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MINUTES

JOINT CONFERENCE COMMITTEE FOR LAGUNA HONDA HOSPITAL MEETING

Monday, October 23, 2006
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 9:50 a.m.

Present: Commissioner Edward A. Chow, M.D.
Commissioner David J. Sanchez, Jr., Ph.D.

Staff: Evonne Arita, Arla Escontrias, Cheryl Austin, Monica Banchemo-Hassan, M.D., Larry Funk, Gayling Gee, Regina Gomez, Mivic Hirose, Valerie Inouye, John Kanaley, Hosea Thomas, M.D., John Thomas, Adrianne Tong and David Woods, Pharm. D.

Guests: Joanne Holland, RTZ Associates

2) APPROVAL OF MINUTES OF THE MEETING OF SEPTEMBER 25, 2006

Action Taken: The Committee approved the minutes of the September 25, 2006 Laguna Honda Hospital Joint Conference Committee.

3) EXECUTIVE ADMINISTRATOR'S REPORT

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

ANNOUNCEMENTS/INFORMATION

Employee Of The Month – Jose Lopez

Jose has worked at LHH for almost 15 years. He started working in the Billing Department and was transferred to Quality Management on 4/21/97. His primary responsibility is to process both LTC and Acute Care TARs. During the last fiscal year, Jose processed over 1400 TARs, which resulted in claims that were later billed to Medi-Cal. Jose is one of the many key staff members who were responsible for LHH's ability to collect \$129 million in revenue from Medi-Cal during the last fiscal year. Jose works very effectively with others. He is highly accurate in his work and very dedicated to improving and streamlining the LTC TAR processing workflow. During the past year, Jose created and finalized an intranet based TAR tracking system, which can be viewed by the Billers to keep them informed of the status of LTC TARs. Additionally, in April of this year, Jose assisted Dave Woods in the Pharmacy Department to initiate the processing/submission of LHH Pharmacy TARs. Jose's prior accomplishments included developing the QM intranet site under Serge Teplitsky's direction, and being the winner of the Talent Show several years ago - singing and playing the guitar. Jose periodically volunteers to sing and play the guitar during Spanish Mass service when requested. Jose was nominated as Employee of the month because Jose's work performance is exemplary - he is focused to task, works well with others, is committed to efficiency and process improvement, and willing to share his musical talents with the residents.

Benjamin Abramovice

Mr. Kanaley announced the passing of Benjamin Abramovice. Ben was the Executive Administrator of Laguna Honda Hospital and Rehabilitation Center from 1981 until his retirement in 1987. Friends and family threw a "Ben Party" here at LHH on Sunday, October 15 in his honor.

Outstanding Attendance Recognition

On Thursday, October 19, 2006, LHH held a special recognition for employees with outstanding attendance for FY 2005-2006. Outstanding attendance is defined as having used 8 hours or less of sick time in the FY. Staff would like to convey its sincerest appreciation to those employees for their dedication to the Residents of Laguna Honda Hospital and Rehabilitation Center.

Annual Service Award Dinner

This year's annual Service Awards Dinner will be held on Friday, December 1, 2006 at the Italian American Club. Mr. Kanaley invited the Health Commissioners to join in celebrating the dedication of LHH staff being honored that evening. Many employees have been recognized for their services to LHH for 10, 20, 30 and 35 year. They would be honored if commissioners and Dr. Katz could join in celebrating this commitment to LHH.

STRATEGIC PLAN

FY 06-07 –The quarter update on the Strategic Plan was attached to Mr. Kanaley's report.

FY 07-08 – LHH embarks on its Strategic Planning Sessions beginning October 17, 2007. The first day of the planning process was a training session dedicated to the 39 members of the Combined Leadership Team of Laguna Honda Hospital (Executive Staff, Medical Executive Staff, key Nursing leadership, and key Operations and Clinical Support leadership). This training session was based on the "Oz Principle", a session dedicated to "Getting Results through Individual and Organizational Accountability". This training session kicked off the Organization's 3-year goal of

improving Organizational Effectiveness by updating the Culture of LHH. Several key education programs will be implemented over the next few years focused on “Resident Centered” care, improving communications, team work, change management, accountability, etc. The strategic planning will continue with November’s session dedicated to Goals and Priorities for FY 2007-2008, and December’s meeting will be focused on Budget development to support those Goals and Priorities.

BUDGET REPORT

Following up from last month’s budget report, Mr. Kanaley reviewed the Payroll Budget for the first seven pay periods of the new fiscal year. LHH is currently \$2.1 million over budget year to date. LHH has been working diligently to determine the root cause of this payroll overage and get it back on track. Staff has determined two main reasons for the payroll overage: (1) there was a significant increase in the use of sitters as a direct result of the DHS surveys. LHH increased the number of sitters in use from an average of 12 per day up to over 35 per day in order to better manage some of the behaviorally challenging residents, (2) LHH opened one of its two closed units in order to focus on specialty care for the MR/DD population. This increased LHH staffing levels significantly.

What is LHH doing to get back on track with our budget overage?

- 1) Working on care plans to better able to manage those residents who have been requiring sitters. In the extreme cases where there are residents that require 16-24 hours of one-on-one care, staff must determine if LHH is the correct level of care for those residents and are working with Placement to find alternatives for those residents where they can better be managed.
- 2) Mr. Kanaley asked clinical leaders, Paul Isakson, MD, and Mivic Hirose, RN, MS, to recommend a plan to consolidate resources. A decision was made to close one of the units in the hospital. By now, having two units closed on campus, there will be correlated savings, and Laguna Honda Hospital can work within its budget to operate 40 units. There were many factors taken into consideration in determining which unit to close (\$200) including the current trend in Laguna Honda Hospital admissions, which reflects an increased need for non-ambulatory units for individuals with complex chronic medical illnesses. The operational needs within the hospital and the scheduling for the move into the new hospital (Clarendon Hall will be the first building vacated) also support this decision. Letters went out to staff and residents.

CENSUS REPORT

Average for August 2006	
Beds Occupied	1031.37
Beds Held	4.93
Admits	1.67
Total Paid SNF	1037.97
Total Acute Capacity (16)	
M7 Acute Census	2.10
L4 Acute Census	1.03
Total Paid Beds	1041.1

STAFFING REPORT

The Hospital Staff Vacancy rate reported for October 2006 is 10.81%. This month, it is up from September's report of 10.68 %. Some of LHH's requisitions have just been released from the Mayor or Controller's office although many may not be until LHH's payroll variance is brought under control. This is not helping LHH in its efforts to stay compliant with state licensing. Mr. Kanaley will keep the committee informed.

REGULATORY REPORT

DHS

There was no survey activity during the month of September.

On September 28, 2006, the attorney for Laguna Honda Hospital submitted a request to CMS for a Hearing regarding the re-visit survey concluded on July 17, 2006. In addition, Laguna Honda's Request for Hearing regarding the February 21, 2006 Standard Survey has been docketed and the attorney has requested that these Hearings be consolidated.

On September 29, 2006 the facility received a letter from the Provider Certification Section (PCS) that the Department of Health and Human Services, Centers for Medicare and Medicaid (CMS), Region IX, San Francisco, had advised them that Laguna Honda Hospital now meets the requirements for participation in the Medicare program. The PCS had also been advised that the action to terminate the participation agreement with Laguna Honda Hospital & Rehabilitation Center D/P SNF had been rescinded effective August 16, 2006. The PCS, in turn, rescinded their action and will continue our Medi-Cal certification consistent with CMS's action.

On October 2, 2006, LHH received a letter from DHS with the results of complaint investigations that were completed on June 21, 2006. The complaints were concerning quality of care treatment, resident rights, and resident assessment. After completing their investigations, DHS determined that they could not substantiate any violations of Federal or State regulations. DHS enclosed a Statement of Deficiencies and Plan of Correction (CMS 2567) indicating that no deficiencies were found during their investigation of nine self-reported complaint investigations.

On October 2, 2006, LHH was also informed by DHS that the Plan of Correction (POC) that it had submitted for the 2nd Revisit Survey was not accepted. A revised POC was submitted on October 5, 2006. On October 12, 2006, LHH received telephone notification that the revised POC had been accepted.

On October 16, 2006, LHH received a copy of the letter from DHS in response to the August 11, 2006 request for an Informal Dispute Resolution (IDR) submitted by its attorney. Essentially, the decision by DHS following their review of the documents submitted by LHH for the IDR remain unchanged for all four F tags regarding Comprehensive Care Plans (F 279), Range of Motion (F 318), Accidents (F 324), and Sanitary Conditions – Food Preparation and Services (F 371).

On September 12, 2006, LHH received the Form CMS 2567 from the CA Department of Health Services (DHS) for the second Revisit Survey that was completed on August 16, 2006. The letter from DHS was dated August 23, 2006. Telephone contact had previously been made on September 8, 2006 by LHH to DHS to inquire about the status of the survey report when the facility had not yet received the survey report.

Surveyors from the Daly City Licensing and Certification office have not been to LHH since the second Revisit Survey. In fact, their last site visit on self-report investigations was on June 27,

2006. This was a problem for LHH last year where they saved up all of the self-reports to investigate during the survey process. On September 25, 2006, LHH sent a letter to DHS field office asking them to update LHH on their outstanding investigations and schedule a site visit. LHH has not heard back from them yet.

DOJ

There is nothing new to report regarding DOJ.

PATIENT FLOW

Waiting List

Laguna Honda Hospital & Rehabilitation Center had an average waiting list of 28.25 people during the month of September 2006.

BOS Quarterly Report

Attached for your review is the third Quarter Report to the BOS for 2006. Our admissions from SFGH seem to be up this quarter giving us an average for the Year to Date of 62%.

TCM

Presentation of the September TCM report was deferred to the next meeting. Each month, LHH also reviews the number of discharges:

CATEGORIES	NUMBERS
AWOL	3
GGRC	1
Laguna Honda Hospital	7
Positive Care	4
Rehabilitation	10
Respite	0
Targeted Case Management	3
Total	28

Transition Steering Committee

As requested, a report on the status of the Transition Process will be reported quarterly. This item will be reported independent of Mr. Kanaley's report by the Chair of the TSC Mr. Larry Funk.

Public Comment

- Patrick Monette-Shaw said that Supervisor Daly sponsored an ordinance appropriating \$2.1 million to LHH for last year's shortfall. He will be submitting a public records request to see if the increased Medi-Cal reimbursement rate was added to this year's budget. If there is addition revenue coming into the budget, LHH should reconsider its decision to close S200.

Commissioners' Comments

- Commissioner Sanchez commended the report. The cohort of staff that has such great attendance is remarkable. The letters to staff and the community regarding the unit closure show a spirit of open communication.

- Commissioner Chow said the strategic plan is coming along nicely. He noted that LHH as been doing a tremendous amount of work in the area of education and economic development, but this is not reflected in the status report. Ms. Gee said it was an oversight that she did not include the activities. Commissioner Chow said he would like a report at a future meeting on cultural competency. He is excited that LHH has published “Recommendations for Future Research.” What are the plans to get funding for the research? Mr. Funk said that staff is looking at a variety of ways to get funding. There is a meeting next week with the California Healthcare Foundation. They are also considering approaching major business partners. Commissioner Chow said that he and Commissioner Sanchez could help with this effort. Commissioner Chow asked what the goal is for LHH’s budget. Ms. Inouye said there is no chance of making up the \$2.1 million shortfall. The plan is to reduce the variance each pay period to get from a \$258,000 variance to a zero variance. Mr. Kanaley said the goal is for this to happen at the end of the 11th pay period, which would result in a \$2.5 million shortfall. Mr. Kanaley added that there has been an increase in Medi-Cal rates that will result in an estimated \$3.5 to \$4 million increase in revenues. This revenue has not been budgeted. Commissioner Chow asked how much the unit closure would help alleviate the budget problems. Mr. Kanaley said that 17 FTEs were required to open the unit. In addition to closing the unit, LHH must reduce its use of sitters. They are working on this issue very diligently. Some patients may be at the wrong level of care, for example some of those for whom they are providing sitters 18-24 hours per day. Ms. Hirose said that she and Dr. Isakson rounded on all residents who require sitters. This, along with follow up with Placement, resulted in a discharge of a patient to a more appropriate level of care. Ms. Hirose added that with the closure of S200, she could reallocate 17 FTEs. She can also begin to hire the 19 CNA positions that have been approved, but for which the requisitions were not released. This will help tremendously.

4) **LAGUNA HONDA HOSPITAL REPLACEMENT PROJECT UPDATE**

John Thomas, Program Manager, LHH Replacement Project, presented a program update.

Link Building

The drywall and Mechanical, Electrical and Plumbing rough-in activities are proceeding. Layout for wall locations is completed. The end walls, which have an architectural finish have been placed.

The structural steel for the Knuckle Building, which connects the H-wing with the Link Building has been completed.

South Residence Building

All concrete for the floor and roof slabs has been placed. The focus is now on installation of the Mechanical, Electrical and Plumbing and the wall layout. Scaffolding will be erected on the perimeter of the building in order to begin construction of the exterior walls. A temporary wrapping will be applied to the exterior of the scaffolding to provide protection for the building during the winter months.

East Residence Building

Steel erection, which began on July 25th is underway and was completed in September. This will be followed closely by the Mechanical, Electrical and Plumbing trades installing inserts and hangers to secure the ductwork and pipes, which will be installed in the following months.

New Hospital Site Improvements

Handrails for the new stairs from Laguna Honda Blvd will be installed in early November in order to open the new stairs and demolish the temporary stairs at this location. Once this is complete, the final sections of the ADA path can be constructed and the trees and lights will be installed.

Existing Hospital Remodel

No change. Preliminary work is planned to begin in February 2007 at two staircase locations. Once this has been completed, the contractor will be able to begin work in H wing which is anticipated to begin in June, 2007.

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

Pictures of the construction site are updated every 20-30 minutes and are available at the following address: <http://www.dph.sf.ca.us/LHHReplace/>

Larry Funk updated the committee on the Transitional Steering Committee.

The Transition Steering Committee (TSC) is an interdisciplinary group comprised of LHH Administrators, managers, labor representatives and Project Team members. The TSC is responsible for the successful planning and implementation of all aspects of the activation of the new facilities on the Laguna Honda Campus. The TSC is also responsible for assuring that the LHHRP Vision Statement is achieved.

The view statement is:

“The City and County of San Francisco will design and construct a new campus on the Laguna Honda Hospital site which will provide housing and a complete continuum of long term healthcare services. This facility will be among the most innovative, technologically advanced, efficient, flexible, humane and natural facilities in the world. It will, by design, encourage rehabilitation and independent living while setting the standard for enhancement of the quality of life.”

The members of the Transition Steering Committee are:

John Kanaley	Executive Administrator
Paul Isakson, MD	Medical Director
Gayling Gee	Associate Administrator, Operations and Clinical Support
Mivic Hirose	Chief Nursing Officer
Arla Escontrias	Director of Community Affairs
Larry Funk	Associate Administrator, LHHRP
Cheryl Austin	Assistant Administrator, Operations and Clinical Support
Pat Skala	Information System Director
Regina Gomez	Interim Quality Management Director
Bob Thomas	Human Resource-Labor Relations Manager
Hosea Thomas, MD	Chief of Staff
David Woods	Director of Pharmaceutical Services
Rowenna Tran	Director of Administrative Support
Paul Carlisle	Rehabilitation Coordinator
Bill Frazier	Director of Therapeutic Activities
Viktor Kirienko	Acting Director of Facility Services

Steve Koneffklatt	Asst. Administrator, Materials Management & Nutrition Svc.
Angela Platzer	Director of Clinical Support Services
Susan Spencer	Co-Director of Education & Training
Debbie Tam	Nursing Director
Maxwell Chikere	Director of Environmental Services
Mozettia Henley	Nursing Director
John Thomas	LHH Replacement Program Manager
Pamela Low	LHH Replacement Project Manager
Yvonne Martinez	Local 790 SEIU, Union Representative
Bob Diaz	Project Executive, Turner Construction
Benji Larance	Associate Principal, Anshen+Allen, Architect

The TSC meets on the first Tuesday of each month in Room B102 at Laguna Honda. An agenda is prepared for each meeting and minutes including action items are documented and distributed to all members.

The TSC monitors the project schedule, addresses policy issues related to design, construction, and logistics issues. TSC serves as the clearinghouse for action on for hearing progress reports and recommendation from staff and consultants.

During the third quarter of 2006, the Transition Steering Committee heard reports from several ad hoc workgroups/committees and provided guidance and direction in developing further plans and making timely decisions. Among the topics presented and discussed at the TSC was the status of the:

- Medical Equipment & Furnishing Planner RFP, and FFE Budget
- Operational Audit Plan
- Organization's Cultural Change Plan
- Assisted Living Housing Plan and Options for Construction
- Convergent Technology Plans for IT, Building and Clinical Systems
- Farm, Greenhouse, Orchard Plan Development
- Elevator Retrofit/Utilization Report
- Imaging Equipment Selection
- New Laundry Site Lease and Development Report
- Resident Move Plans
- Bed Selection Committee Report
- Medication Administration Pilot Report
- Nutrition Service Pilot Program Plans
- Carpet Evaluation Report
- Remodel of Main Building Phasing Report
- Program Development Report on LEEDs (Leadership in Energy and Environmental Design)
- Space Committee/Departmental Move Plans
- Vending Services Operations
- Regulatory Reports: OSHPD/Licensing & Certification Issues
- Discussion of Training Requirements and Resources
- Importance of Budget Development for FY 08-09
- Discussion of Pebble Project Research Opportunities

During the third Quarter of 2006, the TSC also heard progress reports by the LHH Clinical Leadership regarding potential evidence based design research projects associated with the new

facility. The Clinical Leaders in collaboration with the Center for Health Design produced a document entitled “Recommendation for Future Research” (see attachment). The Hospital continues its evaluation of this report as it determines appropriate research endeavors related to the new facility.

Public Comment

- Patrick Monette-Shaw said the Resident Council should be represented at both the Transition Steering Committee and the Mayor’s assisted living committee.

Commissioners’ Comments

- Commissioner Chow urged the addition of the Resident Council to the Transition Steering Committee.
- Commissioner Sanchez seconded Dr. Chow’s recommendation. The next step in this process is to open up dialogue with the residents.

15) OPERATIONS REPORT

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

DEPARTMENT OF EDUCATION & TRAINING

Workplace Violence Prevention Training

John Butts, RN and Jill LeCount, RN, MS, of DET have taken the lead in preparing and providing LHH-specific workplace violence prevention training during the week of October 10-13. The training is an annual refresher for all staff. The content resulted from joint collaboration between Human Resources, DET, and LHH Psychologists and Nursing. The topics explore issues based on actual LHH cases, and the training is interactive. The program builds on the foundation provided by Safety Management and Response Techniques (SMART) training that evolved from the LHH Safety Initiative.

Hospital–Wide Orientation

Susan Spencer, RN, MS, continues to foster the evolution of new employee orientation. The latest addition to the three-day program now includes the DPH orientation video. DPH had been planning a department-wide introduction to DPH, to which LHH DET suggested the use of a videotape to insure consistency of presentation and to overcome the logistics of coming to a variety of orientation sites for each new employee orientation. The video provides an official welcome by Dr. Katz and an overview of the DPH system, with great pictures of LHH and other DPH sites and staff.

Training Compliance

DET continues to provide make-up classes to provide ample opportunities for LHH staff to achieve the goal of 100% compliance with mandatory training. Make-ups for October mandatory classes include Infection Control / Bloodborne Pathogen Training and Illness and Injury Prevention Program training highlighting Respiratory Safety.

Distance Learning Classes

DET provides clinically-oriented courses utilizing live satellite and video webcasting technology. LHH is equipped with a satellite dish that allows viewing of clinical programs developed by the University of Florida. Expert speakers from all over the country are broadcasted by live videoconferences, and speakerphones are set up in the classroom to allow real time participation in

the discussion. Cancer and Psychoactive drugs are 2 of the Distance Learning subjects for October. These classes are open to all clinicians and provide a convenient 'lunch and learn' opportunity.

FOOD & NUTRITION SERVICES WEEK

National Food and Nutrition Services Week was celebrated October 9-13. LHH Nutrition Services employees were treated with a Chinese Food Dinner in honor of their service to the residents. The meal consisted of Peking Duck, Broccoli Beef, Chow Fun and other Chinese culinary delights. The best part of the meal was that the food was prepared by a local restaurant and not by the Food Service staff! This week was acknowledged by special aprons and hats worn by cafeteria staff as well as a special pin worn by employees of the department depicting "Food & Nutrition Services - Taking pride in what we do". The staff serves over 5,000 meals to residents, staff and visitors of LHH each day! - Thanks for what they do!

ENVIRONMENTAL SERVICES WEEK

Environmental Services Week, September 11- 15, is a national recognition of the contributions of EVS workers toward patient care services. LHH celebrated the event on September 12, with a luncheon planned and implemented by staff of the Department. The event included a multi-ethnic luncheon, with a menu representing Chinese, Filipino, African-American and Mexican dishes, a raffle drawing with door prizes, and a musical slide show with photos of the EVS staff. John Kanaley, Mivic Hirose, and Gayling Gee were on hand to personally thank members of the Department for their contributions to patient care.

DISASTER DRILL

LHH will be participating in the 2006 State-wide Golden Guardian Disaster Exercise on November 15th. This year's scenario is a magnitude 7.9 San Andreas earthquake occurring at 5:12 am in the morning, with significant damage to many of the major hospital facilities, including LHH. All hospitals, including LHH, will be doing a 'cold start' to the drill, i.e., the majority of staff, especially Incident Command/management personnel, are not on campus. Immediately after the call from the DPH Command Center, the nursing supervisor will open up the Incident Command Center and begin the process of calling in key personnel. Our primary goals are to test our internal and external communication structure, evaluate our response time in a 'cold start', and test our surge capacity. The LHH Emergency Preparedness Subcommittee, consisting of Medicine, Nursing and Operations staff representatives, are responsible for coordinating the drill. The LHH Emergency Preparedness, using the Incident Command system, will be evaluated. As we have done in previous drills, the Subcommittee will conduct a debriefing and will be completing a post-incident evaluation report for the DPH and Emergency Medical Services Agency.

LHH has become increasingly integrated with the DPH Emergency Preparedness planning and program development. Efforts are underway to insure funding of emergency preparedness equipment and to explore additional funding opportunities for training.

INFECTION CONTROL

Monthly Surveillance:

- No outbreaks have been reported for the month of October.

Sharp Injury Log Update:

- No injuries reported from OSH Clinic for the months of September and October 2006.

Influenza Vaccination Program:

- The LHH 2006-07 Influenza Vaccination Program has begun! Angela Platzer, RN, MS, and Eunice Lo, PharmD, are coordinating the efforts. The goal is to immunize all residents and staff. To date, LHH has been provided 600 doses, with additional doses expected within the

next few weeks. The initial effort is to immunize staff. The next batch of vaccine will be used for residents, as well as for the remaining staff. The 'Mobile Vaccination Cart' was available starting October 16, and, together with the LHH Medical Clinic, has immunized 450 staff as of October 19. This year, LHH does not expect any shortage of vaccine.

Commissioners' Comments

- Commissioner Chow asked if scabies is still a problem. Ms. Gee said this issue has been resolved.
- Commissioner Sanchez asked if staff feels confident that LHH will be fully integrated into DPH's emergency response efforts. Ms. Gee said the citywide hospital participation in emergency preparedness has really come together over the past year. She works closely with Mary Ellen Carroll, who is the point person for DPH's emergency preparedness. There has been a lot of work both within the department and externally. The reality is that, in an emergency, LHH has 1200 patients to take care of.
- Commissioner Chow said LHH could be an asset during an emergency, as it has the potential to provide surge capacity for hospitals across the city.

6) CLINICAL CARE REPORT

Hosea Thomas, M.D. Mivic Hirose, Nursing Director and David Wood, Pharm. D., presented the Clinical Care Report.

Social Work Interns at LHH

Under the leadership of Janet Gillen, Director of LHH Social Services, the Social Services Department has welcomed on board, three new interns from UC Berkeley, UC Hayward and San Francisco State, who will be spending the year learning about clinical counseling and discharge planning. For the past 16 years, Social Services has sponsored both 1st and 2nd year graduate students in social work and gerontology programs, to provide specialized training to students considering medical social work and hospice as their field of employment.

The interns spend a full school year from September through May and under supervision perform a wide variety of clinical tasks and fieldwork. The Department has also successfully hired six former interns as Medical Social Workers at Laguna Honda Hospital. LHH Social Services welcomes the Social Work interns and look forward to a year of collaborative ventures with the universities.

Medication Safety Summit

Nursing Leadership and Pharmacy organized a Medication Safety Summit, which was held on Monday, October 16, 2006. Attendance included leaders from Nursing, Pharmacy, Human Resources and Quality Management. The purpose of the summit was to bring together various disciplines to review our current process for following up on medication errors and to ensure that we are in agreement on the process that is used.

Staff divided into workgroups to review its current way of assessing medication errors and to review our post-medication error follow-up. Staff adopted an algorithm for following up on medication errors, discussed examples of nationally-reported medication errors and reviewed the Board of Registered Nursing's standards of competent performance.

After agreeing on how nurse leaders will follow up after a medication error, staff decided that the next step would be to organize a small task force, who would critique medication error follow-ups and would make recommendations for further actions, as necessary. The committee's first meeting was held on Friday, October 20, 2006.

LHH Computer Training Project Presentation

Mivic Hirose was an invited speaker at the Fall Conference of the California Community College Association of Occupational Education (CCCAOE) in Anaheim last week. One of the three major topics of discussion during the two-day conference is on healthcare information technology.

Mivic joined Ed O'Neil (UCSF's Center for the Health Profession Executive Director), Jeff Rideout, MD (North American Healthcare and Vertical Cisco Systems VP and Medical Director), and Jonah Frolich (California HealthCare Foundation Senior Program Officer) to provide the participants information on factors driving adoption of healthcare information technology and to appreciate the need for and importance of training prior to implementation. Mivic shared with the audience LHH's computer training project that is a collaborative partnership with City College of San Francisco, Information Technology Consortium of San Francisco and United Healthcare Workers- West.

The conference has devoted three sessions on healthcare information technology to strategically determine the need to develop a statewide community college training solution to support healthcare information technology implementations. LHH's innovative project and partnership is serving as a catalyst for this potential statewide initiative.

The Oasis Store at Clarendon Hall

LHH celebrated the grand opening of Clarendon Hall's The Oasis Store last month. The event included a ribbon-cutting ceremony, job descriptions and applications, and low-priced snacks it was truly a grand event. The store, a program of Vocational Rehabilitation is run with the assistance of residents, activity therapists and volunteers. The Hospital's Vocational Rehabilitation Coordinator, Vivian Imperiale, serves as the consultant. The Oasis is part of the Vocational Rehabilitation's PREP (People Realizing Employment Potential) program.

In preparing for the store staff held several meetings where residents came to talk about the steps needed to open, including marketing/publicizing, stocking, scheduling and staffing the store. The residents chose the inventory based on their own preferences and also on what they perceived other residents enjoy.

The Oasis is a setting where people can demonstrate and explore what they *can* do. It provides the opportunity to look at assets rather than deficits. For many people, their talents are yet to be discovered. For others, their talents have been dormant while they focused on their physical challenges. Now, through The Oasis, they have a chance to shine while providing a valuable service to the residents and staff at Clarendon Hall.

New Volunteer Coordinator

LHH's new Volunteer Coordinator, Linda Acosta, started on Tuesday, October 10th. Before coming to LHH, Linda was a manager of a volunteer-run community clinic for many years. In addition, she also personally volunteers at many organizations, such as at San Francisco General Hospital as a health worker and at University of California, San Francisco as a Clinical Research Coordinator, where she built a successful recruitment program for an ongoing two-year study in addiction. With a wealth of experiences in the recruitment and retention of volunteers, Linda is an asset to LHH's Volunteers Program. Please join us in welcoming Linda to LHH.

LHH now has two Volunteer Coordinators who will direct and coordinate Volunteer Services programs. Diwata Ico will head the Clothing Room, Donations, Gift Shop and Holiday Gifts programs. Linda Acosta will take the lead on the Express Bus Outing, the Library, and the "Best Friends" program.

Future goals for the Volunteer Services Program include:

- Proactive recruiting: identifying, making presentations and building rapport with potential referrers (church, senior centers, Volunteer Center, RSVP - Retired Seniors Volunteer Program, colleges and high schools), utilizing the Internet to reach volunteers (Craigslist, Volunteer Center)
- Enhancements in the Library such as more programs and activities for residents
- Enhancements in Clothing Room and Donations
- Membership to volunteer associations
- Establish programs to enhance the quality of life for our residents, such as massage therapy
- Newsletter for our volunteers

LHH Medical Staff Appointments

Appointments:

- Asha Swaroop, M.D. – Internal Medicine – (Active/Night & Weekend)
- Priscilla Abercrombie, NP (Active/Consultant)
- Firoozeh Parsa Nezhad, M.D. – Internal Medicine – (Active/Daytime)
- John Coyne, PsyD – Clinical Psychology – (Active/Daytime)

Reappointments:

- Tera Cardone, PsyD. – Neuropsychology – (Active/Daytime)
- Lola Giusti, D.D.S. – Dentistry – (Active/Consultant)
- Neil Solomon, M.D. – Internal Medicine – (Active/Night & Weekend)
- Theresa Berta, M.D. – Internal Medicine – (Active/Daytime)
- James Reed, M.D. – Internal Medicine – (Active/Consultant)
- Denise Rettenmaier, D.O. – Podiatry - (Active/Consultant)
- Eric Stamps, DPM – Internal Medicine – Active/Night & Weekend)
- Thao Vu, OD – Optometry – (Active/Consultant)
- Bruce Miller, M.D. – Neurology – (Active/Consultant)

LHH Credentials Year-to-Date Report, 7/1/2005 to 10/16/2006

New Appointments	19
Reinstatements	0
Withdrawal	0
Reappointments	73
Delinquencies:	0
Reappointment Denials:	0
Resigned/Retired	18
Disciplinary Actions	0
Restriction/Limitation of Privileges	0
Changes in Privileges	0
Additions	0
Voluntary Relinquishments	0

Commissioners' Comments

- Commissioner Chow asked why physicians are not at the summit. Dr. Woods said medical staff were invited but due to scheduling conflicts could not attend. However, the doctors are very involved in the process through the P&T Committee. Commissioner Chow asked if LHH has computerized physician order entry. Dr. Woods said this is part of the larger IT plan, but is not done currently.
- Commissioner Sanchez urged the medical staff to appoint a point person to this effort. Dr. Thomas said there are several physicians involved in this effort, and physicians will be present at the upcoming committee meeting.

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 11:10 a.m. Present in closed session were Commissioner Chow, Commissioner Sanchez, Evonne Arita, Executive Assistant, Cheryl Austin, Assistant Administrator of Clinical and Support Services, Gayling Gee, Associate Administrator of Clinical and Support Services, Regina Gomez, Interim Director, Quality Management, Mivic Hirose, Director of Nursing, Valerie Inouye, CHN CFO, John Kanaley, LHH Executive Administrator, Hosea Thomas, M.D., Chief of Medical Staff, Adrienne Tong, Deputy City Attorney, David Woods, Pharm. D., Director of Pharmacy and Michele Seaton, Health Commission Executive 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 11:40 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 11:40 a.m.

Michele M. Seaton
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.**