



San Francisco Health Network  
Laguna Honda Hospital  
and Rehabilitation Center

# Laguna Honda Hospital Executive Team Report

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August 9, 2022



# CLOSURE PLAN



## Pause in Transfers and Discharges

- On July 28, 2022, the federal Centers for Medicare & Medicaid Services (CMS) and the California Department of Public Health (CDPH) agreed to the City's request to pause all transfers and discharges as part of the required Closure and Patient Transfer and Relocation Plan.
- Accordingly, Laguna Honda immediately paused the discharge and transfer of all residents. This impacts approximately 600 residents.
- At this time, we are not certain how long the pause of transfers and discharges will be in place but will continue to keep our community updated with the latest information.
- Despite transfers and discharges being paused, the Closure Plan date of September 13, 2022, remains in effect.
- We know the uncertainty is challenging but we hope this pause provides our community with relief.



# CLOSURE PLAN



## On-Site CMS Transition Facilitator

- Effective, July 26, 2022, a CMS Transition Facilitator is onsite to engage with residents, families, stakeholders and advocates regarding the Closure and Patient Transfer and Relocation Plan.
- The CMS Transition Facilitator, Charles Walters, has a background in social work with nearly 10 years of experience working with skilled nursing facilities.
- Mr. Walters will work with Laguna Honda leadership, CMS, CDPH and the Department of Healthcare Services (DHCS) to resolve issues the four agencies may encounter.
- Staff, residents and families were informed of Mr. Walters' contact information so they can reach out directly to him.



# CLOSURE PLAN



## Closure Plan Data - May 16, 2022 – July 28, 2022

- Total of 57 transfers and discharges
- *Data will not be updated for the duration of the Closure Plan pause.*
- **41 transfers**
  - San Francisco: 2
  - San Mateo County: 35
  - Alameda County: 4
  - Outside of the Bay Area: 0
- **16 discharges**
  - Home/Housing: 3
  - Medical Respite: 3
  - Board and Care / Residential Care: 7
  - Shelter: 3



# CLOSURE PLAN NEXT STEPS



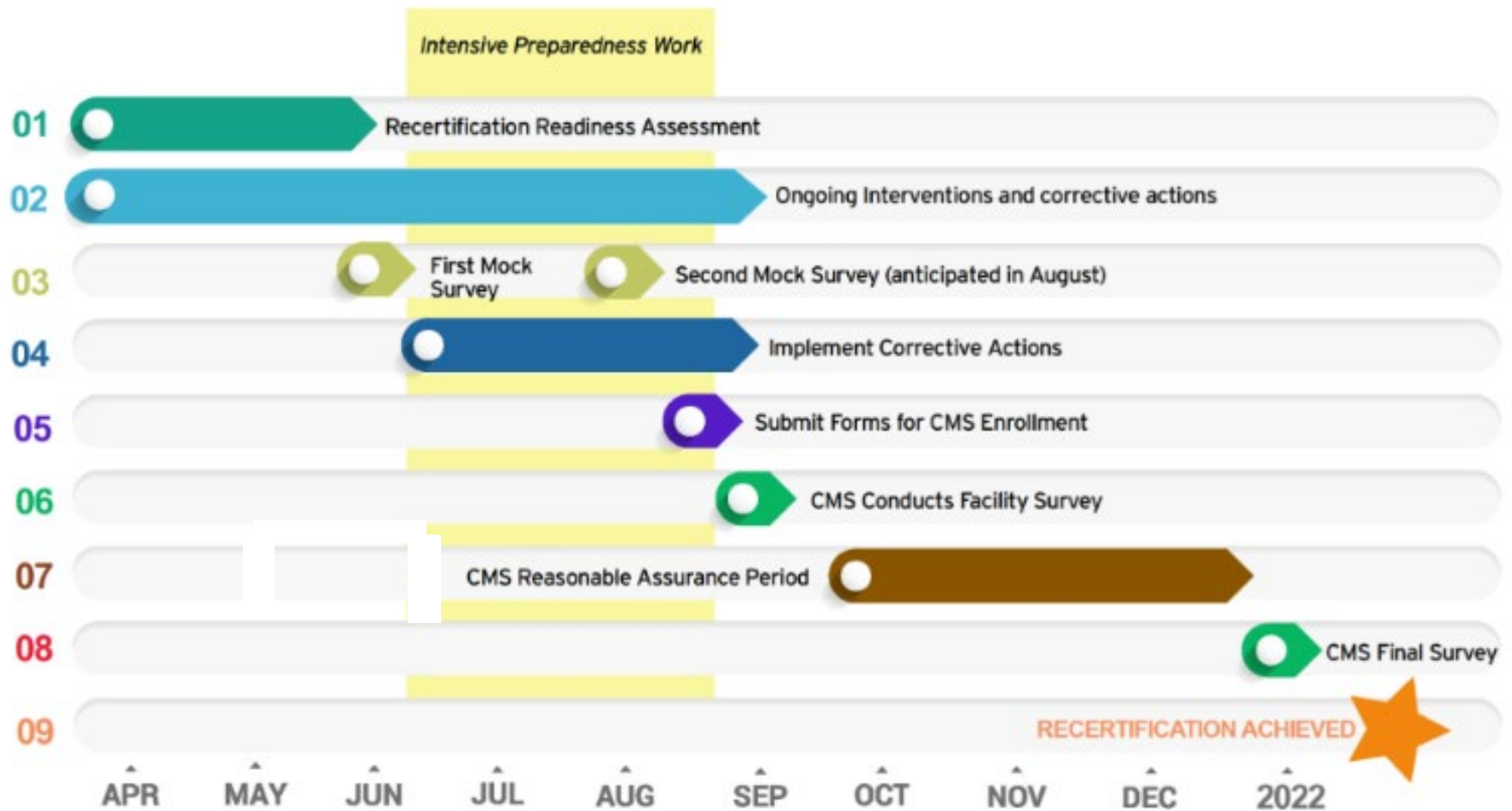
## Closure Plan Next Steps

- Laguna Honda remains focused on serving residents and their families during this difficult time.
- We are committed to continuing to work with CMS, CDPH and DHCS to improve the process for our residents.
- CMS, CDPH, and DHCS have not indicated how long the Closure Plan will be on pause.
- Laguna Honda continues to await answers from CMS, CDPH, and DHCS to questions, many of which were posed as early as May 2022. These are answers that will alleviate patient and family concerns.



# CMS RECERTIFICATION

## Tentative Recertification Timeline



# 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



## Pilot Reorganization – Nursing Leadership

- On July 19, Laguna Honda announced the new nursing leadership structure.
- **Directors of Nursing** serve distinct areas of care and are responsible for the organization, supervision, and evaluation of nursing services. They have the authority to maintain quality standards of care, and to advise the medical staff, department heads, and Administrators.
- **Nursing Directors** support the work of the Directors of Nursing and manage specific nursing care services and units in their day-to-day operations. The Nursing Directors supervise and evaluate nursing activities.
  - Nursing Director for Nursing Operations, Maria Antoc
  - Nursing Director for Department of Care Coordination, Irin Blanco
  - Director of Nursing North Tower, Rowena Patel
  - Nursing Director North Tower, Marvin McGregor (N1, N3, N4, and NM)
  - Interim Nursing Director North Tower, Anna Calderon (N2, PMS/PMA, N5, and N6)
  - Director of Nursing South Tower, Susan Duong
  - Nursing Director South Tower, Edward Guina (S4, S5, S6)
  - Nursing Director South Tower and Director of Education and Training and CNS Staff, Crystal Figlietti (S2 and S3)





# CMS RECERTIFICATION



## Mock Survey #1 Update

- The mock surveys replicate the real CMS surveys: They are unannounced with teams throughout the hospital at all shifts for several days.
- We requested an extremely thorough survey, including a complete assessment of all Federal Skilled Nursing Facility regulatory categories and acute care standards.
- The second mock survey will take place only after the corrective actions from the first mock survey have been sustained.
- After the plan of correction (POC) was completed for phase 1 of the mock survey, Terry Dentoni, Chief Nursing Officer worked with staff to communicate all areas that needed attention.
- Directors and Managers met with staff to review the findings with immediate resolutions while the POC document was being finalized. Staff were appreciative to receive "just in time" information.
- In August, close monitoring will occur to gauge progress on the corrections made.



# CMS RECERTIFICATION

## Mock Survey #1 Update – Phase 2

- The second phase of the first mock survey focused on Life Safety, Pharmacy, and Infection Control.
- Mock surveyors cited federal regulations violations (tags) as part of the statement of deficiencies.
- There were five areas with findings of high severity in the areas of Infection Control, Environment Free of Hazards, Food Safety, Medical Equipment Maintenance, and Pharmacy Services. Many of the other findings reflect deficiencies in compliance with building life safety codes.
- A multi-disciplinary team including Facilities, Engineering, Environmental Services, Pharmacy, Food & Nutrition Services, Materials Management, and Infection Prevention and Control completed the Plan of Correction (POC) summit and developed plans to address each finding.



# CMS RECERTIFICATION



## Education and Staff Engagement

- Engaging staff to learn and apply regulatory knowledge is vital for recertification. Laguna Honda is undertaking three major education initiatives:
- **1) Critical Elementary Pathways**

Program to engage and support middle managers so they can support frontline staff. Laguna Honda will continuously use CEPs to reinforce staff education and assess current practices against the regulations.
- **2) The Recertification Comprehensive Education Plan**

Comprehensive and sustainable workforce training program that will remediate knowledge, skills, and competency gaps identified in mock survey.
- **3) Huddle Talking Points**

Each week, supervisors review huddle talking points with their teams. On Tuesday, teams review the week's topic and on Friday, teams use the "teach-back" method to support learning. Topics are identified by expert consultants.



# CMS RECERTIFICATION



## Critical Element Pathways



### SYSTEMWIDE ASSESSMENT

Medicare created **41 CEPs** to assess all skilled nursing facility operations.



### REGULATORY ROADMAPS

Medicare **surveyors** use CEPs to guide compliance.



### CURRENT BEST PRACTICES

CEPs are linked to current **Medicare regulations** and SNF best practices.



### AN OPEN-BOOK TEST

High-performing SNFs apply CEPs to ensure **ongoing compliance**.



# CMS RECERTIFICATION



## Critical Element Pathways Implementation

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### RECORD REVIEWS

CEPs include probing questions to investigate resident records to **ensure documentation** of quality care best practices.

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### OBSERVATIONS

CEPs include in-depth prompts that guide observations to help staff **“think like a surveyor”** while rounding on units.

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### INTERVIEWS

CEPs include probing questions to ask staff and residents to **identify gaps** in care, regulatory non-compliance, and other resident-centered issues.

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### CITATION VULNERABILITY

Each CEP provides a pathway to **determine regulatory non-compliance** using algorithms based on record reviews, observations, and interviews.



# CMS RECERTIFICATION



## Critical Element Pathways Success Stories



### IMMEDIATE ACTION

In a CEP chart review, a LHH nurse identified a **resident experiencing dangerous weight loss**. This issue was immediately escalated to nursing leadership.



### POLICY CHANGE

Physical restraints diminish dignity. Through CEP reviews, LHH staff updated restraint policies to **ensure residents receive care in a homelike environment**.



### CULTURE OF SAFETY

LHH reinforces **individual care while maintaining safety**. Through CEPs, staff assess and support residents who want to self-administer medication.



# CMS RECERTIFICATION



## Recertification Comprehensive Education Plan

- All Laguna Honda staff are participating in the education trainings and accompanying skills checks.
- The trainings are a comprehensive and sustainable workforce training program with content developed based on the mock survey and other facility assessments.
- All staff complete weeks 1-3; nursing staff complete an additional fourth week.

### Week 1 | Aug. 1-7

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

### Week 2 | Aug. 8-14

- Residents' Rights
- Quality of Life
- Behavioral Health

### Week 3 | Aug. 15-21

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

### Week 4 | Aug 22-28

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



# CMS RECERTIFICATION



## Education Plan - Training Modules



### Presentation

Each training module addresses mock survey findings. They include learning objectives, which are the basis for the competency checks.



### Post-Test

A 5-question post test will be asked in a group setting to help staff become more comfortable answering questions verbally.



### Skills Demonstration

Staff must successfully demonstrate skills, which will be signed off on by a competency training monitor.



### Verbal Knowledge Check

Individual staff will be asked questions about specific citations to gain confidence in answering questions during survey.



# CMS RECERTIFICATION

## Education Plan – Week #1



# CMS RECERTIFICATION

## COVID-19 Protocol Update - Yellow Zone

- On July 23, 2022, the Infection Prevention and Control Team initiated an updated COVID response protocol.
- Each resident room is now a Yellow Zone (high-risk COVID exposure or symptoms) or Green Zone.
- The transition from neighborhood to room isolation best supports resident safety and care experience, allows for more movement throughout the hospital and more participation in activities, and follows how we treat other infectious diseases like influenza (flu).
- Yellow Zones support recertification by ensuring a targeted COVID response in alignment with regulations.

**YELLOW ZONE REQUIREMENTS**

Everyone must do the following **BEFORE** entering a **YELLOW ZONE** room.  
*This guidance applies regardless if contact with the resident or the resident's environment is anticipated.*

**Hand Hygiene**

**Respirator (N95)**

**Eye Protection**

**Gloves**

**Gown**

**Reminders for the YELLOW Zone:**

- Resident room doors remain closed.
- Residents wear a surgical mask during transport

Questions? Contact IPC pager 415-327-4850  
*See back side for YELLOW Zone guidance*



# CMS RECERTIFICATION



## Environment of Care (EOC) Rounding

- EOC rounding ensures that the physical environment is free from hazards and in regulatory compliance. Rounding identifies gaps so that we can address them in support of resident safety and recertification.
- The Quality Management team along with our expert consultants implemented successful pilot on South 6 and North 5.
- Patient care assistants (PCAs) observe their neighborhoods using a survey tool. The designated PCAs serve as the EOC champions, supporting regulatory compliance and residents' safety. The PCAs post findings to the neighborhood's white board for nurse manager follow up.
- In addition, the Quality Management completes daily rounds and Nurse Managers, Nurse Directors, Facility Services and EVS round twice weekly.
- Rounding data is available for all staff on the Quality Management SharePoint page and shared in the all-staff daily newsletter.



# CMS RECERTIFICATION



## **Additional Nursing Department Updates – Recertification Reset**

- Laguna Honda’s Chief Nursing Officer initiated a pilot beginning on August 8, 2022 to concentrate all efforts on ensuring neighborhoods are survey-ready and that teams focus on critical element pathways, environment of care rounding, and recertification education. This includes:
  - 1) Pausing non-essential standing meetings
  - 2) Twice weekly nursing leadership meetings to review rounding data, accountability for findings, plans of correction, challenges, success, and escalations.
- In addition, nursing will rebid into units to develop “unit culture” and improve staffing and morale related to staffing.
- Approximately 40 patient care assistants are being onboarded in September.



# CMS RECERTIFICATION



## Bed Reduction Update

- Laguna Honda is required to change policies, procedures and operations to meet current regulations and allow for successful recertification.
- One of those requirements is to have no more than two patients per room. This is a reduction of 120 beds with the new licensed skilled nursing bed count being 649 beds. The 11 acute care beds are not impacted.
- A task force is working with Resident Care Teams to identify and move residents in a way that minimizes disruption and supports patients and the units. Facilities and EVS teams are working to clean the de-occupied spaces.
- The bed reduction is 66% complete and is anticipated to be completed by August 19, 2022. We anticipate applying for the reduced licenses in early September.



# CMS RECERTIFICATION



## Kitchen Floor Renovation Project

- The Kitchen Floor Project will help modernize the kitchen floor and bring it up to current regulatory standards. It is required for recertification (pending response from CDPH that the project may not be required for recertification).
- After receiving consultative recommendations from CDPH on 7/8, we revised the strategy on interim Dietary Plans that would be in place during construction.
- Project status update:
  - During the week of July 25, 2022, Laguna Honda issued an emergency solicitation/temporary engagement to support interim Dietary Plan
  - Two vendors expressed interest
  - Key stakeholders from vendors will be invited to a 2-part conference meeting the week of 8/8
  - Estimate vendor identification week of 8/22



# SAFETY



## COVID-19 Cases at Laguna Honda

- 89% of residents have at least three doses (one booster) and 73% have four doses (two boosters).

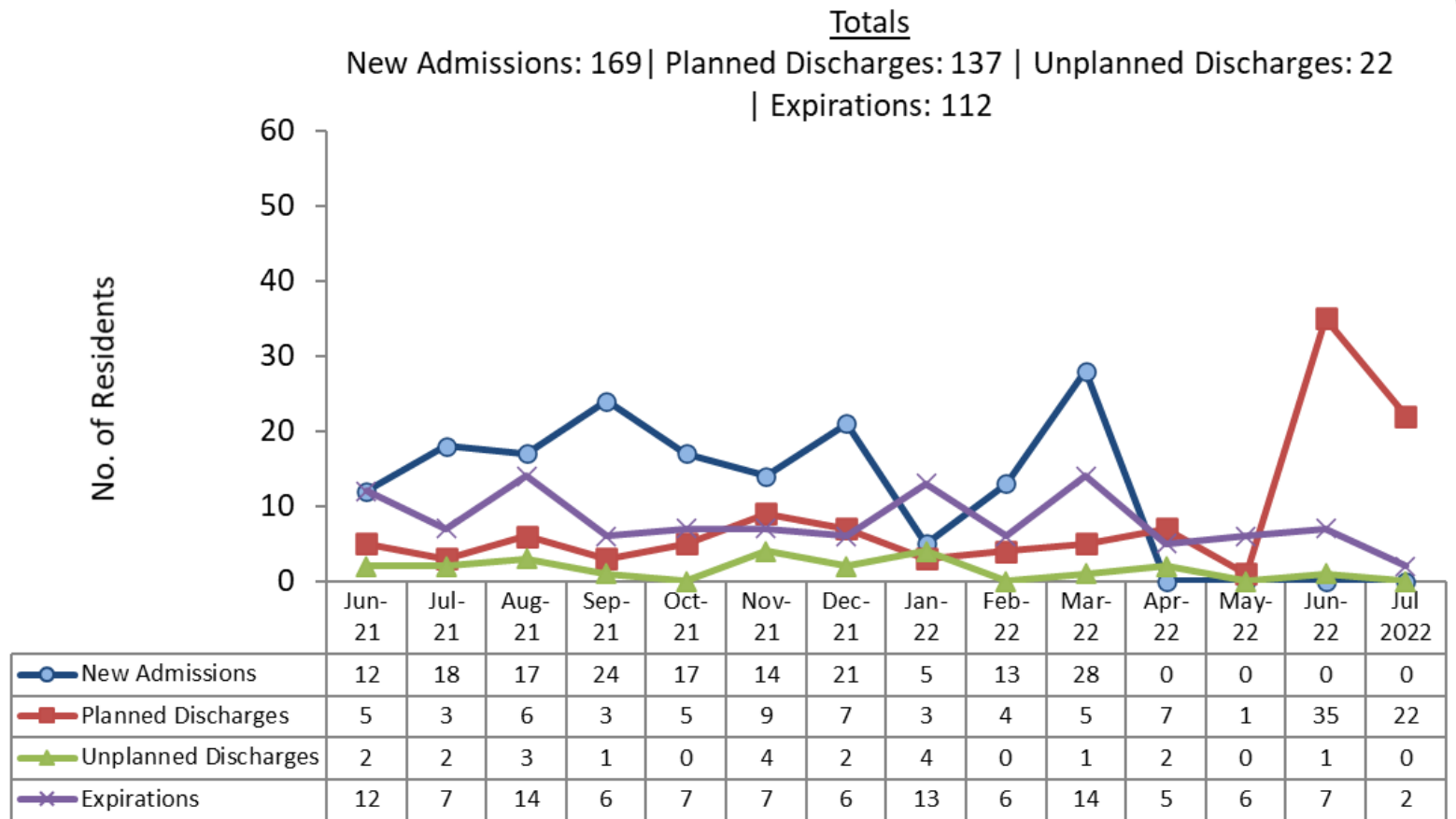
	Resident	Staff	Total
Total 2020 Cases	46	129	175
Total 2021 Cases	32	158	190
January 2022	46	217	263
February 2022	6	46	52
March 2022	0	2	2
April 2022	6	52	58
May 2022	24	116	140
June 2022	33	141	174
July 2022	29	121	150
August 2022 to-date	0	14	14
Total Cases	<b>222</b>	<b>996</b>	<b>1,218</b>
Total Active Cases	8	34	42
Total Deaths	6	0	6

*Data as of 8/4/2022*



# STATE OF THE HOSPITAL

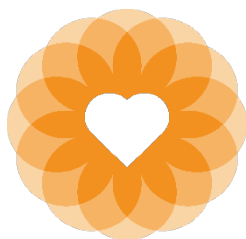
## Admissions\*, Discharges, and Expirations



*\*New admissions are currently on hold due the Closure Plan.*







# San Francisco Health Network Laguna Honda Hospital and Rehabilitation Center



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