

Timeline and Summary of Board of Supervisors “Committee of the Whole” Hearings on Laguna Honda Hospital’s Decertification

- **December 1, 2022 “Action Plan” about “Behavioral Health”**

As part of LHH’s consultant contract with Health Services Advisory Group (HSAG) in its “*Quality Improvement Expert*” role, HSAG’s first “*Root Cause Analysis*” Report 1# issued on December 1, 2022 included a third “*foundational root cause category problem*” titled, “*Behavioral Health and Substance Abuse*” that had contributed to LHH’S decertification, which included “*Root Cause #1*” of the “*Behavioral Health*” category had involved LHH’s “*Lack of behavioral health and SUD experience.*”

When the milestones were eventually developed and released in the first “*Action Plan*,” milestone #1 for Behavioral Health category “*Root Cause #1*” stated:

“*Milestone 1: Secure external consultant's report that investigates alternative models to meet resident behavioral health needs utilizing industry standards and meets regulatory compliance.*”

The Action Plan stipulated the deliverable for “*Milestone #1*” due by January 6, 2023 was for an external “*Consultant Report*” that apparently would identify “*alternative models*” to meet resident behavioral health needs at LHH.

- **On June 14, 2022**, the Board of Supervisors held its first “*Committee of the Whole*” **hearing** on the crisis at LHH following the facility’s decertification on April 14, 2022. According to a partial verbatim **transcript** of that hearing, in response to a question from Supervisor Safai [4:45:01 on audiotape] about whether the issues at LHH that had led to decertification had been due to mixing of different patient populations at LHH had arisen because of mixing behavioral health patients with mental health and substance abuse issues, LHH’s acting CEO, Roland Pickens deflected and didn’t answer Safai’s question directly, but acknowledged there has been an increase in behavioral health patients over the past 15 years [when Dr. Mitch Katz’s “*Flow Project*” had first begun; actually, the “*Flow Project*” began in 2004 or earlier, 18 years ago].

Safai followed up, asking whether there was a plan to deal with the needs in service delivery to different patient populations at LHH. In response, Pickens noted that one of the HSAG consultant recommendations LHH was considering, was “*cohorting*” [grouping] patients with disparate healthcare issues into separate areas where they can get the specialized individualized care they need, which Pickens indicated is very common in healthcare.

Safai again followed up again (at 4:47:14 on audiotape) asking whether LHH might then “*put more senior populations amongst themselves and the younger population amongst themselves.*”

Pickens responded saying LHH basically has two [patient] Towers. Pickens indicated “*So, it sets itself up for being able to have one set of programming in one Tower and another set [of programming] in another Tower. So, at this point the options are really many for us in terms of how do we best structure the facility going forward, to minimize particularly any regulatory noncompliance as it relates to substance use and behavioral disorders.*”

Safai again followed up asking [at 4:48:07 on audiotape] regarding whether part of the recertification plan the HSAG consultants were recommending in terms of re-organizing and managing LHH: “*Would [cohorting patients in a unit, or in separate towers] then happen as part of [LHH’s] recertification?*” At 4:51:05 on audiotape, Pickens responded saying it very well could, and added “*cohorting of patients is one of those things, and we will be looking forward to consultants giving us their recommendations before we actually submit the [CMS recertification] application at the end of August.*”

The plan to split use of LHH’s two patient towers in order to cohort different patient populations has been under study since at least June 2022. And San Franciscan’s have never received any reports about whether that plan is still under consideration, or whether that will actually come to fruition.

- On **May 9, 2023** Mr. Pickens told the Board of Supervisors during a second “*Committee of the Whole*” **hearing** that a behavioral health workgroup had been formed that was exploring options and would be making recommendations for caring for patients with mental health and/or substance use disorders either at LHH or somewhere else. **Pickens stated the workgroup was looking at behavioral health programming options within Laguna Honda in separate units** so those individuals could receive targeted behavioral health care, while at the same time not placing other residents at risk who don't have behavioral health needs. Pickens stated the workgroups recommendations would be presented in September or October 2023.
- On **September 26, 2023** Mr. Pickens told the Board of Supervisors during a third “*Committee of the Whole*” **hearing** that *a fuller, more robust, behavioral health needs analysis focused on expanding the number of Behavioral Health bed capacity in San Francisco was underway and would be presented to this Commission in October of 2023.*

During the September 26 hearing, **Supervisor Mandelman** noted [at 1:22:30 on videotape] that a challenge at Laguna Honda has been the inappropriate mixing of populations with different needs. He suggested it might make sense to think about physically separating and having different facilities or parts of facilities used for different *populations*. *Mandelman noted a Working Group had been formed to study options for placing people with serious mental illness at Laguna Honda*, and wondered if San Francisco might need a different version of Laguna Honda. Mandelman asked if the Workgroup was ongoing, **whether the Board of Supervisors would see a proposal**, and where that proposal was at.

Pickens responded to Mandelman saying [at 1:25:19 on videotape] that the “*Action Plan*” that resulted from the [first] “*Root Cause Analysis*” report issued on December 1, 2022 had called for “*the creation of a [work]group to reevaluate behavioral service operations at Laguna. That group has been meeting over the last year, and has come together and will be presenting to the Health Commission at the meeting in October*” 2023.

Here we are in September 2024, and **the workgroup report Mandelman asked to see on September 26, 2023 has still not been presented in public to the Health Commission** or to the LHH-JCC.

- On **October 10, 2023** a “*Behavioral Health Improvement Project at Laguna Honda Hospital*” **report** was presented by LHH’s then Interim Chief Medical Officer, Dr. Neda Ratanawongsa, to the Health Commission’s LHH-JCC (Joint Conference Committee). Dr. *Ratanawongsa noted three workgroups were studying three specific objectives of behavioral health programming at LHH.* That report stated on slide #13 that **LHH was still facing the challenge of identifying a location for behavioral health units at LHH.** Slide #12 stated a disadvantage of having “*focused*” behavioral health units was that the cohorting criteria could restrict resident preferences and may not “*lend well*” to new admissions to LHH, without explaining why having separate behavior health units would impact hospitalwide admissions. Dr. *Ratanawongsa noted that the Workgroup was still conducting a literature review of models of focused units* for behavioral health patients.

Ratanawongsa’s presentation featured slide #11 touting a **short-term behavioral change pilot project** for six patients with complex behavioral health care needs of **providing pet robots** — artificial intelligence machines resembling actual pets, not stuffed toys — **for select residents with dementia on two units**. She indicated 10 pet robots (5 cats and 5 dogs) had been purchased using the “*LHH Patient Gift Fund*’s” so-called “*wish list*” category, and 8 of the pet robots had been distributed. [As an aside, using LHH’s “*Patient Gift Fund*” rather than LHH’s operating budget for clinical interventions suggests another potential abuse of the patient gift fund, again.]

Ratanawongsa indicated the devices **might** help reduce loneliness in older adults and people with Alzheimer’s disease and related dementias, because loneliness and boredom can trigger behavioral escalations.

While this intervention may be of therapeutic value for dementia and Alzheimer’s patients, **the behavioral healthcare violations and regulatory citations that contributed to LHH’s decertification did not involve elderly patients with dementia’s. The violations and citations involved younger, more robust patients with severe mental health and substance abuse issues.** Patients with dementia’s were not the “*cohort*” of patients that the Board of Supervisors were concerned about regarding “*cohorting*” patients in LHH's two Towers.

Although Pickens claimed a behavioral health needs analysis focused on expanding Behavioral Health bed capacity was underway, no needs analysis report has been presented to the Health Commission about the number of behavioral

health beds needed. There was nothing in Dr. Ratanawongsa's October 10 presentation about programming at LHH for caring for patients with severe mental illness that Supervisor Mandelman hoped the special Workgroup was studying and would be presented in the report Pickens promised would be released in October 2023.

- On **October 17**, Health Commissioner Tessie Guillermo presented a summary of the LHH-JCC's October 10 "*Behavioral Health Improvement Project at Laguna Honda Hospital*" presentation to the full Health Commission. Guillermo indicated the Behavioral Health Workgroup was still working with the HSAG consultants to "*explore models*" having focused units for behavioral health patients, and that LHH was piloting a **six-patient unit** to determine "*next steps*," suggesting that the Workgroup had not completed making a final recommendation for a long-term plan for such units. Apparently, Guillermo was referring to the six patients involved in the artificial intelligence pet robots short-term test project.

Based on Commissioner Tessie Guillermo presentation on October 17, it appeared a formal recommendation from the Workgroup for a long-term plan for cohorting behavioral health patients had still not been completed. Since then, no further presentation about using LHH's two Towers to segregate patients by behavioral health cohort has been made in open session to the Health Commission or to the LHH-JCC.

- Although a separate behavioral health study was presented to the Health Commission on **March 19, 2024** (long after the date Picken's had indicated would be presented in October 2023), that March 2024 report presented by Dr. Hillary Kunins, Director of Behavioral Health Services at SFDPH, did not list any specific efforts underway to expand or acquire new beds and facilities for care and treatment behavioral health patients, or how behavioral health beds at LHH might be part of the Behavioral Health bed expansion. LHH wasn't even mentioned in Kunins' presentation.