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# HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

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MINUTES (Revised)

JOINT CONFERENCE COMMITTEE MEETING FOR

LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER

May 28, 2012, 3:00 p.m.

John T. Kanaley Community Center

375 Laguna Honda Boulevard San Francisco, CA 94116-1411

### 1) CALL TO ORDER

Present: Commissioner Edward Chow, MD

Commissioner Judith Karshmer, Ph.D, PMHCNS-BC, Member

Staff: Mivic Hirose, Janet Gillen, Mike Llewellyn, Michelle Fouts, Helen Storrs, Edward

Guina, Judith Klain, Jennifer Carton-Wade, Colleen Riley M.D., Loretta Cecconi,

Dionna Gusvana, ChiaYu Ma, Michael McShane M.D., Adrianne Tong, Regina Gomez, Maggie

Rykowski, Mark Morewitz

The meeting was called to order at 3:03pm. Commissioner Chow welcomed Commissioner Karshmer to the LHH JCC.

#### 2) APPROVAL OF MINUTES OF THE MEETING OF MARCH 26, 2013

#### **Public Comment:**

Derek Kerr stated that on page 2, the word "July" in the fourth line of his public comment should be changed to the word "Just." He also stated that the words "on South 300" should be added to the last sentence of his public comment on page 4.

<u>Action Taken</u>: The LHH JCC accepted the suggested revisions and unanimously approved the minutes

of the January 29, 2013 LHH JCC meeting.

#### 3) HOSPITAL REPORT

Mivic Hirose, Executive Administrator, reviewed the report which described an overview of activities and operations of Laguna Honda Hospital (LHH).

<u>Commissioner Comments/Follow-Up:</u>Commissioner Chow asked for the number of patients that can be served on the acute rehabilitation unit. Ms. Hirose stated that the acute rehabilitation has five beds.

## 4) FY 12-13 PRIORITIES: IDS

Mivic Hirose, Executive Administrator, gave the report.

#### **Public Comment:**

Patrick Monette Shaw stated that he is concerned about integrating patients to the appropriate level of care. He stated that the DPH budget proposal indicates that the Behavioral Health Center (BHC) closure will transfer 34 patients to LHH. He added that with the CPMC reduction of psychiatric and SNF beds, the LHH reduction in SNF beds, and St. Mary's reduction in SNF beds, San Francisco is not prepared to provide the appropriate level of care.

#### Commissioner Comments/Follow-Up:

Commissioner Karshmer asked for clarification on the LCR. Dr. Fouts stated that the LCR is the DPH lifetime clinical record. The system contains physician documentation, advanced directives, and lab and test results data. Dr. Fouts added that the skilled nursing facility will be implementing eClinical Works under the Medicaid Meaningful Use Incentive Program.

Commissioner Chow stated that the DPH is working to integrate four large data systems including LCR, eClinical Works, AVATAR, and the paper chart. He suggested that eClinical Works should be used at LHH for clinical work.

Commissioner Chow asked for an update on the LHH budget in regard to the possible reduction of 10% MediCal reimbursement rates. Ms. Ma stated that LHH took out \$15M from the current LHH budget anticipating that there would be a 10% MediCal cut. The revenue impact of this cut is \$30M. The net impact is only approximately \$15M.

Commissioner Chow stated that in the past, LHH benefitted from SFGH surplus revenue; now LHH is contributing revenue to assist the DPH. He commented that this is the benefit of an integrated system.

#### 5) <u>COMPLIANCE REPORT</u>

Helen Storrs, Compliance Manager, gave the report.

#### Commissioner Comments/Follow-Up:

Commissioner Chow asked the compliance organizational structure prior to 2012. Ms. Storrs stated that one staff person was Compliance Officer for both LHH and SFGH prior to 2012.

#### 6) LHH REPLACEMENT PROGRAM-REMODEL UPDATE

Michael Mike Llewellyn, LHH Chief Operating Officer, gave the presentation.

#### **Public Comment:**

Patrick Monette-Shaw requested information about the Chapel remodel plans. He made a verbal immediate-disclosure request for the full size of slides 10 and 11 of the May 28, 2013 LHH Replacement Program-Remodel presentation and stated that the print on these slides was too small to read. He stated that there has already been \$15.2 million spent in cost overruns for the LHH remodel of the older buildings due to change orders. He also stated that there is no mention of the lawsuit the City filed against Stantec regarding \$70M in mistakes made by the company. He added that there is no mention of the LHH Foundation's previous plans to take over the Simon Auditorium.

# Commissioner Comments/Follow-Up:

Commissioner Chow asked for the reason why the furniture, fixtures, and equipment were not approved by OSPD. Mr. Llewellyn stated that no reason was given for the denial. Commissioner Chow requested that in the presentation to the full Health Commission, that the last phase of the project be highlighted.

Commissioner Karshmer requested that the full Health Commission presentation review the planned use for all of the remaining buildings.

#### 7) Consideration of Hospital-Wide Policies and Procedures

Regina Gomez, Director of Quality Management, gave the presentation.

#### **Public Comment:**

Derek Kerr, M.D., submitted the following written public comment:

Policy 01-01 determines how hospital policies are created and revised. Its violation enabled the Gift Fund scandal. Note 3 important deletions in the revised "01-01." 1)Deletes the requirement that: "The original version must be achived on the shared drive," so, the original intent of revised policies will be buried. 2) Deletes "Administrative Staff" and inserts "Executive Staff" to identify those allowed to generate or revise policies. The term "Executive Staff" excludes and disempowers mid-level directors or activity therapy, social work, and nursing who work closer to patients than executives. 3). Deletes required cover memos. Previously, each new or revised policy came with a cover memo or accountability log that identified: committees, departments or persons generating the draft; who reviewed and approved it; its fiscal impact. Therefore, you lose history, inclusivity, and accountability.

Patrick Monette-Shaw stated that in the May 28, 2013 LHH JCC remodel item, the JCC did not discuss whether LHH will be required to remove asbestos. He added that it is ridiculous that no discussion was held regarding DPH Budget initiative D1 which "dumps" psychiatric patients to LHH. He said that there should have been a discussion of LHH admission criteria changes.

Action Taken: The LHH JCC approved the following policies:

Policy Number	Policy Title
29-10	Non-Beneficial Treatment
70-02	Emergency Preparedness
70-03	Emergency Response Plan
85-04	Gift Shop
01-01	Approval and Format of Hospital-Wide and Departmental Policies
20-04	Discharge Planning
21-02	Transmission of Confidential Medical Information Via Fax
24-08	Escorting Residents to Off Campus Appointments or Activities
25-01	High-Risk-High Alert Medications
25-10	Use of Psychoactive Medications
26-03	Enteral Tube Nutrition
29-07	Human Subject Research
71-02	Fire Response Plan
72-02	Bloodborne Pathogen Occupational Exposure Control Plan
73-02	Asbestos Operations and Maintenance Plan
73-04	Lead Based Paint Control Program
74-02	Medical Waste Management Program
90-08	Meeting and Event Reservations by Community Groups

#### 8) PUBLIC COMMENT

Patrick Monette Shaw stated that there is widespread community concern regarding the reconfiguration of the Mental Health Rehabilitation Center (MHRF). He added that in 2003, the MHRF Blue Ribbon Committee agreed to reduce beds from 100 to 47. He also stated that many of the MHRF patients will now be dumped into LHH, and the DPH is calling it "integration." He added that a LHH staff member was

battered by a LHH dementia patient. He also stated that dementia patients are often agitated which activates psychotic patients; the two should not be housed together. He encouraged the Health Commission to consider going against the MHRC Blue Ribbon Panel recommendations.

#### 9) **CLOSED SESSION**

- A) Public comments on All Matters Pertaining to the Closed Session
- B) Vote on whether to hold a Closed Session (San Francisco Administrative Code Section 67.11)
- C) <u>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.</u>

# CONSIDERATION OF QUALITY ASSURANCE AND PERFORMANCE IMPROVEMENT PROGRAM

#### **CONSIDERATION OF MEDICAL STAFF CREDENTIALING**

- D) Reconvene in Open Session
  - 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 of All Discussions Held in Closed Session. (San Francisco Administrative Code Section 67.12(a).) (Action Item)

Action Taken: The Committee voted to disclose that it approved the Medical Staff Reappointment and Quality Assurance Reports.

# 10) ADJOURNMENT

The meeting was adjourned at 5:42pm.