

Dan Bernal
President
Edward A. Chow, M.D.
Commissioner
Susan Belinda Christian, J.D.
Commissioner
Cecilia Chung
Commissioner
Suzanne Giraud ED.D
Commissioner
Laurie Green, M.D.
Commissioner
Tessie M. Guillermo
Commissioner

**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

London N. Breed, Mayor
Department of Public Health



Grant Colfax, M.D.
Director of Health
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**

December 13, 2022, 4:00 p.m.
Remote Meeting via Webex Event

1. CALL TO ORDER

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

Excused: Commissioner Tessie Guillermo, Chair

Staff: Nawzaneen Talai, LHH Chief Quality Officer

The meeting was called to order at 4:03pm.

2. APPROVAL OF MINUTES FOR MEETING OF NOVEMBER 8, 2022

Public Comment:

Patrick Monette-Shaw provided verbal comment and submitted the following written summary:

These minutes are alarming. Commissioner Chow asked about LHH Executive Staff changes on 11/8. Acting-CEO Pickens responded saying a current LHH employee is being taught to be a "Nursing Home Administrator" (NHA) by LHH's current consultant, HSAG, potentially as the preceptor. That employee doesn't have the required Masters degree in Nursing Home Administration; their Masters is in Occupational Therapy. Their various skills are widely disrespected. The employee claims their CHCF California Healthcare Improvement Project resulted in decreased LHH acute rehabilitation unit admission wait times and an increased average daily census. The Acute Rehab census has remained low for years. Given LHH's 2019 patient sexual abuse scandal, it's a bad idea to "home grow" an NHA. LHH's residents merit a highly qualified, licensed NHA possessing proven years of experience. This Commission should require a nationwide search to hire an already-licensed NHA, rather than this inexperienced "wanna-be." LHH's residents deserve no less.

Action Taken: The Committee unanimously approved the November 8, 2022 minutes.

3. GENERAL PUBLIC COMMENT:

Patrick Monette-Shaw provided verbal comment and submitted the following written summary:

There are a several problems involving secrecy with Health Services Advisory Group (HSAG). First, the November 4 contract with HSAG to be LHH's Quality Improvement Expert (QIE) was still not finalized by December 9. Why is the QIE contract still being kept secret? Second, the LHH Settlement Agreement required the QIE LHH hired — HSAG — to conduct "a 'Root Cause Analysis' for every deficiency identified in CMS and CDPH surveys" between 10/14/21 and 4/13/2022. The Root Cause Analysis report was supposed to be submitted to CMS by December 1, 2022. On December 2, SFDPH's public records staff responded to a records request seeking the Root Cause Analysis report, saying "we have no records to produce in response to your request" and added "SFDPH does not have possession, custody, or control of the record responsive to your request." Is this another secret document? The Commission should demand immediate release of it.

Norman DeNagleman said save LHH with all of its beds intact and find alternatives for the types of treatment people with substance use and mental health issues may need.

Michael Lyons, Gray Panthers, is concerned about the February deadline regarding the mandated discharges approaching and lack of transparency. What is the revised closure plan? The DPH must provide mental health and substance use beds for those who need this type of service so they can stay in their communities to prevent inappropriate admissions to Laguna Honda. Stop the flow project; Laguna Honda Hospital should not be overflow for ZSFG. There should not be a loss of beds or forced discharges of current patients. Those previous Laguna Honda Hospital residents who were forced discharge must be allowed to return.

Dr. Teresa Palmer stated that using Laguna Honda Hospital as a refuge for people that need substance use treatment and have unstable behavior is against CMS regulations and got LHH in trouble in the past. She if frustrated with the lack of information given to the public and is praying that these sessions will result in extension of closure date and bed cuts.

4. CLOSED SESSION

A) Public comments on all matters pertaining to the Closed Session. (San Francisco Administrative Code Section 67.15).

Patrick Monette-Shaw provided verbal comment and submitted the following written summary:

Here you go again. entering into Closed Session to discuss in secret another potential crisis! At 9:36 a.m. on December 9 Commission secretary Mark Morewitz sent an e-mail cancelling today's JCC meeting, saying "*LHH staff and leaders are needed at this time to complete the current CMS survey taking place at the hospital.*" Something happened, because by 4:35 p.m. Morewitz sent another e-mail resurrecting today's meeting. What happened between those eight hours? Do the performance improvement and patient safety reports you will discuss in Closed Session involve a new crisis at LHH affecting the hospital's re-certification? If so, you should disclose that now to members of the public. You should know by now that transparency brings accountability. You also know San Franciscans are demanding greater transparency and accountability from you about what is happening with LHH's potential closure. Your continued secrecy must end for the sake of LHH's residents!

Dr. Teresa Palmer stated that the Root Cause Analysis Report was created by DPH consultants and should be made available to the public. She does not appreciate the lack of transparency regarding these discussions held in closed session.

B) Vote on whether to hold a Closed Session.

Action Taken: The Committee unanimously voted 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 PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

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).

5. POSSIBLE DISCLOSURE OF CLOSED SESSION INFORMATION

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

6. ADJOURNMENT

The meeting was adjourned at 5:09PM.