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March 6, 2017

Budget and Finance Sub-Committee, Board of Supervisors

The Honorable Malia Cohen, Chair  
 The Honorable Norman Yee, Member  
 The Honorable Katy Tang, Member  
 1 Dr. Carlton B. Goodlett Place  
 San Francisco, CA 94102

Re: **Testimony Regarding BLA's Senior Services Performance Audit**

Dear Chair Cohen and Members of the Budget and Finance Sub-Committee,

If Rapid City, South Dakota can measure the “gap” in the need (and preference) expressed by community members for assisted living and skilled nursing facility level of care, why can't San Francisco measure that gap here, too?

The Budget and Legislative Analyst's performance audit of Senior Services in San Francisco is disturbing, on a number of levels. Most notably, page 17 of the BLA's performance audit includes Table 1.2, *Gap Ratings for Senior Service Areas (Rapid City, SD)*, that includes as one of the 17 categories of services seniors are interested in, a category specifically regarding expressed needs for assisted living and skilled nursing care in-county in the City.

If it plays in Peoria, or Rapid City, why can't it play here in San Francisco? Between DAAS and DPH why can't they measure the Gap between elderly and disabled San Franciscan's preferences for assisted living and skilled nursing facilities in the City and the unmet need for them?

It's time to stop the lie that elderly and disabled San Franciscans are being “integrated” into community living in San Francisco with appropriate “services and supports.” After all, a minimum of 260 San Franciscans have already been dumped out-of-county because the City has an inadequate number of skilled nursing, assisted living, post- and sub-acute care, and acute rehabilitation and SNF rehabilitation facilities to care for them in-county. And that's not counting San Francisco residents dumped out-of-county by the City's various private, for-profit hospitals.

If a minimum of 260 San Franciscans have been dumped out-of-county, that means they aren't being “integrated” in San Francisco, and it means they are being stripped of their citizenship in the City.

**Table 1: Out-of-County Patient Dumping By City-Owned Hospitals — Four-and-a-Half Years**

Fiscal Year	Laguna Honda Hospital	SFGH <sup>①</sup>	Private-Sector Hospitals	Total
FY 06–07 — FY 11–12 <sup>②</sup>	?	?	?	?
FY 12–13	26	7	?	33
FY 13–14	28	1	?	29
FY 14–15	25	68	?	93
FY 15–16	20	56	?	76
FY 16–17 (YTD) (7/1/16 – 12/31/16)	9	20	?	29
<b>Total</b>	<b>108</b>	<b>152</b>	<b>?</b>	<b>260</b>

① San Francisco residents discharged from SFGH but not admitted to Laguna Honda Hospital.

② Although DPH's *SF GetCare* database has discharge destination data, the City refuses to provide it.

**Source:** San Francisco Department of Public Health responses to records requests.

Page iii in the BLA's Executive Summary seems to be factually wrong when it claims “The City has conducted extensive strategic planning for senior services” since adopting a model designed to divert patients from “institutions into the community.” One measure this claim appears to be a lie is the sheer number of patients dumped out-of-county, because they are clearly ***not*** being “integrated” into community living ***in San Francisco*** where they can “age-in-place” at home!

**“ If Rapid City, SD can measure the ‘gap’ in the needs expressed by community members for assisted living and skilled nursing facility care, why can't San Francisco measure that gap here, too? ”**

**“ It's time to stop the lie that elderly San Franciscans are being ‘integrated’ into community living. If 260 San Franciscans have been dumped out-of-county, that means they aren't being ‘integrated,’ they're being stripped of citizenship. ”**

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Another measure this claim is false is that while the Controller's analysis in 2005 noted DAAS needed to improve its Needs Assessment document, here we are a dozen years later and DAAS' (and possibly DPH's) Needs Assessment instruments have still not incorporated a full Gap Analysis to measure unmet needs, *including skilled nursing care unmet needs*.

A Gap analysis is intended to estimate the unmet need for a particular service, involving the gap between number of people receiving a service and the total population who might benefit from a particular service. But the City isn't even assessing the preferences for, and needs of, San Franciscans who prefer in-county skilled nursing care, or that gap.

Supervisor Cohen is not the only member of the Board of Supervisors who has been noticeably silent when it comes to the sheer numbers of elderly and disabled San Franciscans who have been dumped into out-of-county skilled nursing and assisted living facilities because San Francisco doesn't want to take care of them.

It is shameful that Supervisor Peskin's Motion M15-135 passed in September 2015 directing the BLA to conduct a performance audit of services to seniors, but it took until July 2016 to be conducted and published, and the Budget and Finance Sub-Committee is just now hearing the BLA's report eight months after the BLA's report was published. It has taken fully 19 months between Peskin's motion being passed and this Sub-Committee's hearing — as if there were no sense of urgency even while almost two years have passed!

One of the reasons I opposed the Prop. I "Dignity Fund" is because it expressly prohibits expending Dignity Funds to care for the elderly in skilled nursing facilities, or any other medical facilities such as post-acute care facilities, and the Dignity Fund has no intention of measuring unmet needs for either post-acute care or SNF facilities.

Another reason I opposed the Dignity Fund ballot measure is that categories of the Fund's spending by planned use was not identified *prior* to placing this measure on the ballot by conducting a "community needs assessment" beforehand, which wasn't performed. How could this Fund have been justified in the absence of conducting a needs assessment?

By FY 2026–2027, the Dignity Fund will have been awarded a cumulative \$575 million, but nobody knows what it will be used for because DAAS intends to only begin conducting a Community Needs Assessment starting in FY 2017–2018. Isn't this the cart before the horse?

Tellingly, the ballot measure appears to have been written in the absence of having performed a "community needs assessment" to identify whether \$38 million in the first year, \$44 million in the second year, or \$71 million in FY 2026–2027 are necessary. Instead, after receiving the first \$38 million in the current fiscal year and \$44 million next fiscal year, and only after it has already received fully \$82 million for as-yet unidentified "needs" will DAAS then conduct a needs assessment.

***SF GetCare Database — and the Budget and Finance Sub-Committee***

The City — between DAAS and DPH — has paid at least \$5.6 million (just through) through July 2014 to develop 10 to 12 different components of the *SF GetCare* database. Dr. Rick Zawadski informed me on June 23, 2014 that "RTZ Associates stands behind the functionality and integrity of the [SF GetCare] software we have developed for the City of San Francisco. Any data fields related to LHH Diversions requested by the City of San Francisco are fully functional and work as designed."

*SF GetCare* has data fields tracking how many people were *diverted from admission* to LHH, as well as the discharge destination (out-of-county) of patients discharged from LHH and SFGH.

This Sub-Committee should require that DAAS and DPH provide the number of patients discharged out-of-county contained in *SF GetCare* in the six fiscal years between FY 2006–2007 and FY 2011–2012 not shown in Table 1 above. This Sub-Committee should also require that DAAS and DPH include in each of their needs assessments other services seniors are interested in, including a category specifically regarding expressed needs for assisted living and skilled nursing facilities in-county in San Francisco like Rapid City, SD does *so we eventually obtain Gap data about skilled nursing needs in SF*.

Respectfully submitted,

**Patrick Monette-Shaw**

*Columnist/Reporter, Westside Observer Newspaper*

cc: The Honorable Jane Kim, Supervisor, District 6  
The Honorable Jeff Sheehy, Supervisor, District 8  
The Honorable Hillary Ronen, Supervisor, District 9  
The Honorable Ahsha Safai, Supervisor, District 11

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**“ By FY 2026–2027 alone, the Dignity Fund will have been awarded a cumulative \$575 million, but nobody knows what it will be used for because a needs assessment wasn't performed — and DAAS will only conduct such an assessment at some point in FY 2017–2018, but it's unclear whether that will finally include a Gap Analysis. ”**

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**“ The Budget and Finance Sub-Committee should require that DAAS and DPH provide the number of patients discharged out-of-county between FY 2006–2007 and FY 2011–2012 and include in their needs assessments a category for assisted living and skilled nursing facilities like Rapid City, SD does so we eventually obtain Gap data. ”**

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