



FY 20-21 Facility Assessment

Laguna Honda Hospital and Rehabilitation Center

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Joint Conference Committee

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LHH Facility Assessment

Skilled Nursing Homes are required to conduct an annual **Facility Assessment** report to determine the necessary resources required to care for residents competently during normal day-to-day operations and emergencies.

Assessment areas include:

- Resident population served and care needs based on physical and cognitive disabilities
- Staffing and competencies on services provided
- Risk analyses for systems and resources in North and South residence towers and hospital buildings spanning more than 500,000 square foot



Services Provided

Fiscal year 2020-2021 resident care services provided by Laguna Honda

North Tower Residence	Care Focus
North 1	Integrative Support
North 2	Memory Care
North 3	Memory Care
North 4	Language Focused (Spanish)
North 5	Language Focused (Asian)
North 6	Memory Care
North Mezzanine	Memory Care (Locked/Secured)

South Tower Residence	Care Focus
South 2	Positive Care (HIV/AIDS)
South 3	Palliative Care
South 4	Complex Care with Total Support
South 5	Complex Care with Total Support; Specialized COVID-19 Unit
South 6	Complex Care with Total Support
Pavilion Mezzanine - SNF	SNF & SNF Rehab
Pavilion Mezzanine - Acute	Acute Medical; Acute Rehab; COVID-19 Admissions Observation

Care Requirements of Resident Population

Fiscal year 2020-2021 top 10 resident diagnoses

Rank	Primary Diagnoses
1	Essential (primary) hypertension
2	Dysphagia, unspecified
3	Epilepsy, unspecified, not intractable, without status epilepticus
4	Chronic obstructive pulmonary disease, unspecified
5	Type 2 diabetes mellitus without complications
6	Major depressive disorder, single episode, unspecified
7	Other symptoms and signs involving cognitive functions following cerebral infarction
8	Vascular dementia without behavioral disturbance
9	Atherosclerotic heart disease of native coronary artery without angina pectoris
10	Unspecified dementia without behavioral disturbance

Resident Population Served

During FY 2020-2021:

- 153 unique residents discharged (average LOS 2540)
 - Includes deaths and discharges to community, Acute units, and/or other facilities
 - 97 residents expired (average LOS 2235)

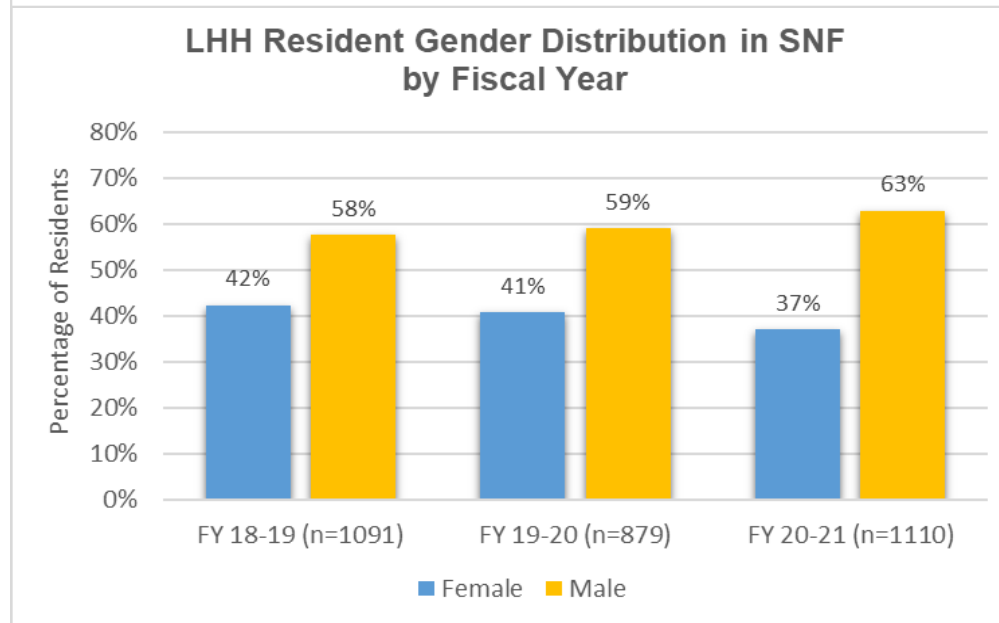
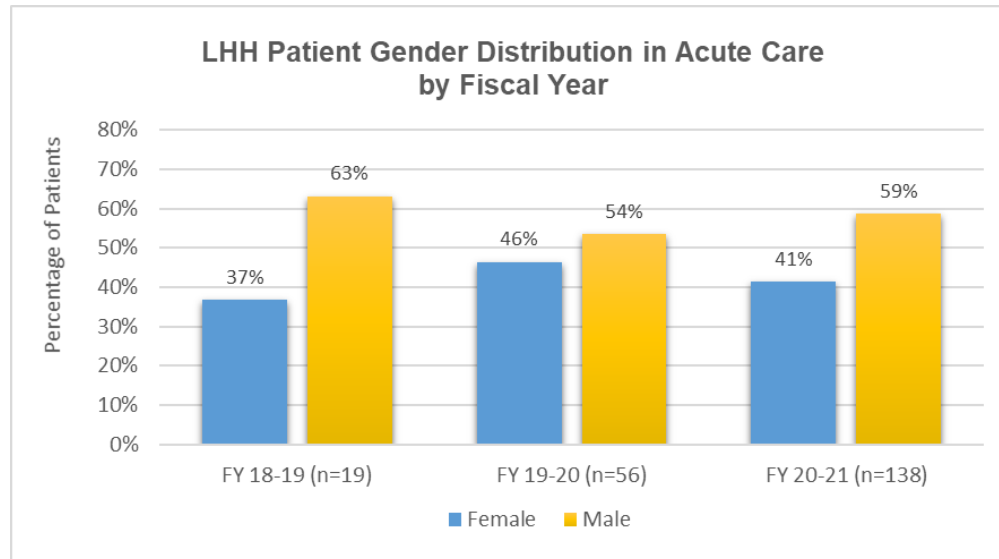
As of 09/21/2021:

- 17 residents are discharge-ready and waiting for housing
 - Average wait time from time of referral to securing housing = **365 days**
- Other barriers for discharge:
 - Lack of funding source
 - Displays at risk behaviors

Type of Housing	# of Residents Waiting for Housing
Medical Board & Care	2
House/Apartment	4
Scattered Site Housing (SSH)	8
Hotel/Direct Access to Housing (DAH)	3
Locked Facility	0
Grand Total	17

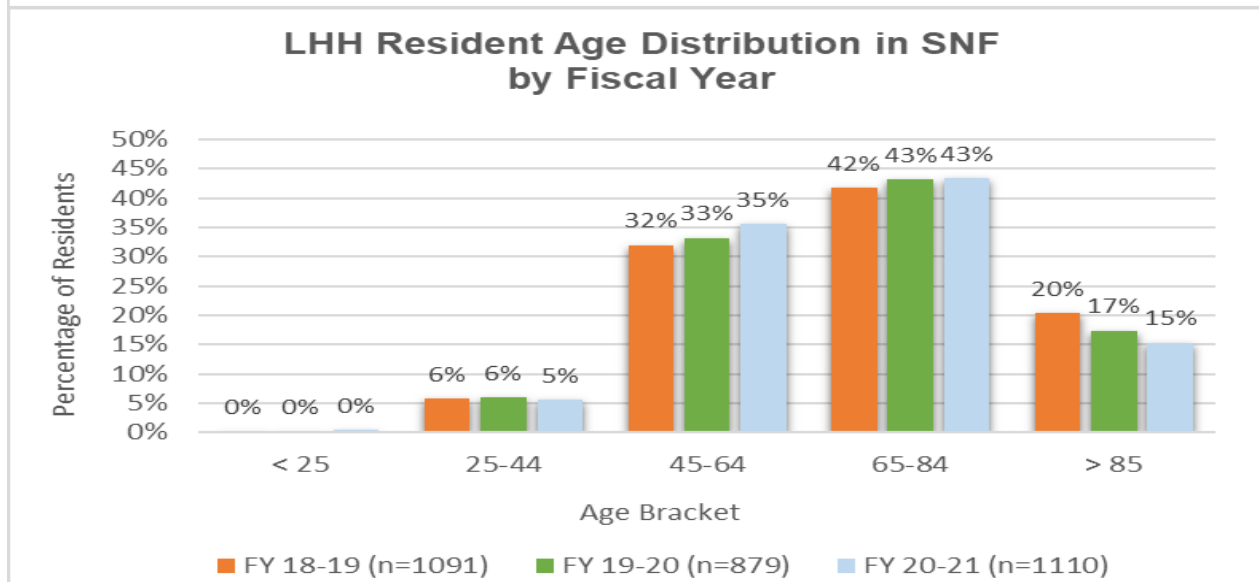
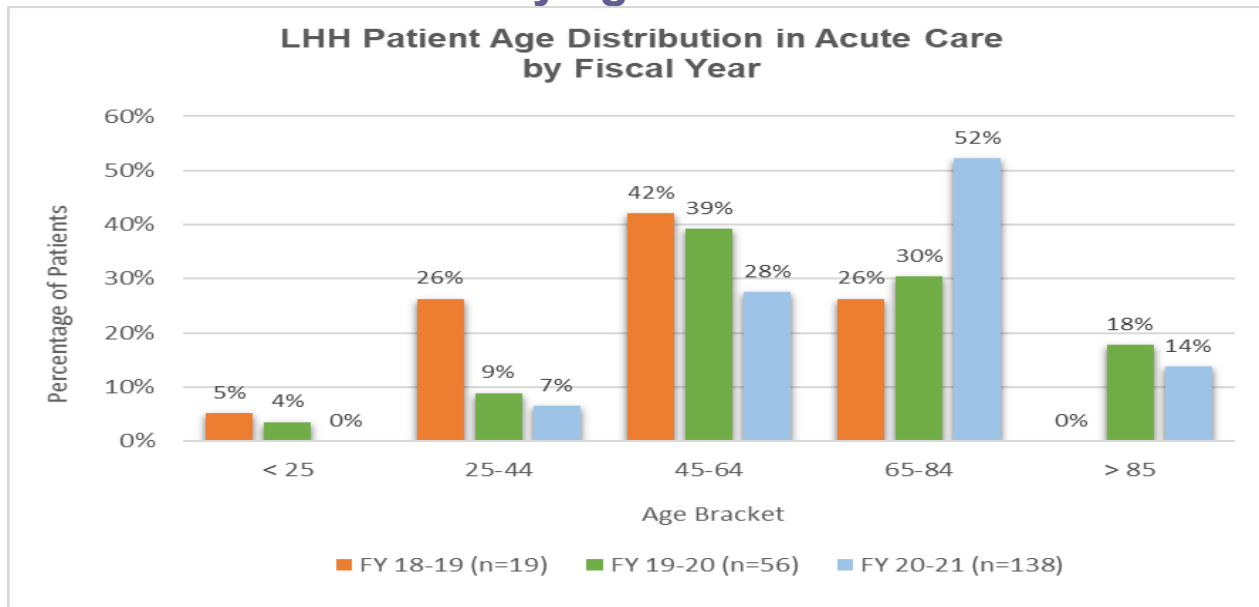
Resident Population Served

Fiscal year 2020-2021 residents by gender



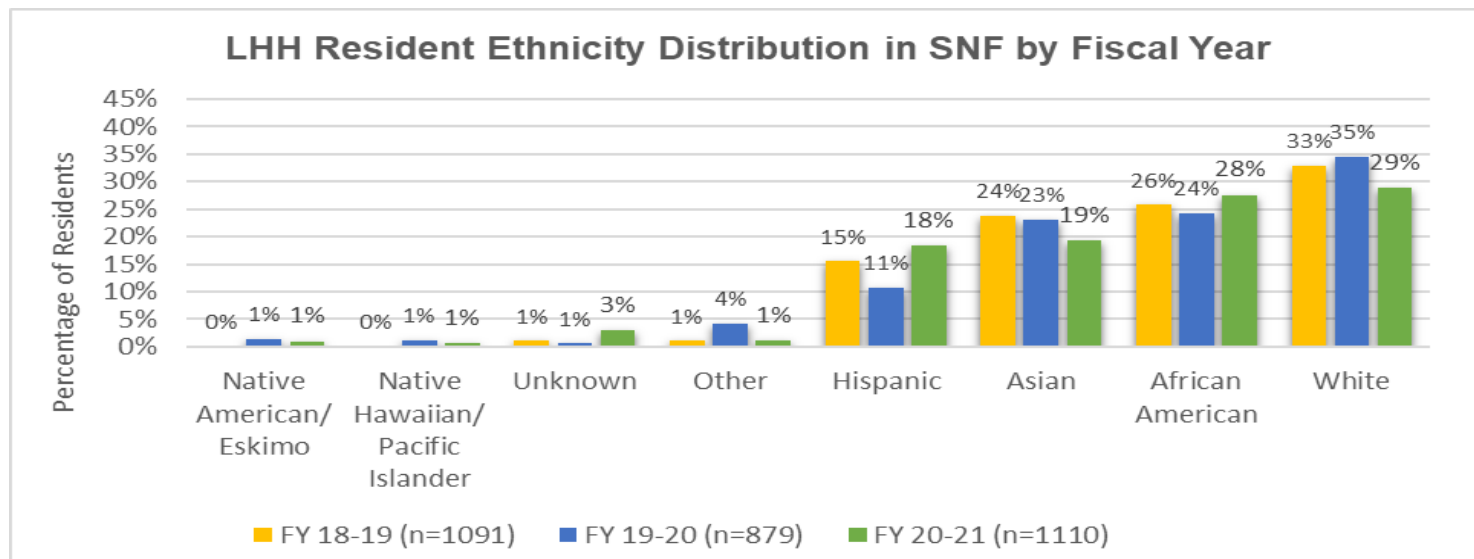
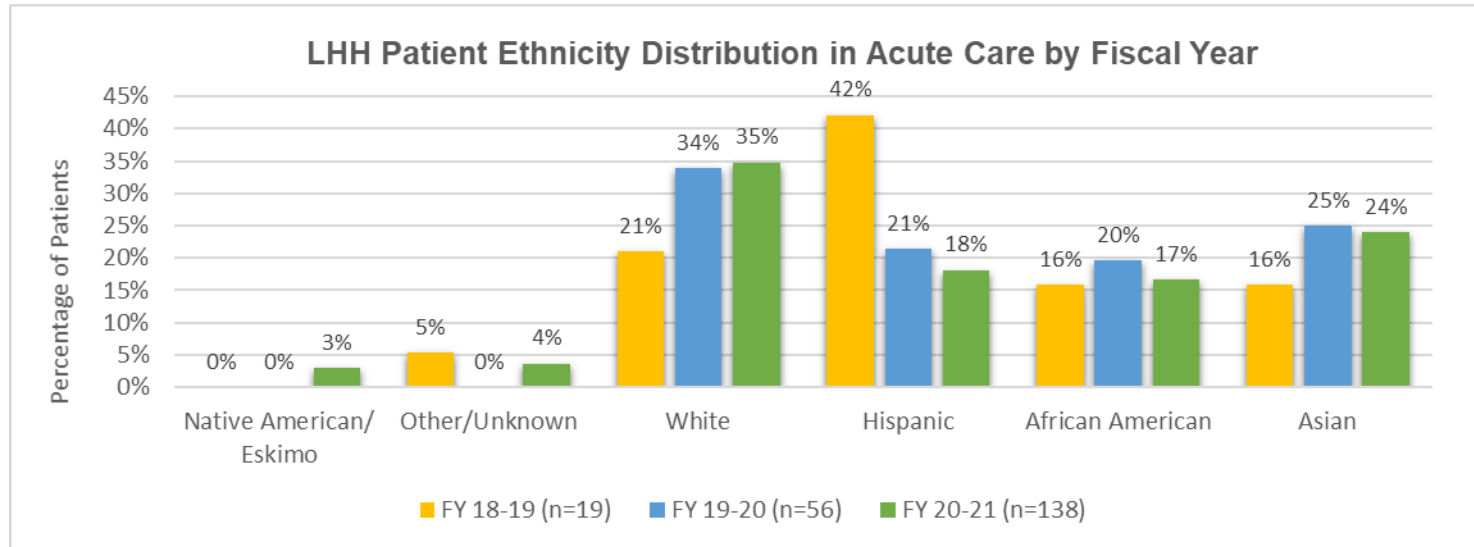
Resident Population Served

Fiscal year 2020-2021 residents by age



Resident Population Served

Fiscal year 2020-2021 residents by ethnicity



Resident Cultural Needs

Fiscal year 2020-2021 staff skills to meet resident ethnic and cultural needs

Language	Total Certified Bilingual Staff
Chinese (Cantonese)	45
Chinese (Mandarin)	30
Japanese	1
Korean	1
Laotian	1
Russian	1
Spanish	61
Tagalog (Philippines)	2
Vietnamese	2
Total	144

Facility Staffing and Competency

Fiscal year 2020-2021 staffing by department

Department	Full Time	Part Time	As Needed	Grand Total
Accounting	13			13
Activity Therapy	32			32
Admissions & Eligibility	10			10
Behavioral Health Services	6	4		10
Central Supply	5		1	6
Clinical Nutrition	12	1		13
Education & Training	8			8
Environmental Services	123	1	8	132
Equity & Culture	1			1
Facilities Management	35		4	39
Health at Home	38	4	14	56
Hospital Administration	13			13
Laboratory	8		2	10
Materials Management	8			8
Medicine	12	16	33	61
Nursing	764	8	223	995
Nutrition Services	68	36	24	128
Outpatient Medical Clinic	6		3	9
Patient Financial Services	11			11
Pharmacy	20	3	5	28
Quality Management	9		1	10
Rehabilitation Services	19	1	4	24
Telecommunications	2	1		3
Utilization Management	24	1	1	26
Workplace Safety & Emergency Management	1			1
Grand Total	1248	76	323	1647

Facility Staffing and Competency

Fiscal year 2020-2021 resident care staffing competency standards

New trainings

1. 2020 for Acute Licensed Nurses: Brief Interview for Mental Status (BIMS) Video Tutorial
 2. 2020 for LHH Medical Services: Professional Fee, Evaluation and Management for Subsequent Nursing Facility Care Visits
 3. 2020 for Licensed Nurses: Venipuncture Procedures, Specimen Collection, and Specimen Handling
 4. 2020 Mandatory for Licensed Nurses: Laborie Portascan 3D-Bladder Scanner LIVE
 5. 2020 Mandatory for Licensed Nurses: Safe Narcotic Medication Administration for Licensed Nurses
 6. 2020 Mandatory for Licensed Nurses, CNAs, PCAs, Rehab Staff: Philips Early Vue VS30 (Vital Signs Machine)
 7. 2020 Mandatory for Physicians and Licensed Nurses: Zoll Defibrillator R Series Plus
 8. COVID-19 Personal Protective Equipment
 9. Disinfectant Guide In-Service LIVE
 10. Hand Hygiene In-Service LIVE
 11. New ZOLL Defibrillator Unit-Based Training for Licensed Nurses LIVE
 12. 2020 Mandatory for Licensed Nurses, CNAs, PCAs, Rehab and Medical Services: Philips EarlyVue VS30 (Vital Signs Machine)
 13. 2021 for Licensed Nurses, Respiratory Therapists, and Medicine Department: Tracheostomy Product Update
 14. 2021 for Rehabilitation Services and Nursing: New M200 Bed / Chair Alarm
 15. 2021 Mandatory for All: Body Systems 1-Laguna Honda & UCSF Stroke Education and BE-FAST Awareness
 16. 2021 Monoclonal Antibody Treatment for COVID-19 Infection: Bamlanivimab + Etesevimab
 17. 2021 POC Infection Prevention During Mealtime, Tray Pass, Collection & Assist with Tube Feeding, Oxygen LIVE, Read & Sign
 18. 2021 POC: Memo: 2021 CDPH Survey Plan of Correction
 19. 2021 Unit-based In-Service for Licensed Nurses: Bydureon (exenatide) LIVE
 20. Baxter - Safety Alert Training LIVE
 21. COVID-19 Basic Health and Safety Training LIVE
 22. Introduction to Health Equity
 23. MJM 900 Shower Gurney LIVE
 24. PleurX Drainage Catheter - Unit Based (North 6) LIVE
- 36 CDPH-approved trainings that provided continuing education credit hours to nursing staff

Hazard Vulnerability Assessment

Calendar year 2020 hazard and vulnerability findings

Laguna Honda Workplace Safety and Emergency Management department completed Hazard and Vulnerability Analysis (HVA) across the following threat events based on probability (how likely) and severity (how damaging):

Natural (Risk=35%)	Technological (Risk=28%)	Human (Risk=26%)	Hazmat (Risk=19%)
Earthquake	Communications Failure	Multi or Mass Casualty Incident (trauma)	Terrorism, Chemical
Epidemic or Infectious Disease Outbreak	Information Systems Failure	Multi or Mass Casualty Incident (medical/infectious)	Terrorism, Radiologic

Continuity of Operations Plan (COOP)

To plan for all types of hazards, a Continuity of Operations Plan was developed with the following information:

- Leadership succession
- Priority and essential services
- Systems and resources needed to carry-on priority and essential services
- Alternative care facilities and emergency communications

*Risk: Probability x Severity

Components of SNF Quality Assurance Performance Improvement (QAPI) Program

Fiscal year 2020-2021 SNF QAPI topics:

- 1) **CMS Long Stay and Short Stay Quality Measures (QM)** –
QM score for LHH: 3 stars out of 5
- 2) **LHH True North Metrics** (Care Experience, Equity, Financial Stewardship, Quality, Safety, and Workforce)
- 3) **Medication Error Reduction Plan**
- 4) **Adverse Event Monitoring**
- 5) **Infection Control Surveillance Program**
- 6) **Antimicrobial Stewardship Program**
- 7) **Resident Abuse Prevention Program**
- 8) **Resident Satisfaction**
- 9) **Culture of Safety**
- 10) **Preventive Maintenance Program**
- 11) **Annual SNF Survey Findings**
- 11) **Staff Training and Education Topics**

Components of SNF Quality Assurance Performance Improvement (QAPI) Program Cont.

Fiscal year 2020-2021 SNF QAPI topics:

- 1) **Med QI Committee**
- 2) **Code Blue Committee**
- 3) **Falls PIT Committee**
- 4) **Pressure Ulcers PIT**
- 5) **Behavioral Monitoring Committee**
- 6) **Restraints Committee**

Care Improvement Priorities and Opportunities

- To provide care effectively, Laguna Honda will need to close a gap between current competencies and competencies required by the resident population served, with a focus on trauma-informed and resident-centered care; and to increase compliance with staff training and develop methods to measure competency.
- These include in-services, continuing education as well as quality assurance and performance improvement (QAPI) efforts on the following quality topics*:
 - **Provision of Residents' ADL Needs**
 - **Pain management**
 - **Pressure ulcers**
 - **Falls**
 - **Antipsychotic Medications**

*Denominator is > 500 residents

LHH Environment of Care Committee

- EOC Committee is a multi-disciplinary group focused on the continuous improvement of the Environment of Care and takes a collaborative approach to providing a safe, secure and comfortable environment to facilitate patient care.
- Some activities include:
 - Plan, direct, implement, and improve the organization's performance of EOC activities.
 - Evaluate and assess existing conditions, operations, and practices to determine impact and general regulatory compliance.
 - Identify and implement improvement opportunities and process change to facilitate safety, security, and comfort of patients, staff, and visitors.
 - Conduct scheduled EOC rounds to identify potential risks; scheduled to cover all patient care areas on a quarterly basis.
- For fiscal year 21-22, the EOC Committee will resume monthly reporting meetings.

LHH COVID-19 Response

Since March 2020, LHH has been under protective quarantine as part of COVID-19 response to the global pandemic.

Response

- Designated COVID-19 Unit (South 5)

Safety

- Controlled access to LHH campus and hospital with a safety officer present at the two entrances.
- Staff screening upon entrance with COVID-19 symptom questions.

Admissions

- As of 6/29/20, admission of new residents with respect to the COVID-19 pandemic is a 2-step process of Pre-Admission and Post-Admission Observation.
 - Pre-Admission includes the Admissions Screening Committee as well as surveillance and a negative COVID-19 test result.
 - Post-Admission Observation is a 14-day period of close observation and retesting for newly admitted residents who are unvaccinated. Newly admitted residents that are fully vaccinated are not required to undergo the 14-day post-admission observation period.

Summary and Next Steps



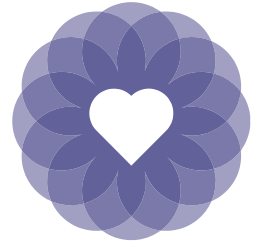
Campus Safety: The fiscal year 20-21 plans to upgrade existing cameras throughout the facility have been completed. For fiscal year 21-22, the San Francisco Sheriff's Department officers will resume K-9 unit rounds to assist with resident safety on campus.

Laguna Honda Lean Transformation: Hoshin Kanri planning for FY 20-21 was put on hold due to COVID-19 Response.

Equity and Culture: The Laguna Honda Department of Equity and Culture (DEC) was created in fiscal year 20-21, integrating Equity, Trauma Informed Systems, and Wellness to comprehensively address care experience for residents and staff. In fiscal year 21-22, the Equity and Culture department will focus on contributing towards the stated goals in the DPH Racial Equity Action Plan and the Laguna Honda Equity A3.

The Facility Assessment:

- Needs to be reviewed by Hospital Executive Committee and other performance improvement committees, including the Governing Body
- Needs to be updated whenever there is a change in the skilled nursing facility's operations that would require a substantial modification in the assessment or at least on an annual basis
- Reflect any changes in applicable laws and regulations
- Improve performance in promoting quality of care



Questions/Comments