Evaluation of the San Francisco Department of Public Health and Preparation of the Department for Health Reform

The Client:
The City/County of San Francisco | The San Francisco Department of Public Health

The Challenge:
The San Francisco Department of Public Health—composed of an acute care academic medical center, primary and specialty clinics, a large long term care facility, extensive behavioral health and community based-programs, and jail health services—has sought to continually improve its ability to effectively care for the residents of the community within the context of the changing health care environment. HMA has assisted in these efforts.

The Approach:
HMA has worked with the San Francisco Department of Public Health on the following efforts:

Evaluation of the San Francisco Department of Public Health (2005-2006)

HMA was engaged in the spring of 2005 by the Office of the Controller of the City/County of San Francisco to evaluate the effectiveness of the continuum between acute and long-term care services provided by the San Francisco Department of Public Health (DPH). To accomplish this assessment, HMA assembled a team of senior staff that included three former public health and hospital system leaders (including a physician), a national long-term care expert, and two former state Medicaid Directors. The work was divided between two major components of the overall charge:

1. assessing the mission, structure, leadership and operation, of the Department as a “seamless” continuum of care and making specific recommendations to ensure greatest possible integration; and

2. examining the current state of and appropriateness of long-term care services that are and should be available for the population that the Department has determined it serves; proposing actions to make those services more effective.

The development of the report was the product of myriad interviews of key stakeholders (both within and external to the Department); site visits to Department facilities and observation of clinical and administrative activities; review of data and previous reports; and group meetings with clinicians, business leaders, union representatives, political leaders, advocates, and others with clear impressions about the current state and future challenges for DPH.

Facilitate the Preparation of the San Francisco Department of Public Health for National Health Reform (2013)

HMA was engaged in the spring of 2013 to help facilitate the transformation of the various programs and services of the SFDPH into an integrated delivery system. HMA’s focus included:

1. change management (overseeing the process of integrating the elements of the Department, ensuring participation and buy-in, drafting and vetting the vision and new organizational structure, drafting job descriptions for new leaders, setting a communications plan and an evaluation strategy to ensure that the restructuring is maintained);
2. overseeing technical assistance and training for the transformation of Department primary care and behavioral health into medical and health homes;

3. establishing a strategy and building the infrastructure for managed care within the department; and

4. developing a financial forecast and overseeing the redesign and implementation of new financial tools within the Department to ensure accountability and transparency.

This effort took place over the course of nine months (with the primary care efforts lasting a full year) and involved significant on-site facilitation by HMA, in partnership with the leadership of the SFDPH.

The Results:

After the first engagement, HMA’s recommendations resulted in: a new plan for the replacement of the system’s long term care facility; an organizational strategy to ensure greater integration between DPH’s clinics and hospitals and programs; and an initiative with the State of California for a home and community-based services Medicaid waiver.

After the second engagement, the health care services within the SFDPH were re-organized into an integrated delivery system, the San Francisco Health Network. A managed care strategy was implemented and an office of managed care created. New financial monitoring tools were fully integrated into the management processes.

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