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Tessie M. Guillermo
Vice President

Edward A. Chow, M.D.
Commissioner

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Commissioner

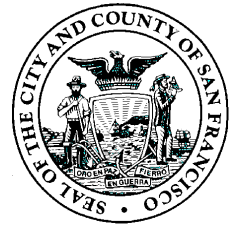
Suzanne Giraudo ED.D
Commissioner

Judy Guggenhime
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**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

Daniel Lurie Mayor
Department of Public Health



Daniel Tsai
Director of Health

Mark Morewitz, M.S.W.
Executive Secretary

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**MINUTES
JOINT CONFERENCE COMMITTEE MEETING FOR
LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER
July 14, 2025, 4:00 p.m.
1 Dr. Carlton B. Goodlett Place, City Hall, Room 408
San Francisco, CA 94102 & via Webex**

1. CALL TO ORDER

Present: Commissioner Tessie Guillermo, Chair
Commissioner Edward A. Chow, M.D., Member
Commissioner Laurie Green, M.D., Member

Staff: Daniel Tsai, Roland Pickens, Jennifer Carton-Wade, Lily Conover, Carmen Trinh,
Naveena Bobba MD, Erka Thorson, Albert Lam, MD, Todd Barrett, MD, Anne Romero,
Sharon Christen, Mark Primeau, Dzovag Minassian, MD

The meeting was called to order at 4:06pm.

2. APPROVAL OF MINUTES FOR MEETING OF JUNE 9, 2025

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 9, 2025 meeting minutes.

3. GENERAL PUBLIC COMMENT:

There was no general public comment.

4. EXECUTIVE TEAM REPORT

Diltar Sidhu, Chief Executive officer and Nursing Home Administrator, presented the item. Director Tsai stated that CMS turned down the waiver request for the 120 beds that LHH submitted. CMS noted that the number of incidents and complaints against LHH impacted its decision, even though the majority of the complaints were found to be unsubstantiated. CMS invited DPH/LHH to apply for a waiver by room or by case, when a patient is admitted to LHH. Director Tsai noted that it is not realistic for LHH to apply for a waiver for a room and wait for CMS to respond while a patient is waiting to be admitted. He added that he is proud of the work LHH has done to ensure it is a safe facility providing high-quality care. He noted that the DPH had presented a comprehensive and compelling case for CMS to consider for this waiver request. The DPH and LHH are not conceding this issue. However, based on what is being witnessed in the federal landscape and the current federal priorities, the DPH is not intending to pursue future action on the waiver request right now. However, there is no time limit on the opportunity for DPH/LHH to apply for future waivers and the DPH intends to pursue action at a time in which acceptance of the waiver request is more likely to be possible.

Mr. Sidhu noted that Jen Carton-Wade has earned her license as an Assistant Nursing Home Administrator.

Public Comment:

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

As my overhead slide shows, the pace of admissions to Laguna Honda since admissions resumed remains dismally slow. As both Dr. Palmer and I have testified, it's unlikely LHH will return to a full census of 769 SNF beds by December. LHH still has 240 empty SNF beds; it will take until January 2027 to reach full census. The bottom chart on my slide shows the "Referrals for Admissions" report LHH presented today asserts there has been 262 admissions to LHH since admissions resumed 11 months ago in July 2024. LHH's slide presented today doesn't factor in there has been a net loss of 117 patients, due to attrition (patient deaths and planned and unplanned discharges). That leaves just 145 net admissions over the last 11 months, for an average of 13.2 admissions monthly, up from an average of 12.6 admissions monthly as of the JCC's last meeting June 9.

Dr. Teresa Palmer stated that, although the last letter sent to CMS regarding the waiver request made a good case, she thinks it is time for litigation. There are not enough nursing beds for people in San Francisco to grow old here. Nursing beds should not be on the bottom of the priority list. She is very disappointed that the DPH is not considering any further action on the CMS waiver request.

Commissioner Comments:

Vice President Guillermo congratulated Ms. Carton-Wade for achievement of earning her license.

President Green stated that the DPH/LHH waiver request was very well written and contained copious data and relevant information. She asked what would happen if a private entity filed a lawsuit on behalf of LHH. Director Tsai stated that the next step would be legal action. However, when considering the risk calculation with this federal administration, he and the City Attorney have concluded that this is not the time. However, the DPH continues to keep its options open and he believes that it can pick this issue up in the future for a greater possibility of success.

Commissioner Chow agrees with the rationale Director Tsai has presented to delay future efforts towards a waiver request. He noted California is looking at having to absorb hundreds of millions of dollars in Medicaid reductions and in the current political environment, it is difficult to conceive of challenging the federal government in one area without expecting possible retribution in another. The priority right now is to focus on configuring the overall DPH service system to ensure continued care for all vulnerable populations, including those populations no longer included in federal reimbursements. He noted that the number of incidents, most of which were unsubstantiated, is due to the large size of LHH. He noted that others in San Francisco,

such as Louise Renne, former City Attorney, may pursue other legal avenues separate and distinct than the City and County.

Commissioner Chow is concerned about mixing COVID-19 patients on the regular wards based on current waste-water data which shows rising of cases and new variants.

5. SENIOR AFFORDABLE HOUSING AT LAGUNA HONDA HOSPITAL CAMPUS

Anne Romero, Senior Project Manager, MOHCD, and Sharon Christen, Senior Project Manager, Real Estate Development, Mercy Housing California, presented the item.

Public Comment:

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

Today Mercy claims its Phase 1 building is six stories, and the Phase II building will be seven-story. Will the number of stories keep changing before Mercy seeks final approval? Now just a month before you'll be asked to approve an MOU for this project, two important issues haven't been addressed. The first concerns needs for the childcare center, since a survey of LHH staff to assess need for childcare hasn't been done. The second issue involves how many of the units in each Phase are reserved for LHH residents, and why residents receive a guaranteed set-aside. Mercy says only 110 independent living units may be built in Phase 1. Before approving the draft MOU in August or September, Mercy must commit to the actual number of units will be built. The non-binding "Term Sheet" this Commission adopted in March doesn't prevent you from terminating this project. Terminate it, now.

Commissioner Comments:

Commissioner Chow is not clear on why the adult day health center is in the second phase, although he understands funding is an issue. He noted that funding also seems to be an issue for phase one. He prefers more assisted living units and the adult care health center to be included in the first phase. He also asked for more information need for the childcare center. Ms. Romano stated that at the next LHH JCC, information regarding proposed enhanced service and financing models will be shared to better educate the JCC members and the public.

Commissioner Chow noted that when the MOU is brought to the LHH JCC, he prefers that language be included to ensure the Health Commission retains ultimate authority over the land.

President Green thanked the presenters for the update and requested detailed information on funding for both phases in addition to possible impact of the tariffs on construction. Ms. Christen stated that the tariff amounts changes frequently so it is not possible to estimate their impact on the project at this time. When the bidding process begins, consideration of tariffs will be given to the cost estimates of the project. President Green asked if there is a different source of funding for the childcare center. Ms. Christen stated that MOHCD will pay for the shell of the building construction and the Low Income Investment Fund (LIIF), a non-profit community development institution, will pay for tenant improvement costs for the childcare center.

President Green asked the estimate of LHH residents who may qualify for independent living versus assisted living. Roland Pickens, Director of the San Francisco Health Network, stated that preliminary data on LHH residents has been shared with Health Management Associates, which is providing analysis and recommendations.

Vice President Guillermo noted that the LHH JCC members strive to be responsible leaders and to consider relevant issues of this project on behalf of LHH residents and residents of San Francisco.

6. HIRING AND VACANCY REPORT

Erika Thorson, Director of Hiring & Selection, HR Leadership, DPH Human Resources presented the item.

Public Comment:

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

It's worrisome seeing the June "Vacancy Report by FTE," that LHH's Registered Nurse vacancy rate only decreased by filling one RN position, with 18 vacancies still outstanding in job class 2320, and Licensed Vocational Nurse vacancies have also decreased by just one, with 25.65 vacant job class 2312 LVN vacancies unfilled. Similarly, there was a reduction in job class number 2303, "Certified Nursing Assistant," with 33 vacant CNA positions unfilled. Across the three job classifications, there were 79.65 vacancies in May. The three new hires have reduced vacancies across those three job classifications, to a whopping 76.65 positions still vacant. Why is LHH having such trouble recruiting, and hiring, direct patient care Nursing staff to on-board? As well, between May and June, vacancies for job class 2302, "Nursing Assistant" (a.k.a., "Patient Care Assistant"), has remained unchanged at 23.10 vacancies, bringing total vacancies for bedside care Nursing staff to 99.75.

Commissioner Comments:

Vice President Guillermo thanked Ms. Thorson for the report.

7. REGULATORY AFFAIRS REPORT

Carmen Trinh, Director of Performance Improvement, presented the item.

Public Comment:

Jim McAfee stated that he'd like to emphasize some information from the report. He read data from the report showing allegations of abuse, resident-to-resident alleged incidents, resident-to-staff alleged incidents, misappropriation of resident property, potential privacy breaches, and anonymous complaints. He stated that for most of these incidents, no investigation has been started by CDPH. He noted that each month the reports look similar. These incidents are never investigated. Next month a whole new round of incidents will be listed that will never be investigated. He noted that no one wants to look at him and nobody wants to acknowledge the situation but there are no investigations. He knows about this kind of stuff because his domestic partner and he are caught up in this audacious behavior. The only thing worse than having allegations about Laguna Honda that you can't prove is having allegations about Laguna Honda that you got evidence for.

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

It's sad today's "Regulatory Affairs Report" shows LHH racked up 10 additional "Anonymous Complaints" in June. That pushes Anonymous complaints for 2025 to a total of 26, compared to 37 for all of 2024. LHH had 12 "Major Injuries" in 2025, up from 8 in all of 2024, and 5 in 2022. LHH has had 29 "Resident-to-Resident Abuse" FRI's in 2025, compared to 46 in all of 2024, suggesting patients are again turning combative. There were six "Disease Outbreaks" in the first six months of 2025, compared to 8 in all of 2024, and 10 "Disease Outbreaks" for all of 2023, suggesting return to insufficient Nursing infection prevention efforts. There have been three "Potential Privacy Breaches" so far in 2025, compared to three for all of 2024, and three in 2023. As I noted, LHH reported 704 FRI's to CDPH between 1/1/2021 and today, for an average of 201 FRI's annually.

Commissioner Comments:

Commissioner Chow noted that California Department of Public Health (CDPH) has been much more responsive in their investigations, adding that only a few of the complaints have been substantiated; the majority have been found invalid. All anonymous complaints in this monthly report have results in no new deficiencies.

President Green asked if the rate of receiving anonymous complaints impacts the timing of LHH investigating

the alleged incidents. Mr. Sidhu stated that LHH only finds out about the anonymous complaints when CDPH notifies them via phone call or when CDPH surveyors arrive onsite. At that time, LHH is made aware of the allegation and can then begin work to address the issues.

President Green asked how LHH determines if an incident warrants submission to CDPH. Mr. Sidhu stated that any time there is an allegation of mistreatment of a LHH resident or alleged misappropriation of property, including funds, LHH takes it seriously. Regulations require that most of these incidents need to be reported within 2 hours of LHH being notified. LHH then has 5 days to complete its internal investigations and quality review processes. CDPH then investigates the incident to determine if it is either substantiated or unsubstantiated. He noted that LHH has no authority or influence in the timing of the CDPH investigations.

8. LAGUNA HONDA HOSPITAL POLICIES

Carmen Trinh, Director of Performance Improvement, presented the item.

Public Comment:

There was no public comment on this item.

Commissioner Comments:

Commissioner Chow asked if changes in regulations prompted revisions to the California End of Life Option Act: Implementation at Laguna Honda Hospital policy. Dr. Lam stated that LHH leadership continues to refine the policy to ensure language more closely aligns with the statute.

President Green noted that a revision is needed on the policy, “Monitoring Behavior and the Effects of Psychotropic Medications” to ensure the policy makes sense. She suggested the following revision: “All psychotropics ordered by the provider shall be accompanied by an order to address a targeted behavior.”

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

May 2025

<u>Item</u>	<u>Scope</u>	<u>Policy No.</u>	<u>Policy Title</u>
1	Facility-wide	29-11	California End of Life Option Act: Implementation at Laguna Honda Hospital
2	Facility-wide	72-01 F15	Storage of Medical Supplies
3	FNS	60-10	Pest Control Service
4	FNS	1.66	Equipment Operation
5	NSPP	C 2.0	Change of Shift Hand-Off
6	NSPP	D 1.0	Restorative Nursing Program
7	NSPP	G 5.0	Blood Glucose Monitoring
8	NSPP	G 6.0	Behavioral Risk Assessment
9	NSPP	I 3.0	Tracheostomy Care
10	NSPP	J 2.5	Monitoring Behavior and Effects of Psychotropic Medications
11	NSPP	K 3.0	Wound Irrigation and Cleansing
12	NSPP	K 10.0	Prevention and Treatment of Skin Tears
13	NSPP	NPP	Nursing Educational Programs
14`	NSPP	G 6.0	Behavioral Risk Assessment
		Attachment 1	
15	NSPP	I 5.0	Oxygen Therapy Devices
		Attachment 1	

9. 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 on this item.

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

Action taken: The LHH JCC unanimously voted 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.

**SUBJECT MATTER: TESTIMONY CONCERNING REPORT OF QUALITY ASSURANCE COMMITTEE:
LAGUNA HONDA ORGANIZATIONAL ASSESSMENT AND SURVEY READINESS**

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).)
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).

10. POSSIBLE DISCLOSURE OF CLOSED SESSION INFORMATION

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

11. ADJOURNMENT

The meeting was adjourned at 6:47pm.