

**Transcript of
Debate on Laguna Honda Hospital
KPFA 94.1 FM Radio
March 21, 2005**

The taping of the KPFA debate which follows was recorded by a listener who works at Laguna Honda Hospital; he quickly pulled out his tape recorder and began recording the show shortly after it began. Extraneous commentary on Andrea Lewis' show have been eliminated from this transcript for clarity. Corrections to elliptical grammar, and explanatory factual corrections, are noted in [brackets]. Any errors in transcription are unintended.

Side 1 of Tape

Speaker	Discussion
Andrea Lewis, KPFA "Morning Show" Host	... Again, Andrea Lewis here; Phillip Maldry [will be] back a week from today. We have several guests joining us to talk about the issue of the reconstruction of Laguna Honda Hospital. Where is it at now? Are there problems that can be addressed in terms of some of the financial concerns expressed recently, and also is this the best way to actually care for elders in San Francisco? Joining us are three guests; on the phone we have Herb Levine, who is the Executive Director of the Independent Living Resource Center. Herb, good morning; thanks for being with us.
Herb Levine	Good morning; thank you.
Lewis	Also with us here in the studio is Dr. Theresa Palmer. She is a former staff doctor and a shop steward for the doctor's union at Laguna Honda Hospital, and she is a geriatrician, a practicing geriatrician. So Dr. Palmer, thank you for being here.
Theresa Palmer, MD	Thank you.
Lewis	Also with us, Sal Roselini, who joins us on the phone, President of SEIU United Healthcare Workers West. Sal ... I'm sorry, Sam Rosselli, I apologize.
Sal Rosselli	No problem.
Lewis	Thanks for being with us.
Roselli	Good morning.
Lewis	OK. Let's start with you, Dr. Palmer, perhaps, because I think this is such a complex problem that it might be good for each of our guests to sort of, outline where they see this issue being at. The news reports in the <i>Chronicle</i> , in particular, have focused a lot on the fact that there has been an increase in the price of redoing ... reconstructing ... what am I trying to say ... renovating Laguna Honda Hospital, and now there is a lot of concern. How much is it going to cost? How many beds are we going to get? Is that the most important issue that we should be focusing on right now, in your opinion?
Palmer	Well, I think ...
Lewis	Get a little to closer to the mike there ...
Palmer	I think there is a larger issue that needs to be looked at. There's a coordinated attack on all provision of public health services going on right now. And that there is a somewhat Machiavellian move to pit the most vulnerable against each other. And one of the things that's going on with Laguna Honda is the current mayoral administration, who never supported the rebuild of Laguna Honda, is using any means it has to get out of rebuilding Laguna Honda in the manner that the voters demanded in 1998 [1999]. The ... as you know... there was a bond issue in 1998 [1999] that provided a means of funding for rebuilding Laguna Honda as a place of care for the elderly and disabled at its 1,200-bed capacity. This was done because the building ... the current building ... was outmoded, and was becoming unsafe.
Lewis	Yes, it was deemed to be earthquake unsafe, right?
Palmer	Right. Since then, there's been a coordinated attack on the provision of public nursing home care in San Francisco for low-income elderly and disabled people.
Lewis	OK. We'll get to that, and I appreciate you outlining the problems as you see at Laguna Honda Hospital,

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- which you basically see it's a lot a larger issue than that. So, we'll come back to you, Dr. Palmer. Let's hear from you Herb Levine. How do you see this problem, and what do you think that we should be most focused on in this discussion?
- Levine OK. I think it's very important to keep some dates in mind, to start, to just set the frame here. The 1998 bond issue; in 1999, the disabled community's Brown vs. the Board of Education [lawsuit]. The [U.S.] Supreme Court gave us what is called the Olmstead decision, which changed everything. It reaffirmed the right of people with disabilities of all ages — and they are people with disabilities of all ages who are living in Laguna Honda [Levine is incorrect; Laguna Honda is not allowed to admit people with disabilities younger than age 16]. It reaffirmed their right to choose to live in the community, and said that unnecessary institutionalization constitutes discrimination. We also have some questions about what the [1999] bond actually said: Does it really commit the City to build 1,200 beds? But this is an issue about civil rights; it's not an issue about a facility. It's not an issue of mattresses and box springs; it's an issue about people.
- Lewis So, you are the one who perhaps feels that Laguna Honda, in its entirety, is not the right answer in terms of elder care, that perhaps more community-based programs should be being focused on than all of this money being put into the reconstruction of Laguna Honda? Am I sort of reading you right?
- Levine Um ... you're reading me mostly right.
- Lewis OK.
- Levine We ... we, in the independent living movement believe that the *only* reason *anybody* is *ever* in a nursing home is that there are no appropriate community services for that person. So we are not advocating closing down Laguna Honda tomorrow morning. It's our feeling that if community services are provided, if people are given a *real* choice, *eventually* we will see nursing homes in general disappear.
- Lewis Sal Rosselli, I saw you quoted in the *Chronicle*, and you said ... if I can just lead off with your quote ... “... There is a need for a minimum of 1,200 beds, and we will accomplish that. No less is acceptable. San Franciscans who lived their whole lives in the City and paid taxes, when they retire and they have no one else to take care of them, they deserve to stay in the City.” So it seems like you're ... well, you explain ... perhaps expand on that quote a little bit.
- Rosselli Sure. First of all, our Union believes that seniors and people with disabilities should receive the most appropriate services in the least-restrictive, most integrated setting possible. We also represent 10,000 homecare workers in San Francisco who are committed to building an expanded home- and community-based care system that provides seniors and people with disabilities with the full range of supports and services that will allow them to stay out of institutions. However, in 1999 the Department of [Public] Health determined that 92,000 more residents over age of 65 would be living in the City by [the year] 2020, and concluded that even if Laguna Honda were rebuilt at its full capacity of 1,200 beds, the City would still need another 1,300 to 2,400 additional nursing home beds to serve its expanded [elderly and disabled] population. So Laguna Honda, you know, is a skilled nursing facility for elderly, mostly, that *can't* stay in their own homes and receive the appropriate level of care. And, while Laguna Honda is primarily providing long-term care to frail seniors, the hospital also has a hospice, mental health wards, and a ward for those suffering from devastating affects of AIDS. So in 1999, we ... the promise to the voters, was a minimum of 1,200 beds. It was a compromise around our conclusion that much more beds would be needed.
- Lewis Meaning, so you felt that even that number was way too small?
- Rosselli Absolutely.
- Lewis OK.
- Palmer Can I make a correction, Mr. Rosselli? Laguna Honda does not have quote-unquote “mental health” beds. It is not licensed as a psychiatric facility, and regulations require that patients at Laguna Honda are certified as [needing] skilled nursing, which is not on the basis of mental illness but physical disability.
- Levine I would like to also respond to what Mr. Rosselli said.
- Lewis OK.
- Levine I think that 1999 survey ... study ... is a very important one to keep in mind, because of what it did. What it did, was equate aging and disability with a need for nursing home beds. It defies the trend in the rest of the country, which is away from nursing homes and to community services; it [the 1999 study] tries to

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- define who it is by virtue of age or disability who needs to be in Laguna Honda when there are folks with *exactly* the same demographic and health profiles who are currently living in the community. So, one real question is, do the people at Laguna Honda now, and how many of them right now, actually need to be there and would choose to be there? And the City has been engaged in a needs assessment process to arrive at the answer to that question.
- Palmer And this needs assessment process has resulted in almost *no* discharges. One of the problems is that people who require the type of care that a skilled nursing home facility provides in general cannot get that care outside of a skilled nursing home unless they are very well off financially. And, in fact, the statistics that we're talking about, which includes the 2000 census, shows that the number of people who are over [age] 85 who are incontinent, cognitively impaired, immobile, and need to be fed, are a significant percentage. In San Francisco ...
- Lewis Of the residents at Laguna Honda, you're saying?
- Palmer Of residents in *any* nursing home ... in San Francisco, two-thirds of the population are renters, one-third of the population over [age] 65 lives alone. To say that even under the most enlightened circumstances these people can be cared for without nursing home beds, is not rational.
- Lewis [Interrupting to simultaneous responses by Rosselli and Levine]: OK. Well, let's go one at a time here. So, I'm sorry, we heard from Herb most recently, so Sal, you and then Herb.
- Rosselli Well, there's another problem that's increasing. And it's ... the danger is particularly great for residents that are admitted to nursing homes [who are] on Medi-Cal. While the vast majority of Laguna Honda's residents are admitted on Medi-Cal, only 11 of San Francisco's 20 private nursing homes accept admissions on Medi-Cal. In fact, in the last several years, San Francisco has lost more than 300 Medi-Cal skilled nursing beds, sort of further complicating the situation and accentuating the need for Laguna Honda to be built at ...of at least 1,200 beds.
- Lewis Herb Levine, your comment about ...
- Levine Yes. I think that the needs assessment is showing some different things. First of all, a statement that folks who are there really need to be there is insulting to our staff and Board of Directors [of the Independent Living Resource Center], many of whom fit the profile of current residents at Laguna Honda.
- Palmer How many are over 85?
- Levine Ah. We're not talking about *that*. We're ... how many of the people at Laguna Honda actually need to be there *if* there were appropriate community services? So we're not arguing that there might not be appropriate community services at this moment. Charlene Harrington, who is [a] noted expert on long-term care ... she works at UCSF ... has stated that *if* San Francisco improved its utilization of existing home- and community-based services, and expanded community services and waiver programs, the need for Laguna Honda beds could be reduced by 30% to 50%. So the Department of Justice ...
- Lewis Herb, can we get more specific about what we mean when we say "community services," because I think it sounds very great, but what are we actually talking about? Are we talking about providing nurses for people to stay in their single apartments, or what?
- Levine One of the waivers that does exist in the State is for in-home nursing [care]. We are talking about the use of assistive technology. We are talking most of all, in San Francisco, about the need for housing. And the question of ... the question is, and the Olmstead decision does direct us in this area ... the question is how does San Francisco, how does the State of California actually allocate available resources? Is it allocating them in a way that is discriminatory? When the Department of Justice visited and wrote a report to the City Attorney in April of 2003, they said, and I quote, "There does not appear to be any documented need for the City to rebuild all 1,200 beds [at Laguna Honda Hospital]."
- Lewis OK. And Theresa, I want to give you a chance to respond to [what] Herb Levine was saying, that in terms of the folks at the Independent Living Resource Center, that you're describing people there who you're saying need to be in bed. So can you respond to that?
- Palmer Well, the people that most notably fill nursing home beds nationally are disproportionately older, female, poorer, and people of color. There's no doubt that with more enlightened policies, we can lower the bed ... the number of people absolutely that need nursing home beds. And, in fact, the number of people in the nation as whole that need nursing home beds is very slowly going down. But there are subsets,

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where the absolute numbers are increasing because of the aging of the population. We've got a huge Baby Boom curve going forward. There's estimated to be a 57% increase in people over [age] 65 in San Francisco between 2000 and 2020; so we've got 100,000 going to 160,000 people over [the age of] 65. Of that ... Right? In 2000 there were 14,000 people over [age] 85; a disproportionate number of that increase will be over [age] 85 in [by the year] 2020, because of the aging ... the moving curve of the Baby Boom. Right now, 60% of people over [the age of] 85 will spend some time in a nursing home, and, in fact, nationally 20% of people over [the age of] 85 *are* in nursing homes. Now I agree with Mr. Levine that this is egregious. If there's any way we can help people age in place ... [and] we can put people in a less institutional environment ... we should do that. And in fact, the Olmstead Act, and the other regulatory moves *have* served to turn nursing homes into more of a rehab-and-discharge type of facility, and less of a custodial-care, end-of-life facility, but there still is a significant number of people that will need years of custodial care, and will need end-of-life care in a nursing home facility. We have very good — in San Francisco — outpatient hospice organizations, but the hospice at Laguna Honda — the inpatient hospice — is always full. There are people that, for various reasons, cannot get what they need outside of a nursing home. And the numbers are really staggering. We're looking at current occupancy rates, the need for thousands [of] more beds in San Francisco than we have now, even if by [the year] 2020 with the most enlightened funding, we can cut those occupancy rates by 50% or even by 75%, there still will not be enough nursing home beds, and that's just for people over [age] 85. We're not even talking about people over [age] 65, or disabled people with things like multiple sclerosis and degenerative diseases [for those] under [age] 65.

Lewis I want to come back to this larger discussion about the best way to care for elders in the City and beyond; but I just want to focus before we have to take a break, and I'll ask this of you, Sal Rosselli, of the SEIU, about what *did* happen with Laguna Honda? We keep talking about this bond measure that passed. That \$299 million bond measure promised the 1,200 beds that you mentioned, but now there's talk that it might cost a lot more than that, and only get 540 beds out of it. And I've heard all sorts of things about the cost of steel, the fact that China went into the steel market is part of why this cost has escalated... that there's all sorts of fingers being pointed. But can you explain in a nutshell what you think happened, and why now we're talking about so many fewer beds [being built to replace Laguna Honda] for so much more money?

Rosselli Sure. If I could just first add that, you know, our Union supports the mission of the Independent Living [Resource] Center, and it's not an "either/or" situation here. There's a tremendous shortage of healthcare workers to care for people in their own homes. And if the Governor [Schwarzenegger] has his way, in this current budget proposal, the 10,000 homecare workers that we represent in San Francisco today who care for 12,000 San Franciscans in their own homes, for a modest salary of ten-dollars-and-30-cents an hour, with a modest health plan just for themselves, would be taken away. They'd be pushed back to minimum wage and lose their health plan. It would create hundreds of thousands of hours needed for San Francisco's elderly would be unfilled, because caregivers wouldn't be able to continue this homecare work. So, there's the shortage of nurses ... there's a shortage of respiratory therapists. That's another crisis here that we're facing, alright, for caring [for] people in their own homes. In terms of the fiscal crisis ... as you said, the cost of construction, you know, has skyrocketed because of steel and concrete increases. There's also been a flurry of hospital construction due to the passage of Senate Bill 1953, which mandates that all California hospitals must be retrofitted, or rebuilt in the next several years. That's created a huge demand for services of large construction firms, who have also raised their prices, as a result.

Lewis And fewer people, then, bidding on the Laguna Honda project ... meaning, even right when the bids came in it was significantly more than what the estimates had been, right?

Rosselli Right. And you know, when we did the bond [in 1999], we ... the original plan projected cost escalation of 3% to 4% per year; and [now] we're experiencing a 34% annual increase in the cost of hospital construction. You know, something like ... no one could have reasonably predicted back in 1999.

Lewis Well, we're going to continue our discussion about Laguna Honda Hospital, and we also have been ranging, sort of, beyond that into what are the best ways to care for elders in the City of San Francisco. Our guests are Sal Roselini, who is the president of SEIU, United Healthcare Workers West; also ... I'm sorry, Sal Rosselli and Dr. Theresa Palmer, former staff doctor and shop steward for the doctor's union at Laguna Honda; and Herb Levine, who is the Executive Director of Independent Living

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Resource Center. We're going to come back with all our guests, and in a little while we'll take your phoned-in questions and comments, as well. So stay with us..

...

Lewis ... Laguna Honda Hospital in San Francisco. Our guests, again, Sal Rosselli, who is president of SEIU, United Healthcare Workers West; Dr. Theresa Palmer here in the studio, former staff doctor and shop steward for the doctor's union at Laguna Honda, she's also a geriatrician; and Herb Levine, Executive Director of the Independent Living Resource Center. We'll be taking called in questions and comments from you in just a few minutes. But, Herb, I just wonder if you wanted to comment at all on the issue of the financial situation with Laguna Honda and what happened there? Or is that not a really something you think we should be spending a lot of time focusing on?

Levine No, I think it's an issue that does need to be addressed, and there's a reason ... First of all, I need to say, we keep talking about elders. And we need to be really clear that Laguna Honda is not a retirement home, this is a skilled nursing facility, and these are people of all ages with disabilities.

Lewis OK; thank you for that; sorry.

Levine I think also, the cost ... shortfall, is a really important issue. And in this sense: At a time when the City and the State ... but let's ... let's focus on the City ... is telling us that they can't come up with enough monies ... enough revenue sources to fund health and community services for those folks who are in the community, it would be *obscene* for the City to somehow dip into its General Fund, or find sources of funding to fund 1,200 nursing home beds. The question really is, are we talking about 1,200 beds, or are we talking about 1,200 or *more people* who are eligible to use those beds? So the City, if it rebuilds at a lower level than 1,200 beds, is going to be saving some dollars. We want to know where those dollars are going. We want them to go into community services, and we support those services utilizing workers — who might be displaced at Laguna Honda at union wages — in the community.

Lewis Well ... Sal Rosselli, is ... I don't know, there's already been a little bit of a shell game ... \$100 million from the tobacco settlement got added to the funding to try to rebuild Laguna Honda ... so I hear what Herb is saying about concern that where ... you know ... where's the money going? If there's money saved, where is it going to go? Do you have any answers to that?

Rosselli We absolutely support ... you know ... increasing funding for community services so that more folks in San Francisco can live in their own communities, in their own homes. The original \$100 million [tobacco settlement funding] commitment was from 1999. Since then, tobacco tax settlement funds are coming in at much higher levels than expected. In fact, the original estimate was \$377 million from the settlement; it's now expected to go far past \$500 million.

Transcriber's Note: The 1999 voters guide noted in the Ballot Simplification Committee digest on page 33 that the City expected to receive \$347 in tobacco settlement revenues (TSR's) over the next 25 years; in fact, the City is now projecting in 2005 that it will receive **over \$800 million** in TSR's, not the \$500 million Mr. Rosselli incorrectly cited. Additionally, the actual language of the proposition that voters voted on specifically states in Section 7 on page 55 of the voter guide that "the property tax impact [would be reduced] by *requiring* the application of available" TSR's received by the City [emphasis added]. The Ballot Simplification Committee's Digest on page 33 also noted that "Proposition A also provides that *all* tobacco settlement monies ... would be used to pay" for construction and to offset the cost to property owners of repaying the bonds [emphasis added].

So our proposal is that we first access some of those dollars to meet the shortfall to rebuild Laguna Honda at 1,200 beds. And, um ... I want to just correct one statement that Dr. Palmer said, regarding the Newsom administration. You know we've met with Gavin Newsom and his staff. And he, and Dr. Katz, and the Department of Public Health ...

Lewis Dr. Katz is ...

Rosselli He's the Director of the Department of Public Health ...

Lewis OK, thank you.

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Rosselli	... are all, you know, committed to fulfilling our promise to the voters and rebuilding Laguna Honda at 1,200 beds.
Palmer	Well, I feel like they're saying one thing and doing another. I think they're — Dr. Katz and Mayor Newsom — I think that there is a concerted attack on funding for public health in this City and it's being carried out, first, by pitting the most vulnerable — the disabled, the elderly who need these services — against each other. Representatives of the Mayor [and] the City's public health and mental administration have continually curried the favor of advocates for home health and community health services by reiterating over and over again, that the cost of a public nursing home is coming out of funding for home- and community-based services, even though there's <i>really</i> no evidence that this is true. The split ... the split between those who support nursing home services and those who support home- and community-based services has been successfully accomplished. And they've got people who should be pulling together, speaking out against each other. This is <i>not</i> right.
Lewis	So part of what you were saying during our break was that just because, even if they were to pull some of the money out of, let's say Laguna Honda to go to communities ... you're saying there's no guarantee if they pull that money
Palmer	It won't ...
Lewis that it would actually go to community services?
Palmer	... It won't. There's a long a history of defunding and shutting down public health institutions, while inadequately funding community alternatives. Reagan did it in the '70's; it was done with the Mental Health Rehabilitation Facility [in San Francisco.] A lot of the patients that should have been cared for in the Mental Health Rehabilitation Facility, which has been defunded, deskilled, and debedded are now being shunted to Laguna Honda. And so these younger, mentally ill patients are leading to the exclusion of San Francisco elderly, and physically disabled. It's a shell game and the ...
Levine	I think if we're not going to pit one group against another, then we really shouldn't pit people with psychiatric disabilities against people with other kinds of disabilities.
Lewis	OK; and Herb Levine did you want to comment about this climate that we're in, and whether ... you know ... with Governor Schwarzenegger and Gavin Newsom, do you actually think that there would be a serious effort to fund community services for the ...
Levine	Here's what I think ...
Lewis	OK.
Levine	In many ways, this is a new day. The federal government, even while it's talking about cutting Medicaid funds through its Center for Medicaid and Medicare Services has directed the states that they could establish the principle of "the money follows the person." In other words, serve people who are eligible for skilled nursing facilities, but serve them in the community with the money that you would otherwise spend on them in the nursing home. It is possible. I do agree with Dr. Palmer that politicians do have a habit of speaking out of both sides of their mouth at the same time. It must hurt, physically.
Lewis	[Laughter.] To talk out of both sides of your mouth? [Laughter.] Let's open our phone lines to callers who might want to join our discussion. Our phone number (510) 848-4425. Five-ten, 848-4425. And I guess I also want to go back to the fact that ... you know, a couple of years ago, the federal government was saying that ... you know ... something had to be done about Laguna Honda Hospital. That they were quite slapping the hand, basically, of San Francisco and saying that it was ... you know ... kind of a travesty that this was ... what was really available. So, I guess I want to ask each of you before we take calls, what would you ... what do you see happening next? Sal ... let's start with you, Sal Rosselli. Do you think this is going to forward? And that quote I read from you, you are still thinking that 1,200 beds is possible, that this reduced number beds is <i>not</i> what's gonna' happen? And why are so you confident about that?
Rosselli	Well, because it's ... first of all, we promised the voters that in 1999 ...
Palmer	Amen!
Rosselli	And we went through this debate ...
Lewis	Right.

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Rosselli	... back then. Right? So we have to figure out a way to do it, while we increase money ... dollars ... for community services that Mr. Levine is talking about. You know, this ... the much bigger picture is that this country spends more for healthcare than any industrialized country in the world, and still has 45 million people uninsured. Almost 8 million in California [are] uninsured. Our Union is committed to both State and national healthcare reform so that everyone that lives in this country has access to quality healthcare, preferably in their own homes as they age.
Lewis	I definitely hear that, and I realize we could each paint our picture of what we would really like to most address in terms of the national healthcare crisis. But, specifically, Sal, if I can just press you a little bit ... what do you how do you imagine this promise being fulfilled with what we're reading about now it's going to cost ... what, \$400 million for 540 beds, so a lot more for a lot less. Where is that money gong to come from?
Rosselli	Well, first of all ... you know ... the Mayor has Ed Harrington, the City Controller, spending the next 30 days researching this and developing other ideas about how the City can fund the full project. So we want to take a look at that report. And again, the first dollars that we think should be accessed are the windfall that's come in from the tobacco tax settlement.
Lewis	So more than the [first] \$100 million that's already been ...?
Rosselli	Correct.
Lewis	OK. Dr. Palmer, what about you? What would you like to see happening in the short term in terms of Laguna Honda? How are we going to make this 1,200 beds ... and is that enough, in your mind? 1,200 beds, I'm sorry.
Palmer	Well, at this point, I've been ... I'd be happy if there were 1,200 beds. I think we do need to make sure that home- and community-based care for elders and disabled people <i>are</i> adequately funded, otherwise we're going to see more and more seniors and disabled people who need Medi-Cal nursing home beds going out-of-county. So <i>both</i> need to be funded, and both need to be <i>adequately</i> funded. The voters voted for, and are willing to fund, 1,200 beds at Laguna Honda. 73% I believe of the voters of San Francisco passed this bond issue, and we need to honor that.
Lewis	OK. Herb Levine, you ideas, because I keep hearing we've got do it, but I keep thinking where's the money going to come from?
Levine	Well ... I think, first of all, there is <i>not</i> the money to rebuild Laguna Honda at 1,200 beds right now, and I'll leave it the City Attorney's office to discuss flexibility in that bond issue and what the voters actually did empower the City to do in the bond language. We want the Board of Supervisors and the Mayor's Office to live up to their rhetoric, and you can build ... if you're building 540 beds there are also 140 units of assisted living that are supposed to be built on the campus. We then want to know what's happening to the rest of the money. The City alone is, from its General Fund, supplementing the operating costs [of Laguna Honda Hospital] to the tune of approximately \$36 thousand dollars a year per person. That money could be going into community services. That money could be used to match federal dollars and create the State's match for Medicaid. That money could be used to negotiate with the State to get more home- and community-based waiver slots, just for San Francisco for folks who are at Laguna Honda who would otherwise be able to live in the community. That money, absent those things, could be put into a trust fund to create new housing, so there is some dollars that are gong to be available from operating costs, and I think whatever happens with the rebuild, if we go ahead and are successful in getting the City to pay attention to the Supreme Court's [Olmstead] decision, then we need to stand together with the Union, especially, and make sure those dollars stay in the community and don't just go to reduce our City deficit.
Lewis	Well, we're going to go to our first caller, and I didn't really mention that Laguna Honda Hospital, in case listeners aren't in San Francisco, or aren't familiar, is sort of, in a ... I want to say in a more remote part of the City out by the West Portal MUNI station and [the] Twin Peaks area, so it is kind of tucked away in an area that isn't the most in the community, or in the flow of, activities, I guess could ... would be fair to say. Hopefully, that's fair to say. Alright? Let's go to our first caller. Lea is calling in from Santa Rosa. Good morning. Hello, Lea; are you there? Well she must have gone somewhere else. Let's try another caller, a caller from Marin who prefers to be anonymous. Good morning, are you there?
Anonymous	Yes, I am.

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Lewis	Alright, what's your question or comment today?
Anonymous	I have a son, he's disabled, 26 years old and I'm concerned with this problem because of the cops money – the community money that's going towards the police. The church leader called the police, thinking that the community would help ... with the community services of securing housing and counseling for my son. The police came and they took my disabled son, he's a 26-year adult. They arrested him, the Sheriffs Department put him in the Marin County jail on November 21, 2004. They've charged him with three strikes, and they've put him in Napa Hospital, and I can't get any help.
Lewis	So you're saying your son is mentally ... you'd rather ... you're saying that you think his problem is not one that should be being dealt by the justice folks, but really it's a mental health problem. Is that what I understand you to be saying?
Anonymous	My son was a molest victim from Marin County, and I wasn't able to get help for him ...
Lewis	I see.
Anonymous	... from the police. They wouldn't file a report against the molester who has a licensed foster care [unintelligible].
Lewis	I think I understand. And let me ask our ... some of our guests to respond ...
Anonymous	No protection for people here ...
Lewis	Right. Well, Sal Rosselli, maybe you can address this. I mean, because, I think what the caller's really saying is there seems to be a lot of money going into the police, that kind of thing. Why can't more of that money be spent on mental health, and services for the disabled and elders? Any thoughts on that?
Rosselli	Well, political will. You know, obviously, you know our governments woefully provide inadequate funds for mental health programs, so ... it's part of the whole reform, you know, and how money is spent. Dollars meant for care are going to pharmaceutical companies, CEO salaries, just a whole litany of inappropriate allocations.
Lewis	Right. OK, thanks for that. Let's go next to Joey. Joey's calling in from San Francisco. Good morning.
Joey	Morning. I have a couple of questions. First, I'm ... I have a life-threatening illness that is gradually disabling me. I'm 58 years old, live in San Francisco, and am a devoted KPFA member.
Lewis	Thank you.
Joey	Those are my qualifications. Thanks for the show. And, I am wondering if you guys could just give us a picture of what Laguna Honda looks like, because people in my support group say, "Oh, my God, if I had to go to Laguna Honda ..." You know ... So I would like to know, just briefly, what the different floors look like, and what the kind of ... how many beds are in a room ... and what kind of services people get, and that sort of thing. And my last point is, I've got to put in a plug for. I would really appreciate it if you expanded your disability programming, which I know you have a great show [called] "Pushing Limits" ...*
Lewis	Pushing Limits, right.
Joey	... on Sundays 6:30 to 7:00, I think it is. Anyway, I like that show, it really speaks to me and to a whole community of people out here, so I'm voting for it.
Lewis	Well, thanks for that plug; I'm sure they appreciate it, as well. And let's ask you, Theresa Palmer, the question of what is the reality of Laguna Honda as it is. I know I've heard that same sort of thing, "Oh, it's awful there." You know, "No one should be put there." Is that ... you work there, what's your picture?
Palmer	Well, actually, most of the doctors on the staff at Laguna Honda have their beds picked out. One of the things ...
Lewis	What does that mean?
Palmer	Basically, if you're disabled enough to need nursing home care, you will get excellent care at Laguna Honda.
Lewis	So meaning these doctors are saying "When I'm ready to retire ..."
Palmer	... "I've got my bed picked out," yeah.
Lewis	OK, thank you.

Speaker

Discussion

- Palmer And the ideal was ... in the new building, [it] will be different from what currently exists in the old building. There are two sets of buildings [currently]. One is the main building, which is mostly the old-fashioned open wards, with six-bed pods lined up in a row, and only curtains for privacy. And one of the problems there, for someone coming from home is that there is not a lot of barrier to noise, and not a lot of place for private possessions, and so that's very hard on people who are used to having their own space at home. But, for people that are immobile, and for whatever reason can't ask for help, there is a line-of-sight with the nursing staff, and a real lack of isolation. And so that means you can get help quickly when you need it, and you've got a doctor available to come to your bed, every day, if you need it. And so for people who have complex medical illnesses that need a lot of adjusting, Laguna Honda is an excellent place. But on the open wards in the main building, unfortunately at this time ... without the new building ... you do have a certain lack of privacy and a certain lack of ... a certain problem with noise pollution.
- Lewis And would the new ... rebuild in its ideal fashion, with the over 1,000 beds, would that have dealt with those issues at all?
- Palmer Yeah. There will be semi-private rooms, and individual bathrooms, as opposed to group bathrooms.
- Rosselli Andrea, may I ...
- Levine Andrea, may I ... could I have a comment?
- Lewis Please. I'd like to hear from both of you. So Herb, you first, please.
- Levine Yes, I ... [sigh]. I think it's really important to say that the issue of Laguna Honda is not one of interior decoration. It is possible to reconstitute the space to look very different; it's not really the issue. The issue is, to provide the alternatives in the community to give our caller and other people like her *real* choice as to whether or not they want to be at Laguna Honda. And that has to do with how we allocate our public resources.
- Transcriber's Note:** Following this radio debate, a public records request revealed that 64% to 73% of LHH residents are declining to have housing applications submitted on their behalf, indicating their preference to remain at Laguna Honda Hospital. Levine is completely wrong: Well over two-thirds of LHH residents want, and choose, to remain where they are. If two-thirds of LHH residents are making that decision in 2005, then LHH should not be downsized; it should be rebuilt to its promised 1,200 beds, simply to care for the increasing demographics of aging baby-boomers who will need LHH's skilled nursing facilities *after* the year 2020.
- Lewis So Herb, you're ... are you you're not really suggesting that Laguna Honda should be shut down and demolished. It sounds like you're saying, if I'm hearing you right, that ... yes, that needs to be an option, that needs to be better available, but there needs to be more options. Is... am I hearing you right?
- Levine That's right. If we ... if we watch even the AARP poll that was taken a couple of years ago, if we ask people what they would choose, they would choose their own home over a nursing home, and eventually the nursing homes will disappear.
- Palmer No one *wants* to go into a nursing home.
- Levine Right.
- Lewis Right. That's what I was going to say.
- Palmer No one.
- Lewis Sal Rosselli, you were also going to comment.
- Rosselli Right. You know I wanted to ... agree with Dr. Palmer on the quality of care there. We represent caregivers in over 200 nursing homes, and when someone calls us for a recommendation, Laguna Honda is number one on the list, on the quality. In addition to the seismic reasons, it needs to be rebuilt to conform to new regulations regarding patient privacy rights, and other best practices in the provision of long-term care. And again, you know, I agree with Mr. Levine that no one should have to go into a nursing home, and we need to put more dollars in community services so people have a real choice. But just the demographics of our population and the complicated care that some folks *have* to have, Laguna Honda must be rebuilt at at least 1,200 beds.

Speaker	Discussion
Palmer	Yeah. This 1,200 beds is a bare minimum.
Lewis	Right. Right.
Palmer	It's not really sufficient.
Lewis	I know. And it's [only] 540 beds now, so we know that's even less sufficient. Let's go to another caller, Michael's been waiting patiently. He's calling in from San Francisco. Good morning, Michael.
Michael Lyon	Hi. What's happening at Laguna Honda is one crack in a foundation of public health care in San Francisco that's being ... being starved ... it's being cut back ... it's being cut back in ways that the Health Department knows ... just absolutely <i>knows</i> , is going to kill it. The cuts that were made to the administrative staff in the primary care clinics mean that the care ... that the people who are supposed to be giving care are having to arrange to have building upgrades done ... construction done. There's no way that they ... that the Health Department is going to be able to continue going on the way it is; it is being strangled. And, whenever you have pressure like that, there's going ... the cracks are going to show up somewhere ... and Laguna Honda happens to be the place where its now because of all of the mental health cuts that have been cut back. There's huge amounts of money that could come from "downtown." We've figured ... we've have figured that there's \$28 million that could come with PG&E's franchise fees for using gas and electricity ...
Lewis	Who's "we," when you say "we've figured"?
Lyon	Oh; I'm sorry. [The] People's Budget [Committee].
Lewis	Oh; OK. I just want to press you because we're getting short on time. If you had a particular question you wanted to ask ... or I appreciate the ... sort of ... range of things you're laying out there, which is some of what we've tried to address today, but did you want to ask a question ...?
Lyon	We all need to be pulling together to get more money, and it has got to come from Downtown.
Lewis	OK. I appreciate that. OK, let's ... I'm not sure if our guests want to comment on that, but maybe we should go next to Pam. Pam calling in from San Francisco, also. Hi, Pam.
Pam	Hi. I agree with that: Pulling money from Downtown, because I watched over \$4 million that was in Downtown get dumped into a money pit of a building at 850 Broderick. I had an opportunity to serve on a board; I was responsible for helping designate over \$6 million from an individual who died [who] gave it to the City of San Francisco, and the Board of Supervisors developed this a ... committee through DHS (Department of Human Services) to designate how to spend the funds.
Lewis	Interesting.
Pam	And it was a complete ... it was dumped into a building that was a money pit of a building. They purchased it for almost \$4 million, and they knew that it needed over \$5 to \$6 million in renovations to make it habitable by only 40 beds. So every bed was going to cost out at over \$200,000, and that's not considering any kind of services; that's just minimal architectural renovations stuff. I mean, it was horrible to watch how this City handled that. And, you know, and they swept all of the homeless and senior activists together to say, "Yes, yes, buy this building," and it's now sat there for two years and its not going anywhere fast. Finally, TNDS (Tenderloin Neighborhood Development Services), I just heard, recently got the contract to operate it once it's up and running. But is was an abysmal waste of money, in my opinion. And there's another building at 1250 Haight Street that's been sitting there for, I think, seven or eight years, that's earmarked for senior housing, and I'm not sure if it's going to have the services component to it, but it's just sitting there as well. So there's a lot of corruption and people really don't care, I believe, in the City what happens to seniors [and] disabled people, because there's these two projects that I happen to know that are going nowhere fast.
Lewis	Well Pam, thanks ...

End of Side One of Tape

Side 2 of Tape, picking up mid-sentence ...

Unknown	[lost to recording] ... <u>Olmstead</u> Act.
Lewis	Oh, under the <u>Olmstead</u> Act. OK, who might be able to answer that? Is there any way to actually force the City and the State to be more responsible around this issue? Herb, do want [inaudible].

Levine Well, there have been a number of lawsuits. Our lawsuit against the City and the State has resulted in a partial settlement, which was the creation of what's called the Targeted Case Management unit at the Department of Public Health to actually assess ... whether people want to live in the community, what they would need to live in the community, and whether those things are available, so that we can actually get some information. And I think there's a question that I would direct to the federal courts, if the City should find money for Laguna Honda, and that question is: "How is this *not* in violation of the Olmstead decision?" And I think the Courts will eventually have to deal with that, and we hope also the Department of Justice.

Lewis I'd like to also get a final comment from our guests, so Theresa Palmer what would you, after this hour-long discussion, what you would most like our listeners to be thinking about as this issue of Laguna Honda continues, but also the continuing problem of [the] healthcare crisis? And I should mention we're going to be talking about universal healthcare tomorrow on the Morning Show at 7:30. So, your final thoughts [Dr. Palmer]?

Palmer Well, I think what we're looking at is an era of defunding of public health services, and it's very important that the representatives of the vulnerable pull together in making sure there's an adequate continuum of care, and an adequate safety net. Different people need different things. And it *all* needs to be available. We need to have it based on the individual person's need. With an aging population you need nursing home beds, but you also need home healthcare workers, you need community services, you need primary care clinics, and you need teams that help support people in their homes.

Lewis So, not an "either/or" situation?

Palmer No, it's not "either/or," and it all needs to be funded.

Lewis Sal Rosselli, final comments from you?

Rosselli It really ... it's a matter of organizing politically. Sixty-five percent of the funding for in-home support services comes from the state of California. Almost two-thirds of the funding for skilled nursing facilities comes from the State. There are tax dollars. Our Governor intends to reduce that funding; what's needed is that it needs to be increased. We could join together, right? We could join together to force our folks in Sacramento to change their priorities.

Lewis Final thoughts from you, Herb Levine?

Levine Yes. I think unfortunately, given the reality of limited dollars, it *is* "either/or." One-third of San Francisco's Medi-Cal monies go to a nursing home. That ... that kind of makes it an "either/or" issue.

Lewis All right. Well we're going to wrap it right there and I want to thank all of our guests for being with us ... Sal Rosselli, President of SEIU United Healthcare Workers West; Dr. Theresa Palmer, former staff doctor and shop steward for the doctor's union at Laguna Honda, and a geriatrician; and also Herb Levine, Executive Director of the Independent Living Resource Center. Thank you all so much for being with us.

Levine Thank you.

Rosselli Well, thank you, Andrea.

Palmer Thank you.

Lewis And thanks to the callers, as well. Eight o'clock, here on KPFA ... KPFB in Berkeley ... KFCF in Fresno.