



San Francisco Health Network  
Laguna Honda Hospital  
and Rehabilitation Center

# Laguna Honda Hospital Closure Plan and CMS Recertification Update

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August 16, 2022



# CLOSURE PLAN



## Extension of Pause in Transfers/Discharges and Payments

- 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.
- On August 15, 2022, Laguna Honda reached an agreement with federal and state agencies to extend Medicare and Medicaid payments to Laguna Honda until November 13, 2022, and to continue the pause of any transfers and discharges until November 13, 2022.
- This is the humane and compassionate path forward for our residents, their families, our staff and all those who care about Laguna Honda.
- 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.



# 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.
- 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 resident and resident family concerns.





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# Laguna Honda Hospital CMS Recertification Update



# 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



## 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, Acting 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.
- Throughout August, close monitoring is occurring 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



## Mock Survey – Phase 2 – Infection Prevention and Control

*Mock survey finding: Surveyors observed numerous failures to adhere to infection control procedures including contaminated HVAC filters in multiple locations (they were removed immediately), damaged upholstery and countertops, ceiling tiles with mold, and cardboard boxes stored in clean supply areas. Negative pressure isolations rooms were not evaluated annually and checked daily. COVID-19 screening protocol was not followed for visitors. Infection Control Committee and Infection Prevention Program activities and documentation were inadequate. Staff were observed not wearing required eye protection. Pill crush machines were noted to contain powder and liquid residue. The facility has an inadequate water management plan.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Reviewing the entire Infection Prevention and Control Program with expert consultants to ensure best practices are implemented, followed and sustained for regulatory compliance.
- Immediate interventions included removal of HVAC filters, damaged furniture, and cardboard boxes. Laguna Honda established rounding procedures to identify and mitigate infection control issues. Water management plan is in development.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Environment Free of Hazards

*Mock survey finding: Surveyors identified inconsistent oversight of environmental safety as evidenced by unlocked EVS carts with chemicals unattended, unlocked balcony doors, wheelchairs without footrests, and an unattended trash compactor with keys left in the device.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Implementing processes to monitor and remediate environmental safety issues.
- Immediate interventions included implementing audits on EVS carts to ensure they are locked, tasking charge nurses with checking that balcony doors are locked and rounding to monitor that trash compactors are securely locked when unattended.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Food Safety

*Mock survey finding: Surveyors identified food sanitation not adequately maintained in unit galleys including food stored inappropriately, contaminated stored food products, and soiled refrigerator tray carts. In the main facility kitchen, food was not covered in coolers, floors in food preparation area were grease-covered, and pans and mugs were dirty and stained.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Developed a process and monitoring procedure to ensure that food is properly stored and that cooking and serving items are clean.
- The kitchen was deep cleaned and Laguna Honda implemented a routine cleaning schedule.

# 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 Element 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) 24/7 Rounding

Enhanced 24/7 rounding (in-person presence to support frontline staff to ensure compliance with regulatory requirements) will ensure ongoing compliance with identified deficiencies.



# 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. 8-13

- Residents' Rights
- Quality of Life
- Behavioral Health

### Week 3 | Aug. 15-20

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

### Week 4 | Aug 22-26

- 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



## Education Plan – Staff Survey Results from Week #1

- After each survey, staff are encouraged to complete an exit survey.
- 97% of staff shared that as a result of the training, they felt more knowledgeable about the topics presented.
- 95% of staff shared that as a result of the training, they will change their practice.
- Staff identified their top change goals as always washing hands for 20 seconds and “if I see something, say something.”



# 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



## 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



## 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



## 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



## 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 82% 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.
- CDPH has provided consultative feedback and recommendations on:
  - Strategy for interim Dietary Plans that would be in place during construction
  - Interim Infection Prevention measures until the Kitchen Floor is renovated
- 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



# LAGUNA HONDA UPDATES



## Tracking Laguna Honda's Path to Recertification

- Closure Plan and recertification updates will continue to be provided at the Health Commission at the second meeting of each month in both open and closed session.
- Closure Plan and recertification updates will also be provided monthly at the Laguna Honda JCC in both open and closed session.
- A summary of the mock survey findings and corrective actions will be made available to the public later this week.
- Dedicated webpages to the Closure Plan and recertification efforts can be found at [lagunahonda.org](http://lagunahonda.org)





# San Francisco Health Network Laguna Honda Hospital and Rehabilitation Center



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# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Essential Equipment and Safe Operating Condition

*Mock survey finding: Surveyors noted inconsistent documentation of initial inspection and ongoing preventative maintenance on medical equipment. The soiled utility rooms on resident units are incapable of required negative airflow. There is no documentation of a required annual air balance report.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Developed a process and monitoring procedure to ensure medical equipment preventive maintenance is consistently completed on time and documented.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Storage of Drugs and Biologicals / Pharmacy Services

*Mock survey finding: Several expired doses of the influenza vaccine were available for administration (they were removed from circulation). An unlocked medication cart was present in the medication room where unlicensed staff could potentially access, and there were instances of unsecured medication keys cards and medications. There were missing unit medication inspection logs. A surveyor observed medication administration errors without harm to resident.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Immediately removed expired vaccine doses and verified that no expired doses were administered. Policy and process updated to ensure that they incorporated the removal of expiring medications. The medication cart was immediately locked.
  - Developed a process to secure key cards in the automated dispensing unit. The Chief Nursing Officer distributed a memo providing instructions on how to properly secure medications and key cards.
  - Incorporated secure medication protocols and expectations into the comprehensive education program.
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# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Life Safety

*Mock survey finding: There were many instances where required documentation of life safety systems were incomplete, inadequate, or missing (i.e., sprinkler system, fire extinguishers, fire drills, fire alarms, waterflow devices.) There were several observations of mixed storage of full and empty oxygen cylinders. There were multiple doors found throughout the facility with inadequate closure and latching required by code. There were multiple observations where egress pathways were obstructed. Additional exit signage is required in several areas. Several areas classified as hazardous were not properly protected. Several observations in the food service area did not meet code. There was a fire alarm panel silenced on the nursing unit.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Developed specific plans to address documentation for each cited area of deficiency and implemented monitoring plans to ensure ongoing compliance.
- Added signage to oxygen storage to identify the locations of full and empty cylinders and ordered dividers to physically separate full and empty cylinders.
- Updated the monthly service checklist to include inspection of proper door closure/latching and will adjust all doors to meet code requirements.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Administration

*Mock survey finding: Examination rooms throughout Laguna Honda have been converted to offices without required CDPH approval for converting approved spaces to another use.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Assessing space alignment. For rooms not in alignment, the space will revert to the current licensure use or the licensure will be updated to reflect the current use.

## Mock Survey – Emergency Preparedness

*Mock survey finding: A staff member could not explain emergency evacuation procedures. The Emergency Preparedness documentation was inadequate to meet requirements.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Updated the emergency preparedness plan, to be reviewed on an annual basis. Conducted a table-top exercise and provided comprehensive staff education on emergency procedures.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Physical Environment

*Mock survey finding: A staff member without an ID badge was observed caring for a patient. There was no documentation of testing the Sheriff's emergency call system located in the day room and at the end of halls. There were several observations of showers in need of cleaning. It was observed that floors were dirty, and debris, including syringes, was found behind several Omnicell medication dispensing units. Torn linen was observed on several resident beds.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Developed specific plans to address documentation for each cited area of deficiency.
- Nursing leadership to monitor staff are wearing ID badges.
- A schedule to be developed for regular deep cleaning of showers.
- Staff educated to inspect linen prior to making bed and place torn linen in rejected linen hamper bin.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Freedom from Abuse, Neglect and Exploitation

*Mock survey finding: On several occasions, surveyors observed that call lights were cancelled without staff responding, or there was a delayed response.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- The Chief Nursing Officer issued a memo to staff instructing staff to respond to call lights from unoccupied rooms, and if no response is received, to immediately go to the room.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Radiology

*Mock survey finding: Surveyors observed that dosimetry badges were not consistently submitted and processed promptly, and no evidence badge reports were reviewed by a Radiation Safety Officer. Radiology Technologist licenses posted in the department were expired.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Ordered and received new dosimetry badges, which will be replaced every 6 to 8 weeks.
- A third-party vendor will provide radiation exposure reports that will be reviewed by the Chief of Radiology at Zuckerberg San Francisco General Hospital.
- Laguna Honda will post current radiology technologist licenses in the department, and the manager will monitor to ensure that posted licenses are current.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Pest Control Program

*Mock survey finding: Pest traps in clean storage and patient care areas were evidence of an ineffective pest control program.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Immediately removed pest traps in patient care areas.
- The pest control vendor was informed not to place traps in patient care areas. Laguna Honda's pest control policy was revised to include a monitoring procedure to ensure continued compliance.
- Laguna Honda will educate staff to report pest issues by submitting work orders to environmental services .

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Antibiotic Stewardship

*Mock survey finding: The antibiotic stewardship program was inadequate based on nationally recognized standards. .*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Laguna Honda will reinitiate routine meetings of the Antimicrobial Stewardship committee, which will include membership of Infection Prevention, Infectious Disease, Medicine, and Pharmacy. The committee will expand its focus, improve documentation by including actions taken, and report to the Pharmacy and Therapeutics committee.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Self-Administration of Drugs

*Mock survey finding: It was noted there was inconsistent nursing documentation of when supplements were provided to residents.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Developing a revised Self-Administration policy related to supplement use by residents to include validation of each resident's ability to self-administer supplements, and to limit supplement self-administration to those on formulary.
- Laguna Honda's pharmacy verified that proper documentation was included in the medical record.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Acute Care – Patient Rights

*Mock survey finding: Required restraint documentation was missing in medical records. Staff were unable to locate the restraint policy. There is no video monitoring policy or evidence of patient consent procedure. There was minimal evidence of adherence to the grievance policy.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Ensure physicians order restraints within 24 hours, when clinically appropriate, and that nurses receive education on safety protocol. Laguna Honda conducted audits on all current patients for possible restraints and documentation for safety checks and will implement a process for continued monitoring of restraint use. Laguna Honda will also update the restraint policy and will build a restraint order into the EHR.
- A process for ongoing monitoring of seclusion will be established.
- Review the existing grievance policy and procedure with all acute staff for immediate use, and the charge RN will educate current patients about rights to file grievances.
- Disabled cameras and removed monitors from all 3 rooms that contained cameras.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Acute Care – Nursing

*Mock survey finding: There was no acute care nursing plan of care. There was only one nurse on the unit, compromising patient safety. There was insufficient staff competency demonstrated during two code blue drills. Specific nursing competency documentation that was requested was not provided.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Laguna Honda will update care plan policies, and nurses will complete care plan updates specific to acute care. Regular care plans audits will be established.
- A code blue in service will be provided for clinic, acute, acute break relief, and non-licensed staff, and code blue drills will resume.
- Surveyors will be provided with requested competencies and staffing schedules. The nursing staffing policy will be updated for acute care, and Laguna Honda will ensure that the personnel binder is up to date. Laguna Honda will establish a process for monitoring expiring licenses, using a monthly report.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Acute Care – QAPI

*Mock survey finding: Patient Rights and Nursing Service findings were not adequately addressed in the QAPI. The QAPI is not aligned with nursing practice. There were discrepancies with PIPS committee data.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Reviewing the QAPI Program with expert consultants to ensure best practices are implemented, followed, and sustained for regulatory compliance.

# CMS RECERTIFICATION



## Mock Survey – Phase 2 – Acute Care – Governing Body

*Mock survey finding: There was no evidence of governing body approval of contracted services, AND Policies were not current.*

**Laguna Honda response** - *Full corrective actions are available upon request.*

- Laguna Honda will review policies that have not been revised in the past three years, or that have not been reviewed annually.
- A standard process for tracking and updating policies will be developed, including a process for continued monitoring of policy updates.