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**MINUTES
JOINT CONFERENCE COMMITTEE MEETING FOR
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER
January 12, 2016, 4:00 p.m.
Administration Building, Conference Room B102
375 Laguna Honda Boulevard
San Francisco, CA 94116-1411**

1. CALL TO ORDER

Present: Commissioner Judith Karshmer, Ph.D., PMHCNS-BC, Chair
Commissioner David J. Sanchez, Jr., Ph.D., Member
Commissioner David Pating, M.D., Member

Staff: Roland Pickens, Mivic Hirose, Maggie Rykowski, Regina Gomez, Loretta Cecconi, Wilmie Hathaway, Madonna Valencia, Jacky Spencer-Davies, Anne Hughes, Denis Bouvier, Malaena Nahmias, Michael Moore, Herbert Mariano, Rowen Patel, ChiaYu Ma, Donna D'Cruz, Alice Chen MD, Michelle Fouts Pharm.D, Quoc Nguyen, Michael McShane MD, Debbie Tam, John Grimes, Colleen Riley MD, Basil Price

The meeting was called to order at 4:02pm.

2. APPROVAL OF MINUTES FOR MEETING OF NOVEMBER 9, 2015

Action Taken: The Committee unanimously approved the November 9, 2015 minutes.

3. GENERAL PUBLIC COMMENT:

There was no general public comment.

4. ADMINISTRATOR'S REPORT

Mivic Hirose, Executive Administrator, reviewed the report.

Commissioner Comments/Follow-Up:

Commissioner Karshmer asked for more information regarding Laguna Honda Hospital's highest hiring need. Ms. Hirose stated that patient care assistants, home health aides, food service workds, and environmental staff are all needed.

Commissioner Karshmer suggested that tracking be done with the students in the high school mentoring program to ascertain how many eventually are hired by the SFDPH. Ms. Hirose stated that Laguna Honda Hospital will track this information; she added that approximately 15 students will be mentored this year.

Commissioner Karshmer requested that the LHH JCC get reports on the issues discussed in the LHH Resident Council meetings.

5. PALLIATIVE CARE PRESENTATION

Dr. Dennis Bouvier, and Anne Hughes, Palliative Care Team, gave the presentation.

Commissioner Comments/Follow-Up:

Commissioner Sanchez thanked Dr. Bouvier and Ms. Hughes on the thoughtful presentation and noted that there are discussions at the state and federal level occurring in regard to effectively implementing palliative care and end-of-life decisions.

Commissioner Pating thanked everyone for the presentation and acknowledged the difficult work done by the chaplains. He asked how LHH manages staff grief processes. Ms. Hughes stated that each LHH unit has a ceremony for its residents when someone dies; the Palliative Care unit also encourages an annual ceremony to commemorate the lives of those who died at LHH during the year.

Commissioner Pating asked about the reimbursement rates for palliative care. Dr. Bouvier stated that a skilled nursing admission gives LHH broader categories to use; MediCal admission criteria is very narrow and too low to provide the level of care necessary.

Commissioner Pating asked if LHH could offer commercial palliative care to patients outside of the San Francisco Health Network. Dr. Bouvier stated that there is no current reimbursement for such services so LHH is not able to offer this service.

Commissioner Pating asked how LHH will handle staff who do not wish to participate in a process in which a patient can choose to end life. Dr. Bouvier stated that when the San Francisco Health Network policy and procedure are developed, LHH will allow staff who feel the process crosses a moral barrier, to abstain from participating.

Commissioner Pating suggested that the Health Commission should consider recognizing those LHH patients who die at an annual memorial service.

6. STRATEGIC PLANNING PRESENTATION

Mivic Hirose, Executive Administrator, gave the presentation.

Commissioner Comments/Follow-Up:

Commissioner Pating commended the LHH team on the new format of reports. Dr. Alice Chen, San Francisco Health Network Chief Medical Officer, stated that the Network will be using Tableau for the reports.

Commissioner Pating asked if LHH will be using Lean in their planning processes. Ms. Hirose stated that LHH will be participating in Lean activities.

Commissioner Pating asked if national CLAS standards will be used to measure cultural competency. Ms. Hirose stated that LHH is not required to submit a CLAS standards report. However, as part of the SFDPH, LHH has to follow cultural competency policies. She added that telemedicine, video medial interpretation and other interpretation services are offered to LHH patients.

Commissioner Pating suggested adding pain measures and Worker's Compensation to the LHH Data Dashboard.

Commissioner Karshmer stated that University of San Francisco uses Tableau and it is has been useful.

Public Comment: Dr. Derek Kerr presented and submitted the following public comment:

In 2002, the Health Commission adopted a Resolution calling for Cultural Competency - including a diverse workforce representative of the service area. Laguna Honda's 2011 Cultural Competency Report disclosed that 47% of its employees belonged to 1 ethnic group. There were no follow-up reports. Since hiring trends are indicators of cultural competency, we asked the DPH and DHR for recent data on the ethnicity of LHH employees. They had none. However, an internal "Cultural Competency Assessment" commissioned by LHH in 2007 showed that 60% of employees were under Nursing - and 71% of nursing staff belonged to 1 ethnic group. In comparison, 3% of patients and 5% of City residents reflected that demographic. LHH's cultural diversity isn't balanced. You can't address diversity or disparities while hiding the numbers.

7. CONSIDERATION OF CHANGES TO HOSPITAL-WIDE POLICIES & PROCEDURES

Regina Gomez, Director of Quality Management, reviewed the policies and procedures.

Action Taken: The LHH JCC unanimously approved the policies and procedures.

8. CLOSED SESSION

SUBJECT MATTER: MEDICAL STAFF CREDENTIALING

- A) Public comment on whether to convene in closed session and all matters pertaining to the proposed closed session.

B) Discussion and vote in open session on whether to conduct a closed session. (Action)

C) [Possible closed session pursuant to California Health and Safety Code § 1461 and Evidence Code § 1157.]

D) Reconvene in open session

The Committee voted unanimously to conduct a closed session to consider Medical Staff Credentialing. The closed session began at 5:27pm and the Committee reconvened in open session at 5:41pm.

9. POSSIBLE DISCLOSURE OF CLOSED SESSION INFORMATION

Action Taken: The Committee voted to disclose that it had approved the January 2016 Credentialing Report.

10. ADJOURNMENT

The meeting was adjourned at 5:43pm.