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
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MINUTES HEALTH COMMISSION MEETING

Tuesday May 2, 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

Commissioner Laurie Green, MD, Vice President

Commissioner Edward A. Chow M.D.

Commissioner Susan Belinda Christian, J.D.

Commissioner Cecilia Chung

Commissioner Suzanne Giraudo, Ph.D Commissioner Tessie Guillermo

The meeting was called to order at 4:04pm.

2) LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER (LHH) CLOSURE PLAN AND CMS RECERTIFICATION UPDATE

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

Public Comment:

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

Mr. Pickens' hopes to apply for recertification soon after LHH's third 90-Day Monitoring Survey in May or June. LHH needs to pass two consecutive standard health surveys before it can gain recertification. Those two "clean" surveys have to have 12 or fewer deficiencies rated less than an "E" S/S rating ("No Actual Harm" or lower) before CMS will accept a recertification application. But LHH had received 23 deficiencies during the Second Monitoring survey, two of which were at a level of "F" — widespread, Level 2 "No Harm" deficiencies. LHH won't be eligible to submit a recertification application until after September, at the earliest. Admissions to LHH won't resume before September, or by the end of the year. By then LHH's census will be 450 residents, or fewer, than its census of 530 residents on 4/22/23. Between now and the end of 2022, there will be lots more out-of-county patient dumping.

Dr. Teresa Palmer, made verbal comments and submitted the following summary:

How will LHH find safe, local and appropriate placements for those who do not meet eligibility requirements for ongoing long term care at LHH?How will the rights of residents evicted to other nursing homes to have a say in what is best for them be honored? We are hearing that people who need a nursing home bed have to go to the Central Valley and Southern California or farther-to low quality nursing homes. Given the death rate from previous discharges, the public has a right to detailed information on how any discharge will be accomplished. It does not seem possible, in current circumstances, to truly honor the safety, preferences and care needs of evicted nursing home residents. To prevent death and violation of resident rights is CMS/CDPH admitting to the need for an extension of the May 19 date for evictions? No evictions, no closure, no bed cuts!

Michael Lyon, Gray Panters, stated that the LHH closure plan is something you should be ashamed to be part of. The plan to transfer patients is shameful too. There are no places in San Francisco that will be able to take these people.

Dr. Teresa Palmer stated that there is nowhere for people to go in San Francisco. There is no way of reviewing what happened to people who were transferred last time and the closure plan does not include any tracking about what harm has been done post transfer. This is extremely dangerous. It will make CMS look bad and will lead to more endless lawsuits against the City, as we see in this closed session. Not sure how transfers can resume without harm to patients and the governing agencies forcing them to leave. She would like to hear more about the 120 bed cuts.

Joseph Urban appreciates the DPH administrations attempts to persuade CMS to postpone the forced transfer and relocation program. The proposed new closure plan is inadequate and deadly. The new plan seems to be a redo of last summer's process with a preliminary assessment of the patient's risk for transfer trauma. There is no post-transfer assessment. It is alarming that there was not a post-mortem assessment, which should be standard procedure. Without this analysis there is now way to prevent similar transfer deaths from occurring. Transfer trauma is experienced at the new facility so there needs to be post-transfer assessment and check-in.

Norm Dagelman, Gray Panthers, asked how rights of residents evicted to other facilities will be taken into consideration. He is hearing that people needing a skilled nursing bed must be transferred to locations as far away as the Central Valley. The facilities to which they are transferred are lower quality nursing homes. The public has the right to understand how any forced discharge will be accomplished. No evictions, no closure, and no bed cuts.

Commissioner Comments:

Commissioner Bernal is concerned about the looming deadline for restarting transfers and discharges and thanked Mr. Pickens for vocalizing LHH's ongoing requests to CMS to pause the mandatory transfers and discharges. It is the Commissioners hope to receive notice of a continued pause to stop the anguish for residents and families, and the staff. Mr. Pickens stated that Director Colfax has indicated to CMS that it is in everyone's best interest, including residents, families, and community, for the pause on mandatory discharges and transfers, to be extended. He added that residents have had the opportunity to voluntarily request to transfer to another facility and none have made that request.

Commissioner Bernal stated that since LHH is not a currently CMS certified facility, it is necessary that LHH be recertified first in order to make a request to CMS to ask for a waiver regarding the 120 beds. He acknowledged that the Commission shares the community's concern about the lack of skilled nursing beds in San Francisco. He asked Mr. Pickens to confirm that it is the Department's intention apply for a waiver to keep the 120 beds at LHH after recertification. Mr. Pickens stated that CMS has made it clear in verbal interactions that recertification must be the number one priority for LHH. Recertification means bringing all LHH operations into compliance with CMS rules and regulations. This includes limited the number of beds per room to two during the recertification process. He added that LHH is able to restore the rooms if and when needed. CMS

indicated verbally that a request for a waiver would not be received well before recertification is achieved. Mr. Pickens reiterated that maintaining the 120 beds is a very important goal, especially given the dearth of skilled nursing beds in San Francisco.

Commissioner Guillermo thanked Mr. Pickens for the presentation. Regarding the timing of the next 90- day survey, she noted that the second 90-day survey was not 90 days from the first survey; therefore the next survey could be at any time. Mr. Pickens confirmed that this is correct, the next 90-day survey could take place at any time. He added that LHH expects to apply for recertification sometime in July or August. The first monitoring survey was a full comprehensive survey; CMS looked at every policy and process. The second survey was an abbreviated survey and had fewer findings. It is his understanding that the third survey will be a comprehensive survey. LHH expects to rate better than the first survey but likely will have more findings than the second, because that one was an abbreviated process.

Commissioner Guillermo asked the amount of time it took for LHH to receive survey results, a 2567 form, from the first surveys. Mr. Pickens stated that it took a few months to receive the results from the first survey and the results from the second survey came back a bit quicker. He hopes the results of the next survey come back quicker.

Commissioner Chow asked Mr. Pickens to confirm that under the current agreement with CMS, ongoing funding and the current pause on mandatory discharges is depended on LHH continuing to make progress towards recertification. Mr. Pickens stated that this is correct, noting that CMS has not defined what the term progress is. He noted that LHH continues to focus on completing the milestones, which show progress on concrete measures.

Commissioner Chow noted that the previous closure plan required that all residents be discharged or transferred within 4 months, which was not realistic given the limited number of skilled nursing beds available in the Bay Area and the state. He asked if the new closure plan has a similar timeline for discharging residents. Mr. Pickens stated that the new closure plan requires that LHH make best efforts to identify each step of a discharge plan based on the CDPH manual for patient discharges; this plan preserves the right for residents to file an appeal. He noted that changes in CalAIM give responsibility of adjudicating these appeals to the state and San Francisco Health Plan. Mr. Pickens stated that each resident is reassessed every 90 days by interdisciplinary teams to evaluate their level of care needs.

Commissioner Green asked if expectations are that during the third survey that new yet-unidentified issues may be brought out or whether it will be a refinement of issues already noted in previous survey findings. Mr. Pickens stated that the second monitoring survey and action plan milestones reflect on previous work; the QIE ensured that completed work was appropriately documented. He noted that it is unclear on what to expect from the third monitoring survey, but that LHH will continue to work with the QIE to develop root cause analyses and complete relevant milestones to address issues found during surveys.

Commissioner Christian asked if results of the 90-day resident reassessments are shared with the residents. Mr. Pickens stated that residents are very involved in developing their care plans. Regarding the assessments, the residents are involved as appropriate. If it is determined that a resident no longer needs skilled nursing care, LHH communicates this information to the resident and/or their guardian.

3) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF APRIL 18, 2023.

Public Comment:

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

These 4/18/2023 minutes report I testified during the JCC's 4/4/23 meeting Pickens repeated "We are doing everything we can to pursue the process [of submitting a waiver]." Commissioner Green asked questions about CDPH precedents granting room capacity waivers to other SNF's. I'm aware other SNF's in California have received waivers, some allowing four-person and six-person occupancy. Green asked, "What are the steps regarding a waiver request for the 120 beds, and whether they can be [reinstated] if [demand] is needed? Do we have to be re-certified to apply for a waiver for the 120 beds?" Green and Pickens appear looking for a precedent, which is unnecessary given that 42CFR §483.90(e)(3)(ii) provides that survey agencies — here, CDPH — may grant a waiver to its number-of-patients-per-room rule when facilities request in writing an exemption that it "will not adversely affect residents' health and safety." That's the "precedent" Green, Pickens, and LHH need.

Action Taken: The Health Commission unanimously approved the minutes of the April 18, 2023 meeting.

4) GENERAL PUBLIC COMMENT

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

I published an "Open Letter" to Governor Newsom on the Medium.com website noting that on 7/26/2022 San Francisco's Board of Supervisors passed Resolution #365-22 addressed to Newsom, Dr. Tomás Aragón, director of CDPH and the State Public Health Officer, and Dr. Mark Ghaly, director of CDPH and the State Public Health Officer asking for a permanent pause on discharges from LHH during the pendency of LHH's application to become recertified. My "Open Letter" asked Newsom to work with Dr. Aragón and Dr. Ghaly, to collectively use their authority to intervene in the mandatory discharges of LHH's residents. The Board's Resolution was passed unanimously by our 11 Supervisors, but was inexplicably returned unsigned by Mayor London Breed. It was submitted to the Governor, and Doctors Aragón and Ghaly nonetheless. Unfortunately, today there was no mention by Dr. Colfax or Pickens about the nationwide search for an LHH Licensed Nursing Home Administrator.

5) DIRECTOR'S REPORT

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

DPH HOSTS CDC DIRECTOR ON HER VISIT TO SAN FRANCISCO

Last week, DPH hosted Dr. Rochelle Walensky, the Director of the Centers for Disease Control and Prevention (CDC), on a tour of our Maria X Martinez Health Resource Center, the newly constructed urgent care and transitional primary clinic in the South of Market neighborhood. California State Health Officer, and DPH alum, Dr. Tomás Aragón also joined. At a roundtable discussion with DPH leadership, we had the opportunity to highlight the successes of our COVID-19 response and our efforts to prevent HIV and mpox; promote uptake of Doxy-PEP to reduce the transmission of sexually transmitted infections; and provide overdose prevention and street care. It was an honor to share our experiences with Dr. Walensky, who was impressed and supportive of our work.

DPH COMMUNITY HEALTH PROGRAM FOSTERS YOUTH-LED FILM PROJECT ON SEXUAL HEALTH AND WELLBEING

The DPH Community Health Equity and Promotion Branch's (CHEP) YUTHE team (Youth United Through Health Education) recently piloted a new program for San Francisco youth ages 15-19. In partnership with BAVC Media and California Film Institute (CAFILM), this project aims to give voice to youth through the medium of digital storytelling. CHEP convened a cohort of 10 San Francisco-based young people for a month-long workshop series where they explored themes of sexual health and wellbeing. Approaching sexual health through a holistic lens, they discussed topics including health and identity, racial inequity, STI/STD prevention, and stigma. At the end of March, the youth participants took what they learned in these workshops to craft a personal short film on a topic meaningful to them. During a spring break intensive, our partners at BAVC Media

coached the youth through the creation of their short films, helping them through the process of filming, writing a narrative, and editing their footage.

The youth led films at the following link are the results of the project: https://sf.gov/yuthe. Please help us celebrate the wonderful work of our youth!

DPH CENTER FOR LEARNING & INNOVATION (CLI) AWARDED 5-YEAR GRANT TO BOLSTER WORKFORCE DIVERSITY

Since 2012, CLI has been continuously funded by the National Institutes of Health to host the Summer HIV/AIDS Research Program (SHARP) — an intensive 10-week mentored research program designed to inspire undergraduates from historically underrepresented minority (URM) groups in public health to consider graduate training and future careers in HIV prevention research. Jointly led by Drs. Jonathan Fuchs and John Sauceda (UCSF), SHARP has successfully recompeted for an additional five years of funding from the National Institute on Drug Abuse. The paid internship supports six scholars annually to pursue research projects with mentors from DPH and UCSF that address the intersection of HIV/AIDS and substance use. Scholars attend weekly seminars throughout the summer, participate in networking events, and present their research findings at a SHARP Scholar Symposium. All fifty-seven scholars enrolled to date have completed the program; 96% self-identify as URM, over 75% are attending graduate school (or intend to do so as they are completing their undergraduate degrees) and a third have worked at DPH in some capacity after SHARP, making it one of the Population Health Division's most highly successful pathway programs.

DPH ENVIRONMENTAL HEALTH STAFF SUPPORT CHANGES TO THE REGULATION OF HAZARDOUS WASTE STORAGE

The Environmental Health Branch's Hazardous Materials and Waste Program regulates nearly all aspects of hazardous materials storage and disposal in San Francisco. One of these areas includes the storage of hazardous materials in underground storage tanks (USTs). Common places to find USTs is at gasoline stations and for backup generators used to provide emergency power for businesses or high-rise buildings.

Effective September 25, 2014, Senate Bill (SB) 445 changed the regulatory program regarding design and construction of USTs. Specifically, this change requires that on or before December 31, 2025, the owner or operator must permanently close a UST if it was designed and constructed with single-walled components.

The California State Water Resources Control Board (SWRCB) is tasked with overseeing this regulatory deadline as it is enforced by local agencies throughout the State. To prepare for this task, the SWRCB requested to conduct joint field inspections with inspectors from the DPH Hazardous Materials and Waste Program. During several inspections the SWRCB was able to gain valuable insights and learn a great deal from DPH Senior Inspectors Thomas Chan and Jin Tang. Thank you to Thomas and Jin for lending your expertise to improving safety measures in San Francisco and across the State.

ZUCKERBERG SAN FRANCISCO GENERAL (ZSFG) HOSPITAL CELEBRATES LINEN WEEK

For the first time, ZSFG joined the nation is celebrating National Linen Week. Linen is an important but unsung item that is critical for patient safety and the prevention of infections. The ZSFG Linen Team is collaborating with the ZSFG Labor and Delivery unit on a reusable pillow initiative. If successful, this project will support the hospital's sustainability efforts and create a cost savings annually. Every year, the hospital receives 2.4 million pounds of clean linens and also generates 2.4 million pounds of soiled linens. This includes scrubs, blankets, sheets, gowns and more. Clean and spoiled linens are delivered and picked up 365 days a year. ZSFG boasts a small but mighty team of 11 staff that support the entire hospital campus! We recognized all the great work of Modesto Hernandez, Henry Garcia, Ruel Ditona, Pete Lumio, Angelo Cromartie, Edita Walker, Minh Lam, Anthony Jackson, Yan Naing Kyaw, and their supervisor Alson Requillo, their new manager Olivia Johnson and

the Support Services Administrator, Chauncey Jackson on social media, on campus screens and in our Daily Digest newsletter. We appreciate the Linen Team at ZSFG for their continual service!

COVID-19 UPDATE

As of 4/26:

- San Francisco's 7-day rolling average of new COVID cases per day is 44 and 56 people are hospitalized, including 9 in the ICU.
- Eighty-six percent of all SF residents have been vaccinated and 65% have received booster dose(s). Forty percent of residents have received a bivalent booster.

DPH in the News

Public Comment:

Art Persyko, Gray Panthers, stated that there are a lot of COVID cases that he has seen personally. He wonders if there is tracking of COVID patients at different institutions and whether they report the status of treating people for COVID at these institutions.

Commissioner Comment:

Commissioner Bernal stated that he is pleased, but not surprised, that Dr. Rochelle Walensky, Center for Disease Control Director, was impressed with work done at the DPH during her recent visit.

6) CITY OPTION UPDATE

Stella Cao, Director of Managed Care, presented the item.

Commissioner Comment:

Commissioner Christian stated that she did not previously know about this option and it sounds similar to a health savings account, in which money will be lost if it is not used. This option seems to let a person save money until they need it, but she asked if there is any risk to losing the money. Ms. Cao stated that starting March 1, 2023, every dollar has a timestamp on it. If an employee does not use the money or contact their office before 2026, the money will be shifted to the City's General Fund. If an employee does contact the office, their accounts can be reactivated, and they can submit receipts for reimbursement. She added that during the 6 weeks of outreach to account holders, \$51 million was paid out to account holders. Jen Louie, DPH CFO, stated that if the account is active, it is not necessary to use the full amount; the money can be maintained in the account as long as at least one claim has been submitted by 2026. Commissioner Christian thanked the DPH for this generous and wise policy, which enables the funds to be used for emergencies.

Commissioner Green asked if it is known whether account holders are still employed who do not fully understand how to access the accounts and those accounts that are really dormant. Ms. Cao stated that there is not a lot of information known about account holders. She noted that most of funds are new, less than 3 years old. Some accounts have a few dollars in them. She noted that through outreach, they home to find about more regarding the intentions of the account holders for these funds.

7) MOU BETWEEN THE DPH AND THE SAN FRANCISCO PUBLIC HEALTH FOUNDATION

Drew Murrell, DPH Controller, presented the item.

Commissioner Comment:

Commissioner Chow noted that the template for donations looks daunting. Mr. Murrell stated that the template is a way to fulfill Sunshine Ordinance requirements for disclosing fund origins. He added that there is still discussion regarding the form to do fundraising letters.

Action Taken: The Health Commission unanimously approved the MOU Between the DPH and the

San Francisco Public Health Foundation.

8) MOU BETWEEN THE DPH AND THE SFGH FOUNDATION

Jennifer Boffi, ZSFG CFO, presented the item.

Commissioner Comment:

Commissioner Chow noted that the MOU states that the DPH Director may request an annual report. He requested that any annual report be brought to the Health Commission.

Action Taken: The Health Commission unanimously approved the MOU Between the DPH and the

San Francisco General Hospital Foundation.

9) FINANCE AND PLANNING COMMITTEE UPDATE

Commissioner Chung, Chair, stated that the Committee reviewed all items on the Consent Calendar and recommended that the full Health Commission approve all items. She added that the committee requested a presentation to the Community and Public Health Committee on the Veggie Voucher program, which is the service provided in one of the contracts being considered for approval.

Mr. Morewitz noted that DPH staff requested that the Horizon's contract be removed for consideration on the Contracts Report since it is still being negotiated.

10) CONSENT CALENDAR

<u>Action Taken</u>: The Health Commission unanimously approved the following:

- May 2023 Contracts Report
- Request for approval of a New Professional Services Agreement
 with Regents of the University of California, San Francisco (UCSF)
 to perform collaborative work that supports pregnant people
 experiencing significant barriers to accessing clinic based
 prenatal care thru the Team Lily program
- Request for approval of a New Professional Services Agreement
 with Regents of the University of California, San Francisco (UCSF)
 to perform collaborative work in order to improve infant and
 maternal health in San Francisco through the Vouchers
- 4 Veggies EatSF program
 Request for approval of a New Grant Agreement with the Homeless Prenatal Program to perform coordinated care services that support pregnant persons, children and their families
- Request for approval of a new software contract with eVideon, Inc. ("eVideon") to acquire
 access to the eVideon Vibe Health patient experience system currently in use at Zuckerberg
 San Francisco General Hospital

- Request for approval of a new contract with Comtel Systems Technology Inc. in the amount of \$793,308, to acquire maintenance services for the Lenel OnGuard/Prism security system in use at multiple facility locations by the Department of Public Health
- Request for approval of the following ZSFG-related items were recommended for approval by the ZSFG JCC at their April 25, 2023 meeting:
 - Revised Radiology Privileges List

11) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS

Commissioner Laurie Green, MD, ZSFG JCC Member, stated that at the April 25, 2023 ZSFG JCC meeting, the committee reviewed the regulatory affairs, hiring and vacancy, CEO, and medical staff report. Highlights included the successful opiate outpatient treatment program survey, the multiple contributions ZSFG makes to improving Black birthing people's health, the introduction of new Chief Administrative Officer, Angelica Journagin, and recognition of several staff including social workers and chief experience officer Aiyanna Johnson. The committee members were pleased to hear that ambulance diversions and left without being seen or treated rates continue to drop, and thanks to the hard, creative work of the Human Resources team, the RN vacancy rate dropped by ten percent. The committee recommended policies approved earlier in this meeting and in closed session they approved the Credentials Report and PIPS minutes report.

12) OTHER BUSINESS:

This item was not discussed.

13) CLOSED SESSION

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

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

Entering closed session to take Action on this lawsuit, refer to my chart. Word is the Public Guardian/Public Conservator lawsuit is upwards of a \$3 million settlement related to the patient sexual abuse scandal in the summer of 2019 during Mivic Hirose reign as LHH's CEO. Even before this settlement, my chart show CMS and CDPH files and penalties and the first Patient lawsuit by Omar Abdullah, a public conservator patient at LHH, had cost a combined \$1.89 million in total. With this proposed settlement for the Public Guardian lawsuit, we're up to \$5 million in costs, with the Johnson et al. Class Action lawsuit alleging a "culture of elder abuse" remaining active and outstanding. Hirose admitted she neglected developing a "culture of patient safety." Given the \$5 million in costs involved, including this settlement for the sex abuse scandal, which will rise to \$8 million, SFDPH should terminate Hirose.

Dr. Teresa Palmer, made verbal comments and submitted the following summary:

This lawsuit from 2016-2019 says that "Defendants' managing agents and employees acted negligently... by failing to ensure that Laguna Honda Hospital maintained an adequate number of staff members, or to ensure that the staff were adequately trained to supervise, maintain and protect Plaintiffs and other Laguna Honda Hospital patients. Defendants also failed to adequately supervise Laguna Honda Hospital staff, by failing to monitor the shortcomings and the sub-standard level of care provided to Plaintiffs and other patients. Defendants' negligence and failure to monitor their staff members, resulted in poor outcomes, severe damages to Plaintiffs and others, as well as multiple Statements of Deficiencies and/or Citations issued by the California Department of Public Health, and multiple claims and/or lawsuits filed against

Defendant." The people of San Francisco need to hear in detail, in an open session, how this will never happen again.

B) Vote on whether to hold a Closed Session in relation to item 13.D below.

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 13.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.

D) 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.

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

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

FOR DISCUSSION AND POTENTIAL PROPOSED ACTION: LITIGATION UPDATE AND POTENTIAL SETTLEMENT OF LITIGATION: Jane Doe 1, et al.

JANE DOE 1; JANE DOE 2; JOHN DOE 1; JOHN DOE 3: JOHN DOE 4; JANE DOE 4; JANE DOE 5; JOHN DOE 5; JANE DOE 6; JANE DOE 7; JOHN DOE 6; JOHN DOE 7; JANE DOE 9; by and through their Guardian ad litem, CHARLES A. JONAS; and JANE DOE 3; JANE DOE 8; JANE DOE 10; and JOHN DOE 2, Plaintiffs, vs. CITY AND COUNTY OF SAN FRANCISCO, CITY AND COUNTY OF SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH, LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER, and DOES ONE through TWENTY-FIVE, Defendants.

(San Francisco Superior Court, Case No. CGC-21-592296)

14) ADJOURNMENT

The meeting was adjourned at 7:17pm.