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February 12, 2020

Professor Sharmila Majumdar, PhD Chair, UCSF Academic Senate

RE: Systemwide Review of the Working Group on Comprehensive Access Chair's Report of Findings and Recommendations with Responses from Working Group Members and UC Legal

Dear Chair Majumdar,

The members of UCSF's Clinical Affairs Committee ("CAC") write to comment on the Working Group on Comprehensive Access Chair's Report of Findings and Recommendations with Responses from Working Group Members and UC Legal ("WGCA Chair Report" or the "Report") and endorse "Option 1" described in the Report.

UC President Janet Napolitano assigned the Working Group the task of developing policy recommendations "to ensure UC's values are upheld when its academic health systems collaborate with other health systems" and "to ensure that UC personnel will remain free, without restriction, to advise patients about all treatment options and that patients will have access to comprehensive services."

The Working Group was unable to agree on a common statement of values, guiding principles, and monitoring guidelines for affiliations with other health care providers. Instead, the WGCA Chair Report presented two options that each have a similar statement of values, seven similar guiding principles, and a set of monitoring guidelines. The Chair's Report advises that the small but important differences likely would, under Option 1, allow affiliations with providers with policy-based restrictions on care and, under Option 2, prohibit affiliations with providers with policy-based restrictions at issue are primarily religious restrictions that limit the provision of reproductive, genderaffirming, and end-of-life care.

Notwithstanding CAC's unequivocal support for providing comprehensive reproductive, gender-affirming, and end-of-life care in line with evidence-based standards, CAC believes that allowing the University to affiliate with providers that do not provide these services gives the University the flexibility it needs to ensure UC values are upheld and give patients access to comprehensive services. Prohibiting affiliations creates a wall where there should be a bridge. Allowing affiliations, under the right terms and with proper monitoring, not only allows the University to uphold its values, but it gives the University an opportunity to advance and promote those values with its affiliates and increase access to health care for patients across California.

If the choice between Option 1 and Option 2 is the choice between allowing affiliations with providers that have policy-based restrictions on care and prohibiting them, CAC chooses to allow affiliations. That choice is not an endorsement of all affiliations. It is an acknowledgement that the University is stronger and better able to advance its mission when it has the ability to work with others.

Option 1 allows the University to affiliate with providers with policy-based restrictions on care in limited situations. Every existing and proposed affiliation should be carefully reviewed, and as stated in the Monitoring and Accountability section of Option 1, the University should "[v]erify that access to options currently available to patients for comprehensive reproductive health care, gender-affirming services and end-of life care will be maintained or improved as a result of the affiliation[.]"

CAC believes that affiliations should be reviewed by faculty before they are approved, and faculty should assist in monitoring compliance. CAC appreciates that UC Health require that reviews be nimble and timely, but UC Health should let its values and principles guide how it develops a process for evaluating affiliations, not just the substance of the affiliation. Shared governance is critical for the University of the California, and the perspectives and experience of UC faculty could meaningfully improve UC Health's ability to evaluate and maintain affiliations in line with its values and principles. To that end, CAC offers its services to UCSF Health as a committee with expertise in clinical issues and with capacity to help review affiliations.

CAC also supports the creation of a systemwide standing committee on health sciences. UC Health is experiencing tremendous growth, and a systemwide health sciences committee would be a resource for faculty, campuses, and the entire University as we navigate increasingly complex issues involving health care together.

Sincerely,

Geraldine Collins-Bride, RN, MS, ANP-C, FAAN

Chair, Clinical Affairs Committee

UCSF Academic Senate

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