MINUTES
JOINT CONFERENCE COMMITTEE MEETING FOR
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER
November 14, 2017, 4:00 p.m.
Administration Building, Conference Room B102
375 Laguna Honda Boulevard
San Francisco, CA  94116-1411

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, Olivia Thanh, Elizabeth Schindler, Madonna Valencia, Lisa Hoo, Michael McShane MD, Wilmie Hallaway DO, Jennifer Canton Wade, Regina Gomez, Lililan Louie, Emma Perez, Loretta Cecconi, Peter Rosel, Quo Nguyen, Margorita Gonzalez Diaz, Alice Chen MD, Jennifer Jacobsen, Nancy Giang, Kathy Mei, Vincent Li, Morgan Wilson, Karne Johnson, Ana Avarado, Ruigie Arevab, Cristyl Beltran, Lia Contreras, Lourdes Torres

The meeting was called to order at 4:03pm.

2. APPROVAL OF MINUTES FOR MEETING OF OCTOBER 10, 2017

Action Taken: The Committee unanimously approved the minutes.

3. GENERAL PUBLIC COMMENT:
There was no general public comment.
4. **ADMINISTRATOR’S REPORT**
Mivic Hirose, Executive Administrator, presented the report.

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

In mid-2015 the Health Commission approved the sale of some $1.5 million in stocks held by the Patient Gift Fund. The City Treasurer banked the money to yield 0.65% interest. That should have generated about $10,000 annually for the Gift Fund. Recent Gift Fund reports show no such interest revenue for FY2016-17 for the first quarter of 2017-18. Similarly, we see no interest revenue since 2015 from the $400,000 donation by Dr. Milka Rols. Nor from the $500,000 bequest from Ken & Dolorous Knight. At 0.65 interest, these 2 donations could have produced around $6,000 annually. In sum, some $16,000 in expected interest income may be missing – each year. As the Gift Fund trustees, please inquire about interest income from these major donations.

**Commissioner Comments:**
Commissioner Pating asked if LHH resets its targets for the year. Mr. Nguyen, stated that for those goals that were achieved last year, new goals were set; LHH kept those goals that were not met in the previous year.

Commissioner Pating asked if LHH completed all elements of the plan of correction. Ms. Gomez stated that all elements of the plan of correction were completed and noted this is a requirement of the approval process.

Commissioner Pating asked for more information regarding the LHH salary variance data. Ms. Hirose stated that the variance is due to overtime costs.

Commissioner Sanchez asked for a follow-up on the issue of interest income for the LHH Gift fund at the next LHH JCC meeting.

5. **DISCHARGES VALUE STREAM MAPPING WORKSHOP REPORT**
Regina Gomez, Quality Management Director and Jennifer Carton-Wade, Assistant Hospital Administrator, gave the presentation.

**Commissioner Comments:**
Commissioner Sanchez stated that he is impressed with the report and the workshop process.

Commissioner Karshmer requested data on discharge issues related to lack of housing at a future LHH JCC meeting. Ms. Hirose noted that in addition to this data, LHH also collects data on homelessness to add context the issues.

Commissioner Pating asked how long the Lean process took. Ms. Carton-Wade stated that the workshop took four days but noted there is a lot of preparation prior to the event.

Commissioner Pating asked if the Lean process lead the group to different goals and solutions than results from other processes. Ms. Carton-Wade stated that through the Lean process, necessary
outcomes are derived in an efficient manner. She noted that the process also includes tests of these outcomes.

Commissioner Pating noted that the future state map has less steps. Ms. Carton-Wade stated that the Lean process helped eliminate wasteful steps.

6. **LAGUNA HONDA LEAN TRANSFORMATION YEAR 1 REPORT**
Quoc Nguyen, Strategic and Performance Management Assistant Hospital Administrator, gave the presentation.

**Commissioner Comments:**
Commissioner Pating asked if Lean is helpful in regard to improvements in patient satisfaction. Ms. Nguyen stated that when LHH switches to using Press Ganey data, it will have more effective tools to make improvements in patient satisfaction. He noted that a patient representative participated in the Lean process.

Commissioner Pating suggested incorporating the Patient Council into the process to improve patient satisfaction.

Commissioner Karshmer stated that she appreciates the outcomes of the process.

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

**Public Comment:**
Dr. Derek Kerr, presented and submitted the following written comment:
There is ambiguity (Sic) and perhaps contradiction in the revised Admissions Policy. Section 1(b) stated: “The LHH Chief Medical Office (CMO) is the ultimate authority over admissions.” Ultimate means final. But Section 1(g) related to disputed admissions states: “The LHH CEO shall have the final authority over admissions.” How can you have it both ways? Admitting patients to a hospital is a medical decision. CEOs are not physicians. They don’t work on wards or care for patients. They lack expertise to determine if legally mandated “adequate care” can be provided. When the CEO is away, another non-medical administrator usually fills in. When the CMO is absent, the medical Chief of Staff takes over. There is more safety and less liability when physicians admit patients to hospitals.

**Commissioner Comments:**
Commissioner Karshmer asked for clarification of the LHH admission policy. Ms. Hirose stated that the LHH CEO settles any disputes regarding decisions related to admissions.

Commissioner Pating stated that he appreciates that LHH reserves beds for LHH patients during flu season to prevent the spread of the disease.

**Action Taken:** The committee unanimously approved the policies and procedures.
8. **CLOSED SESSION**

**SUBJECT MATTER:** 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 5:37pm and the Committee reconvened in open session at 5:47pm.

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

9. **ADJOURNMENT**
   The meeting was adjourned at 5:47pm.