1. **CALL TO ORDER**

Present: Commissioner David J. Sanchez, Jr., Ph.D., Chair
Commissioner Judith Karshmer, Ph.D., PMHCNS-BC, Member
Commissioner David Pating, M.D., Member

Staff: Mivic Hirose, Roland Pickens, John T. Grimes, Ronald Radoc, Michael McShane MD,
Lisa Hoo MD, Yvette Gamble, Catherine Yuen, Steven Tang, Aigiong Huang, Kristin Haelley,
Linda Muir, Kim Woo, Katelynn Luong, Maxwell Chikere, Diana Kenyon, Juliette Soto,
Eric Benzel, Kate Durand, Casey Botlein, Jennifer Carton Wade, Madonna Valencia,
Quoc Nguyen, Alice Chen MD, Kathleen Choa, Karina Raygoza, Edward Guina,

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

2. **APPROVAL OF MINUTES FOR MEETING OF AUGUST 8, 2017**

Action Taken: The minutes were unanimously approved.

3. **GENERAL PUBLIC COMMENT:**

There was no public comment for this item.

4. **ADMINISTRATOR’S REPORT**

Mivic Hirose, Executive Administrator, presented the report.
Public Comment:
Dr. Derek Kerr, presented and submitted the following written comment:

It would be wonderful if decades of meager Acute Rehab admissions were due to the slow processing of referrals - as proposed today. If so, why didn't it get fixed years ago? Well, in 2009 we were told it was the "old building" that discouraged referrals. But the sparkling-new 15-bed Acute Rehab Unit was a costly flop. It was cut down to 5 beds - mostly unfilled. Acute Rehab is very lucrative. LHH competes with hospitals that are CARF-certified (Commission on Accreditation of Rehab Facilities). LHH isn't CARF certified. Suppose SFGH sent all its rehab patients to LHH; what would happen to its partnerships with, and the revenues of, those other hospitals? A problem lasting this long requires political rather than tactical solutions. To date, it hasn't been honestly addressed at JCC.

Commissioner Comments:
Commissioner Sanchez thanked Ms. Hirose for the comprehensive report.

Commissioner Pating stated that the scorecard is working well and noted that he is pleased with the format. Mr. Nguyen stated that the scorecard will be presented quarterly because this amount of data usually shows trends.

Commissioner Karshmer asked if sub-measures are added as measures are achieved. Ms. Hirose stated that the A3 process has sub-goals built into the process.

Commissioner Sanchez suggested that a few sentences be included with the report card to explain the progress during the reporting period so the public can better understand the scorecard.

5. **LAGUNA HONDA LEAN TRANSFORMATION UPDATE: ROOM READINESS KAIZEN IMPROVEMENT EVENT**
   John Grimes, Chief Operations Officer; Maxwell Chikere, Environmental Services Director;
   Diana Kenyon, Facility Services Director, and Jacky Spencer-Davies, Nursing Director, presented the item.

Dr. Derek Kerr, presented and submitted the following written comment:

There’s one instance where quick and efficient room clean-ups may be detrimental—when a patient dies. When I worked here, we would keep the bed vacant for a day after a death. It was a way to remember and respect the loss of a valued community member. The body was kept in place for a viewing. Friends, family and other patients would come by to pay their respects and grieve. After the viewing, we tidied up the room and left flowers on the empty bed. Even then, volunteers and visitors would stop by to sit quietly and reflect. It was important to other patients, themselves about to die, to know that the loss of a life caused us to pause and recognize it. There’s something jarring about efficiently admitting a new patient into a bed where someone died hours before.

Commissioner Comments:
Commissioner Pating asked for more information regarding the process when a LHH resident dies in his/her room. Ms. Hirose stated that LHH honors the wishes of the LHH resident and the family. The family is invited to view the body in the room; if the family cannot visit immediately, LHH utilizes a viewing room that is decorated to look like a living room in an effort to make the family feel more comfortable. She added that LHH has standard process that is used to ensure the room is ready for another resident within 24 hours.

Commissioner Pating asked if the time of discharge for LHH patients assists with room readiness. Ms. Hirose stated that LHH attempts to discharge patients before noon to ensure the room can be made available in a timely manner.
Commissioner Karshmer noted that LHH’s multidisciplinary approach to room readiness strengthens its process.

6. **STRATEGIC GOAL UPDATE: COMMUNICATIONS**
Quoc Nguyen, Strategic and Performance Management Assistant Hospital Administrator; and Ronald Radoc, Licensed Vocational Nurse presented the item.

Commissioner Comments:
Commissioner Pating asked if the process to improve communication is occurring throughout the San Francisco Health Network. Mr. Pickens stated that there are centralized and decentralized processes to improve communication occurring throughout the San Francisco Network.

7. **STRATEGIC GOAL UPDATE: CENTERS OF EXCELLENCE**
Jennifer Carton-Wade, Clinical Services Assistant Hospital Administrator; Edward Guina, Nursing Director; and Madonna Valencia, Chief Nursing Officer presented the item.

Commissioner Comments:
Commissioner Pating suggested that LHH could generate revenue by offering dementia care to patients outside of the San Francisco Health Network. Mr. Pickens stated that LHH currently operates at full capacity and usually has no vacancies so it would be difficult to add this service without additional space. He noted that Ms. Hirose participates on the Post-Acute Care Collaborative and will be part of the presentation to the full Health Commission.

Commissioner Karshmer suggested that Tableau software could be used to track LHH workforce data.

Commissioner Sanchez thanked the presenters for an excellent report.

8. **CONSIDERATION OF HOSPITAL-WIDE POLICIES & PROCEDURES**
Regina Gomez, Quality Management Director, presented the policies.

Public Comment:
Dr. Derek Kerr, presented and submitted the following written comment:

> The revision of the Resident’s Council Policy is strange. Instead of referencing the relevant section 1418.2 of the Health & Safety Code, it cites the CMS Guidebook for Long-Term Care Facility Surveyors. Why would LHH cite a guidebook without legal weight rather than a State Statue to justify a policy? It’s because the statute requires family members be invited to Resident’s Council meetings. Many LHH residents are elderly, cognitively impaired and unable to advocate for themselves. Many rely on family members as their surrogates. However, Residents’ Council members tend to be younger and cognitively intact. Do they represent the cognitively impaired patients better than the latter’s family?

**Action Taken:** The Committee unanimously approved the policies and procedures.

9. **MEDICAL STAFF CREDENTIALING**

A) Public comment on whether to convene in closed session and all matters pertaining to the proposed closed session.

B) Discussion and vote in open session on whether to conduct a closed session. (Action)
C) [Possible closed session pursuant to California Health and Safety Code § 1461, California Evidence Code §§ 1156, 1156.1, 1157, 1157.5, 1157.6 and 1157.7; San Francisco Administrative Code § 67.5; and California Constitution, Article I, Section 1.]

D) Reconvene in open session
The Committee voted unanimously to conduct a closed session to consider Medical Staff Credentialing. The closed session began at 5:40pm and the Committee reconvened in open session at 5:44pm.

Action Taken: The Committee voted to disclose that it had approved the Credentials Report.

10. ADJOURNMENT
The meeting was adjourned at 5:45pm in honor of Virginia Leischman, former LHH Nursing Director, who died on September 2, 2017.