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MINUTES JOINT CONFERENCE COMMITTEE MEETING FOR LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER March 12, 2024, 4:00 p.m. 101 Grove Street, Room 300

101 Grove Street, Room 300 San Francisco, CA 94102 & via Webex

1. CALL TO ORDER

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

Commissioner Laurie Green, M.D., Member

Excused: Commissioner Tessie Guillermo, Chair

Staff: Roland Pickens, Sandra Simon, Jennifer Carton-Wade, Lisa Hoo MD, Daniela Kim MD,

Nawzaneen Talai, Terry Dentoni, Geraldine Mariano, Carmen Trinh, Naveena Bobba MD,

Grant Colfax, MD, Sherri Soto, Carmen Trinh

Commissioner Chow called the meeting to order at 4:05pm.

2. APPROVAL OF MINUTES FOR MEETING OF FEBRUARY 13, 2024

Public Comment:

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

These 2/13/2024 minutes reveal the Health Commissioners failed to ask any questions at all about data in the January "Regulatory Affairs Report" — data the Commission should have discussed. Of the 15 F-Tag violations in December, 13 of the 15 involved the <u>SAME</u> F-tags that LHH was cited for during the RCA Report #1 (involving eight CDPH inspection surveys conducted between 10/14/2021 and 4/14/2022) when LHH was decertified — and the same F-Tag violations LHH was slapped with during its first "90-Day Monitoring Survey" in December 2022.

Why does LHH continue racking up13 additional recurring F-Tag citations that happened over two years ago? LHH has had two full years to put corrective actions in place, but is still getting hit with three different types of care plan violations, disease prevention and control findings, accident hazards — and WORST of all — failure to report violations in a timely manner (or at all) to CDPH.

Action Taken: The LHH JCC unanimously approved the February 13, 2024 meeting minutes.

3. GENERAL PUBLIC COMMENT:

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

All members of the Health Commission should read an on-line comment posted by a current anonymous LHH employee in response just below Dr. Kerr's and Dr. Rivero's recent Westside

Observer published https://westsideobserver.com/24/2-new-class-action-lawsuit-rebukes-laguna-honda-management.php. The employee — "N.E.C." — notes a problem with the veracity of an HSAG's consultant (Julie Cline) who had been assigned the role of being LHH's "Nursing Home Administrator," and additional information about "Assistant Nursing Home Administrator" Diltar Sidhu hired at LHH. NEC's on-line comment may help end LHH's "culture of silence" brought on by LHH's former CEO Mivic Hirose! Observers like me have waited a long time to see signs Hirose's "culture of silence" comes to a stop, with employees willing to "speak truth to power" as letter writer "NEC" has done. Bravo to them! The Health Commissioners should also read both Dr. Kerr's article, and the two comments I also posted in response, also just below his article.

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:

This 3/12/2024 Executive Team report wrongly states on page 2 survey results showed improvement from prior CMS monitoring surveys with overall less findings and findings of lower scope-and-severity." That's untrue! As my attached DRAFT data analysis chart illustrates LHH received 62 citations between 2019 and 2022 that led to LHH's 4/14/2022 decertification. Since then, during official survey inspections LHH racked up a total of 171 ADDITIONAL citations AFTER decertification. So, citations have tripled! As for the severity ratings, LHH received five "Immediate Jeopardies" before decertification, and earned another five "I.J.'s" after decertification. The Level 3 "Actual Harm" citations INCREASED from five before decertification to seven after decertification. Level 2 "Potential for Harm" citations more than doubled, from 52 before decertification to 123 after decertification. Following completion of the mandatory, three formal "90-Day Monitoring Surveys," so-called "abbreviated complaint surveys" keep yielding almost as many citations as the third "90-Day Monitoring Survey."

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

I am concerned we are not given new information about recertification or admissions. Does delay mean we should be concerned? There have been references to "tiered" admissions. Please show us the plan for resumption of admissions. Plus we should be given more information about what is being done for people who were forced to move out of county when Laguna Honda was under threat of closure. I continue to be concerned that people being told they currently have to leave Laguna Honda because they have been determined to not need skilled nursing care are actually not ready to leave and the alternative placements being offered to them are not adequate or appropriate. These are people who have lived at Laguna Honda for years and face a severe risk of transfer trauma! They should not be threatened with being forced to leave! We do not want to repeat the past disaster.

Norman Degelman submitted the following written comment:

It is 2 months since LHH submitted the required Plans of Correction (POC) to CDPH/CMS. No new information on Medicare recertification is in the Executive Summary. Where is the (expected) request by CDPH/CMS for revision of POC-is silence from regulators a sign that problems have not been adequately addressed? After all will LHH be closed and these most vulnerable San Franciscans evicted to points unknown? This delay in resumption of admissions is a burden to San Franciscans who need a bed at LHH. The 769 bed Nursing Facility part has dwindled to 440 patients. Only 1 of 45 deemed ready to transfer to lower level of care for months has been discharged since January. Does City/County of SF and SF Department of Health have the ability to manage/resume admissions at this indispensable safety net facility? Honesty and transparency PLEASE about help needed so it can be obtained!

Commissioner Comments:

Commissioner Green asked for more information regarding barriers to transferring LHH residents who no longer meet skilled nursing level criteria. Mr. Pickens stated that the 22 individuals who have already been transferred had the least issues relevant to finding suitable transfer plans, although all have complex cases. Those remaining have challenges such as securing and installing durable medical equipment, which needs to be done by a third party. Most need placement in board and care facilities, which are sparse in the Bay Area. He also noted that all residents have appeal rights of any discharge or transfer plan. He added that those individuals who are conserved may need additional external assessments, which take up to 3 months to complete.

Commissioner Green asked if CMS offers any template for admission practices that could be useful to LHH. Mr. Pickens stated that LHH has continued to work on its admissions plan and processes. CMS feedback on the LHH plans of correction may alter the admissions plan and other LHH policies and procedures. Once CMS gives feedback on the plans of correction and validates actions LHH puts into place, the LHH admissions plan can be finalized and brought to the Commission. He added that the Commission has already approved LHH admissions policy. Ms. Simon stated that the policy which has been approved by the Health Commission will enable LHH to move forward after recertification. She added that CMS does not offer an admissions template; each facility must develop their own processes.

Commissioner Chow asked how the most recent 2567s impact the recertification process. Mr. Pickens stated that CDPH must review and accept the plans of correction submitted by LHH in response to the most recent surveys then validate the changes made. He stated that once these two plans of correction are accepted and validated, CMS may then begin the review of the LHH plan of correction it submitted in January in response to the Fire Life Safety and Health Monitoring surveys, which directly relate to recertification.

Commissioner Chow noted that regulatory surveys usually have findings; it is very unusual for there to be no findings. This is true for both LHH and ZSFG regulatory surveys. It is the severity of the findings that is important. He noted that using CASPER data as a comparison, LHH's resident fall rate is about 12th in the nation and is 1% below the state average for falls.

5. HIRING AND VACANCY REPORT

Sherri Soto, LHH Human Resources, presented the item.

Public Comment:

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

Today's "Human Resources Summary Report" states LHH's total vacancies were 11.7% in February, down from 12.8% in January. Today's four-page "Vacancy Report by FTE" report shows LHH's total

vacancy rate is 9.6%. Why are two different reports presenting different data? Even Commissioners just commented these reports are inaccurate! The "Vacancy Report by FTE" report presented 2/14/2024 was the December 2023 report. Was the "January" report <u>NEVER</u> presented to this JCC? Tracking these reports is like apples vs. oranges. The six "7334 stationary Engineers" were identified last June as being critically needed. What took so long to fill these positions? Why has hiring for 23 vacant "Home Health Aide" positions been on hold for February and March? When will that "hold" be released? The "Summary Report" says 19 class "2312 LVN's" would start in March but the "FTE Vacancy Report" says there are only 10 vacancies. This data is senseless!

Commissioner Comments:

Commissioner Green noted that some of the positions showing vacancies will be eliminated due to the budget cuts. She requested that all the LHH Human Resource reports be synced so they show the same data. Mr. Pickens stated that they will work with Human Resources to reconcile and give greater detail on recruitment and budget impact on vacancies.

Commissioner Chow noted that it is premature to have a data point for March since it is only March 12th.

Commissioner Chow asked Ms. Simon if she has any comments on the recent DPH budget process and its impact on LHH. Ms. Simon stated that LHH has been supported by the DPH administration regarding the budget process.

6. REGULATORY AFFAIRS REPORT

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

Public Comment:

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

This "Regulatory Affair's Report" is shocking, failing to note LHH JUST RECEIVED THREE "ACTUAL HARM" CITATIONS AT "G" SEVERITY, involving a <u>PATIENT'S DEATH THIS COMMISSION IS</u> <u>TEMPORARILY HIDING!</u> This report described three on-site surveyor's visits during February investigated three more "anonymous" complaints filed in January and February, and five "Facility-Reported Incidents" — two of which happened in December 2023 and the other three had been reported in February 2024. That's worrisome precisely because three "Abbreviated Complaint Survey's" involving anonymous complaints included in the matrix I presented today during agenda item #4 resulted in LHH racking up another 17 citations against LHH after it was decertified two years ago on 4/`4/14/2022! "Anonymous Complaint Survey's" are bound to result in more citations against LHH! Worse, this Report acknowledges more "privacy breaches" and "disease outbreaks." Why are there more probable "infection control-related" disease outbreaks"? Is LHH's new "Infection Preventionist" <u>NOT</u> doing their job properly?

Commissioner Comments:

Commissioner Green asked whether the Facility Reported Incidents (FRI) from several years ago that have not been investigated by CDPH could trigger new findings in a 2567. Mr. Pickens stated that when LHH reports a FRI, it immediately begins to start its internal investigation. It prioritizes quality improvements to address findings before it may receive formal findings from CDPH. He stated that LHH is not aware of any issues that would cause a pause on the path of recertification.

Commissioner Green asked if CDPH prioritizes anonymous complaints over FRIs. Mr. Pickens stated that CDPH prioritizes complaints of abuse. Ms. Talai added that in her experience CDPH begins its investigations for anonymous complaints quicker than other types of complaints.

Commissioner Chow stated that the Commissioners' concern is that new deficiencies may be found from

these old cases that have not yet been investigated by CDPH.

7. LAGUNA HONDA HOSPITAL POLICIES

Carmen Trinh, Acting Director of Performance Improvement, LHH, presented the item.

Commissioner Comments:

Commissioner Chow noted that some LHH residents have chronic conditions that require blood transfusions. In the revised policy, transfusions would no longer be able to be done outside of the LHH acute ward or an acute hospital setting. He added that some chronic patients would not meet criteria for the LHH acute ward and so would have to be transferred to an acute hospital for transfusions. Dr. Lam stated that LHH is not licensed as an infusion clinic so the only two options for transfusions are the LHH acute ward, if the resident meets the criteria, or sending the resident to an acute hospital for the transfusion. He added that there are several regulatory hurdles to clear before LHH could apply to be licensed as an infusion center. Commissioner Chow requested that this issue be brought back to the JCC after recertification is achieved.

Commissioner Green is curious how many LHH residents could be impacted by this issue. She noted for those with iron deficiency anemia, Venofer is an infusion that takes 20 minutes and could help with that issue.

Action Taken: The LHH JCC recommended that the full Health Commission approve the Following:

March 2024

<u>Item</u>	<u>Scope</u>	Policy No.	Policy Title
1	Facility-wide	23-03	Screening and Response to Suicidal Ideation
2	Facility-wide	24-08	Off Campus Appointments or Activities
3	Facility-wide	24-22	Code Green Protocol
4	Facility-wide	70-01 C1	Fire Response
5	Facility-wide	71-01	Fire Safety Program
6	Nursing	Acute A 02.0	Documentation of Care – Acute Unit
7	Nursing	D6 1.1	Battery Operated Lift Transfer
8	Nursing	J 8.0	Blood Transfusion
9	Nursing	M 12.0	Adaptive/Assistive Devices Management

8. CLOSED SESSION

- A) Public comments on all matters pertaining to the Closed Session. (San Francisco Administrative Code Section 67.15).
 There was no public comment for this item.
- B) Vote on whether to hold a Closed Session.

Action Taken: The LHH JCC unanimously voted to go into closed session.

C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5, 1157.6, and 1157.7; Health and Safety Code Section 1461; San Francisco Administrative Code Sections 67.5, 67.8, 67.8-1, and 67.10; and California Constitution, Article I, Section 1.

CONSIDERATION OF 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

- 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).)
- 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

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.

10. ADJOURNMENT

The meeting was adjourned at 6:29pm.