

**Edward A. Chow, M.D.**  
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**Cecilia Chung**  
Commissioner

**Judith Karshmer, Ph.D., PMHCNS-BC.**  
Commissioner

**James Loyce, Jr., M.S.**  
Commissioner

**David.J. Sanchez, Jr., Ph.D.**  
Commissioner

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**MINUTES  
JOINT CONFERENCE COMMITTEE MEETING FOR  
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER  
March 13, 2018, 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 Edward A. Chow, M.D., Member

Excused: Commissioner Judith Karshmer, Ph.D., PMHCNS-BC, Member

Staff: Mivic Hirose, Roland Pickens, Alice Chen MD, Chia Yu Ma, Naveena Bobba MD,  
Michael McShane MD, Wilmie Hathaway DO, Lisa Hoo MD, Regina Gomez, Kate Durand,  
Elizabeth Dayrit, Quoc Nguyen, Madonna Valencia, Loretta Cecconi, John Grimes,  
Peter Rosel, Jennifer Carton-Wade, Elizabeth Dayrit, Grace Chen, Janet Gillen,  
Rowena Patel, Kathy Lee, Deanna Chan

The meeting was called to order at 4:02pm.

**2. APPROVAL OF MINUTES FOR MEETING OF FEBRUARY 13, 2018**

Action Taken: The minutes were unanimously approved.

**3. GENERAL PUBLIC COMMENT:**

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

There's a problem with today's agenda. The item titled "Administrator's Report" is linked to 12 separate sets of documents covering substantial issues. But since these 12 issues are crowded into a single agenda item, public comment is limited to 3 minutes for all of them. It's very difficult to coherently address more than 3 issues in 3 minutes. And it's very difficult to listen to someone

trying to explain more than 3 ideas in 3 minutes. Some of these 12 matters could easily be listed as separate agenda items. Packing them all together discourages public input.

#### **4. ADMINISTRATOR'S REPORT**

Mivic Hirose, Executive Administrator, gave the report.

##### Public Comment:

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

The True North Employee Satisfaction analysis shows a graphic display plus explanatory memo. That memo announces that "Embraces Change" will be added to employee Performance Appraisal criteria. The problem with this formulation is that institutional change is not organic - it's determined by decision-makers. Sometimes, leaders are wrong and their changes are harmful. In such cases, embracing change is just blind obedience. Why not recognize employees who "Understand Change" rather than embrace it. That would value thoughtful engagement rather than mindless compliance. Alternately, check if employees "Embrace Progress". Progress is positive change and embracing it requires discerning the value of policy changes. Better yet, why not recognize workers who "Embrace Critical Thinking". That would encourage speaking freely about the impacts of change. Rewarding workers who simply embrace change could penalize those who are engaged enough to offer constructive criticism or conscientious dissent. Sometimes, Resisting Change is a virtue.

##### Commissioner Comments:

Commissioner Chow asked for verification that the full Health Commission approves the annual LHH Gift Fund budget. Mr. Morewitz confirmed that Commissioner Chow is correct.

Commissioner Chow asked for more information regarding the funding mechanism between the Friends of Laguna Honda Hospital and the LHH Gift Fund. Ms. Ma, LHH Chief Financial Officer, stated that there is an annual reconciliation of the LHH Gift Fund and Friends of Laguna Honda Hospital. Ms. Ma stated that LHH Finance staff are meeting with the Friends of Laguna Honda Hospital to discuss relevant issues.

Commissioner Chow requested clarification of AWOL data to indicate why the patients did not return to LHH in addition to understanding where they went after leaving LHH. He noted that it is helpful to understand if these individuals were ready for discharge. He added that it is also important to review whether LHH discharge planning was effective.

Commissioner Sanchez noted that the LHH JCC has discussed this data previously. Ms. Hirose stated that data of unplanned discharges is reviewed annually by the LHH JCC.

Commissioner Chow asked for clarification between the terms "recertification" and "relicensing." Ms. Gomez stated that recertification is a federal process and relicensing is a state process.

Commissioner Chow asked for more information regarding issues with the LHH electronic systems. Ms. Gomez stated that there are new regulations on the frequency of testing the systems. Ms. Hirose stated that the LHH electronic systems are now checked monthly and this information is reported out in the PIPS meetings.

Commissioner Chow asked if most of the regulatory survey findings relate to new regulations. Ms. Gomez stated that the findings relate to new and existing regulations. She noted that the number of findings decreased from 18 to 12.

Commissioner Chow asked how LHH staff plan and prepare for disasters. Ms. Durand stated that the LHH staff focusing on emergency planning work in consensus to consider the probability of events based on the previous year and other available data. These staff are developing playbooks for each type of incident so LHH will be prepared.

Commissioner Sanchez stated that it is important to consider extreme weather conditions when conducting these types of emergency planning exercises. Ms. Durand stated that climate change is considered in the planning process.

Commissioner Chow asked if the SFDPH has developed a similar type of hazard assessment. Dr. Bobba stated that the City and County conducts an assessment and the SFDPH participates in its development. Commissioner Chow requested that the Health Commission receive this information.

**5. LAGUNA HONDA LEAN TRANSFORMATION UPDATE: DISCHARGE CARE PLANNING KAIZEN IMPROVEMENT EVENT**

Jennifer Carton-Wade, Assistant Hospital Administrator; Wilmie Hathaway DO, Chief of Staff; Lisa Hoo MD Vice Chief of Staff; Elizabeth Dayrit, Nurse Manager; and Grace Chen, Clinical Nurse Specialist, presented the item.

Commissioner Comments:

Commissioner Chow noted that he is surprised that LHH staff were unsure who is responsible for discharge planning huddles and is glad that the Lean process will help rectify the issue.

**6. LAGUNA HONDA LEAN TRANSFORMATION UPDATE: DISCHARGE PREPARATION KAIZEN IMPROVEMENT EVENT**

Janet Gillen, Social Services Director; Donna Valencia, Chief Nursing Officer; Rowena Patel, Nurse Manager; Kathy Lee, Physical Therapist; and Deanna Chan, Occupational Therapist, presented the item.

Public Comment:

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

28% of LHH community discharges now go AWOL or AMA. Granted, half of AWOLs return but a growing number of patients don't want to be here. They deserve a Quality Improvement review. There may be more patients who want to leave - but can't. Perhaps these runaways weren't adequately prepared for coming to LHH. Maybe they weren't appropriate admissions. Similarly concerning is LHH's own "Discharge Preparation" Kaizen. Its goal is; "Successful discharge without delays...". But it's hard to tell if "successful discharges" are patient-centered. That's because there's no mention of post-discharge follow-ups. What if 28% of LHH discharges fled from their destination? Would such chaotic outcomes count as successful discharges? How does LHH prevent rushed discharges to unsuitable or unwanted locations without checking on those patients, say a week afterwards?

Commissioner Comments:

Commissioner Sanchez stated that he is pleased to see that Lean is helping to improve the quality of processes and services at LHH.

**7. TRUE NORTH GOAL: PRESSURE ULCERS**

Regina Gomez, Quality Management Director, Fatima Ascano-Martin, Clinical Nurse Specialist, and Edward Guina, Nursing Director, presented the item.

Commissioner Comments:

Commissioner Chow stated that he is pleased that LHH is striving for a goal of zero-facility acquired pressure ulcers. Ms. Gomez stated that the CASPER Report shows data for both LHH-acquired and patient-admitted pressure ulcers.

**8. CONSIDERATION OF HOSPITAL-WIDE POLICIES & PROCEDURES**

Regina Gomez, Quality Management Director, presented the item.

Commissioner Comments:

Commissioner Chow asked if the revised LHH Trust Fund Policy follows general accounting practices and is in alignment with the Controller's Office procedures. Ms. Ma stated that the revisions are in alignment with the Controller's Office, which audits the accounts annually. She noted that Social Security also audits the accounts in which LHH serves as rep-payee.

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

**9. 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 6:05pm and the Committee reconvened in open session at 6:11pm.

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

**10. ADJOURNMENT**

The meeting was adjourned at 6:12pm.