Laguna Honda Hospital Closing Plan and Recertification Update

July 19, 2022
Plan Overview

• The Centers for Medicare and Medicaid Services (CMS) terminated Laguna Honda’s participation in the Medicare and Medicaid Provider Participation Programs on April 14, 2022.

• CMS reimbursements fund the majority of patient care at Laguna Honda, accounting for approximately $550k a day in Medicare and Medicaid payments.

• Laguna Honda's Closure and Patient Transfer and Relocation Plan adheres to requirements of both CMS and the California Department of Public Health (CDPH). The Closure Plan was approved on May 13, 2022.

• This Closure Plan provides Medicare and Medicaid reimbursements through mid-September while we work to find facilities that can appropriately care for our residents.

• Implementing the Closure Plan is required by CMS and Laguna Honda must show progress in transferring and discharging residents.
Plan Overview

• We are committed to providing excellent care for residents while they await transfer or discharge. Finding appropriate placements is a challenge. Physicians, nurses and social workers assess patient needs to ensure we identify a new facility that can provide them with medical care at the level they need.

• Per the Closure Plan, residents have the right to appeal a discharge. The Appeal Process is handled through the California Department of Health Care Services (DHCS), Office of Administrative Hearings and Appeals (OAHA).

• Laguna Honda is working with residents and their families to provide support during this process, including town halls, neighborhood community meetings, Resident Council, family meetings and many one-on-one conversations. We share information on behalf of the State Ombudsman to provide advocacy resources.

• We are partnering with city, state and federal agencies, including the Human Services Agency (HSA), the Department of Homeless and Supportive Housing (HSH), DHCS, CDPH, and CMS. We await responses from CDPH, DHCS, and CMS to help inform Closure Plan activities and communication with residents and families.
# CLOSURE PLAN PROCESS

**San Francisco Health Network**

**Laguna Honda Hospital and Rehabilitation Center**

## CLOSURE PLAN

### PATIENT TRANSFER AND DISCHARGE PROCESS

1. **Notification of Closure**
   - All patients given 60-day notice of closure plan on 5.16.22
   - Patient and/or representative family meeting

2. **Patient Case Management**
   - Patient assessment
   - Whole-person understanding of patient needs

3. **Closure Operations**
   - Staff calls facilities to find available beds best suited to patient needs

4. **Transfer to a skilled nursing facility for clinical care**
   - Staff identifies options of facilities to meet patient needs
   - If patient accepts, move to transfer
   - If patient declines, identify alternative facility
   - Patient may appeal

5. **Discharge to the community**
   - For placement into supportive care
   - To their own homes
   - For patients who are experiencing homelessness, San Francisco is committed to finding appropriate placement within the city’s coordinated homeless response system
     - For example: board and care, medical respite, residential treatment, shelter

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**These steps happen at the same time**
# CLOSURE PLAN PROGRESS

## PATIENT CENSUS

<table>
<thead>
<tr>
<th>Patients ↓ Week →</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
<th>Week 6</th>
<th>Week 7</th>
<th>Week 8</th>
</tr>
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<tr>
<td>May 16-22</td>
<td>681</td>
<td>677</td>
<td>677</td>
<td>675</td>
<td>662</td>
<td>644</td>
<td>630</td>
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Patients (at end of week)

## PATIENT ASSESSMENTS, FAMILY MEETINGS, and PATIENT REFERRALS

(data reported for Patient Assessments, Family Meetings, and Patient Referrals are not unique patient numbers but rather cumulative actions and events)

<table>
<thead>
<tr>
<th>Event ↓ Week →</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
<th>Week 6</th>
<th>Week 7</th>
<th>Week 8</th>
<th>TOTAL THRU WEEK 8</th>
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</thead>
<tbody>
<tr>
<td>May 16-22</td>
<td>105</td>
<td>100</td>
<td>60</td>
<td>74</td>
<td>56</td>
<td>57</td>
<td>26</td>
<td>4</td>
<td>482</td>
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<tr>
<td>Patient Assessments</td>
<td>105</td>
<td>100</td>
<td>60</td>
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<td>482</td>
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<tr>
<td>Patient + Family Meetings</td>
<td>43</td>
<td>57</td>
<td>21</td>
<td>57</td>
<td>48</td>
<td>34</td>
<td>21</td>
<td>3</td>
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<tr>
<td>Patient Referrals</td>
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<td>80</td>
<td>122</td>
<td>170</td>
<td>159</td>
<td>149</td>
<td>146</td>
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## CALLS and VACANT BEDS IDENTIFIED

TOTAL CALLS MADE TO SKILLED NURSING FACILITIES (SNFs)

<table>
<thead>
<tr>
<th>Calls/Beds ↓ Week →</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
<th>Week 6</th>
<th>Week 7</th>
<th>Week 8</th>
<th>TOTAL THRU WEEK 8</th>
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<tbody>
<tr>
<td>May 16-22</td>
<td>739</td>
<td>1,188</td>
<td>1,162</td>
<td>1,418</td>
<td>1,738</td>
<td>1,371</td>
<td>1,690</td>
<td>1,400</td>
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Unique facilities called San Francisco

- 15:
  - 15:
  - 15:
  - 15:
  - 15:
  - 15:

Unique facilities called Out of County

- 482:
  - 850:
  - 1,103:
  - 296:
  - 1,344:
  - 1,690:
  - 1,400:

**VACANT BEDS IDENTIFIED** (not all vacant beds may be appropriate for a patient’s needed levels of care or accept Medicare/Medi-Cal)

- San Francisco County
  - Facilities here do not disclose Medicare/Medi-Cal bed availability during phone calls
  - 11:
  - 0:
  - 20:
  - 2:
  - 18:
  - 1:
  - 0:
  - 0:

- Out of County
  - 1,187:
  - 1,070:
  - 1,457:
  - 1,540:
  - 1,280:
  - 1,245:
  - 908:
  - 545:

- Medicare beds
  - 157:
  - 0:
  - 24:
  - 49:
  - 0:
  - 149:
  - 17:
  - 0:

- Medi-Cal beds
  - 53:
  - 0:
  - 0:
  - 5:
  - 0:
  - 52:
  - 2:
  - 0:

## TRANSFERS to SKILLED NURSING FACILITIES (SNFs)

<table>
<thead>
<tr>
<th>County ↓ Week →</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
<th>Week 6</th>
<th>Week 7</th>
<th>Week 8</th>
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<td>4</td>
<td>8*</td>
<td>10</td>
<td>8</td>
<td>31</td>
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**TOTAL TRANSFERS**

- 0:
- 0:
- 4:
- 4:
- 8:
- 11:
- 8:
- 35:

Data as of 7/11/2022

The dashboard is updated every Monday at 5 p.m. and posted online at lagunahonda.org
# CLOSURE PLAN PROGRESS

## DISCHARGES to the COMMUNITY

<table>
<thead>
<tr>
<th>County</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
<th>Week 6</th>
<th>Week 7</th>
<th>Week 8</th>
<th>TOTAL THRU WEEK 8</th>
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<tbody>
<tr>
<td>San Francisco County</td>
<td>May 16-22</td>
<td>May 23-29</td>
<td>May 30-Jun 5</td>
<td>Jun 6-12</td>
<td>Jun 13-19</td>
<td>Jun 20-26</td>
<td>Jun 27-Jul 3</td>
<td>Jul 4-10</td>
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<td>Other Counties</td>
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<td>0</td>
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<td>3</td>
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## DISCHARGE PLACEMENT TYPES

<table>
<thead>
<tr>
<th>Placement Type</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
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<tr>
<td>Medical Respite</td>
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<td>0</td>
<td>1</td>
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<tr>
<td>Residential Treatment Facility</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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</tr>
<tr>
<td>Board &amp; Care, Residential Care Facility (RCF), RCFE (Elderly)</td>
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<td>0</td>
<td>0</td>
<td>3</td>
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<tr>
<td>Psychiatric Facility</td>
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<td>0</td>
<td>0</td>
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</table>

**SFDPH is working with the Human Services Agency to find community placements for patients who no longer require long-term skilled nursing care and whose medical needs have been met.**

- **Home/Housing**: Settings where patients live in their own home or with a family member or friend, city-based permanent supportive housing, cooperative (shared housing), residential settings.
- **Medical Respite**: Temporary housing/shelter providing medical support, nursing, and case management; may provide respite beds and sobering facilities, along with temporary housing and specialized support services, for medically frail people impacted by homelessness.
- **Residential Treatment Facility**: Live-in facilities that offer various levels of care for mental health and substance use disorder treatment.
- **Board & Care/Residential Care Facility (RCF)/RCFE (Elderly)**: These are homes occupied by caregivers. In addition to room and board, these homes provide assistance for elderly patients who may be losing independence and require care.
- **Skilled Nursing Facility/Hospice**: Settings that provide 24-hour nursing and are staffed by providers (may include hospice or end-of-life care).
- **Psychiatric Facility/Psychiatric Skilled Nursing Facility**: These facilities serve patients with active psychiatric conditions and treatment plans; may be open or locked; patients are unable to care for themselves safely in the community and need to be in psychiatric conservatorship.
- **Shelter**: Temporary settings where people stay while accessing other services and seeking permanent housing solutions.
- **Hotel**: San Francisco-coordinated facilities providing temporary housing solutions.

The dashboard is updated every Monday at 5 p.m. and posted online at lagunahonda.org
Laguna Honda Hospital Recertification Update
CMS RECERTIFICATION

Tentative Recertification Timeline

- **01**: Recertification Readiness Assessment
- **02**: Ongoing Interventions and corrective actions
- **03**: First Mock Survey
- **04**: Second Mock Survey (anticipated in August)
- **05**: Implement Corrective Actions
- **06**: Submit Forms for CMS Enrollment
- **07**: CMS Conducts Facility Survey
- **08**: CMS Reasonable Assurance Period
- **09**: CMS Final Survey

*Timeline: APR - DEC 2022*
CMS RECERTIFICATION

Preparing the Facility for Recertification

- Our highest priority at Laguna Honda Hospital is to get recertified with the Centers for Medicare and Medicaid Services so that we can continue to care for residents.

- We are making a number of immediate improvements as well as continuing the hard work of making the long-term operational, institutional, and cultural changes needed to ensure our sustainable success.

- Certification experts are conducting a comprehensive organizational assessment and making recommendations on gaps and improvements, so that Laguna Honda can implement those improvements.

- We will not submit out recertification application until we are prepared for the actual CMS certification survey.
Bed Reduction

- 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 residents per room. This regulation is intended to increase the quality of the personalized care experience.

- We must reduce all rooms with three patients to no more than two per room. This is a reduction of 120 beds. The 11 acute care beds are not impacted.

- A task force is working with Resident Care Teams to identity and move residents in a way that minimizes disruption and supports residents and the units.
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 also required for recertification.

• Project status update:
  • Submitted documentation to CDPH in preparation for the project and completed on-unit pilot on several neighborhoods.
  • Working to ensure safe and nutritious meals for all patients when the production kitchen is closed.
  • Preparing the galleys on the neighborhoods for on-unit meal preparation.

• Ongoing consultation with CDPH:
  • Recent consult resulted in need to identify alternative food service vendor, with timeline implications yet to be determined.
CMS RECERTIFICATION

Additional Recertification Milestones Completed in June

• Completed on-line learning module focused on April 2022 Plan of Correction items, which includes specific IPC findings related to Personal Protective Equipment (PPE), the care environment, and hand hygiene.

• Initiated daily change-of-shift huddles to communicate critical CMS Recertification and Patient Safety information to frontline staff.

• Completed preliminary placement assessments of all Laguna Honda patients, and initiated process, in collaboration with the Laguna Honda Ombudsman, of identifying patients who are appropriate for discharge to community-based care.
CMS RECERTIFICATION

Additional Recertification Milestones Completed in June – Continued

• Appointed additional PhD trained Nursing Executive for nursing operations.

• Provided initial gap analysis for Laguna Honda CMS recertification, including review of previous survey reports, Plans of Correction, and current on-the-ground assessment of Laguna Honda for compliance across all rules and regulations by each unit and across shifts.

• Used CMS critical pathways, and standardized and sustained real time corrections and improvements, with ongoing observation, monitoring, and validation to ensure that improvements are retained and continued, in conjunction with Laguna Honda leadership and staff.
Mock Surveys Overview

• Laguna Honda completed the first portion of the mock survey on June 29, 2022. Laguna Honda is currently hosting the Life Safety Survey component of the first mock survey.

• The mocks survey replicate the real CMS surveys: they are unannounced with teams throughout the hospital at all shifts for several days.

• We requested an extremely thorough review, including a complete assessment of all Federal Skilled Nursing Facility regulatory categories as well as all acute care standards.

• A second mock survey is planned for later to again test our survey-readiness before the CMS recertification surveys. The second mock survey will not take place until corrections from the first mock survey findings are completed.
CMS RECERTIFICATION

Mock Survey #1

- The survey identified gaps and immediate improvements are already under way with corrective action plans being developed for long term improvement.

- For every deficiency noted by mock surveyors, Laguna Honda staff developed an intervention or corrective action.

- In addition to the specific corrective actions, Laguna Honda developed larger strategies for widespread system level change.

*Nursing leadership works on the corrective action plans to address mock survey findings*
Mock Survey – Pilot Reorganization

• Laguna Honda launched a pilot reorganization to model high-performing skilled nursing homes and align us with a skilled nursing facility model.

• Implementing now provides time to adjust and to prepare for our second mock survey and the recertification surveys.

• The pilot does not impact job classifications. It refocuses disciplines back to their areas of expertise. For some staff, the reporting structure changes.

• Other changes include the following:
  • Increasing leadership and management support on each unit
  • Increasing expertise in regulatory compliance
  • Better embedding the Department of Education and Training on the units
  • Establishing Nursing Home Administrator and Assistant Nursing Home Administrator positions
  • Establishing two Administrative Directors positions
  • Establishing new nursing leadership structure
CMS RECERTIFICATION

Mock Survey – Education

• The Recertification Comprehensive Education Plan will proactively address CMS regulations and sustain compliance.
• The program will provide robust education and training for all staff and is being developed based on the results of the mock survey.
• Nursing staff will receive additional training.
• The training is directed at frontline staff who are critical for recertification success.
• In addition, an education plan aimed at manager and supervisors using Critical Element Pathways (CEPs) is already underway.
• CEPs are a care/compliance program of best practices to ensure ongoing regulatory compliance and survey readiness. This program is used consistently by high performing nursing homes and federal surveyors to guide their survey process.
Mock Survey – Infection Prevention and Control

Mock survey finding: Surveyors observed numerous failures to adhere to infection control policies and procedures including following proper hand hygiene and changing gloves, isolation precautions, and appropriate PPE use between activities or residents. Laguna Honda’s policies and procedures were outdated and did not adhere to the existing policy requiring a yearly review of all policies and procedures.

Laguna Honda response:

• LHH is 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 include increased hand hygiene audits and updating our COVID mitigation response to follow national Skilled Nursing Facility best practices.
Mock Survey – Resident Rights

Mock survey finding: Several instances were noted where staff failed to respond to resident concerns. The facility failed to maintain a complete grievance log, provide daily access to resident funds and quarterly financial statements.

Laguna Honda response:

- All resident rights regulations being reviewed by expert consultants to make improvements.
- Implementing a weekly report of resident grievances for review by Laguna Honda Executive Leadership.
- Implementing a new software in the electronic health records system to immediately make quarterly financial statements available to patients.
- By the end of July 2022, residents will have daily access to funds, seven days a week.
Mock Survey – Freedom from Abuse Neglect and Exploitation

Mock survey finding: Several instances of failing to ensure residents are free from involuntary seclusion and restraints were observed. Resident allegations were not thoroughly investigated.

Laguna Honda response:

• Staff immediately reviewed all residents to identify those with seatbelts, which is considered a restraint, and to identify if the seatbelt was for postural support or restraint. The assessment also considered if there was a less-restrictive alternative.
• Additional trainings with the goal of being restraint free.
• Corrective actions include immediate reporting followed by an investigation into the allegations and the development of findings and actions, including reporting to external regulatory agencies. The identified actions from the investigation will be tracked and audited to ensure that actions are implemented and validated. This ongoing monitoring will occur until 100% compliance is achieved for four quarters.
Tracking Laguna Honda 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
Mock Survey – Medication Administration and Pharmacy Services

Mock survey finding: Facility failed to provide gradual dose reductions (GDR) for residents on psychotropic medications. Multiple medication errors were observed during medication pass. Cracked locks on crash carts were found, failing to secure access to medication by residents and non-licensed staff.

Laguna Honda response:

• All residents on psychotropic medications are being reviewed for appropriate gradual dose reductions.
• There will be monthly reviews of medication distribution and results will be reported to the LHH Performance Improvement Patient Safety Committee.
• For the crash cart issue, the identified carts were immediately checked to ensure they are properly locked.
Mock Survey – Quality of Care

Mock survey finding: A delay in care transferring residents to Laguna Honda acute unit or other acute hospitals. There were also observations of failure to offer residents pain medication before treatments. It was also noted that staff did not adhere to policy and procedures regarding personal cell phones and other devices in resident care areas. Staff also did not ensure translation services and communication devices were regularly used with residents.

Laguna Honda response:

- Staff to report delays in accessing acute care immediately to the Administrator on Duty in order to meet the immediate need of the resident.
- Nurse Managers now review all residents requiring dressing changes to ensure patients have the appropriate pain medications.
- Chief Nursing Officer memo on LHH Code of Conduct regarding personal devices.
- Residents requiring translation services will have the correct translation service phone number and it will be written on their white board for easy access.
Mock Survey – Quality Assurance and Performance Improvement

Mock survey finding: There was a failure to develop a systemic and data-driven QAPI program noting poor documentation that supports corrective actions to ensure resident safety.

Laguna Honda response:

• A full review of the Quality Assurance and Performance Improvement Program is underway with expert consultants to make significant improvements to ensure it is data-driven, reflects countermeasures as needed, and supports resident safety. Full corrective actions available upon request.
CMS RECERTIFICATION

Mock Survey – Administration

Mock survey finding: Staff failed to demonstrate the use of a fire extinguisher and did not respond to the fire alarm. Emergency Management requirements were not met (plan updated annually, conduct required emergency management drills). The Biomedical equipment maintenance completion rate is unacceptably low with no plan of correction noted in minutes.

Laguna Honda response:

• Laguna Honda completed a Hazard Vulnerability Assessment, which provides a systematic approach to recognizing hazards.
• LHH also conducted a Power Outage tabletop exercise on July 6 to test the facility’s Emergency Plan.
• The Emergency Preparedness binder was inspected and updated. Finally, rounding occurred across all units to locate and complete preventative maintenance on any equipment still requiring maintenance.
Mock Survey – Behavioral Health Services

Mock survey finding: Substance use disorder services (support groups) are inconsistently provided to residents due to COVID restrictions.

Laguna Honda response:

• Substance Use Disorder services will not be restricted due to COVID.
• Residents with active substance use disorder will be monitored to ensure they have proper referrals to behavioral health services.
Mock Survey – Food and Nutrition Services

Mock survey finding: There were noted failures to provide updated menus, multiple residents expressed dissatisfaction with food, and snacks were not offered at bedtime. Also observed several clinical staff not following proper food handling procedures. Clinical staff was observed preparing sandwiches without proper food handling training.

Laguna Honda response:

• Staff will ensure menus are up-to-date and posted in all relevant care areas and distributed to patients.
• All Food and Nutrition staff will be trained on the Taste Test Form, to ensure meals are appealing in appearance and taste.
• Prepackaged single serve snacks will be implemented between meals and in the evening.
Mock Survey – Resident Assessments

*Mock survey finding:* Record reviews noted incorrectly coded resident MDS (minimum data set) transmitted to CMS.

**Laguna Honda response:**

- Staff immediately corrected patient records that were inaccurate. MDS staff will be trained on the importance of accurate MDS coding for all residents.

Mock Survey – Resident Centered Care Plan

*Mock survey finding:* Resident care plans are generic and not resident centered to each resident’s care goals.

**Laguna Honda response:**

- For quality assurance, a sampling of resident care plans will be reviewed each week to ensure that they are resident centered and individualized.
Mock Survey – Quality of Life

Mock survey finding: Multiple failures were noted to provide activities to meet residents’ needs and interests. Also, observed multiple residents’ lack of personal grooming.

Laguna Honda response:

- Laguna Honda immediately responded to the residents that were identified to ensure all personal hygiene needs are met.
- On all units, nursing staff will identify residents who need assistance with grooming and personal hygiene.
Mock Survey – Nursing Services

Mock survey finding: Observed multiple instances where staff failed to ensure timely assistance to residents in assisting residents with eating.

Laguna Honda response:

• Education was provided to nursing leaders on serving meals in a timely manner.
• Staffing schedules will be assessed to ensure that there is enough staff to serve residents who need assistance with meals.