

File No. 220619

Committee Item No. _____

Board Item No. 40

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: _____

Date: _____

Board of Supervisors Meeting

Date: November 1, 2022

Cmte Board

- Motion
- Resolution
- Ordinance
- Legislative Digest
- Budget and Legislative Analyst Report
- Youth Commission Report
- Introduction Form
- Department/Agency Cover Letter and/or Report
- MOU
- Grant Information Form
- Grant Budget
- Subcontract Budget
- Contract/Agreement
- Form 126 – Ethics Commission
- Award Letter
- Application
- Public Correspondence

OTHER

- Weekly Dashboard for Closure and Patient Transfer & Relocation
- Laguna Honda Hospital Presentation - 6/14/22
- Pause Discharge Letters - 7/28/22
- Laguna Honda Hospital Presentation - 9/13/22
- _____
- _____
- _____

Prepared by: Lisa Lew

Date: September 9, 2022

Prepared by: Lisa Lew

Date: October 28, 2022

Weekly Dashboard for Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan

Laguna Honda Hospital (Laguna Honda) provides safety net health care services to approximately 700 of San Francisco's most vulnerable patients. The care for most of these patients is funded by the federal Centers for Medicare and Medicaid Services (CMS). In April 2022, CMS terminated Laguna Honda's participation in the Medicare and Medicaid Provider Participation Programs. In May 2022, Laguna Honda submitted a Closure and Patient Transfer and Relocation Plan and provides weekly closure data to the California Department of Public Health (CDPH).

WEEKLY CLOSURE REPORT

Week reflects data Monday–Sunday; this week, we provide Weeks 1–4; moving forward, up to 4 weeks of data will be displayed; prior data is available upon request.

PATIENT CENSUS:

The census count changes daily as patients move through the system based on their needs. The census may shrink when patients take a “leave of absence” which is when patients are hospitalized for an inpatient acute stay for more than eight days.

PATIENT ASSESSMENTS, FAMILY MEETINGS, and PATIENT REFERRALS:

Laguna Honda must transfer and relocate patients to appropriate settings of care as part of the Closure and Patient Transfer and Relocation Plan. Staff strongly encourages patients to accept placements as they become available based on their assessment. One reason is that placements nearby may not be available later. The process involves:

- **Clinical patient assessments:** Multi-disciplinary teams work together to ensure safe transfer and discharge. A clinical assessment team includes doctors, nurses, and social workers who discuss the patient's functional capabilities and health needs.
- **Patient and family meetings:** Teams meet with each patient and their families and, where applicable, the patient's representative to share information about the closure process and gather input for the transfer/discharge decision.
- **Patient referrals:** Referring a patient to a new facility is a two-way process: First find a facility that has room and appropriate levels of care must be found and the facility must agree to the placement.
 - Intensive outreach is conducted to find a facility. Once an appropriate facility is found, detailed information about the patient is shared to ensure that the facility can meet care needs (as defined by the patient's placement assessment). The new facility must review and screen the assessment to determine whether they will accept the patient. Only then will the referral occur.

TRANSFER, RELOCATION, and DISCHARGES:

Laguna Honda staff are highly invested in appropriate transfer and relocation for each patient. Resident care teams complete assessments for (1) level of care, (2) risk for transfer trauma, and (3) discharge options.

PATIENT CENSUS				
Week	End of Week 1: May 16-22	End of Week 2: May 23-29	End Week 3: May 30-June 5	End of Week 4: June 6-12
Patients	681	677	677	675

PATIENT ASSESSMENTS, FAMILY MEETINGS, and PATIENT REFERRALS					
Week	Week 1: May 16-22	Week 2: May 23-29	Week 3: May 30-June 5	Week 4: June 6-12	TOTAL
Patient Assessments	105	100	59	74	338
Patient and Family Meetings	43	57	21	57	178
Patient Referrals	2	79	121	147	349

BED IDENTIFICATION and CALLS, TRANSFERS AND DISCHARGES					
Week	Week 1: May 16-22	Week 2: May 23-29	Week 3: May 30-June 5	Week 4: June 6-12	TOTAL
TOTAL CALLS per week	739	1,188	1,162	1,418	4,507
BEDS AVAILABLE					
<u>In SF</u>					
Called facilities	15	15	15	15	60
Found beds available	11	0	10	2	23
<u>Out of County</u>					
Called facilities	482	1,095	850	1,103	3,530
Found beds available	1,187	1,070	1,457	1,540	5,254
DISCHARGES	0	1	0	5	6



San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

Laguna Honda Hospital Recertification Update

June 14, 2022



Agenda

- About Laguna Honda Hospital
- Timeline and Path to Recertification
- Closure and Patient Transfer and Relocation Plan
- Dashboards and Data



About Laguna Honda Hospital

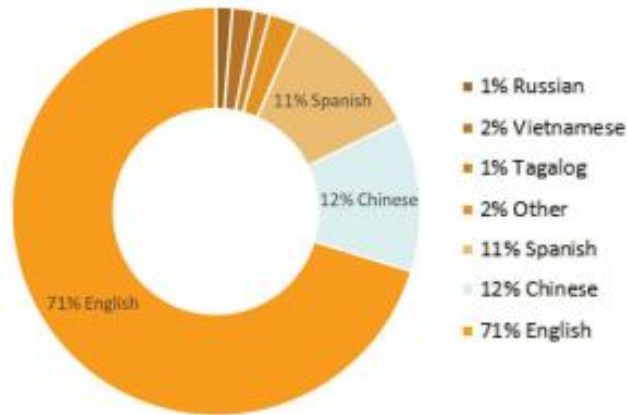
History & Care

- Cares for San Francisco's most in-need patients for more than 150 years
- Serves approximately 700 low or very low-income patients with complex medical needs as part of City's health care safety net.
- Provides restorative care programs, palliative care, hospice and rehabilitative services.
- Serves people with complex or chronic conditions such as stroke, traumatic brain injury or degenerative diseases.
- Provides nationally recognized programs for memory care for people with Alzheimer's/dementias.
- Has one of the only HIV/AIDS skilled nursing programs in the Bay Area.
- Provides monolingual care in Spanish and Chinese.

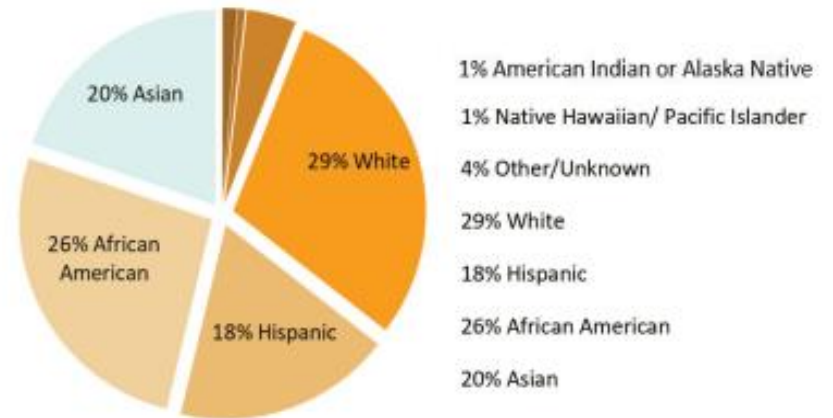


About Laguna Honda Hospital

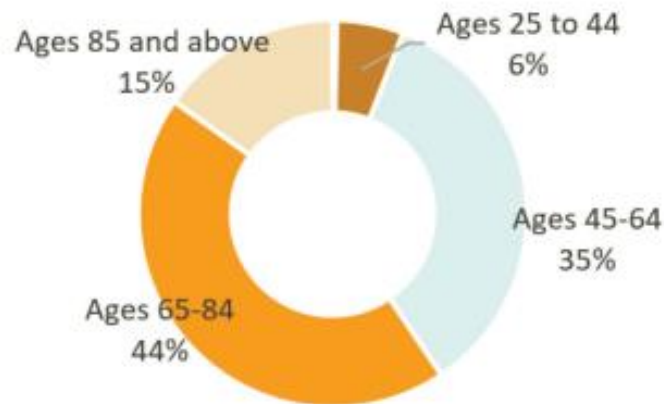
Patients by Primary Language



Patients by Race

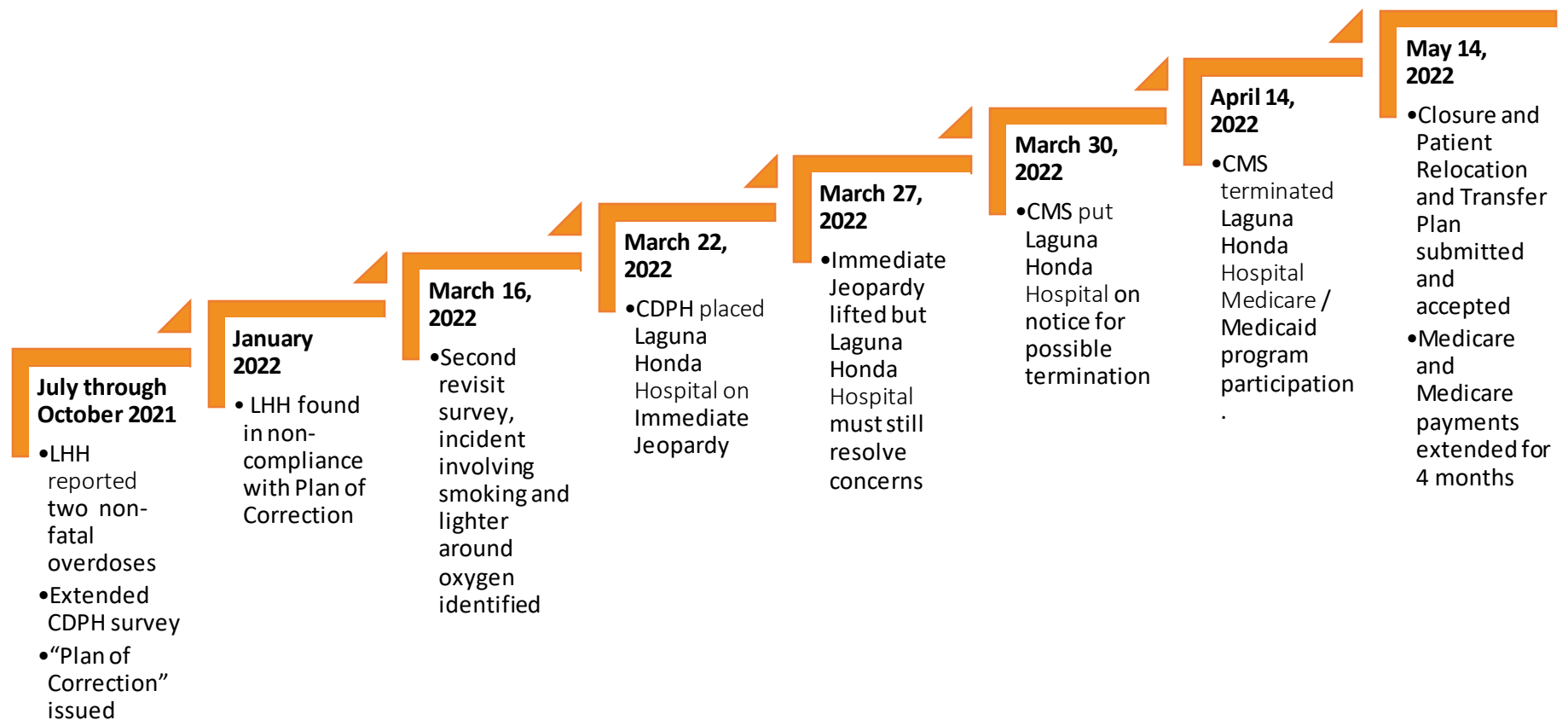


Patients by Age



Laguna Honda Hospital: Brief Timeline of CMS Certification Issue

Overview



Laguna Honda Hospital Path to CMS Recertification



Laguna Honda Hospital Recertification Update

We are leading an aggressive initiative to achieve Medicare and Medicaid recertification with CMS.

*Our **highest priority** is to **remain open** and continue providing **quality healthcare to patients** while **ensuring federal and state regulatory compliance**.*

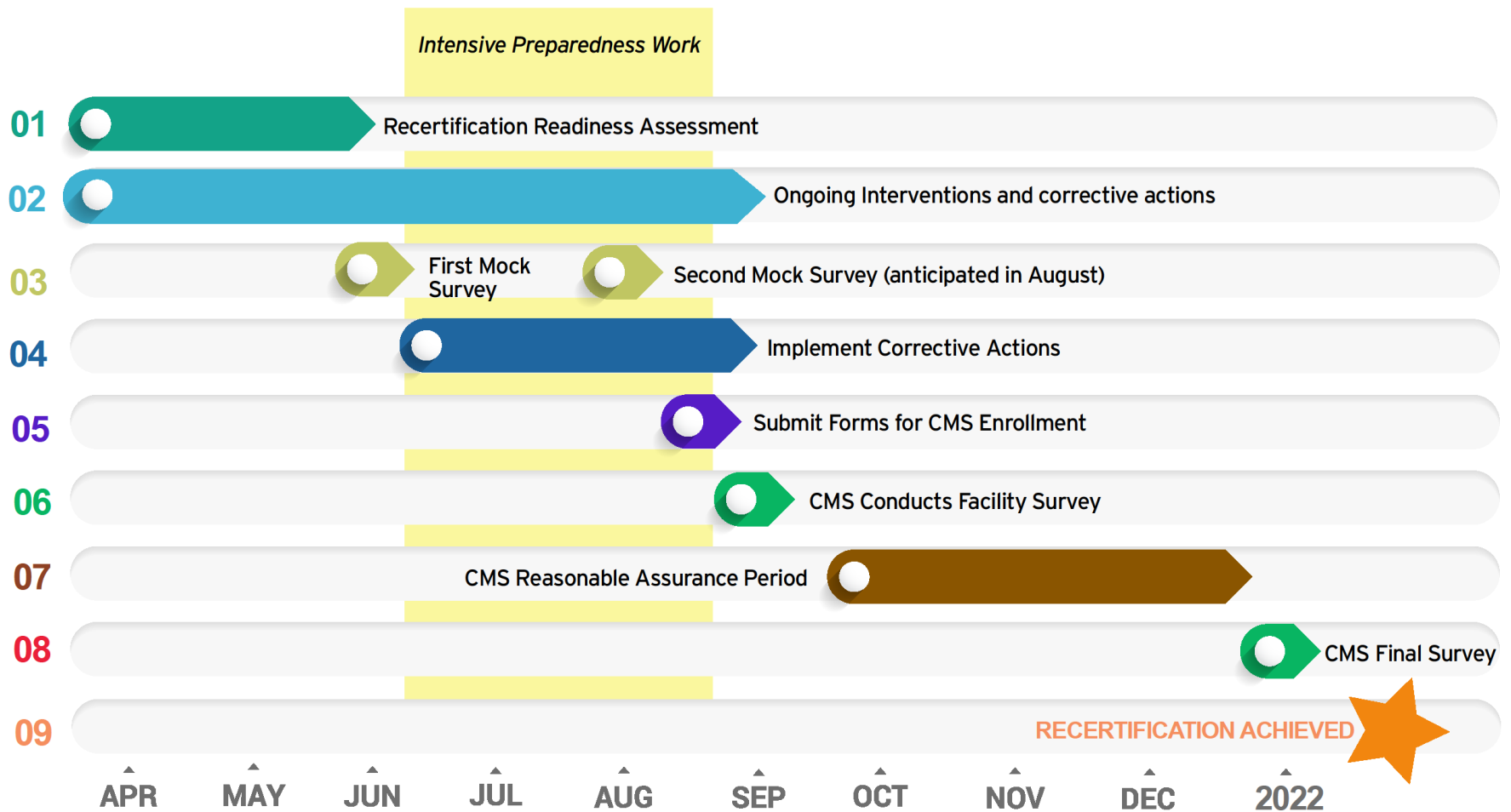
We hired specialized independent third-party **consulting firms** who are:

- conducting top-to-bottom assessment (i.e., patient care, culture, leadership, and governance)
- working collaboratively with Laguna Honda Hospital (LHH) Incident Command, staff, and union partners
- providing technical support for ongoing CDPH and CMS compliance



Laguna Honda Hospital Path to CMS Recertification

LAGUNA HONDA HOSPITAL CMS RECERTIFICATION TENTATIVE TIMELINE





San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan Update

June 14, 2022



Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan



Laguna Honda Hospital is required by regulation to submit and implement a Closure and Patient Transfer and Relocation Plan.

CMS approved the plan on May 13, 2022, which extended critical federal funding for four months with a possible two-month extension, for a total of up to six months.

For Laguna Honda Hospital to receive continued funding, all efforts must be made to implement the plan, which means we must actively transfer patients.



Laguna Honda Closure and Patient Transfer and Relocation Plan



Process includes (as outlined in the approved plan):

- Notify patients, staff, families, decisionmakers, and State ombudsperson
- Assess patients for safe transfers and/or discharges
- Conduct patient and family meetings
- Hold staff meetings
- Discharge appeal process
- Relocate patients

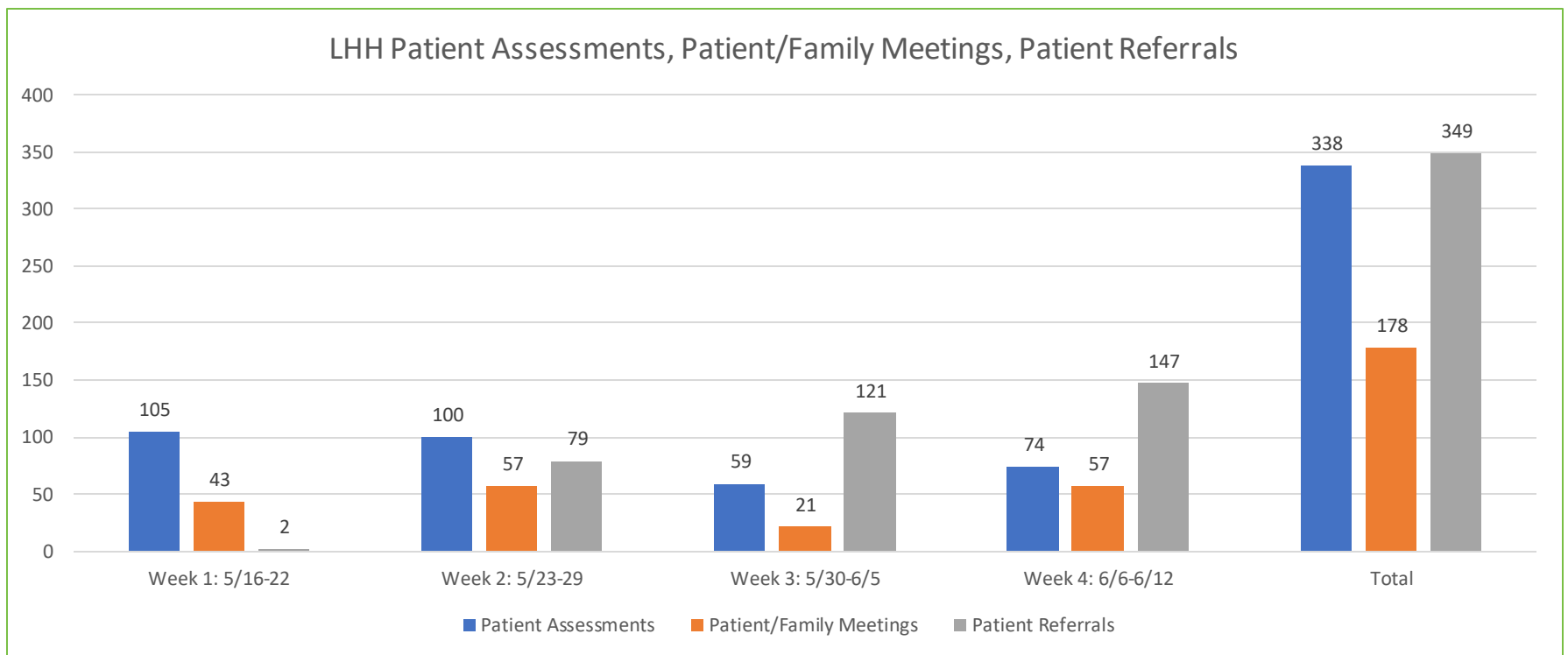
Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan

Reports to CMS and CDPH, as of June 13, 2022

Category	Week 1 5.16-22	Week 2 5.23-29	Week 3 5.30-6.5	Week 4 6.6-12	TOTAL
Community	0	1	0	1	2
Facility	0	0	0	4	4
Total LHH Coordinated Discharges	0	1	0	5	6
Expirations	1	1	1	0	3
AMA/AWOL	0	1	0	0	1
Daily Census	681	677	677	675	

Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan

Reports to CMS and CDPH, as of June 13, 2022



Supporting Laguna Honda Hospital Staff

Supporting professional, social, and emotional well-being and development of employees during recertification and closure plan work:

- Hold frequent, timely and accurate communication with staff
 - Increase opportunities for interactions with Laguna Honda Hospital leadership, Human Resources, and Unions
 - Promote wellness resources
 - Employee Assistance Program
 - Employee Wellness Hub
 - Support skills development
 - Professional Development
 - Trainings
 - Celebrate successes and milestones as a community
-

Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan

Reports to CMS and CDPH, as of June 13, 2022

LHH Phone Calls to Skilled Nursing Facilities (SNF)

	Calls to SNF facilities	Week 1 5.16-22	Week 2 5.23-29	Week 3 5.30-6.5	Week 4 6.6-12	TOTAL
SF County	Unique facilities in SF called weekly	15	15	15	15	60
	Total number of weekly calls made to facilities in SF	30	30	30	30	120
Out of County	Unique facilities out of county called weekly	482	1,095	850	1,103	3,530
	Total number of weekly calls made to facilities out of county	709	1,158	1,132	1,388	4,387
	Total calls made to facilities (SF & Out of County)	739	1,188	1,162	1,418	4,507

Laguna Honda Hospital Closure and Patient Transfer and Relocation Plan

Reports to CMS and CDPH, as of June 13, 2022

Bed Availability at Skilled Nursing Facilities (SNF)

Bed Availability		Week 1 5.16-22	Week 2 5.23-29	Week 3 5.30-6.5	Week 4 6.6-12	TOTAL
SF County	Number of available Medi-Cal certified beds in SF	0	0	0	0	0
	Number of available Medicare certified beds in SF	0	0	0	0	0
	Total number of beds available in SF (Medicare or Medi-Cal certified bed type not disclosed by facility)	11	0	10	2	23
Out of County	Number of available Medi-Cal certified beds out of county	53	0	0	5	58
	Number of available Medicare certified beds out of county	157	0	24	49	230
	Total Number of beds available out of county (Medicare or Medi-Cal certified bed type not disclosed by facility)	1,187	1,070	1,457	1,540	5,254



San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

Thank you!



San Francisco Health Network
Laguna Honda Hospital
and Rehabilitation Center

Laguna Honda Hospital Closure Plan and CMS Recertification Update

September 13, 2022



About Laguna Honda



The largest publicly-run skilled nursing facility in the country

- For more than 150 years, Laguna Honda has been a pillar of San Francisco's healthcare system, providing healthcare services to approximately 700 residents.
- The hospital cares for people coping with the effects of complex or chronic conditions such as stroke, traumatic brain injury or degenerative diseases such as multiple sclerosis.
- Rehabilitative services include physical therapy, occupational therapy, speech therapy and audiology.
- Specialized care includes monolingual care in Spanish and Chinese, palliative care, positive care (AIDS/HIV) and memory care.



Status Update



De-Certification with CMS in April 2022

- Laguna Honda has an obligation to report many types of incidents with the goal of improving care. In 2021, Laguna Honda self-reported two non-fatal overdoses, which resulted in several surveys.
- The Centers for Medicare and Medicaid Services (CMS), as a result of those surveys, found the hospital out of substantial compliance.
- In April 2022, CMS terminated Laguna Honda's participation in the Medicare and Medicaid Provider Participation Programs.
- CMS Reimbursements fund the majority of resident care, accounting for approximately \$550k a day or more than \$200 million annually.



Status Update



The Path to CMS Recertification

- Laguna Honda continues to work hard to meet all regulatory requirements and make rapid improvements to prepare for recertification.
- This includes long-term operational, institutional, and cultural changes needed to achieve recertification and to ensure the long-term success of the hospital.
- Certification experts conducted a comprehensive organizational assessment and made recommendations on gaps and improvements, and Laguna Honda is implementing those improvements and tracking to ensure sustainability.
- Between the Laguna Honda staff and expert consultants, we are confident we have the team in place for a successful recertification.



Closure Plan - *Paused*



Extension of Pause in Transfers/Discharges of Residents and Medicaid/Medical Payments

- **May 14:** CMS and CDPH required implementation of a Closure and Patient Transfer and Relocation Plan to be completed by September 13, when Medicaid/Medicare funding would be halted.
- **July 28:** Regulators agreed to a request by the City to pause all transfers and discharges. A total of 57 transfers and discharges occurred as part of the Closure Plan.
- **August 15:** Laguna Honda reached an agreement with CMS and CDPH to extend Medicare and Medicaid payments to residents until November 13 and to continue the Closure Plan pause during this extension.
- During this pause, resident-initiated transfers and discharges will continue to occur, which is a right our residents are entitled to and aligned with hospital policy.



CMS Recertification



Preparing the Facility for Recertification

- Laguna Honda continues to work hard to meet all regulatory requirements. We are making rapid improvements to prepare for recertification.
- This includes long-term operational, institutional, and cultural changes needed to achieve recertification and to ensure the long-term success of the hospital.
- Certification experts are conducting a comprehensive organizational assessment and making recommendations on gaps and improvements, and Laguna Honda is implementing those improvements and tracking to ensure sustainability.



CMS Recertification



The First Mock Survey

- Laguna Honda completed the first mock survey on July 21, 2022.
- Laguna Honda has implemented 371 corrective actions as a result of the first mock survey.
- Each corrective action has a monitoring plan to ensure sustainability.
- Every day, hospital leadership review the status of the corrective actions – this close monitoring ensures progress and sustainability.
- The second mock survey will take place after the corrective actions from the first mock survey have been sustained.



CMS Recertification



Recertification Education

- All Laguna Honda staff are participating in education trainings and accompanying skills checks in preparation for CMS recertification.
- More than 1,000 staff completed the trainings thus far with the remaining 100-200 staff completing make-up sessions.
- The trainings are a comprehensive and sustainable workforce training program with content based on the mock survey findings and other facility assessments.
- All staff participated in weeks 1-3 with nursing staff participating in the additional fourth week.

Week 1

- Infection Control
- Administration and Emergency Services
- Freedom from Abuse

Week 2

- Residents' Rights
- Quality of Life
- Behavioral Health

Week 3

- Quality Assurance & Performance Improvement
- Physical Environment
- Food & Nutrition

Week 4

- Pharmacy and Medication Pass
- Comprehensive Care Plan
- Resident Assessment



CMS RECERTIFICATION



Recertification Education



CMS Recertification



Key CMS Survey Preparation Work

- Additional recertification activities:
 - 24/7 in-person observations for infection prevention and control and the environment of care
 - Using the same tool regulators use to assess the hospital – Laguna Honda assess 10 per week on average using this tool
 - Severe Findings Strike Team to respond to severe findings.
 - Pilot reorganization to better align staffing model with high-performing skilled nursing facilities.
 - Focus on nursing staffing including hiring 40 patient care assistants this month and an updated staff assignment process that support strong unit culture.



CMS RECERTIFICATION



Bed Reduction Update

- Laguna Honda is required to change policies, procedures and operations to meet current regulations and allow for successful recertification.
- Current directive from CMS and CDPH is that Laguna Honda must comply with updated CMS 2016 standards related to skilled nursing facility resident occupancy. One of those standards is to have no more than two residents per room.
- Laguna Honda now has a maximum of two residents per room.
- This has reduced our bed count by 120 beds from 769 SNF beds to 649 SNF beds.
- However, we are not de-licensing the third bed in order to keep options open as we go through recertification with CMS.
- We do not yet know if the beds will be certified by CMS but we will maintain our license and we hope to again occupy them.



COVID-19 Outbreak Mitigation



Keeping residents safe during an increase in cases

- Laguna Honda responded to the largest COVID-19 outbreak to-date among residents. Resident cases peaked on August 25th at 55 cases. There are now 11 cases as of September 12th.
- Laguna Honda responded swiftly and effectively:
 - All visitors are now being tested upon entry
 - 24/7 staff observations to ensure proper PPE use and hand hygiene
 - Temporarily closing staff gathering spaces like the cafe and moving most meetings to virtual
 - A second COVID unit was prepared (although not used)
 - Staff continue to test twice weekly, wear N95s and eye protection in resident care areas and perform many daily infection prevention and control measures
- Laguna Honda is now in the process of rolling out the bivalent COVID vaccines.



Laguna Honda Updates



Tracking Laguna Honda's Path to Recertification

- Closure Plan and recertification updates are provided at the Health Commission at the second meeting of each month in both open and closed session.
- Closure Plan and recertification updates are provided monthly at the Laguna Honda JCC in both open and closed session.
- A summary of the mock survey findings and corrective actions was made available to the public.
- Dedicated webpages to the Closure Plan and recertification efforts can be found at lagunahonda.org





San Francisco Health Network Laguna Honda Hospital and Rehabilitation Center



PHOTO CREDIT: HEIDI ALLEZHAUSER PHOTOGRAPHY

From: [Hickey, Jacqueline \(BOS\)](#)
To: [BOS-Supervisors](#); [BOS-Legislative Aides](#)
Cc: [Calvillo, Angela \(BOS\)](#); [Somera, Alisa \(BOS\)](#); [Ng, Wilson \(BOS\)](#); [Entezari, Mehran \(BOS\)](#); [De Asis, Edward \(BOS\)](#); [BOS Legislation, \(BOS\)](#); [BOS-Operations](#)
Subject: FW: TODAY: Pausing Transfers and Discharges of All Laguna Honda Residents
Date: Thursday, July 28, 2022 4:30:06 PM
Attachments: [7.28.22 LHH CEO Message - Pausing Transfers and Discharges of All Laguna Honda Residents \(Resident - English\).cleaned.pdf](#)
[7.28.22 LHH CEO Message - Pausing Transfers and Discharges of All Laguna Honda Residents \(Staff\).cleaned.pdf](#)
Importance: High

From: Validzic, Ana (DPH) <ana.validzic@sfdph.org>
Sent: Thursday, July 28, 2022 3:30 PM
To: BOS-Legislative Aides <bos-legislative_aides@sfgov.org>; BOS-Supervisors <bos-supervisors@sfgov.org>
Subject: TODAY: Pausing Transfers and Discharges of All Laguna Honda Residents
Importance: High

Honorable Supervisors and Staff:

As you know, the Centers for Medicare and Medicaid Services (CMS) terminated Laguna Honda Hospital's participation in the Medicare and Medicaid Provider Participation Programs in April 2022. As a result, CMS required Laguna Honda to transfer or discharge all residents by mid-September. Finding appropriate placements at a new facility is a challenge and takes time. In many cases, residents have relied on us for their healthcare for years and their continued wellbeing is our highest priority.

This is an extremely challenging time for our community of residents and their families, our staff and all those who care about Laguna Honda Hospital. The transfer and discharge of residents has been challenging as many have complex healthcare needs. Yesterday, regulators agreed to the City's urgent request to pause all transfers at Laguna Honda Hospital.

Accordingly, as of today, Laguna Honda will pause the discharge and transfer of all residents. This impacts approximately 600 residents.

The Centers for Medicare & Medicaid Services (CMS), the California Department of Public Health (CDPH) and the California Department of Health Care Services (DHCS) are all in agreement with this decision. Laguna Honda continues to work towards recertification in the Medicare and Medicaid Provider Participation Programs.

Attached are copies of letters going out to staff and residents at Laguna Honda. As always, please let us know if you have any questions.

Best, Ana

Ana Validzic (she/her)

Government Affairs Manager

San Francisco Department of Public Health

ana.validzic@sfdph.org | 650.503.9536 (cell)

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San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Roland Pickens, MHA, FACHE
Chief Executive
San Francisco Health Network

July 28, 2022

Pausing Transfers and Discharges of All Laguna Honda Residents

Dear Laguna Honda Residents and Families,

This is an extremely challenging time for our community of residents and their families, our staff and all those who care about Laguna Honda Hospital.

I am writing to share that as of today, Laguna Honda will pause the discharge and transfer of all residents based on regulators agreeing to the City's urgent request to pause all transfers of residents at Laguna Honda.

As you know, the Centers for Medicare and Medicaid Services (CMS) terminated Laguna Honda's participation in the Medicare and Medicaid Provider Participation Programs in April 2022. Another way to think about this is that CMS no longer sees Laguna Honda as part of their program. As a result, CMS required Laguna Honda to transfer or discharge all Medicare and Medicaid residents by mid-September.

The Closure Plan has had challenges and negative impacts for our community. As a result, Laguna Honda worked with, and at the direction of, CMS, the California Department of Public Health (CDPH) and the California Department of Health Care Services (DHCS) to pause the discharge and transfer of all residents.

At this time, we are not certain how long we will be allowed to pause transfers and discharges but will continue to keep our community updated with the latest information. We know the uncertainty is challenging but we hope this pause provides our community with relief.

We are committed to providing dedicated care to all Laguna Honda residents.

Sincerely,

Roland Pickens, MHA, FACHE

Chief Executive Officer, San Francisco Health Network &
Interim Chief Executive Officer, Laguna Honda Hospital



San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Roland Pickens, MHA, FACHE
Chief Executive
San Francisco Health Network

July 28, 2022

Pausing Transfers and Discharges of All Laguna Honda Residents

Dear Laguna Honda Staff,

This is an extremely challenging time for our community of residents and their families, our staff and all those who care about Laguna Honda Hospital.

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The Closure Plan has had challenges and negative impacts for our community. As a result, Laguna Honda worked with, and at the direction of, CMS, the California Department of Public Health (CDPH) and the California Department of Health Care Services (DHCS) to pause the discharge and transfer of all residents.

At this time, we are not certain how long we will be allowed to pause transfers and discharges but will continue to keep our community updated with the latest information. We know the uncertainty is challenging but we hope this pause provides our community with relief.

Thank you for supporting our residents and their families during this challenging time.

Sincerely,

Roland Pickens, MHA, FACHE
Chief Executive Officer, San Francisco Health Network &
Interim Chief Executive Officer, Laguna Honda Hospital

From: [Board of Supervisors, \(BOS\)](#)
To: [BOS-Supervisors; BOS Legislation, \(BOS\)](#)
Cc: [Calvillo, Angela \(BOS\)](#); [Somera, Alisa \(BOS\)](#); [Ng, Wilson \(BOS\)](#); [Entezari, Mehran \(BOS\)](#); [BOS Legislation, \(BOS\)](#)
Subject: FW: Laguna Honda Forced Discharges, Closure and Bed Cuts MUST NOT OCCUR
Date: Friday, October 7, 2022 8:49:48 AM

From: Donna DEufemia <dakini5711@gmail.com>
Sent: Thursday, October 6, 2022 9:48 PM
To: Calvillo, Angela (BOS) <angela.calvillo@sfgov.org>; Carroll, John (BOS) <john.carroll@sfgov.org>; Chan, Connie (BOS) <connie.chan@sfgov.org>; Stefani, Catherine (BOS) <catherine.stefani@sfgov.org>; Peskin, Aaron (BOS) <aaron.peskin@sfgov.org>; Mar, Gordon (BOS) <gordon.mar@sfgov.org>; Preston, Dean (BOS) <dean.preston@sfgov.org>; Dorsey, Matt (BOS) <matt.dorsey@sfgov.org>; Melgar, Myrna (BOS) <myrna.melgar@sfgov.org>; Mandelman, Rafael (BOS) <rafael.mandelman@sfgov.org>; Walton, Shamann (BOS) <shamann.walton@sfgov.org>; Ronen, Hillary <hillary.ronen@sfgov.org>; graypanther-sf@sonic.net
Subject: Fwd: Laguna Honda Forced Discharges, Closure and Bed Cuts MUST NOT OCCUR

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[File number:220619](#) [Hearing - Committee of the Whole - Laguna Honda Hospital's Strategy for Recertification and the Submission of a Closure and Patient Transfer and Relocation Plan – November 1, 2022, at 3:00 p.m.]

Dear San Francisco Board of Supervisors:

Thank you again for all the good work you are doing in this time of crisis for Laguna Honda Hospital, it's patients and family members. Please continue to stand up for this all important community institution. !!

As you know November 13, 2022, is drawing near and there has been no decision to permanently stop the patient transfers from LHH.

We are sickened by the deadly fate of the 9 innocent patients that have been the victims of what appears to be a situation created and furthered by The CMS, the the SF and CA Dept of Public Health and some politicians. We want the people involved to now reverse this deadly decision.

Our elderly and medically fragile loved ones have been subjected to the chaos and terror of being and possibly being displaced into substandard and de-humanizing

SNF's since March. They are being traumatized for 7 months now! and with no end in sight?? We, the Families are going through the same.!! And the Laguna Honda Staff is also in daily uncertainty of losing their jobs come November.

This must stop. It must stop now!

I align with the Gray Panthers demands for Laguna Honda Hospital. This must be supported. Additionally, If Laguna Honda is forced to be closed and empty, this will be a cruel sentence, not only to the patients, the elderly, the medically fragile and needy in San Francisco, but will stand as one of the great inhumane and deadly actions imposed by a government agency, a city that is supposed to be progressive and its so-called 'good' community leaders.

Nationally, the overall abysmal treatment of elders and disrespect as shown by the horrific state of SNFs and lack of SNFs, I hope, becomes an immediate wake up call for our society! This trajectory is bad. Use Laguna Honda to lead the way as an institution of great competence, dignity and availability for our community and shift the paradigm far and wide so other cities will emulate and shift. Do this by staying open! and continuing to upgrade and fix their problems!

The mission of the CMS is to uphold safety for health facilities. I urge you to create more and better facilities to house our elderly, not close the facilities!

I support the following demands by the Gray Panthers:

In order to not endanger current Laguna Honda residents who have no equivalent place to go in the county, and to preserve all of the beds for the people of San Francisco who will someday need a nursing home, I demand that the Board of Supervisors direct that:

- **Laguna Honda be open to all San Franciscans who need nursing home care**
- **SFDPH Stop the "flow" project & return admission decisions to LHH Staff**

- No forced closure
- No discharges for Skilled-Nursing-Facility-eligible residents
- No discharge for non-SNF-eligible residents until safe and local arrangements are made.
- No loss of beds in this nearly new facility
- Funding for existing residents must continue until recertification

- Provide sufficient mental health and substance use programs and beds to give people the care they need, and sufficient services for elders and people with disabilities to stay in their communities where possible, to prevent inappropriate nursing home admissions.

I ask that you **do your duty to represent all of your constituents**, including the most vulnerable, and put a stop to the danger and death that will occur, both now and in the future, if beds are lost or the most vulnerable residents are again ejected from Laguna Honda.

Thank you!

Donna D'Eufemia

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For more options, visit <https://groups.google.com/d/optout>.

FW: Laguna Honda

Board of Supervisors, (BOS) <board.of.supervisors@sfgov.org>

Thu 9/15/2022 11:41 AM

To: **BOS-Supervisors** <bos-supervisors@sfgov.org>;**BOS-Legislative Aides** <bos-legislative_aides@sfgov.org>

Cc: Calvillo, Angela (BOS) <angela.calvillo@sfgov.org>;Somera, Alisa (BOS) <alisa.somera@sfgov.org>;Ng, Wilson (BOS) <wilson.l.ng@sfgov.org>;Mchugh, Eileen (BOS) <eileen.e.mchugh@sfgov.org>;De Asis, Edward (BOS) <edward.deasis@sfgov.org>;BOS Legislation, (BOS) <bos.legislation@sfgov.org>

Hello,

Please see below for communication from Rasa Gustaitis regarding File No. 220619.

File No. 220619 - Hearing - Committee of the Whole - Laguna Honda Hospital's Strategy for Recertification and the Submission of a Closure and Patient Transfer and Relocation Plan

Sincerely,

Joe Adkins

Office of the Clerk of the Board

San Francisco Board of Supervisors

1 Dr. Carlton B. Goodlett Place, Room 244

San Francisco, CA 94102

Phone: (415) 554-5184 | Fax: (415) 554-5163

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From: Rasa Gustaitis <Rasa@rasatime.com>

Sent: Tuesday, September 13, 2022 12:56 PM

To: Board of Supervisors, (BOS) <board.of.supervisors@sfgov.org>

Subject: Laguna Honda

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

To shut down Laguna Honda would be cruel and irresponsible. It would mean casting out some of the most helpless among us, with nowhere for them to go.

I am glad to hear the City is working to avert that and urge you to make recertification the highest priority.

I have known people who have worked, volunteered, and lived at this unique refuge. It is irreplaceable. To shut it down is unthinkable.

From: [Board of Supervisors, \(BOS\)](#)
To: [BOS-Supervisors](#); [BOS-Legislative Aides](#)
Cc: [Calvillo, Angela \(BOS\)](#); [Somera, Alisa \(BOS\)](#); [Ng, Wilson \(BOS\)](#); [De Asis, Edward \(BOS\)](#); [Entezari, Mehran \(BOS\)](#); [BOS Legislation, \(BOS\)](#)
Subject: FW: Laguna Honda Discharges
Date: Wednesday, September 14, 2022 2:24:36 PM

From: Donna DEufemia <donna.deufemia@gmail.com>

Sent: Tuesday, September 13, 2022 5:20 PM

To: Calvillo, Angela (BOS) <angela.calvillo@sfgov.org>; Carroll, John (BOS) <john.carroll@sfgov.org>; Chan, Connie (BOS) <connie.chan@sfgov.org>; Stefani, Catherine (BOS) <catherine.stefani@sfgov.org>; Peskin, Aaron (BOS) <aaron.peskin@sfgov.org>; Mar, Gordon (BOS) <gordon.mar@sfgov.org>; Preston, Dean (BOS) <dean.preston@sfgov.org>; Dorsey, Matt (BOS) <matt.dorsey@sfgov.org>; Melgar, Myrna (BOS) <myrna.melgar@sfgov.org>; Mandelman, Rafael (BOS) <rafael.mandelman@sfgov.org>; Ronen, Hillary <hillary.ronen@sfgov.org>; Walton, Shamann (BOS) <shamann.walton@sfgov.org>

Subject: Re: Laguna Honda Discharges

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Hello,

I spoke a remote comment but didn't get to finish. I am just learning how many words go into a 2minute comment. Here is my full comment (last two paragraphs were not included in comment):

Good afternoon Bd of Supervisors and all in attendance:

I would like to extend a huge thank you to the Bd for the unanimously voted resolution that petitioned the CMS to stop discharges at LHH. I believe that made a difference along with the law suits from the district attorneys of SF, to get the CMS to 'halt ' the deadly discharges. At least no one has had to die recently!

My name is Donna DEufemia and I have an elderly disabled brother currently at LHH. To be clear, he is getting good care there relative to any other available medi-cal SNF in the area and SF is his home and we both want him to reside there.

I have been very involved in the activism for the benefit of my brother and the spectrum of all surrounding LHH. It is very difficult to not feel terrified and outraged, especially toward the CMS's decision.

I absolutely align with the list of demands of the Gray Panthers and am grateful for their commitment to advocate on behalf of the patients of LHH and to demand a healthy and reasonable social safety net for those in need of a SNF and good care for others in need.

Most importantly, In November 2022, I understand the CMS will likely continue transfers

regardless of how many deaths, displacements and suffering it will cause. I understand this comes from their mandates about compliance and recertification. At least that is what they say. I believe any thinking and feeling person is on the same page with how insane and cruel this is. **I am imploring the BD once again to find a path to permanently stop these transfers and permanently separate this mandate from the recertification process.**

Displacing another 600 people, plus taking away 120 beds, is clearly the wrong thing to do. There is literally no other place for them to go. What will it take to have the CMS permanently stop this insanity and what other measures can anyone do to support this happening immediately. ?? I implore you to take more action for our most vulnerable. This is still a crisis and we must do better; November 13 is just around the corner.

Thank you!

~Donna D'Eufemia~

***A.A. Liberal Arts, CaCMT, Trainer,
Masters in Intuition Medicine (Candidate)***

*~Deep Tissue, Swedish, Energy Clearing,
PreNatal, Lymphatic, Cupping~*

San Rafael Office: 415.302.8010

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From: [Board of Supervisors, \(BOS\)](#)
To: [BOS-Supervisors](#); [BOS-Legislative Aides](#)
Cc: [Calvillo, Angela \(BOS\)](#); [Somera, Alisa \(BOS\)](#); [Ng, Wilson \(BOS\)](#); [De Asis, Edward \(BOS\)](#); [Entezari, Mehran \(BOS\)](#); [BOS Legislation, \(BOS\)](#)
Subject: FW: File number:220619 : Laguna Honda Forced Discharges and Deaths
Date: Tuesday, September 13, 2022 11:06:46 AM

Dear Supervisors,

Please see the below communication regarding Item 19 on today's agenda.

Item 19 - 220619 Hearing - Committee of the Whole - Laguna Honda Hospital's Strategy for Recertification and the Submission of a Closure and Patient Transfer and Relocation Plan - September 13, 2022, at 3:00 p.m.

Thank you,

Eileen McHugh
Executive Assistant
Office of the Clerk of the Board
Board of Supervisors
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From: A. Colichidas <acolichidas@gmail.com>
Sent: Tuesday, September 13, 2022 8:18 AM
To: Calvillo, Angela (BOS) <angela.calvillo@sfgov.org>; Carroll, John (BOS) <john.carroll@sfgov.org>; Chan, Connie (BOS) <connie.chan@sfgov.org>; Stefani, Catherine (BOS) <catherine.stefani@sfgov.org>; Peskin, Aaron (BOS) <aaron.peskin@sfgov.org>; Mar, Gordon (BOS) <gordon.mar@sfgov.org>; Preston, Dean (BOS) <dean.preston@sfgov.org>; Dorsey, Matt (BOS) <matt.dorsey@sfgov.org>; Melgar, Myrna (BOS) <myrna.melgar@sfgov.org>; Mandelman, Rafael (BOS) <rafael.mandelman@sfgov.org>; Walton, Shamann (BOS) <shamann.walton@sfgov.org>; Ronen, Hillary <hillary.ronen@sfgov.org>
Subject: File number:220619 : Laguna Honda Forced Discharges and Deaths

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

[File number:220619](#) [Hearing - Committee of the Whole - Laguna Honda Hospital's Strategy for Recertification and the Submission of a Closure and Patient Transfer and Relocation Plan - September 13, 2022, at 3:00 p.m.]

Dear San Francisco Board of Supervisors:

Thank you for your serious investigation into this matter.

Laguna Honda is a San Francisco institution. This tortured process of patient transfer and relocation highlights the need for more nursing beds, not fewer. I am appalled at the deaths resulting from this travesty. The Gray Panthers have been involved in the LH struggle for many years and I support the position as follows.

- Laguna Honda be open to all San Franciscans who need nursing home care
- SFPD Stop the "flow" project & return admission decisions to LHH Staff
- No forced closures
- No discharges for Skilled-Nursing-Facility-eligible residents
- No discharge for non-SNF-eligible residents until safe and local arrangements are made.
- No loss of beds in this nearly new facility
- Funding for existing residents must continue until recertification
- Sufficient mental health and substance use programs and beds to give people the care they need, and sufficient services for elders and people with disabilities to stay in their communities where possible, to prevent inappropriate nursing home admissions.

Please represent all of your constituents, and put a stop to the danger and death that will occur, both now and in the future, if beds are lost or the most vulnerable residents are again ejected from Laguna Honda.

Sincerely,
Ann Colichidas
Gerontologist, San Francisco

Patrick Monette-Shaw

975 Sutter Street, Apt. 6
San Francisco, CA 94109
Phone: (415) 292-6969 • e-mail: pmonette-shaw@earthlink.net

September 13, 2022

Committee of the Whole, San Francisco Board of Supervisors

The Honorable Shamann Walton, Board President
The Honorable Connie Chan, Supervisor, District 1
The Honorable Catherine Stefani, Supervisor, District 2
The Honorable Aaron Peskin, Supervisor, District 3
The Honorable Gordon Mar, Supervisor, District 4
The Honorable Dean Preston, Supervisor, District 5
The Honorable Matt Dorsey, Supervisor, District 6
The Honorable Myrna Melgar, Supervisor, District 7
The Honorable Rafael Mandelman, Supervisor, District 8
The Honorable Hillary Ronen, Supervisor, District 9
The Honorable Ahsha Safai, Supervisor, District 11

1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Re: Testimony **Laguna Honda Hospital Closure and Patient Relocation Plan**
(Agenda Item 19, File #220619)

(Continued hearing to call of the chair PSNS Committee; Replace Grant Colfax and Health Commission)

Dear President Walton and Members of the Board of Supervisors,

Bombshell News: LHH Had Been Utilizing Wrong Federal Regulations

On August 16, LHH's interim CEO, Roland Pickens made a PowerPoint [presentation](#) on the status of the "*LHH Closure Plan and CMS Recertification*" to the full Health Commission. In it, Pickens noted that LHH is undertaking three major education initiatives, including focusing on Critical Element Pathways (CEP), a relatively new program from CMS that state surveyors from California's Department of Public Health (CDPH) use during on-site inspections of skilled nursing facilities in the State.

Pickens asserted the CEP program seeks to engage and support middle managers so they can support frontline staff. Pickens claimed Laguna Honda will continuously use CEP's to reinforce staff education and assess current hospital practices against the CMS regulations and F-Tags.

One problem is that CMS' CEP program is **not** "new." It was developed long before CMS rolled it out in November 2017. Why LHH is just learning of the CEP processes five years after they were implemented and LHH is now implementing them in LHH's educational arsenal wasn't explained. And Pickens didn't mention whether the CEP state surveyors may have apparently used since 2017 may have contributed to LHH having flunked its serial state inspections between November 2021 and April 14, 2022, setting off LHH's current crisis. A Health Commissioner asked a pointed question to this effect, but Pickens dodged and deflected from answering the direct question on August 16.

During Pickens' slide presentation, he first indicated (on [videotape](#)) that incorporating the CEP's into LHH's staff education curriculum will get LHH on the right track towards CMs recertification:

"[CEP's are] basically a tool that high-functioning nursing facilities use to ensure that all staff at the skilled nursing facility are aware of what the requirements are, but also are aware of how they in their discipline or Departments are expected [to perform] to ensure that, overall, the skilled nursing facility maintains [CMS regulatory] compliance. So, these 39 critical pathways are being rolled out at Laguna. There are 39 and we'll talk a little bit more about how we're implementing those, roughly every week, we go through 10 of the 39, so that on a monthly basis, we've covered all 39 of those CEP's every month at Laguna. It's an on-going process and not a one-and-done. It's baking into the fabric of Laguna Honda Hospital. This [is a] core element of using Critical Element Pathways, and these are the same tools that the [federal and state surveyors] use when they do the [inspection]

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surveys at Laguna. So, we feel confident by incorporating this as the pillar in staff education that we're on the right track."

Pickens was mistaken. There are not 39 CEP's; there are 41 [CEP's](#).

Given the two examples of CEP's in this article above — the *Accidents* CEP and the *Rehabilitative or Restorative Services* CEP — it is hard to believe that whichever LHH staff are being trained on the CEP's can digest and fully comprehend their education about 10 different CEP's each week. That may be an ambitious Johnny-come-lately, wishful-thinking goal in hoping to pass CMS' rigorous recertification process.

Following Pickens' slide show on August 16, Health Commissioner Tessie Guillermo specifically asked him whether the Critical Element Pathways may have played a role in previous regulatory inspection surveys of LHH. In effect, Guillermo was asking whether LHH's failure to follow the CEP's may have played a direct role in LHH flunking its inspection surveys, and whether that may have contributed to CMS decertifying LHH in April 2022. It's a legitimate question ... that deserves an honest answer.

Rather than answering Guillermo's direct question, Pickens dodged answering, but blurted out a damning admission, however inadvertently, that LHH had been using the wrong regulatory guidelines:

"And an analogy would be that, you know, we've talked before that one of the findings that Laguna was structured more like an acute care hospital, so Laguna really focused on, for example, the State of California Title 22 [regulations]: For acute hospitals [are] driven by the Title 22 regulations and that's okay if you're a [general acute care hospital] — but Laguna is a skilled nursing facility. Like San Francisco General, they [LHH] utilize Title 22 general acute care hospital guidelines and the Joint Commission [on Accreditation of Hospital] guidelines as their pathways towards regulatory compliance. So, while Laguna wasn't a Joint Commission survey [facility], but it [LHH has] a State of California license so it had been using Title 22 and not using the CEP [guidelines] which are the standards for skilled nursing facilities, and Laguna wasn't using them. But now we are using the CEP's [guidelines] and so, one would hope, one would think that perhaps had we been utilizing CEP's in the past, perhaps, the facility could have been more in line with regulatory compliance and we're moving forward to put that in place, because now we've learned and been educated that CEP's are what high performing nursing homes use to maintain their [regulatory] compliance developed by CMS."

There you have it: Pickens seems to have clearly acknowledged LHH *had* been following the wrong regulatory guidelines by using California's Title 22 "Acute Care Hospital Guidelines," not using CMS' "Skilled Nursing Facility Regulatory Guidelines" and CMS' CEP's.

Pickens also clearly stated that "*had we been utilizing CEP's in the past, perhaps, the facility could have been more in line with regulatory compliance ...*" — say, between October 2021 and April 14, 2022 when LHH's problems with state surveyors began and LHH lost its CMS certification — LHH might have come into compliance with CMS' regulatory guidelines, and might have prevented it being ordered to discharge and transfer all of LHH's residents out of county.

The meeting minutes of the Commission's August 16 meeting reported that Pickens also said "*that prior to the current LHH consultants coming on board, CEPs were not on LHH's radar. Instead, much of the LHH regulatory focus was on Title 22 acute hospital and Joint Commission guidelines. [Pickens] noted this was a deficit.*"

For his part, Health Commissioner Edward Chow was quoted in the meeting minutes that "*The LHH-JCC [the Health Commission's LHH-Joint Conference Subcommittee] has been following the state regulatory results, but the existence of the CEPs was not mentioned in the JCC meetings until recently.*"

This appears to be another damning admission that apparently even the Health Commission was unaware that CMS had rolled out and implemented the CEP program in November 2017, and that Pickens and senior members of LHH's management team had not educated or mentioned to the three Health Commissioners assigned to the LHH-JCC "until

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recently” that LHH was going to rapidly focus on rolling out the CEP’s as part of LHH’s education arsenal to regain CMS certification!

That’s where the problem of LHH’s long *culture of silence* history comes in. To the extent LHH was following the wrong regulatory guidance of Title 22 acute-care hospital regulations, LHH’s Nursing Education and Training Department, LHH’s Director of Nursing (DON), LHH’s senior nursing department managers, and even LHH’s front-line nursing staff all should have spoken up and broken the *culture of silence* by saying something like: “*Wait! We should be following CMS’ skilled nursing facility regulations, not Title 22.*”

Apparently, the culture of silence is so ingrained and embedded at LHH that nobody spoke up ... leading to LHH’s current dire situation.

The Board of Supervisors should investigate further and get a clear answer to Commissioner Guillermo’s direct question of whether the lack of implementing the *Critical Element Pathways* when CMS first rolled them out in 2017 may have played a role in previous regulatory inspection surveys of LHH, and whether that failure may have contributed to LHH losing its CMS certification.

After all, if the answer to that question is “*Yes,*” then anyone and everyone who was involved in **not** implementing the *Critical Element Pathways* program much earlier at LHH should also be terminated. It should not be just former LHH CEO Michael Phillips whose head rolled and was terminated. And if it involved Director of Public Health Grant Colfax, then he should be terminated, too.

As I [wrote](#) on the August 22 issue of the *Westside Observer*, former-District 1 Supervisor Sandra Lee Fewer had published a [commentary](#) in the August 5 *Richmond Review/Sunset Beacon* that SFDPH hadn’t taken ownership of the problems at LHH. Fewer had astutely noted that “*“[The problems of substandard care at LHH] clearly could have been prevented and could have been remedied” and that “... [San Francisco’s] Department of Public Health and CMS need to own this ...”*

I agreed with Fewer that SFDPH hadn’t acknowledged ownership that it was *itself* responsible for the violations and potential closure of LHH, and it was long past time the health department and the Health Commission take ownership of its mistakes.

Perhaps Pickens’ admission to the Health Commission on August 16 — that the lack of implementing the *Critical Element Pathways* program at LHH earlier may have contributed to LHH’s decertification, and Pickens’ acknowledgement that LHH had been following the wrong regulatory guidelines by using California’s Title 22 “*Acute Care Hospital Guidelines,*” rather than using CMS’ “*Skilled Nursing Facility Regulatory Guidelines*” had been a major mistake — may have been the first step in LHH and SFDPH taking ownership of its past mistakes. We can only hope so.

Among other of LHH’s problems, its *culture of silence* must be stopped in order to end its substandard quality of patient care inspection violations!

Afterword

LHH’s CEO Roland Pickens is set to update the Health Commission’s LHH-JCC on Tuesday, September 13. Unfortunately, his PowerPoint [presentation](#) shows on pages 8 through 10 that as far as LHH’s CMS recertification preparation goes, three Weekly [CMS] “*Survey Readiness and Compliance Assessments*” show that as of September 2, LHH is not meeting 90% or greater progress towards its goals:

- The **Environment of Care (EOC)** standard as of September 2 showed 88% compliance, with only 10 of LHH’s patient care units prepared for CMS reinspection. In the week between August 13 and August 19, only 5 of LHH’s 13 units were in *EOC* compliance.

Pickens reported that key areas for improvement still include: 1) Call light response time; 2) Trash, linen, and

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Laguna Honda Hospital Closure and Patient Relocation Plan (Board File 220619)

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cleanliness compliance; 3) Medication cart compliance; and 4) Biohazard/sharps containers.

- The **Hand Hygiene (HH)** standard as of September 2 showed 78% compliance, but with only 4 of LHH's patient care units prepared for CMS reinspection, nowhere near close to the 90% goal. For the three weeks between August 6 and August 26, none of LHH's 13 units were in *HH* compliance.

Pickens reported that key areas for improvement still include: 1) Proper glove use; and 2) Ensuring soap and water is utilized when necessary [to wash hands].

- The **Infection Prevention and Control (IPC)** standard as of September 2 showed 87% compliance, but again with only 7 of LHH's patient care units prepared for CMS reinspection. For the three weeks between August 6 and August 26, none of LHH's 13 units were in IPC compliance.

Pickens reported that key areas for improvement still include: 1) PPE (personal protective equipment) properly stocked on units; 2) Donning and doffing of PPE appropriately; 3) Clean linen compliance; and 4) Prompt disposal of open food items.

This presentation about LHH's preparedness for a CMS reinspection survey should alarm the three Health Commissioners assigned to the LHH-JCC, and should alarm both the full Health Commission and the City's Board of Supervisors. After all, LHH's problems in passing CMS and CDPH on-site survey inspections reared its ugly head in October 2021. We're now just weeks shy of that one-year anniversary, and reportedly just weeks away from the CMS recertification survey inspections process to begin.

In addition, various vacancy reports for LHH's staffing in the *Executive Team* report presented by Roland Pickens to the three Health Commissioners for the September 13, 2022 LHH-JCC (LHH Joint Conference Committee) meeting are alarming:

- Of 1.0 budgeted FTE Psychiatric technician at LHH, the single position is vacant, for a 100% vacancy rate. Pickens June 3 Pilot Org chart said there would be two psych tech positions. What happened?
- Of 2.0 budgeted FTE Clinical Psychologists at LHH, both positions are vacant, for a 100% vacancy rate.
- Of 2.0 budgeted FTE Psychiatric Social Workers at LHH, one of the positions is vacant, for a 50% vacancy rate.
- Of 5.0 budgeted FTE Senior Psychiatric Physician Specialists, 2.2 FTE positions are vacant, for a 42.7 vacancy rate.
- Of 2.0 budgeted FTE Medical Social Worker Supervisors at LHH, one position is vacant, for a 50% vacancy rate.
- Of 16.2 budgeted FTE Medical Social Workers at LHH, 3.5 FTE positions are vacant, for a 17.8% vacancy rate.

Given alarming staff vacancies and LHH's high percentage of behaviorally challenged residents, how is LHH providing appropriate care for these residents safely?

Is this what San Franciscans are getting for its \$15 million investment to date for the three consultant contracts designed to help guarantee LHH obtains CMS recertification?

Respectfully submitted,

Patrick Monette-Shaw

Columnist,

Westside Observer Newspaper

cc: Angela Calvillo, Clerk of the Board

Patrick Monette-Shaw

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June 14, 2022

Committee of the Whole, San Francisco Board of Supervisors

The Honorable Shamann Walton, Board President
The Honorable Connie Chan, Supervisor, District 1
The Honorable Catherine Stefani, Supervisor, District 2
The Honorable Aaron Peskin, Supervisor, District 3
The Honorable Gordon Mar, Supervisor, District 4
The Honorable Dean Preston, Supervisor, District 5
The Honorable Matt Dorsey, Supervisor, District 6
The Honorable Myrna Melgar, Supervisor, District 7
The Honorable Rafael Mandelman, Supervisor, District 8
The Honorable Hillary Ronen, Supervisor, District 9
The Honorable Ahsha Safai, Supervisor, District 11

1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Re: Testimony **Laguna Honda Hospital Closure and Patient Relocation Plan**
(Agenda Item 62, File #220619)

Dear President Walton and Members of the Board of Supervisors,

The potential closure of Laguna Honda Hospital would not only be disastrous for the 686 residents at LHH as of May 6, 2022, it would also be disastrous to other San Franciscans who will likely need this City treasure for generations to come who may need in-county skilled nursing and end-of-life care.

1. **Continue Today's Hearing to the PSNS Committee for Follow-Up** First and foremost, at the conclusion of today's Committee of the Whole hearing on the potential closure of LHH, I urge you to introduce, entertain, and pass a motion to continue today's hearing to the call of the Chair of the Board of Supervisors Public Safety and Neighborhood Service (PSNS) Committee to ensure this Board continues to receive monthly updates on the status of the *LHH Closure Plan*. In particular, I also urge you to waive the Board of Supervisors Rule regarding the 30-day hold typically involved before holding Committee level hearings.

The PSNS Committee needs to be actively involved in receiving regular updates on the efforts to obtain recertification of LHH through the September 13 potential closure date so members of the public are kept adequately informed about efforts to preserve this legacy facility any of us may need as we age and our health declines.

2. **Review HMA Consultant Contract Scope of Services** In response to the *LHH Closure Plan*, the Health Commission approved on June 7 **two contracts totalling \$5.6 million** to assist SFDPH in getting LHH recertified by the Centers for Medicare and Medicaid Services (CMS). The Health Commission completed a \$1.8 million contract with *Health Services Advisory Group*. On June 13, SFDPH finally released the second \$3.8 million contract with *Health Management Associates* (HMA), which is for a 14-month period between May 9, 2022 through June 30, 2023. It is thought LHH will be submitting a recertification application for LHH to CMS by mid-September 2022, so it is unclear why the contract is for an additional nine months through June 2023. Spending \$5.6 million to regain CMS certification for LHH seems to be excessive.

The Board of Supervisors should review the HMA contract, because the contract seems overly-broad in terms of the scope of services to be provided. There are two "Tasks" described in the Scope of Services: Task 1 is to perform a "*Comprehensive Assessment*," and Task 2 involves efforts related to "*CMS Recertification*" of LHH. Task 1 involves:

"HMA, in coordination with the Department, will conduct a comprehensive "top to bottom" organizational, operational, and clinical assessment of LHH to identify current performance gaps in the provision of care, operational effectiveness, regulatory standards compliance, and quality outcomes. Focus areas will include, but not be limited to: Executive Leadership, Organizational Structure, Medical Staff, Nursing Operations,

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Laguna Honda Hospital Closure and Patient Relocation Plan (Board File 220619)

Page 2

Hospital Governing Body, Management, Administrative Operations, Care Models, Organizational Change Management, and Financial Analysis of Care Models.”

The scope of “top-to-bottom” assessment in Task 1 is apparently to determine how far LHH may have to go to satisfy federal standards, and suggests the HMA contract may involve a potential massive overhaul of LHH’s mission and operations beyond simply obtaining CMS recertification. The Board of Supervisors should review the scope of services in the HMA contract.

3. **Hold SF Department of Public Health Employees Fully Accountable** The Board of Supervisors should explore whether additional SFDPH staff and the Health Commissioners themselves need to be replaced and held accountable for the situation now threatening LHH’s existence.

Between October 2021 (when inspectors notified LHH that it needed to submit a plan of correction to fix substandard care deficiencies and submit a plan of correction) and April 2022, LHH and the Health Department responded to the increasing federal concerns about the situation at LHH by downplaying the seriousness of the problems, including by issuing press releases saying the state inspectors had found only *minor* deficiencies.

Five days after CMS halted LHH’s federal re-imbursement, during the Health Commission’s April 19, 2022 meeting Director of Public Health Dr. Grant Colfax continued to minimize the severity of the problem. Colfax claimed in his *Director’s Report* to the Commission that state surveyors had identified that week “*new issues not previously communicated to Laguna Honda leadership.*” Colfax pooh-poohed the new findings as being “*unrelated and technical individual infractions.*” That’s nonsense, because all of SFDPH’s senior leadership know full well that when state surveyors return for follow-up surveys, additional findings of new problems can be — and often are — identified.

During the six-month period between October and April, the Health Commission’s LHH Joint Conference Committee (LHH-JCC) — consisting of three health commissioners and LHH senior management — were briefed repeatedly about the substandard care violations and federal deficiencies at LHH. So, it’s clear LHH’s governing body — the Health Commission — was fully aware of the potential seriousness of the situation.

On April 14 — the same day CMS froze payment to LHH from Medicare and Medicaid reimbursement and halted new admissions to LHH — the [San Francisco Chronicle](#) published an article about LHH’s potential closure, in which the *Chronicle* attributed to LHH CEO Michael Phillips as having said “... *that there will be no changes to hospital staffing.*” Oddly, Phillips stepped down (or was removed) as LHH CEO a month-and-a-half later on June 2, ironically making him the first change to LHH’s staffing.

It should not be just Mr. Phillips who is replaced. In response to an excellent May 20, 2022 [SFStandard.com](#) article by Matt Smith titled “*The Last Alms House: Laguna Honda Faces Daunting Overhaul,*” political consultant Jack Davis posted an on-line comment¹ saying “[This is] *Outrageous given the battles and money spent to redo Laguna Honda. Fire the City’s Health Director [Grant Colfax] and entire Health Commission.*”

Mr. Davis is on to something. Colfax and the Health Commission had known about the systemic problems at LHH and had downplayed the severity of the problems. They should also be replaced, as Mr. Phillips was.

Respectfully submitted,

Patrick Monette-Shaw

Columnist,

Westside Observer Newspaper

cc: Angela Calvillo, Clerk of the Board

¹ <https://sfstandard.com/public-health/the-last-almshouse-laguna-honda-faces-daunting-overhaul-to-satisfy-federal-regulators/>

From: [Board of Supervisors. \(BOS\)](#)
To: [BOS-Supervisors](#); [BOS-Legislative Aides](#)
Cc: [Calvillo, Angela \(BOS\)](#); [Somera, Alisa \(BOS\)](#); [Laxamana, Junko \(BOS\)](#); [Ng, Wilson \(BOS\)](#); [BOS Legislation. \(BOS\)](#)
Subject: FW: SF Board of Supervisors Meeting June 14, 2022. ••• agenda 62 ••Board File 220619 ••• Lagune Honda Hospital
Date: Wednesday, June 15, 2022 3:29:01 PM

From: m. cleary Monley <mcomonley@gmail.com>
Sent: Monday, June 13, 2022 11:09 PM
To: Chan, Connie (BOS) <connie.chan@sfgov.org>; Stefani, Catherine (BOS) <catherine.stefani@sfgov.org>; Peskin, Aaron (BOS) <aaron.peskin@sfgov.org>; Mar, Gordon (BOS) <gordon.mar@sfgov.org>; Preston, Dean (BOS) <dean.preston@sfgov.org>; Dorsey, Matt (BOS) <matt.dorsey@sfgov.org>; Melgar, Myrna (BOS) <myrna.melgar@sfgov.org>; Mandelman, Rafael (BOS) <rafael.mandelman@sfgov.org>; Ronen, Hillary <hillary.ronen@sfgov.org>; Walton, Shamann (BOS) <shamann.walton@sfgov.org>; Safai, Ahsha (BOS) <ahsha.safai@sfgov.org>
Subject: SF Board of Supervisors Meeting June 14, 2022. •••• agenda 62 ••Board File 220619
••• Lagune Honda Hospital

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SF Board of Supervisors Meeting June 14, 2022. •••• agenda 62 ••Board File 220619 ••• Lagune Honda Hospital

Save Laguna Honda Hospital

Our son is a resident at Laguna Honda Hospital - since September 2019. He is a quadriplegic who had been living on his own at Serra House - run by Mercy housing - since 1987 as the result of gun violence. It has been a struggle, but he has weathered many crises and challenges. As his health has been deteriorating after 34 years in a wheelchair, and with the problems inherent in the securing attendant help though the IHHS system in this difficult economy in this expensive city, there is no way he could have survived the pandemic and the its disruptions. Getting into Laguna Honda was a life-saver. We are forever grateful for the care he continues to receive at this wonderful institution and for the dedication of the staff. But now with Laguna Honda being threatened with closure because of the loss of funding from Medicare and HHS his safety and security and health are threatened.

The federal government's mandate that a plan be put in place to move nearly 700 residents to non-existent care facilities is unreasonable, even impossible. Other appropriate facilities are just not to be found in the Bay Area, state or country. The distant government auditors have no idea of what a service Laguna Honda provides for the community and what an amazing institution it is. I visit Laguna Honda regularly and see it as a well-organized, well-run, caring institution that provides for the health and emotional needs of a fragile population in a clean modern - even beautiful - facility. Our son is safe and well-cared for at Laguna Honda. He can even thrive there. Cruel threats to forcibly remove these residents because of infractions by a few residents are beyond belief.

Those who decide the fate of Laguna Honda must not ignore the success of this nursing home - one of the largest in the nation - in fighting the Covid -19 crisis with low infection/death rates that have been a

model for the nation.

The supervisors and the other elected city officials are surely aware of the situation faced by this major San Francisco institution and of its vital importance to the residents and their families, not to mention the livelihoods of up to over 1000 dedicated employees. It is now time for action by our elected officials to convince Medicare, Medicaid and HHS Secretary Becerra to proceed with the recertification of Laguna Honda - to keep it open as a safe home for 700 San Franciscans. Thank you.

Michael and Karen Monley
Glen Park

Somera, Alisa (BOS)

From: Teresa Palmer <teresapalmer2014@gmail.com>
Sent: Thursday, June 16, 2022 9:32 AM
Subject: Fwd: Laguna Honda: correcting the record about the current troubles

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

From: **Teresa Palmer** <teresapalmer2014@gmail.com>
Date: Thu, Jun 16, 2022 at 9:21 AM
Subject: Laguna Honda: correcting the record about the current troubles
To: <Connie.Chan@sfgov.org>, Stefani, Catherine (BOS) <Catherine.Stefani@sfgov.org>, Peskin, Aaron (BOS) <Aaron.Peskin@sfgov.org>, Mar, Gordon (BOS) <Gordon.Mar@sfgov.org>, Dean Preston <Dean.Preston@sfgov.org>, <Matt.Dorsey@sfgov.org>, <Myrna.Melgar@sfgov.org>, Mandelman, Rafael (BOS) <Rafael.Mandelman@sfgov.org>, Ronen, Hillary <Hillary.Ronen@sfgov.org>, <Shamann.Walton@sfgov.org>, Safai, Ahsha (BOS) <Ahsha.Safai@sfgov.org>

From:
Teresa Palmer M.D.
Family Medicine/Geriatrics
1845 Hayes St.
San Francisco, California 94117
Phone:415-260-8446
Fax: 415-292-7738
Email: Teresapalmer2014@gmail.com
Date: June 16 2022

I was an attending physician at Laguna Honda from 1989-2004.
The discussion about Laguna Honda at the June 14 BOS hearing was not an honest one by SFDPH and Laguna Honda officials:

Two points that were obfuscated by Health officials at the recent meeting:

1.The current problems threatening Laguna Honda are entirely predictable due to a decision made by the Mayor and SFDPH after the bond issue for the rebuild won in 1999:

In the early 2000s San Francisco Department of Health (SFDPH) gave priority at Laguna Honda to SFGH patients with behavioral and substance use issues - who are hard to discharge from San Francisco General Hospital (SFGH).

This plan was supposed to save money for the General Fund which must pay for out-of-county specialized facilities for behaviorally complex patients. So it had the support of successive Mayors and heads of SFDPH, who serve at the pleasure of the Mayor.

However care of these complicated patients was not adequately funded and specialized staffing and cohorting did not occur----repeated problems with violating nursing home regulations/human rights ensued. Laguna Honda is not "just" being persecuted by CMS---there is a real danger there that must be corrected.

2. Evicting people from Laguna Honda at this time is illegal. Involuntary evictions may jeopardize its licensure further!

Laguna Honda is supposed to make closing plans, but that is different than actual discharge/eviction of patients at this time.

See the link below from California Advocates for Nursing Home Reform:

"Under federal law, the only possible reasons for eviction in this situation would be 1) failure to pay or 2) the facility is "ceasing to operate." Neither of these reasons apply at this time. If a resident pays through Medi-Cal, for example, Medi-Cal can pay Laguna Honda the same way that it always has. And the facility is not "ceasing to operate" — for now it is paid by Medicare and Medi-Cal for current residents."

http://canhr.org/factsheets/misc fs/PDFs/FS_LagunaHonda.pdf

Thank you for listening,
Teresa Palmer MD

Patrick Monette-Shaw

975 Sutter Street, Apt. 6
San Francisco, CA 94109
Phone: (415) 292-6969 • e-mail: pmonette-shaw@earthlink.net

June 28, 2022

San Francisco Board of Supervisors

The Honorable Shamann Walton, Board President
The Honorable Connie Chan, Supervisor, District 1
The Honorable Catherine Stefani, Supervisor, District 2
The Honorable Aaron Peskin, Supervisor, District 3
The Honorable Gordon Mar, Supervisor, District 4
The Honorable Dean Preston, Supervisor, District 5
The Honorable Matt Dorsey, Supervisor, District 6
The Honorable Myrna Melgar, Supervisor, District 7
The Honorable Rafael Mandelman, Supervisor, District 8
The Honorable Hillary Ronen, Supervisor, District 9
The Honorable Ahsha Safai, Supervisor, District 11

1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Re: **LHH Patient Census Already Reduced by 67 — a 9.4 Percent Change Decline — Since October 14, 2021 (LHH Closure and Patient Relocation Plan)**

Dear President Walton and Members of the Board of Supervisors,

As of June 26, LHH's census has already declined by 67 patients (a 9.4 percent change decline) since October 14. This Board needs to rapidly schedule another *Committee of the Whole* hearing on LHH's *Closure Plan* in July, and not wait to hold a follow-up hearing on September 13.

Prior to LHH's release of its "*Notification of Closure and Patient Relocation and Transfer Plan*" to CDPH and CMS dated May 13 and eventually presented to LHH's residents, the California Department of Public Health had first performed an "*Abbreviated Standard Survey*" of LHH on October 14, 2021 and reported LHH's patient census was 710 residents on October 14.

Yesterday, SFDPH released its sixth weekly update to CMS/CDPH, revealing LHH now has a patient census of just 643. That's a loss of 67 patients since October 14, representing a 9.4 percent change reduction in the hospital's census.

The first six weekly reports SFDPH has submitted to CDPH/CMS claims there have been 25 patient discharges since May 16, plus 7 patients deaths, and 2 patients who left AMA or went AWOL, for a total of 34 "*discharges*." But SFDPH's first weekly census report for LHH to CMS/CDPH for the period May 16 to May 22 contains an error of 4 patients unaccounted for between May 6 and May 16. The census reduction attributed to "*discharges*" should be 38, not 34, patients (shown in the first table, below).

However, SFDPH's first "weekly report" to CDPH/CMS for the week ending May 22 wrongly claimed the patient census had "started" at 681 patients. But the census cited in the "*Closure and Patient Relocation and Transfer Plan*" had reported a patient census of 686. SFDPH hasn't explained the variance of those 5 patients, or what happened to them.

Unfortunately, SFDPH has also not explained what happened that reduced the patient census by an additional 24 patients between October 2021 and May 16, plus the additional 5 patients that haven't been accounted for, which brings the total to 29 patients who we have no idea what happened to them between October 14 and May 16.

The Board of Supervisors should require that SFDPH publicly report what happened to the other 29 LHH patients reduced from the hospital's census between October 14 and May 16, because SFDPH doesn't appear to be honestly reporting data to this Board.

Combining the 29 patients we don't know what happened to, plus 38 patients who have already been discharged between May 16 and Sunday, June 26, 2022 — results in a combined census reduction of 67 patients since October 14 (see second table, below).

SFDPH hasn't reported how many of the 67 patients discharged between October 2019 and today have been dumped out-of-county. While SFDPH claims it has "*nothing to hide*," promised transparency, and promised City Supervisors it would begin publicly reporting data on the out-of-county placements, it has not begun reporting the out-of-county placement data yet. So much for "*nothing to hide*."

The LHH census data reported to date through Sunday, June 26 includes:

LHH Closure and Patient Transfer and Relocation Report Weekly Updates

LHH Weekly Reports to CDPH and CMS Began With Week Ending 5/22/2022

(Source: Page 1 of 4-Page Document)

Category	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Total
	5/16/22 – 5/22/22	5/23/22 – 5/29/22	5/30/22 – 6/5/22	6/6/22 – 6/12/22	6/13/22 – 6/19/22	6/20/22 – 6/26/22	
Unplanned Discharges							
Expirations	1	1	1		0	4	7
AMA/AWOL		1			1	0	2
Total Unplanned	1	2	1	0	1	4	9
Planned Discharges							
Community		1		1	1	2	5
Facility				4	6	10	20
Total Planned	0	1	0	5	7	12	25
Total Discharges	1	3	1	5	8	16	34
Remaining Patient Census	681	677	677	675	662	643	(38)
Category							
	Week 1	Week 2	Week 3	Week 4	Week 5	Week 5	Total
	5/16/22 – 5/22/22	5/23/22 – 5/29/22	5/30/22 – 6/5/22	6/6/22 – 6/12/22	6/13/22 – 6/19/22	6/13/22 – 6/19/22	
Patient Assessments	98	100	59	73	56	57	443
Patient Family Meetings	43	57	21	56	48	34	259
Patient Referrals	1	49	86	146	126	146	554
Patient Referrals Breakout (First Began Being Reported on Week 5 Report)							
Accepted					1	0	1
Denied					26	1	27
Pending					100	145	245
Total:					127	146	273

Change in LHH Patient Census Since October 14, 2021

Abbreviated Standard Survey by California Department of Public Health (CDPH) (Source: SF DPH Public Records Requests)

Source Document	Date	Census Reported	Change Since 10/14/21 Census	
			Raw Number	% Change
CDPH's LHH Initial CDPH Survey	10/14/2021	710		
CDPH's LHH Resurvey	3/28/2022	706	(4)	-0.6%
LHH Notice of Closure and Relocation Plan	5/6/2022	686	(24)	-3.4%
SFDPH Report Week 1	5/16 – 5/22/2022	681	(29)	-4.1%
SFDPH Report Week 2	5/23 – 5/29/2022	677	(33)	-4.6%
SFDPH Report Week 3	5/30 – 6/5/2022	677	(33)	-4.6%
SFDPH Report Week 4	6/6 – 6/12/2022	675	(35)	-4.9%
SFDPH Report Week 5	6/13 – 6/19/2022	664	(46)	-6.5%
SFDPH Report Week 6	6/20 – 6/26/2022	643	(67)	-9.4%

Respectfully submitted,

Patrick Monette-Shaw

Columnist,

Westside Observer Newspaper

cc: Angela Calvillo, Clerk of the Board

From: [Minerva Walston](#)
Subject: JOIN US: Save Laguna Honda
Date: Friday, June 10, 2022 8:29:37 PM

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Workers at Laguna Honda in San Francisco are fighting to keep their hospital's doors open

On June 14, the San Francisco Board of Supervisors will be holding a hearing on the status of the recertification plan for Laguna Honda Hospital. It is crucial that our elected leaders hear from workers, patients, community members, and anyone who wants to keep the doors of our hospital open.

IFPTE Local 21 members — alongside our partner unions, the City Administration, and Laguna Honda Hospital Management — are working hard to recertify Laguna Honda Hospital and prevent closure. **Our chances of succeeding depend on public support. Please join us Tuesday, June 14, 3pm to save Laguna Honda Hospital.**

Board of Supervisors Hearing – Laguna Honda Hospital

Tuesday, June 14 at 3 pm

City Hall, room 250

RSVP: Reply to this email or text (415) 412-4851

Please wear Local 21 swag

Laguna Honda Hospital is San Francisco's primary long-term care facility and home to many of San Francisco's most vulnerable. If Laguna Honda closes, it will trigger a crisis in San Francisco's Public Health system. There are no other facilities available to house the more than 700 residents who live at the hospital.

#SaveLagunaHonda

Patrick Monette-Shaw

975 Sutter Street, Apt. 6
San Francisco, CA 94109
Phone: (415) 292-6969 • e-mail: pmonette-shaw@earthlink.net

June 14, 2022

Committee of the Whole, San Francisco Board of Supervisors

The Honorable Shamann Walton, Board President
The Honorable Connie Chan, Supervisor, District 1
The Honorable Catherine Stefani, Supervisor, District 2
The Honorable Aaron Peskin, Supervisor, District 3
The Honorable Gordon Mar, Supervisor, District 4
The Honorable Dean Preston, Supervisor, District 5
The Honorable Matt Dorsey, Supervisor, District 6
The Honorable Myrna Melgar, Supervisor, District 7
The Honorable Rafael Mandelman, Supervisor, District 8
The Honorable Hillary Ronen, Supervisor, District 9
The Honorable Ahsha Safai, Supervisor, District 11

1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Re: Testimony **Laguna Honda Hospital Closure and Patient Relocation Plan**
(Agenda Item 62, File #220619)

Dear President Walton and Members of the Board of Supervisors,

The potential closure of Laguna Honda Hospital would not only be disastrous for the 686 residents at LHH as of May 6, 2022, it would also be disastrous to other San Franciscans who will likely need this City treasure for generations to come who may need in-county skilled nursing and end-of-life care.

1. **Continue Today's Hearing to the PSNS Committee for Follow-Up** First and foremost, at the conclusion of today's Committee of the Whole hearing on the potential closure of LHH, I urge you to introduce, entertain, and pass a motion to continue today's hearing to the call of the Chair of the Board of Supervisors Public Safety and Neighborhood Service (PSNS) Committee to ensure this Board continues to receive monthly updates on the status of the *LHH Closure Plan*. In particular, I also urge you to waive the Board of Supervisors Rule regarding the 30-day hold typically involved before holding Committee level hearings.

The PSNS Committee needs to be actively involved in receiving regular updates on the efforts to obtain recertification of LHH through the September 13 potential closure date so members of the public are kept adequately informed about efforts to preserve this legacy facility any of us may need as we age and our health declines.

2. **Review HMA Consultant Contract Scope of Services** In response to the *LHH Closure Plan*, the Health Commission approved on June 7 **two contracts totalling \$5.6 million** to assist SFDPH in getting LHH recertified by the Centers for Medicare and Medicaid Services (CMS). The Health Commission completed a \$1.8 million contract with *Health Services Advisory Group*. On June 13, SFDPH finally released the second \$3.8 million contract with *Health Management Associates* (HMA), which is for a 14-month period between May 9, 2022 through June 30, 2023. It is thought LHH will be submitting a recertification application for LHH to CMS by mid-September 2022, so it is unclear why the contract is for an additional nine months through June 2023. Spending \$5.6 million to regain CMS certification for LHH seems to be excessive.

The Board of Supervisors should review the HMA contract, because the contract seems overly-broad in terms of the scope of services to be provided. There are two "Tasks" described in the Scope of Services: Task 1 is to perform a "*Comprehensive Assessment*," and Task 2 involves efforts related to "*CMS Recertification*" of LHH. Task 1 involves:

"HMA, in coordination with the Department, will conduct a comprehensive "top to bottom" organizational, operational, and clinical assessment of LHH to identify current performance gaps in the provision of care, operational effectiveness, regulatory standards compliance, and quality outcomes. Focus areas will include, but not be limited to: Executive Leadership, Organizational Structure, Medical Staff, Nursing Operations,

June 14, 2022

Laguna Honda Hospital Closure and Patient Relocation Plan (Board File 220619)

Page 2

Hospital Governing Body, Management, Administrative Operations, Care Models, Organizational Change Management, and Financial Analysis of Care Models.”

The scope of “top-to-bottom” assessment in Task 1 is apparently to determine how far LHH may have to go to satisfy federal standards, and suggests the HMA contract may involve a potential massive overhaul of LHH’s mission and operations beyond simply obtaining CMS recertification. The Board of Supervisors should review the scope of services in the HMA contract.

3. **Hold SF Department of Public Health Employees Fully Accountable** The Board of Supervisors should explore whether additional SFDPH staff and the Health Commissioners themselves need to be replaced and held accountable for the situation now threatening LHH’s existence.

Between October 2021 (when inspectors notified LHH that it needed to submit a plan of correction to fix substandard care deficiencies and submit a plan of correction) and April 2022, LHH and the Health Department responded to the increasing federal concerns about the situation at LHH by downplaying the seriousness of the problems, including by issuing press releases saying the state inspectors had found only *minor* deficiencies.

Five days after CMS halted LHH’s federal re-imbursement, during the Health Commission’s April 19, 2022 meeting Director of Public Health Dr. Grant Colfax continued to minimize the severity of the problem. Colfax claimed in his *Director’s Report* to the Commission that state surveyors had identified that week “*new issues not previously communicated to Laguna Honda leadership.*” Colfax pooh-poohed the new findings as being “*unrelated and technical individual infractions.*” That’s nonsense, because all of SFDPH’s senior leadership know full well that when state surveyors return for follow-up surveys, additional findings of new problems can be — and often are — identified.

During the six-month period between October and April, the Health Commission’s LHH Joint Conference Committee (LHH-JCC) — consisting of three health commissioners and LHH senior management — were briefed repeatedly about the substandard care violations and federal deficiencies at LHH. So, it’s clear LHH’s governing body — the Health Commission — was fully aware of the potential seriousness of the situation.

On April 14 — the same day CMS froze payment to LHH from Medicare and Medicaid reimbursement and halted new admissions to LHH — the [San Francisco Chronicle](#) published an article about LHH’s potential closure, in which the *Chronicle* attributed to LHH CEO Michael Phillips as having said “... *that there will be no changes to hospital staffing.*” Oddly, Phillips stepped down (or was removed) as LHH CEO a month-and-a-half later on June 2, ironically making him the first change to LHH’s staffing.

It should not be just Mr. Phillips who is replaced. In response to an excellent May 20, 2022 [SFStandard.com](#) article by Matt Smith titled “*The Last Alms House: Laguna Honda Faces Daunting Overhaul,*” political consultant Jack Davis posted an on-line comment¹ saying “[This is] *Outrageous given the battles and money spent to redo Laguna Honda. Fire the City’s Health Director [Grant Colfax] and entire Health Commission.*”

Mr. Davis is on to something. Colfax and the Health Commission had known about the systemic problems at LHH and had downplayed the severity of the problems. They should also be replaced, as Mr. Phillips was.

Respectfully submitted,

Patrick Monette-Shaw

Columnist,

Westside Observer Newspaper

cc: Angela Calvillo, Clerk of the Board

¹ <https://sfstandard.com/public-health/the-last-almshouse-laguna-honda-faces-daunting-overhaul-to-satisfy-federal-regulators/>

Patrick Monette-Shaw

975 Sutter Street, Apt. 6
San Francisco, CA 94109
Phone: (415) 292-6969 • e-mail: pmonette-shaw@earthlink.net

May 24, 2022

San Francisco Board of Supervisors

The Honorable Shamann Walton, Board President
The Honorable Connie Chan, Supervisor, District 1
The Honorable Catherine Stefani, Supervisor, District 2
The Honorable Aaron Peskin, Supervisor, District 3
The Honorable Gordon Mar, Supervisor, District 4
The Honorable Dean Preston, Supervisor, District 5
The Honorable Matt Dorsey, Supervisor, District 6
The Honorable Myrna Melgar, Supervisor, District 7
The Honorable Rafael Mandelman, Supervisor, District 8
The Honorable Hillary Ronen, Supervisor, District 9
The Honorable Ahsha Safai, Supervisor, District 11
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

Re: **Laguna Honda Hospital Closure and Patient Relocation Plan**
(Agenda Item 48, File #220618)

Dear President Walton and Members of the Board of Supervisors,

Given the potential closure of Laguna Honda Hospital (LHH), public disclosure of patient outcomes is critically important, and must be as transparent as possible. It's incumbent on the Board of Supervisors to ensure members of the public receive timely updates about the progress of the potential closure of LHH.

San Franciscans deserved to have the San Francisco Department of Public Health post daily updates on its web site about the number of new COVID cases and deaths daily during the COVID-19 pandemic. That public health data disclosure was greatly appreciated.

Similarly, San Franciscans deserve to have Laguna Honda Hospital (LHH) and/or San Francisco's Department of Public Health (SFDPH) post on-line daily on their respective web sites the number of patients discharged each day from LHH and the remaining patient census at the facility during the process playing out on the potential closure of Laguna Honda Hospital by September 13, in part because LHH is a citywide hospital, not just a facility that happens to be located in Supervisorial District 7.

The Board of Supervisors June 14 Committee of the Whole hearing on the potential closure of LHH includes a 37-page background file "*Laguna Honda Hospital's Strategy for Recertification and the Submission of a Closure and Patient Transfer and Relocation Plan*" LHH apparently completed and submitted to the California DPH on May 13.

Page 13 of the *Closure Plan* says LHH plans to discharge all 686 patients by September 13, 2022, and LHH will provide **daily updates** to California DPH (CDPH) of the number of discharges and the corresponding remaining patient census. And Page 16 of the *Closure Plan* says:

"Laguna Honda will keep the CMS [Centers for Medicare & Medicaid Services] and CDPH informed of the progress of the closure on a daily basis. As a part of keeping both regulatory bodies informed, Laguna Honda will **submit reports every week**, beginning immediately after the approval of this Closure Plan by CMS, detailing the status of each patient's discharge or transfer."

SF DPH and LHH need to publicly report this "de-identified" data weekly to the Board of Supervisors so we can track just how many patients are being discharged, how quickly, and to where (e.g., out-of-county).

Since SF DPH is already required to prepare and submit both daily and weekly reporting to CDPH and CMS about the number of LHH patient discharges and the remaining patient census, it would not require any additional work, or a

May 24, 2022

Laguna Honda Hospital Closure and Patient Relocation Plan (Board File 220618)

Page 2

burden, on SFDPH staff to have to post on-line on the LHH and SFDPH websites the same data, and provide it to the Board of Supervisors via a report for inclusion in the “*Petitions and Communications*” section of the weekly full Board of Supes meeting agendas in order to keep both the Board of Supes and members of the public informed in real-time about the looming discharges occurring from Laguna Honda.

Additionally, Page 14 of the *Closure Plan* asserts LHH will complete patient discharge summaries, and LHH’s Information Systems Division will create electronic files of each patient’s medical records to provide to the receiving facility a patient is discharged to, along with the patient’s Minimum Data Set (MDS) records prior to discharge and transfer.

[**Note:** The Minimum Data Set (MDS) is part of the federally mandated process for clinical assessment of all residents in Medicare- and Medi-Cal-/Medicaid-certified nursing homes. The MDS provides a comprehensive assessment of each resident’s functional capabilities and helps nursing home staff identify health problems.]

Page 16 states LHH’s “*Records Storage Site*” is it’s electronic health record (EHR) system, named Epic. But SFDPH has recently asserted in response to several public records requests that Epic is not capable of tracking the cities and types of facilities SFGH and LHH patients are discharged to out-of-county.

Since DPH has asserted the Epic database isn’t capable of capturing out-of-county discharge data easily, SFDPH and LHH should be required to maintain an Excel spreadsheet to track the types of facilities and names of the cities the LHH patients are discharged to, so members of the public are fully informed about where these patients are being dispersed to.

Respectfully submitted,

Patrick Monette-Shaw

Columnist,

Westside Observer Newspaper

cc: Angela Calvillo, Clerk of the Board

Introduction Form

By a Member of the Board of Supervisors or the Mayor

Time stamp
or meeting date _____

I hereby submit the following item for introduction (select only one):

- 1. For reference to Committee. (An Ordinance, Resolution, Motion, or Charter Amendment)
- 2. Request for next printed agenda Without Reference to Committee.
- 3. Request for hearing on a subject matter at Committee.
- 4. Request for letter beginning "Supervisor inquires"
- 5. City Attorney request.
- 6. Call File No. from Committee.
- 7. Budget Analyst request (attach written motion).
- 8. Substitute Legislation File No.
- 9. Reactivate File No.
- 10. Question(s) submitted for Mayoral Appearance before the BOS on

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- Small Business Commission Youth Commission Ethics Commission
- Planning Commission Building Inspection Commission

Note: For the Imperative Agenda (a resolution not on the printed agenda), use a Imperative Form.

Sponsor(s):

Subject:

The text is listed below or attached:

Signature of Sponsoring Supervisor: _____

For Clerk's Use Only: