

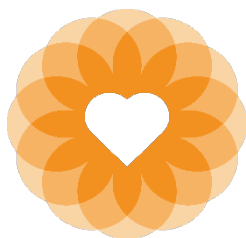


San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

Laguna Honda Hospital Executive Team Report

Diltar Sidhu
September 14, 2026





San Francisco Health Network Laguna Honda Hospital and Rehabilitation Center



September 2026 Updates

SAFETY

Slide 4-6

- Expired Medications
- Security

QUALITY

Slide 7

- Resident Care Plan

CARE EXPERIENCE

Slide 8-9

- Model Neighborhood- Unit QAPI
- Resident Appointments – No show rate

FINANCIAL STEWARDSHIP

Slide 10-14

- Admission and Census
- Discharges

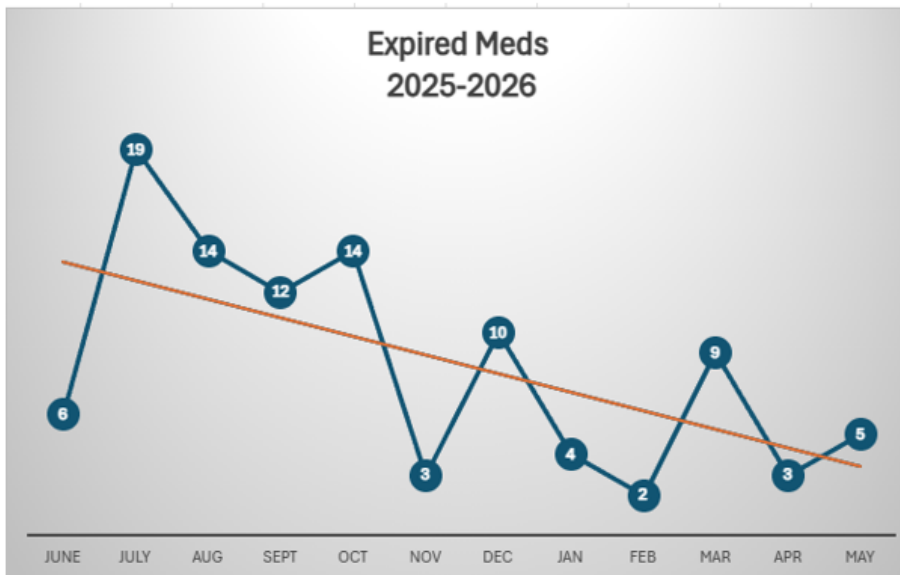
SAFETY



Expired Medications

Expired Medication Quality Improvement Initiative

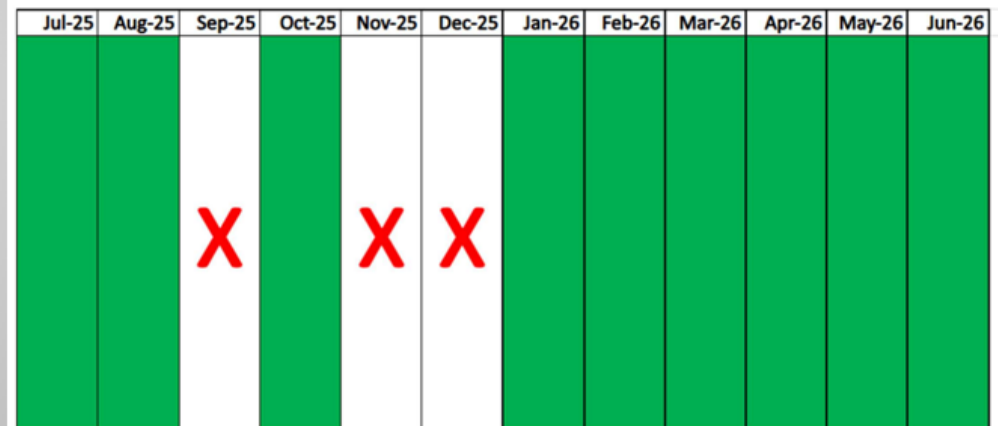
Number of Expired Meds Found on Pharmacy Unit Inspection
2025 - 2026



Monthly Number of Expired Medications Administered (rolling 12 months)

X = 1 expired medication was administered that month

■ = No expired medications were administered that month



7/7/2026

- Year-over-year decrease in number of expired medication found during regular unit inspections
- Observed 6 months of ZERO expired medications administered to LHH residents
- Collaborative and interdisciplinary approach has yielded sustained quality improvement
- ZERO expired medications were found in our last CDPH annual survey.



SAFETY



DEA Audit update

- **Background:**

DEA performs both targeted investigations as well as some accountability audits of licensee, e.g. - manufacturers, wholesalers, hospitals, narcotic treatment programs, etc. LHH was selected at random by the DEA algorithm. DEA inspectors arrived on June 17th to perform an accountability audit. A closing interview by the DEA investigators was completed on August 11th.

- **Preliminary Findings:**

- ***One preliminary finding:***

Hospital staff failed to indicate on the biennial physical inventory whether it was taken at the “Opening of Business” or “Close of Business”, as required by Title 21 Code of Federal Regulations, Section 1304.11(a)...

- **Corrective action**

- Pre-printed inventory tools developed to assure the time of the physical inventory is consistently documented.
 - Pharmacy staff education and training specific to regulatory requirements and new inventory tools.
 - Pharmacist-in-charge to review, audit, and sign off all physical biennial inventory documents to assure sustained compliance.



SAFETY



Security-Evolve

- 3 Evolve system planned to be install in LHH
 - Administration building main entrance
 - 3rd floor entrance temporarily and then moved to M&O entrance once that is opened
 - Main Hospital Pavilion lobby
 - Received HCAi (California Department of Health Care Access and Information formerly known as OSHPD) approval for location of equipment in the Main Hospital Pavilion lobby
 - Administration and 3rd floor entrances also being prepped (no HCAi approved required)
 - Communications
 - Residents and staff (started)
 - Families and union partners (pending)
 - Go Live Date – Mid to late October
-



QUALITY

Resident Care Plans & Daily Clinical Review

- Timely, accurate care plans are essential to residents' health and improving outcomes.
- Laguna Honda uses a daily clinical review process to ensure care plans are updated in real time.
- Continuous improvements to this workflow have strengthened consistency and responsiveness.
- August 2026 audit results showed 96% compliance, exceeding the 95% target.

Daily Clinical Review Update and Validation



Audit started in late Oct '25; Sept '26 is partial month, data as of 9/4/26

CARE EXPERIENCE



Model/Pilot Neighborhood and Unit QAPI update

North 3 Work Continues:

- Two ongoing staff engagement activities
- Pilot tested the Unit QAPI revisions and help roll out to other units
- Safe Medication simplification & deprescribing – below the hospital goal
- Improving resident appointments show rate at Laguna Honda's outpatient clinic.
 - Testing a dynamic processes involving N3 interdisciplinary team making real time adjustments to workflows to get residents to their scheduled appointments

Unit QAPI Revision:

- Unit based interdisciplinary committees that review high-risk/complex residents for improvement of resident outcomes and safety.
- Restructuring committees to better focus and streamline the work & building stronger connections between resident outcomes and CMS Quality Metrics
- Four Units have implemented the restructured program. The remaining units will implement through Nov '26
- Incorporating DON oversight of quality metrics and unit QAPI specific content

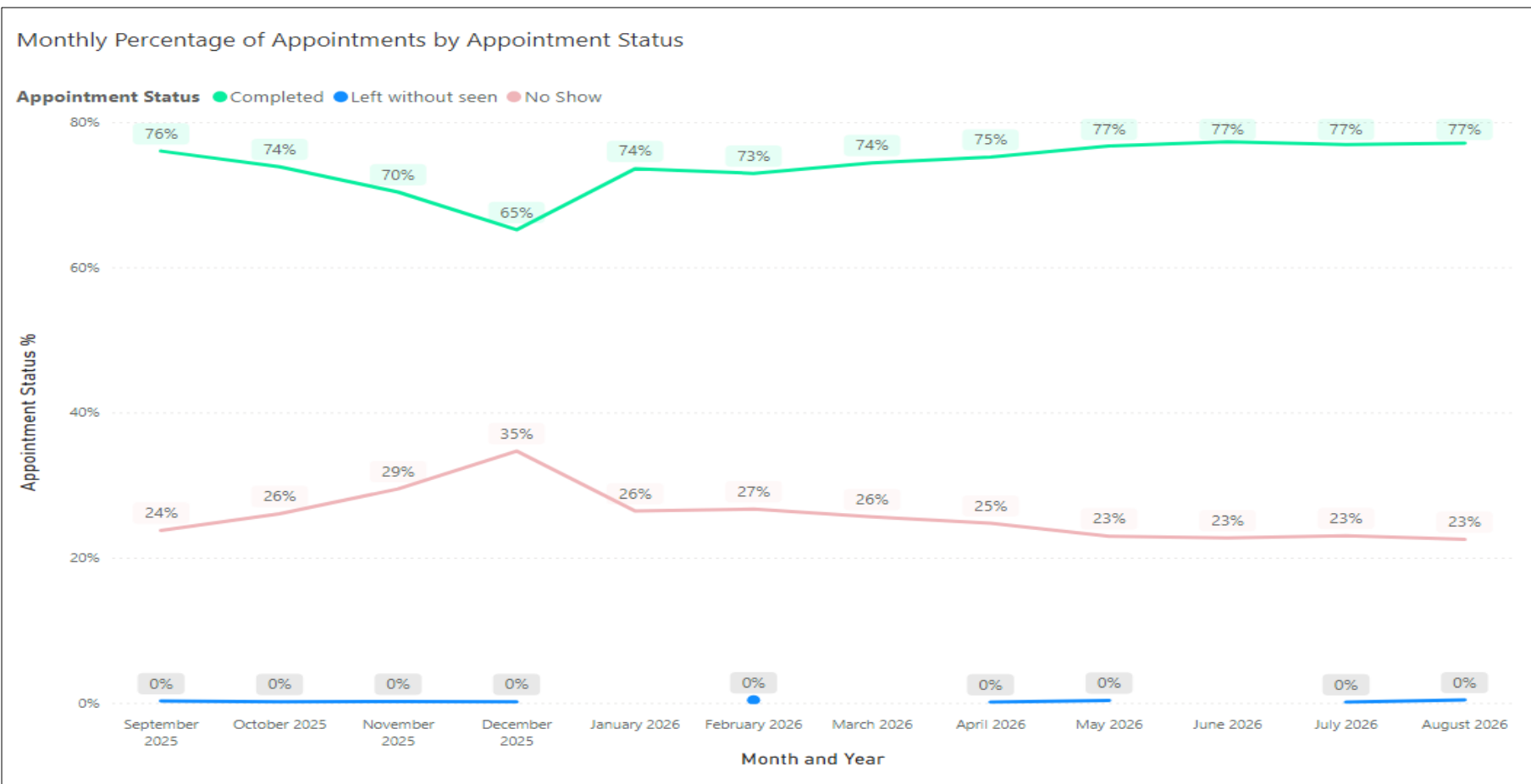


CARE EXPERIENCE



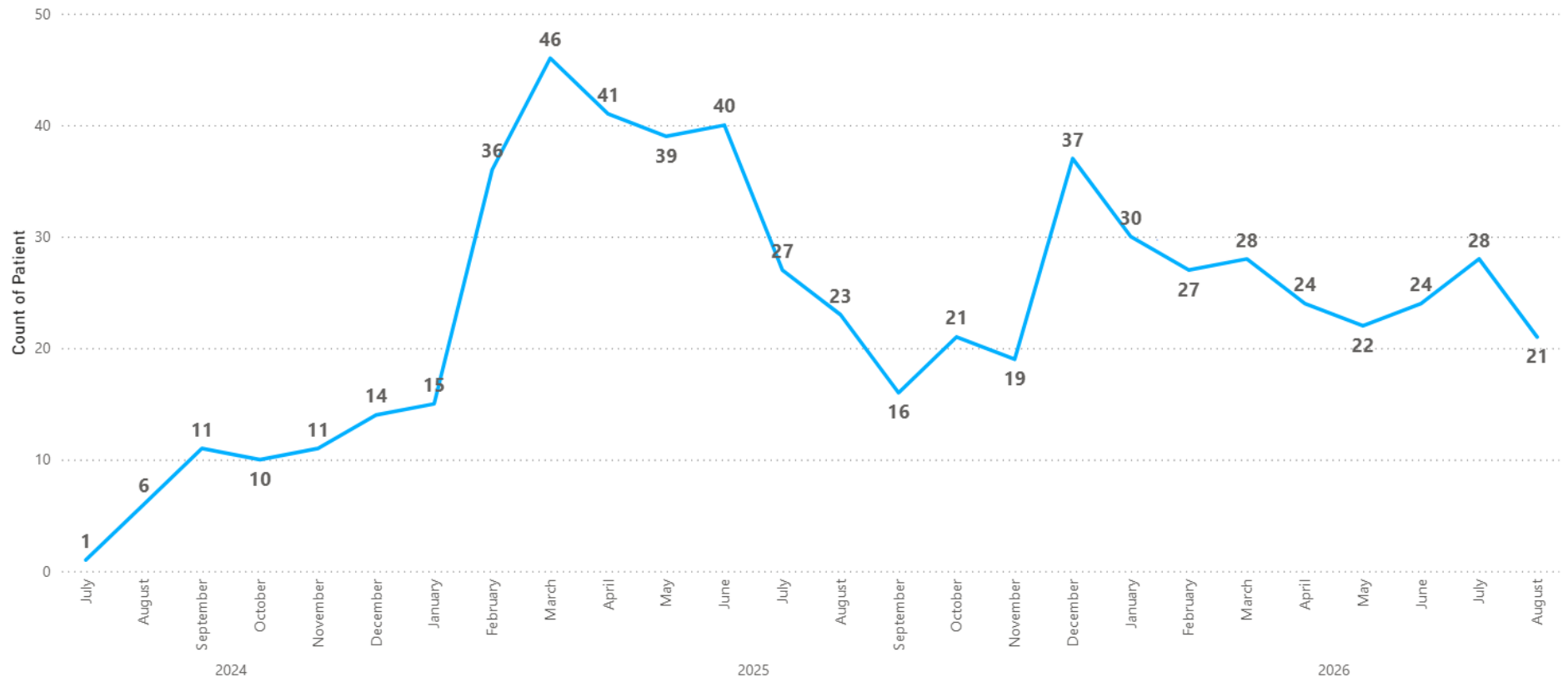
Improving LHH Outpatient Clinic No Show Rate

- Important for resident care and revenue capture
- Goal to decrease from August '26 no-show rate at 23% (excluding canceled appointments)
- Completed: Established data tracking to support future analysis and improvement efforts.



FINANCIAL STEWARDSHIP

New Admissions By Month



Last updated: 9/2/26

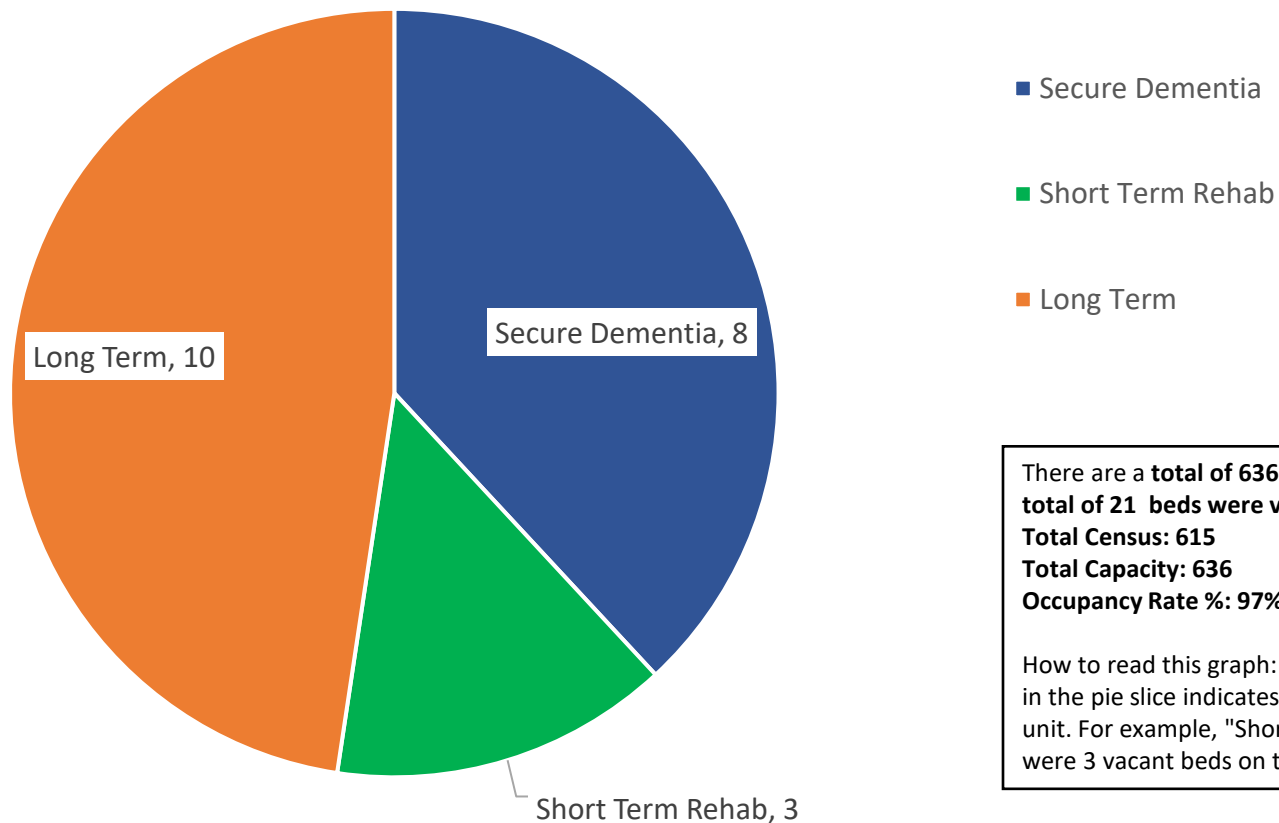


FINANCIAL STEWARDSHIP



LHH Bed Vacancy Report

Vacant Bed Report. Data updated 8/31/2026



There are a **total of 636 beds at Laguna Honda Hospital**. A **total of 21 beds were vacant as of 8.31.26**
Total Census: 615
Total Capacity: 636
Occupancy Rate %: 97%

How to read this graph: The number to the right of the comma in the pie slice indicates the number of vacant beds in that unit. For example, "Short Term Rehab, 3" means that there were 3 vacant beds on the Short Term Rehab unit



FINANCIAL STEWARDSHIP



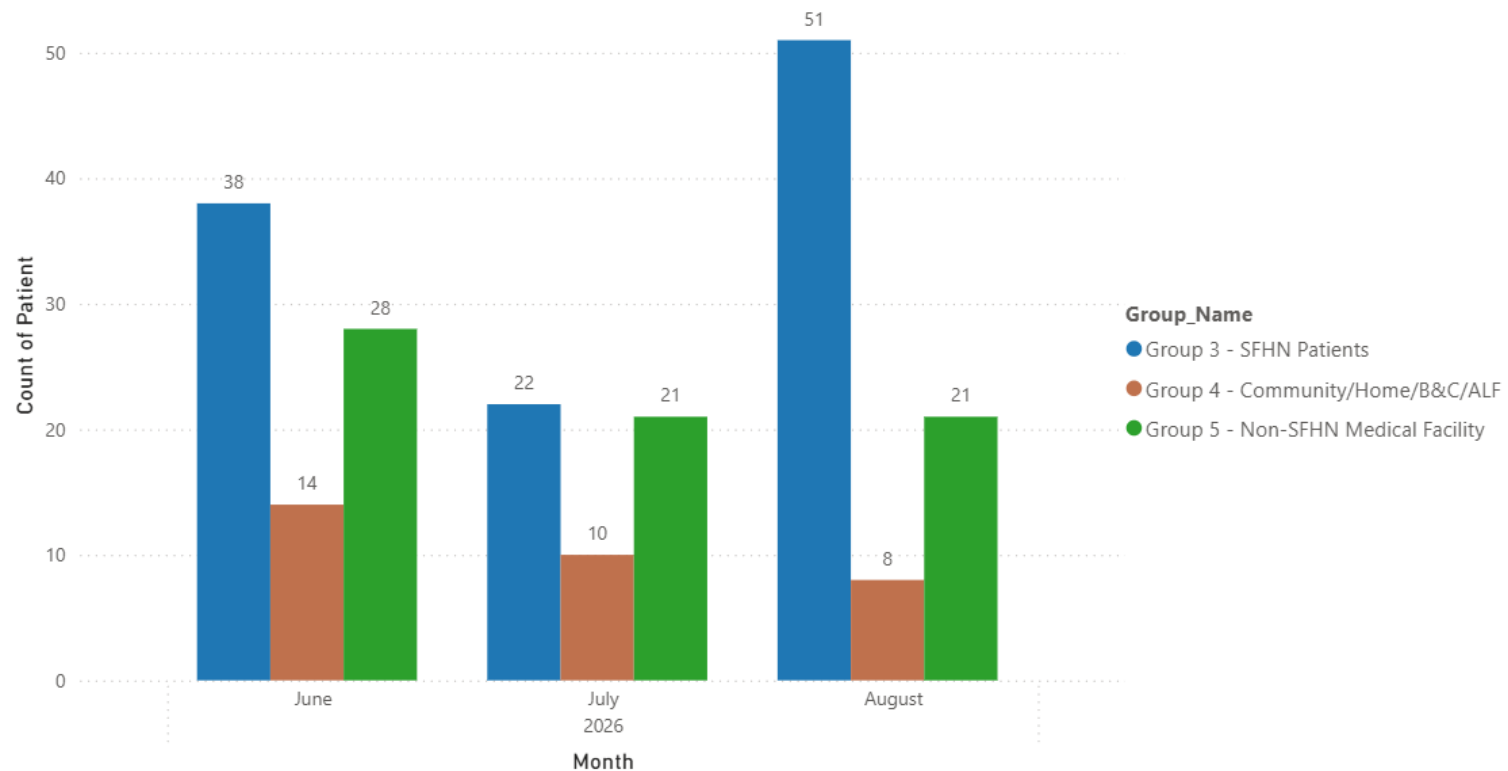
Referring Organizations by Priority Group

Count of Referrals by Group

This chart shows the number of referrals received over time, by Group

Last updated: September 8, 2026

Note: The most recent month shown contains partial data because the month is not yet complete as of this update.

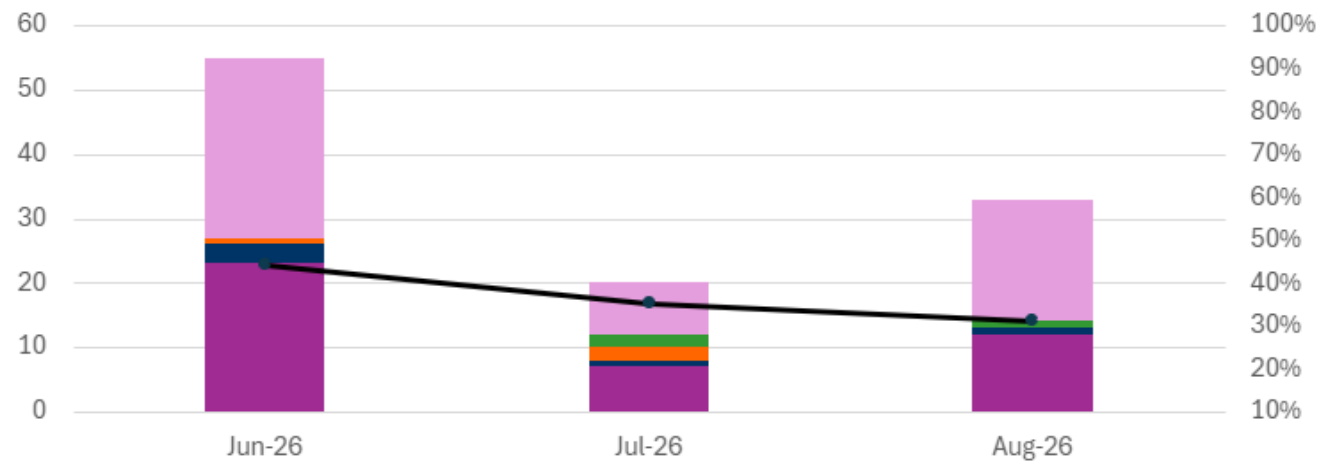


FINANCIAL STEWARDSHIP



Admission Updates: Trend Lines for Denials

Total Number of Referrals Received and Resulting Denials by Month. Updated 9/8/26



	Jun-26	Jul-26	Aug-26
Closed	28	8	19
Decision Pending	0	2	1
Denial - Other	1	2	0
Denial - Too Medically Complex	3	1	1
Denial - Level of Care Appropriateness	23	7	12
Denial - Behavioral Health Needs Too Complex	8	8	12
Accepted Referrals	16	23	35
Percent Denials from Total Referrals Received	44%	35%	31%



FINANCIAL STEWARDSHIP

Overview of LHH Discharges (September 1, 2025 – August 31, 2026)

This dashboard was last refreshed on September 04, 2026 09:22:17 AM

94

Discharges

100

Expirations

609

Current Census (Today)

11

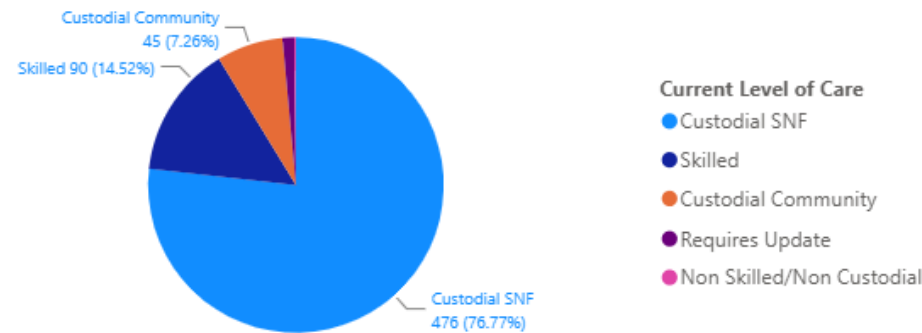
LOA (Today)

9/3/2026

Latest Discharge

Disposition Group	Discharge
Home (with/without Home Health)	62
Against Medical Advice	14
AWOL/Elopement	6
Medical Respite	5
Shelter/Navigation	3
SNF: Custodial/LTC	2
Hospital Transfer (PES)	1
Residential Care / Board & Care	1
Total	94

Current Census by Level Of Care



Skilled:

Requires SNF (No Discharge Track)

Custodial Community:

Can be discharged to community

Custodial SNF:

Requires SNF (No Discharge Track)

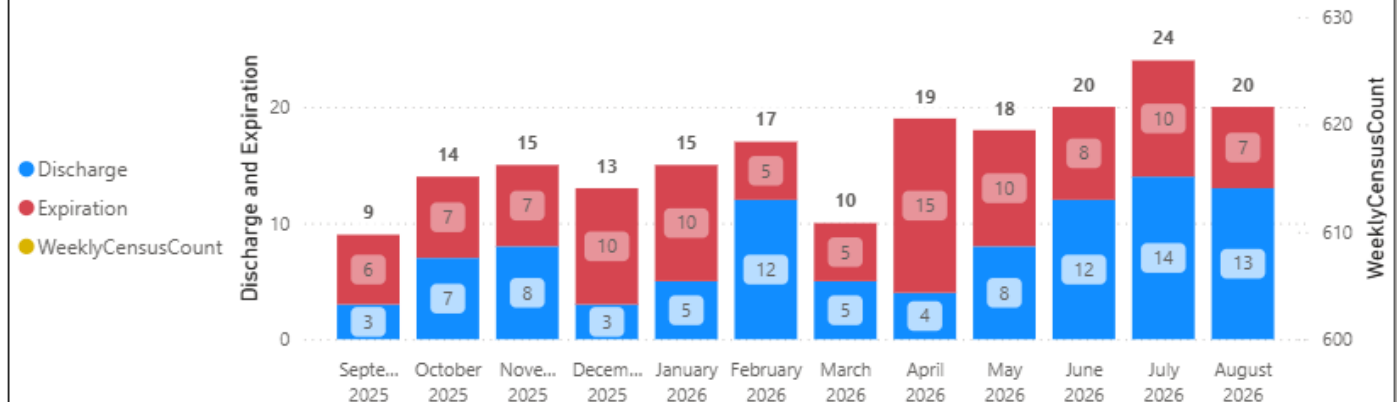
Requires Update:

Has not had Level of care assessment in 90 days or Tracker is not fully updated

Discharges By Length of Stay

Month and Year	Long Stay	Short Stay	Total
August 2026	2	11	13
July 2026	2	12	14
June 2026	2	10	12
May 2026	4	4	8
April 2026	1	3	4
March 2026	3	2	5
February 2026	5	7	12
January 2026	1	4	5
December 2025	1	2	3
November 2025	2	6	8
October 2025	3	4	7
September 2025	1	2	3
Total	27	67	94

LHH Outflow over Time





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