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**MINUTES  
JOINT CONFERENCE COMMITTEE MEETING FOR  
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER  
May 9, 2023, 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: Baljeet Sangha, Carmen Trinh, Daniela Kim, Jennifer Carton Wade, Lisa Hoo MD,  
Lucia Angel, Mary Ann Salinas, Nawzaneen Talai, Neda Ratanawonga, Sherri Soto,  
Terry Dentoni

The meeting was called to order at 4:01pm.

**2. APPROVAL OF MINUTES FOR MEETING OF APRIL 11, 2023**

Public Comment:

Patrick Monette-Shaw made verbal public comment and submitted the following summary:

I see the minutes include my testimony about Pickens' slide #4 today asserting LHH received 124 deficiencies during its first "90-Day Monitoring Survey" that ended 12/17/22. But HSAG's second "Root Cause Analysis" report dated 1/31/23 regarding the first "90-Day Monitoring Survey" had listed 76 deficiencies — including 56 patient care "F-Tags," plus 20 physical plant (facilities) deficiencies, not 124. The difference between 76 and 124 is 48. Why are Pickens and Dr. Colfax artificially inflating the deficiencies by 48? They appear to be comparing and contrasting the two surveys — a drop from 124 in the first "90-Day Monitoring Survey" to 23 in the second "90-Day Monitoring Survey" — to wrongly claim significant progress is being made. Again, why wasn't the public informed in the first RCA

report dated 1/31/23 about the other 48 deficiencies? Commissioner Chow stated concerns on 4/4/23 about the data discrepancy, which has yet to be explained or clarified.

Action Taken: The LHH JCC approved the April 11, 2023 minutes.

### **3. GENERAL PUBLIC COMMENT:**

Patrick Monette-Shaw made verbal public comment and submitted the following summary:

The reason San Francisco will soon pay over \$3 million to settle a first lawsuit filed by the Public Guardian and Public Conservator alleging elder abuse of patients at Laguna Honda Hospital involves patient sexual abuse in 2019 due to inept City managers. One lawsuit explicitly names Mivic Hirose as a named defendant. The patient sexual abuse scandal that surfaced in June 2019 under former LHH's CEO Mivic Hirose turned out to be LHH's second original sin. That scandal is what brought on the second of two Superior Court lawsuits filed by the Public Guardian and Public Conservator (CGC-21-592296), involving the pending \$3 million-plus settlement the Board of Supervisors will soon have to approve settling. The second lawsuit named as defendants the City and County, the Department of Public Health, Laguna Honda Hospital, and 25 other unnamed "Does" — possibly including senior LHH managers. Why are 25 "Does" hiding behind aliases?

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

Baljeet Sangha, LHH CMS Recertification Co-Incident Commander, and San Francisco Health Network Chief Operating Officer, presented the item.

#### Public Comment:

Patrick Monette-Shaw made verbal public comment and submitted the following summary:

As my written testimony submitted shows, LHH racked up 138 citations from CMS and CDPH in the three-and-a-half years since the patient sexual abuse scandal in 2019, plus another 123 inspection deficiencies during "mock survey" inspections, which led to LHH's decertification exactly one year ago, which hasn't been fixed. My attached chart illustrates it's cost \$55.9 million in expenses — \$27.4 million in Consultant and other decertification expenses; \$2 million and growing in patient sexual abuse penalties, fines and settlements; \$3 million-plus in the first Public Guardian elder abuse and sexual abuse settlements, and another class action lawsuit languishing in Superior Court, and \$23.5 million lost Medi-Cal revenue through 12/31/2022. That \$56 million was due entirely to gross mismanagement of Laguna Honda Hospital by managers lacking experience in running skilled nursing facilities, who ran LHH like it was an acute care hospital. Managers responsible for this mismanagement should all be terminated.

Art Persyko submitted the following written public comment:

The transfers of LHH residents that occurred previously must not resume to avoid a repetition of the transfer trauma and potentially more deaths on top of the twelve people at LHH who already suffered that fate. Unfortunately the additional trauma of uncertainty felt by current residents who are awaiting a decision by CMS on the possible LHH closure and resumption of transfers is occurring now and is an unnecessarily cruel and stressful injury to LHH residents. What is being done by LHH, the SF Health Department, and any other SF or California government body or elected officials to prevent both types of trauma? Will LHH doctors and other care givers act in the best interest of their patients or will they act otherwise in fear for their jobs? To prevent death and violation of resident rights, does CMS/CDPH admit there's need for an extension of the May 19 eviction date?

Commissioner Comments:

Commissioner Green stated that the food trucks seem like a great idea to support staff. She asked for more information regarding finding placements for the residents who no longer need skilled nursing services. Mr. Sangha stated that each individual will have a varied timeline for discharge planning and assessment; LHH wants to ensure the needs of these individuals are met wherever they are discharged. All in this cohort have unique challenges. He added that finding appropriate discharges for these complex individuals is a challenge.

Commissioner Green asked if there are barriers for those wanting to stay in San Francisco. Mr. Sangha stated that some individuals want to stay in San Francisco and others do not have strong opinions about staying in the city.

Commissioner Green is pleased that the hiring process for the Nursing Home Administrator is almost complete. She asked if this person may bring their own team. Ms. Sangh stated that one of the early hiring agency questions was whether the candidates had any recommendations for other LHH positions. If someone is referred, the individual must still go through the full hiring process to determine if they are the best candidate.

Commissioner Chow asked for clarification regarding the number of individuals at LHH who no longer need skilled nursing services. Mr. Sangha stated that there are a little over 40 people in this cohort.

Commissioner Chow asked about whether guardians and family members have input in the discharge process. Mr. Sangha stated that LHH does its best to honor the requests of individuals who are decision makers; sometimes that is the resident and other times it is the guardian or family member.

Commissioner Chow asked for clarification regarding the discharge appeal process. Mr. Sangha stated that LHH is currently working with the San Francisco Health Plan and state to determine the appeal process.

**5. HIRING AND VACANCY REPORT**

Sherri Suto, Principal HR Analyst, DPH Human Resources, presented the item.

Public Comment:

Patrick Monette-Shaw made verbal public comment and submitted the following summary:

It's troubling overall vacancies at LHH has increased again in April to 12.6% with a total of 186.9 FTE vacancies. It's worrisome the lower level job classification code providing direct patient care are short staffed, with the 2303 Patient Care Assistants having 50 vacant positions for a vacancy rate of 12.5% and the 2583 Home Health Aides has a vacancy rate of 31.1% with 19 vacancies

Art Persyko stated when hiring someone responsible for LHH, there has to be constructive corrective feedback loops so standard of care will never again be diminished. He urged the use of best practices for long-term care with accountability measures.

Commissioner Comments:

Commissioner Chow stated that it is amazing that LHH is able to hire nurses in the current hiring climate.

**6. REGULATORY AFFAIRS REPORT**

Geraldine Mariano, Director of Regulatory Affairs, presented the item.

Public Comment:

Patrick Monette-Shaw made verbal public comment and submitted the following summary:

The May 2023 “Regulatory Affairs Report” is worrisome since it reports another 13 allegations of abuse, including 4 resident-to-resident incidents, and 4 staff-to-resident incidents, plus 3 Injuries of an Unknown Source, and 2 major injuries. I had worked in Laguna Honda’s Rehabilitation Services Department where the Physical Therapy Department had implemented a great falls prevention program to prevent major injuries from falls. Why isn’t the falls prevention program preventing more of these major injuries? But more worrisome are the 3 “Anonymous Complaints” in this May report, that are clearly not “Facility Reported Incidents” (FRI’s). It is these anonymous complaints that are going to keep haunting LHH and perhaps dooming LHH’s efforts to become recertified, because you have no idea what is being reported anonymously until CDPH shows up and issues you “Actual Harm” and “Immediate Jeopardy” citations CMS warned you not to get any more of.

**Commissioner Comments:**

Commissioner Green is concerned about staff-to-resident incidents. She asked if surveyors will investigate these issues and asked how this may impact recertification. Nawz Talai, LHH Chief Quality Officer, stated that that any regulatory finding could have an impact on recertification. She noted that CDPH still has approximately 100 older cases pending that have not been investigated.

**7. LAGUNA HONDA HOSPITAL POLICIES**

Carmen Trinh, Data Analytics Manager, presented the item.

**Commissioner Comments:**

Commissioner Green asked to what extend do LHH consultants review the policies brought to the Health Commission. Ms. Talai stated that all policies are reviewed in partnership with the consultants.

Commissioner Chow stated that he appreciates the summary of policy changes. She noted that the abbreviation “SFSO” is used except in policy 22-10 in which SFSD is used. Ms. Talai stated that SFSO is the correct abbreviation; LHH will make a revision on policy 22-10.

Commissioner Chow asked for clarification regarding where the BERT team would fit into the organization chart included on policy 22-10. Ms. Talai stated that LHH will clarify this information through Mr. Morewitz.

**Action Taken:** The LHH JCC unanimously recommended the full Health Commission approve the following:

**May 2023**

<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	20-02	Hospice Care Assessment and Transfer/Discharge Process
2	Facility-wide	22-07_A01	Restraint Free Environment
3	Facility-wide	22-10	Management of Resident Aggression
4	Facility-wide	22-11	Resident Freedom from Abuse on Social Media
5	Facility-wide	22-12	Clinical/Safety Search Protocol
6	Facility-wide	24-06	Resident /Patient and Visitor Complaints/Grievances
7	Facility-wide	24-16	Code Blue
8	Facility-wide	50-02	Resident Trust Account
9	Facility-wide	72-01	C23 Pneumococcal Immunization
10	Facility-wide	75-10	75-10 Appendix H: Visitors Screening Processing
11	Outpatient Clinic	A4	Clinic Appointment Scheduling for Community Clients
12	Outpatient Clinic	C6	Steam Sterilization
13	EVS	X	Equipment, Supplies and Chemicals
14	EVS	XVII	Transport, Delivery Time for Biohazard, Trash and Linen

15	FNS	1.1	Food from Home or Outside Sources Served Directly to Residents
16	Nursing	K 1.0	Assessment and Management of Pressure Injury
17	Nursing	K 3.0	Wound Irrigation and Cleaning
18	Nursing	K 10.0	Prevention and Management of Skin Tears

## **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 Item)
- 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 STAFF CREDENTIALING MATTERS**

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

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

### **QUALITY IMPROVEMENT MEDICARE RECERTIFICATION UPDATE AND QUALITY IMPROVEMENT CLOSURE PLAN UPDATE**

## **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 committee unanimously voted to not disclose discussions held in closed session.

**10. ADJOURNMENT**

The meeting was adjourned at 6:17pm.