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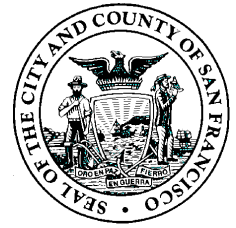
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**Mark Morewitz, M.S.W.**  
Executive Secretary

TEL (415) 554-2666

FAX (415) 554-2665

Web Site: <http://www.sfdph.org>

**MINUTES  
JOINT CONFERENCE COMMITTEE MEETING FOR  
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER  
October 8, 2024, 4:00 p.m.  
101 Grove Street, Room 300  
San Francisco, CA 94102 & via Webex**

**1. CALL TO ORDER**

Present: Commissioner Tessie Guillermo, Chair  
Commissioner Edward A. Chow, M.D., Member  
Commissioner Laurie Green, M.D., Member

Staff: Roland Pickens, Diltar Sidhu, Jennifer Carton-Wade, Lily Conover, Lisa Hoo MD, Daniela Kim MD, Nawzaneen Zahir, Carmen Trinh, Naveena Bobba MD, Grant Colfax, MD, Priyar Nayar, Albert Lam, MD, Neda Ratanawongsa, Amie Fishman

Commissioner Guillermo called the meeting to order at 4:03pm.

**2. APPROVAL OF MINUTES FOR MEETING OF SEPTEMBER 10, 2024**

Action Taken: The LHH JCC unanimously approved the September 10, 2024 meeting minutes.

**3. GENERAL PUBLIC COMMENT:**

Jim McAfee noted that he has durable power of attorney for his domestic partner. He contacted Jennifer Carton Wade and asked her what happened and why she could never contact him back. He also wanted to clarify his public comment from the previous meeting. He stated that residents did not participate in the recertification process, only staff did. CMS only did surveys with LHH staff. They were the ones who decided whether or not LHH got recertified. Any surveys that CMS did when they occurred were kept secret. It was a biased process. Families of residents were stopped from participating in the recertification process. They told the families that they don't have standing. He stated that there was no LHH Incident Command Center; no one was ever there.

#### **4. EXECUTIVE TEAM REPORT**

Diltar Sidhu, Interim Chief Executive Officer and Nursing Home Administrator, presented the item. He introduced Amie Fishman, the Interim Chief Experience officer at Laguna Hundred Hospital, who made some introductory comments.

##### Public Comment:

Patrick Monette Shaw stated that in July, August, and September, LHH has admitted a total of 18 patients. At the same time, there were 4 planned discharges and 8 resident deaths. This means that LHH has seen a net increase of just 6 residents. This is a net gain of just 2 residents per month. At this pace, it will take 12 years for LHH to get back to 700 residents. Delaying admissions means that San Francisco residents are being dumped out of county.

Dr. Teresa Palmer stated that an important part of the care experience is having a nursing home bed in your own community. LHH used to have an admissions waitlist before the recertification process; there must be a waitlist now. The community needs transparency on who is applying to LHH and not getting admitted. This will allow the community to understand that admissions processes are efficient. This information will also help the community understand who is being dumped out of county, and why.

##### Commissioner Comments:

Commissioner Chow requested a graph showing the number of people who requested admission, and what admission categories they fit into. Mr. Sidhu stated that there were 51 people referred for admission; 6 of those cases are still pending. Twelve of these individuals were denied admission due to not meeting skilled nursing care level criteria or exhibiting behaviors that LHH is not currently equipped to manage.

Commissioner Chow asked if LHH is offering the RSV vaccine. Dr. Albert Lam, LHH Chief Medical Officer, stated that he will be working with the LHH team to develop a plan for this vaccine.

Commissioner Chow asked what entity will perform the mock survey. Mr. Sidhu stated that HSAG will perform the mock survey. Commissioner Chow requested updates on the results of the mock survey.

Commissioner Chow asked how the LHH facilities functioned during the heat wave. Mr. Sidhu stated that the HVAC system worked as planned. LHH leadership monitored the temperature in common rooms and sure everyone was safe. LHH also had a cooling center in place if needed.

Commissioner Green asked the amount of time the new admissions procedures take in comparison to the process prior to the recertification effort. Mr. Sidhu stated that 24-48 hours is the industry standard for resident referrals from other facilities. He noted that it takes more time to process an admission request from the community.

Commissioner Green asked if residents are tested annually for TB. Mr. Sidhu stated that there is an annual PPD screening for residents who are known to have tested negative for TB in the past. For those residents who have tested positive for TB in the past, the medical team conducts an annual symptom review.

#### **5. HIRING AND VACANCY REPORT**

Priya Nayar, LHH HR Operations Director, DPH Human Resources, presented the item.

##### Commissioner Comments:

Commissioner Guillermo stated that it seems the efficiencies implemented in DPH Human Resources are positively impacting hiring processes at LHH.

## **6. REGULATORY AFFAIRS REPORT**

Nawzaneen Zahir, Chief Quality Officer, presented the item.

### Public Comment:

Patrick Monette Shaw stated that the Regulatory Affairs report is again shocking. CDPH issued four class B citations against LHH, three involving facility self reported facility reported incidents and one for an anonymous complaint. He thinks that the class B citations may involve patient confidentiality privacy breaches. However, the report doesn't say what the four class B violations involved when they occurred, and how much the citation penalties might cost. The four citations totaled \$12,000. He asked when LHH is going to stop receiving citations for patient abuse and neglect.

Dr. Teresa Palmer stated that it is disturbing that CDPH is so far behind in its response and investigation of so many complaints. She noted that LHH needs to get feedback from CDPH through these investigations in order to make relevant corrections.

### Commissioner Comments:

Commissioner Chow stated that he has stopped asking if the DPH can do anything to encourage CDPH to be more timely in its investigation of complaints. He noted that at ZSFG there is a year-long backlog of uninvestigated complaints. He commended LHH for its quick and thorough investigations of anonymous complaints.

## **7. LAGUNA HONDA HOSPITAL POLICIES**

Carmen Trinh, Director of Performance Improvement, presented the item.

### Commissioner Comments:

Commissioners Green and Chow thanked the LHH for their written responses to questions about the policies that were submitted prior to the meeting.

Action Taken: The LHH JCC unanimously recommended that the Health Commission approve the following items.

### **September 2024**

<b><u>Item</u></b>	<b><u>Scope</u></b>	<b><u>Policy No.</u></b>	<b><u>Policy Title</u></b>
1	Facility-wide	20-01	Admission to Laguna Honda Acute and SNF Services and Relocation Between Laguna Honda SNF Units
2	Facility-wide	20-04	Discharge Planning
3	Facility-wide	22-09	Psychiatric Emergencies
4	Facility-wide	24-10	Coach Use for Close Observation
5	Facility-wide	27-02	Referrals for Rehabilitation Services
6	Facility-wide	27-03	Natural Dye Swallowing Assessment for Patients with Tracheostomy
7	Facility-wide	27-06	Guidelines for Inpatient Rehabilitation Facility Documentation
8	Facility-wide	55-03	Pre-Admission Screening and Resident Review (PASRR)
9	Facility-wide	60-12	Review of Sentinel Events (Applicable to Acute Care Units Only)
10	Medicine	C01-02	Guidelines for Autopsy Requests
11	Medicine	D13	Consultant Responsibilities
12	Medicine	D14-01	HIV Testing and Prevention for Residents'
13	Nursing	Acute 01.0	Nursing Staff Education – Acute Unit
14	Nursing	Acute 02.0	Documentation of Care – Acute Unit
15	Nursing	A 8.0	Decentralized Staffing

16	Nursing	C 1.3	Discharge Procedure to Acute
17	Rehab	40-01	Rehabilitation Services Rehabilitation Services for Rehabilitation Unit (Acute Rehabilitation and SNF Rehabilitation) Patients

## **8. CLOSED SESSION**

- A) Public comments on all matters pertaining to the Closed Session. (San Francisco Administrative Code Section 67.15).
- B) Vote on whether to hold a Closed Session.

Action Taken: The LHH JCC voted unanimously to hold a closed session.

- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5, 1157.6, and 1157.7; Health and Safety Code Section 1461; San Francisco Administrative Code Sections 67.5, 67.8, 67.8-1, and 67.10; and California Constitution, Article I, Section 1.

### **CONSIDERATION OF MEDICAL QUALITY IMPROVEMENT**

### **CONSIDERATION OF MEDICAL STAFF CREDENTIALING MATTERS**

### **CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS**

### **QUALITY IMPROVEMENT MEDICARE RECERTIFICATION**

#### **RECONVENE IN OPEN SESSION**

1. Discussion and Vote to elect whether to disclose any portion of the closed session discussion that is not confidential under Federal or State law, The Charter, or Non- Waivable Privilege (San Francisco Administrative Code Section 67.12(a).) (Action item)
2. Possible report on action taken in closed session (Government Code Sections 54957.1(a) and 54957.7(b) and San Francisco Administrative Code Section 67.12(b).

## **9. POSSIBLE DISCLOSURE OF CLOSED SESSION INFORMATION**

Action Taken: The LHH JCC voted unanimously to not disclose discussions held in closed session.

## **10. ADJOURNMENT**

The meeting was adjourned at 5:26pm.