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Department of Public Health



Mitchell H. Katz, M.D.
Director of Health

Rebekah Varela
Acting Executive Secretary

TEL (415) 554-2666
FAX (415) 554-2665

Web Site: <http://www.sfdph.org>

MINUTES

JOINT CONFERENCE COMMITTEE FOR LAGUNA HONDA HOSPITAL MEETING

Monday, February 26, 2007
9:45 a.m. to 11:45 a.m.

At

Conference Room A-300
375 Laguna Honda Boulevard
San Francisco, CA 94116-1411

1) CALL TO ORDER

Commissioner Chow called the meeting to order at 9:46 a.m.

Present: Commissioner David J. Sanchez, Jr., Ph.D., Member

Absent: Commissioner Edward Chow, M.D., Chair

Staff: John Kanaley, Mivic Hirose, John Thomas, Regina Gomez, Paul Isakson, Craig Murdock (for Liz Grey), Adrienne Tong, Thomas Radenberg, Arla Escontrias, Gayling Gee, Cheryl Austin, David Woods, Amy Narciso, and Lorraine Killpack

2) APPROVAL OF MINUTES OF THE MEETING OF JANUARY 22, 2007

Action Taken: The Committee approved the minutes of the January 22, 2007 Laguna Honda Hospital Joint Conference Committee.

3) **EXECUTIVE ADMINISTRATOR'S REPORT**

John Kanaley, LHH Executive Administrator, presented the Executive Administrator's Report.

EMPLOYEE OF THE MONTH – February 2007

Marilou Deguzman, Health Information Systems Analyst

Marilou Deguzman joined the LHH team in April 1981. She started in Physician Order Processing in 1982. Her outstanding performance promoted her as the lead analyst in 1990. Marilou works with a team of 2 staff who process approximately 33,000 orders every month.

On Friday, January 26th, when the computer system was brought down, there were 7 units remaining that required processing. The clinical staff would be required to manually process their monthly orders. With only 1 PC available, Marilou worked nights and weekends to process the orders. By January 31st, the last of the 7 units, M5, was updated, printed and delivered. Normally this would require 3 staff members to work simultaneously on 3 PC's in a week. Marilou single-handedly accomplished this monumental task in 5 days with only 1 PC. During this time of crisis, Marilou went above and beyond the call of duty. She is truly an outstanding employee and LHH is fortunate and proud to have her on staff.

IS VIRUS UPDATE

We are now finishing up our 4th week of our IS systems being down. Fortunately, our work-around processes have prevented any impacts on patient care. The update is as follows:

SERVERS

Of the twenty-two servers at LHH, all but two have been successfully cleaned and brought back on line. The two exceptions are the Digital Dictation (Winscribe) server in HIS and the Plant Services HipLink server. The Winscribe server will be sent back to the vendor for installation of software. The HipLink server is a lower priority right now.

APPLICATIONS

All major applications – ADL, Invision/LCR, OneStaff – are available with the exception of HipLink and Winscribe. It is our policy at this point to provide access to a user's primary business applications. We will be conducting a survey, with help from the supervisors, of what every employee's actual application needs are.

L & M DRIVES

This remains a problem for many users. The problem results from needing to bridge the old NT operating system world and the new Windows operating system. This is a top priority item which we hope to have resolved soon.

PC's

We are continuing to scrub and/or re-image workstations. We are approximately half way through. The nursing unit PCs are being delayed due to the need to add Oracle upgrade software to support the MDS system. We hope to have the new image available soon. In the meantime other devices in Clarendon Hall and else where are being scrubbed. We have noticed instability in some devices (the device shuts itself off without warning). This is an anomaly that we are also working on.

PRINTERS

This is another very complex area due in part to the fact that there are so many varieties of printing: Windows, Citrix, application, etc. Also, some of the printer ports that were "shut down" deliberately have not been re-opened. We are actively trying to identify these ports.

Our goal is to have all the PCs scrubbed in the next two weeks. Access to all user applications will take longer to complete based on the survey.

LONG TERM REMEDIATIONS

- 1) Replacement of our servers through the Capital Equipment process.
- 2) IS staffing increases of 2 staff, 1 IS Engineer and 1 IS desk Top support.

STRATEGIC PLAN

FY 06-07 – The next update will be given in April 2007.

FY 07-08 – The next update will be given in April 2007.

BUDGET REPORT

Please find the following attachments:

- 1) The budget initiatives being submitted for LHH this fiscal year (**Attachment A**).
- 2) The capital equipment budget requests being submitted for LHH this fiscal year (**Attachment B**).
- 3) The capital projects budget requests being submitted for LHH this fiscal year (**Attachment C**).
- 4) Information on the supplemental appropriation (**Attachment D**).

CENSUS REPORT

Average for January 2007	
Beds Occupied	1021.26
Beds Held	8.68
Admits	1.42
Total Paid SNF	1031.36
Total Acute Capacity (16)	
M7 Acute Census	2.10
L4 Acute Census	2.13
<u>Total Paid Beds</u>	1035.59

STAFFING REPORT

The Hospital Staff Vacancy rate reported as of February 21, 2007 is 7.14%. This percentage is down slightly from January 2007's rate of 7.95%. This shows a filling of the vacancies.

REGULATORY REPORT

DHS

DHS surveyors continue to come on-site to LHH on a weekly basis to conduct investigations of LHH self-reported cases from 2006 and January 2007. The outcomes of these investigations are still pending. Since our last report in January, we have received 2 negative Form 2567 Statement of Deficiencies and Plans of Correction for 7 complaint investigations that were conducted in previous months. After completing their investigations, DHS determined that they could not substantiate any violations of the regulations in the areas of quality of care/treatment, resident rights and infection control. As of 2/21/07, there remain approximately 100 self-reported cases from 2006 that have not been investigated.

The facility also received an invitation to attend an informal conference on February 16, 2007 pertaining to an anonymous complaint investigation where DHS had determined that LHH was not in violation of any Federal or State regulations. The informal conference was scheduled at the request of the PAI attorney who represented the resident because the complainant was dissatisfied with the findings from the Daly City Licensing and Certification Office. The complaint investigation alleged that the resident's rights had been violated when LHH restricted the resident to his bed for 24 hours and replaced his power wheelchair with a manual one for smoking in undesignated and dangerous areas.

During the informal conference, PAI presented a brief to Charlene Popke, Acting District Administrator, to address the concerns of their client pertaining to timeliness of the investigation and failure to address alleged violations of the resident's rights to be free from abuse, right to dignity, right to participate in groups and meet with others. PAI is requesting relief such that LHH be issued with a class B citation for the alleged violations. Further update regarding this case will be presented when it becomes available.

DOJ

In continued discussions with the City Attorney's Office about LHH and Olmstead related issues, the Federal Department of Justice expressed a desire to return to the hospital to conduct an on-site investigation. The DOJ is interested in meeting with clinical staff, touring the facility and reviewing what has occurred since their last visit. The DOJ is also interested in meeting with Long Term Care Director Liz Gray. Thus, we are discussing a return visit by DOJ during about April 2007, in deference to Ms. Gray's schedule.

PATIENT FLOW

WAITING LIST

For January, 2007, the average waiting list is 27.75. The average for FY 06-07 it is 28.25 (**Attachment E**).

BOARD OF SUPERVISORS QUARTERLY REPORT

The next Board of Supervisors Quarterly Report will be provided in April 2007.

TCM

The TCM report for December 2006 is attached for your review (**Attachment F**). Each month, LHH also reviews the number of discharges: (no data to report this month)

CATEGORIES	NUMBERS
Laguna Honda Hospital	
Rehabilitation	
Respite	
Targeted Case Management	
Positive care	
AMA	
AWOL	
Total	

TRANSITION STEERING COMMITTEE

The next report will be presented in April 2007.

Public Comment:

-Submitted in writing by Patrick Monette-Shaw: The LHH-JCC and Health Commission share responsibility for advising the Mayor regarding the City's public health infrastructure needs. On April 13, 1999, the Board of Supervisors adopted Resolution 336-99, calling for development of alternatives to institutional care, *in addition to* "developing sufficient institutional care" beds. In March 2005, then Health Commission President Monfredini ordered Director of Public Health Mitch Katz to update his 1998 LHH rebuild White Paper; to date, Dr. Katz has failed to update it. The DPH Placement Task Force's "Current Levels of DPH Community Placement [Options] for Single Adults" stratifies 8,259 beds available in community settings under DPH. Add 1,080 beds completed or under construction by the Mayor's Office of Housing, and another 995 in preconstruction planning, totaling 10,334, or 92% of options. Cutting LHH by 420 SNF beds leaves DPH only 863 SNF beds, 8% of options, which is insufficient. Commissioners: Advocate for LHH's full rebuild.

Commissioner Comment:

- Commissioner Sanchez stated that the Wall Street Journal usually has excellent reporting and that this article may provide LHH with the opportunity to highlight some of the positives and the opportunity to share some really good data on what San Francisco is doing.
- Commissioner Sanchez stated that we are still having challenges with recruitment, and asked if we are running into regulatory issues with lack of staff. Mr. Kanaley stated that nursing requisitions go through quickly, but the requisitions for other types of staff are slow and difficult to get through.
- Commissioner Sanchez asked to clarify that the IS issues were now department wide and that the requests for staff would go through the centralized MIS department. Mr. Kanaley confirmed this was the case and stated that although the positions tend to be funded at the facility level, the requisitions go through a centralized process.
- Commissioner Sanchez stated that using students to provide multi-lingual care could improve LHH's ability to provide culturally competent care.
- Commissioner Sanchez stated that the Health Commission would hear testimony from the Long Term Care Coordinating Council at an upcoming Health Commission meeting. Mr. Kanaley also noted that he had sent information to the Health Commission on BOS Resolution 336-99 last week.

4) LAGUNA HONDA HOSPITAL REPLACEMENT PROJECT UPDATE

John Thomas, LHH Replacement Program Manager, presented the LHH Replacement Project Update.

Link Building

A temporary roof has been installed to maintain dry conditions inside the building. The wall framing and Mechanical, Electrical and Plumbing (MEP) rough-in activities are continuing throughout the building. Exterior window wall framing has begun on the West face of the Link.

Knuckle Building

Concrete slabs have been placed on the first ground level. Exterior 'architectural concrete walls' were placed in February. Kitchen coordination is nearly complete which will allow MEP rough-in to begin in this area. Beginning in early April, the contractor will begin to construct a temporary loading dock as the first phase of the construction necessary to complete the permanent loading dock. The temporary loading dock will be completed in late summer which will permit work to begin on the northern end of the permanent loading dock.

South Residence Building

Mechanical, Electrical and Plumbing and the wall installation continues. Scaffolding is being erected on the perimeter of the building in order to protect the interior from rain.

East Residence Building

Concrete slab placement has been completed throughout the East Residence Building. Fireproofing is 50% complete permitting the Mechanical, Electrical, Plumbing and drywall trades to begin layout and installation.

New Hospital Site Improvements

Some re-work of the lower accessible pathway will be necessary before the contractor can complete the lower lawn area. Installation of light poles will be completed by the end of February.

Existing Hospital Remodel

Destructive testing in various locations is underway to confirm construction type and fire rating of existing walls. This work will assist the designers in completing the construction documents accurately. Preliminary work is planned to begin in February 2007 at the staircase located at the main lobby adjacent Elevators 3 & 4. Once this has been completed, the contractor will be able to begin work in H wing which is anticipated to begin as early as June, 2007.

Hospital Staff

Weekly coordination meetings continue with hospital operations staff to coordinate or mitigate any possible impact from the construction project.

Public Comment

-Submitted in writing by Patrick Monette-Shaw: I testified orally today that this Joint Conference Committee, the Health Commission, Department of Public Health, and Mayor's Long-Term Care Coordinating Council are obligated to educate the general public and our Mayor regarding the number of community placement options vs. the number of long-term care skilled nursing beds identified by DPH's Placement Task Force. Much was recently published in the press concerning Mayor Newsom's judgment, or lack thereof. Collectively, you have an obligation to educate the Mayor so he makes sound infrastructure judgments. Mr. Kanaley just announced the *Wall Street Journal* is on-site today, researching an upcoming story about LHH; he should educate the *Wall Street Journal* that if DPH has 10,334, placement options available in community-based settings (92% of placement options), and only 863 skilled nursing "institutional" beds (8% of placement options), the City is compliant with the *Olmstead* decision. The pretense San Francisco isn't *Olmstead* compliant must stop.

Commissioner Comment:

No Commissioner Comment

5) OPERATIONS REPORT

Gayling Gee, R.N., Associate Administrator of Support Services, presented the Operations Report.

DEPARTMENT OF EDUCATION & TRAINING:

Cultural Competency

DET and Human Resources are continuing their collaborative work with consultant Eva Schiorring to develop LHH's cultural competency program. Ms. Schiorring has outlined a methodology to establish a working baseline of what cultural competence means to and at LHH. This assessment project will involve numerous individual interviews as well as focus groups, and the project timeline is February through July, 2007. A summary report will be presented in August and will be useful in

identify gaps, outlining next steps, tracking progress over time and, hopefully, applying for grant opportunities to support training and other projects. Ms. Schiorring has begun interviewing staff, and focus groups will be scheduled in March. Ms. Schiorring has also assisted LHH with the development of questions relating to culturally sensitive care delivery for the resident satisfaction survey due to be distributed shortly.

Organizational Effectiveness Training

Under the leadership of Larry Funk, Dr. Paul Isakson and Cheryl Austin, DET participated in phone conferences with Robin Orr, MPH, a consultant with the Pebbles Project. Ms. Orr's expertise lies in working with health care organizations to develop, implement and evaluate exemplary training programs, patient centered systems, and quality improvement programs dedicated to a holistic, patient-family centered organizational culture. Ms. Orr is scheduled for a February 27 and 28 consultation with LHH Leadership, to include a facility tour and individual and group meetings with her. The goal is to familiarize Ms. Orr with LHH's current culture and to discuss possibilities for laying the foundation for furthering LHH's organizational efforts. This opportunity for consultation with a leader in the field of organizational development is part of the benefits of membership in the Pebbles Project.

Computer-based Training (HealthStream)

Computer glitches aside, the show must go on! DET initiated several "work-arounds" so that education attendance and compliance can still be tracked and course presentations can still be developed. The February training program on Resident Rights was conducted in the classroom, and the HealthStream electronic version of Resident Rights will be available for makeup attendance once the computers are back on line.

More Oz

DET took the initiative to collaborate with Nursing educators to start the New Year with the introduction of "Oz" communication principles to the Nursing line staff. This combined DET and Nursing effort resulted in an interactive educational class, entitled "Quality of Care and Resident's Rights: Whose Job Is It?". Concepts of strategic goal alignment, "above the line" communication and accountability were applied to "real life" clinical situations. Using facilitated brainstorming and role-playing, over 400+ participating staff had the opportunity to:

- verbalize what s/he believed LHH's goals should be;
- determine if her/his ideas were in line with LHH's strategic goals identified by leadership (They were!);
- role-play ways to improve communication experiences with residents;
- identify tips for supporting one another during times of stress;
- develop a personal action plan for enhancing communication in their workplace.

The great ideas contributed by staff during the in-service were saved and will be distributed to all units as "Tips on supporting resident's rights and quality of care through excellent communication and teamwork".

Resident's Rights and Abuse Prevention Training

Classroom training by DET and Benson Nadell, Ombudsman Program Director, will take place for Nursing, and Environmental Services staff in day, evening, and late night sessions the week of February 12 through 16. The training will be interactive with case studies emphasizing positive, respectful communication.

INFECTION CONTROL:

Outbreak Report

Unit O-6 experienced a gastroenteritis outbreak that developed on February 1, with the first affected resident, and lasting through February 15. The last O-6 case was reported on February 9. A total of eight residents and three employees were affected. Signs and symptoms exhibited by residents and staff included: diarrhea, nausea/vomiting, abdominal pain, fever and chills. This outbreak was reported to DHS on February 5, 2007. Recommendations given by DPH and the DHS October 2006 *Recommendations for the Control of Viral Gastroenteritis Outbreaks in Long-Term Facilities* were promptly instituted. Infection Control Practitioners worked closely and meticulously with LHH staff to contain this outbreak from spreading to other units. PCR testing was not performed by DPH since the DPH Laboratory deemed it to be unnecessary.

Resistant to Antibiotic Infections (RTAI): MRSA, VRE and C.Difficile

Month / RTAI	MRSA	VRE	C.Difficile
January 2007 to February 16, 2007	8	2	1

Sharp Injury Log Update:

No injuries were reported from OSH Clinic for the period of January 9 to February 16, 2007.

Influenza Vaccination Program:

To date, LHH has immunized a total of 835 employees, volunteers and students. Vaccine is still offered daily and it will continue until March 2007.

MATERIALS MANAGEMENT:

The prime vendor conversion has been completed as of January 30, 2007. Based on LHH's unique situation of licensing for both Acute Care and SNF beds, we are able to continue to access two separate Prime Vendor agreements (Medical, Surgical & Long Term Care) within the Novation contracts structure. We will continue to access best pricing and value from two vendors until we move to our "Just in Time" inventory system in July 2007.

Commissioner Comment:

- Commissioner Sanchez stated that he knew Commissioner Chow would have liked to be here to discuss the issue of Cultural Competency. He added that using a needs-based assessment approach is very positive and that it takes time and is a long process. Ms. Gee added that it is a challenge to keep practice in line with contemporary graduate education and that long term they would like to move towards grant funding around cultural competency.
- Dr. Isakson added that as of yet there have been no confirmed cases of Influenza A or B at Laguna Honda Hospital.

6) CLINICAL CARE REPORT

Mivic Hirose, Nursing Director presented the Clinical Care Report.

LHH Hosts Community Meetings

Within the last month, LHH hosted two meetings on the campus. First, the Hospital Council's African-American Health Disparities Project Steering Committee held their monthly meeting at LHH on January 25th. The Project held a retreat in November 2006 to develop strategies for moving forward. A joint meeting between the Project's steering and advisory committees is planned for March 26th to begin to finalize the next steps from the retreat. Mozettia Henley and Mivic Hirose are members of the steering committee. We will apprise as continued progress develops.

On February 1st, LHH hosted a Town Hall meeting sponsored by the National Association of Social Workers. Seventy-five (75) Social Workers from the Bay Area came to discuss health care disparities at the end-of-life. Our Executive Administrator, John Kanaley, welcomed the participants in the morning and many of them toured LHH in the afternoon.

Special Events at LHH

The Activity Therapy Department at Laguna Honda Hospital provides special events and programming throughout the year to meet the cultural needs of our residents. February is especially a busy month for the Department as we celebrate Black History Month and Chinese New Year.

Approximately 25% of the resident population is of African decent. This year's Black History celebration included a main event with entertainment, including song and dance, poetry, and historical presentations in Gerald Simon Theater on Wednesday, February 7th. Current staff, retired staff, residents, and community groups all contributed their talents to a very enjoyable program celebrating African-American culture. Mivic Hirose welcomed the audience. Other opportunities that celebrates Black History in February includes a quilting display, drum line performances, a film festival, and a health fair focusing on the unique health needs of African-Americans. The health fair was coordinated in partnership with Rhody McCoy, member of the Hospital Council's Steering Committee for the African American Health Disparities Project.

Like Black History, the Activity Therapy Department takes the opportunity to celebrate Chinese New Year over a period of time. On Wednesday, February 21st, there will be a large event. Staff, residents, and community groups from the community will converge on Gerald Simon Theatre for a celebration of Chinese culture. It will, of course, include the traditional lion dance performed by members of the SF Police Department. Over the days prior and after the main event, there will be a Chinese film festival and a martial arts demonstration. Of special note is the Chinese Fair sponsored by the two Asian-focus units, C4 and G4. The fair will take place on Tuesday, February 27th and will feature arts and crafts as well as informational displays.

Nursing Re-Bidding

At the end of January and first couple of weeks of February, the Nursing Department, in partnership with United Healthcare West and Human Resources Labor Division, implemented, after months of planning, the re-bidding initiative for licensed vocational nurses and certified nursing assistants' assignments. The benefits to re-bidding of assignments are:

1) to ensure continuity and consistency of staff assignments for residents, 2) to implement a process of unit/program assignments for staff that has integrity, follows MOU guidelines and respects seniority, and 3) for specific units, allows for staff assignments that are specific and meet the language needs of residents (that is, specific assignments were identified as language waiver positions). The registered nurses' assignments will be reviewed and reassignments will be made to meet the goals described above.

It is anticipated that the transition of staff assignments will occur in early April. The implementation of the re-bid initiative will help Nursing meet its strategic goals of providing resident centered care, ensuring culturally appropriate care, and applying professional standards. It further strengthens the 2007 Nursing Theme, which is "Care with Our Heart, Mind, and Soul."

Quality Improvement Presentation by Lumetra Consultant

It is our goal to provide quality/performance improvement education to our nursing leadership and staff at least on an annual basis. This year, on January 21st, Irina Lewis, Lumetra Project Manager, provided an education program on Performance Improvement, titled "Five Steps to Quality Improvement." Over 80 nursing, quality management and ancillary department staff attended the presentation. The educational program was well received and we are poised to apply continuous quality improvement principles in our daily work at LHH.

New Nursing Hires

In January, we hired and oriented a total of fifteen (15) new nursing staff. There were nine certified nursing assistants, five licensed vocational nurses and one registered nurse. Of special note, four of the licensed vocational nurses were former LHH certified nursing assistants, and were beneficiaries of the CNA to LVN Training Program Grant that LHH participated in as part of the Nursing Workforce Initiative, awarded from the Governor's office. The new employees have successfully completed orientation and have settled in to their new shifts and assignments. Acknowledgements and appreciation go to the Nursing Education Team for their untiring and hard work in orienting new staff: Margarita Polishchuk, Nurse Recruiter, Elizabeth Saiz, Nursing Orientation Coordinator, Oletha Hunt, Clinical Resource CNA, and Elisa Ramirez, Clinical Resource Nurse.

DPH Nursing Leadership Council (NLC) Update

In December 2006, the NLC, under the leadership of Sheila Kerr (NLC Chair) and Gene O'Connell (ISC Advisor), held a four-hour retreat. The focus was to identify targeted priorities and accomplishments for 2007. There were three priorities that were established for NLC to center its strategies: 1) succession planning, 2) promote excellence in nursing practice, and 3) promote safe work environment. NLC hopes to accomplish the following activities in 2007: 1) coordinate Nurse Week celebration events within DPH, 2) implement, select and award Pilot Nursing Leadership Incentive Program (as agreed upon Teamsters 856 MOU), 3) sponsor a seminar on the Nurse Practice Act, 4) provide leadership training sessions, and 5) create/establish networks within DPH. We will apprise the JCC throughout the year on NLC progress.

LHH Medical Staff Appointments

Appointments: None

Reappointments:

Emile Daniel, M.D. – Surgery – (Active/Consultant)
Martin Albion, M.D. – Internal Medicine – (Active/Daytime)
Amir Matityahu, M.D. – Orthopedics – (Active/Consultant)
Hugh Rienhoff, M.D. – Internal Medicine – (Active/Night & Weekend)
Christina Lee, M.D. – Internal Medicine – (Active/Daytime)
Elaine Gecht, M.D. - Internal Medicine – (Active/Daytime)
Timothy Skvorinski, M.D. – Internal Medicine – (Active/Daytime)
R. Ralph Coughlin, M.D. – Orthopedics – (Active/Consultant)
Helena Leiner, M.D. – Internal Medicine – (Active/Daytime)

LHH Credentials Year-to-Date Report

7/1/2006 to 2/16/2007

New Appointments	9
Reinstatements	0
Withdrawal	0
Reappointments	17
Delinquencies:	0
Reappointment Denials:	0
Resigned/Retired	16
Disciplinary Actions	0
Restriction/Limitation of Privileges	0
Changes in Privileges	0
Additions	0
Voluntary Relinquishments	0

Commissioner Comment:

- Commissioner Sanchez stated that it is interesting to see how the terminology around cultural competency change over time and that we need to really focus on the human element and the quality of care we provide. Ms. Hirose stated that the retreat was empowering and that the terms they were using were “moving forward” and focusing on youth and economic opportunities. She added that the next meeting would be focused on next steps.

7) **PUBLIC COMMENT**

None.

8) **CLOSED SESSION**

A) Public Comments on All Matters Pertaining to the Closed Session

None.

B) Vote on Whether to Hold a Closed Session (San Francisco Administrative Code Section 67.11)

Action Taken: The Committee voted to hold a closed session.

The Committee went into closed session at 10:52 a.m. Present in closed session were Commissioner Sanchez, John Kanaley, LHH Executive Administrator, Adrienne Tong, Deputy City Attorney, Mivic Hirose, Director of Nursing, Paul Isakson, Medical Director, David Woods, Director of Pharmacy, Cheryl Austin, Assistant Administrator of Clinical and Support Services, Gayling Gee, Associate Administrator of Clinical and Support Services, Regina Gomez, Interim Director of Quality Management, Lorraine Killpack, Chief of Psychiatry, Amy Narciso, Clinical RN, and Rebekah Varela Acting Health Commission Secretary.

C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5 and 1157.6; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1

FOR DISCUSSION: **CONSIDERATION OF QUALITY
IMPROVEMENT REPORT**
(Quality Improvement Staff)

D) Reconvene in Open Session

The Committee reconvened in open session at 11:16 a.m.

1. Possible Report on Action Taken in Closed Session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
2. Vote to Elect Whether to Disclose Any or All Discussions Held in Closed Session. (San Francisco Administrative Code Section 67.12(a).)

Action Taken: The Committee voted not to disclose any discussions held in closed session.

9) **ADJOURNMENT**

The meeting was adjourned at 11:17 a.m.

Rebekah R Varela
Acting Executive Secretary to the Health Commission

***Any written summaries of 150 words or less that are provided by persons who spoke at public comment are attached. The written summaries are prepared by members of the public, the opinions and representations are those of the author, and the City does not represent or warrant the correctness of any factual representations and is not responsible for the content.**

****Minutes are approved at the next meeting of the Laguna Honda Hospital Joint Conference Committee.**