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MINUTES

JOINT CONFERENCE COMMITTEE FOR SAN FRANCISCO GENERAL HOSPITAL

Tuesday, January 12, 2010

3:00 p.m.

**1001 Potrero Avenue, Conference Room 2A6
San Francisco, CA 94110**

1) CALL TO ORDER

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

Present: Commissioner Edward Chow, M.D., Chair
Commissioner Catherine Waters, R.N., Ph.D., Member
Commissioner David J. Sanchez, Jr., Ph.D., Member

Staff: Sue Currin, Sue Carlisle, M.D., Hal Yee, M.D., Troy Williams, Sue Schwartz, Iman Nazeeri-Simmons, Valerie Inouye, Dan Schwager, Sharon Kotabe, Kathy Murphy, Jeff Critchfield, M.D., Todd May, M.D., Marti Paschal, Sharon Wicher, Kathy Eng, Mark Morewitz

2) APPROVAL OF THE MINUTES OF THE DECEMBER 8, 2009 SAN FRANCISCO GENERAL HOSPITAL JOINT CONFERENCE COMMITTEE MEETING

Action Taken: The Committee approved the minutes of the December 8, 2009 San Francisco General Hospital Joint Conference Committee.

3) HOSPITAL ADMINISTRATOR'S REPORT

Sue Currin, Chief Executive Officer, presented the report.

CMS Validation Survey

Six CMS surveyors (one physician, two RN surveyors, one pharmacist, and two dietary staff) arrived at SFGH on Tuesday, January 5, 2010 to validate the plan of correction from our recent CMS validation survey conducted September 29 – October 8, 2009. The preliminary findings show that we are in compliance with all of the conditions of participation with the exception of those related to Dietary Services. We are currently working with the CMS surveyors to develop a plan to correct the ongoing issues in Dietary Services. A second resurvey of Dietary Services will be completed before March 10, 2010. We are also anticipating a validation survey of the Life Safety plan of correction.

Opiate Treatment Outpatient Program Accreditation

The Commission on Accreditation of Rehabilitation Facilities (CARF) accredited the SFGH Opiate Treatment Outpatient Program (OTOP) for a period of three years for its Opioid Treatment Detoxification and Outpatient Treatment Programs. The accreditation will extend through November 2012. CARF noted that the accreditation is indicative of OTOP's dedication and commitment to improving the quality of the lives of the persons served. CARF further noted that services, personnel, and documentation clearly indicate an established pattern of practice excellence.

Emergency Department Triage Area

Thanks to the hard work of a multi-disciplinary team, we are pleased to announce that our renovated Medical Screening Exam (MSE) area in the Emergency Department formally opened December 22, 2009. The MSE area has two examination rooms staffed by RNs. Patients needing medical screening who are escorted from the clinics will be brought to the new triage station, located closer to the ambulance entrance. Ambulatory patients are now greeted at the circular welcome desk, which faces the ED entrance.

New SFGH Foundation Director

The San Francisco General Hospital Foundation named Stephanie Bray as its Executive Director, effective January 11, replacing Katherine Ripley-Williams who had held the post since 2005.

Ms. Bray previously was assistant dean for health sciences and advancement at the University of California, Davis, where she was responsible for overseeing philanthropic support for the School of Medicine, School of Nursing and the UC Davis Medical Center, as well as basic research at the university. Most recently, she led the launch of a philanthropic program for the new Betty Irene Moore School of Nursing at UC Davis, which was founded with a \$100 million grant from the Gordon and Betty Moore Foundation. Ms. Bray has raised more than \$50 million over the course of her career for various capital and endowment projects benefiting higher education and regional and national health care organizations. In her new role at the SFGH Foundation, she will plan and implement a comprehensive program to attract donations for furniture, fixtures and equipment for the new SFGH building.

Heroes & Hearts/Hearts After Dark

The SFGH Foundation will hold its 5th annual Heroes & Hearts luncheon on Thursday, February 11 from 11:30a.m. – 1:30p.m. in Union Square. This year the Foundation will launch its inaugural Hearts After Dark event, an evening of live music, cocktails, and hors d'oeuvres from 7:00 – 10:00p.m. Hearts After Dark will also be held at Union Square.

Patient Safety Initiative at America's Public Hospitals

Kaiser Permanente together with the National Patient Safety Foundation and the National Association of Public Hospitals and Health Systems has announced the "Patient Safety Initiative at America's Public Hospitals." This two-year program is designed to enhance patient safety programs at public hospitals to ensure safe, high-quality care for vulnerable and low-income populations that depend on publicly supported health care institutions for medical care. San Francisco General Hospital is one of 42 hospitals participating in Phase I of the program.

The goals of the Patient Safety Initiative at America's Public Hospitals are to:

- Position public hospitals on the leading edge of patient safety and quality care
- Establish a consistent and shared pool of patient safety knowledge, tool sets, and techniques
- Develop a community of public hospital clinicians, patient safety and quality leaders, and hospital executives committed to the initiative
- Garner measurable results in patient safety practices
- Create patient and community programs fostering communication that engages, informs, and builds continued confidence in care and the public hospital system.

Key focus areas for the program include enhancing the culture and leadership, infrastructure and measurement capabilities, and metrics for evidence in improving patient safety and outcomes at each of the participating facilities. Participants will have access to multiple resources including membership in the highly-acclaimed NPSF Stand Up for Patient Safety program, NPSF Patient Safety Congress registrations, health literacy and communications tools, measurement and analysis tools, and opportunities to apply for Patient Safety Leadership Fellowships.

California Transplant Donor Network

Terry Dentoni, MSN, RN, CNL, Director Perioperative/Critical Care/Specialty Clinic Nursing, has been asked to join the California Transplant Donor Network's Medical Advisory Board. The California Transplant Donor Network's mission is to save and improve lives through organ and tissue donation for transplantation. We are proud to provide expertise in support of this organization.

Jess M. Unruh Assembly Fellowship Program

Alfredo Mireles, a psychiatric nurse at SFGH and a master's student in the UCSF School of Nursing, was one of only 64 applicants chosen for the Jesse M. Unruh Assembly Fellowship Program. The prestigious, 11-month fellowship with the California state government begins with six weeks of classroom training, after which fellows are matched with a legislator for full-time work as a legislative staff member. To complete the fellowship, Mireles will take a leave of absence after

completing his first year in the master's program in health policy at the UCSF School of Nursing. Mireles has also completed a three-day Nurse in Washington Internship that equips nurses with the ability to advocate on Capitol Hill and he was a Paul Ambrose Scholar in a multidisciplinary program in Washington designed to create the next generation of public health leaders.

SFGH Annual Children's Holiday Party

Over 400 children and their families attended SFGH's annual Children's Holiday Party on December 17. The theme of party was the "Children's Winter Wonderland." Activities included photos with Santa, face painting, an arts and crafts table, jugglers and magicians in the hospital cafeteria, as well as the SF Mobile Zoo in Carr Auditorium, the SF School of the Arts Symphony Orchestra performing in the main lobby and Dickens carolers throughout the hospital. At the end of the day, each family was given a health and wellness bag full of supplies. The month-long celebration also included toy bins in the major children's units throughout the hospital.

Patient Flow Report for December 2009

A series of charts depicting changes in the average daily census for Medical/Surgical, Acute Psychiatry, 4A Skilled Nursing Unit, and the San Francisco Behavioral Health Center were attached to the report.

Quality Council Minutes

The Quality Council Minutes for November 2009 were attached to the report.

Commissioners' Comments/Follow-Up Action

In response to the CMS team's most recent findings, Ms. Currin appointed Steve Koneffklatt, Director of Food Services with Ed Shields as Interim Director while Mr. Koneffklatt is on vacation. Both Mr. Koneffklatt and Mr. Shields lead the LHH Food and Nutrition Services Department. Sodexo, a food management consulting company has also been hired to consult with the SFGH Food Services team to monitor systems, revise procedures, train staff and help develop a plan for SFGH Food Services to move forward effectively. Ms. Currin stated that over the weekend of 1/8/10-1/10/10, the consultants and new management team worked with the front-line staff to successfully retrain them and put into place new procedures that meet food handling safety standards.

Commissioner Sanchez voiced his concern over the CMS team's findings and wants to insure that SFGH is working towards a plan that will be effective for the long-term. He also stated that he appreciates the hard work implemented by staff over the weekend.

Commissioner Chow asked whether the CMS findings were a result of compliance issues at the staff level or at the policies/procedure level. Ms. Currin responded that the policies and procedures needed improvement. In addition, the previous director, manager and shift supervisor answered questions from the CMS team in a manner that suggested they did not know the policies and procedures. Therefore, re-training of front-line staff was an immediate priority to insure they understood the correct policies and procedures. Sodexo brings with it experience to help develop and revise policies and effectively retrain staff.

Ms. Currin also stated that in the past the CMS teams did not include registered dietitians. However, this team included two registered dietitians which enabled the team to focus not only on clinical nutrition but also all food handling procedures.

Commissioner Chow asked what proportion of the CMS survey is made up of the Life Safety issues still to be surveyed. Ms. Currin estimated the proportion to be approximately twenty percent. This portion of the survey will cover issues such as alarm systems and how to deal with “Code Red” situations. Recent surveyors found issues with the use of extension cords in office and staff rooms throughout the hospital. Ms. Currin is confident that the staff will have corrected any substantive issues cited in the Plan of Correction, prior to the visit by the Life Safety CMS team.

Commissioners’ Comments/Follow-Up Action

Nutrition and Food Services is scheduled to report quarterly to the Quality Council. The JCC instructed the Health Commission Secretary to list the Quality Council minutes as a separate item in future SFGH JCC meeting agendas.

Action Taken: The Commission reviewed and approved the Quality Council minutes and related policies, procedures, and reports.

4) PATIENT CARE SERVICES REPORT

Sharon McCole Wicher, Chief Nursing Officer, presented the Patient Care Services Report.

December 2009 2320 RN Vacancy Report

Overall 2320 RN vacancy rate for areas reported is 1.92%.

SFGH Ratio Staffing Data, By Number of Shifts – 12/01/09 to 12/31/09

SFGH was able to meet staffing ratios in all areas except Psychiatry where there were 11 shifts when the area was unable to cover breaks.

Recruitment/Retention/Training/Professional Development:

New hire RNs will be completing the fall medical-surgical training program in December.

Recruitment: Provided in the vacancy report.

Retention/Professional Development:

Support for nursing professional development through professional certification will be available for more than 100 SFGH nursing staff in 2010. Certification is a method of verifying expertise in a specific area of nursing knowledge. Certified RNs have been shown to provide care which results in better patient outcomes. Utilizing funding from the Gordon and Betty Moore Foundation, Nursing Services will offer online review courses to 50 RNs to prepare for specialty certification exams in the areas of emergency nursing, critical-care nursing, psychiatric-mental health nursing and other specialties depending on staff interest. A two day on-site review course with instructors from the American Nurses Credentialing Center will be offered at SFGH for up to 75 RNs from the medical-surgical units in April 2010. RNs participating in these certification reviews will complete the certification exam by August 2010.

Nursing Excellence

The “Positive Conversations” workshops with Julie Kliger, RN, are scheduled for January and February 2010. The focus of the trainings is direct care RN empowerment to overcome communication challenges in the work environment. The workshop series begins with an overview for managers and directors on January 27 followed by a one day training for 40 direct care RNs on February 12 and a two day training for 12 peer trainers on February 26. The peer trainers will be instrumental in disseminating the content and assisting with skill building for all members of the nursing staff in 2010.

Greg Crow EdD, RN, a senior consultant for Tim Porter-O’Grady Associates, will offer a one day workshop to SFGH RNs involved in launching the shared governance structure and process at SFGH. Dr. Crow consults internationally on the implementation of shared governance systems. The workshop scheduled for February 22 is funded through a Gordon and Betty Moore Foundation grant.

ED Diversion Report – DEC 2009

The Emergency Department had a Diversion rate total of 28% (211 hours) for the month of December 2009. The ED used 23 (3%) hours of Trauma Override during citywide Diversion suspension. The ED encounters for the month of December were 3541 patients and 820 admissions.

PES Report – DEC 2009

PES had 487 patient encounters during November 2009 and 492 in December 2009. PES admitted a total of 127 patients to SFGH inpatient psychiatric units in December 2009, which was up from 106 in November 2009. In December, a total of 365 patients were discharged from PES: 25 to ADUs, 16 to other psychiatric hospitals, and 324 to community/home.

PES was on Condition Yellow for a total of 0.0 hours in December and 39.6 hours in November.

There was a decrease in Condition Red hours from November to December. PES was on Condition Red for 151.1 hours during 11 episodes in December. The average length of Condition Red was 13.65 hours. In November, PES was on condition Red for 210.5 hours, during 19 episodes, averaging 11.37 hours.

The average length of stay in PES for the month of December was 23.07 hours, a decrease from 24.36 hours in November.

Commissioners’ Comments/Follow-Up Action

Commissioner Chow asked if there has been a problem identified with the Psychiatric ward that contributes to the issues of covering nursing staff at breaks. Ms. Wicher responded that most of these situations occurred on the night shift when someone called in sick. There were a high number of sick calls due to illness in December in addition to a few staff out on medical leave and Worker’s Compensation. She clarified that the issue is covering staff breaks not patient care.

Commissioner Chow asked if there was any feedback from other hospitals about the decline in hours of diversion. Ms. Currin responded that she has heard no feedback on this issue from other hospitals.

5) MEDICAL STAFF REPORT

Todd May, M.D., Chief of Staff, presented the Medical Staff Report.

Administration/Regulatory/Compliance

CMS Validation Survey – Dr. May summarized recent activities relating to the CMS survey, following receipt of the CMS Statement of Deficiencies 2567 report on December 3, 2009. On January 5, 2010, CMS surveyors (2 RNs, 2 Registered Dietitians, 1 Pharmacist, and 1 MD) arrived unannounced to validate the plan of correction from the hospital’s recent CMS validation survey conducted September 29 to October 8, 2009. Dr. May discussed the Plan of Corrections pertaining to the medical staff, which the surveyor assessed as credible and acceptable, pending formal approval by MEC and JCC. Pursuant to CMS Survey, the following are presented for JCC formal approval:

P&P on Delinquent Medical Records – Dr. May reviewed the new policy on delinquent medical records, which was approved by MEC through an email ballot, and immediately implemented on December 15, 2009. The policy requires Health Information System (HIS) to run a list of delinquent charts on the 1st and 3rd Tuesdays of each month. Medical records which remain incomplete 14 days following patient discharge are deemed delinquent. HIS will send a first notice of delinquent medical records to individual providers (with cc to Service Chiefs) giving 14 days to complete the charts. If records remain incomplete after 14 days, the Chief of Staff will send a second notice giving providers (with cc to Service Chiefs) a final three days to complete the charts. Failure to complete charts will result in suspension of privileges by the Chief of Staff. Privileges will be reinstated once the records are complete. Members were advised to educate house-staff and Attending physicians about the new policy.

Commissioners’ Comments/Follow-Up Action

Commissioner Chow asked the definition of “suspension of privileges,” in regard to this policy. Dr. May stated that it means the physician can no longer admit new patients but does not affect their ability to treat patients already admitted.

Action Taken:

The Commission reviewed and accepted the new procedure and policy on delinquent medical records.

Bylaws Amendments – CMS required minor changes in Bylaws language to clarify the timing of pre-operative and admission H&Ps, as well as interval H&Ps when the initial H&P was completed prior to hospital registration or admission. The revised language was presented to MEC for review and approval.

Commissioners’ Comments/Follow-Up Action

Action Taken:

The Commission reviewed and accepted amendments to the Bylaws.

P&P Regarding Clinical Protocol for Dieticians – The hospital was cited for insufficient documentation of communication about patient care recommendations between physicians and Registered Dietitians (RD). Dr. May and Christine Schwartz, Chief RD, presented and discussed a draft P&P Clinical Protocol for Dieticians. The P&P is intended to serve both as a corrective action plan documenting communication between physicians and the Registered Dietician, and to improve patient care through greater efficiency and accuracy in implementing Dietician recommendations. On motion made, seconded and carried, the draft policy was approved, acknowledging that further

review and edits may be forthcoming. Minor edits were incorporated at the request of MEC and the current version is presented to JCC for review and approval.

Commissioners' Comments/Follow-Up Action

Action Taken:

The Commission reviewed and accepted the new Policy and Procedure Clinical Protocol for Dietitians.

Surgery Service Rules and Regulations – Michael West, MD, Chief of Surgery- The revised and updated Rules and Regulations of the Surgery Service, per requirements of SFGH Medical Staff Bylaws, was submitted for MEC's annual review and approval. A summary of the changes was attached. The revisions reflect updates to the current service structure, operations, and the revised privilege lists.

Commissioners' Comments/Follow-Up Action

Commissioner Chow commented that the new Rules and Regulations do not contain the volume of procedures performed. Dr. May stated that he discussed this with the CMS surveyors and they currently do not require this. However, it is something to consider for the future in the event other regulation bodies or survey teams require it.

Action Taken:

The Commission reviewed and accepted the revised and updated Rules and Regulations of the Surgery Service.

Revised Privileges Lists – Surgery and Ophthalmology Services – We were notified by CMS on December 22, 2009, that our revised privilege lists for General Surgery and Ophthalmology, approved last month and submitted in our Plan of corrections on December 16, 2009, remain unacceptable. CMS indicated a need for more specific delineation of privileges. Service Chiefs Dr. West and Dr. Jeng, along with Dr. Alan Gelb (Chair, Credentials Committee), and Dr. May made further revisions to the privilege lists for the Surgery and Ophthalmology Services. These revised lists were presented for MEC's review and approval. Following discussion of the Surgery Privilege List revisions, members requested clarification regarding the reappointment criteria for Pediatric Surgery privileges. This was clarified by Dr. West as requested and this final version is submitted for JCC review and approval. Dr. May directed the other Surgical Services to review their privilege lists and make changes as necessary to more specifically delineate operative procedures in alignment with the model provided by General Surgery and Ophthalmology. Further discussion about the expectations for surgical privileges continued at the January 11, 2010 CLIN-MEC meeting. Drs. Gelb and May requested all other Surgical Services to submit draft revisions for review by the Credentials Committee within one month.

- The **SFGH Medical Staff Office** received a 100% score from the San Francisco Health Plan in a recent audit of completed credentials files. MEC congratulated the SFGH Medical Staff Office for their outstanding work.

Commissioners' Comments/Follow-Up Action

Action Taken:

The Commission reviewed and accepted the revised privilege lists for General Surgery and Ophthalmology

Patient Care:

- Operating Room An important patient safety initiative, the “Rolling Time Out,” was fully implemented as of January 4, 2010.
- Sepsis Screen – MEC was informed about a quality improvement project led by the SFGH Integrated Nurse Leadership Program (INLP) with a goal to reduce mortality from sepsis by 15%. Early screening along with standardized bundled orders has been shown to decrease sepsis mortality and morbidity. A Sepsis Screening Tool which will be completed by RNs every shift on every patient is being introduced to the wards. Dr. May requested members to inform their residents and faculty about this screening tool. A multi-disciplinary task force is working on developing a standardized sepsis clinical pathway and order sets.
- Emergency Department (ED) – Despite a relatively low inpatient census, the ED continues to experience delays in transfer of patients to the wards by the admitting services. There is a backlog of patients in the ED contributing to ambulance diversion. ED Service Chief, Dr. Chris Barton, reviewed causes and potential solutions to address throughput challenges. Following active discussion, MEC agreed to convene a task force to address these issues.
- Utilization Management – Dr. Hal Yee presented the case for developing an enhanced Utilization Management Committee charged with systematically assessing and monitoring progress and outcomes when changes are implemented to address efficiencies and coordination of care across the continuum. MEC endorsed this management approach and agreed to create a formal hospital Utilization Management charged with broad oversight over the coordination of care and appropriate use of limited resources.

SFGH Leadership:

- Philip Darney, MD – OB-GYN – Dr. Philip Darney was featured in the UCSF Today dated December 28, 2009. The article highlighted the launching a new Women’s Health and Empowerment Center within the UC Global Health Institute. The center aims to harness the expertise of UC faculty across the 10-campus system to address the needs of the world’s most vulnerable populations. Dr. Darney was congratulated on his appointment as Co-Chair of the Women’s Health and Empowerment Center.
- George Sawaya, MD OB-GYN – Dr. George Sawaya was featured in the UCSF Science Café dated December 2, 2009. The article highlighted Dr. Sawaya’s years of work on the benefits and risks of cervical cancer screening (pap smears), and his leadership in development of the new screening guidelines issued by the American College of Obstetricians and Gynecologists (ACOG).
- Sue Currin, RN, CEO – Ms. Currin was profiled in the “Alumni Focus” section of the UCSF School of Nursing Science of Caring magazine published in November 2009. MEC congratulated Ms. Currin for this recognition of her outstanding leadership.
- Paul Linde, MD, Psychiatry – Dr. Paul Linde published a book entitled “Danger to Self: On the front line with an ER psychiatrist” which describes his experience working at the Psychiatric Emergency Service at SFGH. Dr. Linde was interviewed on KQED radio last week.
- Christopher Barton, MD, Emergency Medicine – The December 17, 2009 edition of the Wall Street Journal featured Dr. Christopher Barton in an article entitled “Doctors Seek Aid from Business School”. Dr. Barton is one of 68 healthcare leaders enrolled in Harvard Business School’s Managing Health Care Delivery, a program designed to get participants

thinking critically about ways to improve day-to-day processes and encourage staff to work together productively in complex medical environments.

- Ramin Farzaneh-Far, MD, Medicine/Cardiology- JAMA was on-site at SFGH last week with a film crew to highlight a major study of Dr. Farzaneh-Far, a cardiovascular epidemiologist and clinical cardiologist, who is studying the significance and dynamics of omega-3 on telomeric aging in cardiovascular disease.

Annual Service Reports/Clinical Service Rules and Regulations

- **Oral and Maxillofacial Surgery – Brian Bast, MD, DDS (For Newton Gordon, DDS)**
Dr. Bast highlighted recent developments with the Oral and Maxillofacial Surgery Service. The Residency Program is one of the top-rated in the nation and about 50% of dental students rotate at SFGH.
Dr. Bast reviewed their rigorous Performance Improvement Program, which includes outstanding compliance with “time outs” in the 1M Outpatient Clinic and excellent adherence to safety procedures and patient outcomes during use of moderate sedation.
MEC congratulated Dr. Bast who was recently appointed as the new Residency Program Director for Oral and Maxillofacial Surgery.
- MEC approved the updated 2010 Oral and Maxillofacial Surgery Clinical Service Rules and Regulations presented by Dr. Brian Bast for annual review and approval. The only change was adjustment in the Service’s privilege list.

Commissioners’ Comments/Follow-Up Action

Dr. Chow asked if the MEC Committee will oversee the Utilization Management Committee. Dr Yee responded in the affirmative and added that with the current budget and unfunded mandated compliance issues, SFGH needs to have robust systems similar to what exists for risk management and patient safety for management of resources utilized.

Action Taken:

The Commission reviewed and accepted the Annual Service Reports and updated 2010 Oral and Maxillofacial Surgery Clinical Service Rules and regulations.

6) **CHART PATIENT EXPERIENCE SURVEY: CORE MEASURES QUARTERLY REPORT**

Sue Schwartz, Performance Improvement Manager, Quality Management presented the Chart Patient Experience Survey: Core Measures Quarterly Report.

Commissioners’ Comments/Follow-Up Action

Commissioner Chow asked about how the current HCAHPS patient survey results compare with last year. He also indicated that it may be useful to separate out the Chinese-language response data and compare the remaining data to other hospitals. He explained that studies have shown that responses from Chinese-language surveys often rate things more harshly than other populations; similarly responses from Spanish-language surveys often rate things more favorably. Ms. Schwartz indicated that last year’s survey results were similar and that she will explore the possibility of separating out the Chinese-language data for analysis.

Action Taken

The Commission reviewed and approved the Chart Patient Experience Survey: Core Measures Quarterly Report with the understanding that SFGH staff will continue to work on these issues.

6) **PUBLIC COMMENT**

None

7) **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 4:08 p.m. Present in the closed session were Commissioner Chow, Commissioner Waters, Commissioner Sanchez, Sue Currin, Sue Carlisle, Hal Yee, M.D., Troy Williams, Sue Schwartz, Iman Nazeeri-Simmons, Dan Schwager, Sharon Kotabe, Kathy Murphy, Jeff Critchfield, M.D., Todd May, M.D., Marti Paschal, Sharon Wicher, Mark Morewitz.

C) Closed session pursuant to Evidence Code Sections 1157(a) and (b); 1157.7; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1

APPROVAL OF CLOSED SESSION MINUTES OF DECEMBER 8, 2009

Action Taken: The Committee approved the December 8, 2009 closed session minutes with the caveat that the session start and end times be changed to show the correct times.

CONSIDERATION OF CREDENTIALING MATTERS

Action Taken: The Committee approved the Credentials Report.

CONSIDERATION OF PEER REVIEW, QUALITY OF CARE AND PERFORMANCE IMPROVEMENT

D) Reconvene in Open Session

The committee reconvened in open session at 4:38 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 discussions held in closed session.

8) **ADJOURNMENT**

The meeting was adjourned at 4:40 p.m.

Mark Morewitz
Executive Secretary to the Health Commission