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MINUTES

**JOINT CONFERENCE COMMITTEE
FOR
LAGUNA HONDA HOSPITAL MEETING**

**Wednesday, January 21, 2009
3:00 p.m.
Conference Room A300
375 Laguna Honda Boulevard
San Francisco, CA 94116-1411**

1) CALL TO ORDER

Commissioner Illig called the meeting to order at 3:10 p.m.

Present: Commissioner Illig, President (for Commissioner Sanchez); Commissioner Margine A. Sako, Member

Absent: Commissioner David J. Sanchez, Jr., Ph.D., Chair

Staff: Luis Calderon, Arla Escontrias, Larry Funk, Gayling Gee, Regina Gomez, Mivic Hirose, John Kanaley, Timothy Skorvinski, M.D., John Thomas and Rowena Tran, David Woods

2) APPROVAL OF MINUTES OF THE MEETING OF November 19, 2008

Action Taken: The Committee approved the minutes of the November 19, 2008 Joint Conference Committee meeting.

3) EXECUTIVE ADMINISTRATOR'S REPORT

John Kanaley, LHH Executive Administrator, presented his Administrator's report.

EMPLOYEE OF THE MONTH

December 2008 – Noah Santiago, Gardner

Noah has worked as the solo gardener, maintaining Laguna Honda's 63 acre campus for the last 6 years. He is a very humble employee who performs his daily tasks with pride and never complains about the workload or the weather; you can always find him working outside whether it's sunny, foggy or rainy. He has great visions of how best to landscape the campus as is evident in the garden beds at the entrance of the campus up to the building.

Noah is currently working on developing a long term plan to further improve the appearance of the campus and the accessibility and safety of the multitude of trails that traverse our grounds.

ANNOUNCEMENTS/INFORMATION

Medical Staff Leadership Changes –

Medical Director: Dr. Isakson has gone out on extended leave, and is not expected to return. Mr. Kanaley and the Commissioners wish Dr. Isakson well and thanking him for his many years of service.

Assistant Medical Director: The position of Assistant Medical Director, Dr. Tim Skovrinski's position, has been eliminated. The Hospital has been operating with three medical staff in half time administration positions. The Medical Director, the Chief of Staff, and the Assistant Medical Director all devote half of their time toward administrative duties. Given the reduction of our census by 25%, and the cuts made to the medical staff, we can no longer support three administrative medical staff positions. With these reductions in administrative services, Mr. Kanaley will be asking various members of the medical staff to assume responsibility for various aspects of medical operations, performance improvement processes, and to collaborate with their counterparts in other hospital departments on transition-related projects. This is more in line with the shared governance model I am seeking for the entire hospital as we transition into the new buildings. This model builds on improved communications, inclusion and shares in accountability.

LHH is meeting the requirement of five full time medical staff reductions by (1) eliminating the Assistant Medical Director position, (2) cutting 2.5 vacant requisitions, (3) moving a health worker out of another vacant physician requisition, and (4) trimming physician hours by 20 hours per week in order to avoid any further layoffs of the Medical Staff.

Dr. Skovrinski will be moving over to be the Medical Director of one of the clinic sites within the Department of Public Health. LHH wishes him continued success.

As of January 13, 2009, Dr. Hosea Thomas has agreed to serve as Interim medical Director until a permanent replacement for Dr. Isakson has been hired. We thank him for his dedication and commitment to LHH. The hospital will also be contracting with an executive search firm to find a new Medical Director over the next couple of months. All interested internal candidates are encouraged to apply and the medical staff will be included in the selection process.

The Laguna Honda Grapevine – In the interest of keeping you informed of news at LHH, Mr. Kanaley included copies of LHH's newsletter.

IHSS Public Authority Peer/Mentoring Support Program –

The San Francisco IHSS Public Authority is pleased to announce the launch of a new Peer/Mentoring Support Program. The Public Authority believes that people with disabilities who are managing successfully with their disability can be called upon to share their experiences with other individuals who have disabilities. Peer Mentors will inspire hope for independence and will actively assist those who live in institutions like Laguna Honda Hospital.

Target Population

The Peer Mentoring program will target three specific groups:

1. Consumers in institutional settings who need to help in transitioning to more independent community settings.
2. Existing consumers who are having difficulty with certain issues such as homecare, transportation/paratransit, housing and self-advocacy.
3. The newly disabled who are just learning to navigate the system.

Project Objectives

The program will initially recruit and train 10 mentors to provide support to consumers. All mentors will receive training and ongoing support. All mentors will have had significant experience with living independently, paratransit, self-advocacy, housing, and IHSS. Services provided by our Peer/Mentors will be tracked, reported and used to further refine the program. Our Peer/Mentor program will be utilized for the following:

1. Assisting consumers attain independence.
2. Serving as Peer/Mentors to consumers by giving social support through teaching, befriending, encouraging, listening and supporting the mentee.
3. To help provide appropriate referrals and follow-up to assure consumers get assistance with the many programs that keep them independent.

For more information on the Peer/Mentor program, contact Sergio Alunan at 415-593-8112.

STRATEGIC PLANNING

Fy09/10 – September 2008 - Strategic planning for the fiscal year 09/10 commenced in September with an 8 hour training session for the members of the LHH Combined Leadership Team. The training focused on "The Culturally Effective Healthcare Program Development project" which is a comprehensive approach to reducing health disparities through programming that values diversity and inclusion. The program goes beyond training to include organization-wide changes to job postings, performance appraisals, and key policies and resident documents.

October 2008 – October’s retreat covered (a) Mission, Vision, Values, and Goals, (b) the state of the Current FY Budget and future expectations (c) A working session that focused on each of the 3 current goals.

Value - Our residents come first.

Mission - To provide high quality, culturally competent rehabilitation and skilled nursing services to the diverse population of San Francisco.

Vision - To be an innovative world-class center of excellence in long-term care and rehabilitation.

Goal 1: Quality Improvement - *Ensure regulatory compliance, performance improvement, and high-quality care.*

Goal 2: Transition Planning - *Develop a systematic approach to successfully build and initiate the operational planning for the new hospital.*

Goal 3: Communications - *Establish and improve communication within and outside LHH.*

November 08 – focused on (1) budget initiatives, (2) mid year budget reductions (3) communications and (4) transition planning, particularly, a day in the life of a Resident.

December 08 – focused on (1) budget initiatives, (2) mid year cuts, (3) capital budget, (4) Transition Planning.

Note: Of particular note, many of the programs we had hoped to improve upon and role out in the new building have been deferred due to the budget constraints of the current economy. For example, following the Eden model for Skilled Nursing, much of the resident’s day focused around social dining. The increased staffing necessary to provide this service has become prohibitive in this economy, as such, an alternative proposal has been submitted providing social dining, however, the meals will be brought in trays rather than served from the bulk provided to each galley on each floor. Hopefully, the social model can still be achieved without the galley style service.

BUDGET REPORT -

FY 08-09 Salary Monitoring – Mr. Kanaley reviewed the latest bi-monthly salary spending report. YTD shows a negative variance of \$ 4,125,866 with a year end projection to be over by \$3.9 million. This is an increase from last month when we projected a \$3.8 million year end deficit. The majority of the deficit is related to structural problems in our budget; however, we are also over significantly due to uneven decrease in census along with the decrease in staffing levels. As we reduce our census from 930 to 780, we are also budgeted to reduce staff by 173.3 FTE over the fiscal year, unfortunately, this has not happened in the orderly fashion we hoped for.

LHH is projecting a positive increase in revenue by \$9 million more than we projected last month, this is due to calculations in the DP Supplemental, that provides a differential payment between our

costs, our reimbursements, and the average costs of DP-SNFs in California from 2 years ago. LHH was looking at ending the year over \$10 million over budget. Fortunately, this increase in revenue has helped offset this deficit.

The second quarter projections show a total variance to budget of approximately (\$900,000) for year end.

Mid Year Cuts – The Adult Day Health Center, Alzheimer’s Day Care Resource Center and the Senior Nutrition program have been cut as a mid year cut, with a projected savings of approximately \$400,000 per year. The Impact is on approximately 43 ADHC clients, approximately 7 ADCRC clients, and approximately 35 SN clients per day.

CENSUS REPORT

Nursing Unit Census Daily Average for December 2008	
SNF Census	
Beds Occupied:	809.74
Beds Held:	7.39
Admits:	0.68
TOTAL SNF Census:	817.81
Acute Census:	capacity (16)
M7 Acute Census:	1.84
L4 Acute Census:	.29
TOTAL PAID BEDS:	819.94

STAFFING REPORT

The hospital staff vacancy rate reported this month is 2.36%. LHH currently have 27.94 vacant FTE’s over and above our salary savings. As they reduce their census, we are also reducing our staff. See table below.

1-Jul-08	1-Aug-08	1-Sep-08	1-Oct-08	1-Nov-08	1-Dec-08	1-Jan-09	1-Feb-09	1-Mar-09	1-Apr-09	1-May-09	1-Jun-09
1384.38	1368.57	1352.76	1321.15	1321.15	1305.34	1289.53	1273.73	1257.92	1246.07	1210.50	1210.50

REGULATORY UPDATE

The Department of Justice visited November 13-19. They are reviewing our compliance with the settlement agreement we entered into with them in July 2008. This visit was a collaborative visit to look for ways we can improve the quality of care and the discharge potential of our Residents.

PATIENT FLOW

Waiting List – As of January, 2008, when we began to no longer accept SNF patients, we have not been maintaining a waiting list. We are still admitting to our Hospice, Rehab and Positive Care units as beds on those units become available.

Board of Supervisors Quarterly Report – (Quarterly reports due January, April, July, October) From the report, (**Attachment C**), you will see the average for the 4th quarter was 60% and for the year 2008 it was 56%.

TARGETED CASE MANAGEMENT

Luise Calderon presented the TCM report for December 2008. In that month, 17 LHH residents were screened and assessed. Each month, LHH presents the overall number of discharges. The following are for December 2008:

CATEGORIES	NUMBERS
Rehabilitation	5
Respite	0
TCM	5
LHH	1
AMA	0
AWOL	2
Positive Care	1
TOTAL	14

TRANSITION STEERING COMMITTEE

As LHH begins 2009, the Hospital staff is extremely excited and optimistic about completing all the planning and preparation for moving into the new facility early next year. All of the activation planning is correlated to the completion schedule of October 31 for the South and Link Building, and December 31 for the East Residence Building. This year will also mark the culmination of all the work of the Department of Public Health and the Commission in achieving the City's vision for the new Laguna Honda. The realization of this vision will result in one of the safest and highest quality of care environments ever created in a long term care facility. The Hospital staff will continue to utilize monthly Transition Planning Committee meetings supported by specialty consultants to complete all work to successfully occupy the new facility on schedule.

During the 4th quarter of 2008, the Hospital completed significant work efforts in redesigning the workflow of all major services which has enabled the development of operational plans and budget proposals for all departments for all major services, as well as the operating budgets proposals for fiscal year 09-10. During this process, the hospital has been able to incorporate refinements in its approach to operations which were precipitated in some part by the economy, and our desire to operate the new facility as cost effectively as possible. Examples of these refinements include incorporation of the resident laundry operation on the care units, and the introduction of a cook chill nutritional service program. Both of these measures will significantly reduce operational costs for the new facility. The Hospital team will continue to explore other opportunities to streamline the

operation of the new facility. As we begin the first quarter of 2009 there are several significant action items the transition team will be focusing on. These items include the following tasks:

1.) Initiating the Furniture, Fixture and Equipment (FFE) Procurement Process.

Through a partnership with the City's Purchasing Department, the Hospital will construct a procurement team of staff from the Purchasing Department who will collaborate with our Materials Management staff to begin purchasing approximately \$40 million of FFE including all required IT and PBX equipment. We plan on having this team in place by the end of January to begin the procurement process, subject to the availability of funding. Project leadership is in close communication with the Controller's Office regarding cashflow available for the project, so that work can begin as quickly as possible.

2.) Move Planning.

Project consultants have completed assessments of the moving requirements of each department which will be relocated into the new buildings. The move plans will be refined as to sequence and duration of each move. A RFP for a healthcare moving firm is under review by the Project Team, and should be put out to bid in the near future. A draft patient move plan has been developed and is undergoing refinements by the clinical leadership of the Hospital.

3.) Mock Up Room Evaluation.

Two prototype patient rooms are complete and are undergoing inspection and evaluation by the clinical and operating teams of the Hospital. Some refinements to the finish schedule and equipment may result from this review, as well as additional information on workflow processes.

4.) Equipping the IT Server and PBX Rooms

The contractor has reported that the IT Server and PBX rooms will be available for installation of equipment in March 2009. These areas will be the first to be outfitted with equipment, and as such are major milestones for the Project. The Transition team is working closely with DPH IT staff and City DTIS staff to review final equipment specifications, and procure and install this vital equipment in the Server and PBX rooms. The City team is collaborating with the General Contractor to facilitate this high priority work. With the proliferation of technological support for the healthcare industry, it has become abundantly clear of the complexity and importance of giving a high priority to the IT infrastructure for the new facility.

5.) Security for the New Facility.

With the advent of the IT equipment installation in March, it will be imperative that the Hospital assume responsibility for securing the IT rooms and their contents as of that date. A Hospital team is developing plans to provide additional security staffing, and training on the use of the new security systems. The security program will continue to expand as the project moves toward completion, to assure the safety and security of the new buildings and contents.

6.) Plant Services Training and Preparation.

The Plant Services Department leadership will become much more actively involved in the planning of the commissioning for the new facility. More staff resources will be assigned to become familiar with the operating systems in the new buildings, and be engaged as a partner in the start up process. The Plant Services Department will begin creating management plans for the Life Safety, Building Management, and Utility Systems for the new buildings.

7.) Staff Education and Training Program Development.

The design of the new facilities will require substantial investment in developing new curricula and programs to educate staff about the operation of the new facility, hospital wide and department specific, prior to move in day. To support this work effort, the Hospital leadership team and consultants will support the Department of Education and Training to assure all required documents are produced timely, and all staff are properly trained and fully prepared to provide quality care for the residents in the new environment. Doing the first quarter of 2009, this plan will be fully developed including identification of required resources with a schedule for production of work products and a training schedule.

8.) Preparation for State Licensing & Certification Inspection and Certificate of Occupancy. In parallel with the Hospital's preparation of a comprehensive education and training program, the Hospital leadership team and consultants will collaborate with the Quality Management Department to prepare for the final inspection of the new facility by the State's licensing and certification division. This process involves the production of large volumes of documentation, policies and procedures, updated emergency preparedness plans, etc. This effort will be carefully planned in the first quart of 2009, with production work to begin shortly thereafter.

9.) Space Planning – Main Building.

It has been several years since the Hospital has revised the final space allocation plans for the Main Hospital Building. During this quarter the plans will be reviewed and revised to account for the changes in programs and volumes for service that have occurred since the early 2000s. The results of this work effort will be confirmation of interim and permanent move locations for all services, the schedule for those moves, and accommodation of any new space needs which have surfaced.

10.) Pebbles Research Projects.

The Hospital is pleased to report that the Laguna Honda Foundation has pledged \$20,000 to start two research projects focused on the elements of Evidenced Based Design in the new facility. These two research projects are the 1.) enhancements to the Quality of Life/Care in the new buildings, and 2.) the Business Case / Public Benefit of the new facility. Dr. Uriel Cohen has been retained to consult on the research methodologies for these projects. The Hospital is continuing to collaborate with Anshen & Allen, Turner and other major partners on the projects to receive an additional \$40,000 in pledged support to complete these projects. The Hospital continues to explore means of advancing additional research projects which address reduction of medication errors, fall reduction, and cultural change in the facility as we migrate from the old into the new facility.

11.) Communications Strategy.

The Marketing/Communications group of the Transition Steering committee has initiated a dialogue with the communications officers from Anshen & Allen, Turner Construction Company, the Center for Health Design, and the Department of Public Works to develop a strategic communications plan for a positive conclusion of the LHH Replacement Project. This plan will indentify major milestones, deliverables and opportunities to leverage the successful completion of the project for the benefit of the community.

In summary, the Replacement Project is in a very sound position to continue the Transition Planning process in 2009, and has all the elements to assure a safe and successful move of all patients into the new facility on schedule.

Public Comment

Patrick Monette Shaw claimed that the Alzheimer's patients enrolled in LHH's ADHC cannot be absorbed elsewhere in the City and felt that closing the ADHC violates May 23, 2009 DOJ settlement agreement.

Patrick Monette Shaw questioned why medical leadership staff was reduced while nursing administration staff was not. He felt that cutting Nursing Administration staff could save ADHC from closure. He commented that \$164 million in raises are going to all the city's 25 unions annually.

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

South, East and Link Residence Buildings The new hospital is approximately 80% complete. In the South Residence, installation of sheetrock is completed on the walls. Ceiling sheetrock is now underway on level 2 and will proceed through the building as soon as final bracing is completed on the mechanical, electrical and plumbing. Stucco at the Link Building is complete and the scaffolding has been removed. The man-lifts for both the south residence and the link buildings have been removed. Stucco on the East Residence Building is 80% complete. Resident mock-up rooms in the South Residence Building have been completed and are being evaluated. Production tile installation is underway in the South Residence and Link Buildings, with the East to follow beginning in February.

Revised Substantial Completion dates: October 31, 2009 South and Link buildings
December 31, 2009 East Residence Building

The Knuckle Building Interior wall framing has been completed. Drywall has been installed. The permanent loading dock and bulk oxygen storage is under construction.

Furniture, Fixtures & Equipment consultants continue to work with hospital staff and the Replacement Team to prepare to purchase new furniture and medical equipment for the new building.

Clarendon Hall Project is complete. The site was turned over to Turner for relocation of their sub-contractors trailers and parking from the 'valley meadow site.

Hospital Remodel Seismic upgrade construction began on the 3rd floor in December. Elevators 1 & 2 are permanently out of service. A wall will be built at the eastside of the 3rd floor hallway and in the cafeteria. Moran Hall is serving as the interim cafeteria dinning room until the cafeteria is open in the new building.

Tree Allee Modifications Final work at the Tree Allee has started and the ramp portion is to be opened by January 20th. At that time the stair will be closed for modification until March.

Public Comment

Patrick Monette-Shaw asked for clarification on what the "Committee of Three" is. Mr. Kanaley explained that the "Committee of Three" consists of the Mayor's Office, the Controller's Office and the Department of Human Resources that sit united to oversee the review and approval of requisitions.

5) OPERATIONS REPORT

Gayling Gee, Associate Administrator of Clinical and Support Services, presented the Operations Report.

DEPARTMENT OF EDUCATION & TRAINING:

Organizational Development: Improving Communication through Diversity and Inclusion

DET is kicking off the New Year by wrapping up the first-year activities of LHH's "Culturally Effective Healthcare Program Development" project. As the California Endowment funding cycle is coming to a closure in February 2009, we are well ahead of our original goals, and we are planning next steps for the second year of the project. DET has been invited to present this 2-time award-winning program during National Public Health Week in April 2009 with John Kanaley as the keynote speaker. The formal program evaluation by consultant Ed O'Neil, PhD, MPA, FAAN, Director, UCSF Center for the Health Professions, is expected mid-January. Full day classes continue into 2009 (schedule attached) and shorter training sessions that compliment the full-day program are underway. Special one hour sessions and planning meetings with Medicine, Nursing, and Psychiatry leadership have reinforced our awareness that troubled economic times are not an excuse to drop this important cultural competency work, but rather all the more reason to proceed in the interest of better communication, teamwork and resident satisfaction. DET will continue to collaborate with stakeholders organization-wide to find creative ways to continue this important organizational development journey.

Effective Transitioning into 2010

DET has set up several seminars to help support the challenging transitions necessitated by LHH's downsizing. Teri Jourgensen, of the Department of Human Resources, provided an on-site seminar attended by over 20 LHH managers on December 17, 2008. Additional drop-in, on-site counseling with the Employee Assistance Program staff was made available to LHH employees through December. DET will also co-facilitate two Leadership Forum Transition / Change Management Seminars with organizational development and diversity specialist, Santalynda Marrero, EdD, on January 14th and February 11th, 2009.

Regulatory Compliance

DET has completed a 2008 Regulatory Training Compliance report showing the attendance compliance for each of our eleven (11) mandatory training classes by all LHH staff. The overall compliance is 80.39% before adjustment for staff who are on long-term leave (and therefore excused from training until they return). Reports will be distributed to department heads for follow-up in order to achieve 100% adjusted compliance rates.

DET is evaluating computer-based training options as the HealthStream contract reaches its term in late 2009. The California Department of Public Health (CDPH) has approved only 2 computer-based training systems for Certified Nurse Assistants (CNAs), and this important approval does not include the HealthStream product. LHH may be able to influence HealthStream to obtain CDPH approval as a condition of contract renewal.

INFECTION CONTROL

In response to recently passed California Senate Bills 739, 1058 and 158, each of which were written to protect the public health by reducing preventable Healthcare-Associated Infections (HAIs), the LHH Infection Control Department (ICD) has developed a plan to comply with these requirements.

LHH (General Acute Care Unit) was registered in 2008 with the National Healthcare Safety Network (NHSN) in order to comply with AFL 07-37 "Mandated Use of the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network to Comply with SB 739 on the Reporting of HAI Process Measures." A monthly plan to report all Central Line Insertion Practices (CLIP) taking place at the LHH General Acute Unit (M7 acute) has been submitted since July 2008.

In order to comply with the latest SB 1058 and 158, ICD has initiated Methicillin-resistant Staphylococcus aureus (MRSA) testing within 24 hours of acute admission to unit M7A. The first quarterly report to CDPH of all HAIs occurring on this Unit as specified by the SB is scheduled to be sent on April 1, 2009.

The LHH Environmental Services Department is in the process of evaluating their current Policies and Procedures in order to reflect LHH compliance with the regulatory sections related to cleaning and disinfection of the environment. Specified training requirements are being included as well.

ICD is in the process of composing a Steering Committee with members of the Infection Control Committee to conduct a Gap Analysis and Work Plan to comply with SB 1058 and 158 requirements scheduled for implementation in 2010-2012.

ADULT DAY HEALTH CENTER

After more than 28 years of providing community based outpatient preventative and restorative healthcare services for older adults living in San Francisco, the LHH Adult Day Health Care Center (ADHC) is scheduled to close its doors on February 20th, 2009. Also scheduled for closure are the ADHC adjunct programs, the Alzheimer's Day Care Resource Center (ADCRC) and Senior Nutrition Program (SNP).

The ADCRC provides focused therapeutic services for patients diagnosed with Alzheimer's disease. The ADCRC also provides support groups and information and referral services. The Senior Nutrition Program is a congregate meal site providing hot and nutritious meals, and various nutrition oriented services for any person residing in San Francisco who are at least 60 years old. The SNP has been at LHH for over 35 years. The closures are due to the San Francisco DPH's response to the current city wide budget crisis and demands for a more austere and lean public health department. The California Department of Aging and California Department of Human Services have been contacted. Appropriate advisories have been forwarded by each agency to LHH administration in order to facilitate an orderly and Title 22 compliant transition.

Each patient will have a discharge plan which will include the following: a referral to an alternative program with estimated waiting time until actual admission; IDT recommendations for ongoing treatment as well as consultation on their final disposition. A final Annual Cost Report will also be generated. All of the aforementioned information will be forwarded to each respective state agency, accompanied with an official letter detailing these activities.

6) CLINICAL CARE REPORT

Mivic Hirose, RN MS, Chief Nursing Officer, Hosea Thomas, MD, Interim Medical Director, and Dave Woods, PharmD, presented the Clinical Care Report.

Mivic Hirose commented that there have been significant reductions in Nursing Administration staff. Positions of Nursing Directors, Nurse Managers, and Clinical Nurse Specialists that retired or resigned were not reinstated.

LHH Registered Nurses Transitioned to SFGH and Jail Health

LHH is pleased to announce that twenty of LHH Registered Nurses were successfully placed in other DPH positions to avert layoffs. Sixteen of these nurses were placed at SFGH and four of them were reassigned to Jail Health. This innovative program to support the competitive placement was a collaborative effort of Nursing Education, Human Resources and Jewish Vocational Services, a long time partner of Laguna. A day long program was provided for our nurses and focused on preparing them in presenting themselves effectively in an acute care setting, interview preparations and test taking skills, including nursing process incorporating the SBAR (Situation, Background, Assessment, Recommendation) – all these topics proved to be instrumental in their successful placement. We are very proud of these nurses in their ability to be able to pass the oral boards at SFGH and Jail Health.

LHH Volunteers' New Gift Program

For the past many years, Laguna Honda Volunteers Inc., the hospital's non-profit auxiliary, has provided gifts for the residents during the holiday season. Many LHH residents have no regular family or friend contact. For most, the gifts from Volunteers Inc. are the only gifts they receive during the holidays. The Gift Shop manager traditionally has purchased the gifts as selected by Nursing staff on the units and the gifts have been almost exclusively clothing.

This year, with the use of technology and some forward thinking by the Volunteer Services Department staff, a whole new repertoire of gifts became available to the residents, and the residents were actually able to choose their gifts. The Volunteer Coordinators collaborated with the Activity Therapy and Nursing departments to generate a whole new list of possible gifts including games, radios, and toiletries, along with traditional clothing items. The Gift Shop Manager found vendors from whom to procure the items. A catalog of the possible gifts was developed with pictures and descriptions of each item. Activity Therapy staff worked with each resident, to the greatest extent possible, to have the resident select three holiday gifts they would receive. All orders throughout the house were compiled and the gifts were purchased. Volunteers worked tirelessly wrapping gifts and the gifts which were either distributed to the residents at the unit holiday parties or were held and distributed to the residents on Christmas day.

The new approach was a huge success. There were more variety of gifts, the gifts were more useful to the residents, and the residents had the ability to exercise choice. We are looking forward on expanding on our successes in the coming year.

New Ventures for LHH Nurse Leaders

LHH wishes two of nurse leaders, Amy Narciso, Clinical Nurse Specialist, and Espie Sorongon, Nursing Supervisor, a successful future as nurse consultants for the Golden Gate Regional Center (GGRC). Amy has worked at LHH for 16 years and Espie, for 17 years. They began their careers at LHH as staff nurses and, while working at LHH, returned to school for their masters degree in nursing, then transitioned to nursing leadership positions. Their tenure at LHH will enable them to be stronger partners with us as they work with GGRC to transition LHH residents with developmental disabilities to the community at various GGRC-affiliated care homes. We thank Amy and Espie for their years of service to the residents at LHH and look forward to working with them again in their new role.



Espie Sorongon



Amy Narciso

City College of San Francisco (CCSF) Computer Class at LHH

CCSF began another semester of computer classes at LHH. Forty two LHH staff registered for the keyboarding class, which started this past Wednesday, January 14. CCSF has been coming to LHH to teach computer training since 2004.

Online Census Live on All LHH Inpatient Units

LHH is thrilled to announce that they have successfully completed implementing online census management on all our units. This project began 15 months ago, with the goal of installing at least two computers on each unit as well as nursing staff making on-time real-time changes in the Invision system for resident discharges and transfers. Prior to this, discharges and transfers were not entered in our computer system until the next available business day. By making this progressive change, we transition from counting census on a manual basis to utilizing the computer system to run reports as well as streamlining workflows. The project was successful due to the collaborative efforts between the Information Systems Steering Committee, Information Systems, Admissions and Eligibility, Medicine and Nursing. Over 400 nursing staff were trained by Larry Reyes, LVN/Nurse Informatics to learn the online census management on Invision.

LHH Medical Staff Appointments for July 2008 – December 2008

Appointments:

- Denten Eldredge, DPM – Podiatry – (Active Consultant)
- David Young, M.D. – Plastic Surgery – (Active Consultant)
- William Kennedy, D.O. – Internal Medicine – (Active/Night & Weekend)

Reappointments:

Emile Daniel, M.D. – Surgery – (Active/Consultant)
 Tera (Cardone) Bonara, PsyD – Neuropsychiatry - (Active/Daytime)
 Eric Stamps, DPM – Podiatry – (Active/Consultant)
 James Reed, M.D. – Gastroenterology – (Active/Consultant)

Resignations:

Alan Pao, M.D. – Internal Medicine – (Active/Night & Weekend)
 Iling Chen, M.D. – Internal Medicine – (Active/Daytime)
 Derek Allen, M.D. – Radiology – (Active/Consultant)
 Ian Zlotolow, DMD – Dentistry – (Active/Consultant)

LHH Credentials Year-to-Date Report

7/1/2008 to 12/31/2008

New Appointments	3
Reinstatements	0
Withdrawal	0
Reappointments	8
Delinquencies:	0
Reappointment Denials:	0
Resigned/Retired	5
Disciplinary Actions	0
Restriction/Limitation of Privileges	0
Changes in Privileges	0
Additions	0
Voluntary Relinquishments	0

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 4:00 p.m. Present in closed session were Commissioner Sanchez, Luis Calderon, TCM Director, John Kanaley, Executive Administrator, Regina Gomez, Director of Quality Management, Mivic Hirose, RN MS, Chief Nursing Officer, Paul Isakson, M.D., Medical Director, Angela Platzer, MS, Director of Clinical Support Services, Timothy Skorvinski, M.D., Assistant Medical Director and Rowena Tran, Operations Manager.

- 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

**CONSIDERATION OF QUALITY IMPROVEMENT
REPORT**

- D) Reconvene in Open Session

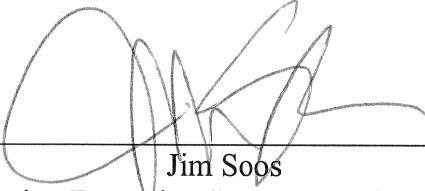
The Committee reconvened in open session at 4:25 p.m.

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 4:25 p.m.



Jim Soos
Acting Executive Secretary to the Health Commission