MINUTES
JOINT CONFERENCE COMMITTEE MEETING FOR
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER
January 14, 2020, 4:00 p.m.
Administration Building, Conference Room B102
375 Laguna Honda Boulevard
San Francisco, CA 94116-1411

1. CALL TO ORDER
Present: Commissioner Laurie Green, MD, Member
Commissioner Dan Bernal
Commissioner James Joyce, Jr.

Excused: Commissioner Edward A. Chow, M.D., Member
Commissioner Tessie Guillermo, Chair

Staff: Maggie Rykowski, John Grimes, Michael McShane MD, Wilmie Hathaway DO,
Lisa Hoo MD, Lena Yee, Nawzaneen Talai, Troy Williams, Quoc Nguyen, Glenn Levy, Michelle
Fouts, Adrian Smith, Basil Price, Roland Pickens, Jennifer Carton Wade, Loretta Cecconi, Elaine
Lee

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

2. APPROVAL OF MINUTES FOR MEETING OF OCTOBER 8, 2019

Action Taken: The October 8, 2019 minutes were unanimously approved.

3. GENERAL PUBLIC COMMENT:
There was no general public comment.

4. ADMINISTRATOR’S REPORT
Maggie Rykowski, Acting Executive Administrator, presented the item.

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

The Gift Fund Report shows $58,000 budgeted for the Medical Clowning Project. That's over $1,000
each week - a lot of money for one activity. It's the same amount of Gift Funds allotted to the entire
Activity Therapy Program. It's more than the $48,000 budgeted for Art With Elders, and way more than
the $42,000 allotted to Hospital-wide Special Events. Why does Medical Clowning get more funding than long-validated therapeutic activities? For years, the Gift Fund account for the Adult Day Health Center (ADHC) held $1,426. The money was frozen when LHH closed its ADHC around 2009. Then, the December 2018 Gift Fund Report showed a $786 expenditure, leaving just $640. Did LHH revive its ADHC or did the Gift Fund Oversight Committee approve a related expense?

Commissioner Comments:
Commissioner Bernal noted that there are 104 staff vacancies and that it takes an average of 230 days to hire a new employee. Ms. Rykowski stated that she and all DPH leaders are working with Human Resources to reduce this timeframe. She added that the length of time to reassign a current employee is shorter.

Commissioner Bernal asked for information regarding the challenges this lengthy hiring process brings. Ms. Rykowski stated that length of time to hire staff is the number one challenge because it leads to understaffing issues and use of temporary staff. Dr. Fouts stated that LHH loses good candidates because of the length of time it takes to hire someone. Ms. Lee stated that DPH Human Resources is attempting to streamline the hiring process. Commissioner Green noted that ZSFG continues to experience similar hiring delays.

Commissioner Loyce asked if the hiring pool for nurses is the same for both hospitals. Ms. Lee stated that nursing is organized by specialty and the two hospitals require different areas of expertise.

Regarding the “Absent Without Leave” data, Commissioner Green requested additional information at future meetings regarding the effectiveness of social service outreach.

5. REGULATORY AFFAIRS REPORT
Adrian Smith, Director of Quality Management, presented the item.

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

The surprise in the Regulatory Affairs Report is that 3 of 4 Nurse Managers sampled by State Inspectors neglected to conduct staff check-ins as LHH promised. These check-ins were designed to elicit staff concerns about the conduct of their peers and to identify burn-out. But 7 weeks after LHH vowed to improve supervision, these Nurse Managers had interviewed just 35 of 148 staff, or 23%. Had they kept to the State-approved check-in schedule, 71% of staff would have been assessed. This failure resulted in another deficiency citation, more fines and a $126,000 denial of payment. An explanation for this lapse should have accompanied today's Regulatory Report. Since it was publicly disclosed in the 11/24/19 SF Examiner, the Commissioners should request an explanation.

Commissioner Comments:
Commissioner Bernal asked if the cases from September are more likely to result in a deficiency. Mr. Smith stated that it is not possible to predict at this time.

6. FY 18-19 FACILITY ASSESSMENT REPORT
Lena Yue, Administrative Analyst, presented the item.

Commissioner Comments:
Commissioner Green asked how discharge data is used to improve the LHH admittance wait time. Ms. Carton-Wade stated that issues related to social determinants of health issues complicate discharge; for example, many people being discharged are in power-wheelchairs and most of the available housing options do not have working elevators.
Commissioner Green requested a breakdown of discharges to acute units versus community placements. Mr. Nguyen stated that LHH follows up with residents after they are discharged to assess satisfaction with services and noted LHH can provide this data to the Committee in the future.

Commissioner Bernal asked for the top challenges related to discharges. Ms. Carton-Wade and Dr. McShane stated that lack of appropriate community placements is the number one challenge.

7. **LEAN TRANSFORMATION UPDATE**
Olivia Thanh, Administrative Analyst, and Vincent Lee, Administrative Analyst, gave the update.

**Commissioner Comments:**
Commissioner Green asked whether the EPIC-related goals are achievable without the ideal number of superusers. Mr. Nguyen stated that while LHH did not meet its target for superusers, LHH utilized this group effectively throughout the hospital.

Regarding the goals listed on page 38, Commissioner Green noted that the Commission will need to better understand which goals are aspirational and which are achievable.

8. **CONSIDERATION OF HOSPITAL-WIDE POLICIES & PROCEDURES**
Lena Yue, Administrative Analyst, presented the item.

**Commissioner Comments:**
Commissioner Green asked if forms for reporting incidents are available online and asked how staff are trained in these procedures. Ms. Talai stated that all LHH policies and procedures are available online and added that managers are responsible for training staff. She also stated that LHH conducts trainings on patient abuse policies and procedures. All LHH employee badges contain the phone numbers for reporting patient abuses.

Commissioner Green asked for more information regarding the level of compliance with managers checking with staff regarding stress levels. Mr. Smith stated that the timeline states that after three months of this policy there will be a discussion at the PIPS Committee to discuss how to proceed in this area. The Committee will hear updates as changes are made.

Commissioner Green asked for clarification regarding the specificity of the acute unit admission criteria. Dr. McShane noted that this level of specificity is required by InterQual.

Commissioner Bernal asked if LHH policies and procedures are revised on a timeline or only in response to problems. Ms. Yue stated that LHH regularly reviews its policies and noted that each policy and procedure has specific review timelines.

**Action Taken:** The Committee unanimously voted to approve the policies and procedures.

9. **CLOSED SESSION**

**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.)

MEDICAL STAFF CREDENTIALING

D) Reconvene in open session

Action Taken: The Committee voted unanimously to conduct a closed session to consider Medical Staff Credentialing. The closed session began at 5:22pm and the Committee reconvened in open session at 5:25pm.

10. POSSIBLE DISCLOSURE OF CLOSED SESSION INFORMATION

Action Taken: The Committee unanimously voted not disclose information discussed in closed session.

11. ADJOURNMENT

The meeting was adjourned at 5:25pm.