Dan Bernal President

Laurie Green, M.D. Vice President

Edward A. Chow, M.D. Commissioner

Susan Belinda Christian, J.D. Commissioner

Cecilia Chung Commissioner

Suzanne Giraudo ED.D Commissioner

Tessie M. Guillermo Commissioner

# HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

London N. Breed Mayor Department of Public Health



Grant Colfax, MD Director of Health Mark Morewitz, M.S.W. Executive Secretary

TEL (415) 554-2666 FAX (415) 554-2665 Web Site: <u>http://www.sfdph.org</u>

<u>MINUTES</u> <u>HEALTH COMMISSION MEETING</u> Tuesday March 21, 2023 4:00 p.m. 101 Grove Street, Room 300 San Francisco, CA 94102 & via Webex

#### 1) CALL TO ORDER

- Present:Commissioner Dan Bernal President<br/>Commissioner Laurie Green, MD, Vice President<br/>Commissioner Edward A. Chow M.D.<br/>Commissioner Cecilia Chung<br/>Commissioner Tessie Guillermo
- **Excused:** Commissioner Susan Belinda Christian, J.D. Commissioner Suzanne Giraudo, Ph.D

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

#### 2) HEALTH COMMISSION OFFICER ELECTIONS

Dan Bernal, President, introduced the item.

#### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

I congratulate Commissioner Bernal on re-election as Commission president. I urge Bernal and the full Health Commission take action: Exercise your duties as LHH's governing body: Direct LHH's acting CEO Roland Pickens to submit a written waiver request to CMS/ CDPH asking for an exemption to CMS' no more than two-patients-per-room rule! Mr. Pickens previously misled us, asserting legislation was pending in the U.S. House of Representatives to "grandfather" three-person rules. That 2019 Proposed Rulemaking legislation appears to have been completed. 42 CFR §483.90(e)(3)(ii) — dated 3/3/2023 — provides survey agencies (CDPH) may permit and grant a variation on patients-per-room when facilities request in writing an exemption request that the variation to 42 CFR §483.90(e)(1)(i) "will not adversely affect residents' health and safety." Given the severe shortage of San Francisco's SNF beds, this Commission has an ethical duty to seek a written waiver to save LHH's 120 beds. Do "everything you can"!

### Commissioner Comments:

Commissioner Guillermo nominated Commissioner Green for Vice President. She stated that Commissioner Green has shown dedication to the mission of Health Commission and concern for all residents of San Francisco. She noted that Commissioner Green engages in immense preparation before meetings and is incredibly dedicated to serving in her Health Commission role.

Commissioner Green nominated Commissioner Bernal for another term as President, noting that his wise reading of people and situations, as she has witnessed in his involvement in the LHH recertification process, is integral to the Health Commission leadership.

Commissioner Guillermo stated her appreciation for the skillful leadership of Commissioners Bernal and Green during very difficult years.

Commissioner Chow expressed gratitude to the leadership of Commissioners Bernal and Green, noting that over its 37-year history, the Health Commission has ensured that the public can be heard and that the Commission can action on behalf of the public's interests.

Commissioner Chung noted that both Commissioners Bernal and Green have very busy careers and have had to juggle enormous responsibility during the unprecedented pandemic.

Commissioner Green stated that she is honored to be able to continue in the Vice President role. She is deeply appreciative of the collegiality of the Commission and to work with innovative DPH leadership.

Commissioner Bernal thanked his fellow Commissioners for their kind words and looks forward to continued work to achieve LHH recertification, find solutions to address San Francisco's overdose crisis, implement the DPH Racial Equity Plan and Mental Health SF, and advance San Francisco's Getting to Zero Initiative.

<u>Action taken</u>: The Health Commission unanimously elected Commissioner Laurie Green, MD as Vice President.

Action taken: The Health Commission unanimously elected Commissioner Dan Bernal as President

### 3) <u>GENERAL PUBLIC COMMENT</u>

#### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Following LHH's 2019 sex abuse scandal — which scandal cost the City at least \$1,867,211 to date in fines, penalties, lawsuit settlements, and CAO expenses — SFDPH released a "60-day Laguna Honda Reform Plan" in August 2019. Metadata shows the Plan was authored by Troy Williams, SFHN's Chief of Quality Officer. The Reform Plan claimed an overarching goal:

"There is more to reform LHH than just coming into compliance with regulatory findings. The goal for LHH is to build a best-in-class long-term care residential facility worthy of the patients and the people of San Francisco."

Unfortunately, SFDPH/SFHN kept operating LHH as an acute-care hospital, not a skilled nursing facility. The Reform Plan asserted SFHN would re-organize LHH's Quality Management Department. Despite LHH's purported Quality Management re-organization in 2019, LHH's quality improvement problems persist to this day. Thanks to Williams' and Dr. Colfax's leadership failures, LHH's 2019 Reform Plan was a complete failure.

### 4) <u>LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER (LHH) CLOSURE PLAN AND CMS</u> <u>RECERTIFICATION UPDATE</u>

Roland Pickens, MHA, FACHE, Acting LHH CEO, presented the item.

### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Pickens' Slide #10 continues asserting CMS still hasn't accepted and approved LHH's "Revised Closure Plan" initially submitted on 12/11, with additional corrections CMS requested on 1/13 and 1/18 finally submitted on 2/1/23 to CMS. It's inconceivable six weeks **after** requested changes were submitted to CMS, the "Revised Closure Plan" still isn't approved. I submitted a complaint with CMS/ CDPH asserting Pickens, LHH, SFDPH, and this Commission are violating LHH Settlement Agreement paragraph 41 requiring all parties and signatories of the Agreement to release documents under federal FOIA law and/or our local Sunshine Ordinance. Pickens announced on 3/14/23 LHH's new Biomedical Engineering Department will procure medical devices, and ensure devices are maintained and accessible, including ongoing preventative maintenance. LHH had a weekly wheelchair repair clinic in 2009; a 4/19/2021 Form 2567 inspection survey asserted it's been reduced to a monthly clinic. Biomedical Engineering should assume and resume weekly wheelchair repairs.

Dr. Teresa Palmer stated that the waiver to keep the 120 beds is something many are concerned about. She urged more transparency regarding any effort to submit a waiver to retain the beds and noted it is probably a matter of political will. She is concerned that that the next 90-day survey coincides with the date to reinstate the Transfer and Closure Plan; it does not feel fair for LHH to deal with both at the same time. The public wants to know what deficiencies were found in the most recent survey.

### Commissioner Comments:

Commissioner Chow noted progress in that there were only a few dozen deficiencies in the most recent 90-day survey compared to the last survey. He noted that once CMS completes the survey report, it will be sent to LHH and will be available to the public at the same time. He also stated that May 13<sup>th</sup> is the date set for LHH to have completed all of its milestones and May 19<sup>th</sup> is the date set by CMS to end the suspension of mandatory patient transfers and discharges. He urged LHH to develop a strategy to communicate with residents so they better understand the timeline. Mr. Pickens agreed that there is a confluence of important issue happening at the same time. LHH is doing all it can to get clarity from all partners so patients and the community can be updated.

Commissioner Bernal thanked the LHH team for its work on the recent survey. He noted that the last survey took 3 weeks and the most recent only five days. He acknowledged the incredible number of milestones reached during the entire process. He also stated that LHH is the largest publicly run skilled nursing facility in the country and was effective in controlling COVID among its patients at the height of the pandemic. LHH stands apart from all other skilled nursing facilities in the country and provides critical care its patient population.

Director Colfax acknowledged the leadership of Mr. Pickens and the entire LHH team, who is integrating quality work in everyday patient care. He noted that in the last survey, LHH had 124 findings and in the most recent, only 23 findings, showing progress.

### 5) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS

Commissioner Tessie Guillermo, LHH JCC Chair, stated that at the March 14<sup>th</sup> Laguna Honda JCC meeting, the committee discussed a presentation very similar to what Mr. Pickens shared this meeting. At the time, the CMS surveyors were still onsite, so there was less information about how long they would stay and what they would find. The JCC also reviewed the policies included on the Consent Calendar and recommended that the

full Health Commission approve them. Due to the CMS survey activities, the JCC meeting was shortened, and the Regulatory Affairs and Hiring and Vacancy reports were included on the agenda but not presented by staff. Both items were available for the public to make comments. In closed session, the committee approved the Credentials Report and PIPS Minutes report.

### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Noticeably missing from Commissioner Guillermo's summary of last Tuesday's LHH-JCC meeting is any mention of the LHH-JCC's Closed Session update on 3/14 on both LHH's Medicare Recertification and LHH's Revised Closure Plan. Roland Pickens announced last Tuesday before the JCC's Closed Session LHH's second "90-Day Monitoring Survey" had reportedly begun just prior to Tuesday's March 14 LHH-JCC meeting. Pickens announced today LHH's second "90-Day Monitoring Survey" concluded on 3/17/23, and 23 new deficiencies were discovered, assuming that's not "minimized" spin. Members of the public and LHH's residents shouldn't have to wait a probable month for LHH's QIE contractor — HSAG — to issue additional "Root Cause Analysis" report and another "Action Plan" detailing results and findings from the second "90-Day Monitoring Survey." You should release CMS'/CDPH's inspection results Form 2567 immediately. Commissioner's Guillermo, Green, and Chow have an ethical duty to disclose specific 3/14/23 Closed Session discussion of LHH's Revised Closure Plan.

### 6) <u>CONSENT CALENDAR</u>

#### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Regarding this Consent Calendar for approval of this slew of LHH policies and procedures, it remains shocking this Health Commission still hasn't reviewed and updated LHH's Nursing Restorative Care policy D-1.0 to respond to Root Cause 8, Lack of a Formalized Restorative Nursing Program in the Residents Rights/Freedom From Harm section in the first Root Cause Analysis report dated 12/1/22. Even earlier, as far back as LHH's first "Mock Survey" conducted on 6/28/22 identified problems with the Restorative Nursing program and recommended Nursing take Corrective Action to re-open the Restorative Gym for residents. Nine months later it remains problematic. LHH's subsequent "Action Plan" report claimed a "gap analysis" on Restorative programming would be completed by 1/25/23, and a "Scope of Services" document defining parameters and updating Restorative policies would be completed by 2/8/23. Today is March 21. Were these two documents completed? When will you update LHH's Restorative Nursing policy?

#### Commissioner Comments:

Commissioner Green stated that the policies are well thought out and incorporate Action Plan initiatives and Phase 3 regulation implementation.

Commissioner Chow stated that he reviewed all the policies and concurs with his fellow LHH JCC members' recommendation for the full Health Commission to approve the policies.

Commissioner Guillermo thanked Commissioners Green and Chow for their thorough review of the policies.

Action Taken: The following items were unanimously approved:

<u>Item</u>	<u>Scope</u>	Policy No.	Policy Title
1	Facility-wide	01-12	Compliance Program
2	Facility-wide	01-14	Compliance Program Discipline
3	Facility-wide	22-01	Abuse and Neglect Prevention, Identification,
			Investigation

Health Commission March 21, 2023 Page 4

			Protection, Reporting and Response
4	Facility-wide	22-03	Resident Rights
5	Facility-wide	23-02	Completion of Resident Assessment
			Instrument/Minimum Data Set
			(RAI)MDS)
6	Facility-wide	24-28	Behavioral Health Care and Services
7	Facility-wide	29-04	Cremation Assistance
8	Facility-wide	31-02	Hospital Equipment and Supplies Budget and
			Procurement
9	Facility-wide	35-04	Inventory and Disposal of Hospital Property
10	Facility-wide	45-05	Molly's Fund - Assistive Technology Program
11	Facility-wide	50-04	Enteral Nutrition Charge Procedures
12	Facility-wide	60-01	Quality Assurance Performance Improvement
13	Facility-wide	65-01	Procedures for Grant Application, Acceptance and
			Expenditures
14	Facility-wide	72-01 C21	MRSA Testing
15	Facility-wide	72-01 F2	Disinfection for Isolation Room
16	Facility-wide	72-01 F11	Classification of Reusable Medical Devices and
			Processing Requirements
17	Facility-wide	72-01 F13	Cleaning and Disinfecting Non-Critical Resident Care
			Equipment
18	Facility-wide	72-01 B6	Intravascular Device Guidelines
19	Facility-wide	72-01 B8	Medication Handling/Dispensing Guidelines
20	Facility-wide	72-01 B11	Respiratory Care Guidelines
21	Facility-wide	72-01 B13	Urinary Catheterization Guidelines
22	Facility-wide	72-01 C19	West Nile Virus
23	Nursing	C 3.X	Documentation of Care - Acute Unit
24	Nursing	J 5.0	Oxygen Administration

7) <u>LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER POLICY:</u> Revisions to the Medical Services D08-07 Laguna Honda Psychiatry Substance Treatment and Recovery Services (STARS) policy Claire Horton, MD, MPH, Chief Medical Officer, San Francisco Health Network, and Acting LHH Chief Medical Officer, and Yifang Qian, MD, PhD, LHH Chief of Psychiatry, presented the item.

Mr. Pickens thanked Dr. Qien and Dr. Horton for the improvements to LHH behavioral health services. He also thanked Dr. Horton for taking on the role of LHH Acting Chief Medical Officer and noted that Neda Ratanawongsa, MD, MPH has been hired to take on the Interim LHH Chief Medical Officer position.

### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

It's good seeing in these 3/7/23 minutes testimony I presented noting LHH's "Action Plan" reveals every LHH Department is shockingly full of **basic** problems. It's a damning admission LHH's MDS system, MDS Coordinators, and MDS Department and Quality Management Department aren't doing their jobs preparing Comprehensive Care Plans and providing Quality of Care. Of 21 milestones related to the MDS function, one is to create a "Charter" to establish a new "Resident Care Conference" (RCC) — a step above the IDT structure. The "Charter" and revised "MDS Policy" was scheduled for approval by 3/14/23, because it involves a new policy. That policy must be scheduled on the JCC's and Commission's next meeting agendas.

It was ironic hearing Pickens's just state Dr. Horton will continue to have her SFHN "tentacles" around LHH. "Tentacles" must a Freudian slip: SFHN's tentacles led to mismanagement of LHH for 18 years, driving LHH's decertification.

### Commissioner Comments:

Commissioner Chow commended Dr. Horton for taking on the role of LHH Acting Chief Medical Officer. Regarding the policy, he asked for clarification regarding the difference between specialty and non-speciality types of service. Dr. Qian stated that specialty services include a whole spectrum such as counseling, substance use, and service planning provided by licensed practitioner. Non-specialty services include trauma informed approaches for anyone referred to the team; this paradigm is embedded in all services provided to engage patients in substance use services and care plans.

Action Taken: The policy was unanimously approved.

### 8) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF MARCH 7, 2023.

Action Taken: The Health Commission unanimously approved the March 7, 2023 meeting minutes.

### 9) DIRECTOR'S REPORT

Grant Colfax MD, DPH, Director of Health, presented the item.

### PRIORITIZING WOMEN'S HEALTH AT DPH

March is Women's History Month and an opportunity to highlight the contributions of women to events in history and contemporary society. There is a vast amount of work that Team DPH does to promote and protect the health and wellness of women and girls, including trans women and nonbinary people, in our hospitals and clinics, and with our programs throughout the City.

At DPH, we strive to break down barriers to care and provide quality health services to women and girls at every stage of life. We promote health equity for all, particularly for historically underserved and vulnerable populations, such as BIPOC women, asylees and refugees, immigrants, LGBTQIA+, and women experiencing homelessness.

We are proud to provide the highest quality health care throughout DPH. Our clinical services for children, families, and pregnant people are top notch and grounded in community partnerships to increase resources throughout San Francisco.

Beyond the clinical side of health care, DPH offers public health interventions in cancer navigation, food security and other issues that differently impact women and families. Our policy, data science, and community engagement endeavors keep us informed and guide us on how to make the greatest impact on the people we are honored to serve.

Here are some women's health facts about DPH that we are proud to celebrate this March:

- Our robust network of caregivers is aligned in the objective to provide safe and effective health care for all people who seek to terminate an unwanted or unsafe pregnancy.
- The Women's Options Center at ZSFG is one of the only programs in the country where women can access abortion services at a public hospital.
- We offer prenatal care in more than 20 languages at ZSFG and at our Primary Care clinics.
- The Black Infant Health Program, aimed at reducing perinatal health disparities, provides case management, mental health support, and group sessions for pregnant and parenting Black/African American people.
- Maternal Child and Adolescent Health's Field Public Health Nursing program provides public health nurse visits during pregnancy and after delivery to help ensure a healthy pregnancy and prepare new parents.

Health Commission March 21, 2023 Page 6

- Castro Mission Health Center's co-located Dimensions Clinic provides primary care and integrated behavioral health to adolescents and transitional aged youth, with a particular focus on LGBTQIA+ youth and youth experiencing homelessness.
- The Abundant Birth Project, which provides supplemental income to pregnant people impacted by health and economic disparities, is expanding to four more counties in the state based on its success in San Francisco.
- The Team Lily program and Perinatal Stabilization program supports pregnant people experiencing homelessness, substance use disorders, incarceration, intimate partner violence, and mental health disorders.
- The <u>DontThinkKnow.org</u> program provides free home tests for chlamydia and gonorrhea to girls and women ages 12-30.
- DPH has mental health and substance use disorder treatment programs specifically tailored for women, women with small children, and transgender and gender nonconforming adolescents and adults.
- DPH operates and/or supports more than 100 behavioral health programs for children, youth and families.
- DPH's mobile crisis team responds 24/7 to crisis interventions for children and adolescents.
- Here at DPH, 69% of our department is comprised of women!

## HIGHLIGHTING WORLD TB DAY 2023 EVENTS

Each year, we recognize World TB Day on March 24. This annual event commemorates the date in 1882 when Dr. Robert Koch announced his discovery of the bacillus that causes tuberculosis (TB).

World TB Day is a day to educate the public about the impact of TB around the world, share successes in TB prevention and control and raise awareness of the challenges that hinder our progress toward the elimination of this devastating disease. This week, DPH's Disease Prevention & Control Branch would like to highlight <u>the following events</u>:

- Our 2022 <u>Annual TB Bulletin</u> with an updated incidence map and other data will be published on March 24<sup>th</sup> after publication of the CDC's <u>MMWR</u> update and release of <u>CDPH TB data tables</u> for 2022.
- The San Francisco TB Clinic will be featured in a <u>World TB Day Symposium</u> hosted by the UCSF TB Center. In addition to moderated talks with the TB Clinic medical and nursing team, a San Francisco TB Survivor will share her story.
- Staff members from SF TB Prevention and Control will be hosted by the Community Living Room, a collaboration of <u>San Francisco Community Health Center</u>, <u>Code Tenderloin</u> and <u>City Hope</u> to provide education about TB prevention and testing resources. (When: 12:00 2:00pm on March 23, 2023, Where: City Hope Café, 750 Ellis St)
- San Francisco City Hall will be illuminated in red in recognition of World TB Day on the evening of March 24<sup>th</sup> joining prominent landmarks around the country and the world

# VISION ZERO SF

Vision Zero SF is the City's road safety policy that builds safety and livability into our streets, protecting the one million people who move about the City every day. Vision Zero SF is an interdepartmental collaborative, committed to building better and safer streets, educate the public on traffic safety, enforce traffic laws, and adopt policy changes that save lives. The Population Health Division (PHD) of DPH is one of Vision Zero SF's collaborative partners, and they have recently shared the following 2023 year-to-date data regarding traffic fatalities in our City:

	2023		2022		2021		2020		2019		2018	
Traffic Victim	Feb. Count	YTD Total										
People Killed While Walking	0	3	0	1	2	3	1	1	1	3	1	1
People Killed While Cycling	0	0	0	0	0	0	0	0	0	0	0	0
People Killed While Riding a Standup Powered Device	0	0	0	0	0	0	0	0	0	0	0	0
People Killed While Riding in a Motor or Transit Vehicle	1	1	0	1	0	0	0	0	0	0	0	0
People Killed While Riding outside a Motor or Transit Vehicle	0	0	0	0	0	0	0	1	0	0	0	0
People Killed While on a Moped	0	0	0	0	0	0	0	0	0	0	0	0
People Killed While on a Motorcycle	0	0	0	0	0	0	0	1	0	0	0	0
People Killed While Driving	0	1	0	0	0	1	0	1	1	1	0	1
TOTAL	1	5	0	2	2	4	1	4	2	4	1	2

The <u>Vision Zero Fatality Reporting Map</u> will be updated to reflect this data shortly, and the memo will be posted to the <u>Vision Zero SF website</u>. Thank you to PHD's Center for Data Science Branch for enabling DPH and the City & County of SF to apply data towards improving public health.

#### RECOGNIZING ENVIRONMENTAL HEALTH BRANCH'S HAZARDOUS MATERIALS UNIT TEAM

Last month there was a house explosion that occurred in the Sunset District. The San Francisco Fire Department and Police Department responded to the incident and suspected that the explosion may have been caused by one or more hazardous materials and requested DPH's assistance. The DPH Environmental Health Branch (EHB) maintains a group of very well-trained hazardous materials emergency responders who are available to respond to incidents like these on a 24/7 basis. Team members receive hundreds of hours of training and participate in multi-agency drills year-round. In addition, the EHB responders maintain and calibrate highly specialized analytical instruments on their emergency response vehicle. Jonathan Piakis, CIH, was our on-call responder for the incident and he was able to use a portable device to analyze and identify a variety of unknown materials at the incident. This information was critical in allowing the other emergency responders to understand the potential health risks of the materials and to make decisions about how to respond. In addition, Jonathan will be providing expert testimony at the criminal trial for this event. The valuable service this DPH team provides for the City dates back more than 30 years and was created in coordination with the San Francisco Fire Department. The Hazardous Materials Unit team rarely receives any publicity for the work they perform but they are a key component of any response to an emergency involving hazardous materials in San Francisco. They have our gratitude for ensuring the safety of both our City's first responders and residents.

### **COVID-19 UPDATE**

As of 3/15:

- San Francisco's 7-day rolling average of new COVID cases per day is 73 and 85 people are hospitalized, including 10 in the ICU.
- Eighty-six percent of all SF residents have been vaccinated and 65% have received booster dose(s). Thirty-eight precent of residents have received a bivalent booster.

### **DPH in the News**

#### Commissioner Comments:

Commissioner Chow stated that he is pleased to see data showing that the rate of TB prevalence in Asian and Pacific Islanders is one third of the 2000 rate, when he and Supervisor Tang were interviewed for an article in Asian Week about this data. He commended the DPH for its work on this vital issue.

Commissioner Green applauds the DPH's innovative work in women's health. It was announced this week that maternal mortality is higher than it has been since 1965, and that is before the travesty and destruction that the Supreme Court's recent Dobbs Decision will have. She has hope that the DPH can become leader for birthing people and those seeking contraception in the way it was in the past for people with HIV.

#### 10) OTHER BUSINESS:

Commissioner Chow requested that the Health Commission adjourn in memory of Tom Hsieh, a former San Francisco Supervisor. He noted that Mr. Hsieh was the first Chinese American to be elected to the Board of Supervisors in a citywide race. Commissioner Chow added that while he was a Supervisor, Mr. Hsieh often checked in with the DPH and Health Commission on public health issues. He was an architect who designed several multi-use buildings in Chinatown. He was also the founding chair of the first Asian Pacific Caucus of the Democratic National Committee in 1978 and served as Vice Chair of the California Democratic Party.

#### 11) <u>CLOSED SESSION</u>

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

#### Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Regarding going into closed session again, it's clear from the discussion topic ("Recent Regulatory Survey") and from presenters listed — LHH's acting CEO Roland Pickens, and two socalled "LHH Co-Incident Commanders," Troy Williams and Baljeet Sangha — that this planned Discussion in closed session will probably be to get more bad news coming out of LHH's second "90-Day Monitoring Survey" that Pickens announced last Tuesday had reportedly begun just prior to Tuesday's March 14 LHH-JCC meeting. As well, you'll be discussing in closed session receiving a Litigation Update involving 12 accusations in appeals filed by Laguna Honda. Observers suspect these appeals may involve the 12 patient deaths following discharge of 57 residents transferred as a result of the disastrous initial LHH Closure Plan last June and July. Indeed, last week's LHH-JCC meeting listed for its Closed Session the JCC would be updated on both LHH's Medicare Recertification and LHH's Revised Closure Plan.

B) Vote on whether to hold a Closed Session in relation to item 11.D below. (Action Item)

Action Taken: The Health Commission unanimously voted to hold a closed session.

C) Vote on whether to hold a closed session in relation to item 11.E below regarding pending litigation and to assert the attorney-client privilege in relation to that closed session discussion.

Motion that the Health Commission convene in closed session with the City Attorney for the purpose of conferring with, or receiving advice from, the City Attorney regarding existing litigation to which the City and County of San Francisco is a party and proposed settlements as described below and whether to assert the attorney-client privilege in relation to those matters. Discussion in open session concerning these matters would likely and unavoidably prejudice the position of the City in the pending litigation matters listed below.

(San Francisco Administrative Code Section 67.10(d); and California Government Code Section 54956.9(d)(3)).

- <u>Action Taken</u>: The Health Commission unanimously voted to assert attorney-client privilege during closed session discussions.
- D) <u>Closed Session Pursuant to Evidence Code Sections 1156, 1156, 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.</u>

### LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER QUALITY UPDATE REGARDING RECENT REGULATORY SURVEY ACTIVITY

(Roland Pickens, Director, San Francisco Health Network; Troy Williams, Chief Quality Officer, San Francisco Health Network; and Baljeet Sangha, Chief Operating Officer, San Francisco Health Network)

E) <u>Closed Session Pursuant to San Francisco Administrative Code Section 67.10(d); and California</u> <u>Government Code Section 54956.9(d)</u>.

### FOR DISCUSSION: LITIGATION UPDATE

IN THE MATTER OF THE APPEALS BY: CITY AND COUNTY OF SAN FRANCISCO, DEPT OF PUBLIC HEALTH DBA LAGUNA HONDA HOSPITAL & REHABILITATION CENTER, 375 Laguna Honda Blvd., San Francisco, CA 94116 (12 Accusations).

(State Department of Public Health, CDPH Case Nos. 23-AL-LNC-60224, 23-AL-LNC-60225, 23-AL-LNC-60226, 23-AL-LNC-60227, 23-AL-LNC-60228, 23-AL-LNC-60229, 23-AL-LNC-60231, 23-AL-LNC-60232, 23-AL-LNC-60233, 23-AL-LNC-60234, 23-AL-LNC-60235, and 23-AL-LNC-60236)

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

1. If Closed Session is complete, 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)

 If Closed Session is complete, 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)).

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

### 12) <u>ADJOURNMENT</u>

The meeting was adjourned in memory of Tom Hsieh at 6:43pm.