not been filled.
- Expediting the application of the Workforce Training funds.
- Worked with CBO leads to identify qualified candidates.

Challenges

- San Francisco's unemployment rate is approx. 2.3%, the lowest in 18 years.
- Strain on our CPMC workforce due to the limited pipeline of qualified San Francisco candidates.
- Escalating cost of living and lack of affordable housing within San Francisco.

EXHIBIT A

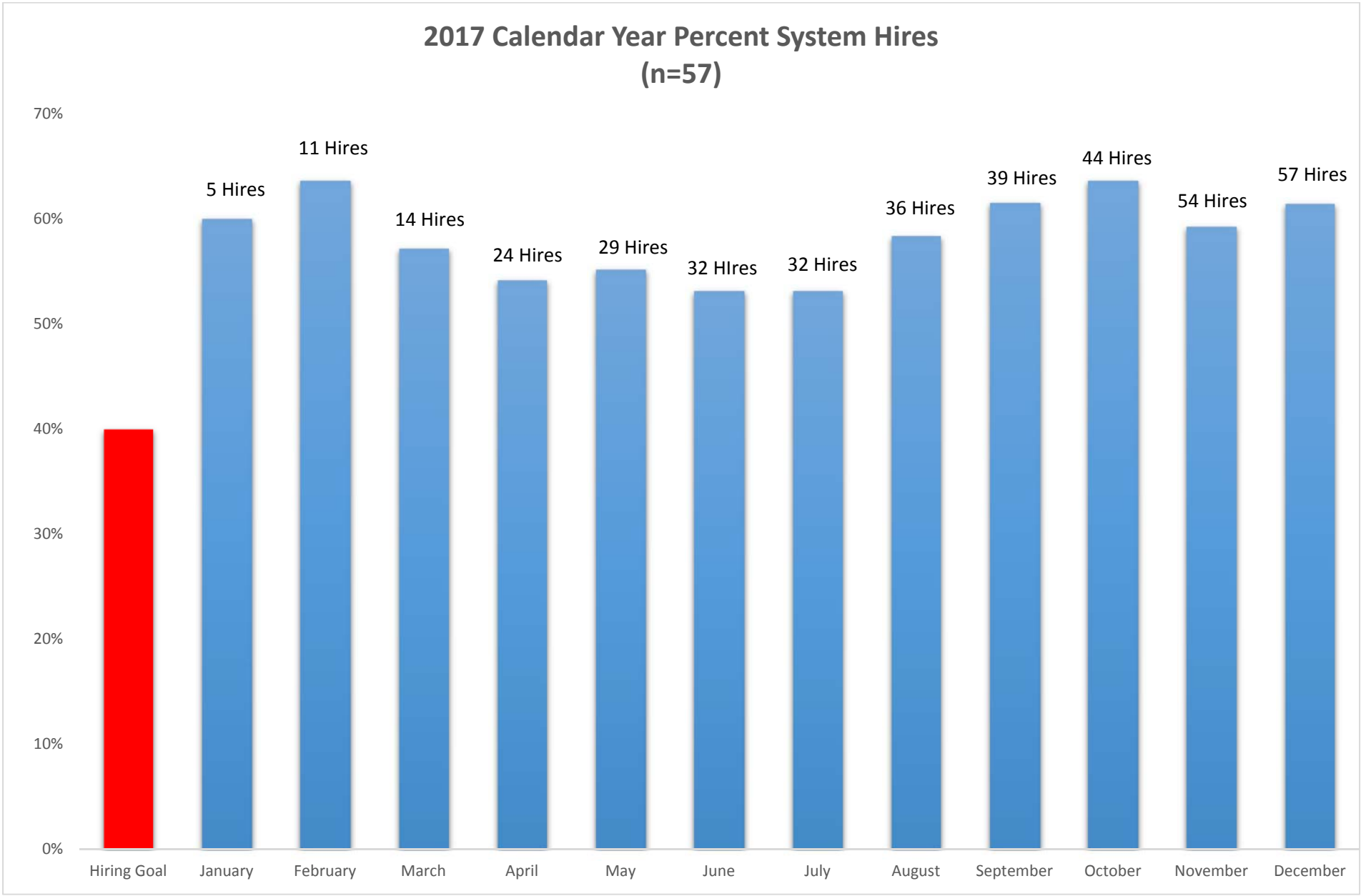
2017 Calendar Year Percent System Hires
(n=57)
70%
60%
50%
40%
30%
20%
10%
0%
5 Hires
11 Hires
14 Hires
24 Hires
29 Hires
32 HIres
32 Hires
36 Hires
39 Hires
44 Hires
54 Hires
57 Hires
Hiring Goal
January
February
March
April
May
June
July
August
September
October
November
December

EXHIBIT B

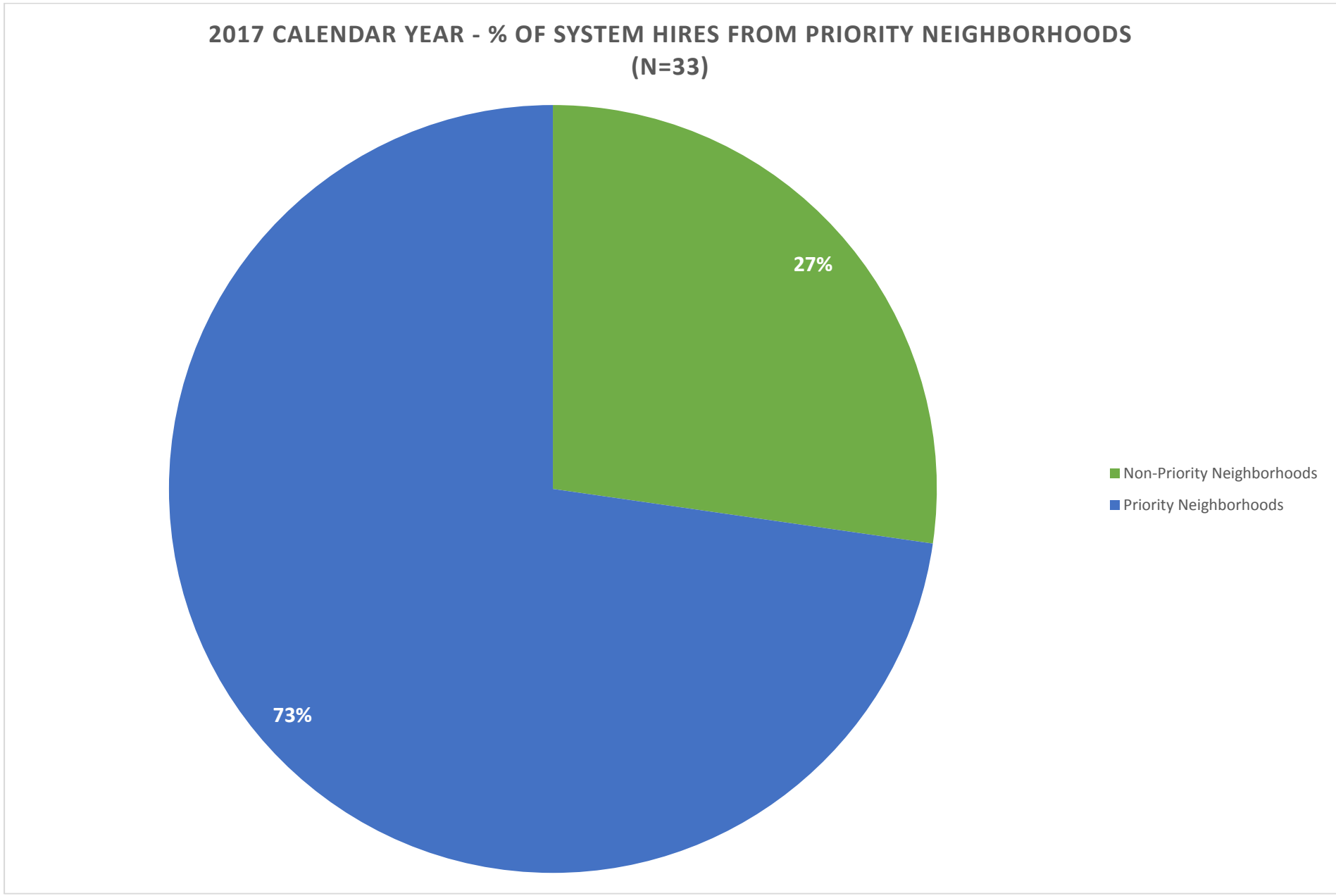
2017 CALENDAR YEAR - % OF SYSTEM HIRES FROM PRIORITY NEIGHBORHOODS
(N=33)
27%
73%
Non-Priority Neighborhoods
Priority Neighborhoods

EXHIBIT C

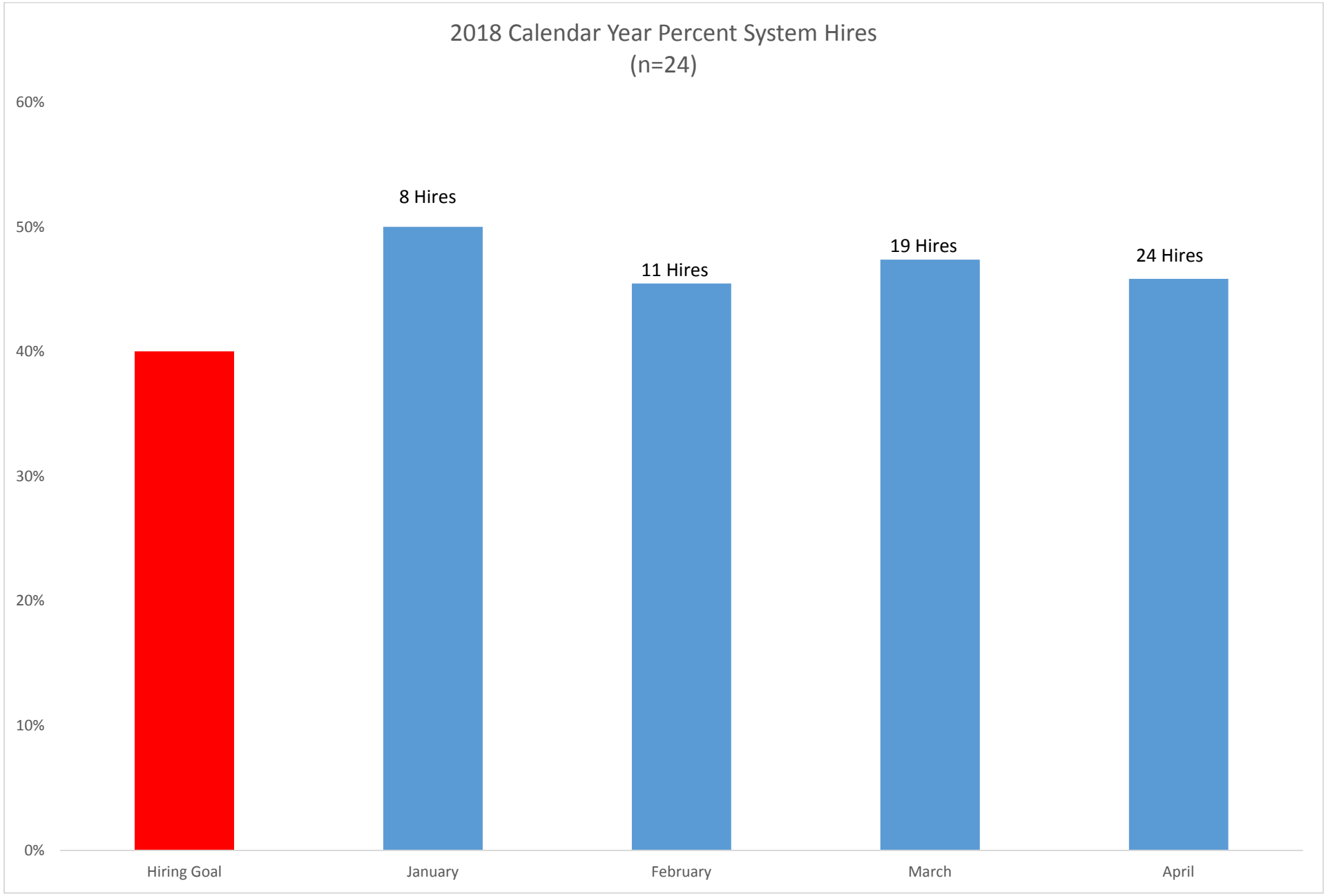
2018 Calendar Year Percent System Hires
(n=24)
60%
50%
40%
30%
20%
10%
0%
8 Hires
11 Hires
19 Hires
24 Hires
Hiring Goal
January
February
March
April

EXHIBIT D

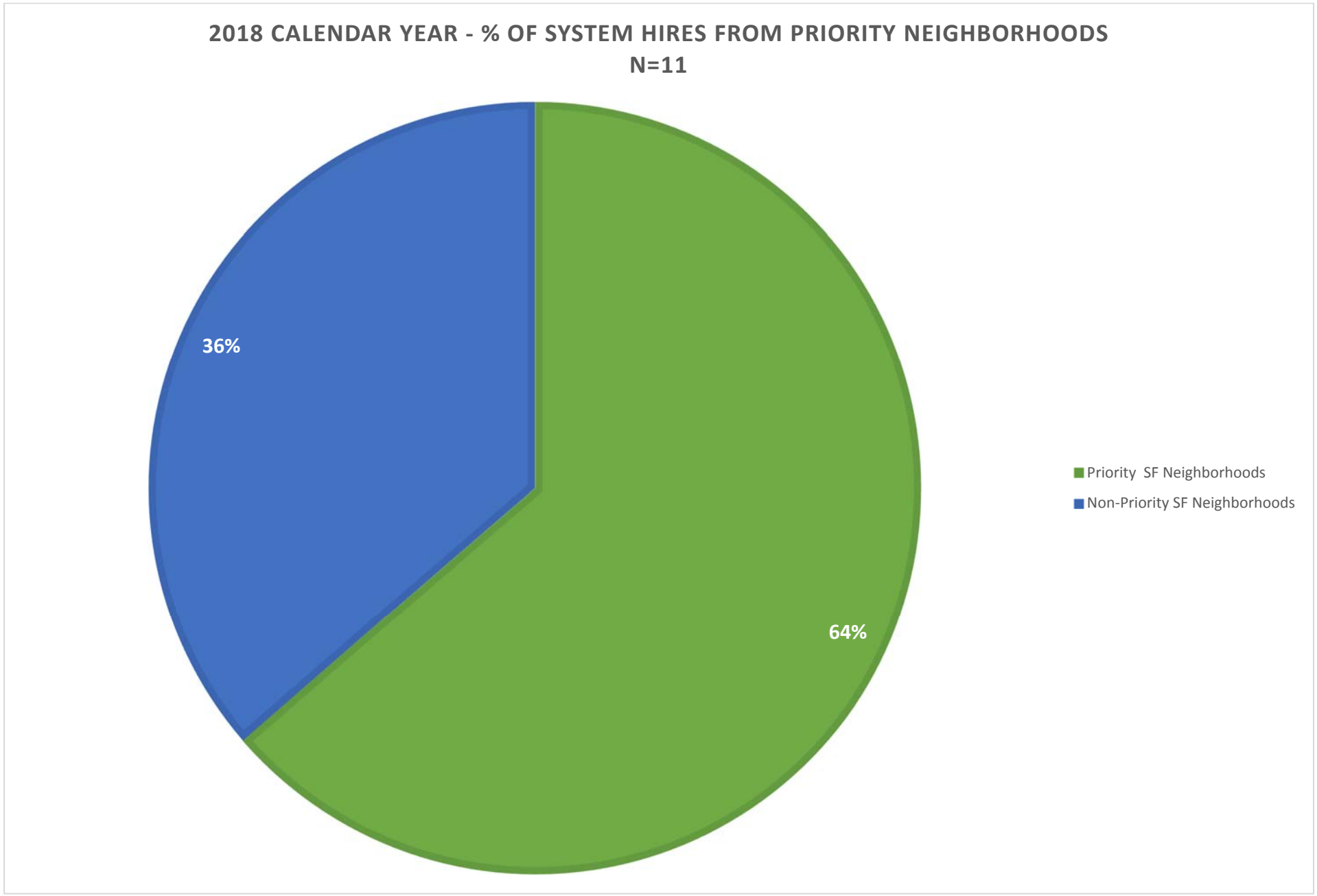
2018 CALENDAR YEAR - % OF SYSTEM HIRES FROM PRIORITY NEIGHBORHOODS
N=11
36%
64%
Priority SF Neighborhoods
Non-Priority SF Neighborhoods

EXHIBIT E

Date	Meeting	CPMC Participants
05/03/2018	Mission Hiring Hall	Pragna Dave Jennifer Dela Rosa
04/12/2018	YCD Event	Pragna Dave Jennifer Dela Rosa
03/22/2018	Visitacion Valley Employer Spotlight	Pragna Dave
03/21/2018	Western Addition NAP pre screen event	Pragna Dave Jennifer Dela Rosa
03/05/2018	Meeting with SF Foundation and OEWD	Vahram Massehian
02/09/2018	Meeting with Code Tenderloin	Vahram Massehian
01/18/2018	Employer Spotlight @ Hospitality House in Tenderloin Neighborhood	Pragna Dave Jana Fernandez
01/10/2018	Culinary Showcase & Graduation	Rebecca Ostrander Jana Fernandez
12/19/2017	Retention Project	Rebecca Ostrander
12/12/2017	Pre-Screen Event @ JVS	Pragna Dave
12/08/2017	Conference Call with SF Foundation & OEWD	Ed Battista Vahram Messehian Melissa White Pragna Dave
11/09/2017	Employer Spotlight @ VVNAP	Pragna Dave Jana Fernandez
10/18/2017	Employer Spotlight @ Hospitality House in Tenderloin Neighborhood	Pragna Dave Jana Fernandez

10/05/2017	Job Fair @ CCSF	Pragna Dave Jana Fernandez
09/28/2017	CPMC DA Compliance Hearing	Pragna Dave Vahram Massehian Melissa White Edward Battista
09/19/2017	Foundation Meeting	Edward Battista Vahram Massehian
09/14/2017	Employer Spotlight @ CNAP	Pragna Dave Jana Fernandez
09/13/2017	CPMC @ WISF Meeting	Edward Battista Pragna Dave
07/27/2017	Employer Spotlight @ JVS	Pragna Dave Jana Fernandez
07/25/2017	Employer Spotlight @ WANAP	Pragna Dave Jana Fernandez
07/14/2017	Job Fair @ CCSF	Pragna Dave Jana Fernandez
07/06/2017	Foundation Meeting	Vahram Massehian
06/13/2017	Employer Spotlight @ FacesSF	Pragna Dave Kevin Trang
05/09/2017	JVS Strictly Business Luncheon	Pragna Dave Vahram Massehian
05/04/2017	CCSF Job Fair	Pragna Dave Kevin Trang
04/18/2017	Pre-Screen Event @ WANAP	Pragna Dave
03/31/2017	SF Mayor's Youth Job Bus	Pragna Dave Rebecca Ostrander
03/30/2017	Employer Spotlight @ Arriba Juntos	Pragna Dave Kevin Trang
02/22/2017	Pre-Screen Event @ Hospitality House in Tenderloin Neighborhood	Pragna Dave Kevin Trang

02/16/2017	Pre-Screen Event @ WANAP	Pragna Dave Kevin Trang
02/09/2017	CPMC DA Compliance Hearing	Pragna Dave Vahram Massehian Edward Battista Melissa White Emily Webb
01/11/2017	CPMC Quarterly Meeting @ YCD	Pragna Dave Rebecca Ostrander Vahram Massehian

City and County of San Francisco *First Source Hiring Program*

Edwin M. Lee, Mayor

Office of Economic and Workforce Development
Workforce Development Division

NON-CONSTRUCTION FIRST SOURCE EMPLOYER'S PROJECTION OF ENTRY LEVEL POSITIONS

By signing this form, employers agree to participate in the San Francisco Workforce Development System established by the City and County of San Francisco, and comply with the provisions of the First Source Hiring Program pursuant to Chapter 83 of the San Francisco Administrative Code. As an indication of good faith efforts to comply with First Source, the Employer must fill out this form at commencement of contract/tax year to indicate:

- For a Tenant/Sub-tenant, the number of **Entry Level Positions** in the company that are currently filled and those that are currently available on premises leased by the City of San Francisco.
- For the successful Developer, Contractor, or Subcontractor, **Entry Level Positions** that are currently filled and those that will be available during construction work.
- For a tenant of a private commercial project that falls under Chapter 83 provisions of the City Administrative Code, the number of **Entry Level Positions** that are currently filled and those that will be available within the lease holding business at project address.
- For companies applying for the Biotech Payroll Tax Exclusion and Central Market Street and Tenderloin Area Payroll Expense Tax Exclusion, the number of **Entry Level Positions** that are currently filled and those that will be available in the current tax year.
- For a successful organization awarded a City contract in excess of $50,000, the number of **Entry Level Positions** that are currently filled and those that will be available within the business or non-profit organization.
- If positions listed are subject to collective bargaining agreements.

Note: If an Entry Level Position becomes available during the term of the lease and/or contract, Employer must notify the First Source Hiring Administration.

Entry Level Position *means a non-managerial position that requires either no education above a high school diploma or certified equivalency, or less than two (2) years of training or specific preparation. Apprenticeship positions should be included.*

Type of Employer (check one):

- ☐ **Tenant**
- ☐ **Developer**
- ☐ **Contractor**
- ☐ **Subcontractor**
- ☐ **Subtenant**
- ☐ **Biotech Payroll Tax Exclusion applicant**
- ☐ **"Scene in San Francisco" Rebate applicant**
- ☐ **Central Market Street and Tenderloin Area Payroll Expense Tax Exclusion applicant**

Identify Project or Construction Project (if applicable):
City Department (if Contract or Lease):
Name of Employer: California Pacific Medical Center
Contact Person: Edward Battista, Director of CPMC HR
Street Address: P.O. Box 7999
City: San Francisco State: CA Zip: 94120
Telephone: 415-600-4088 Fax:
Email: BattisE@sutterhealth.org

Signature of authorized employer representative

7-31-17
Date

Entry-Level Position Title	Number Currently Filled	Number Currently Available (as of 07.31.2017)	Number Projected to Become Available in the next 12 Months	Estimated Date of Next Available Position	Subject to Collective Bargaining? (Yes/No)
Housekeeping Aide	3	0	4	Ongoing-based on facility needs	Yes
Food Service Aide	16	3	10	Ongoing-based on facility needs	Yes
Cook	3	1	2	Ongoing-based on facility needs	Yes
Security Officer	0	0	4	Ongoing-based on facility needs	No

Transporter/Transport Aide	1	0	1	Ongoing-based on facility needs	No
Sales Gift Shop	0	0	0	Ongoing-based on facility needs	No
Phlebotomy/Specimen Handling Lab Aide	1	0	2	Ongoing-based on facility needs	No
EKG Technician	0	0	0	Ongoing-based on facility needs	No
Medical Assistant	1	0	4	Ongoing-based on facility needs	No
Rehabilitation Aide	0	0	0	Ongoing-based on facility needs	No
Aquatic Instructor	0	0	0	Ongoing-based on facility needs	No
Speech Therapy Aide	0	0	0	Ongoing-based on facility needs	No
Pathology Accessioner	5	1	2	Ongoing-based on facility needs	No
Client Services Representative	0	1	0	Ongoing-based on facility needs	No
Patient Services Representative	0	0	0	Ongoing-based on facility needs	No
Patient Support Representative	0	0	0	Ongoing-based on facility needs	No
Patient Access Representative	0	0	4	Ongoing-based on facility needs	No
Point of Service Specialist	0	0	0	Ongoing-based on facility needs	No
Medical Administrative Assistant	0	0	0	Ongoing-based on facility needs	No
Health Information Technology/Billing	0	0	0	Ongoing-based on facility needs	No
PBX Operator	4	0	2	Ongoing-based on facility needs	No
Home Health Aide	0	0	0	Ongoing-based on facility needs	Yes
Certified Nursing Assistant/ Certified Hospital Attendant	25	0	22	Ongoing-based on facility needs	Yes
Unit Coordinator/Unit Clerk	13	0	10	Ongoing-based on facility needs	No
Emergency Dept. Technician	5	0	3	Ongoing-based on facility needs	No

Please fax, email, or mail this form SIGNED to:
Attn: Business Services
Tel: 415-701-4848
Fax: 415-701-4897

FIRST SOURCE HIRING
CITY & COUNTY OF SAN FRANCISCO

Sutter Health
CPMC
We Plus You

ATTACHMENT 4
Construction and Local Business Enterprise Hiring

2017 CONSTRUCTION WORKFORCE DEVELOPMENT

First Source Hiring Program for Construction

	Category	Goal	Actual	Comments
1.	New and core opportunities for union journeymen and apprentices	30% of trade hours worked by San Francisco Residents	26% (VNGH) 23% (STL) 24% (VNMOB) 25% overall	
2.	Entry-Level Positions for union apprentice candidates	50% of new hire opportunities filled with System Referrals	30%	223 out of 754
3.	Workforce Development Group	Creation of Group	Meetings held February 11, 2017 May 12, 2017 September 15, 2017	
4.	Entry-Level Positions for non-union administrative and engineering candidates	50% of new hire opportunities filled with System Referrals	83%	25 out of 30 Sourced through the CAPSA – Mission Hiring Hall
5.	Entry-Level Positions for administrative and engineering internship candidates	50% of new hire opportunities filled with System Referrals	60%	22 out of 37 Sourcing through SFSU - MESA Engineering Department Program
6.	Number of apprentice hours for new union apprentices	21% of hours for new union apprentices by System Referrals	36%	

Local Business Enterprise Hiring

	Category	Goal	Actual	Comments
7.	Contracting with Local Business Enterprises	14% of the value of all Contracts	16% (VNGH) 24% (STL) 10% (VNMOB) 17% Overall	$135,721,860 VNGH $59,409,303 STL $9,455246 VNMOB $204,586,409 Total

San Francisco Resident Construction Workforce Hiring Goals: Construction hiring goals are to have 30% of the total hire hours performed by San Francisco residents, including 50% for new hire apprentice opportunities. Coordinated meetings between the Office of Economic and Workforce Development (OEWD) – CityBuild, trade partners and subcontractors to develop a work plan with regards to our efforts to achieve these goals.

- **San Francisco Workforce Hours for construction hires from Elation System**
  Goal of 30%. Achieved 26% at Van Ness and Geary Hospital Project, 24% at St. Luke's Hospital Project and 24% at Van Ness Medical Office Building with a combined total of 25% on the three projects through 2017 construction hours performed by San Francisco residents. **(Exhibit A)**

- **San Francisco Workforce Goal for new hire apprentices from Elation Systems** Goal of 50%. Achieved 30% for 2017 and in compliance based on the good faith efforts. **(Exhibit B)**

- **San Francisco Workforce Goal for new hire apprentice hours from Elation Systems** Goal of 21%. Achieved 36% for 2017 and in compliance based on the good faith efforts.

  Planning at the end of 2015 was initiated with the Glazier Union, CityBuild, Custom Engineering Openings (Glazing contractor) and HerreroBoldt to develop a training that would prepare San Francisco residents for entry level opportunities for apprentice Glaziers.

  HerreroBoldt and Southland Industries begun coordination on list trade interview preparation. This interview preparation assists individual in what to say in a list trade interview.

  All of the supplemental trainings were funded in part from the CPMC Construction Workforce Funding that sits with OEWD.

  HerreroBOLDT is currently working with the San Francisco Unified School District's Tech21, SFCC, Asian Neighborhood Design and other CBO programs in building capacity for the apprentice pipeline. During the summer we mentored construction interns and graduates of the Tech 21 program.

- **The Workforce Development Group** for the projects which includes HerreroBOLDT, Trade Partners, Union Representatives, CityBuild and CPMC was established and meetings were held on February 11, 2017, May 12, 2017 and September 15, 2017.

- **Administrative and Project Engineer Intern Hiring:** Administrative Hires: Goal of 50%. Achieved 83% for 2017. Project Engineer Intern Hires: Goal of 50%. Achieved 60% for 2017 and in compliance based on the good faith efforts.

  HerreroBoldt teaches 13 classes at the Construction Administrative and Professional Services Academy (CAPSA) each semester. These construction industry specific training modules supplement the teaching in the CAPSA program. CAPSA provides San Francisco resident jobseekers with the highest level of career development with vocational training facilitated at CCSF-Mission Campus, combined with Job-Readiness at Mission Hiring Hall.

  Of the 30 first source administrative positions that have come available 25 have been filled with system referrals.

  HerreroBoldt is sourcing candidates from the MESA Engineering Program (MEP). MEP recruits historically underrepresented students into SFSU's engineering program. Throughout their studies, the women and men in the program receive academic support and personal counseling to keep them on track toward their degrees. MEP helps participating students graduate and enter the job market with the skill and confidence they need to succeed as engineers.

Four of the San Francisco resident project engineering interns have been hired by HerreroBoldt as fulltime project engineers.

Administrative Hires in 2017
- Project Coordinator (Becker)
- Accounting Intern (VNGC)
- Accounting Clerk (Becker)
- Project Coordinator (VNGC/Becker)
- Admin Coordinator (VNGC)
- Financial Intern (VNGC/STL)
- Workforce Development Intern (VNGC)

Project Engineer Internships in 2017
- Exteriors Intern
- Field Engineer Intern
- Field Engineer Intern
- Production Intern (STL)
- Field Engineer Intern (STL)

- **LBE Program:** Goal of 14%. Achieved 16% VNGH / 23% STL / 10% VNMOB through 2017 and 17% for all projects overall with $204,586,409. **(Exhibit C)** The goals for the Local Business Enterprise (LBE) program are 14% San Francisco based business contracting with no distinction between Contract Monitoring Division (CMD) certified and HerreroBOLDT certified. Included with report is a list of CMD certified contractors and suppliers.

  HerreroBOLDT has worked closely with the CMD to establish the perimeters of this customized program. HerreroBoldt and its subcontractors have contracted with an array of CMD certified contractors and suppliers. **(Exhibit D)**

- **Additional Community Engagement:** HerreroBOLDT attended or conducted 54 events in the community during 2017

PlanGrid Site tour	1/19/2017
SFUSD CTE Showcase	1/25/2017
Meeting with Lower Polk Community Benefit District	1/26/2017
SFFD Station 3 Site Tour	1/31/2017
SFUSD Tech 21 Work Based Learning Lab	2/1/2017
Tech 21 Student Internship	2/1/2017
TIDHI Construction Workforce Presentation	2/3/2017
SFUSD Tech 21 Work Based Learning Lab	2/1/2017
CPMC 2015 Compliance Hearing	2/8/2017
Sacramento State Summer Internship Recruitment	2/16/2017
CityBuild JRT Site Walk	2/22/2017
San Francisco State Summer Internship Recruitment	3/1/2017
Sutter Health CPMC Workforce Development Group Meeting	3/2/2017
Update Meeting with Daniel Burnham Court	3/13/2017
CityBuild JRT Site Walk	3/15/2017
Asian Neighborhood Design Graduation	3/16/2017

Kick Off Meeting with CMD and Rudolph and Sletten	3/21/2017
CityBuild Job Site Tour and Informational Interviews	3/30/2017
CityBuild JRT Site Tour	4/5/2017
CityBuild Sheet Metal Prospect Tour	4/12/2017
Future of Health Care	4/13/2017
Cal Drywall at CityBuild Academy	4/20/2017
Tech 21 Senior Defense Presentations	4/25/2017
Community Advisory Group/Community Meeting - St. Luke's Campus	4/26/2017
Van Ness Campus Community Advisory Group & Community Partners Lunch and Site Tour	4/27/2017
CCSC 2017 Community Appreciation Luncheon	4/28/2017
TIDHI Construction Workforce Presentation	5/5/2017
Jewish Vocational Services 2017 Strictly Business Luncheon	5/9/2017
San Francisco Conservation Corp Meet and Greet	5/11/2017
CAPSA - Student Final Presentations	5/12/2017
Mission Hiring Hall Job Fair	5/16/2017
Interrupt, Predict, and Organize Site Tour	5/19/2017
Charity Cultural Services Center Fundraiser	6/9/2017
Tech 21 Work Based Learning Summer Rotation	6/27/2017
CCSF - Architecture Class Presentation and Site Tour	6/28/2017
Tech 21 Work Based Learning Summer Rotation	6/29/2017
Sutter Health CPMC Workforce Development Group	7/13/2017
Mission Bernal Campus Summer Intern Lunch, Meeting & Site Walk	7/26/2017
Interrupt, Predict, and Organize Site Tour	6/28/2017
San Francisco Conservation Corp Site Tour	7/2/2017
CityBuild JRT Site Tour	8/2/2017
Summer Internship Final Presentations	8/18/2017
Leap Arts in Education Bake Auction	8/30/2017
Meeting with MBC Neighbors on Site work	9/5/2017
Workforce Investment San Francisco CPMC Employer Spotlight	9/13/2017
Volunteer Work for Casa de Las Madre	9/19/2017
Rudolph and Sletten LBE Outreach for VNMOB Tenant Improvements	10/2/2017
San Francisco Conservation Corps Site Walk	10/18/2017
Community Meeting – St. Luke's Campus	10/25/2017
Mission Hiring Hall Construction Mixer	11/7/2017
Leap Sandcastle Contest	11/11/2017
CAPSA Student Final Presentations	12/8/2017
JVS Industry Partner Brunch at John O'Connell	12/14/2017
La Voz Latina's Winter Wonderland	12/20/2017

Exhibit

A

All Projects

Workforce Contractor Summary

California Pacific Medical Center

Reporting Period: All Date Before 12/31/2017

Contractor	Total Hours			Apprentice Hours			
	Total	SF City	SF City%	Total	Total%	SF City	SF City%
Categories							
Selected Projects							
A & B Construction	4,483.00	1,251.00	27.91%				
A&B PAINTING, INC.	26,492.50	7,446.00	28.11%	5,836.00	22.03%	3,615.00	61.94%
Advance Pneumatic Tube	8,152.50	946.00	11.60%	4,448.00	54.56%	946.00	21.27%
AJS PAINTING DECORATING	2,054.00	1,654.00	80.53%	833.50	40.58%	833.50	100.00%
Alamillo Rebar Inc.	13,041.00	1,164.00	8.93%	3,944.50	30.25%	1,003.00	25.43%
Alcal Specialty Contracting, Inc.	6,232.00			2,032.50	32.61%		
ANDERSON CARPET AND LINOLEUM SALES CO.	40,605.50	14,976.50	36.88%	18,504.50	45.57%	12,277.00	66.35%
Art Alger Inc., DBA Peninsula Crane & Rigging	740.00			162.00	21.89%		
Assa Abloy Entrance Systems - Monroe, NC	91.00						
B E I Steel, Inc.	624.50	231.00	36.99%	342.00	54.76%	142.00	41.52%
B. T. Mancini Co., Inc.	3,460.00			1,308.00	37.80%		
BAGATELOS GLASS SYSTEMS INC	11,772.00	158.00	1.34%	813.00	6.91%		
Bailey Fence Company, Inc.	8.00						
BAY AREA CONCRETES, INC	279.00			11.00	3.94%		
Bay Area Firestop, Inc	4,085.50			813.50	19.91%		
Bay Area Lightworks, Inc.	281.00	273.00	97.15%	81.50	29.00%	81.50	100.00%
Bay Area Traffic Solutions Inc.	144.00						
Bay Line Cutting & Coring, Inc.	376.50	108.00	28.69%	8.00	2.12%		
Bayside Insulation, Inc.	6,975.00			2,891.00	41.45%		
Bear Scaffold and Services	1,048.50	160.00	15.26%	103.00	9.82%		
BECKER ELECTRIC INC.	37,426.63	11,543.13	30.84%	7,714.00	20.61%	1,780.00	23.07%
Bellanti Plumbing Inc.	52.00			23.00	44.23%		
BIGGE CRANE AND RIGGING CO	171.00						
Boyett Construction, Inc.	69.50			10.00	14.39%		
Broadway Sheet Metal	1,920.50						
Bryant Surveys, Inc.	22.00	5.00	22.73%	5.00	22.73%	5.00	100.00%
Bullard's Heating & Air Inc	37,217.50	12,289.50	33.02%	13,792.50	37.06%	7,263.50	52.66%
C. E. Toland & Son	3,972.00	944.00	23.77%	423.00	10.65%	8.00	1.89%
CAL CON PUMPING LLC	117.00						
CAL-WEST CONCRETE CUTTING, INC.	1,412.25						
CALCO FENCE, INC	18.00						
CALIFORNIA DRYWALL COMPANY	517,932.50	62,209.00	12.01%	76,206.00	14.71%	17,814.00	23.38%
California Sheet Metal, Inc.	559.00			194.00	34.70%		
CALIFORNIA TILE INSTALLERS	190.00			95.00	50.00%		
Capitol Builders Hardware Inc	8,555.00	2,073.50	24.24%	899.00	10.51%		
CASEY-FOGLI CONCRETE CONTRACTORS, INC.	21,781.50	801.50	3.68%	1,979.50	9.09%	265.00	13.39%
Cell-crete Corporation	1,900.50	315.50	16.60%	85.50	4.50%		
CF&T Concrete Pumping	1,301.00						
CHAIX COMPANY	97.00	32.50	33.51%	16.00	16.49%		
Charles Pankow Builders, Ltd	223,540.05	78,087.00	34.93%	36,487.00	16.32%	16,944.50	46.44%
Chrisp Company	13.00			8.50	65.38%		
Clark Pacific	9,560.00	745.50	7.80%	974.50	10.19%	338.00	34.68%
Clipper International	78,904.50	36,908.00	46.78%				
CMC CONSTRUCTION- 2	1,658.00	128.00	7.72%	316.00	19.06%	99.00	31.33%
CMC Traffic Control Specialists dba CMC Construction	2,862.50	1,407.00	49.15%	478.50	16.72%	73.00	15.26%
Comtel Systems Technology, Inc	17,068.00	2,484.50	14.56%	1,398.00	8.19%	1,343.00	96.07%

CONCO CEMENT COMPANY	26,183.50	1,445.50	5.52%	5,728.50	21.88%	1,022.00	17.84%
CONCO PUMPING	145.75						
Concrete Wall Sawing Co., Inc.	1,008.00						
CONDON-JOHNSON & ASSOCIATES INC	2,049.00	25.00	1.22%				
Convergint Technologies LLC	2,264.00						
Cupertino Electric Inc.	18,182.00	4,671.00	25.69%	2,447.00	13.46%	1,243.00	50.80%
D & J Tile Company, Inc.	61,117.20	7,414.80	12.13%	16,684.80	27.30%	3,694.50	22.14%
D.C. Vient, Inc.	11,432.50	1,134.00	9.92%	1,187.00	10.38%	1,108.00	93.34%
David M Schmitt	88,785.56	11,229.98	12.65%	13,701.73	15.43%	5,437.73	39.69%
De Haro Ramirez Group	336.00	107.50	31.99%				
Del Secco Diamond Core & Saw, Inc.	7.50						
Delta Grinding Co., Inc. dba Diablo Grinding Inc.	8.00						
E & S MASONRY CORPORATION	2,003.00						
Eco Bay Services, Inc.	165.00	55.00	33.33%	38.00	23.03%		
EVANS BROTHERS INC	14,539.50	2,791.00	19.20%	1,410.00	9.70%	955.00	67.73%
EXARO TECHNOLOGIES CORPORATION	690.00	8.00	1.16%				
F.D. Thomas, Inc.	4,645.50			462.00	9.95%		
F3 & Associates Inc.	808.00			234.50	29.02%		
Fast Wrap Reno One LLC	741.50						
FBD VANGUARD CONSTRUCTION INC	255.75			48.00	18.77%		
Ferma Corporation	34,474.50	8,830.00	25.61%	1,411.50	4.09%	841.50	59.62%
Fibrebond Corporation	353.50						
Fidato	4,749.50	114.00	2.40%	15.00	0.32%		
Fitzgibbon Masonry	2,417.50						
FORENSIC ANALYTICAL CONSULTING SERVICES	247.50						
Frank M Booth, Inc	8,438.00	1,521.00	18.03%	1,925.50	22.82%	478.00	24.82%
George Family NorCal	36,940.00	4,792.50	12.97%	10,928.50	29.58%	1,070.50	9.80%
Gerdau Reinforcing Steel	42,853.00	3,605.00	8.41%	15,317.00	35.74%	3,605.00	23.54%
Giron Construction	98,924.58	64,884.08	65.59%	17,312.33	17.50%	11,878.83	68.61%
Ground Penetrating Radar Systems, IInc	8.25						
H&M Fire Protection, Inc.	9,261.50	2,694.50	29.09%	3,874.50	41.83%	859.50	22.18%
Harrison Drywall Inc.	350,103.50	97,384.50	27.82%	62,961.50	17.98%	24,454.00	38.84%
HATTON'S CRANE & RIGGING INC	166.50						
Herrero Contractors, Inc.	222,390.80	89,896.80	40.42%	32,883.75	14.79%	23,318.30	70.91%
Hoem & Associates, Inc	10,622.00	3,548.50	33.41%	1,737.50	16.36%	1,104.50	63.57%
HVAC Controls Corporation	23,603.00	569.00	2.41%	4,854.50	20.57%	548.00	11.29%
INTEGRATED SIGN INSTALLATIONS INC	224.50			15.00	6.68%		
Intelligent Technologies and Services, Inc.	89.00	3.00	3.37%				
Interstate Concrete Pumping	99.00						
Ireland Interior Systems, Inc.	16,180.00	6,530.50	40.36%	5,388.00	33.30%	2,776.00	51.52%
ISEC, Inc. - Englewood, CO	64,767.27	17,803.25	27.49%	23,181.00	35.79%	9,391.25	40.51%
John Jackson Masonry	2,829.00	28.00	0.99%	248.50	8.78%		
K.M. McRae, Inc.	31.50						
KING CRANE SERVICE	1,494.00			570.00	38.15%		
Kingsborough Atlas Tree Surgery, Inc.	42.50						
KWAN WO IRONWORKS INC	15,180.00	14,738.00	97.09%	6,212.00	40.92%	6,060.00	97.55%
Kwan Wo Ironworks Inc. - San Francisco, CA	18,812.00	15,750.00	83.72%	8,074.00	42.92%	7,056.00	87.39%
L C General Engineering & Construction, Inc.	12,392.50	5,057.50	40.81%	4,064.00	32.79%	2,925.50	71.99%
Lewis M. Merlo Inc.	81.50	16.00	19.63%				
Liquidyn, Inc.	85,738.00	24,960.50	29.11%	25,928.50	30.24%	5,221.50	20.14%
Lombardo	459.00			130.00	28.32%		
Malcolm Drilling Company, Inc.	48,017.00	9,993.00	20.81%	1,803.00	3.75%	1,173.00	65.06%
MARTIN M. RON ASSOC. INC.	6,215.00	1,087.00	17.49%	144.00	2.32%	131.00	90.97%

Master Protection, LP dba FireMaster	75.50						
McGill Erection and Welding, Inc.	606.00	88.00	14.52%	32.00	5.28%		
MCGUIRE & HESTER	32,741.50	4,883.50	14.92%	3,878.50	11.85%	1,972.50	50.86%
McMillan Electric Co.	30.50			13.00	42.62%		
MDB Interiors, Inc	1,036.00	120.50	11.63%	135.50	13.08%	112.50	83.03%
Mission City Rebar, Inc.	358.00	8.00	2.23%	112.00	31.28%	8.00	7.14%
MODULAR HEALTHCARE ENGINEERING DESIGNS LLC	7,742.00						
Morrow Equipment Company	1,907.50			227.25	11.91%		
NATIONAL AIR BALANCE COMPANY INC	1,759.00			532.00	30.24%		
NELCO, INC. (SAN LEANDRO, CA)	614.50						
Nor-Cal Industrial Floors, Inc.	36.00						
Nor-Cal Scaffolding, Inc	127.00			40.00	31.50%		
NTK Construction, Inc.	7,691.00	5,392.50	70.11%	275.50	3.58%	275.50	100.00%
OLSON & CO. STEEL	25,496.75	4,033.00	15.82%	4,393.00	17.23%	2,659.00	60.53%
Otis Elevator Company - SAN FRANCISCO, CA	44,957.75	924.00	2.06%	17,336.00	38.56%	376.00	2.17%
PACIFIC ERECTORS, INC	81,455.50	14,913.00	18.31%	32,436.50	39.82%	14,649.00	45.16%
PACIFIC SEALANTS	444.00			172.00	38.74%		
Paradigm Design-Build, Inc	6,541.50	32.00	0.49%	1,042.50	15.94%	32.00	3.07%
PERFORMANCE CONTRACTING INC - Richmond, CA	19,326.00	3,832.00	19.83%	9,534.00	49.33%	2,944.00	30.88%
Performance Swing Stage, Inc.	149.50						
Peterson Mechanical, Inc.	16,994.00	57.00	0.34%	6,347.50	37.35%	57.00	0.90%
Peterson Power Systems	2,058.20			3.50	0.17%		
Phoenix Electric Company	1,351.25	657.25	48.64%	187.50	13.88%	149.50	79.73%
Primecut Concrete Sawing & Drilling	1,855.00						
PROGRESS GLASS COMPANY	178.50	77.00	43.14%	69.00	38.66%	69.00	100.00%
QOL Corp dba CEOWD Glazing	60,582.00	27,856.00	45.98%	13,918.00	22.97%	10,397.50	74.71%
Rana Creek Habitat Restoration	3,136.25						
Ransome Company	61.50						
Reliance Engineering Inc	183.50	7.00	3.81%	7.00	3.81%	7.00	100.00%
RFJ Meiswinkel Company	8,849.00	1,730.00	19.55%	393.00	4.44%	2.00	0.51%
RLH FIRE PROTECTION	40,287.50	4,295.00	10.66%	20,836.50	51.72%	509.50	2.45%
Rosendin Electric, Inc.	487,914.00	101,806.00	20.87%	93,619.00	19.19%	29,248.50	31.24%
Rubecon General Contracting, Inc.	5,001.00	724.00	14.48%	500.00	10.00%	500.00	100.00%
Ryan Engineering, Inc.	32,062.25	18,863.50	58.83%				
Safway Services, LLC - Burlingame	25,460.75	4,930.00	19.36%	10,514.50	41.30%	3,079.00	29.28%
Scaffold Solutions	1,884.00	237.50	12.61%	478.50	25.40%	48.50	10.14%
SERVICE BY MEDALLION	720.00						
SERVICE METAL PRODUCTS	5,925.25	140.00	2.36%	808.00	13.64%	140.00	17.33%
Service West, Inc.	42.00						
Sheedy Drayage Co	7,173.00	687.50	9.58%	1,127.50	15.72%	174.50	15.48%
Smoke Guard California, Inc.	110.00			40.00	36.36%		
Southland Industries	439,923.00	98,547.00	22.40%	162,681.00	36.98%	53,149.50	32.67%
Statewide Construction Sweeping	121.50						
Stomper Company Inc	490.00	16.00	3.27%	40.00	8.16%		
Superior Coring & Cutting Inc.	80.50	16.50	20.50%				
Superior Electric Inc.	220.00						
SUPERIOR GUNITE	8,531.50	76.50	0.90%	201.50	2.36%	12.00	5.96%
TC STEEL	683.00			291.00	42.61%		
Temper Insulation Co., Inc.	5,319.00	4,437.50	83.43%	1,991.00	37.43%	1,991.00	100.00%
The Boldt Company	184,836.75	62,372.50	33.74%	6,671.00	3.61%	2,749.00	41.21%
The Herrick Corporation	110,675.50	34,618.00	31.28%	21,597.50	19.51%	9,768.00	45.23%
THE LAWSON ROOFING CO., INC.	66,003.74	25,959.95	39.33%	13,900.56	21.06%	5,291.29	38.07%
The Smith Company, Inc.	44.00			14.00	31.82%		

Tile West, Inc.	11,721.65	2,731.50	23.30%	4,385.00	37.41%	1,135.00	25.88%
UNIQUE ELEVATOR INTERIORS INC	713.00			361.50	50.70%		
US Glass & Aluminum	1,648.00			510.00	30.95%		
VAN MULDER SHEET METAL, INC.	30,525.50	6,650.50	21.79%	3,531.50	11.57%	1,217.50	34.48%
VFC Lightning Protection, Inc.	204.00			39.00	19.12%		
Vickers Concrete Sawing, Inc.	9.00						
Viking Drillers, Inc.	396.00						
WALTERS & WOLF GLASS	6,405.50			3,308.50	51.65%		
WALTERS & WOLF PRECAST	9,711.50	718.50	7.40%	2,609.50	26.87%	530.00	20.31%
WPCS International-Suisun City, Inc.	64,391.00	8,680.50	13.48%	15,605.50	24.24%	6,303.50	40.39%
Yolanda's Construction Management and Traffic Control	22,671.75	17,629.00	77.76%				
your all day everyday janitorial service	11,283.33	11,083.33	98.23%				
Total	4,364,372.26	1,110,861.07	25.45%	910,905.42	20.87%	330,740.90	36.31%

**** NOTES: Projects List ****

--St. Lukes Replacement Hospital

--Van Ness and Geary Hospital

--Van Ness Garage and Medical Office Building

Van Ness and Geary Hospital Project

Workforce Contractor Summary

California Pacific Medical Center

Reporting Period: All Date Before 12/31/2017

Contractor	Total Hours			Apprentice Hours			
	Total	SF City	SF City%	Total	Total%	SF City	SF City%
Categories							
Selected Projects							
A&B PAINTING, INC.	26,492.50	7,446.00	28.11%	5,836.00	22.03%	3,615.00	61.94%
Advance Pneumatic Tube	6,855.50	315.00	4.59%	3,748.00	54.67%	315.00	8.40%
AJS PAINTING DECORATING	2,054.00	1,654.00	80.53%	833.50	40.58%	833.50	100.00%
Alcal Specialty Contracting, Inc.	6,232.00			2,032.50	32.61%		
ANDERSON CARPET AND LINOLEUM SALES CO.	40,605.50	14,976.50	36.88%	18,504.50	45.57%	12,277.00	66.35%
Art Alger Inc., DBA Peninsula Crane & Rigging	740.00			162.00	21.89%		
B. T. Mancini Co., Inc.	1,998.00			876.00	43.84%		
BAY AREA CONCRETES, INC	279.00			11.00	3.94%		
Bay Area Lightworks, Inc.	281.00	273.00	97.15%	81.50	29.00%	81.50	100.00%
Bay Line Cutting & Coring, Inc.	315.00	100.00	31.75%	8.00	2.54%		
BECKER ELECTRIC INC.	28,417.63	7,910.13	27.84%	4,786.00	16.84%	1,745.00	36.46%
Broadway Sheet Metal	1,550.00						
Bryant Surveys, Inc.	22.00	5.00	22.73%	5.00	22.73%	5.00	100.00%
Bullard's Heating & Air Inc	37,217.50	12,289.50	33.02%	13,792.50	37.06%	7,263.50	52.66%
C. E. Toland & Son	3,972.00	944.00	23.77%	423.00	10.65%	8.00	1.89%
CAL CON PUMPING LLC	10.50						
CAL-WEST CONCRETE CUTTING, INC.	1,078.50						
CALIFORNIA DRYWALL COMPANY	517,932.50	62,209.00	12.01%	76,206.00	14.71%	17,814.00	23.38%
California Sheet Metal, Inc.	483.00			139.00	28.78%		
CALIFORNIA TILE INSTALLERS	190.00			95.00	50.00%		
CASEY-FOGLI CONCRETE CONTRACTORS, INC.	16,647.00	555.00	3.33%	1,472.50	8.85%	193.00	13.11%
Cell-crete Corporation	1,055.50	193.50	18.33%	51.50	4.88%		
CF&T Concrete Pumping	996.50						
CHAIX COMPANY	97.00	32.50	33.51%	16.00	16.49%		
Charles Pankow Builders, Ltd	108,137.05	34,058.00	31.50%	23,409.00	21.65%	9,035.00	38.60%
Clipper International	54,971.50	28,405.50	51.67%				
CMC CONSTRUCTION- 2	1,658.00	128.00	7.72%	316.00	19.06%	99.00	31.33%
CMC Traffic Control Specialists dba CMC Construction	2,862.50	1,407.00	49.15%	478.50	16.72%	73.00	15.26%
Comtel Systems Technology, Inc	9,557.00	2,110.50	22.08%	983.00	10.29%	983.00	100.00%
Concrete Wall Sawing Co., Inc.	1,008.00						
Convergint Technologies LLC	1,387.50						
D & J Tile Company, Inc.	61,117.20	7,414.80	12.13%	16,684.80	27.30%	3,694.50	22.14%
David M Schmitt	88,785.56	11,229.98	12.65%	13,701.73	15.43%	5,437.73	39.69%
De Haro Ramirez Group	260.00	99.50	38.27%				
EXARO TECHNOLOGIES CORPORATION	690.00	8.00	1.16%				
F.D. Thomas, Inc.	2,817.50			404.00	14.34%		
F3 & Associates Inc.	740.00			204.50	27.64%		
Fast Wrap Reno One LLC	741.50						
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Ferma Corporation	34,474.50	8,830.00	25.61%	1,411.50	4.09%	841.50	59.62%
Fibrebond Corporation	335.50						
Fidato	2,928.50			15.00	0.51%		
George Family NorCal	36,940.00	4,792.50	12.97%	10,928.50	29.58%	1,070.50	9.80%
Gerdau Reinforcing Steel	42,853.00	3,605.00	8.41%	15,317.00	35.74%	3,605.00	23.54%
Giron Construction	98,924.58	64,884.08	65.59%	17,312.33	17.50%	11,878.83	68.61%
H&M Fire Protection, Inc.	4,664.00	1,347.50	28.89%	1,697.50	36.40%		

Harrison Drywall Inc.	52,811.00	26,066.50	49.36%	10,600.00	20.07%	7,340.00	69.25%
Herrero Contractors, Inc.	165,738.80	72,110.30	43.51%	26,110.75	15.75%	16,545.30	63.37%
HVAC Controls Corporation	18,863.00	555.00	2.94%	3,708.50	19.66%	534.00	14.40%
Intelligent Technologies and Services, Inc.	54.00						
ISEC, Inc. - Englewood, CO	64,767.27	17,803.25	27.49%	23,181.00	35.79%	9,391.25	40.51%
John Jackson Masonry	2,829.00	28.00	0.99%	248.50	8.78%		
K.M. McRae, Inc.	31.50						
KING CRANE SERVICE	1,494.00			570.00	38.15%		
Kingsborough Atlas Tree Surgery, Inc.	42.50						
KWAN WO IRONWORKS INC	15,180.00	14,738.00	97.09%	6,212.00	40.92%	6,060.00	97.55%
Kwan Wo Ironworks Inc. - San Francisco, CA	9,396.00	8,171.00	86.96%	4,117.00	43.82%	3,571.00	86.74%
L C General Engineering & Construction, Inc.	12,392.50	5,057.50	40.81%	4,064.00	32.79%	2,925.50	71.99%
Liquidyn, Inc.	65,185.00	23,460.50	35.99%	20,718.50	31.78%	4,610.50	22.25%
Malcolm Drilling Company, Inc.	27,592.00	7,296.50	26.44%	1,783.50	6.46%	1,165.00	65.32%
MARTIN M. RON ASSOC. INC.	4,710.00	597.50	12.69%	117.00	2.48%	111.00	94.87%
MCGUIRE & HESTER	21,018.00	1,898.50	9.03%	1,695.00	8.06%	178.00	10.50%
McMillan Electric Co.	30.50			13.00	42.62%		
Mission City Rebar, Inc.	328.00			94.00	28.66%		
MODULAR HEALTHCARE ENGINEERING DESIGNS LLC	7,742.00						
Morrow Equipment Company	1,497.00			197.25	13.18%		
NATIONAL AIR BALANCE COMPANY INC	592.00			14.00	2.36%		
NELCO, INC. (SAN LEANDRO, CA)	614.50						
Nor-Cal Industrial Floors, Inc.	36.00						
OLSON & CO. STEEL	21,999.25	3,883.00	17.65%	3,859.00	17.54%	2,523.00	65.38%
Otis Elevator Company - SAN FRANCISCO, CA	36,208.50	686.50	1.90%	13,880.00	38.33%	376.00	2.71%
PACIFIC ERECTORS, INC	72,434.50	14,354.00	19.82%	28,936.50	39.95%	14,090.00	48.69%
Paradigm Design-Build, Inc	2,037.50			413.50	20.29%		
PERFORMANCE CONTRACTING INC - Richmond, CA	19,326.00	3,832.00	19.83%	9,534.00	49.33%	2,944.00	30.88%
Peterson Mechanical, Inc.	13,639.50	16.00	0.12%	5,297.50	38.84%	16.00	0.30%
Peterson Power Systems	1,254.20						
Phoenix Electric Company	1,269.25	655.75	51.66%	187.50	14.77%	149.50	79.73%
Primecut Concrete Sawing & Drilling	1,855.00						
PROGRESS GLASS COMPANY	178.50	77.00	43.14%	69.00	38.66%	69.00	100.00%
QOL Corp dba CEOWD Glazing	60,582.00	27,856.00	45.98%	13,918.00	22.97%	10,397.50	74.71%
Rana Creek Habitat Restoration	3,136.25						
Reliance Engineering Inc	101.50						
RFJ Meiswinkel Company	8,849.00	1,730.00	19.55%	393.00	4.44%	2.00	0.51%
RLH FIRE PROTECTION	33,500.50	666.50	1.99%	18,916.50	56.47%	495.50	2.62%
Rosendin Electric, Inc.	375,277.50	69,463.00	18.51%	63,745.50	16.99%	19,373.50	30.39%
Rubecon General Contracting, Inc.	5,001.00	724.00	14.48%	500.00	10.00%	500.00	100.00%
Ryan Engineering, Inc.	15,022.00	11,476.50	76.40%				
Safway Services, LLC - Burlingame	25,460.75	4,930.00	19.36%	10,514.50	41.30%	3,079.00	29.28%
SERVICE BY MEDALLION	720.00						
Service West, Inc.	42.00						
Sheedy Drayage Co	5,057.00	505.50	10.00%	1,018.50	20.14%	174.50	17.13%
Smoke Guard California, Inc.	110.00			40.00	36.36%		
Southland Industries	321,274.50	77,418.50	24.10%	122,006.50	37.98%	44,958.50	36.85%
Statewide Construction Sweeping	121.50						
Superior Coring & Cutting Inc.	19.50	13.00	66.67%				
Superior Electric Inc.	153.00						
SUPERIOR GUNITE	1,644.50	64.50	3.92%	45.00	2.74%		
TC STEEL	575.00			242.00	42.09%		
Temper Insulation Co., Inc.	5,319.00	4,437.50	83.43%	1,991.00	37.43%	1,991.00	100.00%

The Boldt Company	153,248.75	54,660.00	35.67%	6,235.50	4.07%	2,313.50	37.10%
The Herrick Corporation	74,415.00	26,245.00	35.27%	13,735.50	18.46%	5,129.00	37.34%
THE LAWSON ROOFING CO., INC.	43,378.74	18,404.45	42.43%	9,042.56	20.85%	2,896.79	32.04%
The Smith Company, Inc.	44.00			14.00	31.82%		
UNIQUE ELEVATOR INTERIORS INC	713.00			361.50	50.70%		
US Glass & Aluminum	1,648.00			510.00	30.95%		
VAN MULDER SHEET METAL, INC.	18,625.50	5,068.50	27.21%	2,321.50	12.46%	551.00	23.73%
VFC Lightning Protection, Inc.	103.00						
WPCS International-Suisun City, Inc.	49,904.50	8,640.50	17.31%	13,051.50	26.15%	6,263.50	47.99%
Yolanda's Construction Management and Traffic Control	17,072.75	12,933.00	75.75%				
your all day everyday janitorial service	11,283.33	11,083.33	98.23%				
Total	3,127,181.11	814,830.07	26.06%	676,214.42	21.62%	251,592.90	37.21%

**** NOTES: Projects List ****

--Van Ness and Geary Hospital

St. Luke's Hospital Project

Workforce Contractor Summary

California Pacific Medical Center

Reporting Period: All Date Before 12/31/2017

Contractor	Total Hours			Apprentice Hours			
	Total	SF City	SF City%	Total	Total%	SF City	SF City%
Categories							
Selected Projects							
A & B Construction	4,483.00	1,251.00	27.91%				
Advance Pneumatic Tube	1,297.00	631.00	48.65%	700.00	53.97%	631.00	90.14%
Alamillo Rebar Inc.	13,041.00	1,164.00	8.93%	3,944.50	30.25%	1,003.00	25.43%
Assa Abloy Entrance Systems - Monroe, NC	91.00						
B. T. Mancini Co., Inc.	1,462.00			432.00	29.55%		
BAGATELOS GLASS SYSTEMS INC	11,772.00	158.00	1.34%	813.00	6.91%		
Bailey Fence Company, Inc.	8.00						
Bay Area Firestop, Inc	4,085.50			813.50	19.91%		
Bay Area Traffic Solutions Inc.	144.00						
Bay Line Cutting & Coring, Inc.	61.50	8.00	13.01%				
Bayside Insulation, Inc.	6,975.00			2,891.00	41.45%		
BECKER ELECTRIC INC.	9,009.00	3,633.00	40.33%	2,928.00	32.50%	35.00	1.20%
Bellanti Plumbing Inc.	52.00			23.00	44.23%		
BIGGE CRANE AND RIGGING CO	171.00						
Broadway Sheet Metal	370.50						
CAL CON PUMPING LLC	106.50						
CAL-WEST CONCRETE CUTTING, INC.	333.75						
CALCO FENCE, INC	18.00						
California Sheet Metal, Inc.	76.00			55.00	72.37%		
Capitol Builders Hardware Inc	8,555.00	2,073.50	24.24%	899.00	10.51%		
CASEY-FOGLI CONCRETE CONTRACTORS, INC.	5,134.50	246.50	4.80%	507.00	9.87%	72.00	14.20%
Cell-crete Corporation	698.50	81.50	11.67%	34.00	4.87%		
CF&T Concrete Pumping	304.50						
Charles Pankow Builders, Ltd	39,851.00	11,984.00	30.07%	2,750.50	6.90%	1,292.50	46.99%
Chrisp Company	13.00			8.50	65.38%		
Clark Pacific	9,560.00	745.50	7.80%	974.50	10.19%	338.00	34.68%
Clipper International	15,922.50	5,648.50	35.47%				
Comtel Systems Technology, Inc	7,511.00	374.00	4.98%	415.00	5.53%	360.00	86.75%
CONCO PUMPING	145.75						
CONDON-JOHNSON & ASSOCIATES INC	2,049.00	25.00	1.22%				
Convergint Technologies LLC	876.50						
D.C. Vient, Inc.	11,432.50	1,134.00	9.92%	1,187.00	10.38%	1,108.00	93.34%
De Haro Ramirez Group	76.00	8.00	10.53%				
Del Secco Diamond Core & Saw, Inc.	7.50						
Delta Grinding Co., Inc. dba Diablo Grinding Inc.	8.00						
E & S MASONRY CORPORATION	2,003.00						
F.D. Thomas, Inc.	1,828.00			58.00	3.17%		
F3 & Associates Inc.	68.00			30.00	44.12%		
Fibrebond Corporation	18.00						
Fidato	1,821.00	114.00	6.26%				
FORENSIC ANALYTICAL CONSULTING SERVICES	247.50						
Ground Penetrating Radar Systems, IInc	8.25						
H&M Fire Protection, Inc.	1,287.50	424.00	32.93%	314.00	24.39%		
Harrison Drywall Inc.	279,535.50	67,954.00	24.31%	49,671.50	17.77%	16,405.00	33.03%
HATTON'S CRANE & RIGGING INC	166.50						
Herrero Contractors, Inc.	56,652.00	17,786.50	31.40%	6,773.00	11.96%	6,773.00	100.00%

Hoem & Associates, Inc	10,622.00	3,548.50	33.41%	1,737.50	16.36%	1,104.50	63.57%
HVAC Controls Corporation	4,740.00	14.00	0.30%	1,146.00	24.18%	14.00	1.22%
INTEGRATED SIGN INSTALLATIONS INC	224.50			15.00	6.68%		
Intelligent Technologies and Services, Inc.	35.00	3.00	8.57%				
Interstate Concrete Pumping	99.00						
Ireland Interior Systems, Inc.	16,180.00	6,530.50	40.36%	5,388.00	33.30%	2,776.00	51.52%
Kwan Wo Ironworks Inc. - San Francisco, CA	9,416.00	7,579.00	80.49%	3,957.00	42.02%	3,485.00	88.07%
Lewis M. Merlo Inc.	81.50	16.00	19.63%				
Liquidyn, Inc.	20,553.00	1,500.00	7.30%	5,210.00	25.35%	611.00	11.73%
Lombardo	239.75			32.25	13.45%		
MARTIN M. RON ASSOC. INC.	1,505.00	489.50	32.52%	27.00	1.79%	20.00	74.07%
Master Protection, LP dba FireMaster	75.50						
McGill Erection and Welding, Inc.	606.00	88.00	14.52%	32.00	5.28%		
MCGUIRE & HESTER	10,261.25	2,985.00	29.09%	2,062.00	20.10%	1,794.50	87.03%
MDB Interiors, Inc	1,036.00	120.50	11.63%	135.50	13.08%	112.50	83.03%
Mission City Rebar, Inc.	30.00	8.00	26.67%	18.00	60.00%	8.00	44.44%
Morrow Equipment Company	410.50			30.00	7.31%		
NATIONAL AIR BALANCE COMPANY INC	1,167.00			518.00	44.39%		
Nor-Cal Scaffolding, Inc	127.00			40.00	31.50%		
NTK Construction, Inc.	7,691.00	5,392.50	70.11%	275.50	3.58%	275.50	100.00%
Otis Elevator Company - SAN FRANCISCO, CA	8,304.75	237.50	2.86%	3,237.25	38.98%		
PACIFIC ERECTORS, INC	5,163.00	423.00	8.19%	1,588.00	30.76%	423.00	26.64%
PACIFIC SEALANTS	444.00			172.00	38.74%		
Paradigm Design-Build, Inc	4,504.00	32.00	0.71%	629.00	13.97%	32.00	5.09%
Performance Swing Stage, Inc.	149.50						
Peterson Mechanical, Inc.	3,354.50	41.00	1.22%	1,050.00	31.30%	41.00	3.90%
Peterson Power Systems	804.00			3.50	0.44%		
Ransome Company	61.50						
RLH FIRE PROTECTION	6,787.00	3,628.50	53.46%	1,920.00	28.29%	14.00	0.73%
Rosendin Electric, Inc.	112,636.50	32,343.00	28.71%	29,873.50	26.52%	9,875.00	33.06%
Ryan Engineering, Inc.	17,040.25	7,387.00	43.35%				
Scaffold Solutions	1,884.00	237.50	12.61%	478.50	25.40%	48.50	10.14%
SERVICE METAL PRODUCTS	5,925.25	140.00	2.36%	808.00	13.64%	140.00	17.33%
Sheedy Drayage Co	2,116.00	182.00	8.60%	109.00	5.15%		
Southland Industries	118,648.50	21,128.50	17.81%	40,674.50	34.28%	8,191.00	20.14%
Stomper Company Inc	490.00	16.00	3.27%	40.00	8.16%		
Superior Coring & Cutting Inc.	61.00	3.50	5.74%				
Superior Electric Inc.	67.00						
SUPERIOR GUNITE	806.00			34.00	4.22%		
TC STEEL	108.00			49.00	45.37%		
The Boldt Company	31,588.00	7,712.50	24.42%	435.50	1.38%	435.50	100.00%
The Herrick Corporation	17,362.50	4,046.00	23.30%	3,999.00	23.03%	2,750.00	68.77%
THE LAWSON ROOFING CO., INC.	13,770.50	5,235.50	38.02%	2,703.50	19.63%	687.00	25.41%
Tile West, Inc.	11,721.65	2,731.50	23.30%	4,385.00	37.41%	1,135.00	25.88%
VAN MULDER SHEET METAL, INC.	11,786.00	1,582.00	13.42%	1,194.00	10.13%	666.50	55.82%
VFC Lightning Protection, Inc.	101.00			39.00	38.61%		
Vickers Concrete Sawing, Inc.	9.00						
WPCS International-Suisun City, Inc.	14,486.50	40.00	0.28%	2,554.00	17.63%	40.00	1.57%
Yolanda's Construction Management and Traffic Control	5,599.00	4,696.00	83.87%				
Total	980,216.15	235,561.50	24.03%	192,822.00	19.67%	62,697.00	32.52%

**** NOTES: Projects List ****

--St. Lukes Replacement Hospital

Van Ness and Geary Medical Office Building Project

Collaborate, Really Collaborate | Increase Relatedness | Optimize the Whole
Tightly Couple Learning with Action | Projects as Networks of Commitments

Workforce Contractor Summary

California Pacific Medical Center

Reporting Period: All Date Before 12/31/2017

Contractor	Total Hours			Apprentice Hours			
	Total	SF City	SF City%	Total	Total%	SF City	SF City%
Categories							
Selected Projects							
B E I Steel, Inc.	624.50	231.00	36.99%	342.00	54.76%	142.00	41.52%
Bear Scaffold and Services	1,048.50	160.00	15.26%	103.00	9.82%		
Boyett Construction, Inc.	69.50			10.00	14.39%		
Cell-crete Corporation	146.50	40.50	27.65%				
Charles Pankow Builders, Ltd	75,552.00	32,045.00	42.41%	10,327.50	13.67%	6,617.00	64.07%
Clipper International	8,010.50	2,854.00	35.63%				
CONCO CEMENT COMPANY	26,183.50	1,445.50	5.52%	5,728.50	21.88%	1,022.00	17.84%
Cupertino Electric Inc.	18,182.00	4,671.00	25.69%	2,447.00	13.46%	1,243.00	50.80%
Eco Bay Services, Inc.	165.00	55.00	33.33%	38.00	23.03%		
EVANS BROTHERS INC	14,539.50	2,791.00	19.20%	1,410.00	9.70%	955.00	67.73%
Fitzgibbon Masonry	2,417.50						
Frank M Booth, Inc	8,438.00	1,521.00	18.03%	1,925.50	22.82%	478.00	24.82%
H&M Fire Protection, Inc.	3,310.00	923.00	27.89%	1,863.00	56.28%	859.50	46.14%
Harrison Drywall Inc.	17,757.00	3,364.00	18.94%	2,690.00	15.15%	709.00	26.36%
Lombardo	219.25			97.75	44.58%		
Malcolm Drilling Company, Inc.	20,425.00	2,696.50	13.20%	19.50	0.10%	8.00	41.03%
MCGUIRE & HESTER	1,462.25			121.50	8.31%		
OLSON & CO. STEEL	3,497.50	150.00	4.29%	534.00	15.27%	136.00	25.47%
Otis Elevator Company - SAN FRANCISCO, CA	444.50			218.75	49.21%		
PACIFIC ERECTORS, INC	3,858.00	136.00	3.53%	1,912.00	49.56%	136.00	7.11%
Phoenix Electric Company	82.00	1.50	1.83%				
Reliance Engineering Inc	82.00	7.00	8.54%	7.00	8.54%	7.00	100.00%
SUPERIOR GUNITE	6,081.00	12.00	0.20%	122.50	2.01%	12.00	9.80%
The Herrick Corporation	18,898.00	4,327.00	22.90%	3,863.00	20.44%	1,889.00	48.90%
THE LAWSON ROOFING CO., INC.	8,854.50	2,320.00	26.20%	2,154.50	24.33%	1,707.50	79.25%
VAN MULDER SHEET METAL, INC.	114.00			16.00	14.04%		
Viking Drillers, Inc.	396.00						
WALTERS & WOLF GLASS	6,405.50			3,308.50	51.65%		
WALTERS & WOLF PRECAST	9,711.50	718.50	7.40%	2,609.50	26.87%	530.00	20.31%
Total	256,975.00	60,469.50	23.53%	41,869.00	16.29%	16,451.00	39.29%

**** NOTES: Projects List ****

--Van Ness Garage and Medical Office Building

HerreroBoldt Projects

Workforce Contractor Summary

California Pacific Medical Center

Reporting Period: All Date Before 12/31/2017

Contractor	Total Hours			Apprentice Hours			
	Total	SF City	SF City%	Total	Total%	SF City	SF City%
Categories							
Selected Projects							
A & B Construction	4,483.00	1,251.00	27.91%				
A&B PAINTING, INC.	26,492.50	7,446.00	28.11%	5,836.00	22.03%	3,615.00	61.94%
Advance Pneumatic Tube	8,152.50	946.00	11.60%	4,448.00	54.56%	946.00	21.27%
AJS PAINTING DECORATING	2,054.00	1,654.00	80.53%	833.50	40.58%	833.50	100.00%
Alamillo Rebar Inc.	13,041.00	1,164.00	8.93%	3,944.50	30.25%	1,003.00	25.43%
Alcal Specialty Contracting, Inc.	6,232.00			2,032.50	32.61%		
ANDERSON CARPET AND LINOLEUM SALES CO.	40,605.50	14,976.50	36.88%	18,504.50	45.57%	12,277.00	66.35%
Art Alger Inc., DBA Peninsula Crane & Rigging	740.00			162.00	21.89%		
Assa Abloy Entrance Systems - Monroe, NC	91.00						
B. T. Mancini Co., Inc.	3,460.00			1,308.00	37.80%		
BAGATELOS GLASS SYSTEMS INC	11,772.00	158.00	1.34%	813.00	6.91%		
Bailey Fence Company, Inc.	8.00						
BAY AREA CONCRETES, INC	279.00			11.00	3.94%		
Bay Area Firestop, Inc	4,085.50			813.50	19.91%		
Bay Area Lightworks, Inc.	281.00	273.00	97.15%	81.50	29.00%	81.50	100.00%
Bay Area Traffic Solutions Inc.	144.00						
Bay Line Cutting & Coring, Inc.	376.50	108.00	28.69%	8.00	2.12%		
Bayside Insulation, Inc.	6,975.00			2,891.00	41.45%		
BECKER ELECTRIC INC.	37,426.63	11,543.13	30.84%	7,714.00	20.61%	1,780.00	23.07%
Bellanti Plumbing Inc.	52.00			23.00	44.23%		
BIGGE CRANE AND RIGGING CO	171.00						
Broadway Sheet Metal	1,920.50						
Bryant Surveys, Inc.	22.00	5.00	22.73%	5.00	22.73%	5.00	100.00%
Bullard's Heating & Air Inc	37,217.50	12,289.50	33.02%	13,792.50	37.06%	7,263.50	52.66%
C. E. Toland & Son	3,972.00	944.00	23.77%	423.00	10.65%	8.00	1.89%
CAL CON PUMPING LLC	117.00						
CAL-WEST CONCRETE CUTTING, INC.	1,412.25						
CALCO FENCE, INC	18.00						
CALIFORNIA DRYWALL COMPANY	517,932.50	62,209.00	12.01%	76,206.00	14.71%	17,814.00	23.38%
California Sheet Metal, Inc.	559.00			194.00	34.70%		
CALIFORNIA TILE INSTALLERS	190.00			95.00	50.00%		
Capitol Builders Hardware Inc	8,555.00	2,073.50	24.24%	899.00	10.51%		
CASEY-FOGLI CONCRETE CONTRACTORS, INC.	21,781.50	801.50	3.68%	1,979.50	9.09%	265.00	13.39%
Cell-crete Corporation	1,754.00	275.00	15.68%	85.50	4.87%		
CF&T Concrete Pumping	1,301.00						
CHAIX COMPANY	97.00	32.50	33.51%	16.00	16.49%		
Charles Pankow Builders, Ltd	147,988.05	46,042.00	31.11%	26,159.50	17.68%	10,327.50	39.48%
Chrisp Company	13.00			8.50	65.38%		
Clark Pacific	9,560.00	745.50	7.80%	974.50	10.19%	338.00	34.68%
Clipper International	70,894.00	34,054.00	48.04%				
CMC CONSTRUCTION- 2	1,658.00	128.00	7.72%	316.00	19.06%	99.00	31.33%
CMC Traffic Control Specialists dba CMC Construction	2,862.50	1,407.00	49.15%	478.50	16.72%	73.00	15.26%
Comtel Systems Technology, Inc	17,068.00	2,484.50	14.56%	1,398.00	8.19%	1,343.00	96.07%
CONCO PUMPING	145.75						
Concrete Wall Sawing Co., Inc.	1,008.00						
CONDON-JOHNSON & ASSOCIATES INC	2,049.00	25.00	1.22%				

Convergint Technologies LLC	2,264.00						
D & J Tile Company, Inc.	61,117.20	7,414.80	12.13%	16,684.80	27.30%	3,694.50	22.14%
D.C. Vient, Inc.	11,432.50	1,134.00	9.92%	1,187.00	10.38%	1,108.00	93.34%
David M Schmitt	88,785.56	11,229.98	12.65%	13,701.73	15.43%	5,437.73	39.69%
De Haro Ramirez Group	336.00	107.50	31.99%				
Del Secco Diamond Core & Saw, Inc.	7.50						
Delta Grinding Co., Inc. dba Diablo Grinding Inc.	8.00						
E & S MASONRY CORPORATION	2,003.00						
EXARO TECHNOLOGIES CORPORATION	690.00	8.00	1.16%				
F.D. Thomas, Inc.	4,645.50			462.00	9.95%		
F3 & Associates Inc.	808.00			234.50	29.02%		
Fast Wrap Reno One LLC	741.50						
FBD VANGUARD CONSTRUCTION INC	255.75			48.00	18.77%		
Ferma Corporation	34,474.50	8,830.00	25.61%	1,411.50	4.09%	841.50	59.62%
Fibrebond Corporation	353.50						
Fidato	4,749.50	114.00	2.40%	15.00	0.32%		
FORENSIC ANALYTICAL CONSULTING SERVICES	247.50						
George Family NorCal	36,940.00	4,792.50	12.97%	10,928.50	29.58%	1,070.50	9.80%
Gerdau Reinforcing Steel	42,853.00	3,605.00	8.41%	15,317.00	35.74%	3,605.00	23.54%
Giron Construction	98,924.58	64,884.08	65.59%	17,312.33	17.50%	11,878.83	68.61%
Ground Penetrating Radar Systems, IInc	8.25						
H&M Fire Protection, Inc.	5,951.50	1,771.50	29.77%	2,011.50	33.80%		
Harrison Drywall Inc.	332,346.50	94,020.50	28.29%	60,271.50	18.14%	23,745.00	39.40%
HATTON'S CRANE & RIGGING INC	166.50						
Herrero Contractors, Inc.	222,390.80	89,896.80	40.42%	32,883.75	14.79%	23,318.30	70.91%
Hoem & Associates, Inc	10,622.00	3,548.50	33.41%	1,737.50	16.36%	1,104.50	63.57%
HVAC Controls Corporation	23,603.00	569.00	2.41%	4,854.50	20.57%	548.00	11.29%
INTEGRATED SIGN INSTALLATIONS INC	224.50			15.00	6.68%		
Intelligent Technologies and Services, Inc.	89.00	3.00	3.37%				
Interstate Concrete Pumping	99.00						
Ireland Interior Systems, Inc.	16,180.00	6,530.50	40.36%	5,388.00	33.30%	2,776.00	51.52%
ISEC, Inc. - Englewood, CO	64,767.27	17,803.25	27.49%	23,181.00	35.79%	9,391.25	40.51%
John Jackson Masonry	2,829.00	28.00	0.99%	248.50	8.78%		
K.M. McRae, Inc.	31.50						
KING CRANE SERVICE	1,494.00			570.00	38.15%		
Kingsborough Atlas Tree Surgery, Inc.	42.50						
KWAN WO IRONWORKS INC	15,180.00	14,738.00	97.09%	6,212.00	40.92%	6,060.00	97.55%
Kwan Wo Ironworks Inc. - San Francisco, CA	18,812.00	15,750.00	83.72%	8,074.00	42.92%	7,056.00	87.39%
L C General Engineering & Construction, Inc.	12,392.50	5,057.50	40.81%	4,064.00	32.79%	2,925.50	71.99%
Lewis M. Merlo Inc.	81.50	16.00	19.63%				
Liquidyn, Inc.	85,738.00	24,960.50	29.11%	25,928.50	30.24%	5,221.50	20.14%
Lombardo	239.75			32.25	13.45%		
Malcolm Drilling Company, Inc.	27,592.00	7,296.50	26.44%	1,783.50	6.46%	1,165.00	65.32%
MARTIN M. RON ASSOC. INC.	6,215.00	1,087.00	17.49%	144.00	2.32%	131.00	90.97%
Master Protection, LP dba FireMaster	75.50						
McGill Erection and Welding, Inc.	606.00	88.00	14.52%	32.00	5.28%		
MCGUIRE & HESTER	31,279.25	4,883.50	15.61%	3,757.00	12.01%	1,972.50	52.50%
McMillan Electric Co.	30.50			13.00	42.62%		
MDB Interiors, Inc	1,036.00	120.50	11.63%	135.50	13.08%	112.50	83.03%
Mission City Rebar, Inc.	358.00	8.00	2.23%	112.00	31.28%	8.00	7.14%
MODULAR HEALTHCARE ENGINEERING DESIGNS LLC	7,742.00						
Morrow Equipment Company	1,907.50			227.25	11.91%		
NATIONAL AIR BALANCE COMPANY INC	1,759.00			532.00	30.24%		

NELCO, INC. (SAN LEANDRO, CA)	614.50						
Nor-Cal Industrial Floors, Inc.	36.00						
Nor-Cal Scaffolding, Inc	127.00			40.00	31.50%		
NTK Construction, Inc.	7,691.00	5,392.50	70.11%	275.50	3.58%	275.50	100.00%
OLSON & CO. STEEL	21,999.25	3,883.00	17.65%	3,859.00	17.54%	2,523.00	65.38%
Otis Elevator Company - SAN FRANCISCO, CA	44,513.25	924.00	2.08%	17,117.25	38.45%	376.00	2.20%
PACIFIC ERECTORS, INC	77,597.50	14,777.00	19.04%	30,524.50	39.34%	14,513.00	47.55%
PACIFIC SEALANTS	444.00			172.00	38.74%		
Paradigm Design-Build, Inc	6,541.50	32.00	0.49%	1,042.50	15.94%	32.00	3.07%
PERFORMANCE CONTRACTING INC - Richmond, CA	19,326.00	3,832.00	19.83%	9,534.00	49.33%	2,944.00	30.88%
Performance Swing Stage, Inc.	149.50						
Peterson Mechanical, Inc.	16,994.00	57.00	0.34%	6,347.50	37.35%	57.00	0.90%
Peterson Power Systems	2,058.20			3.50	0.17%		
Phoenix Electric Company	1,269.25	655.75	51.66%	187.50	14.77%	149.50	79.73%
Primecut Concrete Sawing & Drilling	1,855.00						
PROGRESS GLASS COMPANY	178.50	77.00	43.14%	69.00	38.66%	69.00	100.00%
QOL Corp dba CEOWD Glazing	60,582.00	27,856.00	45.98%	13,918.00	22.97%	10,397.50	74.71%
Rana Creek Habitat Restoration	3,136.25						
Ransome Company	61.50						
Reliance Engineering Inc	101.50						
RFJ Meiswinkel Company	8,849.00	1,730.00	19.55%	393.00	4.44%	2.00	0.51%
RLH FIRE PROTECTION	40,287.50	4,295.00	10.66%	20,836.50	51.72%	509.50	2.45%
Rosendin Electric, Inc.	487,914.00	101,806.00	20.87%	93,619.00	19.19%	29,248.50	31.24%
Rubecon General Contracting, Inc.	5,001.00	724.00	14.48%	500.00	10.00%	500.00	100.00%
Ryan Engineering, Inc.	32,062.25	18,863.50	58.83%				
Safway Services, LLC - Burlingame	25,460.75	4,930.00	19.36%	10,514.50	41.30%	3,079.00	29.28%
Scaffold Solutions	1,884.00	237.50	12.61%	478.50	25.40%	48.50	10.14%
SERVICE BY MEDALLION	720.00						
SERVICE METAL PRODUCTS	5,925.25	140.00	2.36%	808.00	13.64%	140.00	17.33%
Service West, Inc.	42.00						
Sheedy Drayage Co	7,173.00	687.50	9.58%	1,127.50	15.72%	174.50	15.48%
Smoke Guard California, Inc.	110.00			40.00	36.36%		
Southland Industries	439,923.00	98,547.00	22.40%	162,681.00	36.98%	53,149.50	32.67%
Statewide Construction Sweeping	121.50						
Stomper Company Inc	490.00	16.00	3.27%	40.00	8.16%		
Superior Coring & Cutting Inc.	80.50	16.50	20.50%				
Superior Electric Inc.	220.00						
SUPERIOR GUNITE	2,450.50	64.50	2.63%	79.00	3.22%		
TC STEEL	683.00			291.00	42.61%		
Temper Insulation Co., Inc.	5,319.00	4,437.50	83.43%	1,991.00	37.43%	1,991.00	100.00%
The Boldt Company	184,836.75	62,372.50	33.74%	6,671.00	3.61%	2,749.00	41.21%
The Herrick Corporation	91,777.50	30,291.00	33.00%	17,734.50	19.32%	7,879.00	44.43%
THE LAWSON ROOFING CO., INC.	57,149.24	23,639.95	41.37%	11,746.06	20.55%	3,583.79	30.51%
The Smith Company, Inc.	44.00			14.00	31.82%		
Tile West, Inc.	11,721.65	2,731.50	23.30%	4,385.00	37.41%	1,135.00	25.88%
UNIQUE ELEVATOR INTERIORS INC	713.00			361.50	50.70%		
US Glass & Aluminum	1,648.00			510.00	30.95%		
VAN MULDER SHEET METAL, INC.	30,411.50	6,650.50	21.87%	3,515.50	11.56%	1,217.50	34.63%
VFC Lightning Protection, Inc.	204.00			39.00	19.12%		
Vickers Concrete Sawing, Inc.	9.00						
WPCS International-Suisun City, Inc.	64,391.00	8,680.50	13.48%	15,605.50	24.24%	6,303.50	40.39%
Yolanda's Construction Management and Traffic Control	22,671.75	17,629.00	77.76%				
your all day everyday janitorial service	11,283.33	11,083.33	98.23%				

Total	4,107,397.26	1,050,391.57	25.57%	869,036.42	21.16%	314,289.90	36.17%

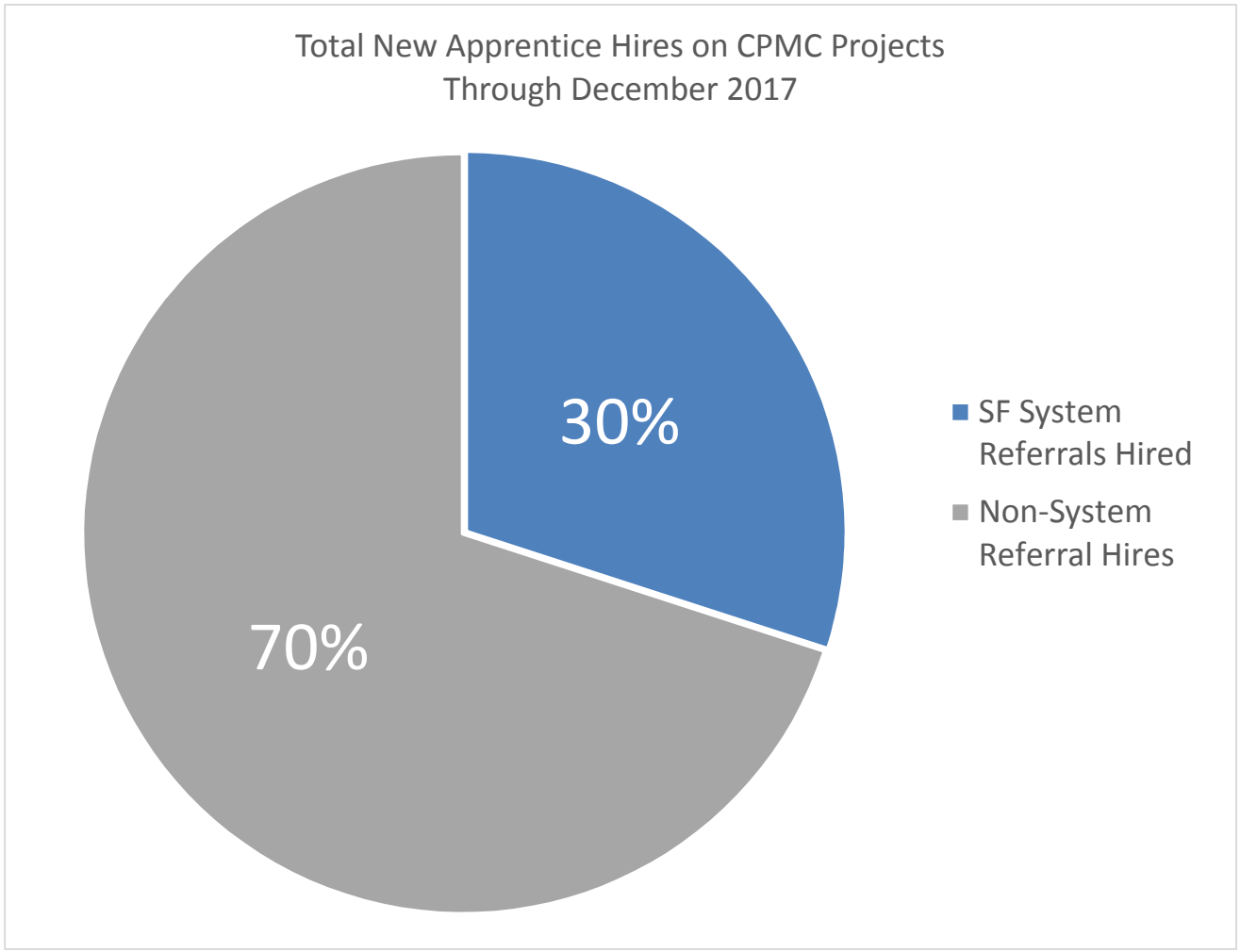
**** NOTES: Projects List ****

--St. Lukes Replacement Hospital

--Van Ness and Geary Hospital

Exhibit

B


Total New Apprentice Hires on CPMC Projects
Through December 2017
30%
70%
SF System Referrals Hired
Non-System Referral Hires

Exhibit

C

Van Ness and Geary Campus Hospital Project LBE Reporting 2017

LBE Company	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
HERREROBOLDT												
Total LBE Billing - HB	5,917,010	10,345,233	5,533,264	4,407,266	4,095,361	3,644,534	3,402,248	4,691,222	4,209,056	3,573,461	4,300,582	3,116,432
Cumulative LBE Billing	83,778,124	94,123,357	99,656,621	104,063,887	108,159,248	111,803,782	115,206,030	119,897,252	124,106,308	127,679,769	131,980,351	135,096,783
HerreroBoldt Billing	26,321,951	27,243,757	28,735,568	24,980,239	30,787,184	24,312,542	27,743,399	32,796,710	25,729,007	24,659,094	25,882,182	21,290,009
Cumulative HB Billing	571,501,796	598,745,553	627,481,121	652,461,360	683,248,544	707,561,086	735,304,485	768,101,195	793,830,203	818,489,296	844,371,479	865,661,487
% LBE Monthly	22.5%	38.0%	19.3%	17.6%	13.3%	15.0%	12.3%	14.3%	16.4%	14.5%	16.6%	14.6%
% LBE Total - HB	14.7%	15.7%	15.9%	15.9%	15.8%	15.8%	15.7%	15.6%	15.6%	15.6%	15.6%	15.6%

The Replacement Hospital at the St. Luke's Campus Project Project LBE Reporting 2017

LBE Company	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Total LBE Billing - HB Hosp + MR	2,695,219	1,807,302	1,960,562	2,163,556	2,617,418	2,223,208	1,767,425	1,714,905	1,452,416	1,073,238	577,939	542,848
Cumulative LBE Billing	42,673,559	44,480,861	46,441,423	48,604,978	51,222,397	53,445,605	55,213,030	56,927,935	58,380,352	59,453,589	60,031,528	60,574,376
HerreroBoldt Billing	7,598,389	7,834,161	6,657,325	6,445,522	9,012,465	8,633,652	7,022,829	8,170,364	7,641,305	6,701,069	5,725,108	4,893,178
Cumulative HB Hosp + MR Billing	181,417,926	189,252,087	195,909,412	202,354,934	211,367,399	220,001,051	227,023,880	235,194,245	242,835,550	249,536,619	255,261,727	260,154,905
% LBE Monthly	35.5%	23.1%	29.4%	33.6%	29.0%	25.8%	25.2%	21.0%	19.0%	16.0%	10.1%	11.1%
% LBE Total - HB Hosp + MR	23.5%	23.5%	23.7%	24.0%	24.2%	24.3%	24.3%	24.2%	24.0%	23.8%	23.5%	23.3%

Van Ness and Geary Campus MOB Project LBE Reporting 2017

LBE Report																	
Year	Month	Garage Billing	MOB Billing	Bear Scaffold	Conco Rebar (subtiers/ vendors)	Cupertino (subtiers/ vendors)	EBI (subtiers/ vendors)	H & M	Harrison	Herrick (subtier and vendors)	Lawson	Pankow (vendors)	Superior Gunite (subtier/ vendors)	Frank M. Booth	Total Billing	Total LBE $'s	% LBE $'s
2015		$ 5,524,025.00	$ 12,197.25	$ 9,618.89	$ -	$ -	$ 74,416.37	$ 48,780.53				$ 68,171.37			$ 5,536,222.25	$ 200,987.16	3.63%
2015		$ 21,751,887.00	$ 8,296,312.00	$ 63,969.04	$ -	$ 1,062,559.22	$ 733,869.10	$ 217,631.50	$ -	$ -	$ 819,066.42	$ 156,119.26	$ -	$ -	$ 30,048,199.00	$ 3,053,214.54	10.16%
2016		$ 57,642,428.00	$ 62,726,051.25	$ 192,245.22	$ -	$ 3,070,273.05	$ 1,542,154.57	$ 1,864,891.22	$ 2,612,139.20	$ 654,387.00	$ 1,910,770.98	$ 661,599.78	$ -	$ 2,847,726.00	$ 120,368,479.25	$ 12,508,461.02	10.39%
2017		$ 115,284,856.00	$ 125,452,102.50	$ 384,490.44	$ -	$ 6,140,546.10	$ 3,084,309.14	$ 3,729,782.44	$ 5,224,278.40	$ 1,308,774.00	$ 3,821,541.96	$ 1,323,199.56	$ -	$ 5,695,452.00	$ 240,736,958.50	$ 25,016,922.04	10.39%

Exhibit

D

CMD Certified LBE's on CPMC Construction Projects	
A R SANCHEZ COREA & ASSOC INC	Regulatory Compliance
A1 Protective Services	Security
AJS Painting	Painting Contractor
Ark Sign	Sign Supplier
Baylight	Electrical Contractor
Becker Electric	Lighting installation and Misc. Electrical
BergDavis Public Affairs	Public Affairs
Big Mouth Productions	Progress Photos
Black Bear	Security
Borden Decal	Decal Supplier
Bullard's Heating and Air Inc	Sheet Metal Contractor
Center Hardware	Hardware Supplier
City Source Rental & Supply	Construction Material
Clipper International	Operator Contractor
CMC Traffic Control	Traffic Supplier
David Schmitt	Firestopping Contractor
DLD Lumber	Lumber Supplier
Eco Bay Environmental	Abatement Contractor
Everyday Janitorial	Janitorial Supplier
Fluid Gauge	Material Supplier
Front Line	Structural Contractor
Giron Construction	General Contractor
H & M Fire Protection	Fire Sprinkler Contractor
Harrison Drywall	Metal Framing Contractor
JRM Equipment	Equipment Supplier
LC Engineering	General Contractor
Level Construction	Material Supplier
Linoleum Larry's, Inc.	Flooring Contractor
LiquiDyn	Plumbing Contractor
Martin Ron	Surveying Contractor
Merriweather & Williams	Human Resources
Mike O'Brien Trucking	Trucking
Modulus Consulting	Consulting Supplier
Muller Construction Supply	Construction Material
Municon	Monitoring Services
NTK Construction	General Engineering
Phoenix (M&H Sub)	Electrical Contractor

Reliance Engineering	Electrical Contractor
Rubecon Builders	General Contractor
SF Paint Company	Paint Supplier
TBC Safety	Safety Supplier
Team North	Trucking
Temper Insulation Co. Inc	Insulation Contractor
The M-Line	Media and Website Services
The Supply Closet	Construction Material
United CA Glass & Door	Glazing Contractor
Vibro Acoustic	Monitoring Services
Wireless Voice & Data	Construction Material
YCAT-C	Traffic Control

Sutter Health
CPMC
We Plus You

ATTACHMENT 5
Transportation Demand Management Summary

Sutter Health
CPMC
We Plus You

Transportation Demand Management 2017 Program Summary

The Transportation Demand Management Program at California Pacific Medical Center is comprised of the following elements: parking management, shuttle connection services (inter-campus and last mile connections to transit), alternative commute program (ridesharing, biking and walking), program support and communications and performance evaluation. The summary below describes the activities undertaken in 2017 for each area.

Parking Management Program

- Evaluated all employee parking both onsite/offsite to recommend rate increases that will support SOV trip and parking demand reduction goals
- Maintain inventory of all employee onsite/offsite parking and current utilization
- Continue to forge strong working relationship with SFMTA traffic enforcement to mitigate pedestrian and vehicle congestion at Pacific campus
- Dedicated a parking attendant at the Pacific Campus to manage traffic control and direct patient drop off/pick up, including Lyft and Uber

Shuttle Connection Services

- Ongoing review of current shuttle operations for both last mile solutions and inter-campus to improve operation efficiencies, service standards and meet increasing BART ridership demands
- Improved white zone at Pacific Campus (Clay/Buchanan) to better accommodate CPMC shuttles and San Francisco Paratransit services

Alternative Commute Services

- Carpool dedicated reserved spaces currently at Pacific, St Luke's and California campuses
- Zipcar carsharing services are available at all four campuses
- Maintain bike racks in and around the campuses

Program Support & Communications

- Maintain the San Francisco Emergency Ride Home Program (ERH) benefit
- Collaborate with Human Resources and Communications to enhance educational TDM outreach through CPMC intranet, weekly Take 5 updates and TDM reminders, Hands@Work newsletter and new employee orientation
- Maintain dedicated TDM information bulletin boards at each campus

- Employ a full-time TDM Manager and maintain an experienced TDM consultant under contract

Performance Evaluation

- Conducted employee/physician commute survey resulting in an 79% return rate

2018 update

- Dedicated Shuttle 24th St. Bart Station to St. Luke's (Mission Bernal Campus) from 6am to 6pm Monday through Friday
- 2018 Transportation Fairs to be held at the four Campuses in October
- Continue to decrease monthly parking across the enterprise by approximately 5% by the increased parking rates in 2017
- Daily parking demand decreased by approximately 35% across all campuses, which is attributable to the parking rate increases
- Installed two additional secured bicycle cages at Davies and St Luke's (MBC)
- Joined the SF Bicycle Coalition as Corporate Sponsor
- Promoted and participated in May 10 Bike to Work Day
- Working to establish a partnership with Scoop to create a carpool program for CPMC staff

2017 Employee/Physician Commute Survey Results Summary

A major component of the TDM Plan and a requirement of the DA is the annual employee/physician commute survey. The survey provides baselines for CPMC relative to reporting data to the SFMTA.

Sutter Health's overall 2017 employee population in San Francisco was approximately 6,250 staff. The survey was administered to eligible staff through our intranet Healthstream platform with 4,946 CPMC staff completing the survey, for a response rate of roughly 80%.

CPMC is required to have a minimum 30% response rate to the survey at each of its four campuses. Based on the 2017 employee commute survey results, CPMC's commute mode share baseline for 2017 is as follows:

- SOV (drive alone) 55%
- Public Transit 25%
- Bicycle/Walk 6% (walking is 5%, biking is 1.3%)
- Carpooling 7% (includes vanpooling at 0.4%)
- Other 7% (includes Uber/Lyft at 3% and motorcycles at 1%)

CPMC employees/physicians work at four campuses and a handful of office locations in San Francisco with 60 percent of staff working at the Pacific and California campuses.

- Pacific 40%
- California 20%
- Davies 15%
- St. Luke's 13%
- Other 12%

CPMC employees/physicians reside throughout the greater Bay Area with the greatest concentration in San Francisco. CPMC has over 40% of their workforce living within San Francisco County, or within 1-5 miles from their workplace.

- San Francisco 46% (San Francisco County)
- East Bay 24% (Alameda, Contra Costa and Solano Counties)
- Daly City/South Bay 19% (San Mateo and Santa Clara Counties)
- North Bay 9% (Marin, Napa and Sonoma Counties)
- Other 2%

2017 CPMC ON-SITE PARKING, CARPOOL AND BICYCLE FACILITIES

CAMPUS	ON-SITE PARKING SPACES	EMPLOYEES REGISTERED CARPOOL	BIKE PARKING SPOTS
PAC	**477**	4	30
CAL	**282**	21	34
DAV	**431**	3	38
STL	**212**	1	18

VISITORS PARKING RATE	**$ 8.00**	**PER HOUR (w/increment of $2 per 1/2 hr) Up to a maximum of $30.00 per day**
PATIENT PARKING RATE	**$ 14.00**	**FLAT RATE - ALL DAY (Requires coupon issued by Department)**
EMPLOYEE DAILY RATE	**$ 24.00**	**FLAT RATE - ALL DAY**
EMPLOYEE MONTHLY RATE	**$ 180.00**	**MONTHLY**

The on-site parking rate structure is the same for Visitors/Patients/Employees across all CPMC owned facilities

The percentage of employees who participate in the commuter benefits program is approx. 16% (800 employees)

2017 CPMC OFF-SITE PARKING SUBSIDIES

CAMPUS	OFF-SITE PARKING LOCATION	OFF-SITE CONTRACTED SPACES 2017	EMPLOYEES WITH PARKING SPOTS
PAC	**Japan Center** 1610 Geary Boulevard San Francisco 94114	400	350
CAL	**Geary Mall Garage** 5200 Geary Blvd. San Francisco 94114	80	50
F O L S O M	**148 Townsend St.** San Francisco 94107	2	2
	350 2nd Street San Francisco 94107	3	3
	75 Hawthorne St. San Francisco 94105	7	7
	24 Hrs Fitness San Francisco 94107	3	3
475 Brannan	**475 Brannan Street** **San Francisco 94107**	15	15
1825 Sac	**Staples Garage** San Francisco 94109	31	31
DAV	**No current employee parking leases**	N/A	N/A
STL	**No current employee parking leases**	N/A	N/A
1375 Sutter	**No current employee parking leases**	N/A	N/A

Off-Site parking rates are not under CPMC's control.
CPMC employees who park at off-site facilities pay subsidized rates that vary by facility.

ANNUAL CITY REPORT

(JANUARY 1 – DECEMBER 31, 2017)

on the

CALIFORNIA PACIFIC MEDICAL CENTER
LONG RANGE DEVELOPMENT PLAN
DEVELOPMENT AGREEMENT

PUBLISHED:
AUGUST 8, 2018

SAN FRANCISCO
Office of Economic and Workforce Development

San Francisco Planning

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Introduction

Background. California Pacific Medical Center (CPMC) is made up of four campuses throughout San Francisco: California Campus, Pacific Campus, Davies Campus, and Mission Bernal (formerly St. Luke's) Campus. A fifth campus, Van Ness Campus, is under construction. Through its operations of these medical facilities, CPMC provides a broad range of inpatient and outpatient health services, as well as direct and indirect economic benefits to the City. CPMC is owned by Sutter Health and is San Francisco's third largest non-public employer and fourth largest employer overall, with over 6,000 employees.

Sutter Health undertook renovation or reconstruction of its acute-care hospitals to comply with State law (SB 1953), which requires that all acute-care hospitals be seismically upgraded so that they are operational after a major earthquake. Three of CPMC's four acute-care hospitals - the California, Pacific, and St. Luke's campuses - did not meet seismic standards and needed to be rebuilt or de-licensed in order to comply with this law. The Davies Campus was retrofitted in 2008, enabling this campus to accommodate acute-care hospital services until 2030; no construction is presently planned at that campus.

To meet state law, CPMC is consolidating acute-care services from the Pacific and California campuses into the new Van Ness Campus (formerly called the Cathedral Hill Campus), which is projected to open in mid-2019. The project also provides a new, seismically safe hospital at the Mission Bernal Campus in the Mission District, which is scheduled to open in August 2018. These construction projects have created approximately 1,500 construction jobs and involve the expenditure of over $2 billion in total development. When complete, they will increase the number of earthquake-safe hospital beds in San Francisco and are intended to improve healthcare access for all San Franciscans.

The CPMC project also provides Community Benefits in addition to the commitment to rebuild St. Luke's Hospital, including a community health care program, a transportation and transit program, a workforce development program, a public improvement program, and payments to provide for specific services, programs, and infrastructure.

To guarantee these Community Benefits, CPMC and the City entered into a Development Agreement (DA), which was approved by the Board of Supervisors in July 2013 and became effective on August 10, 2013.[1]

Annual Review Process. The DA requires an annual review to ensure that both the City and CPMC are in compliance with their respective obligations and that Community Benefits are being delivered.[2] CPMC is required to submit an Annual Compliance Statement to the City no later than 150 days after the end of its fiscal year (currently, the calendar year). The City is then required to post CPMC's statement and receive public comment for 30 days. At the conclusion

[1] The DA is available on the Planning Department's website at http://default.sfplanning.org/publications_reports/cpmc/cpmc_DevAgrmtFinal_exhibits.pdf.

[2] CPMC DA Section 8.

of the public comment period, the City has 45 days to publish a report on whether CPMC is in compliance with the Development Agreement. Both the Health and Planning Commissions will then hold public hearings on CPMC's compliance with a 60-day notice to the public. After these hearings, the Planning and Health Directors will forward their findings on to an independent third party monitor. The monitor will have 30 days to review the findings and evidence of CPMC's compliance with the DA before sending a letter to the Board of Supervisors stating whether or not he or she concurs with the Directors' findings.

The timeline for review of the 2017 Annual Compliance Statement is as follows:

May 31, 2018	City receives copy of CPMC's 2017 Compliance Statement
June 1, 2018	Compliance Statement posted on Planning and Public Health Departments' websites
June 1, 2018	Planning Department sends notice to interested parties soliciting public comment
July 2, 2018	Public comment period closes
July 5, 2018	Planning Department sends Notice of Public Hearing to interested parties
August 6, 2018	City's Annual Report Published
	** ***Future Dates Projected, Subject to Change*** **
September 6, 2018	Joint Health Commission and Planning Commission Hearing
September/October 2018	Directors' findings forwarded to third party monitor
November/ December 2018	Third party monitor issues letter to Board of Supervisors

City Report. This document is the City's fifth Annual Report on CPMC's compliance; it contains findings of compliance on each of CPMC's and the City's obligations under the DA. Major obligations, including Sutter's performance of its healthcare and hiring commitments, are summarized below.

Healthcare Commitments

Reconstruction of St. Luke's Hospital. The DA required CPMC to construct a new hospital to replace St. Luke's and to open the new hospital within 24 months after the opening of the Van Ness Campus hospital. With the completion of the new Mission Bernal Hospital, scheduled to open on August 24, 2018, this obligation has been met.

Baseline Commitment: Medi-Cal and Charity Care. Under the DA, CPMC is required to serve at least 30,445 unduplicated Medi-Cal or Charity Care patients in San Francisco each year. CPMC served 39,569 unduplicated patients during 2017, exceeding the cumulative requirement.

Baseline Commitment: Expenditures. CPMC is required to spend at least $8 million for community benefits each year. CPMC exceeded this commitment in 2017, providing $12.5 million in community benefits including support for the Bayview Child Health Center.

Medi-Cal Beneficiaries. Beginning with the August 2013 Effective Date of the DA, CPMC must provide hospital services for an additional 5,400 Medi-Cal beneficiaries each year. CPMC has consistently exceeded this goal and, as of the end of 2017, covered 32,739 Medi-Cal managed care beneficiaries.

Innovation Fund. CPMC's DA funding obligations included total payments of $8.6 million to the San Francisco Foundation to support community clinics and community-based healthcare. CPMC made the final payment in November 2017, and its obligation is complete. The San Francisco Foundation continued to use the fund make grants to local health institutions and community organizations, consistent with its requirements under the DA.

Centers of Excellence in Community Health and Senior Health. CPMC is required to create Centers of Excellence at the St. Luke's Campus to assist patients with or at risk of chronic illnesses and to provide improved inpatient and post-hospitalization care to seniors. This obligation commences with the opening of the new Mission Bernal hospital and was not yet in effect at the date of this report.

Hiring Commitments

The DA requires CPMC to participate in a workforce development program that includes local hiring goals for construction and certain operational activities, as well as a Local Business Enterprise contracting program.

Construction Hiring. The local construction hiring goals established by the DA include:

- 50 percent of total non-union entry-level administrative and engineering positions. For the hiring year from August 2017 to July 2018, 86 percent (32 of 37) positions were filled by San Francisco residents.

- 50 percent of total entry-level administrative and engineering internship positions. For the hiring year from August 2017 to July 2018, 56 percent (29 of 53) positions were filled by San Francisco residents. Of these 29 interns, 10 were subsequently hired as full-time employees of a construction contractor on the project.

- 50 percent of total union entry-level apprentice positions. For the hiring year from August 2017 to July 2018, the total was 30 percent, the same as the share of total positions filled in 2016-2017. Sutter's contractors and the City's Workforce division attribute the lower share to the continuing construction boom in San Francisco, which has created a shortage of local workers available to fill these positions.

- 30 percent of total work hours by union journeymen and apprentices. For the hiring year from August 2017 to July 2018, the total was 24.5 percent, a decline from the 26.25 percent share of total work hours in 2016-2017. As with the share of entry-level apprentice positions, the lower share of total work hours is due to the continuing construction boom in San Francisco and consequent shortage of local workers available to fill these positions.

CPMC is generally in compliance with construction hiring goals. The DA requires good-faith efforts to meet these goals; CPMC's and its contractors' efforts to increase local hiring are described in greater detail in the Workforce tables that follow this introductory section.

Operational Hiring. CPMC's hiring goal for entry-level operational (non-construction-related Sutter employees) is 40 percent. For the hiring year from August 2017 to July 2018, 57 percent (33 of 58) entry-level hires were made through the City's First Source referral program.

Local Business Enterprise Contracting. Under this program, CPMC has made payments totaling 17 percent of construction expenditures to date to qualified contractors, exceeding the DA goal of 14 percent.

Payments and Funding Commitments

CPMC was required to make cash payments totaling over $70 million, including endowment of a health care innovation fund and payments for affordable housing, workforce training, transportation improvements (in lieu of other transportation impact fees), and public improvements, including streetscape and pedestrian safety improvements near the Van Ness Campus. The final payments were made on November 8, 2017, and CPMC has fulfilled this obligation.

Other Commitments

Transportation Demand Management (TDM) Measures. The DA includes a TDM plan, which commits CPMC to reducing the proportion of employees who drive to work alone and to increasing use of public transportation, carpooling, walking, cycling, and other transportation alternatives. CPMC has initiated the programs required to date, including a transit pass subsidy that began in January 2017. Approximately 18 percent of employees receive the transit subsidy as of the date of this report, and about 25 percent of employees use transit to get work. While CPMC has generally met this obligation to date, a further reduction in single-occupant vehicle trips by both employees and visitors is needed to meet the DA goal of reduction of such trips (compared to 2013) by 15 percent by 2024.

Mission Bernal Campus Area Improvements. The DA requires CPMC to build a number of street and pedestrian improvements around the Mission Bernal Campus, including traffic signals, street lighting, and permanent upgrades to the temporary plaza at the intersection of Guerrero Street and San Jose Avenue, south of the campus, to create a new Guerrero Park. The first set of these improvements is required to be completed at the time the new hospital and

adjacent plaza are complete, which is projected to be in 2019. CPMC has initiated design of these improvements and coordination with City agencies, but has not yet applied for the necessary permits.

Areas of Concern

Culturally and Linguistically Appropriate Services (CLAS). The DA requires CPMC to deliver culturally and linguistically appropriate services that are representative of San Francisco's diverse communities at all of its campuses. In previous years, the City's annual review resulted in recommendations for substantial improvements in such services, particularly at the St. Luke's Diabetes Clinic, where the patient population has historically included many monolingual Spanish-speaking patients.

In April 2016, CPMC and the Department of Public Health (DPH) met and agreed on improvements needed to meet CLAS standards at St. Luke's Diabetes Clinic. These include added Spanish language staff capacity at the clinic, Spanish language classes for staff, dedicated reception staff, and use of the HealthFirst Program to provide connections for St. Luke's Diabetes Clinic patients. CPMC has maintained the progress reported in 2016, with the hiring of Spanish-speaking staff, the start of Spanish classes in 2017, and continued collaboration with the HealthFirst program.

The DPH/CPMC discussion also noted that reception staff would improve patient care and experience at the Diabetes Clinic. CPMC does not presently plan to add a dedicated receptionist at the clinic. CPMC has indicated that it continues to monitor patient access through a question on the bilingual patient satisfaction survey to assess if there are access challenges caused by not having a receptionist; however, the results of the survey were not provided and there is no way to assess whether overall patient access to the services provided by the clinic, especially among its historic patient base, has been diminished.

The agreements and progress since the 2016 compliance review are described in detail in the Healthcare tables that follow this introductory section.

Skilled Nursing Facility (SNF) Care. The DA required CPMC to make good-faith efforts to address the continuing decline in the availability of SNF beds in San Francisco, but provision of SNF beds is not required under the DA and thus is not evaluated in the annual reporting process. However, the Health and Planning Commissions and the public have expressed concerns about the loss of SNF beds at Sutter's CPMC facilities at previous public hearings. Since the 2016 review process was completed, Sutter has announced the closure of all SNF beds at St. Luke's and, subsequently, that current SNF patients at St. Luke's would be transferred to its Davies Campus. No new patients would be accepted at St. Luke's, and no SNF beds are included in the new Mission Bernal hospital.

Other ongoing areas of concern include the level of enrollment with the Tenderloin Medi-Cal Managed Care provider and shortfalls in construction hiring of union journeymen and

apprentices, as noted above. More information on these issues is included in the detailed tables that follow this introductory section.

Each obligation that is due under the DA is also included in this report as a separate table that indicates the following:

- *Lead Department:* The department within the City that is responsible for implementing or overseeing the obligation.
- *Staff Contact:* The name and contact information for the member of City staff overseeing the implementation of the obligation.
- *Completion Date:* The date on which CPMC's obligation under the DA was completed.
- *Obligation Status:* An indication of whether the obligation is complete or still in progress. Many of the obligations are multi-year commitments which are still in process of being completed. This section also indicates whether CPMC is "in" or "not in" compliance with the obligation.
- *Description of Obligation:* A summary of the obligation defined in the DA or related document, such as the Transportation Demand Management (TDM) program.
- *Current Status:* A description of the progress made on implementing the obligation to date.
- *Next Steps:* Upcoming steps that will be taken either by CPMC or the City in implementing the obligation.
- *Opportunities for Community Engagement:* Information on additional public meetings or opportunities for the public to engage in the implementation of the obligation.
- *Funding (If Applicable):* For obligations that require funding to the City or to the San Francisco Foundation, information regarding the amount of funding received to date, and amount of funding required under the obligation.

Additional Information. Both the Planning and Public Health Departments maintain websites dedicated to the CPMC Long Range Development Plan and Development Agreement.

- Planning Department: http://cpmc.sf-planning.org
- Department of Public Health: http://www.sfdph.org

The Planning Department's website includes a "Document Downloads" page, which includes a comprehensive library of documents relating to the project, including the Development Agreement, Environmental Impact Report, Transportation Demand Management Program, and Milestone Notices. Documents relating to previous annual reviews are also located on the project website.

Sutter Health, the parent company of CPMC, also maintains a website with an overview of the construction program for each campus, as well as construction updates and schedules, at http://cpmc2020.org.

CPMC DEVELOPMENT AGREEMENT - COMPLIANCE OVERVIEW			
COMMUNITY BENEFIT	**DA SECTION**	**COMPLIANCE**	**REPORT PAGE NUMBERS**
ANNUAL REVIEW PROCESS	DA Section 8.2	In Compliance	10
CONSTRUCTION SCHEDULE	DA Section 4.2.3	In Compliance	11
MILESTONE COMPLETION NOTICE	DA Section 4.2.3	In Compliance	12
VISIONING PLANS	Exhibit I	In Compliance	13
WORKFORCE COMMITMENTS			
CITY BUILD/CONSTRUCTION JOBS	Exhibit E Section A	In Compliance	16
FIRST SOURCE/END USE JOBS	Exhibit E Section C	In Compliance	20
WORKFORCE FUND	Exhibit E Section D	In Compliance	23
LOCAL BUSINESS ENTERPRISES	Exhibit E Section B	In Compliance	25
HEALTHCARE COMMITMENTS			
BASELINE HEALTHCARE	Exhibit F Section 1	In Compliance	27
MEDI-CAL COMMITMENT	Exhibit F Section 2	In Compliance	33
HEALTHCARE INNOVATION FUND	Exhibit F Section 3	In Compliance	36
OTHER HEALTHCARE COMMITMENTS	Exhibit F Section 11	In Compliance	38
HEALTH SERVICE SYSTEMS	Exhibit F	In Compliance	43
HOUSING PROGRAM	Exhibit G	In Compliance	44
PUBLIC IMPROVEMENTS	Exhibit H	In Compliance	47
TRANSPORTATION	Exhibit K	In Compliance	50

CPMC Payment Schedule

2017 Reporting Year

Public Funding Recipient	Agency	Effective Date[1] Due: 9/9/2013 Completed: 9/4/2013	First Installment[2] Due: 12/7/2013 Completed: 11/25/2013	Second Installment Due: 12/7/2014 Completed: 11/25/2014	Third Installment Due: 12/7/2015 Completed: 11/25/2015	Fourth Installment Due: 12/7/2016 Completed: 11/14/2016	Fifth Installment Due: 12/7/2017 Completed: 11/8/2017	Total Payments	Payee
		Completed							
Workforce Agreement - Exhibit E									
Workforce Training Payment	OEWD	$ 1,000,000	$ -	$ -	$ -	$ -	$ -	**$ 1,000,000**	City & County of San Francisco
	SF Foundation	-	2,000,000	1,000,000	-	-	-	**3,000,000**	SF Foundation
Subtotal Workforce Agreement		*1,000,000*	*2,000,000*	*1,000,000*	-	-	-	*4,000,000*	
Community Healthcare program - Exhibit F									
Innovation Fund	SF Foundation	2,000,000	1,500,000	1,125,000	1,125,000	1,725,000	1,125,000	**8,600,000**	SF Foundation
Public Improvements - Exhibit H									
CH Pedestrian & Traffic Safety	SFMTA	200,000	200,000	-	575,000	575,000	-	**1,550,000**	City & County of San Francisco
Tenderloin Safe Passage Grant	OEWD	200,000	-	-	-	-	-	**200,000**	City & County of San Francisco
Tenderloin Lighting & Traffic Safety	OEWD	400,000	400,000	-	-	-	-	**800,000**	City & County of San Francisco
	PUC	-	800,000	1,275,000	1,275,000	100,000	-	**3,450,000**	
Pac/Cal Enforcement & Traffic Safety	SFMTA	300,000	300,000	700,000	700,000	1,000,000	-	**3,000,000**	City & County of San Francisco
Duboce Park Grant	RPD	-	25,000	-	-	-	-	**25,000**	City & County of San Francisco
Subtotal Public Improvements		*1,100,000*	*1,725,000*	*1,975,000*	*2,550,000*	*1,675,000*	-	*9,025,000*	
Housing Program - Exhibit G									
Residential Hotel Unit Replacement	MOHCD	2,684,800	-	-	-	-	-	**2,684,800**	City & County of San Francisco
Residential Unit Replacement	MOHCD	1,453,820	-	-	-	-	-	**1,453,820**	City & County of San Francisco
Affordable Housing Payment	MOHCD	2,400,000	6,700,000	7,000,000	8,825,000	8,100,000	3,475,000	**36,500,000**	City & County of San Francisco
Subtotal Housing Program		*6,538,620*	*6,700,000*	*7,000,000*	*8,825,000*	*8,100,000*	*3,475,000*	*40,638,620*	
Transportation Program - Exhibit K									
Transit Fee	SFMTA	-	-	-	1,500,000	2,500,000	2,500,000	**6,500,000**	City & County of San Francisco
BRT Funding	SFMTA	-	2,100,000	2,900,000	-	-	-	**5,000,000**	City & County of San Francisco
Bicycle Studies	SFMTA	400,000	-	-	-	-	-	**400,000**	City & County of San Francisco
Subtotal Transportation Program		*400,000*	*2,100,000*	*2,900,000*	*1,500,000*	*2,500,000*	*2,500,000*	*11,900,000*	
Total - all Public payments		**$ 11,038,620**	**$ 14,025,000**	**$ 14,000,000**	**$ 14,000,000**	**$ 14,000,000**	**$ 7,100,000**	**$ 73,163,620**	

[1] Effective Date payments due within thirty (30) days of the Effective Date - August 10, 2013.

[2] First Installment due within thirty (30) days of the date when Approvals were Finally Granted - November 8, 2013. Each following Installment is due annually on each anniversary date thereafter - December 7.

PLANNING

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Annual Compliance**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
CPMC's Annual Compliance Statement & City Annual Report	**DA § 8.2.1**

LEAD DEPARTMENT:	Planning	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Elizabeth Purl	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Development Performance Coordinator		IN PROGRESS	☑
EMAIL:	elizabeth.purl@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 575-9028		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

In conducting the required initial and annual reviews of CPMC's compliance with this Agreement, the Planning Director shall follow the process set forth in this Section 8.2. Within 150 days following the end of each fiscal year, CPMC shall provide a report to the Planning Director showing compliance. Promptly upon receipt, the Planning Director shall post the Compliance Statement on the Planning Department website and the DPH Director shall post the Healthcare Compliance Report portion thereof on the Department of Public Health's website. The Planning Department and the Public Health Department shall receive public comment for 30 days after posting of the Compliance Statement. After the 30 day comment period the Planning Director shall within 45 days thereafter, prepare a report as to whether CPMC is in compliance with this Agreement based upon all of the information received.

CURRENT STATUS:

The Planning Director received CPMC's 2017 Development Agreement Compliance Statement on May 31 2018. The Compliance Statement was posted on the Planning Department's website on June 1, 2018. Also on June 1, 2018, the Department mailed a notice to interested parties soliciting public comment on the Compliance Statement through June 30, 2018. The Department received public comments from one organization: the University of California Hastings College of the Law, on behalf of San Franciscans for Healthcare, Housing, Jobs and Justice ("SFHHJJ").

NEXT STEPS:

The City will schedule a joint hearing of the Planning Commission and Health Commission (tentatively scheduled for September 6, 2018). The City will provide 60 days' notice to interested parties prior to the scheduled hearing.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC, the City, and members of the public will continue to participate in visioning meetings that also contribute feedback on CPMC's implementation of its obligations under the DA.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Construction Schedule**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Construction Schedule	**DA § 4.2.3**

LEAD DEPARTMENT:	Planning	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Elizabeth Purl	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Development Performance Coordinator		IN PROGRESS	☑
EMAIL:	elizabeth.purl@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 575-9028		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

In order to keep the City reasonably informed of CPMC's progress in satisfying the Hospital Commitment, CPMC shall periodically report to the City on the timing and progress of the construction of the St. Luke's Campus Hospital and Cathedral Hill Campus Hospital...CPMC shall provide the City with reasonably detailed project schedules for the St. Luke's Campus Hospital and Cathedral Hill Campus Hospital before the start of construction... and shall update such project schedules on not less that a quarterly basis...

CURRENT STATUS:

CPMC has provided the Department with updates on their construction schedule, as updates occur, including with its Annual Compliance Reports. CPMC regularly updates the construction schedule for both Mission Bernal (formerly St. Luke's) and Van Ness (formerly Cathedral Hill) on the CPMC2020 website (http://cpmc2020.org/). CPMC has also been in frequent communication with the Planning Department about various stages of construction or construction planning at both campuses.

NEXT STEPS:

CPMC should continue to keep the Department abreast of any changes to the existing construction schedules as well as significant phases of construction.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC maintains the CPMC2020 website (http://cpmc2020.org/), which is updated at least weekly with construction bulletins and includes project updates and schedules. This website includes live webcams showing construction activity at each of the campuses under construction, allowing the public to view construction progress.

CPMC should continue the practice of notifying neighbors in advance of significant construction activities (example: CPMC provided notice in English and Spanish to neighbors of Mission Bernal inviting them to community meetings held during 2017 regarding the current status of the project and upcoming construction schedule). CPMC should continue to provide updates to the Community about construction activities at both the Mission Bernal Campus and the Van Ness and Geary (Cathedral Hill) Campus.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Milestone Completion**

DEVELOPMENT AGREEMENT OBLIGATION:	**DEVELOPMENT AGREEMENT SECTION:**
Milestone Completion and Notice	**DA § 4.2.3**

LEAD DEPARTMENT:	Planning	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Elizabeth Purl	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Development Performance Coordinator		IN PROGRESS	☑
EMAIL:	elizabeth.purl@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 575-9028		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Within 30 days following the completion of each milestone listed in the Schedule and Phasing Plan, CPMC shall provide notice to the City (the "Milestone Completion Notice").

CURRENT STATUS:

No milestones were due in 2017. CPMC has completed all the of milestones due to date, as described in its annual Compliance Statements and this 2017 City Report.

NEXT STEPS:

CPMC will continue to meet the milestones outlined in Exhibit C of the Development Agreement and provide notice to the Planning Department within 30 days of completing each milestone. The next milestone (completion of the replacement hospital at the St. Luke's Campus) is due in February 2018, on or before 42 months from receipt of the Increment 1 permit from OSPHD for the St. Luke's Campus Hospital; this permit was granted on August 5, 2014.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC has opportunities to engage the Community in the construction related activities that result from the Milestone Commitments. CPMC should continue to provide updates to the Community about construction activities at the St. Luke's Campus.

CPMC'S FULL FUNDING AMOUNT:	**FUNDING RECEIVED FROM CPMC TO DATE:**

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Visioning Plans**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
California Campus	**Exhibit I-3.2.a**

LEAD DEPARTMENT:	Planning	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Elizabeth Purl	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Development Performance Coordinator		IN PROGRESS	☑
EMAIL:	elizabeth.purl@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 575-9028		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Community Visioning Plans were required in the Development Agreement (Exhibit I-1 through I-3) for the Long-Term Projects for the Davies, California and Pacific Campuses, as set forth below:

Davies Campus Community Advisory Group (CAG): To facilitate community input regarding planning for the Long-Term Project at the Davies Campus, CPMC is required to establish a Davies Campus Community Advisory Group within six (6) months after Approvals and any Subsequent Approvals for CPMC's Near-Term Projects have been Finally Granted.

Pacific Campus Community Advisory Group: To facilitate community input regarding planning for the Long-Term Projects at the Pacific Campus, CPMC is required to convene an initial meeting of parties who have previously expressed interest in the planning process for the Pacific Campus to discuss interest in and the composition of the Pacific Campus Community Advisory Group ("Pac CAG") within six (6) months after Approvals and any Subsequent Approvals for CPMC's Near-Term Projects have been Finally Granted. CPMC is required to promptly thereafter, appoint the Pac CAG.

California Campus Visioning Advisory Committee (VAC): The California VAC is the community advisory group that will assist CPMC with community outreach, information dissemination and public education efforts regarding the visioning process for eventual reuse of the California Campus. On the date that is the later of (i) six (6) months after Approvals and any Subsequent Approvals for CPMC's Near-Term Projects have been Finally Granted; and (ii) completion of the Phase II work described in Section 3b-Research and Stakeholder Interviews, CPMC will appoint the Cal VAC.

CURRENT STATUS:

This obligation is not yet required , as the obligation timeframe is triggered within six (6) months after the Approvals and any Subsequent Approvals for CPMC's Near-Term Projects have been Finally Granted. Several of CPMC's Near-Term Projects have not received their Approvals and/or Subsequent Approvals and thus they are not obligated to begin the Community Visioning Plans for the three Long-Term Project Campuses. However, CPMC has commenced the Visioning Plan process for the California Campus, including formation of a VAC.

NEXT STEPS:

CPMC will continue the Community Visioning Plan process for the California Campus and will begin the Community Visioning Plan process for other Campuses no later than the time that Approvals/Subsequent Approvals have been finally granted.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC could voluntarily begin this process sooner than required for the remaining campuses.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP**

DEVELOPMENT AGREEMENT OBLIGATION:	**DEVELOPMENT AGREEMENT SECTION:**
Non-Traffic/Transit MMRP Measures	**DA § 4.5.2; Exhibit D**

LEAD DEPARTMENT:	Planning	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Elizabeth Purl	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Development Performance Coordinator		IN PROGRESS	☑
EMAIL:	elizabeth.purl@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 575-9028		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall comply with all Mitigation Measures imposed as applicable to each Project component, except for any Mitigation Measures that are expressly identified as the responsibility of a different party or entity. Without limiting the foregoing, CPMC shall be responsible for the completion of all Mitigation Measures identified as the responsibility of CPMC or the "project sponsor."

CURRENT STATUS:

CPMC has completed pre-construction Mitigation Measures related to Cultural and Paleontological Resources, Biological Resources, Geology and Soils, Hydrology and Water Quality, and Hazards and Hazardous Materials (M-CP-N2, M-CP-N3, M-CP-N4, M-BI-N1, M-GE-N6, M-HY-N2, M-HZ-N1a, and M-HZ-N1b). CPMC has made all payments due under the DA and is in compliance with Mitigation Measures related to mitigation fee payments (M-TR-29, M-CR-30, M-TR-31, M-TR-134, and M-TR-137). CPMC has completed or is performing mitigation activities related to project construction (M-TR-55, M-NO-N1, M-NO-N1a, M-NO-N1b, M-NO-N1c, M-NO-N5, M-AQ-N1a, M-AQ-N1b, M-AQ-N2, M-AQ-N9, and M-HY-N3). The remaining mitigation requirements are not yet due.

NEXT STEPS:

CPMC will continue to implement construction-related Mitigation Measures. Mitigation Measures related to project operation, such as stationary equipment noise, loading, and traffic control, must be implement once the new hospitals/medical office buildings are complete and in operation.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

Not applicable.

CPMC'S FULL FUNDING AMOUNT:	**FUNDING RECEIVED FROM CPMC TO DATE:**
$6,500,000.00	$6,500,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded. See "MMRP: Transportation and Circulation" pages for detailed information.

ADDITIONAL FUNDS REQUIRED:

None.

WORKFORCE

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Workforce (CityBuild)**

DEVELOPMENT AGREEMENT OBLIGATION:	**DEVELOPMENT AGREEMENT SECTION:**
50% Non-union Entry Level Admin/Engineering Positions	**Exhibit E § A.5.b**

LEAD DEPARTMENT:	OEWD - Workforce	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Ryan Young	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Policy Analyst		IN PROGRESS	☑
EMAIL:	ryan.young@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 701-4831		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

So long as this Agreement remains in full force and effect, CPMC's Contractors shall make good faith efforts in accordance with Section 9 to ensure the following hiring goals with respect to each Contract:...With respect to new Entry-Level Positions for non-union administrative and engineering candidates, a Contractor and its Subcontractors will work to fill a minimum of fifty percent (50%) of such new Entry-Level Positions with San Francisco resident System Referrals....OEWD, through its network of Community Based Organizations and the City's One-Stop System, shall be designated as the referral source for San Francisco residents.

CURRENT STATUS:

As of July 1, 2018, CPMC's Contractors have filled thirty-two (32) of the thirty-seven (37) new Entry Level Positions for non-union administrative and engineering candidates with System Referrals. This represents 86% of new Entry-Level positions being filled with San Francisco resident System Referrals, above the minimum 50% hiring goal.

No new opportunities were available since last year as the projects were moving towards their final phases and preparing for close out.

The thirty-two System Referrals were participants of OEWD's Construction Administrative and Professional Services Academy (CAPSA). The program is administered by Mission Hiring Hall in collaboration with City College of San Francisco and a network of workforce service providers.

The following positions were filled by Workforce System Referrals:
- Document Coordinator – LEED
- Front Desk Administrator
- Accounting Clerk
- Administrative Assistant
- BIM Administrator & Support
- Project Administrator
- Business and Risk Management Assistant
- Project Management
- Project Coordinator
- Administrative Coordinator
- Safety Coordinator
- Parking Coordinator
- Front Desk Coordinator

NEXT STEPS:

CPMC's Contractors will continue to engage with OEWD's CityBuild program and continue to:
- Submit CityBuild Workforce Projection Forms and coordinate meetings to review hiring goals.
- Notify CityBuild of any non-union Entry Level administrative and engineering positions and work through the referral process.
- Consider System Referrals for positions and provide constructive feedback on all System Referrals.
- Track, monitor, and report the progress of System Referrals through the application, hiring and employment process.

CityBuild will continue to closely monitor the performance of CPMC contractors. CityBuild will also continue to leverage the CATP and CAPSA programs and work with its network of Community Based Organizations (CBOs) and Access Points for qualified candidates.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

OEWD continues to hold regular community events in partnership with CPMC and OEWD's Neighborhood Access Points. In addition, OEWD will continue to engage Community Based Organizations for outreach and recruitment, and sharing hiring data as it becomes available.

CPMC'S FULL FUNDING AMOUNT:	**FUNDING RECEIVED FROM CPMC TO DATE:**

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Workforce (CityBuild)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
50% Entry Level Admin/Engineering Internship Positions	**Exhibit E § A.5.b**

LEAD DEPARTMENT:	OEWD - Workforce	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Ryan Young	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Policy Analyst		IN PROGRESS ☑
EMAIL:	ryan.young@sfgov.org		IN COMPLIANCE ☑
PHONE:	(415) 701-4831		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

So long as this Agreement remains in full force and effect, CPMC's Contractors shall make good faith efforts in accordance with Section 9 to ensure the following hiring goals with respect to each Contract:...With respect to new Entry-Level Positions for administrative and engineering internship candidates, a Contractor and its Subcontractors will work to fill a minimum of fifty percent (50%) of such new Entry-Level Positions with San Francisco resident System Referrals....OEWD, through its network of Community Based Organizations and the City's One-Stop System, shall be designated as the referral source for San Francisco residents.

CURRENT STATUS:

As of July 1, 2018, CPMC's Contractors have filled twenty-nine (29) of the fifty-three (53) new Entry Level Positions for administrative and engineering internship candidates with System Referrals. This represents 56% of new Entry Level positions being filled with San Francisco resident System Referrals, above the minimum 50% hiring goal. The System Referrals include students from San Francisco Unified School District High School Seniors and San Francisco State University civil engineering majors partnering with the MESA (mathematics engineering science achievement) program focusing on economically disadvantaged students.

Of the twenty-nine interns, ten were hired on as full-time employees with a contractor on the project.

NEXT STEPS:

CPMC's Contractors will continue to engage with OEWD's CityBuild program and continue to:

- Submit CityBuild Workforce Projection Forms and coordinate meetings to review hiring goals.
- Notify CityBuild of any Entry Level Positions for administrative and engineering internships and work through the referral process.
- Consider System Referrals for positions and provide constructive feedback on all System Referrals.
- Track, monitor, and report the progress of System Referrals through the application, hiring and employment process.

CityBuild will continue to closely monitor the performance of CPMC contractors. CityBuild will also continue to engage with the San Francisco Unified School District, City College of San Francisco, and San Francisco State University to reach out to students who may be interested in internships as well as work with its network of Community Based Organizations (CBOs) and Access Points for qualified candidates.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

OEWD continues to hold regular community events in partnership with CPMC and OEWD's Neighborhood Access Points. In addition, OEWD will continue to engage Community Based Organizations for outreach and recruitment, and sharing hiring data as it becomes available.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Workforce (CityBuild)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
50% Entry Level Apprentice Positions	**Exhibit E § A.5.c**

LEAD DEPARTMENT:	OEWD - Workforce	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Ryan Young	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Policy Analyst		IN PROGRESS	☑
EMAIL:	ryan.young@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 701-4831		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

So long as this Agreement remains in full force and effect, CPMC's Contractors shall make good faith efforts in accordance with Section 9 to ensure the following hiring goals with respect to each Contract:…With respect to new Entry-Level Positions for union apprentice candidates, the Contractor, its Subcontractors, and OEWD will work together to fill a minimum of fifty percent (50%) of such new Entry-Level Positions with San Francisco resident System Referrals who must also be graduates of CityBuild Academy. The Contractor along with its Subcontractors and their applicable unions will confirm the number of new union apprentices that will be required for the Contract and the annual variability of that demand throughout the course of the Contract. The methodology to be used to estimate the number of new union apprentices shall be 21% of the projected number of apprentice hours overall.

CURRENT STATUS:

As of July 1, 2018, CPMC's Contractors have continued to fill 30% of new Entry Level Positions for union apprentice candidates with System Referrals. Although that is below the 50% Entry-Level union apprentice hiring goal, HerreroBOLDT and their contractors have made ongoing efforts to hire System Referrals when possible and continue to demonstrate their good-faith by notifying CityBuild of all new hiring opportunities. But, due to the increase of construction projects in San Francisco and throughout the Bay Area, there have been ongoing shortages in available local apprentices across several trades including: Drywall/Lathers, Iron Workers, Sheet Metal Workers, Bricklayers/Blocklayers, and Operating Engineers which has made it difficult to fill all new Entry-Level opportunities with System Referrals. A total of 165 resident apprentice construction workers have been placed on the projects through the workforce system.

NEXT STEPS:

CityBuild continues to expand its training Academy to host an additional training cycles, when possible, to address the needs of the construction industry. This year, CityBuild added the CityBuild-Gleneagles training to train up to an additional 120 local jobseekers to help bolster the pipeline of apprentice construction workers. CityBuild will continue to work with the local unions and apprenticeship programs to address the shortage of apprentice workers across several trades.

In addition, CPMC's Contractors will continue to engage with OEWD's CityBuild program and continue to:
- Notify CityBuild of any Entry Level union apprentice positions and work through the referral process.
- Consider System Referrals for positions and provide constructive feedback on all System Referrals.
- Keep System Referrals on the job as long as possible when contractors begin their reduction of workforce towards project close out.
- Track, monitor, and report the progress of System Referrals through the application, hiring and employment process.

CityBuild will continue to closely monitor the performance of CPMC contractors. CityBuild will also continue to leverage the CityBuild Academy and work with its network of Community Based Organizations (CBOs) and Access Points for qualified candidates.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

OEWD continues to hold regular community events in partnership with CPMC and OEWD's Neighborhood Access Points. In addition, OEWD will continue to engage Community Based Organizations for outreach and recruitment, and sharing hiring data as it becomes available.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Workforce (CityBuild)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
30% of Trade Hours for Journeymen and Apprentices	**Exhibit E § A.5.d**

LEAD DEPARTMENT:	OEWD - Workforce	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Ryan Young	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Policy Analyst		IN PROGRESS ☑
EMAIL:	ryan.young@sfgov.org		IN COMPLIANCE ☑
PHONE:	(415) 701-4831		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

With respect to new and core opportunities for union journeymen and apprentices, so long as this Agreement remains in full force and effect, CPMC's Contractors shall make good faith efforts in accordance with Section 9 to ensure the following hiring goals with respect to each Contract:…Contractor and its Subcontractors will work to achieve a minimum of thirty percent (30%) of trade hours (i.e., 30% of journeymen and apprentice trade hours combined, and not 30% in each category) to be performed by San Francisco residents. This goal will be measured based upon (1) trade hours for the overall Contract, (2) trade partners, regardless of tier, and (3) hours by craft. A Contractor's obligation to hire new union entry-level apprentice candidates set forth in Section 5(c) above shall be credited towards the Contractor's obligation to hire San Francisco residents under this Section 5(d).

CURRENT STATUS:

The Bay Area's, and specifically San Francisco's, boom in the construction industry in the last several years has resulted in a shortage of available local workers. This has impacted the ability for CPMC's Contractors to achieve the minimum 30% goal of San Francisco work hours. As of July 1, 2018, CPMC's Contractors have reported a total of 1,245,578 trade hours performed by San Francisco residents in new and core opportunities for union journeymen and apprentices out of 5,091,742 total work hours reported. This represents 24.5% of work hours performed by San Francisco residents, which is below the 30% overall hiring goal. A total of 309 resident construction workers was placed on the projects through the workforce system.

These data are collected through an electronic payroll system, Elations Systems. It represents the total aggregate reported workhours for the Van Ness and Geary Hospital Campus, the St. Luke's Replacement Hospital Campus (Mission/Bernal Campus), and the Van Ness Garage and Medical Office Building project.

(This report does not include hours performed on the Medical Office Building interior/tenant improvement contract as General Contractor Rudolph & Sletten, Inc. and their subcontractors have not been able to submit payroll hours through Elation Systems.)

NEXT STEPS:

CityBuild continues to expand its training Academy to host an additional training cycles, when possible, to address the needs of the construction industry. This year, CityBuild added the CityBuild-Gleneagles training to train up to an additional 120 local jobseekers to help bolster the pipeline of available local construction workers.

In addition, CPMC's Contractors will continue to engage with OEWD's CityBuild program and continue to:
- Notify CityBuild of any Entry Level union apprentice positions and work through the referral process.
- Consider System Referrals for positions and provide constructive feedback on all System Referrals.
- Keep System Referrals and San Francisco residents on the job as long as possible when contractors begin their reduction of workforce towards project close out.
- Track, monitor, and report the progress of System Referrals through the application, hiring and employment process.

CityBuild will continue to closely monitor the performance of CPMC contractors. CityBuild will also continue to leverage the CityBuild Academy and work with its network of Community Based Organizations (CBOs) and Access Points for qualified candidates.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

OEWD continues to hold regular community events in partnership with CPMC and OEWD's Neighborhood Access Points. In addition, OEWD will continue to engage Community Based Organizations for outreach and recruitment, and sharing hiring data as it becomes available.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT			
SUBJECT:	**Workforce (First Source)**		
DEVELOPMENT AGREEMENT OBLIGATION:		**DEVELOPMENT AGREEMENT SECTION:**	
40% Entry Level System Referrals		**Exhibit E § C.3**	
LEAD DEPARTMENT:	OEWD - Workforce	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Ryan Young	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Policy Analyst		IN PROGRESS ☑
EMAIL:	ryan.young@sfgov.org		IN COMPLIANCE ☑
PHONE:	(415) 701-4831		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

As long as this Agreement remains in full force and effect, CPMC's hiring goals shall be to fill at least forty percent (40%) of Available Entry Level Positions with System Referrals ("Annual Hiring Target") in each consecutive 12-month period following the Effective Date (each, a "Hiring Year"). Notwithstanding the foregoing, if CPMC does not meet its Annual Hiring Target in any Hiring Year (a "Hiring Deficiency"), the number of Entry Level Positions constituting the Hiring Deficiency will roll over and be added to the Annual Hiring Target for the following Hiring Year....If a Hiring Deficiency exists at the end of the term of this Agreement, then the term will be automatically extended ("Automatic Extension") until such time as CPMC achieves the full Annual Hiring Target for each Hiring Year.

CURRENT STATUS:

For the 2017-18 Project Year (August 2017 - July 2018), CPMC made 33 hires through the workforce system. This represents 57% of total entry-level hires during the Project Year, which exceeds the 40% requirement per the Development Agreement. Additionally, CPMC does not have a hiring deficit from prior years.

# Hired from Workforce System	# Hired from outside	Total # of Hires	% of hires from Workforce system
33	25	58	57%

For the 2017-18 Project Year, the following requisitions have been filled by Workforce System referrals:

Requisition	Zip Code	Start Date
Unit Coordinator	94107	8/7/2017
Attendant, Hospital - Cert -PD	94115	8/21/2017
Aide, Food Service -PD	94121	8/21/2016
Aide, Food Service -PD	94102	8/21/2017
Aide, Food Service -PD	94124	9/5/2017
Attendant, Hospital - Cert -PD	94110	10/30/2017
Attendant, Hospital - Cert -PD	94110	10/30/2017
Attendant, Hospital - Cert -PD	94112	10/30/2017
Security Officer	94134	10/30/2017
Security Officer	94133	11/13/2017
Attendant, Hospital - Cert -PD	94109	11/27/2017
Attendant, Hospital - Cert	94102	11/27/2017
Aide, Food Service -PD	94112	11/27/2017
Attendant, Hospital - Cert	94134	12/11/2017
Aide, Food Service -PD	94112	12/11/2017
Security Officer	94102	12/11/2017
Coord, Unit	94109	1/8/2018
Rep, Patient Access	94124	1/8/2018
Attendant, Hospital - Cert -PD	94115	1/22/2018
Accessioner, Pathology	94122	1/22/2018
Unit Coordinator	94132	2/5/2018
Attendant, Hospital - Cert	94110	3/5/2018
Cook	94158	3/5/2018
Certified Nursing Assistant	94109	3/19/2018

Security Officer	94124	3/19/2018
Attendant, Hospital - Cert	94122	4/2/2018
Aide, Certified Home Health	94112	4/2/2018
Attendant, Hospital - Cert	94107	5/14/2018
Unit Coordinator	94116	5/14/2018
Security Officer	94124	6/11/2018
Rep, Patient Access	94112	6/11/2018
Rep, Client Services- Lab	94112	6/25/2018
Rep, Client Services- Lab	94124	6/25/2018

Of the 33 system referral hires made during the Project Year, 17 (52%) were from impacted communities specified in the Development Agreement, specifically, Outer Mission/Excelsior, Mission/SOMA, Western Addition, Tenderloin, Chinatown, and Southeastern neighborhoods.

Requisition	**2017-18 Program Year**
Administrative Coordinator	0
Aquatic Instructor	0
Central Distribution Aide	0
Certified Home Health Aide	2
Certified Hospital Attendant/Nursing Assistant	37
Clerk/Receptionist	0
Client Services Representative	2
Cook	2
Dietary Clerk-Nutrition Services	0
EKG Technician	0
Emergency Department Technician	1
Food Service Aide-Food and Nutrition	13
Hospital Attendant*	0
Housekeeping Aide	1
Laboratory Assistant-Clinical Laboratory	0
Medical Assistant	5
Pathology Lab Accessioner	3
Patient Access Representative-Patient Registration Services	22
Patient Registration Representative	0
Patient Service Representative	1
Patient Support Representative	0
PBX Operator	5
Point of Service Specialist	0
Rehabilitation Aide	2
Sales Gift Shop	0
Security Officer	26
Specimen Handling Lab Aide/Phlebotomy-Clinical Laboratory	2
Speech Therapy Aide	0
Transporter/Transport Aide	0
Unit Coordinator	17
Total	141

NEXT STEPS:

OEWD will continue to work closely with CPMC, community partners, and the San Francisco Foundation to build upon positive gains made in the 2017-18 Program Year to ensure CPMC meets or exceeds its 40% hiring goal. Strategies identified in the prior annual report have been put in to place and will continue, including:

·Employer spotlight events in priority neighborhoods to increase awareness of CPMC employment opportunities and how to apply for the positions
·Group interviews in partnership with OEWD's Neighborhood Access Points in priority neighborhoods; prior to each event, Neighborhood Access Points conduct prescreening events in order to ensure a match with CPMC employment opportunities
·Citywide distribution of CPMC job announcements
·Early involvement of CPMC hiring managers
·Weekly check-ins between OEWD & CPMC
·Quarterly meetings of OEWD, CPMC, and Neighborhood Access Points and San Francisco Foundation grantees

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

As described above, OEWD continues to hold regular community events in partnership with CPMC and OEWD's Neighborhood Access Points. In addition, OEWD communicates monthly with representatives of San Franciscans for Healthcare, Housing, Jobs and Justice (SFHJJ), sharing hiring data as it becomes available.

CPMC CITY AGENCY COMPLIANCE REPORT				
SUBJECT:	**Workforce (Workforce Fund)**			
DEVELOPMENT AGREEMENT OBLIGATION:		**DEVELOPMENT AGREEMENT SECTION:**		
Workforce Fund Agreement		**Exhibit E § D**		
LEAD DEPARTMENT:	OEWD - Workforce	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Ryan Young	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Policy Analyst		IN PROGRESS	☑
EMAIL:	ryan.young@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 701-4831		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

The remainder of the $3 million shall be paid to the San Francisco Foundation in accordance with Exhibit N… until the total sum is paid, and managed by the San Francisco Foundation in accordance with the Workforce Fund Agreement… The funds paid by CPMC shall be used for workforce training purposes only...

CURRENT STATUS:

Brief History: The San Francisco Foundation received $2,000,000 of the Workforce Fund in December 2013 and spent the rest of 2014 planning, writing and issuing an RFP for funding. In March, 2015, four grantees received grant awards from the San Francisco Foundation: Jewish Vocational Service, Mission Hiring Hall, Positive Resource Center, and Self Help for the Elderly; with grant awards beginning in April 2015. On August 17, 2015 The San Francisco Foundation released a duplicate RFP with a focus on Bayview and Western Addition communities, in which the Success Center and Young Community Developers were awarded funding to provide training and workforce services to prepare residents from their respective communities for employment at CPMC. During PY 16-17 it was decided that Mission Hiring Hall and Positive Resource Center would not continue as part of the portfolio due to continuous struggles with performance measures, and FACES SF would be awarded funding due to their high placement rates and successful collaborative efforts with CPMC. During this time the contract cycles were adjusted to mirror OEWD's fiscal year (July 1-June 30) in an effort to provide better program and outcome alignment. Contract outcomes in PY 16-17 focused on qualitative services to properly prepare residents for both clinical and non-clinical employment opportunities.

Current Status: The Workforce Committee continues to meet and work with grantees to achieve our collective goals. Committee meetings occurred on the following dates: September 19, 2017, December 15, 2017, March 5, 2018, and April 10, 2018 to do a thorough review of performance outcomes, discuss challenges and successes with workforce programming, and strategize on how best to connect SF residents to employment at CPMC. The total amount of funding allocated to the 5 non-profit workforce partners in PY 17-18 (Jewish Vocational Services, Self-Help for the Elderly, Success Center, Young Community Developers and FACES SF) was a cumulative of $182,500. No new RFP's were released related to this committee's work between July 1, 2017 - June 30, 2018. However, committee partners were invited to apply for the CPMC Workforce Development Fund to the San Francisco Foundation via online applications under the same parameters that were used in past RFP's similar to OEWD's RFP 121 (which was released on December 2, 2016 to provide a full array of workforce services to local residents, with a focus on sector programming, neighborhood-based workforce services, specialized population, young adult and job readiness services). On April 10, 2018 the Workforce Committee met via a conference call to have preliminary discussions about year-end performance. Through this committee convening as well as follow up emails that occurred on April 25, 2018, May 10, 2018, and May 31, 2018, it was decided that Young Community Developers would not continue as part of the portfolio in PY 18-19 due to continuous struggles with performance measures. During this time it was also decided that Code Tenderloin via Downtown Streets Team would be awarded funding as new CBO partners to provide program support to a community anchor for employment barrier reduction, job preparedness, and placement services to low-income residents of the Civic Center, SoMA, and Tenderloin neighborhoods in San Francisco. Other committee topics such as PY18-19 grantees and their funding amounts, review and confirmation of PY18-19 grantee scopes of work and their contractual outcomes were discussed and finalized during these follow up correspondences as well. Contracts for the new program year will focus on job readiness training, placement assistance, paid work experience and/or barrier reduction to properly prepare residents for both clinical and non-clinical employment opportunities with competitive wages in a growing employment sector. Contracts for PY 18-19 will effectively start on July 1, 2018, and scopes of work will include language re: CPMC outreach and employment services to City residents for the 5 SF Foundation workforce programming partners. Note that as of May 31, 2018, the total remaining amount in the Workforce Development Fund was $1,307,911.77.

NEXT STEPS:

• Continue quarterly meetings with the Workforce Committee and with grantees in Program Year 2018-2019
• Shift focus to job readiness training, placement assistance, paid work experience and/or barrier reduction that leads to employment opportunities with CPMC or comparable employers with competitive wages
•The Workforce Committee will convene on July 11, 2018 to provide input on contractual deliverables and discuss strategies for continued program success.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The San Francisco Foundation will continue to meet regularly with grantees to ensure that training and employment services are meeting the workforce needs of San Franciscans. Code Tenderloin and the Downtown Streets Team will develop a joint plan to strengthen job readiness and employment services for Tenderloin residents to engage and support the community. CPMC, in coordination with OEWD's Business Services Team will continue to schedule neighborhood based Employer Spotlights and Hiring Events citywide.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$4,000,000.00	$4,000,000.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Workforce (LBE Requirement) - CY2018**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
14% Local Business Enterprise Goal	**Exhibit E § B.4**

LEAD DEPARTMENT:	Contract Monitoring Division	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Selormey Dzikunu	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Contract Compliance Officer I		IN PROGRESS	☑
EMAIL:	Selormey.Dzikunu@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 554-8369		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

As long as this Agreement remains in full force and effect, CPMC shall make a good faith effort to ensure that at least fourteen percent (14%) of the cost of all Contracts for the Workforce Projects are awarded to Contractors or Subcontractors that qualify as certified LBE's under this Agreement. CPMC and City acknowledge and agree that CPMC's efforts to award Contracts to LBE's are voluntary, and that CPMC and its Contractors shall have the sole discretion to confirm certification of, or otherwise screen, hire or not hire LBE's.

CURRENT STATUS:

For the Van Ness and Geary Campus the project has a 15.3% utilization of Local Business Enterprise (LBE), which represents $146,411,144 of the $958,507,985 spent on construction to date. San Francisco-based business that are working or have worked on the project include the following: Becker Electric, Your All Day Everyday Janitorial, CMC Traffic Control, Phoenix Electric, Martin Ron Associates, Giron Construction, NTK Construction, Liquidyn, Municon, and DLD Lumber. CPMC continues to utilize other LBEs such as Merriweather and Williams, The M Line, and BergDavis Public Affairs. For the St. Luke's Campus the project has achieved 21.3% utilization of LBEs, which represents $62,395,904 of the $292,259,557 spent on construction to date. For the Van Ness Campus Medical Office Building and Garage, Pankow has achieved 12.8% utilization of LBEs, representing $14,757,359 of the $115,629,636 spent on construction to date.

NEXT STEPS:

HerreroBoldt will continue to work with the CMD to increase LBE participation on both of the hospital projects. HerreroBoldt will continue to help with the coordination between the CMD and the general contractors on the Van Ness Campus Medical Office Building and the Mission Bernal Campus Office Building.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

As HerreroBOLDT finds the need for contractors to perform scope they will work with CMD to identify LBE's in the RFP process and include in all RFPs the LBE goals which will be in all contracts. HerreroBOLDT will continue to purchase supplies, materials and meals from local business and work with merchant associations to identify vendors. HerreroBoldt will work with the CMD and the general contractors on the medical office buildings, as needed for identification and outreach for LBE's to bid and perform scope on the projects.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

HEALTH CARE

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Baseline Commitment)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Unduplicated Patient Commitment	**Exhibit F § 1.a**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS	☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE	☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Commencing on the date the Approvals are Finally Granted [11/8/2013], CPMC shall in each fiscal year [January 1 through December 31]...care for a total of not less than 30,445 Unduplicated Patients in San Francisco (the "Unduplicated Patient Commitment")..."Unduplicated Patient" means a patient who receives a service from any CPMC facility or clinic in the City during the calendar year as a Medi-Cal or Charity Care patient, who has not previously received a service as a Medi-Cal or Charity Care patient from a CPMC facility or clinic in San Francisco during that calendar year.

CURRENT STATUS:

CPMC served a total of 39,569 unduplicated patients between 1/1/2017 and 12/31/2017. This figure is verified by a third party audit performed by Deloitte & Touche. CPMC exceeded its requirement by 9,123 unduplicated patients.

NEXT STEPS:

This annual obligation continues until 11/8/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Baseline Commitment)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Baseline Expenditure Commitment	**Exhibit F § 1.b**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

Commencing on the date the Approvals are Finally Granted, CPMC shall in each fiscal year...spend at least Eight Million Dollars ($8,000,000) for Community Benefits in San Francisco (the "Baseline Expenditure Commitment"….As part of the Baseline Expenditure Commitment, CPMC shall provide financial and other services or operational support for comprehensive primary pediatric care to residents of the Bayview area through the Bayview Child Health Center in a manner and amount generally consistent with CPMC's level of support for the Bayview Child Health Center in fiscal year 2011-12, including comprehensive primary pediatric care to residents of the Bayview area.

CURRENT STATUS:

CPMC exceeded this requirement by providing $12,503,772 in Community Benefits in San Francisco. CPMC's compliance with this provision was verified by a third party audit performed by Deloitte & Touche. The audit methodology, which was established at the time the DA was negotiated, included: review of the contractual requirements and the eligible expense definitions; review of the list of expenses CPMC included in their calculation; from that list, a selection of projects totaling more than $8 million; and evaluation of a random sample of 45 transactions. A copy of this audit was included in CPMC's 2017 Compliance Statement, which is posted on both the Department of Public Health and Planning Department websites.

NEXT STEPS:

This annual obligation continues until 11/8/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Baseline Commitment)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Hiring 3rd Party Auditor	**Exhibit F § 1.a; DA § 8.2.2**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

Exhibit F: [The Unduplicated Patient Commitment] shall be verified by an independent thrid party auditor… no later than 3 months following execution of this Agreement.

Development Agreement: The Planning Director and Director of Public Health shall… post on their websites the independent third party audit verifying the number of Unduplicated Patients cared for and the costs incurred for the Baseline Expenditure Committement.

CURRENT STATUS:

CPMC's performance on the Unduplicated Patient Commitment and the Baseline Expenditure Commitment were verified by a third party audit performed by Deloitte & Touche. The audit methodology, which was established at the time the DA was negotiated, included: interviews with managers to understand their process for calculating the unduplicated patient commitment; direct data analytics to determine the number of unduplicated patients; direct data analysis on the unduplicated patients identified; and evaluation of a random sample of 25 patients identified in the analysis. A copy of this audit was included in CPMC's 2017 Compliance Statement, which is posted on both the Department of Public Health and Planning Department websites.

NEXT STEPS:

This annual obligation continues until 11/8/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Baseline Commitment)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Charity Care Policies and Affordable Care Act	**Exhibit F § 1.d**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	12/31/2015
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☑
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☐
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:
CPMC will maintain through the end of calendar year 2015 Charity Care policies that are no more restrictive than current Charity Care policies set forth in the CPMC Fiscal Year 2011 Charity Report…

CURRENT STATUS:
N/A

NEXT STEPS:
N/A

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:
N/A

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:
$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Baseline Commitment)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Charity Care Policies and Affordable Care Act	**Exhibit F § 1.d**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall maintain Charity Care policies that are in compliance with applicable California law, and CPMC will not deny Charity Care patients access to inpatient service.

CURRENT STATUS:

CPMC maintained Charity Care policies that comply with California law and ensured Charity Care patients had access to inpatient services.

NEXT STEPS:

This annual obligation began on 1/1/2016 and continues until 11/8/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Baseline Commitment)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Bayview Child Health Center	**Exhibit F § 1.e**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall provide financial and other services or operational support for comprehensive primary pediatric care to residents of the Bayview area through the Bayview Child Health Center…

CURRENT STATUS:

CPMC provided financial and operational support for the Bayview Child Health Center consistent with 2011-2012 levels. In November 2013, South of Market Health Center (SMHC), in collaboration with CPMC and the Sutter Pacific Medical Foundation, received funding from the federal Health Resources and Services Administration to transfer ownership of the Bayview Child Health Center to SMHC. The transfer was effective 9/1/14. The DA provides that CPMC may "sell, lease or transfer programs, services or service lines to meet evolving community needs, operational cost-effectiveness, or quality standards." CPMC provided the following support to the SMHC and the clinic as part of the Baseline Commitment in the DA:

1. Financial support through an operations grant each year for five years as the clinic becomes sustainable under the Federally Qualified Health Center model;
2. Leased the former BCHC Medical Director to SMHC through the end of 2015 to promote continuity of care;
3. Transferred all assets to SMHC at no cost;
4. Invested over $1,000,000 in tenant improvements to bring the clinic to OSHPD 3 compliance; and,
5. Remains the clinic's specialty and hospital partner-- providing Bayview children with comprehensive services across the care continuum.

NEXT STEPS:

This obligation continues until 11/8/2023. As mentioned in the "Current Status," CPMC will provide an operations grant each year for the 5 years to ensure sustainability of the clinic, and will remain the clinic's speciality and hosptial partner to ensure comprehensive services to Bayview children.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (New Medi-Cal Beneficiaries)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
San Francisco Health Plan Medi-Cal Managed Care Program	**Exhibit F § 2.a**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall continue to participate with a standard services agreement in the San Francisco Health Plan Medi-Cal managed care program ("Program") in accordance with the provisions below.

CURRENT STATUS:

CPMC continues to have a standard services agreement with the San Francisco Health Plan.

NEXT STEPS:

This annual obligation continues until 8/10/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (New Medi-Cal Beneficiaries)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
New Medi-Cal Beneficiaries Commitment	**Exhibit F § 2.b**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

Commencing on the Effective Date, and annually thereafter, CPMC shall accept responsbility for providing hospital services… for no less than 5,400 additional Medi-Cal managed care beneficiaries…

CURRENT STATUS:

CPMC met the obligation of 5,400 additional Medi-Cal beneficiaries in 2014. As of December 2017, CPMC had a total of 32,739 Medi-Cal managed care beneficiaries, which exceeds the development agreement commitment by 15,199 beneficiaries.

NEXT STEPS:

This annual obligation continues until 8/10/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (New Medi-Cal Beneficiaries)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Contracting with MSO Providers	**Exhibit F § 2.f**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall contract with an existing Management Services Organizations (MSO) to care for New Enrollees, and, when available with a new MSO where the primary care provider base is located in the Tenderloin to care for 1,500 New Enrollees if and when available from the Effective Date through December 31, 2015.

CURRENT STATUS:

There continues to be no available MSO with a primary care provider based in the Tenderloin and despite efforts by CPMC to support the creation of one, it was deemed financially unfeasible by clinic partners.

CPMC has contracted with an MSO, North East Medical Services (NEMS), and worked with NEMS and St. Anthony's Clinic, a primary care provider in the Tenderloin, to have St. Anthony's join the NEMS MSO. Through this partnership, CPMC is the hospital partner for St. Anthony's participating medical groups. As of Dec 31, 2017, St. Anthony's has 170 members that enrolled in the NEMS/CPMC partnership (1 Healthy Kids & 169 Medi-Cal). As of May 2018, the membership count is 176 (3 Healthy Kids and 173 in Medi-Cal).

CPMC continues to work with St. Anthony's leadership to develop a path to sustainability and support outreach efforts, funded through the Healthcare Innovation Fund. To date, St. Anthony's conducts ongoing outreach events to Tenderloin residents through the St. Anthony's Dining Room, Tenderloin family serving providers, Project Homeless Connect and enhanced Medi-Cal eligibility screening and enrollment at the clinic.

NEXT STEPS:

CPMC will continue to provide care for up to 1,500 Medi-cal beneficiaries in the Tenderloin.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Innovation Fund)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Innovation Fund Agreement	**Exhibit F § 3.c**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	10/7/2017
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☑
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☐
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall enter into the Innovation Fund Grant Agreement (the "Innovation Fund Agreement") substantially in the form attached hereto as Attachment 1 to this Exhibit F, and City shall agree to and accept same as indicated, with only such changes as are approved by the DPH Director, the City Attorney and the Innovation Fund Foundation that do not decrease CPMC's payment obligations or otherwise materially reduce the benefits provided under the Innovation Fund Agreement as determined by the DPH Director. The Innovation Fund Agreement shall include and implement the provisions applicable to the Innovation Fund Foundation as set forth in this Section 3.

CURRENT STATUS:

CPMC entered into the Innovation Fund Agreement with The San Francisco Foundation. In 2017, CPMC paid the fifth installment into the Innovation Fund ($1.125 million), for a total of $8.6 million since the inception of the fund, thus, completing its payment obligation to the Innovation Fund Foundation.

NEXT STEPS:

N/A

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$8,600,000.00	$8,600,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Innovation Fund)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Innovation Fund Funding & Disbursements	**Exhibit F § 3.c**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS	☐
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE	☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

The Innovation Fund Foundation shall annually distribute a portion of the principal balance of the Innovation Fund to third-party recipients under a grant application process approved by CPMC and the DPH Director….Prior to any disbursements or commitments for distribution of the Innovation Fund, the Innovation Fund Foundation shall consult with, obtain disbursement advice from the Committee and, if possible, obtain a consensus for distributions with the Committee, as provided in Section 3.a(iii) above, provided that final determinations shall be made by the Innovation Fund Foundation.

CURRENT STATUS:

The following is a list of grants awarded in 2017 made by the Innovation Fund, with a total amount of $677,000.

Public Health Foundation-Sobering Center Transport: to provide interim support to maintain transport services. ($150,000 one year)
St. Anthony's Foundation: to increase part-time Outreach Worker position to full-time to increase patient referral to their clinic. ($35,000 one year)
Central City Hospitality House: to support housing placement, case management, and leadership development of Tenderloin residents to advocate for improved living conditions and access to services. ($167,000 one year)
Garden 2 Table: to support the Camelot Green Kitchen project and cultural events to promote healthy living for SRO residents in the Tenderloin community. ($125,000 one year)
Neighborhood Empowerment Network: to engage Bayview community agencies and residents in a community planning process to ensure the health and safety of residents. ($150,000 one year)
Women's Community Clinic: to provide infrastructure support for updated financial and patient tracking software and staff time to complete the merger with HR360. ($50,000 one year)

NEXT STEPS:

The Innovation Fund Founation will continue to provide grants, in accordance to the DA, to third-party recipients until depletion of funds.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Sub-Acute Services)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Sub-Acute Services	**Exhibit F § 4**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	2/12/2016
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☑
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☐
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall work with SFDPH and other hospital operators in good faith, but without assuming any obligation to expend funds or other resources, to develop specific proposals for providing sub-acute care services in San Francisco, and to present such proposals to the Health Commission by June 30, 2014, or such date as the participating hospitals and the Health Commission determine.

CURRENT STATUS:

Complete.

NEXT STEPS:

N/A

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

N/A

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Staff Integration)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Staff Integration	**Exhibit F § 7**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall continue its good faith efforts at the clinical integration of medical staffs at the St. Luke's Campus, with the medical staff at its Pacific Campus, California Campus and Davies Campus (and, upon Completion of the Cathedral Hill Campus Hospital and the Cathedral Hill Campus), and on quality improvement initiatives for the purpose of improving patient quality of care at all of the CPMC Campuses.

CURRENT STATUS:

In 2016, the integration of medical staff across the CPMC campuses, including St. Lukes, was completed and approved by the hospital's Board. CPMC now has a single medical staff at all four campuses. The quality improvement initiatives are also run across the four campsues. Upon completion of the new hospital campuses, the plan is for the these staff to also be integrated, with a single medical staff across all the campuses.

NEXT STEPS:

This obligation continues until 10/8/2023. Since there has been integration across the four campuses now, compliance review will be to ensure a single medical staff, upon completion of new Mission/Bernal and VanNess/Geary campuses once completed and open.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Community Benefits Partnership)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
CPMC participation in Community Benefits Partnership	**Exhibit F § 8**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall continue to actively participate in the "Community Benefits Partnership" (an outgrowth of the Building a Healthier San Francisco needs assessment process and the Charity Care Project) or its successor, of San Francisco private non-profit hospitals, SFDPH, Human Services, community clinics, health plans, non-profit providers and advocacy groups, to prepare a community benefit plan, as defined in Health and Safety Code Section 127355, for submittal to OSHPD.

CURRENT STATUS:

CPMC participates in the San Francisco Health Improvement Parternship, successor to the Community Benefits Partnership, and the needs assessment process.

NEXT STEPS:

This obligation continues until 10/8/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (Chinese Hospital)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Chinese Hospital Service Agreement	**Exhibit F § 9**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

Through existing service agreements, CPMC currently provides pediatric, obstetric, and certain tertiary services to Chinese Hospital patients. CPMC shall continue to provide such services in a manner generally consistent with existing services agreements with Chinese Hospital and its affiliates as of the Effective Date. Notwithstanding the foregoing, CPMC may adjust programs, services and service lines to meet evolving community needs and quality standards, as may be reflected in future service agreements with Chinese Hospital and its affiliates.

CURRENT STATUS:

CPMC has maintained its agreement with the Chinese Community Health Plan (CCHP) for their Commercial HMO population and their Covered CA population. CPMC has also maintained its longstanding Transfer Agreement and contract for high risk OB/GYN care with Chinese Hospital. Overall, CPMC continues to provide services generally consistent with existing service contracts.

NEXT STEPS:

This annual obligation continues until 8/10/2023.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Healthcare (CLAS)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Culturally and Linguistically Appropriate Services	**Exhibit F § 10**

LEAD DEPARTMENT:	Department of Public Health	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Gretchen Paule	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Senior Health Program Planner		IN PROGRESS ☑
EMAIL:	gretchen.paule@sfdph.org		IN COMPLIANCE ☑
PHONE:	(415) 554-2820		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

CPMC shall deliver at all Campuses culturally and linguistically appropriate services that are representative of San Francisco's diverse communities and are in accordance with the mandates, guidelines and recommendations of the National Standards on Culturally and Linguistically Appropriate Services (CLAS), as issued by the U.S. Department of Health and Human Services' Office of Minority Health in March 2001 and subsequently updated.

CURRENT STATUS:

CPMC delivers services at all campuses in accordance with the mandates, guidelines, and recommendations of the National Standards on CLAS. In 2015 CPMC conducted a CLAS Assessment and provided the assessment to DPH. CPMC continued efforts to implement assessment recommendations and improve cultural and linguistic access to services across the four campuses.

In April 2016, DPH and CPMC staff met in person to discuss the St. Luke's Diabetes Clinic. The meeting resulted in specific clarifications and recommendations related to the St. Luke's Diabetes Clinic. Agreements (bold) and progress since the 2016 compliance review are listed below.

Added Spanish language capacity is warranted - In 2016, CPMC hired 0.8 FTE Spanish-speaking Registered Dietician and Certified Diabetes Educator. CPMC maintained this level of Spanish-speaking staff during 2017.
Spanish Language Classes should be offered - CPMC began offering Spanish language classes in summer 2017, and hosted 12 classes during the year. From January 2018 to July 2018, CPMC hosted 11 classes with an average of 5 participants per class.
Reception staff would improve patient care and experience - CPMC does not plan to add a dedicated receptionist at the Diabetes Clinic. CPMC continues to monitor patient access through a question on the bilingual patient satisfaction survey to continuously assess if there are access challenges caused by not having a receptionist.
HealthFirst Program provides connections for St. Luke's Diabetes Clinic Patients - The Advisory Council continues to be housed within SHIDEN (Sutter Health Integrated Diabetes Education Network) as the certification is at the Sutter System level. St. Luke's Diabetes Clinic staff from the service line attend these meetings. St. Luke's Diabetes Clinic and HealthFirst continue to collaborate & ensure services are meeting the needs of the population.

NEXT STEPS:

This obligation continues until 8/10/2023. Additionally, CPMC will continue to provide updates on the St. Luke's Diabetes Clinic in the 2018 Compliance Statement.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Department of Public Health meets quarterly with the coalition San Franciscans for Healthcare, Housing, Jobs and Justice to provide updates on the status of CPMC's compliance with the Development Agreement where possible.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Health Service System**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
CPMC Rate Increase Limitations	**Exhibit F § 11.c**

LEAD DEPARTMENT:	Health Service System	**COMPLETION DATE:**	
STAFF CONTACT NAME:	Mitchell Griggs	**OBLIGATION STATUS:**	COMPLETE ☐
STAFF CONTACT TITLE:	Chief Operating Officer		IN PROGRESS ☑
EMAIL:	mitchell.griggs@sfgov.org		IN COMPLIANCE ☑
PHONE:	(415) 554-0605		NOT IN COMPLIANCE ☐

DESCRIPTION OF OBLIGATION:

For the period from January 1, 2014 to December 31, 2016, the negotiated fee for service increase for CPMC shall not exceed 5% annually as compared to the prior calendar year fee for service rates. In the following seven (7) years CPMC shall limit annualized increases to no more than the Medical Rate of Inflation plus 1.5% (the "Annual Rate Increase").

CURRENT STATUS:

In March of 2018 Milliman provided the analysis evaluating increases between calendar years 2014 and 2015 (using data from January through December of each year). CPMC was in compliance. Per agreement, Milliman reported that CPMC had satisfied the Annual Rate Increase commitment of rate increase to be less than or equal to 5%, but no additional details were provided other than the methodology used for the analysis. CPMC and SFHSS have agreed to engage Milliman to conduct two separate analyses: Evaluation comparing calendar year 2015 data to 2016 data and comparing 2016 data to 2017 data to determine year-to-year rate increases.

NEXT STEPS:

SFHSS has requested the claims data from United Healthcare (UHC) and from Blue Shield of California (BSC) for 2016 and 2017. Milliman has received the claims data from UHC.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

Not applicable.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Not applicable.

ADDITIONAL FUNDS REQUIRED:

None.

HOUSING PROGRAM

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Housing**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Replacement Housing Obligation	**Exhibit G § 1.c**

LEAD DEPARTMENT:	Mayor's Office of Housing and Community Development	**COMPLETION DATE:**	9/6/2013	
STAFF CONTACT NAME:	Mara Blitzer	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Director of Housing Development		IN PROGRESS	☐
EMAIL:	mara.blitzer@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 701-5544		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

MOHCD shall deposit the Residential Hotel Unit Replacement Fee payment into the Affordable Housing Fund and use the funds for affordable housing….MOH shall confirm to DBI receipt of the Residential Hotel Unit Replacement Fee.

CURRENT STATUS:

CPMC has paid this obligation in full. The Mayor's Office of Housing and Community Development (MOHCD) has provided notice to DBI regarding the receipt of the Residential Housing Unit Replacement Fee. MOHCD has awarded the funds to the developer of the affordable apartments located at 1036 Mission. 1036 Mission includes 83 units, 40 of which are set aside for formerly homeless families. The loan for 1036 Mission closed in September 2016.

NEXT STEPS:

N/A

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

N/A

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$4,138,620.00	$4,138,620.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Housing**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Affordable Housing Obligation	**Exhibit G § 2**

LEAD DEPARTMENT:	Mayor's Office of Housing and Community Development	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Mara Blitzer	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Director of Housing Development		IN PROGRESS	☐
EMAIL:	mara.blitzer@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 701-5544		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

MOHCD shall deposit the payment into the Affordable Housing Fund and use the funds for affordable housing. CPMC shall provide evidence of payment to DBI upon request, and MOHCD shall confirm to DBI receipt of the Residential Unit Replacement Fee.

CURRENT STATUS:

CPMC provided the first four payments to the Affordable Housing Fund. The first payment was received 9/4/2013, totaling $2,400,000. The second payment was received on 12/7/2013, totaling $6,700,000. The third payment was received on 11/24/14, totaling $7,000,000. The fourth payment was received on 12/8/15, totaling $8,825,000. The fifth payment was received on 11/30/16, totaling $8,100,000. The sixth and final payment was received on 11/8/17, totaling $3,475,000. Combined, MOHCD has received $36,500,000. In FY17-18, MOHCD continued to use the Affordable Housing Payment received to date toward rehabilitating public housing in conjunction with HUD's Rental Assistance Demonstration (RAD) program and multifamily new construction. All of the funds are now expended except for $202,573 encumbered for 1068 Palou. Also in FY17-18, MOHCD expended $200,000 for Project Related Administrative costs. In FY 18-19, MOHCD expects make progress to expend the remaining funds.

NEXT STEPS:

CPMC provided the final annual payment to the Affordable Housing Fund in late 2017, and the Housing obligation has been fulfilled.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

N/A

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$36,500,000.00	$36,500,000.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	

PUBLIC IMPROVEMENTS

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Public Improvements**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Tenderloin Public Improvements - Pedestrian Safety & Lighting	**Exhibit H § 2.a**

LEAD DEPARTMENT:	OEWD - Econ	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Amy Cohen	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Director, Neighborhood Business Dev.		IN PROGRESS	☑
EMAIL:	amy.b.cohen@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 554-6649		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall make the following payments (the "CCHAP Improvement Funds") to City for the purposes identified below: $4,250,000 to OEWD, DPW or PUC, including at least $3,450,000 for sidewalk widening and pedestrian improvements and up to $800,000 for economic development activities in the Tenderloin, as determined by the Director of OEWD following consultation with the PUC General Manager and the Director of DPW.

CURRENT STATUS:

A construction contract was awarded to Bay Area Lighting in March 2017 by the San Francisco Public Utilities Commission. The contractor was issued notice to proceed on May 30, 2017. Contract final completion was scheduled April 25, 2018.
Contract is extended due to issues tied to completion work involving basement supports and the final phase of (21) pole removals. The new target date of completion is August 10, 2018. As of the date of this report, SFPUC Utilities Field Services are providing final correctable punch-list items for contractor's miscellaneous work.

NEXT STEPS:

The project should be complete in late Summer 2018.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

There could potentially be a groundbreaking or ribbon-cutting event.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$4,250,000.00	$4,250,000.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Public Improvements**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Safe Passage Grant	**Exhibit H § 2.a**

LEAD DEPARTMENT:	OEWD - Econ	**COMPLETION DATE:**	12/7/2013	
STAFF CONTACT NAME:	Amy Cohen		COMPLETE	☑
STAFF CONTACT TITLE:	Director, Neighborhood Business Dev.		IN PROGRESS	☐
EMAIL:	amy.b.cohen@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 554-6649		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall pay the total sum of Two Hundred Thousand Dollars ($200,000) to OEWD (the "Safe Passage Grant") as described in Schedule A (Section I), in accordance with Exhibit N (Payment Schedule).

CURRENT STATUS:

The capital project has been tabled to allow the organization to focus on building organizational capacity with the $200,000 in seed funding. OEWD engaged the Saint Francis Foundation's Tenderloin Health Improvement Project in becoming a key funder of the effort. They have more than matched the contribution and helped Safe Passage make the determination to transition their organizational infrastructure to the Tenderloin Community Benefit District (CBD).

NEXT STEPS:

Safe Passage will transition formally to be housed under the Tenderloin CBD. OEWD plans to make General Funds available to the CBD in FY16-17 in order to help continue to build both Safe Passage's and the CBD's capacity.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

Many opportunities, ongoing, given that the program is a collaboration of Community-based Organizations in the Tenderloin and relies on volunteer recruitment to ensure safety of the path.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$200,000.00	$200,000.00
CPMC'S FUNDING OBLIGATION REMAINING:	
$0.00	

TRANSPORTATION

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Cathedral Hill Transit and Safety Improvements	**Exhibit H § 2.b**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	6/30/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

$1,550,000 to DPW or MTA for transit and safety improvements and work as part of the CCHAP Improvements… in the neighborhoods around the Cathedral Hill Campus.

CURRENT STATUS:

Full funding has been received. SFMTA and DPW agreed on proposal to use funds to improve transit travel times and reliability near the campuses through transit signal priority (TSP). TSP is completed on 1-California, 2-Clement, and the 3-Jackson (vehicles and traffic signal equipment). The TSP installation on the 19-Polk and 27-Bryant is partially completed. Polk Street has upcoming streetscape and signal work that needs to be completed prior to TSP equipment going in and the 27-Bryant is currently going through Muni Forward outreach on upcoming proposals. TSP work for the 27-Bryant can be scheduled after the outreach takes place.

NEXT STEPS:

None.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

SFMTA invited suggestions from key Supervisors' offices. The proposal was also presented to the SFMTA Citizens Advisory Council on August 7, 2014. Outreach has also been conducted for individual Muni improvement projects.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$1,550,000.00	$1,550,000.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded.

ADDITIONAL FUNDS REQUIRED:

NA

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation**

DEVELOPMENT AGREEMENT OBLIGATION:	**DEVELOPMENT AGREEMENT SECTION:**
California Campus Enforcement and Traffic Safety Measures	**Exhibit H § 2.c**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	6/30/2019	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall make the following payments (the "CCHAP Improvement Funds") to City for the purposes identified below….$3,000,000 to DPW or MTA, as applicable, for Public Improvement Costs for enforcement and traffic safety measures as part of the CCHAP Improvements (shown in Schedule A Section I), around the CPMC Pacific Campus and California Campus.

CURRENT STATUS:

Full funding has been received. The funds are being used as follows for enforcement, and pedestrian and traffic safety:

1. Approximately $1,000,000 for a 2-year Enhanced Parking Enforcement Pilot focused on loading zones and crosswalks within one block of Pacific campus. Completed in April 2017.

2. $80,000 for rectangular rapid flash beacons at California/Commonwealth intersection. Construction completed February 2017

3. About $1,420,000 for pedestrian safety improvements around the Pacific Campus at Webster/Clay and Buchanan/Clay intersections (high-injury network). Improvements include bulb-outs, signage, lighting, special paving, continental crosswalk and stop line striping, painted safety zones, and daylighting. Crosswalks, stop lines, and daylighting completed in March 2016; painted safety zones and loading changes installed Summer 2017; full package of improvements currently in SF Public Works' detailed design phase with design completed by Fall 2018 and construction in early 2019.

4. Remaining $539,000 not yet allocated. May be utilized for future Muni Forward projects consistent with funding requirements.

NEXT STEPS:

SFMTA to propose and CPMC will review proposals for use of remaining funds. SFMTA and Public Works completing design for additional pedestrian safety improvements at Pacific Campus.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

SFMTA invited suggestions from key Supervisors' offices. The proposal was presented to the SFMTA Citizens Advisory Council on August 7, 2014. SFMTA and CPMC jointly held a community meeting in Fall 2016 to present preliminary Pacific Campus pedestrian safety improvements; feedback received from neighbors, hospital, and Supervisor's office and project modified accordingly. Subsequently, Pedestrian Safety Improvements were presented at formal Engineer's Public Hearing in Spring 2017 and approved in May 2017 by SFMTA Board of Directors.

CPMC'S FULL FUNDING AMOUNT:	**FUNDING RECEIVED FROM CPMC TO DATE:**
$3,000,000.00	$3,000,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded.

ADDITIONAL FUNDS REQUIRED:

NA

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation**

DEVELOPMENT AGREEMENT OBLIGATION:	**DEVELOPMENT AGREEMENT SECTION:**
Pacific Campus Enforcement and Traffic Safety Measures	**Exhibit H § 2.c**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	6/30/2019	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall make the following payments (the "CCHAP Improvement Funds") to City for the purposes identified below….$3,000,000 to DPW or MTA, as applicable, for Public Improvement Costs for enforcement and traffic safety measures as part of the CCHAP Improvements (shown in Schedule A Section I), around the CPMC Pacific Campus and California Campus.

CURRENT STATUS:

Full funding has been received. The funds are being used as follows for enforcement, and pedestrian and traffic safety:

1. $1,000,000 for a 2-year Enhanced Parking Enforcement Pilot focused on loading zones and crosswalks within one block of Pacific campus. Completed in April 2017.

2. $80,000 for rectangular rapid flash beacons at California/Commonwealth intersection. Construction completed February 2017.

3. About $1,420,000 for pedestrian safety improvements around the Pacific Campus at Webster/Clay and Buchanan/Clay intersections (high-injury network). Improvements include bulb-outs, signage, lighting, special paving, continental crosswalk and stop line striping, painted safety zones, and daylighting. Crosswalks, stop lines, and daylighting completed in March 2016; painted safety zones and loading changes planned for Summer 2017; full package of improvements currently in SF Public Works' detailed design phase with design completion expected by Fall 2018 and construction in early 2019.

4. Remaining $539,000 not yet allocated. May be utilized for future Muni Forward projects consistent with funding requirements.

NEXT STEPS:

SFMTA and SF Public Works completing design design and construction of additional pedestrian safety improvements at Pacific Campus. CPMC and SFMTA to consider additional measures if funding remains.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

SFMTA invited suggestions from key Supervisors' offices. The proposal was presented to the SFMTA Citizens Advisory Council on August 7, 2014. SFMTA and CPMC jointly held a community meeting in Fall 2016 to present preliminary Pacific Campus pedestrian safety improvements; feedback received from neighbors, hospital, and Supervisor's office and project modified accordingly. Subsequently, Pedestrian Safety Improvements were presented at formal Engineer's Public Hearing in Spring 2017 and approved in May 2017 by SFMTA Board of Directors.

CPMC'S FULL FUNDING AMOUNT:	**FUNDING RECEIVED FROM CPMC TO DATE:**
$3,000,000.00	$3,000,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded.

ADDITIONAL FUNDS REQUIRED:

NA

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Public Improvements**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
St. Luke's Campus Public Improvements Final Design Submission	**Exhibit H § 6.a**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	7/31/2024	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall prepare final design, specifications and construction plans for the STLD Improvements for submittal to City, and City shall have sole authority to review and approve improvement plans for the STLD Improvements consistent with the descriptions in Schedule A.

CURRENT STATUS:

Final design for these improvements has yet to be completed. CPMC has begun early discussions with City Agencies for Guerrero Plaza and 27th/Guerrero Traffic Signal Improvements. The Plaza concept plan has been reviewed. Valencia/Duncan Pocket Park completed by San Francisco Public Utilities Commission as part of Mission Valencia Green Gateway Project.

NEXT STEPS:

CPMC will generally complete design and construct improvements. The traffic signal will be designed by the SFMTA. SFMTA and CPMC are negotiating the detailed agreement for payment for the traffic signal. After funds are received, design and construction will likely take 1.5 - 2 years.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The design concepts were reviewed during the public and Board of Supervisors review of the CPMC development project. Additional outreach for the Guerrero Plaza will be led by the SF Planning Department.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Funding estimates to be finalized.

ADDITIONAL FUNDS REQUIRED:

Funding estimates to be finalized.

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Public Improvements**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Davies Campus Public Improvements Final Design Submission	**Exhibit H § 6.a**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	7/31/2024	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall prepare final design, specifications and construction plans for the STLD Improvements for submittal to City, and City shall have sole authority to review and approve improvement plans for the STLD Improvements consistent with the descriptions in Schedule A (Noe Street sidewalk widening and streetscape improvements along Noe, Duboce, 14th Street).

CURRENT STATUS:

Design and construction of these improvements is on hold indefinitely as they are required only prior to issuance of a temporary certificate of occupancy for the Neurosciences Building at the Davies campus

NEXT STEPS:

CPMC will determine whether to pursue construction of the new Neurosciences Building, and if so, will undertake the public improvements final design.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

Community engagement opportunities will be determined as needed in conjunction with the San Francisco Planning Department.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Funding estimates to be finalized.

ADDITIONAL FUNDS REQUIRED:

Funding estimates to be finalized.

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
BRT Contribution	**§ 4.2.4(e); Exhibit K § 1; Exhibit N**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	12/1/2020	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

SFMTA shall use the BRT contributions for hard and soft costs of planning, administration and construction association with the BRT improvements to be constructed or installed in the Geary/Van Ness public rights of way adjacent to the Cathedral Hill Campus.

CURRENT STATUS:

Funding has been received in full by SFMTA. Portion of funds utilized for design of Van Ness BRT; remaining funds to be utilized for future construction.

NEXT STEPS:

Remaining funds to be used for construction of the Van Ness BRT project. The project is expected to be completed and operating by late 2020.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The Van Ness BRT project has extensive community involvement opportunities, including its own Citizens Advisory Committee.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$5,000,000.00	$5,000,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

There is a full funding plan, and SFMTA grants staff have commitments for all needed funding.

ADDITIONAL FUNDS REQUIRED:

There is a full funding plan, and SFMTA grants staff have commitments for all needed funding.

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation (Bicycle Studies)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Bicycle Studies	**§ 4.2.4(e); Exhibit K.4**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	6/30/2019	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall pay to SFMTA the total sum of $400,000. SFMTA shall use the Bicycle Studies Contribution, in its discretion to:
a. Develop preferred bicycle routes between CPMC's campuses…
b. Develop design alternatives for improved bicycle facilities on Polk Street...
c. Develop traffic calming proposals along the Wiggle...
d. Design traffic calming measures along 26th Street between Valencia Street and Potrero Avenue...

CURRENT STATUS:

Funding has been received in full by SFMTA. Funds have been used to complete five projects to improve bicycle safety and access near (1) Cathedral Hill for Wiggle Improvements; (2) California Campus for Euclid Avenue Bike Lanes; (3) California campus for Presidio to Arguello sharrows, (4) St. Luke's for Mission/Valencia Raised Cycletrack, (5)Cathedral Hill for Turk Street Bicycle Improvements . Construction is under way for Polk Street Safety Improvements.

NEXT STEPS:

Most projects have been completed. The remaining project--Polk Street Safety Improvements--is in progress and expected to complete construction by 2019.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

SFMTA invited suggestions from key Supervisors' offices. The proposal was presented to the SFMTA Citizens Advisory Council.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$400,000.00	$400,000.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	
FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:	
Fully funded.	
ADDITIONAL FUNDS REQUIRED:	
NA	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation (TDM)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
TDM Implementation	**§ 4.2.4(e); Exhibit K**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall implement the Transportation Demand Management Plans dated March 24, 2011, as amended dated April 1, 2013 (each a "TDMP") for each of the St. Luke's, Cathedral Hill, Pacific and Davies Campuses, respectively.

CURRENT STATUS:

THIS OBLIGATION IS COVERED BY A SEPARATE WORKBOOK, WITH NUMEROUS SPREADSHEETS FOR SPECIFIC TDM MEASURES

NEXT STEPS:

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation (MMRP)**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Transit/Traffic related MMRP Measures	**DA § 4.5.2; Exhibit D**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall comply with all Mitigation Measures imposed as applicable to each Project component, except for any Mitigation Measures that are expressly identified as the responsibility of a different party or entity. Without limiting the foregoing, CPMC shall be responsible for the completion of all Mitigation Measures identified as the responsibility of CPMC or the "project sponsor."

CURRENT STATUS:

THIS IS COVERED BY A SEPARATE WORKBOOK WITH NUMEROUS SPREADSHEETS FOR THE SPECIFIC MITIGATION MEASURES

NEXT STEPS:

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP: Transportation and Circulation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Mitigation Measure 49 Van Ness/Mission	**Exhibit D - MM-TR-29 (Cathedral Hill)**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	10/8/2017	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION (Mitigation Measure):

CPMC shall financially compensate the SFMTA for the cost of providing the additional service needed to potentially mitigate the transit delay impacts on the 49-Van Ness Mission resulting from the Cathedral Hill Campus project. The financial contribution shall be calculated and applied in a manner that is consistent with the SFMTA cost/scheduling model. The amount and schedule for payment and commitment to application of service needs has been set forth in the Development Agreement between CPMC and SFMTA.

CURRENT STATUS:

SFMTA has received the entire $6.5 million Transit Fee (Development Agreement, Exhibit K, item 3). Entire sum of Transit Fee will be dedicated to the Van Ness Bus Rapid Transit (Muni Routes 47 and 49), which is under construction and expected to begin revenue service by 2020.

NEXT STEPS:

Complete construction of Van Ness BRT project. Expected to be in operation by late 2020.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The SFMTA will report through annual compliance report and its Citizens Advisory Council how funds are being applied, starting in 2016.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$6,500,000.00	$6,500,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded

ADDITIONAL FUNDS REQUIRED:

None

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP: Transportation and Circulation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Mitigation Measure - 38/38L Geary	**Exhibit D MM-TR-30 (Cathedral Hill)**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	10/8/2017	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION (Mitigation Measure):

CPMC shall financially compensate the SFMTA for the cost of providing the additional service needed to potentially mitigate the transit delay impacts on the 38/38L-Geary resulting from the Cathedral Hill Campus project. The financial contribution shall be calculated and applied in a manner that is consistent with the SFMTA cost/scheduling model. The amount and schedule for payment and commitment to application of service needs has been set forth in the Development Agreement between CPMC and SFMTA.

CURRENT STATUS:

SFMTA has received the entire $6.5 million Transit Fee (Development Agreement, Exhibit K, item 3). Entire sum of Transit Fee will be dedicated to the Van Ness Bus Rapid Transit (Muni Routes 47 and 49), which is under construction and expected to begin revenue service by 2020.

NEXT STEPS:

Complete construction of Van Ness BRT project.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The SFMTA will report through annual compliance report and its Citizens Advisory Council how funds are being applied, starting in 2016.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$6,500,000.00	$6,500,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded

ADDITIONAL FUNDS REQUIRED:

None

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP: Transportation and Circulation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Mitigation Measure - 19 Polk	**Exhibit D - MM-TR-31 (Cathedral Hill)**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	10/8/2017	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION (Mitigation Measure):

CPMC shall financially compensate the SFMTA for the cost of providing the additional service needed to potentially mitigate the transit delay impacts on the 19-Polk resulting from the Cathedral Hill Campus project. The financial contribution shall be calculated and applied in a manner that is consistent with the SFMTA cost/scheduling model. The amount and schedule for payment and commitment to application of service needs has been set forth in the Development Agreement between CPMC and SFMTA.

CURRENT STATUS:

SFMTA has received the entire $6.5 million Transit Fee (Development Agreement, Exhibit K, item 3). Entire sum of Transit Fee will be dedicated to the Van Ness Bus Rapid Transit (Muni Routes 47 and 49), which is under construction and expected to begin revenue service by 2020.

NEXT STEPS:

Complete construction of Van Ness BRT project.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The SFMTA will report through annual compliance report and its Citizens Advisory Council how funds are being applied, starting in 2016.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$6,500,000.00	$6,500,000.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded

ADDITIONAL FUNDS REQUIRED:

None

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP: Transportation and Circulation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Mitigation Measure - Construction Transportation Management	**Exhibit D - MM-TR-55 (Cathedral Hill)**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**		
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☐
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION (Mitigation Measure):

CPMC shall develop and implement a Construction Transportation Management Plan (TMP) to anticipate and minimize impacts of various construction activities associated with the Proposed Project. The Plan would disseminate appropriate information to contractors and affected agencies with respect to coordinating construction activities to minimize overall disruptions and ensure that overall circulation is maintained to the extent possible, with particular focus on ensuring pedestrian, transit, and bicycle connectivity. The program would supplement and expand, rather than modify or supersede, any manual, regulations, or provisions set forth by Caltrans, SFMTA, DPW, or other City departments and agencies.

CURRENT STATUS:

CPMC submitted the Contractor Transportation and Parking Management Plan on July 3, 2014. The SFMTA reviewed and submitted comments on July 17, 2014. CPMC submitted a revised TMP on July 22, 2014. This was determined to be acceptable by the SFMTA and approved on July 23, 2014, subject to updating.

NEXT STEPS:

CPMC will monitor the contractor in fulfilling this TMP. CPMC will revise the Plan as needed based on construction crew demographics and travel patterns.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

Community engagement not needed. CPMC will provide contact information to neighbors who have concerns about the project's construction impacts.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

NA

ADDITIONAL FUNDS REQUIRED:

NA

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP: Transportation and Circulation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Mitigation Measure - 47 Van Ness	**Exhibit D - MM-TR-134 (Cathedral Hill)**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	10/8/2017	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION (Mitigation Measure):

CPMC shall financially compensate the SFMTA for the cost of providing the additional service needed to potentially mitigate the transit delay impacts on the 47-Van Ness resulting from the Cathedral Hill Campus project. The financial contribution shall be calculated and applied in a manner that is consistent with the SFMTA cost/scheduling model. The amount and schedule for payment and commitment to application of service needs has been set forth in the Development Agreement between CPMC and SFMTA.

CURRENT STATUS:

SFMTA has received the entire $6.5 million Transit Fee (Development Agreement, Exhibit K, item 3). Entire sum of Transit Fee will be dedicated to the Van Ness Bus Rapid Transit (Muni Routes 47 and 49), which is under construction and expected to begin revenue service by 2020.

NEXT STEPS:

Complete construction of Van Ness BRT project.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The SFMTA will report through annual compliance report and its Citizens Advisory Council how funds are being applied, starting in 2016.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$6,500,000.00	$6,500,000.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded

ADDITIONAL FUNDS REQUIRED:

None

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**MMRP: Transportation and Circulation**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Mitigation Measure - 3 Jackson	**Exhibit D - MM-TR-137 (Cathedral Hill)**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	10/8/2017	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transportation Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION (Mitigation Measure):

CPMC shall financially compensate the SFMTA for the cost of providing the additional service needed to potentially mitigate the transit delay impacts on the 3-Jackson resulting from the Cathedral Hill Campus project. The financial contribution shall be calculated and applied in a manner that is consistent with the SFMTA cost/scheduling model. The amount and schedule for payment and commitment to application of service needs has been set forth in the Development Agreement between CPMC and SFMTA.

CURRENT STATUS:

SFMTA has received the entire $6.5 million Transit Fee (Development Agreement, Exhibit K, item 3). Entire sum of Transit Fee will be dedicated to the Van Ness Bus Rapid Transit (Muni Routes 47 and 49), which is under construction and expected to begin revenue service by 2020.

NEXT STEPS:

Complete construction of Van Ness BRT project.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The SFMTA will report through annual compliance report and its Citizens Advisory Council how funds are being applied, starting in 2016.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$6,500,000.00	$6,500,000.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

Fully funded

ADDITIONAL FUNDS REQUIRED:

None

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Bicycle Parking**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Bicycle Parking	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

The number and location of bicycle racks shall be monitored annually and increased as necessary to provide a sufficient number of parking spaces for cyclists. Both secure long-term parking as well as short-term parking shall be provided. CPMC shall install bicycle lockers in both new and existing parking garages.

CURRENT STATUS:

Installed a secured badge access only bicycle cage at Pacific and Davies Campus and recently constructed St. Lukes campus. CPMC security and parking attendants continue to monitor all bicycle parking stalls/racks and report and/or investigate any suspicious activity. Bicycle parking supply and demand continues to be monitored.

NEXT STEPS:

Continue to monitor number and location of bicycle racks and determine whether there are a sufficient number of parking spaces for bicycles; increase bicycle parking as necessary. Provide documentation of this monitoring and determination to the SFMTA. Fund.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Design TDM Operations and Maintenance Budget	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall establish a fully funded budget for the TDM program and report the results on an annual basis.

CURRENT STATUS:

TDM budget of $7.6 million established for 2017-18, covering parking, shuttle, transit subsidy, and TDM coordinator/operations.

NEXT STEPS:

Continue to fulfill obligation by maintaining TDM budget and regularly reporting results, as described above.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could report TDM budget and results to community.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Carsharing**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Carsharing	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall allot additional parking spaces to carsharing services in both new and existing buildings based on demand.

CURRENT STATUS:

Zipcar parking and vehicles currently active at Pacific (1 car), California (2 cars), and St. Luke's (1 car) Campuses. In some cases, Zipcar has been reducing availability based on usage patterns..

NEXT STEPS:

CPMC and Zipcar will continue to monitor Zipcar use at campuses and may adjust as appropriate.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could invite members of the community to attend and participate in the Fair.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Carpool and Vanpool Parking**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Carpool and Vanpool Parking	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

The number and location of reserved carpool and vanpool parking shall be monitored annually and increased as necessary to ensure there are a sufficient number of parking spaces for carpools and vanpools based on demand.

CURRENT STATUS:

CPMC has added 1 dedicated vanpool space at California, 4 dedicated carpool spaces at St. Luke's, and 3 dedicated carpool spaces at both Davies and Pacific. Registered carpoolers get free monthly parking in the garage at their worksite. However, there is no dedicated vanpool despite the CPMC support. (Vanpool operating shares are generally considered too expensive by prospective riders.)

NEXT STEPS:

CPMC may be adding 1 dedicated vanpool space at Pacific Campus in near future. Monitor number and location of reserved carpool and vanpool parking spaces and determine whether there are a sufficient number of parking spaces for carpools and vanpools; increase carpool and vanpool parking as necessary. CPMC will encourage carpooling opportunities at the St. Lukes and Cathedral Hill campuses where parking will be limited (especially through transportation fairs). CPMC should provide documentation of this monitoring and determination to the SFMTA.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**Transportation Demand Management Program**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Clipper Card Transit Subsidy	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	8/10/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

TDM Component in the Mid-Term (2-5 years) Transit Subsidy. CPMC shall expand the transit subsidy program to include all campuses and increase the value of the monthly subsidy to be up to the equivalent of the cost of a MUNI Fast Pass, with the employee covering up to 50% of the subsidy.

CURRENT STATUS:

The Transportation Demand Management Plan specifies dates by which pieces of the plan should be in place. As described on page 9 of the TDM Plan, the transit subsidy commitment is a mid-term component to be implemented somewhere between August 10, 2015 and August 10, 2018. As of January 2017, CPMC has instituted a transit subsidy equivalent to 50% of a Muni monthly pass for any Sutter Health employees participating in Sutter Health's WageWorks commute program. Participation has been steadily increasing since January 2017 and stands at approximately 18% as of June 2018. Some employees use public transit, but are ineligible for the subsidy (e.g., due to part-time status).

NEXT STEPS:

CPMC will continue marketing efforts to increase adoption of the transit subsidy, particularly through transportation fairs, and will explore new marketing methods in partnership with SFMTA. SFMTA's TDM specialist will meet CPMC to discuss this and other issues in summer/fall 2018.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
TDM Communication Boards - Campus Cafeterias	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Information on TDM programs, transit schedules and maps, bicycle routes, as well as upcoming events shall be posted on boards and periodically updated in each cafeteria.

CURRENT STATUS:

CPMC has placed communication boards inside their facilities to market elements of the TDM program.

NEXT STEPS:

The SFMTA will continue to monitor implementation progress, meeting CPMC roughly quarterly to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could invite community participation and employee coordination regarding carpooling, rides home, bike trains, and other TDM-related items on the communication boards

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Coordinator**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
TDM Coordinator	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☐
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall retain a full-time experienced TDM coordinator to coordinate, monitor and publicize TDM activities for the campus including the following: Develop an information package of transportation services and benefits offered by CPMC, and participate in employee orientation training; Promote attendance at the Transportation Fair by providing incentives for employees to attend the Fair, such as free transit fast passes; Maintain and update the TDM communication boards; Monitor and update, as appropriate, the TDM Plan; Track participation rates in TDM programs (monthly & annually); Conduct employee travel surveys on an annual basis; Coordinate parking management and the shuttle program; Create a central database of shuttle utilization data; Oversee the rebranded transportation newsletter.

CURRENT STATUS:

New TDM Coordinator hired in 2016.

NEXT STEPS:

TDM Coordinator managing and implementing TDM Program.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00
CPMC'S FUNDING OBLIGATION REMAINING:	
$0.00	
FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:	
ADDITIONAL FUNDS REQUIRED:	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Courtesy Ride Home Program**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Courtesy Ride Home Program	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall increase the boundaries of the program to cover major transit stops within a reasonable distance of each campus and also promote and market the Courtesy Ride Home program.

CURRENT STATUS:

CPMC has been negotiating with Scoop rideshare service since May 2018, whose program includes both carpooling (occasional or scheduled) plus courtesy rides home during extended business hours. CPMC would pay a predetermined rate for employee rides. CPMC Security is offering an limited interim service for in-need employees and patients.

NEXT STEPS:

CPMC should complete negotiations with Scoop or another provider The SFMTA will monitor the program effectiveness and possible changes, meeting with CPMC occasionally to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC may solicit input from employees/community regarding where they would like the program to go.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Increase Marketing of Emergency Ride Home Program	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Increase marketing of the City of San Francisco's Emergency Ride Home program.

CURRENT STATUS:

CPMC already participates in the ERH program. CPMC continues to promote program weekly via posters and communications; ERH posters are posted in all CPMC shuttle vehicles and on selected campus bulletin boards at each campus.

NEXT STEPS:

To continue participation.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

NA

ADDITIONAL FUNDS REQUIRED:

NA

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Enhance TDM Site on Intranet	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall update its employee intranet to emphasize TDM programs as well as provide enrollment forms for commuter checks, shuttle schedules and maps, links to WageWorks, Clipper, BART, MUNI, 511.org, and parking and carsharing information.

CURRENT STATUS:

CPMC currently providing TDM program and transportation information via employee intranet biweekly communications incl. transit subsidy.

NEXT STEPS:

CPMC will update intranet site as necessary. The SFMTA will monitor progress on this measure, meeting occasionally with CPMC.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could invite employee coordination regarding carpooling, rides home, bike trains, and other TDM-related items on the intranet site

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Reinstate Transportation Services Newsletter	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Reintroduce the Parking Services Newsletter and rebrand it as a transportation newsletter that markets the various TDM programs available.

CURRENT STATUS:

Transportation information is provided via employee intranet and biweekly email announcements. This has replaced a paper newsletter.

NEXT STEPS:

The SFMTA will monitor progress on this measure, meeting CPMC occasionally to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

NA

ADDITIONAL FUNDS REQUIRED:

NA

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Design an Outreach Program	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☐
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

An outreach program shall be designed emphasizing the time savings, reduction in greenhouse gas emissions, health benefits, and other positive outcomes of adopting alternative transportation modes.

CURRENT STATUS:

CPMC worked with Sutter Health to design the TDM outreach program including branding and identity. All TDM-related information is being provided via employee intranet. CPMC is conducting transportation fairs and events, which will be increased in frequency.

NEXT STEPS:

CPMC to increase frequency of transportation fairs. SFMTA and CPMC will meet occasionally to discuss details. Provide documentation of outreach program to SFMTA.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could engage the community when designing the outreach program, conduct outreach to the community when program design completed.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	
FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:	
ADDITIONAL FUNDS REQUIRED:	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Parking Pricing**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Parking Pricing	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall evaluate and then increase employee parking prices as needed to achieve the trip and parking reduction goals.

CURRENT STATUS:

CPMC has increased hourly, daily, and monthly parking rates across all campus garages. Hourly rate increase varies; daily rate increased from $30 to $35, and monthly rate increased from $120 to $180. Parking remains free on evenings and weekends. Employees continue to be offered discounted rates.

NEXT STEPS:

SFMTA and CPMC will meet occasionally to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Enhance TDM Information on Public Website	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall review its existing public website and modify it to better publicize alternative transportation options to visitors and patients. The visitor and patient portion of the website shall be updated to provide information on biking to the campus as well as taking BART and Muni.

CURRENT STATUS:

Website under development.

NEXT STEPS:

Fulfill obligation by updating public website as described above. CPMC is developing "How to get to CPMC" page, which will include alternative transportation information regarding BART shuttles, bicycle parking and maps, MUNI, BART, ferries, 511.org, SF Paratransit, and private services. The SFMTA will monitor progress on this measure, meeting with CPMC occasionally.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could publicize transportation information on public engagement, invite comment (via online or in-person surveys) regarding most helpful information and means of display on public website.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00
CPMC'S FUNDING OBLIGATION REMAINING:	
$0.00	
FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:	
ADDITIONAL FUNDS REQUIRED:	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Real Time Transit Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Real Time Transit Information	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall install real-time transit information signs in the lobbies of its existing facilities and shall provide links to real time transit information on the intranet as well as the public website.

CURRENT STATUS:

CPMC Intranet site contains 511 transit information. GPS installed on some shuttles especially those used for BART service, so employees can look on phone app and see real time location and seat availability.

NEXT STEPS:

CPMC shall install real-time transit information signs in the lobbies of its existing facilities. SFMTA and CPMC will meet occasionally to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	
FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:	
ADDITIONAL FUNDS REQUIRED:	

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Rideshare Program**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Rideshare Program	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall create an internal rideshare program (e.g. RideSpring or a 511.org interface). CPMC shall also explore the feasibility of coordinating a rideshare program with other large institutions in order to increase the pool of carpoolers and vanpoolers.

CURRENT STATUS:

Approximately 32 active carpool vehicles across CPMC system. CPMC has been negotiating with Scoop onlin rideshare service since May 2018, whose program includes both carpooling (occasional or scheduled) plus courtesy rides home during extended business hours.

NEXT STEPS:

CPMC should complete negotiations with Scoop rideshare service. Carpooling will be promoted at transportation fairs and outreach materials. New campuses with limited parking should provide opportunities to increase carpooling. The SFMTA and CPMC will meet occasionally to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Shower Facilities**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Shower Facilities	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Shower and changing facilities shall be included in all new buildings and facilities for employees who bike or walk to work.

CURRENT STATUS:

Shower and changing facilities for employees who bike or walk to work are included in the design of the new buildings and facilities under construction for Cathedral Hill and St. Luke's.

NEXT STEPS:

Shower and changing facilities for employees who bike or walk to work should be included in the design of future buildings and facilities.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Outreach, Marketing, and Information**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Reinstate and Expand Annual Transportation Fair	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

The Fair shall include representatives from local and regional transportation agencies, the Bicycle Coalition, 511.org, and carshare companies, and provide information about transit, ridesharing and bicycling.

CURRENT STATUS:

Transportation fairs held each year on each campus.

NEXT STEPS:

CPMC plans to increase the number of transportation fairs in the current year to 12 (3 fairs per campus). Besides a main fair for each campus with transportation providers making presentations, there will be a couple of fairs focused more on shuttle/parking issues. The SFMTA will monitor progress on this measure, meeting with CPMC occasionally.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could invite members of the community to attend and participate in the Fair.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Transportation Surveys**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Transportation Surveys	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2018	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Approved Develop. Monitoring Mgr.		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall conduct an employee transportation survey at all campuses, which will be used to establish a more current baseline commute mode split. CPMC shall achieve a minimum of 30% response rate at each campus. Furthermore, a patient/visitor transportation survey shall be collected from at least 200 patients and visitors at each campus to establish a baseline visitor mode split. The commuter survey shall be conducted annually, and the visitor survey shall be conducted every three years. The survey will be used to establish whether Cathedral Hill campus is meeting mode share goals after occupancy, with $75,000 payment if not met.

CURRENT STATUS:

CPMC conducted commute surveys in 2015-2018. The 2018 survey results will be tabulated and available by fall 2018.

NEXT STEPS:

CPMC will complete 2018 employee commute survey by December 2018. In spring/summer 2019 CPMC will do an early survey of the Cathedral Hill campus soon after its opening.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC'S FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Vanpool Program**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Vanpool Program	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall reinstate their vanpool program which included a $2,500 subsidy per year. CPMC shall aggressively market the vanpool program to employees via the monthly newsletter, website, and other appropriate channels.

CURRENT STATUS:

CPMC vanpool subsidy is currently available, but the program does not have any active participants yet. CPMC believes that vanpool fares are often not competitive with alternatives. The program will be aggressively marketed at the next transportation fair.

NEXT STEPS:

Continue to market and provide personalized vanpooling assistance to all employees interested in sharing the ride. SFMTA will monitor implementation of this measure, and SFMTA and CPMC will meet roughly quarterly to discuss details.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00

CPMC's FUNDING OBLIGATION REMAINING:

$0.00

FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:

ADDITIONAL FUNDS REQUIRED:

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**TDM: Wayfinding & Signage**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
Wayfinding and Signage	**Exhibit K § 5; TDMP Page 7-9**

LEAD DEPARTMENT:	SFMTA	**COMPLETION DATE:**	3/31/2015	
STAFF CONTACT NAME:	Frank Markowitz	**OBLIGATION STATUS:**	COMPLETE	☐
STAFF CONTACT TITLE:	Senior Transp. Planner		IN PROGRESS	☑
EMAIL:	Frank.Markowitz@sfmta.com		IN COMPLIANCE	☑
PHONE:	(415) 701-4442		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

CPMC shall provide on-site signage for patients and visitors identifying the locations of bicycle parking, vehicular parking, and shuttle stops as well as full shuttle schedules with maps in the lobby of each hospital.

CURRENT STATUS:

Signage installed for vehicle parking. Signage installed at Pacific Campus shuttle stops. Shuttle maps and schedules posted in hospital lobbies.

NEXT STEPS:

Future secured bicycle parking to be installed at campuses with requisite signage. Campuses under construction to be fully outfitted with shuttle maps and schedules, parking signage, bike signage, and real-time transit information. This information will be integrated into a smart phone app.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

The TDM Plan was briefly presented to the SFMTA Citizens Advisory Council on August 7, 2014 as part of a larger outreach effort covering all the transportation commitments in the Development Agreement. CPMC could solicit community input on sign designs and present options and final designs to SFMTA Citizens Advisory Council.

CPMC'S FULL FUNDING AMOUNT:	FUNDING RECEIVED FROM CPMC TO DATE:
$0.00	$0.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	
FULLY OR PARTIALLY FUNDED; IF PARTIALLY, LIST OTHER APPLICABLE SOURCES:	
ADDITIONAL FUNDS REQUIRED:	

OTHER OBLIGATIONS

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**San Jose Ave**

DEVELOPMENT AGREEMENT OBLIGATION:	DEVELOPMENT AGREEMENT SECTION:
San Jose Avenue City Project	**§ 3.3**

LEAD DEPARTMENT:	San Francisco Public Works	**COMPLETION DATE:**	1/29/2014	
STAFF CONTACT NAME:	Patrick Rivera	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Division Manager, Infrastructure Design & Construction		IN PROGRESS	☐
EMAIL:	patrick.rivera@sfdpw.org		IN COMPLIANCE	☑
PHONE:	(415) 554-8221		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

Completion of San Jose Avenue City Project. The failure to complete the San Jose Avenue City Project in accordance with the timing set forth in the Schedule and Phasing Plan may entitle CPMC to a period of Excusable Delay in connection with the Hospital Commitment as set forth in Section 10.6.2.

CURRENT STATUS:

Projects 1201J Cesar Chavez Street Sewer Improvement Project and 1068J Cesar Chavez Streetscape Improvements - 101 To Guerrero are complete. The pedestrian enhancements include three dozen bulb-outs that widen the sidewalk at intersections to shorten the crossing distance; widened medians where people can wait safely to cross the street if they can't make it in one traffic-signal cycle; and raised crosswalks at two intersections to increase driver awareness.

Other upgrades include new bike lanes, left-turn pockets for motorists, new and rehabilitated sewers and new paving along the entire stretch to make the ride safer and smoother for all users. Traffic lanes were reduced from three in each direction to two.

In addition, several environmentally smart design elements were incorporated. Among them: storm-water planters and pervious pavement to allow rainwater to percolate through the ground to put less burden on the sewer system; and 302 new street trees and 7,600 plants along the median and the sidewalks. In all, 38,620 sq. ft. of concrete and asphalt were converted to green space. Streetlights along the corridor also were upgraded to LED for energy efficiency.

NEXT STEPS:

None.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

N/A

CPMC CITY AGENCY COMPLIANCE REPORT	
SUBJECT:	**San Jose Ave Project**

DEVELOPMENT AGREEMENT OBLIGATION:	**DEVELOPMENT AGREEMENT SECTION:**
Vacation and Transfer of San Jose Ave to CPMC	**§ 3.2**

LEAD DEPARTMENT:	Real Estate Division	**COMPLETION DATE:**	10/29/2014	
STAFF CONTACT NAME:	John Updike	**OBLIGATION STATUS:**	COMPLETE	☑
STAFF CONTACT TITLE:	Director		IN PROGRESS	☐
EMAIL:	john.updike@sfgov.org		IN COMPLIANCE	☑
PHONE:	(415) 554-9850		NOT IN COMPLIANCE	☐

DESCRIPTION OF OBLIGATION:

In connection with the Project, the City shall vacate and abandon all public rights in the Former Street Property..., each in connection with the completion of the San Jose Avenue CPMC Project and the San Jose Avenue City Project. The City shall transfer the Former Street Property to CPMC in accordance with the San Jose Avenue Transfer Agreement...

CURRENT STATUS:

The land transfer has been completed.

NEXT STEPS:

None.

OPPORTUNITIES FOR COMMUNITY ENGAGEMENT:

N/A

CPMC'S FULL FUNDING AMOUNT:	**FUNDING RECEIVED FROM CPMC TO DATE:**
$1,010,000.00	$1,010,000.00
CPMC's FUNDING OBLIGATION REMAINING:	
$0.00	

EXHIBIT A

Coblentz
Patch Duffy
& Bass LLP

One Ferry Building, Suite 200
San Francisco, CA 94111-4213
415 391 4800
coblentzlaw.com

November 19, 2013

John Rahaim
Director of Planning
San Francisco Planning Department
1650 Mission Street
San Francisco, CA 94103

Re: Confirmation of "Effective Date" and "Finally Granted" Date as Defined in the California Pacific Medical Center Development Agreement

Dear Mr. Rahaim:

We are submitting this letter on behalf of our client, Sutter West Bay Hospitals, doing business as California Pacific Medical Center ("CPMC"), to confirm and memorialize the "Effective Date" and the date upon which the Approvals were "Finally Granted", as those terms are defined in the Development Agreement Relating to the Construction and Reconstruction of Healthcare Facilities in Furtherance of the California Pacific Medical Center Long Range Development Plan by and between the City and County of San Francisco and Sutter West Bay Hospitals dated August 8, 2013, and recorded in the Official Records of the City and County of San Francisco on August 12, 2013, as Instrument No. 2013J728647 (the "DA").

For purposes of the DA, the parties agree that the "Effective Date", as defined in Section 2.1 of the DA, is August 10, 2013, and the date upon which the Approvals were "Finally Granted", as defined in Section 1.55 of the DA, is November 8, 2013.

Please countersign below to confirm the City's concurrence that the "Effective Date" and "Finally Granted" date are the dates stated above.

Very truly yours,

Joshua R. Steinhauer

cc: Ken Rich
Charles Sullivan
Audrey Pearson

05235.020 2634429v6

AGREED AND ACCEPTED:
CITY AND COUNTY OF SAN FRANCISCO

By: _____
John Rahaim

Its: Director of Planning

Dated: 11.22.13

EXHIBIT B

Workforce Fund Grant Agreement

This Workforce Fund Grant Agreement ("**Workforce Fund Agreement**") is entered into between Sutter West Bay Hospitals, a California nonprofit public benefit corporation, doing business as California Pacific Medical Center ("**CPMC**") and San Francisco Foundation ("**Grantee**"), and is further agreed to and accepted by the City and County of San Francisco. Capitalized terms have the meaning set forth in paragraph 1 or as otherwise indicated in this Workforce Fund Agreement.

1. Definitions.

(a) Allowable Costs: The costs of Grantee allocable to the Workforce Fund, as set forth in paragraph 9.

(b) City: The City and County of San Francisco, California, a municipal corporation organized and existing under the laws of the State of California.

(c) Committee: The committee of fund advisers described in paragraph 5 of this Workforce Fund Agreement.

(d) Workforce Fund: The amount contributed by CPMC pursuant to paragraph 3.

(e) Workforce Fund Balance: The amount equal to the Workforce Fund adjusted to reflect (i) increases by investment earnings, and (ii) decreases by investment losses, disbursements to recipients pursuant to this Workforce Fund Agreement ("**Disbursements**"), and Allowable Costs.

(f) Development Agreement: That certain Development Agreement Relating to the Construction and Reconstruction of Health Facilities in Furtherance of the California Pacific Medical Center Long Range Development Plan By and Between the City and Sutter West Bay Hospitals dated August 8, 2013.

(g) Workforce Projects: The Workforce Projects as described in the Workforce Agreement, Exhibit E to the Development Agreement.

2. Purpose. The contributions made to Grantee pursuant to this Workforce Fund Agreement shall be used as a designated fund for workforce training purposes and such funds shall be targeted to educational institutions and non-profit organizations with an existing track record of working in the impacted communities (such as Western Addition, Tenderloin, Mission/SOMA, Outer Mission/Excelsior, Chinatown and Southeastern neighborhoods) and in providing barrier removal and job training for the employment opportunities created by the Project in accordance with the terms set forth in this Workforce Fund Agreement.

3. Workforce Fund. Subject to the conditions set forth below and provided that the Development Agreement has not previously been terminated, CPMC shall contribute to the Grantee the total amount of Three Million Dollars ($3,000,000) in installments to be held as a

designated fund by Grantee. The Workforce Fund contributions shall be made as follows: Two Million Dollars ($2,000,000) within thirty (30) days of the earlier of the date Approvals are Finally Granted or the date the Cathedral Hill Hospital Commences Construction, both as defined in the Development Agreement, and the remainder on the first anniversary of the first payment, in accordance with Exhibit N (Payment Schedule) to the Development Agreement. Notwithstanding the foregoing, nothing in this Workforce Fund Agreement shall be construed as a binding pledge to Grantee enforceable by Grantee.

4. Investment Instructions. The Workforce Fund and Workforce Fund Balance shall be invested with a five (5) year horizon for Disbursements as described in paragraph 6(b). Grantee shall exercise final control of the investment of the Workforce Fund Balance pursuant to Grantee's investment policy and the provisions of this paragraph 4.

5. Committee of Fund Advisors.

(a) There shall be a committee of Workforce Fund advisors (the "**Committee**"). The Committee shall consist of three members: (i) one representative of OEWD on behalf of the City, (ii) one representative of CPMC, and (iii) one representative of Grantee. The Committee shall have the duties specified in this Workforce Fund Agreement and shall provide advice regarding the Disbursements to be made from the Workforce Fund, including the rate, schedule and allocation of Disbursements and the terms, goals and purposes thereof, without liability of any kind or character to any person on account of such advice. Every effort will be made to reach a consensus on any such advice from the members of the Committee. If a consensus is not reached, the City and CPMC shall, through the Committee, provide a single report to Grantee conveying their views, and Grantee shall have the authority to make final Disbursement decisions after considering such report. Subject to the foregoing right of the Committee to provide advice regarding Disbursements, Grantee shall exercise final control of the Disbursement of the Workforce Fund Balance pursuant to the terms of this Workforce Fund Agreement. Except where in this Workforce Fund Agreement notice is specified to be provided by a specific party, Grantee may rely on a written instruction or notice from City or CPMC, as members of the Committee, and shall have no obligation to investigate whether any such written instruction or notice is agreed to by any other member of the Committee, or is consistent with the obligations of CPMC or the City to any party other than Grantee. All Disbursements must be approved by the Board of Trustees of the San Francisco Foundation.

(b) Each year, no later than ninety (90) days after the close of Grantee's annual accounting period, Grantee shall prepare and provide to each member of the Committee, a written accounting of the Workforce Fund Balance, principal and earnings of the Workforce Fund for the preceding year, and Workforce Fund Disbursements.

(c) Grantee shall maintain records as part of its accounting system to account for all Disbursements, costs and expenses for a period of not less than four (4) years following the date of such Disbursements, costs or other expenditures, and annually make records available to City and CPMC as provided herein and upon request.

6. Annual Disbursements.

(a) Grantee shall annually distribute a portion of the Designated Fund Balance to third-party educational institutions and non-profit recipients and others through a grant application process approved by the Committee, in an amount and for such purposes as are consistent with the purposes of the Workforce Fund as described herein.

(b) The annual grant Disbursements shall be scheduled and allocated in such manner so as to maintain sufficient Workforce Fund Balance so that Disbursements may be provided for five (5) years. The first Disbursements shall be made within one (1) year of the first contribution to the Workforce Fund, as determined by the Committee and Grantee as provided above.

(c) Grantee shall confer with the Committee and obtain Disbursement advice from CPMC and City through the Committee prior to making a Disbursement commitment in accordance with Section 5(a) above. Grantee shall impose restrictions and/or conditions on grant Disbursements as necessary to ensure accountability for use of funds and to monitor effectiveness.

(d) City and CPMC shall have no right to challenge the appropriateness or the amount of any Disbursement provided it is consistent with the procedures and purposes identified herein.

7. Initial Program Goals and Allocation. In implementation of the program purposes described in Section 2 above, the Committee shall consult with third-party subject matter experts, in workforce training delivery, as necessary, to evaluate the feasibility, cost-effectiveness, and sustainability of grant proposals. The program purposes and allocations may be adjusted as determined in accordance with Section 5 above.

8. Termination of This Workforce Fund Agreement.

(a) Termination by Grantee. If at any time Grantee (i) fails to qualify as an organization described in Internal Revenue Code Section 501(c)(3), (ii) ceases to exist, or (iii) determines, in its sole judgment, that any restriction or condition in this Workforce Fund Agreement has become unnecessary, incapable of fulfillment, or inconsistent with the charitable needs of the community served, then Grantee shall provide notice to CPMC and City and then transfer the entire Workforce Fund Balance within forty-five (45) days to a successor nonprofit charitable trust, fund, foundation or corporation which has established its tax-exempt status under Internal Revenue Code Section 501(c)(3) and that meets with the approval of CPMC and City.

(b) Termination of Development Agreement. CPMC or City shall notify Grantee no later than ten (10) days after any termination of the Development Agreement between CPMC and City prior to the expiration of its Term. In such event, CPMC shall cease to be a member of the advising Committee, and Grantee shall continue to administer the Workforce Fund Balance in accordance with this Agreement.

9. Allowable Costs. The costs of establishing the Workforce Fund, investment expenses, management fees for professional managers and advisors (whether the Workforce Fund Balance is separately managed or co-mingled with an endowment pool containing other funds) plus 7% for overhead costs of Grantee, shall be charged against the Workforce Fund. If co-mingled, the Workforce Fund Balance shall bear not more than its proportionate share of the fees and costs.

10. Notice.

(a) Procedure. All formal notices to a party shall be in writing and given by delivering the same to such party in person or by sending the same by registered or certified mail, or Express Mail, return receipt requested, with postage prepaid, or by overnight courier delivery, to such party's mailing address. The respective mailing addresses of the parties are, until changed as hereinafter provided, the following:

GRANTOR:

Grant Davies
Executive Vice President
California Pacific Medical Center
2351 Clay Street, 7th Floor
San Francisco, CA 94115

with a copy to:

Michael Duncheon
VP & Regional Counsel
West Bay Region Office of the General Counsel
Sutter Health
633 Folsom Street, Seventh Floor
San Francisco, CA 94107

GRANTEE:

San Francisco Foundation
1 Embarcadero Center, Suite 1400
San Francisco, CA 94111
Attention: James W. Head

CITY:

Director
Office of Economic and Workforce Development
Workforce Development Division
One South Van Ness Avenue, Fifth Floor
San Francisco, CA 94102

(b) Notices and communications to members of the Committee shall be given in the manner provided herein at the addresses above, unless otherwise provided by each such member.

(c) Notices and communications with respect to technical matters in the routine performance and administration of this Workforce Fund Agreement shall be given by or to the appropriate representative of a party by such means as may be appropriate to ensure adequate communication of the information, including written confirmation of such communication where necessary or appropriate. All formal notices under this Workforce Fund Agreement shall be deemed given, received, made or communicated on the date personal delivery is effected or, if mailed or sent by courier, on the delivery date or attempted delivery date shown on the return receipt or courier records. Any notice which a party desires to be a formal notice hereunder and binding as such on the other party must be given in writing and served in accordance with this paragraph.

(d) Change of Notice Address. A party or member of the Committee may change its, his or her mailing address at any time by giving formal written notice of such change to the other party (or both parties in the case of a member of the Committee) and each member of the Committee in the manner provided in this paragraph at least ten (10) days prior to the date such change is effected.

11. Obligations of Grantee.

(a) In addition to any other reports or notices required by this Workforce Fund Agreement, and until otherwise notified by CPMC or City that the requirement has or will be satisfied by the accounting provided pursuant to Section 5(b) above, Grantee shall submit to CPMC and City full and complete annual reports on the manner in which the principal and income (if any) arising from the Workforce Fund Balance have been allocated or Disbursed, and such annual reports shall be due no later than ninety (90) days after the close of Grantee's annual accounting period.

(b) Grantee shall maintain records of receipts and expenditures and shall make its books and records relating to this Workforce Fund available to CPMC and City at reasonable times.

(c) Grantee shall not use any portion or proceeds from the Workforce Fund:

(1) to carry on propaganda, or otherwise to attempt to influence legislation (within the meaning of Internal Revenue Code Section 4945(d)(1)),

(2) to influence the outcome of any specific public election of any candidate for public office, or to carry on, directly or indirectly, any voter registration drive (within the meaning of Internal Revenue Code Section 4945(d)(2)),

(3) to make any grant to an individual or to another organization unless such grant shall be specifically described in paragraph 6, 7 or 8 hereof,

(4) to undertake any activity for any purpose other than one specified in Internal Revenue Code Section 170(c)(2)(B).

(d) Grantee shall notify CPMC and City of any organizational changes during the term of the grant, including, but not limited to, any changes in the office of President or CEO and Treasurer or CFO, changes in the Grantee's tax-exempt status, and any event that is a disqualification event described in Section 8(a).

12. Miscellaneous. This Workforce Fund Agreement shall be governed by and construed in accordance with the laws of the State of California applicable to contracts entered into between California residents and wholly to be performed in California. This Workforce Fund Agreement constitutes the entire agreement between the parties and supersedes any prior agreements between the parties. This Workforce Fund Agreement may not be modified, and no provision waived, without the prior written consent of the party against whom enforcement of the amendment or waiver is sought.

13. Time. Time is of the essence of this Workforce Fund Agreement and of each and every term and condition hereof. "Days" shall mean calendar days. In the event that any period of time to perform an obligation or notice period under this Workforce Fund Agreement ends on a Saturday, Sunday or state or national holiday, the applicable time period shall be extended to the next business day.

IN WITNESS WHEREOF, the undersigned have executed this Workforce Fund Agreement on the dates indicated.

CPMC

Sutter West Bay Hospitals,
a California nonprofit public benefit
corporation, dba CPMC

By: _____

Its: President

Dated: 10/9/13

GRANTEE

San Francisco Foundation,
a California nonprofit public benefit
corporation

By: _____

Its: CFO

Dated: 10.14.13

APPROVED AS TO FORM:

DENNIS J. HERRERA,
City Attorney

By: _____
Deputy City Attorney
City and County of San Francisco

AGREED AND ACCEPTED:

CITY AND COUNTY OF SAN FRANCISCO

By: Rhonda K Jones

Its: DIRECTOR OF WORKFORCE DEVELOPMENT

Dated: October 10th, 2017

EXHIBIT C

Innovation Fund Grant Agreement

This Innovation Fund Grant Agreement ("**Innovation Fund Agreement**") is entered into between Sutter West Bay Hospitals, a California nonprofit public benefit corporation, doing business as California Pacific Medical Center ("**CPMC**") and [San Francisco Foundation] ("**Grantee**"), and is further agreed to and accepted by the City and County of San Francisco. Capitalized terms have the meaning set forth in paragraph 1 or as otherwise indicated in this Innovation Fund Agreement.

1. Definitions.

(a) Allowable Costs: The costs of Grantee allocable to the Innovation Fund, as set forth in paragraph 9.

(b) City: The City and County of San Francisco, California, a municipal corporation organized and existing under the laws of the State of California.

(c) Committee: The committee of fund advisers described in paragraph 5 of this Innovation Fund Agreement.

(d) Innovation Fund: The amount contributed by CPMC pursuant to paragraph 3.

(e) Innovation Fund Balance: The amount equal to the Innovation Fund adjusted to reflect (i) increases by investment earnings, and (ii) decreases by investment losses, disbursements to healthcare providers pursuant to this Innovation Fund Agreement ("**Disbursements**"), and Allowable Costs.

(f) Development Agreement: That certain Development Agreement Relating to the Construction and Reconstruction of Health Facilities in Furtherance of the California Pacific Medical Center Long Range Development Plan By and Between the City and Sutter West Bay Hospitals dated August 8, 2013.

(g) Project: The CPMC project as contemplated by the CPMC Long Range Development Plan and as generally described in Exhibits B-1 to B-5 of the Development Agreement.

2. Purpose. The contributions made to Grantee pursuant to this Innovation Fund Agreement shall be used as a designated fund to enhance the performance and improve the sustainability of community based service providers in the City, in accordance with the terms set forth in this Innovation Fund Agreement.

3. Innovation Fund. Subject to the conditions set forth below and provided that the Development Agreement has not previously been terminated, CPMC shall contribute to the

Grantee the total amount of Eight Million Six Hundred Thousand Dollars ($8,600,000) in installments to be held as a designated fund by Grantee. The Innovation Fund contributions shall be made as follows: Two Million Dollars ($2,000,000), within thirty (30) days of the Effective Date, as defined in the Development Agreement, and the remainder in accordance with Exhibit N (Payment Schedule) to the Development Agreement. Notwithstanding the foregoing, nothing in this Innovation Fund Agreement shall be construed as a binding pledge to Grantee enforceable by Grantee.

4. Investment Instructions. The Innovation Fund and Innovation Fund Balance shall be invested with a five (5) year horizon for Disbursements as described in paragraph 6(b). Grantee shall exercise final control of the investment of the Innovation Fund Balance pursuant to Grantee's investment policy and the provisions of this paragraph 4.

5. Committee of Fund Advisors.

(a) There shall be a committee of Innovation Fund advisors (the "**Committee**"). The Committee shall consist of three members: (i) one representative of the City, (ii) one representative of CPMC, and (iii) one representative of Grantee. The Committee shall have the duties specified in this Innovation Fund Agreement and shall provide to the Grantee advice regarding the Disbursements to be made from the Innovation Fund, including the rate, schedule and allocation of Disbursements and the terms, goals and purposes thereof, without liability of any kind or character to any person on account of such advice. Every effort will be made to reach a consensus on any such advice from the members of the Committee and Grantee. If a consensus is not reached, the City and CPMC shall, through the Committee, nevertheless provide a single report to the Grantee conveying the view of each of the Committee members, and Grantee shall have the authority to make final Disbursement decisions after considering such report. Subject to the foregoing right of the Committee to provide advice regarding Disbursements, Grantee shall exercise final control of the Disbursement of the Innovation Fund Balance pursuant to the terms of this Innovation Fund Agreement. Except where in this Innovation Fund Agreement notice is specified to be provided by a specific party, Grantee may rely on a written notice from City or CPMC, as members of the Committee, and shall have no obligation to investigate whether any such written instruction or notice is agreed to by any other member of the Committee, or is consistent with the obligations of CPMC or the City to any party other than Grantee. All Disbursements must be approved by the Board of Trustees of the San Francisco Foundation.

(b) Each year, no later than ninety (90) days after the close of Grantee's annual accounting period, Grantee shall prepare and provide to each member of the Committee, a written accounting of the Innovation Fund Balance, principal and earnings of the Innovation Fund for the preceding year, and Innovation Fund Disbursements.

(c) Grantee shall maintain records as part of its accounting system to account for all Disbursements, costs and expenses for a period of not less than four (4) years following

the date of such Disbursements, costs or other expenditures, and annually make records available to City and CPMC as provided herein and upon request.

6. Annual Disbursements.

(a) Grantee shall annually distribute a portion of the Designated Fund Balance to third-party health care providers/recipients and others through a grant application process approved by the Committee, in an amount and for such purposes as are consistent with the purposes of the Innovation Fund as described herein.

(b) The annual grant Disbursements shall be scheduled and allocated in such manner so as to maintain sufficient Innovation Fund Balance so that Disbursements may be provided for five (5) years. The first Disbursements shall be made within one (1) year of the contribution of the Innovation Fund, as determined by the Committee and Grantee as provided above.

(c) Grantee shall confer with the Committee and obtain Disbursement advice from CPMC and City through the Committee prior to making a Disbursement commitment in accordance with Section 5(a) above. Grantee shall impose restrictions and/or conditions on grant Disbursements as necessary to ensure accountability for use of funds and to monitor effectiveness.

(d) City and CPMC shall have no right to challenge the appropriateness or the amount of any Disbursement provided it is consistent with the procedures and purposes identified herein.

7. Initial Program Goals and Allocation. The initial program goals and Innovation Fund allocation guidelines for Disbursements are as follows:

(a) Support and improve the capacity of community clinics to increase their participation in managed Medi-Cal programs, including, but not exclusive to, the creation of a new MSO or expansion of current MSOs, development of care management capabilities, implementation and integration of evidence-based chronic disease management and team-based care models, investment in electronic medical records, participation in the San Francisco Health Information Exchange and developing organizational partnerships between CPMC and existing community clinics, and support for provision of specialty medical services;

(b) Support community-based health, human service and behavioral health service providers, with a specific focus on Tenderloin, Mission, Western Addition, South of Market, Bayview and Chinatown neighborhoods, including providers of community-based alternatives to inpatient psychiatric care that allows patients to receive services in the most appropriate and least restrictive setting and reduce unnecessary hospitalizations.

In implementation of the program goals related to MSOs, the Committee will consult with third-party subject matter experts, in health care delivery in a managed care environment, as necessary, to evaluate the feasibility, cost-effectiveness, and sustainability of grant proposals; and

These initial program goals and allocation guidelines are subject to change as determined in accordance with Section 5 above.

8. Termination of This Innovation Fund Agreement.

(a) Termination by Grantee. If at any time Grantee (i) fails to qualify as an organization described in Internal Revenue Code Section 501(c)(3), (ii) ceases to exist, or (iii) determines, in its sole judgment, that any restriction or condition in this Innovation Fund Agreement has become unnecessary, incapable of fulfillment, or inconsistent with the charitable needs of the community served, then Grantee shall provide notice to CPMC and City and then transfer the entire Innovation Fund Balance within forty-five (45) days to a successor nonprofit charitable trust, fund, foundation or corporation which has established its tax-exempt status under Internal Revenue Code Section 501(c)(3) and that meets with the approval of CPMC and City.

(b) Termination of Development Agreement. CPMC or City shall notify Grantee no later than ten (10) days after any termination of the Development Agreement between CPMC and City prior to the expiration of its Term. In such event, CPMC shall cease to be a member of the advising Committee, and Grantee shall continue to administer the Innovation Fund Balance in accordance with this Agreement.

9. Allowable Costs. The costs of establishing the Innovation Fund, investment expenses, management fees for professional managers and advisors (whether the Innovation Fund Balance is separately managed or co-mingled with an endowment pool containing other funds) plus 7% for overhead costs of Grantee, shall be charged against the Innovation Fund. If co-mingled, the Innovation Fund Balance shall bear not more than its proportionate share of the fees and costs.

10. Notice.

(a) Procedure. All formal notices to a party shall be in writing and given by delivering the same to such party in person or by sending the same by registered or certified mail, or Express Mail, return receipt requested, with postage prepaid, or by overnight courier delivery, to such party's mailing address. The respective mailing addresses of the parties are, until changed as hereinafter provided, the following:

GRANTOR:

Grant Davies
Executive Vice President
California Pacific Medical Center
2351 Clay Street, 7th Floor
San Francisco, CA 94115

with a copy to:

Michael Duncheon
VP & Regional Counsel
West Bay Region Office of the General Counsel
Sutter Health
633 Folsom Street, Seventh Floor
San Francisco, CA 94107

GRANTEE:

San Francisco Foundation
1 Embarcadero Center, Suite 1400
San Francisco, CA 94111
Attention: James W. Head

CITY:

DPH Director
101 Grove Street
San Francisco, CA 94102-4593

(b) Notices and communications to members of the Committee shall be given in the manner provided herein at the addresses above, unless otherwise provided by each such member.

(c) Notices and communications with respect to technical matters in the routine performance and administration of this Innovation Fund Agreement shall be given by or to the appropriate representative of a party by such means as may be appropriate to ensure adequate communication of the information, including written confirmation of such communication where necessary or appropriate. All formal notices under this Innovation Fund Agreement shall be deemed given, received, made or communicated on the date personal delivery is effected or, if mailed or sent by courier, on the delivery date or attempted delivery date shown on the return receipt or courier records. Any notice which a party desires to be a

formal notice hereunder and binding as such on the other party must be given in writing and served in accordance with this paragraph.

(d) Change of Notice Address. A party or member of the Committee may change its, his or her mailing address at any time by giving formal written notice of such change to the other party (or both parties in the case of a member of the Committee) and each member of the Committee in the manner provided in this paragraph at least ten (10) days prior to the date such change is effected.

11. Obligations of Grantee.

(a) In addition to any other reports or notices required by this Innovation Fund Agreement, and until otherwise notified by CPMC or City that the requirement has or will be satisfied by the accounting provided pursuant to Section 5(b) above, Grantee shall submit to CPMC and City full and complete annual reports on the manner in which the principal and income (if any) arising from the Innovation Fund Balance have been allocated or Disbursed, and such annual reports shall be due no later than ninety (90) days after the close of Grantee's annual accounting period.

(b) Grantee shall maintain records of receipts and expenditures and shall make its books and records relating to this Innovation Fund available to CPMC and City at reasonable times.

(c) Grantee shall not use any portion or proceeds from the Innovation Fund:

(1) to carry on propaganda, or otherwise to attempt to influence legislation (within the meaning of Internal Revenue Code Section 4945(d)(1)),

(2) to influence the outcome of any specific public election of any candidate for public office, or to carry on, directly or indirectly, any voter registration drive (within the meaning of Internal Revenue Code Section 4945(d)(2)),

(3) to make any grant to an individual or to another organization unless such grant shall be specifically described in paragraph 6, 7 or 8 hereof,

(4) to undertake any activity for any purpose other than one specified in Internal Revenue Code Section 170(c)(2)(B).

(d) Grantee shall notify CPMC and City of any organizational changes during the term of the grant, including, but not limited to, any changes in the office of President or CEO and Treasurer or CFO, changes in the Grantee's tax-exempt status, and any event that is a disqualification event described in Section 8(a).

12. Miscellaneous. This Innovation Fund Agreement shall be governed by and construed in accordance with the laws of the State of California applicable to contracts entered into between California residents and wholly to be performed in California. This Innovation Fund Agreement constitutes the entire agreement between the parties and supersedes any prior agreements between the parties. This Innovation Fund Agreement may not be modified, and no provision waived, without the prior written consent of the party against whom enforcement of the amendment or waiver is sought.

13. Time. Time is of the essence of this Innovation Fund Agreement and of each and every term and condition hereof. "Days" shall mean calendar days. In the event that any period of time to perform an obligation or notice period under this Innovation Fund Agreement ends on a Saturday, Sunday or state or national holiday, the applicable time period shall be extended to the next business day.

IN WITNESS WHEREOF, the undersigned have executed this Innovation Fund Agreement on the dates indicated.

CPMC

Sutter West Bay Hospitals,
a California nonprofit public benefit
corporation, dba CPMC

By: _____

Its: President

Dated: August 7, 2013

GRANTEE

San Francisco Foundation,
a California nonprofit public benefit
corporation

By: _____

Its: CFO

Dated: 8/30/13

APPROVED AS TO FORM:

DENNIS J. HERRERA,
City Attorney

By: _____
Deputy City Attorney
City and County of San Francisco

AGREED AND ACCEPTED:

CITY AND COUNTY OF SAN FRANCISCO

By: _____

Its: Director of Public Health

Dated: 8/8/17

EXHIBIT D

Section 10: Culturally and Linguistically Appropriate Services

CPMC shall deliver at all campuses culturally and linguistically appropriate services that are representative of San Francisco's diverse communities and are in accordance with the mandates, guidelines and recommendations of the National Standards on Culturally and Linguistically Appropriate Services (CLAS).

CLAS Standards

Principal Standard:		Reference	Internal Monitoring/Metric(s)
1. Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.	Multilingual health literacy sensitive patient educational materials made available in print and online. Our CME courses include the cultural and linguistic issues as appropriate.	Guideline: address culturally competent care	Regular audits of all patient education materials for consistency, currency and appropriate language translations. Corrections made as needed. Each CME offering has documentation of cultural and linguistic component.
Governance, Leadership and Workforce:			
2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.	Senior leadership roles support and promote CLAS through policies, practices and allocated resources.	Guideline: address culturally competent care	Administrative polices are updated/reviewed every three years and monitored by the Policy & Procedure Committee.
3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.	CPMC is actively engaged in promoting workforce recruitment of population in the service area. Employees are required to participate in online education to remain responsive to our patient as well as service area population.	Guideline: address culturally competent care	1. Language capacity of staff and voluntary equal employment opportunity metrics collected and tracked through HR system. 2. CPMC engages in affirmative action planning and metrics are tracked annually. 3. HR works with specific departments to recruit and hire staff based on the cultural and linguistic needs of patients. Relevant data is pulled and analyzed from HR and patient care systems to inform these efforts.
4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.	Sutter Health maintains online resources and communications on cultural & linguistic competency. Annual training is given to all Sutter employees to ensure knowledge/adoption of the components of organizational cultural competency, and why it is important to our patients, staff and organization. Additionally, CPMC Certified Interpreters will, on request, provide education/information on cultural beliefs and practices to further personalized care.	Title VI; mandated for agencies that receive federal funding	Completion of annual mandatory training for all employees is tracked and reported to managers; percentage of completed trainings are monitored.
Communication and Language Assistance:			
5. Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.	The Medical Center provides interpreter services at no cost to patients with Limited English Proficiency (LEP) or who are deaf or hard-of-hearing, in order to enhance effective communication and ensure access to health care information and services in accordance with Federal, State and Local regulations.	Title VI; mandated for agencies that receive federal funding	1.Number of activities on interpreting by language groups & interpreting modalities (in person, telephonic, remote video). 2. LEP census by campus. 3. Accuracy of LEP needs in the Sutter Electronic Health Record. 4. Daily activities of on-site language interpreters taking non pre-scheduled requests
6. Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.	Individuals are informed regarding availability of language assistance services in their preferred language verbally as needed and in print. Print notices include those with our top 4 common languages(Chinese, Spanish, Russian & Tagalog), and Language Identifications instructions are in 20 common languages.	Title VI; mandated for agencies that receive federal funding	Regular review to ensure multi-language signage at key points throughout all campuses notifying patients of the availability of language assistance services.
7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.	Individuals providing language assistance include Certified Medical Interpreters & Qualified Bilingual Staff. CPMC's Interpreter Services Department has programs that evaluate and ensure the language competency of our bilingual staff. A Medical interpreter is an individual who is fluent in English and in a second language or National Certified with the Registry of Interpreters for the Deaf (RID) in sign language. Use of minors, family members and untrained individuals are avoided.	Title VI; mandated for agencies that receive federal funding	1. Current information about Qualified Bilingual Staff (certified at Medical/Basic level by external independent agency) maintained and publicized on institutional intranet. 2. Quality assurance program in place to ensure competency of vendor in person interpreters. 3. Certified staff interpreters activities, efficiency and competency monitored regularly
8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.	Signage provided in our common languages: Chinese, Spanish, Russian and Tagalog (at St Luke's)	Guideline	1. Staff interpreters round and audit the accuracy and adequacy of multi-lingual signs. 2. Multi-lingual Patient Satisfaction Surveys. 3. Multi-lingual essential communications.

Principal Standard:		Reference	Internal Monitoring/Metric(s)
Engagement, Continuous Improvement, and Accountability:		Guideline	
9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.	Appropriate department level goals & policies support management accountability to infuse Cultural & Linguistic elements in planning and operations.	Guideline	Administrative polices are updated/reviewed every three years and monitored by the Policy & Procedure Committee.
10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.	Appropriate department level evaluations and patient surveys of CLAS related activities/measures are performed.	Guideline	Patient Satisfaction surveys are provided in preferred languages. Results of appropriate department level assessments reported to Senior Management.
11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.	Sutter EHR system collects/records demographic data and language needs of patients and department level assessments done as needed and care provided appropriately.	Guideline	Sutter Electronic Health Record generated LEP Census Reports made available by campus to all appropriate departments for assessment.
12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.	CPMC conducts a tri-annual community health needs assessment in partnership with community based organizations, San Francisco Hospitals and the San Francisco Department of Public Heath. CPMC works with SFHIP and through an annual implementation plan to respond to needs identified in the assessment. Additionally Interpreter Services periodically evaluate geographic language demographic & needs data as well as CPMC's LEP census reports and plan the provision of language assistance accordingly.	Guideline	The tri-annual community health needs assessment and annual implementation plans are submitted to the IRS and OSHPD and published on the CPMC public website. CPMC participates in SFHIP on an ongoing basis through the Steering Committee. Sutter Electronic Health Record generated LEP Census Reports made available by campus to all appropriate departments for assessment.
13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.	CPMC conducts a tri-annual community health needs assessment in partnership with community based organizations, San Francisco Hospitals and the San Francisco Department of Public Heath. CPMC works with SFHIP and through an annual implementation plan to respond to needs identified in the assessment.	Guideline	The tri-annual community health needs assessment and annual implementation plans are submitted to the IRS and OSHPD and published on the CPMC public website. CPMC participates in SFHIP on an ongoing basis through the Steering Committee.
14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.	CPMC's Patient & Customer Relations Department has processes to handle complaints & grievances of all nature with commitment to service excellence and quality personalized care.	Recommendation	Cultural/diversity complaints tracked as an Event Type in our Online Occurrence Report system. All complaints and grievances are investigated. In compliance with CMS, grievances are acknowledge within 7 days and final response given within 30 days.
15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.	Communicated through website, staff meeting and city-wide partnerships.	Recommendation	Communications works with Senior Management to broadcast updates through internal and external channels.

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June 29, 2018

By Electronic Submission to elizabeth.purl@sfgov.org
Elizabeth Purl, Development Performance Coordinator
San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: **Comments of San Franciscans for Healthcare, Housing, Jobs & Justice on Sutter-CPMC's 2017 Compliance Statement**

Dear Ms. Purl:

On behalf of San Franciscans for Healthcare, Housing, Jobs & Justice ("SFHHJJ" or "the Coalition"), I submit these comments on Sutter-CPMC's Long Range Development Plan Development Agreement 2017 Compliance Statement and Including [sic] Healthcare Compliance Report (hereafter "Sutter 2017 Compliance Statement").

San Franciscans for Healthcare, Housing, Jobs & Justice[1] is a community-labor coalition that has worked to ensure that Sutter-CPMC's reconfiguration of its San Francisco campuses serves the interests of patients, workers, neighboring communities, and the City as a whole. Although not a party to the Development Agreement (DA) signed by the City and Sutter-CPMC, the Coalition played a key role in shaping its outline and garnering support on the Board of Supervisors for the community benefits package incorporated in it. The Coalition has closely monitored the City's and Sutter-CPMC's implementation of the DA, submitting written comments and public testimony throughout the compliance review process in each of the first four annual review cycles.[2]

[1] SFHHJJ is a coalition of coalitions. It is comprised of the Coalition for Health Planning-San Francisco, the Good Neighbor Coalition, and Jobs with Justice (itself a community-labor coalition). These coalitions have more than fifty unduplicated organizational members.

[2] See Comments of SFHHJJ on CPMC 2013 Compliance Statement, July 2, 2014; Response of SFHHJJ to City Report on CPMC 2013 Compliance, Nov. 24, 2104; SFHHJJ Letter to Board of Supervisors' Public Safety & Neighborhood Services Committee, May 15, 2015; Comments of SFHHJJ on CPMC 2014 Compliance Statement, July 23, 2015; Response of SFHHJJ to City Report on Sutter-CPMC's 2014 Compliance Statement, Nov. 24, 2015; Comments of San Franciscans for Healthcare, Housing, Jobs & Justice on Sutter-CPMC's 2015 Compliance Statement, June 23, 2016; Comments of San Franciscans for Healthcare, Housing, Jobs & Justice on Sutter-CPMC's 2017 Compliance Statement, June 30, 2017.

Over the past four years, the Coalition has urged the City to conduct this annual compliance review process as more than a formalistic, yes/no box-checking exercise. The process can and should be used to develop the information necessary to enable a public dialogue on progress and remaining impediments to meeting the full promise and spirit of the DA.

From the onset of these annual reviews, the Coalition has in its responses to Sutter-CPMC's self-assessments identified six recurring areas of focus:

1. baseline charity care provision (and the breakdown of services provided and populations served);
2. the pace of efforts to ensure that a full 1,500 Tenderloin residents on Medi-Cal managed care can receive hospital and specialty care at Sutter-CPMC facilities;
3. the cultural and linguistic appropriateness of Sutter-CPMC's services, particularly to monolingual Spanish-speakers, at the St. Luke's Diabetes Center—and whether there has been a diminution of access for that population since Sutter-CPMC's elimination of its bilingual/bicultural Spanish-speaking staff;
4. the extent of genuine dialogue with patient and community groups on the mix of services provided and responsiveness to community health needs;
5. entry-level *operations* hiring through the City's First Source program and whether it is reaching each of its six targeted higher-unemployment neighborhoods (and whether entry-level hires are successfully retained);
6. the extent and reach of Sutter-CPMC's long-delayed provision of subsidized public transit monthly passes to employees to reduce traffic, pollution, and greenhouse gas production.

In its 2017 self-assessment, **Sutter-CPMC completely ignores items #2, #3, and #6** and provides less than optimal information on items #1 and #5. Adding an additional area for review, the Coalition notes that **for the second consecutive year, Sutter-CPMC has failed badly to meet its entry-level *construction* jobs target**. The Coalition urges the City to use its City Report to address and develop further information on all of these topics.

A. Healthcare

1. Baseline Unduplicated Patient Commitment: Need for More Detailed Explanation for Volatility and More Granular Data

One of the most fundamental provisions of the DA is the requirement that Sutter-CPMC serve its fair share of Medi-Cal and Charity Care patients. The "baseline" below which Sutter-CPMC is not to fall is the average number of such patients it served from 2009-11 or from 2010-12. That threshold is 30,445 unduplicated patients each year.

Sutter-CPMC's report that it served 39,569 unduplicated Medi-Cal and Charity Care patients in 2016 is positive news, even though it is approximately 4,000 fewer than 2016, in which it served 43,370 patients. In 2015, it served 37, 771 patients. We are only three years removed from Sutter-CPMC's having served only 28, 596 in 2014 (1,849 short of the baseline).

While the Coalition is pleased that Sutter-CPMC is above the DA's baseline in serving Medi-Cal, under-insured, and uninsured San Franciscans, once again Sutter provides no narrative explanation for how it achieved this figure. ***The Coalition again urges the City Report to address the reasons behind the volatility*** from year to year in unduplicated Medi-Cal and charity care patients. Although not explicitly required by the DA, ***the City should urge Sutter-CPMC to disaggregate the charity care information*** to show (1) how many of the unduplicated patients were one-time diagnostic referrals from DPH, (2) the breakdown by campus, and (3) by patient zip code. With today's electronic record-keeping, this sort of disaggregated data should be easy to provide. As the reconfiguration of Sutter-CPMC campuses proceeds over the course of the DA, such disaggregated data will give City administrators, officials, and the public vital, longitudinal insight into how that process impacts Medi-Cal, under-insured, and uninsured San Franciscans.

2. Culturally and Linguistically Appropriate Services: A Continuing Area of Concern at the St. Luke's Diabetes Center that Sutter-CPMC Completely Ignores, Despite the 2016 Certificate of Compliance's Instruction to Address It.

As the Planning Director and Director of Health noted in the 2015 Certificate of Compliance (issued on March 1, 2017), the Health and Planning Commissions, throughout the first two Annual compliance report reviews, have continued to question "the cultural and linguistic appropriateness of CPMC services." These questions were triggered by the 2014 firing of bilingual and bicultural staff at the St. Luke's Diabetes Center (which has historically served a large, monolingual, Spanish-speaking population) and the concerns it raised about Sutter-CPMC's approach to serving monolingual, non-English-speakers. Given a Sutter Health executive's notorious comment before a Board of Supervisors committee in 2014 that Sutter was looking forward to a "better educated and better employed" patient base at St. Luke's, the actions at the Diabetes Center raise alarms that Sutter-CPMC sought to reduce the number of lower-income, monolingual, non-English-speakers who feel comfortable seeking services at St. Luke's—as part of an effort to "rebrand" the hospital as primarily serving the new, gentrified population of the Mission/Bernal neighborhoods.

In their March 2017, Certificate of Compliance for 2015, the Planning Director and Director of Health noted that DPH diabetes care experts met in April 2016 with St. Luke's Diabetes Clinic (SLDC) staff and identified four issues on which Sutter-CPMC agreed to report in future annual compliance statements: the need for additional Spanish language capacity, the offering of Spanish language classes, the addition of reception staff to improve patient care and experience, and the connection of patients with the HealthFirst program.[3] In the 2016 Certificate of Compliance, the Director of Health wrote in November 2017: "The Department of Public Health looks forward to learning more about CPCM's progress from the supplemental information CPMC agreed to include in future annual compliance reports."[4]

[3] 2015 Certificate of Compliance, Mar. 1, 2017, p. 3.

[4] 2016 Certificate of Compliance, Nov. 2, 2017, p. 3.

Sutter-CPMC's 2017 Compliance Statement completely ignores the St. Luke's Diabetes Center, providing none of the promised information outlined in the 2016 and 2017 Certificates of Compliance.

In its 2016 Compliance Statement, Sutter-CPMC had reported that it hired (without any information on when during the year) a 0.8 FTE bilingual and bicultural Spanish-speaking registered dietician and certified diabetes educator for the SLDC.[5] It stated that it would not begin offering Spanish languages classes until summer 2017 and it continued to refuse to provide a dedicated receptionist at the SLDC, insisting that new signage and an additional question on its patient satisfaction would reveal "if there are access challenges caused by not having a receptionist."[6] Of course, surveying only patients who make it to the Center to ask if they had trouble accessing it will miss all of the would-be patients who were in fact unable to find and access it.

The fundamental question the City must continue to press Sutter-CPMC to answer—or answer for itself—is whether Sutter-CPMC's actions over the past four years at the St. Luke's Diabetes Center constitute, as the Director of Health aptly put it in the 2013 Certificate of Compliance, a "diminution of access"[7] for the Center's historically lower-income, monolingual, Spanish-speaking patient base. This compliance review process must develop an empirical basis to assess the impact of CPMC's 2014 changes on the Center's patient population and demographics—and whether Sutter-CPMC's announced changes in 2017 are sufficient to remedy any diminution that did occur. Did the removal of onsite, bilingual, bicultural Spanish-speaking staff decrease the number or proportion of monolingual Spanish-speaking patients? Have those patients who have remained been adequately served? What happened to those who left? Have other centers or departments that serve, or seek to serve, more affluent, primarily English-speaking patients also been subject to similar withdrawal of receptionist services? These are the sorts of questions that need to be answered, given Sutter-CPMC's publicly expressed interest in changing the demographics of its patient base.

3. Steps Toward Public Dialogue on Service Mix and Delivery—Undermined by Unilateral Announcement of Closure of Skilled Nursing and Sub-Acute Care Services at St. Luke's and of Swindells Alzheimer's Facility.

The issues at the St. Luke's Diabetes Center are one manifestation of a broader issue: the appropriateness of Sutter-CPMC's services and its overall responsiveness to community health needs**.** A central aim of the DA was to ensure that Sutter-CPMC serve not only the needs of the affluent and well-insured, but that it meet the health care needs of all San Franciscans.

The Coalition has appreciated the continued urging by the Health Director that Sutter-CPMC "establish regular opportunities" for genuine "community dialogue" and that it

[5] Sutter 2016 Compliance Statement, Attachment 1, Exhibit F, Diabetes Center Update, p. 69 of pdf.

[6] Id.

[7] 2013 Certificate of Compliance, p. 2.

"develop long-term community relationships,"[8] as well as Third Party Monitor Louis Giraudo's call for Sutter-CPMC "to improve overall community engagement."[9] The Coalition acknowledges that in the realm of planning for a Center for Excellence in Senior Health, Sutter-CPMC has taken steps away from one-way reporting of already-decided plans to a hand-picked, tiny audience of invited organizations and has begun to work more collaboratively with community groups—but only sporadically and without any discernible programmatic progress. Now is the time for CPMC representatives to meet regularly with representatives from community groups, including Coalition members, to plan for a true Center of Excellence in Senior Health as the new hospital on the St. Luke's (now renamed Mission/Bernal) Campus is scheduled to open this summer. Unfortunately, CPMC's actions in 2017 regarding the announced closing of two services on its existing campuses dampens expectations that CPMC actually will be open to learning from and working cooperatively with community and patient groups to meet across-the-board healthcare needs of low-income San Franciscans in particular.

Any limited progress on this front has been undermined and completely overshadowed, however, by Sutter-CPMC's 2017 announcements that it would close its skilled nursing facilities and sub-acute care services at St. Luke's, as well as its Irene Swindells Center for Adult Day Services for Alzheimer's patients at the California Campus. CPMC's actions have been especially disturbing in its responses to the needs of subacute care patients at St. Luke's.

As Dr. Teresa Palmer explains in an article in the Westside Observer[10]:

> Subacute skilled nursing facility care is long-term life support for those who . . . live on ventilators or have other very complex care needs. It is called "subacute" because the patients are just stable enough to be moved out of the intensive care unit. No patient population is more delicate and more vulnerable to small changes in their quality of care. No patient population is more dependent on loving family members to watch and advocate for them on a daily basis.

Initially, Sutter-CPMC announced it would transfer its sub-acute patients out of San Francisco and as far away as Sacramento, where it would be much harder for their families to visit and monitor their care. The intense public outcry against this decision led Sutter-CPMC to back-pedal partially and announce at a September 2017 Board of Supervisors hearing on the matter that it would maintain services for existing St. Luke's patients at a facility on another of its campuses until they die or leave for other reasons.

It is important to highlight that there are no other SNF subacute units in San Francisco and that Sutter-CPMC has not accepted new long-term subacute patients into the St. Luke's unit, which is licensed for 40 subacute beds, from within the CPMC system since

[8] 2014 Certificate of Compliance, Jan. 15, 2016, p. 5.

[9] 2014 Annual Compliance Findings, Apr. 1, 2016, p. 2.

[10] Teresa Palmer M.D., *Why We Care About the Closure of St. Luke's Subacute Unit*, WESTSIDE OBSERVER, May 2018, http://www.westsideobserver.com/news/longTermCare.html.

early 2017—and had not accepted subacute patients from other hospitals since 2012. Though neither mandating nor limiting Sutter-CPMC from taking specific actions, the Development Agreement states that Sutter-CPMC is to act in good faith in addressing the need for subacute care services in San Francisco, which are now at a crisis point.[11] While Sutter-CPMC has participated in planning groups addressing this issue and related post-acute care issues, its refusal to continue to operate a SNF subacute care unit permanently belies any expectation that it voluntarily will act on its own, or even cooperatively with other healthcare providers, to ensure that there will be a sufficient number of subacute beds on hospital campuses in San Francisco to meet the serious healthcare needs of future as well as existing subacute care patients residing in San Francisco.

As of the end of June 2018, the number of subacute patients in the St. Luke's unit has dwindled to 17. Sutter-CPMC plans to move these frail subacute patients to its Davies campus this summer in space formerly used as part of a general SNF unit. The result is that there will be a loss of at least 17 beds out of the 38 regular SNF beds at that campus, a serious additional consequence given the continuing loss of SNF beds in San Francisco generally.

Across the board, Sutter-CPMC continues to make unilateral decisions that affect the availability and accessibility of post-acute care services in San Francisco. The most trying recent examples involve the handling of the closures of both the St. Luke's subacute care unit with the accompanying losses of general and subacute SNF unit beds and the Swindells Center. Regarding Swindells, after considerable anguish and uncertainty unnecessarily borne by family members, Sutter-CPMC did eventually bow to substantial public pressure and arranged to transfer the Alzheimers patients at the California Campus to a non-CPMC facility. It should not have taken so much advocacy to get Sutter-CPMC to act responsibly. These sorts of decisions, with their devastating effects on care for frail and vulnerable patients and on the employees who care for them, reinforce yet again the image of Sutter-CPMC as an institution that is less interested in meeting San Francisco's most pressing health needs than in closing services that don't generate sufficient income to further Sutter's appetite for financial accumulation.

Indeed, Sutter-CPMC's high-handed actions with families and staff regarding the closure of the St. Luke's Subacute Care Unit continue to this day. The Coalition understands that, as of June 22, 2018, the families of at least ten of the remaining seventeen Sutter-CPMC subacute SNF patients have filed an appeal of their impending transfer on June 30, 2018, to Davies—based on Sutter-CPMC's failure to provide them sufficient information and assurance that the transportation and transition of care will not endanger their loved one's health. Even as it bends minimally to public outcry, Sutter-CPMC seems constitutionally unable to conduct itself in ways that include families in the planning of services or transitions in care and that signal genuine concern and respect for patients', families' and community health needs.[12]

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[11] Development Agreement, Exhibit F, p. 12.

[12] The Coalition has been informed that subacute SNF families did not, after many requests, receive a tour of the facilities at Davies until after all construction and placement plans were made, and less

Sutter-CPMC has absolutely refused to discuss where on its campuses a permanent home for regular and subacute SNF care might be re-opened. ***The Coalition urges the City to press Sutter-CPMC to:***

- ***accept new San Francisco residents as long-term subacute unit patients,***
- ***maintain the personnel and resources to operate a 40-bed subacute SNF unit and 39-bed regular SNF unit at an appropriate hospital site on an interim basis as a replacement for the licensed beds lost as a result of the closing of the old St. Luke's hospital; and***
- ***commit to the development and permanent operation of hospital-based subacute and regular SNF units in one of its hospitals (for example, the 30-bed shell space not yet approved for development at the new Van Ness/Geary hospital), in the medical office buildings now being built or planned adjacent to the new hospitals on the Van Ness/Geary and Mission/Bernal campuses, or in another appropriate location.***

In the absence of such a commitment from Sutter-CPMC to maintain these vital services at licensed levels, the antitrust suit recently brought by the California Attorney General against Sutter for increasing the cost of health care in Northern California[13] only further reinforces public perception that this formally "non-profit" institution is chiefly focused on profit. Sutter-CPMC's conduct continues to highlight that this corporation requires constant scrutiny and stringent regulation to ensure that its pressing goal of making money does not continually trump its moral obligation to provide the services that our vulnerable and elderly residents so badly need.

4. Publicizing Sutter-CPMC's Availability to Serve Medi-Cal Managed Care Beneficiaries in the Tenderloin and Enhancing Residents Ability to Access It

Thanks to the efforts of many, including DPH, Monitor Louis Giraudo, and Sutter-CPMC, a management services organization with a primary care provider base located in the Tenderloin at the St. Anthony's Clinic was created through a partnership with North East Medical Services (NEMS) before the DA's deadline of the end of 2015. Sutter-CPMC, as required by the DA, has contracted to provide acute care services to up to 1,500 new Medi-Cal managed care enrollees in that partnership.

Last year the Coalition expressed its ongoing concern over the very low number (then 125) of enrollees in the St. Anthony's-NEMS-Sutter-CPMC partnership. This year's

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than two weeks before planned transfer; did not receive written copies of transfer plans, or sufficient evidence that there would be adequate training and attention to prevent severe transfer trauma of these very fragile patients. Many patients' families feel that their reasonable requests during the pre-transfer period were met with either vague boilerplate answers or by calling individual meetings where unreliable, and at times, no information was given.

[13] See State of California Department of Justice, *Attorney General Becerra Sues Sutter Health for Anti-competitive Practices that Increase Prices for California Families*, Mar. 30, 2018, https://www.oag.ca.gov/news/press-releases/attorney-general-becerra-sues-sutter-health-anti-competitive-practices-increase.

Compliance Statement is silent on how many people have enrolled, leading to the inference that, halfway through the life of the DA, enrollment remains quite low***.***

In mid-January 2016, Director Garcia reported 22 Medi-Cal beneficiaries were enrolled. In mid-May 2016, Sutter-CPMC's 2015 Compliance Statement reported that a total of 66 were enrolled. Last May, Sutter-CPMC's 2016 Compliance Statement reported that 125 had enrolled.[14] In November 2017, the 2016 Certificate of Compliance indicated that only 189 were enrolled—less than 13% of the anticipated 1,500.

The Coalition recognizes that the program is two and a half years old, that St. Anthony's needs assistance in building infrastructure systems, and that a portion of the Healthcare Innovation Fund grant to St. Anthony's has supported outreach and publicity efforts. But ***St. Anthony's cannot be expected to do all the outreach and publicity***. And the DA will only be in force for five more years. ***The Coalition continues to urge DPH and Sutter-CPMC—not just St. Anthony's and NEMS—to dramatically expand advertising and public outreach to Tenderloin residents to inform them of their options for receiving hospital and specialty care at Sutter-CPMC or San Francisco General Hospital***. In its role as a public health department (and not just the operator of a public hospital), DPH should advise Tenderloin residents of the comparative advantages of enrolling in each of the networks available to them. If waits for service are significantly shorter at Sutter-CPMC facilities than at San Francisco General, that information should be shared with Tenderloin residents.

If Tenderloin residents are not enrolling because of the distance to travel to Sutter-CPMC facilities, then St. Anthony's, NEMS, Sutter-CPMC, DPH and the San Francisco Foundation should ***explore how to provide transportation services, perhaps funded by the Healthcare Innovation Fund, from St. Anthony's primary care clinic to Sutter-CPMC facilities until the Geary/Van Ness hospital opens***. A key aim of the DA was to ensure that Sutter-CPMC provide hospital and specialty care services to a substantial number of residents of the Tenderloin to ensure that this neighboring community receives tangible service benefits from the construction of the Geary/Van Ness hospital, rather than only bearing the burdens of its construction and traffic. Those benefits should not wait until completion of the Geary/Van Ness hospital to be made. The Coalition implores all the parties to act now creatively to remove impediments or disincentives so that up to 1,500 Tenderloin residents can receive hospital and specialty care services at Sutter-CPMC.

B. Employment

1. Entry-Level Operations Hiring – Proportional Success at an Aggregate Level, But No Information at the Level of Specific Targeted Neighborhoods and No Explanation for Dramatic Decrease in Total Number of Hires

The Coalition is heartened that after several years of prodding, Sutter-CPMC is now consistently meeting its overall target under the DA to hire economically disadvantaged workers referred by the City's First Source Hiring program for entry-level operations positions at its campuses across the City. The goal is for at least 40% of entry-level

[14] Sutter 2016 Compliance Statement, Healthcare Compliance Report, at p. 11 of pdf.

openings to be filled by City-referred applicants from six targeted neighborhoods with persistently higher levels of unemployment. The six targeted neighborhoods are the Western Addition, Tenderloin, Mission/SOMA, Outer Mission/Excelsior, Chinatown, and "Southeastern neighborhoods."

After a horrible 2013 (in which 0% of entry-level jobs were filled by First Source referred applicants) and 2014 (in which 22% of entry-level hires, 18 hires for 81 positions, were City-referred applicants), in calendar year 2015 Sutter-CPMC finally began to fill its entry-level operations positions with a significant number and proportion of system-referred candidates: 61%, 135 of 220 hires. The Coalition is pleased that in 2016, 63% of entry-level hires, 80 of 127, were First Source referrals and in 2017, 58% (33 of 57 hires) came from the program.

The Coalition notes, however, that ***Sutter-CPMC has glaringly decreased its overall entry-level operations hiring***: 220 such hires in 2015, 127 in 2016, and only 57 in 2017. ***The Coalition urges the City to explore the reasons behind this dramatic slowdown in overall entry-level operations hiring***. In its 2016 Compliance Statement, Sutter-CPMC projected that it would hire 173 entry-level operations employees in the following year[15], so its 57 hires in 2017 was only 33% of its projection. Such an extreme shortfall from projection warrants an explanation.[16]

Once again, Sutter-CPMC's 2017 Compliance Statement does not provide a breakdown of hires by specific targeted neighborhood (or zip code), even though its monthly reports traditionally provided such information. ***The Coalition urges the City Report to detail the entry-level operations hiring results for each of the DA's six targeted neighborhoods*.** As the Coalition's comments to Sutter-CPMC's 2014 Compliance Statement documented, residents of the Tenderloin, Chinatown, and SOMA were not being reached by Sutter-CPMC's First Source hiring.[17] As noted then, the Coalition expects the City and Sutter-CPMC to devote attention to seeing to it that applicants from each of the DA's target neighborhoods are being served and entering the workforce.

The Coalition again encourages Sutter-CPMC and the City to include retention data in all reports on entry-level hiring. The Coalition was pleased to see in the 2014 Compliance Statement that Sutter-CPMC was tracking the retention rate of its First Source hires. Retention information is critical to assessing the program's lasting impact and to enable administrators, elected officials, and the public to assess the value of including such commitments in future development agreements or policies. The 2016 and 2017 Compliance Statements no longer report any retention information.

[15] Sutter 2016 Compliance Statement, Attachment 3, at p. 89-90 of pdf.

[16] In its 2015 Compliance Statement, Sutter-CPMC also projected that it would hire 173 entry-level operations employees in the following year. Sutter 2016 Compliance Statement, Attachment 3, at p. 97-98 of pdf. So, its 127 hires in 2016 comprised 73% of its projection.

[17] See Comments of SFHHJJ on CPMC 2014 Compliance Statement, July 23, 2015, p. 8.

2. Entry-Level Construction Hiring – A Second Consecutive Year of Falling Well Short of the DA's 50% Hiring Goal

In the realm of *construction* hiring, the DA sets a goal that 50% of entry-level construction positions for union apprentice candidates will be filled by system referrals. For the second year in a row, only 30% (223 of 754) of new hire opportunities for entry-level union apprentices were system referrals.[18] In 2016 as well, only 30% (of 754 or 756 hires) of entry-level union apprentices were system referrals.[19]

The DA provides that the failure to meet target percentages does not by itself impute bad faith, but it does "trigger a review of the referral process and the Contractor's or CPMC's efforts to comply" with the First Source Hiring Program for Construction.[20] The Coalition consequently expects the City Report to conduct and report on that review.

C. Transportation: Sutter-CPMC Fails to Provide Any Information on the Pace of Adoption of Its Public Transit Subsidy Program for Sutter-CPMC Employees

The Coalition was pleased that Sutter-CPMC finally began complying in January 2017 with the DA's express requirement that Sutter-CPMC "share the cost equally" of a Clipper Card with all its employees to subsidize their public transit use (up to half the value of an adult monthly Muni Fast Pass).[21] As the Coalition discussed at length in its public comments for three years running, Sutter-CPMC was obligated to institute this program in 2013, so for four straight years it was out of compliance.

In its 2016 Compliance Statement, Sutter-CPMC reported on the number of employees who had taken advantage of the program through the first four months of 2017.[22] In its comments last year, the Coalition noted its disappointment that only "[a]pproximately 750 employees" had taken advantage of the transit subsidy at that time, writing: "For an organization of 6,250 employees, the participation rate is just 12% of the workforce and less than half of the number of employees who report taking public transit from work. More than 2,600 (43%) of its employees/physicians reside in San Francisco, so Sutter-CPMC should be able to entice far more than 750 to participate in the transit subsidy program."

This year, Sutter-CPMC provides no information whatsoever on participation in its transit subsidy program. The Coalition urges the City to press Sutter-CPMC for information on participation rates in the transit subsidy program and the extent of

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[18] Sutter 2017 Compliance Statement, Attachment 4, p. 94 of pdf.

[19] Sutter 2016 Compliance Statement, Attachment 4 (indicating 223 of 754) p. 92 of pdf; Exhibit B (indicating 30% of 756 hires), p. 115 of pdf.

[20] Development Agreement, Exhibit E - Workforce Agreement, A(9), at pp. 8-9 of Exhibit E.

[21] Development Agreement, Exhibit K - Transportation Program, subsection 8.c, at p.5 of Exhibit K.

[22] Comments of SFHHJJ on CPMC 2016 Compliance Statement, June 30, 2017, p. 7.

its outreach to employees to invite them to participate (beyond simply promoting it at "annual transportation fairs").

The Coalition notes that the 2017 Employee/Physician Commute Survey shows that only 25% of Sutter-CPMC's approximately 6,250 employees and physicians use public transit—no change from the percentage using public transit in 2016.[23] The City should consequently probe to ensure that Sutter-CPMC is doing everything the DA calls for to aggressively encourage public transit use.

Discussions with CPMC representatives indicate that the opening of the Mission/Bernal Campus in July 2018 is a good opportunity to better analyze transportation impacts of opening a new hospital. Updated transit, vehicle, bicycle, and parking data should be available before the Geary/Van Ness hospital and medical office building are due to open in the fourth quarter of 2019.

The Geary/Van Ness campus poses a specific transportation challenge. It will be the largest CPMC facility in San Francisco, in an area chosen in part for its "transit rich location." There is no provision for the 3,000+ employees' parking on site, with the exception of the night shift. Delays in the construction of the Van Ness BRT will impact the ability of employees to get to work, and may require the increased use of shuttles, including those from nearby parking garages.

Sutter-CPMC is scheduling neighborhood meetings around the Pacific and Van Ness campuses in July 2018 to discuss these and other issues. Representatives of the Coalition will continue to meet with Sutter-CPMC to discuss transportation impacts and work on improving outcomes.

Conclusion

As outlined above, Sutter-CPMC had made progress in several areas, but once again its Compliance Statement fails to fully address or provide appropriate detail or explanation on key issues outlined above. The Coalition urges the City Report to go beyond mere Yes/No findings of technical compliance to uncover the additional information that can fuel a broader dialogue on the issues the Coalition has identified above.

Respectfully submitted on behalf of the Coalition,

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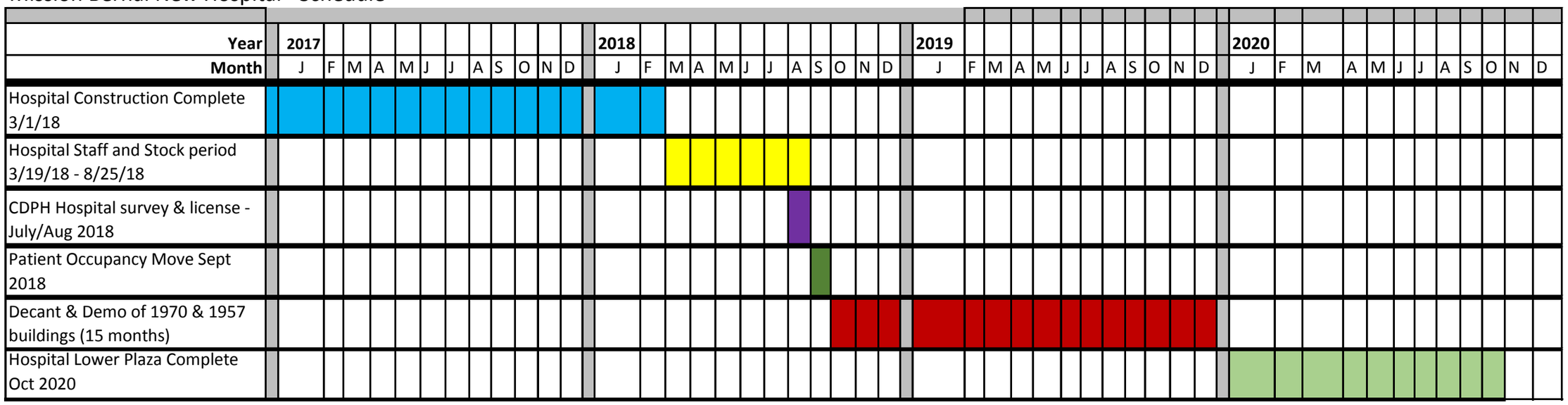
[23] See Sutter 2017 Compliance Statement, p. 129 of pdf; Sutter 2016 Compliance Statement, p. 125 of pdf.

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