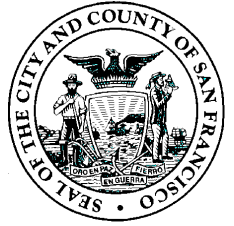


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**MINUTES  
JOINT CONFERENCE COMMITTEE MEETING FOR  
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER**

**February 13, 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, Sandra Simon, Jennifer Carton-Wade, Lily Conover, Lisa Hoo MD, Daniela Kim MD, Nawzaneen Talai, Terry Dentoni, Geraldine Mariano, Carmen Trinh, Naveena Bobba MD

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

**2. APPROVAL OF MINUTES FOR MEETING OF JANUARY 9, 2024**

**Public Comment:**

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

As for these particular meeting minutes — and meetings of the Health Commission and Commission sub-committee meetings — it's insulting this Health Commission NEVER meaningfully addresses legitimate questions raised by members of the public. We NEVER get any meaningful follow-up answers from any of you Commissioners! You seem to ignore members of the public are key "stakeholders" in Commission affairs! As you will hear later during my testimony, damning evidence via a "Declaration" recently filed in a Superior Court lawsuit involving Laguna Honda Hospital by an expert witness, fingers this Health Commission for your many failures as the official "governing body" of San Francisco's Department of Public Health, and particularly as the "governing body" overseeing Laguna Honda Hospital. Part and parcel of

that damning evidence of your failures to provide meaningful oversight is PRECISELY because you refuse to, and fail to, ever meaningfully respond to questions raised by members of the public!

Action Taken: The LHH JCC unanimously approved the January 9, 2024 LHH JCC meeting minutes.

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

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

Should Tommy Thompson Superior Court Case (CPF-20-517064) prevail, eventually forcing this Commission to approve another settlement agreement, you must read the damning indictment of this Commission in the 68-page expert witness Christopher Cherney "Declaration" supporting making the Thompson lawsuit a class action case during a 5/24/2024 hearing. Cherney's Declaration exposes — as I've previously documented — this Commission's abject failures as SFDPH's "Governing Body." It's searing, sad reading. Cherney addresses this Commission's failures adopting the deficient 2019 "60-Day LHH Turnaround Plan" authored by Grant Colfax and Troy Williams as a "plan of correction" to the 2019 "Immediate Jeopardy" citations patient sex abuse scandal under LHH's then-CEO Mivic Hirose's failed "leadership." Cherney fingers 2019 Commissioners Edward Chow, Cecilia Chung, Laurie Green, and Tessie Guillermo for collective oversight failures as LHH's governing body during that scandal that led directly to LHH's eventual decertification and halt of all admissions two years ago in April 2022

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

Roland Pickens, Director and CEO, SF Health Network & Executive Sponsor LHH Recertification Incident Command, presented the item.

#### Public Comment:

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

It's worrisome CMS/CDPH haven't approved the Plans of Correction (PoC) submitted following the Health Inspection survey conducted between 11/27/2023 and 12/1/2023. Typical long claims was to have been a \*\*SECOND\*\* Medicare recertification survey — which isn't the typical process. Why haven't CMS/CDPH approved the PoC yet? If CMS/CDPH asked for revisions to the PoC, Commissioners should inform members of the public LHH was told to revise a deficient PoC. Why hasn't Congresswoman Pelosi and San Francisco's Congressional delegation intervened with HHS Secretary Xavier Becerra to expedite getting LHH recertified? How long does LHH and this JCC think it'll take CMS to "validate" a revised PoC? And how long does LHH and this JCC anticipate it will take for CMS/CDPH to then make a final determination on recertifying LHH into the Medicare reimbursement program, so that admissions — which have been halted for 60 days short of a full two-year period — can resume?

Dr. Teresa Palmer provided comment and submitted the following written summary:

Have the regulators asked for revisions in POC? What will happen if CMS does not validate, and what does validation involve? What do "tiered" admissions mean and when will they begin in relation to Medi-care recertification? The public has a right to see any plan for this. Has there been outreach to nursing home survivors of eviction? Will there be outreach to those San Franciscans forced out of county for SNF care?

Norman Degelman submitted the following written public comment:

Have the regulators asked for revisions in POC? What will happen if CMS does not validate, and what does validation involve? What do "tiered" admissions mean and when will they begin in relation to Medi-care recertification? The public has a right to see any plan for this. Has there been outreach to nursing home survivors of eviction? Will there be outreach to those San Franciscans forced out of county for SNF care?

Carol Bettencourt, Legal Assistance to the Elderly, submitted the following written public comment:

For January, the average daily census shows as 449. LHH should be restored to its full 780 beds and admissions should resume. The residents of San Francisco need and deserve this! What does “tiered” admissions mean and when will they begin? Has there been any outreach to the nursing home residents who had to move out as part of the closure plan? What is the plan for such outreach? Has there been any word since the Plans of Correction were submitted? What is the expected timeline on this?

Commissioner Comments:

Commissioner Chow asked for more information on the survey validation process. Mr. Pickens stated that the validation process is part of the regular survey process. He noted that the validation process may be another survey or an offsite review of documents, depending on how the regulatory prefers to validate the plans of correction.

Commissioner Chow asked if those former residents who no longer met skilled nursing criteria and were discharged, felt comfortable with their final discharge plan. Mr. Pickens stated that part of every LHH discharge process is checking in with the individual after the transfer to ensure they are doing well. He added that 1 person was discharged to coordinated entry housing; 11 people were discharged to board and care facilities; 5 discharged to scattered site housing; 1 individual was discharged to a hotel with a pathway to permanent housing; 2 residents went home to family; and 2 individuals were sent to medical respite programs.

Commissioner Green asked if LHH expects CMS to request more information and/or revisions to the plan of correction submitted. Mr. Pickens stated that CMS usually requests additional information or requests changes to the plan of correction. He added that LHH is ready for this response.

Commissioner Green asked what is the longest amount of time that LHH has had to wait for a CMS responses during the recertification process. Nawzaleen, Talai, LHH Chief Quality Officer, stated that LHH seems to be a CMS and CDPH priority. She is confident that CDPH is actively reviewing all relevant documents and will be preparing a communication to CMS.

Commissioner Green asked if there is anything happening within the city system that would open up more community residential resources, such as purchases of board and care facilities, that could assist with discharges of individuals at LHH who no longer meet skilled nursing level criteria. Mr. Pickens stated that the DPH placement team moved to BHS during COVID and this unit has the budget and staff to access available community resources. He added that Dr. Kunins is working to secure additional residential beds.

Commissioner Green asked how LHH is tracking those individuals who were discharged from LHH during the recertification process. Ms. Simon stated that she and Dr. Lam are leading this work with a team. There has been outreach to some of the former residents; once recertification is achieved, the admission and outreach plans will be finalized and implemented.

Commissioner Guillermo asked if LHH is getting reimbursed by CMS for those individuals at LHH who no longer meet skilled nursing level criteria. Mr. Pickens stated that CMS is paying a lower administrative rate but not the skilled nursing rate.

**5. HIRING AND VACANCY REPORT**

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

Public Comment:

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

The “LHH Vacancy Report by FTE” (Full-Time Equivalent) carrying a title of “December 2023” listing the vacancy rate for all LHH job classification codes carries a run date the data was collected on 11/1/2023 –

12/1/2023. Why wasn't the run date for the status of LHH vacancies at the end of January? The FTE report shows an overall vacancy rate throughout LHH at 13.99%, rounding up to 14%. As of 12/31/2023, total vacancies soared to 212.3. You have to wonder what LHH's total vacancies were on January 31, 2024 and whether overall vacancies have climbed even higher. The overall vacancy rate as of October 2023 (run date ending 10/2/2023) was just 11.11%. That increased to an overall vacancy rate of 12.19% for the November 2023 vacancy report (run date through 10/26/2023) with a total of 180.81 total vacancies. So, instead of a downward trend in overall vacancies, they continue climbing. Why?

Dr. Teresa Palmer provided comment and submitted the following written summary:

Why is the hiring of multiple vacancies in Home Health Aides on hold? Doesn't Laguna Honda need all hands on board to resume readmissions? Are the numbers of vacancies/need for hiring based on the full 780 bed census? Less than 450 residents remain in this 780 bed institution. How will vacant positions affect resumption of readmissions?

Carol Bettencourt, Legal Assistance to the Elderly, submitted the following written public comment:

The number of staff vacancies continues to be concerning. Will these vacant positions affect the resumption of admissions? How will expected budget cuts affect planned hiring?

Commissioner Comments:

Commissioner Green asked if consultants and nursing directors are filling in for nursing managers. Terry Dentoni, Acting LHH CNO, stated that per civil service rules, consultants cannot supervise civic service staff, but can provide coaching and guidance to them. Charge nurses and Nursing Directors can fill in for nursing managers when needed. She added that 4 charge nurses have been promoted to nursing manager positions. She added that LHH seeks nurses with long-term care experience, which is less common.

Commissioner Chow commented that the report indicates that 6 of the 7 open nurse manager positions will be filled.

**6. REGULATORY AFFAIRS REPORT**

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

Public Comment:

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

The January "Regulatory Affairs" report is troubling for a number of reasons. First, the 14 "Facility Reported Incidents" (FRI's) in January involved 12 resident-on-resident and staff-to-resident abuse, despite a declining patient census of just 450 residents. There were an additional two "Adverse Events" —arming because they're never described publicly. Plus yet another "Anonymous" complaint, apparently filed by someone worried about potential retaliatory action against them. Second, the "Plan of Correction (PoC) Update" section of this report clearly stated the Health Inspection survey component of the 12/27/2023 – 12/1/2023 inspection was the FIRST Medication Survey — obviously contradicting information LHH previously misled the public having previously claimed that December inspection was being considered the SECOND Medicare re-certification survey. Which is it: The FIRST or SECOND such survey? Finally, this report enumerates a total of 27 deficiencies identified during the November and December 2023 Medicare inspection surveys, but omitted reporting their respective scope-and-severity findings.

Dr. Teresa Palmer provided comment and submitted the following written summary:

Only 1 of 48 people at LHH awaiting discharge to the community were discharged in January. What is the City/County of SF doing to make sure services are available for safe discharge from LHH so the beds will be used appropriately for those in need? How are budget cuts to services both inside and outside LHH related to this? The regulatory report contains multiple ongoing allegations of abuse, and years of allegations that have never

been investigated by CDPH. This requires further explanation.

Carol Bettencourt, Legal Assistance to the Elderly, submitted the following written public comment:

The number of allegations of abuse also continues to be concerning, especially because so many of them show they have not been investigated. What plan does management have for dealing with these?

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

Carmen Trinh, Data Analytics Manager, LHH, presented the item.

### Public Comment:

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

Why is this LHH-JCC considering adopting a new LHH policy titled “Requesting to Operate Under a CMS 1135 Waiver”? CMS 1135 waivers are issued for several types of contingencies and operational needs unique to any given SNF. Why is LHH creating this new policy, and for what TYPES of operational contingencies? More specifically, has LHH already submitted to CMS an application to obtain a CMS 1135 waiver? If so, on what date was such an application submitted — and for what operational need? Did this Commission approve that submission in advance? If such an application HAS been submitted, why didn’t LHH tell this LHH-JCC or the full Health Commission in open session BEFOREHAND that it would be applying for such a waiver, informing the public of it in ADVANCE of such an application’s submission? After all, LHH was required to obtain Commission approval BEFORE submitting its Medicare recertification application.

### Commissioner Comments:

Commissioner Chow thanked the staff for responding to his questions. He noted that the wheelchair policy should include the chain of command with checking and fixing wheelchairs.

Commissioner Guillermo

requested the LHH JCC receive final policies before the full Commission will vote on them at its February 20, 2024 meeting.

Action Taken: The LHH JCC recommended that the full Health Commission approve the following, with the understanding that LHH JCC members’ questions and comments will be addressed prior to the full Health Commission approval.

## **February 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	70-01 B4	Request for Operating Under a CMS 1135 Waver
2	Facility-wide	23-01	Resident Care Plan Resident Care Team Resident Care Conference
3	Facility-wide	23-02	Completion of Resident Assessment Instrument Minimum Data Set
4	Facility-wide	26-02	Management of Dysphagia and Aspiration Risk
5	Facility-wide	28-05	Custom Wheelchairs
6	Facility-wide	72-01 B5	Transmission-Based Precautions
7	Facility-wide	72-01 C22	Influenza Immunization
8	Facility-wide	72-01 F04	Linen Handling
9	Facility-wide Quarantine	24-16	Addendum to Code Blue Policy During Pandemic and Protective
		Appendix 13	
10	Facility-wide	72-01 A10	Infection Outbreak Investigation and Surge Response
11	Facility-wide	72-01 C01	Alphabetical List of Diseases/Conditions with Required Precautions
12	Facility-wide	72-01 C20	Monoclonal Antibody Therapy for COVID-19 Infection
13	Facility-wide	72-01 E04	Central Supply/Materials Management

14	Facility-wide	72-01 E06	Dental Services
15	Facility-wide	72-01 F05	Standard for Refrigeration Equipment
16	Facility-wide	72-01 F13-1	Attachment 1: Non-Critical Resident Care Equipment Disinfectant Exceptions
17	Facility-wide	72-01 F13-2	Attachment 2: Standard Work for Single-Resident Blood Pressure Cuffs
18	Facility-wide	73-07	Aerosol Transmissible Disease Exposure Control Plan
19	Facility-wide	NA	Warfarin Collaborative Practice Agreement
20	CPD	NA	MM and CS Policies and Procedures
21	Food Services	1.64	Preventative Maintenance
22	Food Services	1.67	Dish Machine QC Checklist
23	Food Services	1.139	Pot machine Temperature Checks
24	MSPP	D01-05	Psychotropic Medication Management
25	Nursing	1.0	Oral and Nasopharyngeal Suctioning
26	Nursing	2.0	Tracheobronchial Suctioning

## **8. MEDICAL STAFF BYLAWS**

Lisa Hoo, MD, LHH, presented the item.

### Commissioner Comments:

Commissioner Chow thanked staff for responding to questions he submitted via email.

Action Taken: The LHH JCC unanimously recommended that the full Health Commission approve the LHH Medical Staff Bylaws.

## **9. 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 QUALITY IMPROVEMENT**

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

### **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).

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

Discussion and vote in open session 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)); and possible disclosure.

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

### **11. ADJOURNMENT**

The meeting was adjourned at 5:36pm.