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# Minutes for Joint Conference Committee for Laguna Honda Hospital and Rehabilitation Center

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## Date and Time

June 8, 2026 4pm

### **Committee Members:**

Commissioner Tessie Guillermo, Chair

Commissioner Edward A. Chow, M.D.

Commissioner Laurie Green, M.D.

## Agenda items

### 1. Call to Order

Present: Vice President Tessie Guillermo, Chair  
President Laurie Green, M.D., Member  
Commissioner Edward A. Chow, M.D., Member (Joined remotely)

Staff: Daniel Tsai, Roland Pickens, Jennifer Carton-Wade, Lily Conover, Nawzaneen Zahir, Naveena Bobba MD, Albert Lam, MD, Todd Barrett, MD, Dzovag Minassian, MD, Helen Chen, MD, Tangerine Brigham, Maria Antoc, Jennifer Magnusson

The meeting was called to order at 4:07pm.

### 2. Approval of the May 11, 2026 LHH JCC Meeting Minutes

#### Public Comment:

There was no public comment on this item.

#### Commissioner Comments:

There were no Commissioner comments on this item.

Action Taken: The LHH JCC unanimously approved the June 8, 2026 meeting minutes.

### 3. General Public Comment

There was no general public comment.

### 4. Executive Team Report

Diltar Sidhu, Nursing Home Administrator and CEO, presented the item.

#### Public Comment:

Dr. Teresa Palmer requested clarification regarding the facility's CMS star rating, particularly the missing PBJ turnover data that contributed to the decline. She expressed concern and confusion about whether missing payroll information alone caused the change and asked for confirmation that no other factors contributed. She emphasized the importance of transparency and accuracy in explaining CMS scoring to the public.

Patrick Monette-Shaw provided comment and submitted the following written summary:

Today's Executive Director's presentation, states LHH's vacant "Assistant Nursing Home Administrator" position is being eliminated. It was just three years ago CMS required LHH to hire an NHA, and also required LHH to hire two Assistant NHA's as a condition of recertification, following directions from HSAG. Now just two years LHH is axing a position deemed a "condition for gaining for recertification?" THIS IS A PENNYWISE, POUND-FOOLISH cost-cutting measure, and could well lead LHH right back into being decertified again. It makes no sense! As well, slide #16 states LHH's two Director of Nursing positions are essentially vacant, being filled by "acting" LHH employees filling those positions. CMS is fully aware of the massive turnover of key LHH leadership positions. Don't forget that massive administration turnover of LHH senior staff also adversely impact's CMS "Five Star Rating" of LHH. No wonder LHH currently has only a two-star rating!

#### Commissioner Comments:

Commissioner Chow requested detailed discharge metrics, expressing that admissions have stabilized and the Committee should now evaluate discharge processes more closely. He asked how many current LHH residents may no longer need SNF-level care but remain due to placement barriers. He also requested clarification on why a change to staffing turnover data caused a full star drop in CMS ratings, stating concern about proportionality. Finally, he asked whether eliminating an Assistant Nursing Home Administrator might pose regulatory risk given previous CMS requirements. Mr. Sidhu stated that all current residents meet custodial-care criteria and that prior lists of non-SNF-eligible residents were fully resolved. He explained new discharge review systems are being developed, including dashboards. Mr. Sidhu described CMS scoring changes, technical PBJ-data issues, and clarified that administrative restructuring meets regulatory requirements despite budget limitations.

Commissioner Chow asked whether prior lists of residents not qualifying for SNF-level care had been fully resolved or whether lingering placement challenges remained. He also asked why turnover data submitted using the previous number could not be used by CMS, describing the situation as overly bureaucratic. He suggested filing an appeal even if unsuccessful, noting symbolic value. Mr. Sidhu clarified that all prior discharge lists were fully reconciled and remaining residents require SNF care. Staff stated CMS rarely alters PBJ data after deadlines but agreed to inquire. He noted that focus should be on quality measures rather than solely star ratings.

President Greene inquired about lessons learned from prior efforts to discharge non-SNF-eligible residents, noting past difficulty finding placements. She asked how staff overcame longstanding barriers and whether similar strategies will support future discharge management as the facility approaches full census. She also requested additional written materials explaining star-rating calculations. Mr. Sidhu explained that targeted efforts, interdisciplinary coordination, and expanded housing supports allowed previous lists to be resolved. Staff affirmed that star-rating materials would be provided in writing for future updates.

Vice President Guillermo noted the long tenure of Laguna Honda staff and described the value of recognizing nurses and long-serving employees. She recommended sharing staff stories publicly to strengthen morale and encourage retention.

## **5. MDS Five Star Presentation**

Edward Guina, Acting Director of Nursing, South Tower, LHH, presented the item.

### Public Comment:

Dr. Teresa Palmer stated that the presentation overstated the influence of MDS data entry on star ratings. She stated health inspections, nursing care plan adherence, infection control practices, and facility-reported incidents have greater impacts. She referenced past rapid star declines attributed to deficiencies rather than coding issues. She urged prioritizing systemic nursing improvements over documentation enhancements.

Patrick Monette-Shaw provided comment and submitted the following written summary:

This MDS presentation today is troubling. Slide 6 states that the MDS data affects LHH's Five-Star CMs rating scores the most. No! The Health Inspection survey scores and Quality Measures ratings are the greatest threat to LHH's CMS star ratings! Other greatest Star threats come from Nursing Staff failures to develop and follow patient care plans, and to implement infection control measures, along with an enormous number of facility-reported incidents and citations! LHH has a troubling record of "Falling Stars," which plummeted by losing three stars across a seven month period between 11/1/2025 and 6/5/2026. Across a single month, LHH lost a total of four stars: Two stars lost on Health Inspections and two stars lost on Quality Measures. Worse, LHH's June 5 CMS rating reports that LHH's Short-Stay Quality Measure rating is just a pathetic one-star rating. That will not assist LHH's reputation, admissions referrals, or reimbursement rates.

### Commissioner Comments:

Commissioner Chow requested clarification on how long CMS has used the MDS system and asked what distinguishes the new unit-based quality model from past practice. He questioned how accuracy improvements would be measured and asked for timelines on facility-wide rollout. He also expressed concern about the interplay between short-stay and long-stay patient measures. Mr. Guina explained that MDS has existed for decades and is now more detailed than earlier versions. He stated that the new model engages unit-level teams directly in quality monitoring. He confirmed a three-month rollout schedule and noted the differences in quality measures for short- and long-stay residents.

President Greene asked how varying diagnostic accuracy from acute-care hospitals affects MDS coding and quality outcomes. She questioned whether past turnover in the MDS team had improved and whether staffing and training were sufficient. She also asked for sample case summaries to better understand coding impacts. Mr. Guina stated that incoming diagnoses are validated upon admission to

prevent inaccurate facility-acquired designations. He confirmed the MDS department is now fully staffed with 13 coordinators receiving ongoing certification training.

Vice President Guillermo thanked Mr. Guina for the presentation and noted that she looks forward to future updates.

## **6. Laguna Honda Hospital Contracting and Acute Rehabilitation Update**

Tangerine Brigham, San Francisco Health Network, Deputy Director, Chief Operations & Strategy Officer, presented the item.

### Public Comment:

Dr. Teresa Palmer objected to Laguna Honda prioritizing Kaiser contracting while not committing to contracts with Blue Shield, despite many City retirees depending on Blue Shield coverage. She stated that this approach was discriminatory because impoverished retirees often rely on these plans. She emphasized negative outcomes from out-of-county transfers, describing them as dangerous and traumatic. She urged Laguna Honda to ensure equitable access for all retirees.

Ms. Janet Fowler described the experience of her friend, an impoverished retired teacher insured through Blue Shield, who was transferred to an out-of-county SNF where she experienced severe neglect. She explained that Laguna Honda had open beds at the time but her friend was not accepted due to insurance limitations. The commenter described the suffering her friend endured, ultimately leading to her death. She asked the Committee to prevent similar outcomes by expanding access for Blue Shield retirees.

Patrick Monette-Shaw provided comment and submitted the following written summary:

Ms. Brigham's Slide #10 reports LHH is "seeking a contractual relationship with Kaiser, for existing and future patients," but ISN'T pursuing contracts with health plans offered to City employees and retirees, "at this time." This is discriminatory, since Kaiser serves City retirees for Rehab and Nursing Home care, but not retirees who have chosen Blue Shield of California. Why aren't retired City janitors or schoolteachers who chose Blue Shield afforded the same access to LHH? Dr. Lisa Pascual, LHH's former Chief of Rehab Services, tried to get 15 acute rehab beds built in the LHH replacement hospital in 2010, and went on a hiring binge of physical and occupational therapists. She ignored that competition between San Francisco hospitals for "Medicare Part A" rehab patients is very fierce, with hospitals fighting each other to snag the greater "Part A" reimbursement. Also, LHH's reputation discourages patients needing acute rehab from choosing LHH.

### Commissioner Comments:

Commissioner Chow praised improvements in acute rehab coordination with Zuckerberg San Francisco General and agreed Kaiser contracting was a reasonable first priority. However, he urged that City retirees under Blue Shield also be considered for future contracting due to their economic vulnerability. He emphasized that short-stay rehab needs should not exclude certain retiree populations. Ms. Brigham stated Kaiser is the near-term focus due to existing patient volume, established relationships, and administrative feasibility. She acknowledged City retiree concerns and agreed that Blue Shield discussions should follow completion of mandatory Medi-Cal managed care contracting.

President Green asked why Kaiser contracting was more viable than Blue Shield contracting and raised concerns about retirees with Medicare Advantage plans being excluded. She requested more detail regarding the composition of Kaiser patients currently admitted. She affirmed the importance of

equitable access for all City retirees. Ms. Brigham explained Kaiser consistently utilizes Laguna Honda services and has compatible workflows that support streamlined contracting. She reaffirmed that Blue Shield contracting may be explored once regulatory and capacity priorities stabilize.

President Greene added that Blue Shield retirees often struggle with housing costs and may require local SNF access. She noted Kaiser's small Medi-Cal population and asked whether the admitted Kaiser patients were dual-eligible or held commercial coverage. She encouraged future updates on contracting barriers and lessons learned. Ms. Brigham clarified Kaiser members admitted include individuals with varied coverage types and reiterated their commitment to reporting back as contracting progresses.

Vice President Guillermo requested a follow-up on negotiations with Kaiser and any progress in communications with Blue Shield in regard to its San Francisco retiree population.

## **7. Hiring and Vacancy Report**

Jennifer Magnusson, HR Hiring and Selection Manager Director of Hiring, presented the item.

### Public Comment:

Patrick Monette-Shaw provided comment and submitted the following written summary:

As Diltar Sidhu reported today, it's long overdue that CMS has finally resumed factoring in LHH's staffing turnover data, since CMS' "Nursing Home Compare" web site has long shown LHH has not been reporting senior administration management turnover and senior Nursing Staff manager turnover for many years, and many quarters. This is a key reason this Health Commission should strongly advocate with Mayor Lurie to authorize funding appropriations to hire and fill the Assistant Nursing Home Administrator position immediately, since Mr. Sidhu mentioned earlier that eliminating the position is tied to the "current budget situation." As the City's budget situation improves, it is not worth LHH being decertified again, because a "Director of Emergency Preparedness" filling in for the vacant Assistant NHA position is clearly not, repeat not, a proper State-licensed Nursing Home Administrator possessing the required experience and training to manage a skilled nursing facility the size of LHH.

### Commissioner Comments:

There were no Commissioner comments on this item.

## **8. Regulatory Affairs Report**

Nawzaneen Zahir, Chief Quality Officer, LHH, presented the item.

### Public Comment:

Patrick Monette-Shaw provided comment and submitted the following written summary:

I heard from family members and Environmental Services staff a patient eloped from the North Mezzanine's locked "Secure Memory Care" (Dementia) Unit on May 22 due to an egress door malfunctioning for approximately two years. This patient had reportedly eloped several times before then, according to Nursing Staff concerned about the patient's well-being. Elopements require a "Facility-Reported Incident" report be submitted to CDPH. "Elopement incidents are often cited at the Immediate Jeopardy level under F-tag 689 – Free of Accident Hazards-Supervision-Devices." Why is LHH risking the severity of receiving another "Immediate Jeopardy" citation against the hospital? Apparently, CDPH received "multiple complaints" about the elopement and egress doors. Why wasn't that reported as an FRI in today's Regulatory Affairs Report for May? It's also disturbing today's "Regulatory Affairs Report" only mentions

today that there was an “Unusual Occurrence Report” FRI involving “hot water issues” and an NHICS activation due to EPIC downtime.

Commissioner Comments:

President Green requested more detail about recent hot-water interruptions and Epic workstation downtime. She emphasized that clear reporting and rapid response are necessary for patient safety. She asked whether CDPH had been properly notified. Ms. Zahir explained that an electrical upgrade led to a boiler disruption, temporarily affecting hot water. CDPH was notified, and service was restored within hours with no impact to patient care. Staff also described unrelated Epic workstation downtime that resolved quickly with no patient impact.

**9. Laguna Honda Hospital Policies**

Nawzaneen Zahir, Chief Quality Officer, LHH, presented the item.

Public Comment:

There was no public comment on this item.

Commissioner Comments:

Commissioner Chow supported approving the presented policies but noted that the BERT policy lacked clear emergency activation procedures outside routine therapeutic roles. He requested that staff revise the policy to include emergency response guidelines and return the update promptly. He noted that the policy should not wait for an annual cycle to be addressed.

Action Taken: The LHH JCC unanimously voted to recommend that the full Health Commission approve the following items:

**July 2026**

<u>Item</u>	<u>Scope</u>	<u>Policy No.</u>	<u>Policy Title</u>
1	Facility-wide	28-06	Behavioral Response Team (BRT)/ Therapeutic Care Team (TCT)
2	Facility-Wide	24-12	Laguna Premier Club: A Neurobehavioral Day Program
3	Clinical Nutrition	Diet Manual	Diet Manual LHH 2026
4	Clinical Nutrition	1.12	Registration of Dietitians
5	Clinical Nutrition	1.15	Diet Manual Approved by Medical Staff
6	Clinical Nutrition	1.16	Nutrition Screening and Documentation Process
7	Clinical Nutrition	1.19	Acute Medical/ Rehab Admissions/Transfers
8	Clinical Nutrition	1.20	Nutrition Screening and Assessment Documentation for Acute Hospital Admissions
9	Clinical Nutrition	1.22	Enteral Formulary Availability
10	Clinical	1.23	Discharge Diet Education

	Nutrition		
11	Clinical Nutrition	1.25	NPO or Clear Liquid Diet Orders
12	FNS	1.92	Standardized Recipes
13	FNS	1.94	Safety Standard
14	FNS	1.95	Use of Eggs
15	Medical Staff		LHH Credentialing Policy and Procedures Manual
16	Medical Staff	G 1.0	Vital Signs

## 10. Closed Session

- A) Public comments on all matters pertaining to the Closed Session. (San Francisco Administrative Code Section 67.15).

There was no public comment for this item.

- B) Vote on whether to hold a Closed Session.

Action Taken: The LHH JCC voted unanimously to go into closed session.

- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5, 1157.6, and 1157.7; Health and Safety Code Section 1461; San Francisco Administrative Code Sections 67.5, 67.8, 67.8-1, and 67.10; and California Constitution, Article I, Section 1.

### CONSIDERATION OF MEDICAL QUALITY IMPROVEMENT

### CONSIDERATION OF MEDICAL STAFF CREDENTIALING MATTERS

### CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS

#### RECONVENE IN OPEN SESSION

1. Discussion and Vote to elect whether to disclose any portion of the closed session discussion that is not confidential under Federal or State law, The Charter, or Non-Waivable Privilege (San Francisco Administrative Code Section 67.12(a).) (Action item)
2. Possible report on action taken in closed session (Government Code Sections 54957.1(a) and 54957.7(b) and San Francisco Administrative Code Section 67.12(b).

## 11. POSSIBLE DISCLOSURE OF CLOSED SESSION DISCUSSION

Action Taken: The LHH JCC approved the LHH Credentials Report and PIPS Minutes Report in closed session and voted to not disclose discussions held in closed session.

## **12. Adjournment**

The meeting was adjourned at 6:27pm.