

July 2013

Laguna Honda Hospital Patient Dumping – Part 2

Of Mold and Men

by Patrick Monette-Shaw

Between dumping of mental health patients into Laguna Honda Hospital and out-of-county, and dumping of elderly skilled nursing patients out-of-county to make room for mental health patient admissions, who knew that news of mold in the LHH's new kitchen would be overshadowed by the sudden resignation of LHH's widely-despised public information officer, Marc Slavin?

And that Slavin's ouster would obscure news that "consensus" Mayor Ed Lee would be joined by a compliant Board of Supervisors reaching consensus to shut down San Francisco's Mental Health Rehabilitation Facility during budget negotiations.

Minister of Misinformation Vanishes

If I were a San Francisco Health Commissioner, I'd be furious that LHH's CEO Mivic Hirose appears not to have notified the Health Commission before Friday, June 21 that Marc Slavin — Laguna Honda Hospital's notorious public information officer and communications director — had suddenly resigned days before, since news of his pending resignation was being openly discussed at LHH for at least two weeks beforehand, and line staff knew Slavin was physically gone the day before his resignation announcement was made. This is news that clearly should have been shared with the Health Commission to prevent them from being caught off guard, but news that appears to have been withheld from them.

Slavin, you may remember, creatively spun to I-Team investigative journalist Dan Noyes in [May 2010](#) that the patient gift fund "is not a gift fund for [our] residents" when Noyes first broadcast news that LHH's administrators had inappropriately been spending hundreds of thousands of dollars of donations to the patient gift fund on staff perquisites, instead.

Reliable sources have disclosed that Slavin threw in the towel and resigned last week — or was asked to resign and thrown out after six years of providing propaganda services to LHH and successive Mayors.

Slavin's disappearance is reminiscent of the hit-job on LHH's former Chief Operating Officer, Gayling Gee, who had vied with Mivic Hirose for the job as LHH's Director of Nursing when both women served as Co-Directors. Within just days of Hirose's promotion to being LHH's CEO, and after Ms. Gee spoke out during a Health Commission meeting advocating to save LHH's Adult Day Health Program, using her First Amendment free-speech rights as a private citizen — rights for City employees protected by San Francisco's Sunshine Ordinance — Ms. Gee was told by Hirose on a Friday to get out within 24 hours. Gee cleared out her office Saturday. On Monday, nobody said a word about her forced ouster. After serving for two decades at LHH, there was no going-away party for Gee — and no thanks for her dedicated services.

For six years, Slavin essentially served as LHH's shadow CEO, propping up Hirose when not running the entire show, including reports that he intermittently inserted himself into clinical-care decisions regarding specific patients with no medical license to do so. He also inserted himself into interviewing job applicants and hiring decisions throughout the hospital. Without Slavin around to prop her up, Hirose's own days may be numbered.



LHH's former public relations director, **Marc Slavin**. Photo courtesy of ABC-TV Channel 7's I-Team; used with permission.

Inset: Slavin's brooding photo on [Linked-In](#) social media web site

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Although staff and patients often wondered what Slavin’s job duties involved, he served alternatively as Hirose’s ghost-writer, speech writer, “spokesperson” — and staff bouncer. While he was on the City payroll, it is suspected that Slavin had also handled communications for Louise Renne’s Laguna Honda Foundation, as the liaison between the City and the non-profit, since LHH’s web site referred inquiries regarding Renne’s Foundation to Slavin’s office in the former priest’s suite remodeled for her Foundation.

There are reliable reports that intense friction between Slavin and Hirose had recently escalated. One high-level source has confirmed that Hirose and Slavin weren’t getting along anymore, and during recent public meetings Slavin sat in seating for members of the public, not at the main table, sending a signal that he was on the outs with Hirose.

Previously, Slavin appeared untouchable, due to his benefactress former City Attorney Louise Renne, and former Director of Public Health Mitch Katz. As a 1375 Special Assistant XVI — a job code typically reserved for the Office of the Mayor and Board of Supervisors — observers suspected Slavin was brought in by then-Mayor Gavin Newsom.

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But once Katz fled to Los Angeles following a whistleblower complaint that Katz had accepted significant consulting fees from a City contractor he had steered lucrative consulting contracts to, and after Renne’s Laguna Honda Foundation imploded, Slavin lost his political cover and soon found himself at Hirose’s mercy and vindictiveness.

Slavin didn’t get to spin news of his own ouster, other than to claim to staff in a good-bye note that he was resigning in order to find time to complete his PhD thesis. Hirose and LHH didn’t bother staging the usual-and-customary “good-bye” party to honor Slavin’s six-year reign of propaganda and terror.

Slavin is pursuing a PhD in Philosophy and Religion from the California Institute of Integral Studies; as of May 2010, it was known that Slavin’s doctoral thesis would focus on Jacques Derrida, a controversial French philosopher whose main contribution focused on “deconstruction.” Although Cambridge University awarded Derrida an honorary doctorate in 1992 despite opposition from its Philosophy Faculty, 20 philosophers signed a letter of protest that Derrida’s work “does not meet accepted standards of clarity and rigour.”

“ When Sweet’s memoir *God’s Hotel* about Laguna Honda was published two years later, she did not wade into discussion of deconstruction, in general, nor did she venture into any detailed examples of Slavin’s use of deconstruction during his reign at LHH, in particular.”

On May 20, 2010 this columnist asked former LHH physician Dr. Victoria Sweet for a definition of “deconstruction” in layman’s language. Sweet replied:

“The short answer, the way I understand it is this: Deconstruction is, essentially, the basis of advertising. That’s right. It comes out of the Nazi era, advertising, re-framing and its purpose is rhetorical, to convince you that what you thought was there, wasn’t; what you thought it meant, didn’t; because, as Derrida says: Nothing means anything; so, therefore, everything means what you want it to mean.

“For example: We rename ‘doctor’ — which in Latin means quite learned, and so implies, education and authority — with the name ‘health care provider,’ which means nothing, but implies something like a vending machine; where health care is a fixed commodity, and the provider is as replaceable as a Mars bar, and as little respected.

“Or [as Slavin attempted to do] we rename the ‘Patient Gift Fund’ as the ‘Gift Fund.’ Then it can be used for, well, just about anything.”

Asked whether this reporter could use this explanation in a then-pending article I was writing, Sweet declined permission, saying on May 20, 2010, “No, you cannot crib from this or paraphrase it. I will be using it myself, and it needs to be explained by me much more definitely.” Unfortunately, when Sweet’s memoir [*God’s Hotel*](#) about Laguna Honda was published two years later, she did not wade into discussion of deconstruction, in general, nor did she

venture into any detailed examples of Slavin’s use of deconstruction during his reign at LHH, in particular. Sweet didn’t use this description, and simply abandoned exposing the deconstruction techniques Slavin employed at LHH.

Slavin’s *second* foray into deconstruction at LHH ended badly in late 2008, barely over a year into his six-year tenure. In October 2008, Slavin sought me out, acknowledging that I was an LHH “opinion leader” among staff, and asking my impression of his idea to **remove the word “hospital” from the facility’s name**. He sought to re-brand Laguna Honda as not a hospital, a feat that might have made Derrida proud. I instantly offered six reasons why it was a poor idea, advising him to discuss it with LHH’s medical staff first.

But Slavin disregarded my advice and a week later during an off-site retreat of 50 of LHH’s senior managers, he made a **formal presentation** of various logo concepts developed by Molly Dugan and Associates, including several versions of logos featuring a lotus flower with the word “hospital” removed. During the retreat Slavin looked right at my boss, Dr. Lisa Pascual, Chief of Rehabilitation Services, while telling the assemblage that he had discussed the idea with two of her staff, and both had approved dropping the word “hospital.” Slavin was referring to me and to LHH’s Rehabilitation Coordinator, Paul Carlisle, a senior physical therapist.

Pascual was initially furious that two of her staff — without consulting her beforehand — had approved of Slavin’s recommendation, until Carlisle told her he had never had any such conversation with Slavin, and until I told her I had actually told Slavin that his idea sucked. It was clear Slavin had intentionally lied to the 50-member retreat, who were collectively appalled by the idea of eliminating the word “hospital,” and who ordered him back to the drawing board. It was the first of many times he was observed lying to staff during key meetings.

Although told in 2008 to retain the word “hospital,” by 2010 Slavin was issuing various collateral and marketing materials in which he removed the word hospital from the name of the facility every chance he could muster, including as late as May 2013 removing the word hospital on covers of bi-monthly reports to the Health Commission.

Slavin’s Linked-In social media web page says as of June 22, that he is a “writer, communications professional seeking new opportunities.” His Linked-In profile claims that as an attorney, writer, academic, communications specialist, and LHH’s Communications Director, he “overhauled communications,” “rebranded LHH to reset its public image,” and “motivated staff members to harness the potential for organizational transformation.”

In truth, Slavin terrorized staff, was widely hated, and failed at “resetting” LHH’s image. He “motivated” no one, although he did frighten staff into silence. His Linked-In profile says he has advised public sector agencies on organizational development, internal communications, and public outreach. But given his disdain for working with the public and neighbors surrounding LHH, and the level of hatred LHH staff felt towards Slavin, any organization would be making a deadly mistake hiring him to perform any of this type of work, given his utterly despicable performance at Laguna Honda Hospital.

Along with Slavin’s ouster, there are reports that LHH suddenly and completely disbanded its Communications Department by the end of the week, the very three-person empire Slavin created that at one point was consuming over \$300,000 a year in salaries and benefits. Prior to his arrival in mid-summer 2007 on assignment to “stop the negative publicity about LHH” for Louise Renne’s Laguna Honda Foundation as he confided to me, Laguna Honda had never needed — and never had for over 100 years — a P.R. department in a public hospital serving what is essentially a “captive audience” of the medically indigent who have nowhere else to go.

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Calls to LHH’s Communications Department now reach a voice recording that says “This is Marc Slavin. I no longer work at Laguna Honda Hospital and Rehabilitation Center. For assistance, please call the Administration Office at area code (415) 759-2363.”

LHH’s Communications Department also appears to have imploded, and is now defunct.

The Last Straw and Hara-Kiri

As Dr. Derek Kerr's wrongful termination settlement agreement was nearing an end, LHH needed to show that his termination hadn't affected LHH's hospice program. LHH's administration scrambled, and on January 18, 2013 applied for a "Leadership Award in Hospice Care" from the California Coalition for Compassionate Care (CCCC), needing an "award" to show Hirose had improved the hospice programming.

CCCC awarded it to LHH "for 25 years" of Hospice and Palliative Care Services. But the [press release](#) Slavin cranked out announcing the award omitted that it was for 25 years of service, and named only Hirose's toadie, Clinical Nurse Specialist Anne Hughes, as having contributed to earning the award although she had served on the Hospice for only two years. Slavin elided from the press release that it was due to Kerr's 21 years of work developing the hospice in collaboration with his Hospice team of employees, the Zen Hospice Project, the San Francisco Visiting Nurses Association, various community donors, Drs. Johnson and Wilson, and others who had carefully built LHH's Hospice program. Slavin's grubby credit-grab was totally unnecessary, but typical of his deconstruction.

On March 26, 2013, Dr. Maria Rivero exposed Slavin's distorted shenanigans to LHH's Joint Conference Committee of the Health Commission. "This [CCC] award did not just come to Laguna Honda — it was vigorously sought. It is shameless self-promotion to aggrandize yourselves and Anne Hughes by ignoring those who built the Hospice Program," Dr. Rivero testified to the JCC's Health Commissioners.

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Soon thereafter, hundreds of folks in the Bay Area hospice community and CCCC's Board of Directors who granted the award learned of Slavin's gaffe, and the CCCC received extensive feedback from the hospice community and the CCCC's own members concerning LHH's corruption of the award.

CCCC's Executive Director indicated they would investigate, and a member of Louise Renne's Foundation board of directors noted the bad press and public fiasco was threatening the reputation and viability of the CCCC. The "Hospice Leadership Award" was to be presented to LHH at a gala at the Airport Hilton Hotel on April 9, 2013, but even Anne Hughes reportedly declined to attend despite the key role Slavin gave her in LHH's press release. Two months later, rumors of Slavin's imminent departure began.

"Slavin's fatal flaw was producing propaganda that repeatedly backfired, sullyng the very 'brand' he was hired to burnish," says Dr. Kerr.

Like his spin control that the \$3,500 patient gift fund expense to purchase pedometers was justified so nurses could "clock themselves as they walked across the campus." Or Slavin's jujitsu with Dan Noyes, blundering that LHH's patient gift fund "is not a gift fund for [our] residents." Or the time Slavin told JCC Health Commissioners there was "just one" neighbor complaining about the noise emanating from the new hospital; at the JCC's next meeting, seven angry neighbors showed up to denounce Slavin's "deconstruction."

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Or like his *first* foray into deconstruction that had ended badly in March 2008, within the first six months of his employment at LHH. On February 25, 2008, during a meeting of the West of Twin Peaks Central Council [an umbrella group of smaller West Side neighborhood homeowner's associations], Slavin attacked my reputation during this meeting I didn't attend and so couldn't defend myself against the false allegations he made about me.

Slavin had been invited to address WOTPCC as its guest speaker, and during his remarks brazenly stated that "Mr. Monette-Shaw has sued the City three other times," without bothering to tell the homeowner delegates that my public health, public interest lawsuits involving LHH did not result in any monetary gain, and could not have. Slavin was trying to make me out as a money-grubbing opportunist, but was silent on the fact that my two lawsuits [not three, as he wrongly alleged] in no way ever benefited me.

Slavin's clever inference that I was a "vexatious litigant" to the homeowner group was intended to harm my reputation, but it completely backfired on him, and undermined his working relationship with neighbors long afterwards. The homeowners felt his comments unprofessional and malicious, and inappropriate, unnecessary, and reprehensible. On March 26, 2008 the [WOTPCC submitted a formal letter](#) to LHH's then Executive Administrator, John Kanaley, lodging a complaint to document their "objections in the strongest possible terms [regarding] the methods, tactics, and practices employed by the community affairs staff at Laguna Honda Hospital," in particular, Slavin's nonsense.

The Department of Public Health finally realized Slavin's Communications Department — and his incessant deconstruction — was doing more harm than good. Slavin brought great disrepute on LHH during his six-year reign, and in truth, he single-handedly generated more "negative news" about LHH than he was brought in to stop for Ms. Renne. His bungling of the propaganda announcing the CCCC's 25 years of hospice service award appears to have been the last straw. Slavin became a Hara-Kiri victim of his own propaganda.

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Man of Mold: Norman Yee

Freshman District 7 Supervisor Norman Yee unwittingly became the Man of Mold, mistakenly attempting to circumvent recommendations by Harvey Rose, the Board's Budget and Legislative Analyst who holds a lucrative multimillion-dollar contract to perform accounting research regarding legislation pending before the Board of Supervisors.

On June 5, a Resolution introduced by Supervisor Yee was heard during the Board's Budget and Finance Subcommittee regarding an "emergency" sole-source contract not to exceed \$595,367 to repair a cart wash leak that resulted in extensive mold in LHH's new kitchen that needed to be abated. The cart wash room is where mobile carts used to transport food from the main kitchen to the patient's rooms are washed.

Although John Thomas, the LHH Replacement Project manager from Department of Public Works claimed during the June 5 hearing that there is a "temporary cleaning facility" for the carts used to transport meals to patients, LHH staff assert that the food carts are now just cleaned using disinfectant wipes, not fully washed.

Yee introduced this Resolution despite knowing that Mr. Rose had expressly recommended that a sole source contract *not* be issued, there was no "emergency" involved, that the amount be reduced by \$266,723 to only \$328,644, and that the Department of Public Works should be required to seek competitive construction bids from the lowest-responsive bidder to complete the remaining remediation of the mold in LHH's new kitchen. Yee's Resolution stupidly sought the full \$595,376 amount, ignoring Rose's concerns and recommendations.

“ But despite discovery of the mold in September 2011, the Director of the Department of Public Works didn’t declare an ‘emergency’ to allow immediate repair of the cart wash room and mold abatement until June 6, 2012, fully eight to nine months after the mold was first discovered. ”

Although LHH moved into its new facilities in December 2010 following its June 2010 ribbon-cutting ceremony, elevator maintenance staff working in LHH's new Pavilion Building didn't discover a water leak in the elevator's machine room until September 2011. The leak had gone undetected for an untold number of months and was eventually traced to the hospital's cart wash room on the floor above the elevator machine room, resulting in mold growing in several rooms.

But despite discovery of the mold in September 2011, the Director of the Department of Public Works didn't declare an "emergency" to allow immediate repair of the cart wash room and mold abatement until June 6, 2012, fully eight to nine months *after* the mold was first discovered. DPW initially estimated the cost to repair would be up to \$250,000, the threshold set in Administrative Code Section 6.60 that permits City department heads to award emergency

contracts without undergoing competitive bidding procedures. DPW awarded a not-to-exceed sole-source contract for just \$80,000 to Belfor USA Group to perform the demolition, mold remediation, and reconstruction work; Belfor began the remediation in late June 2012.

For his part, Mr. Thomas claimed that the delay declaring an emergency involved trying to figure out if the mold remediation work would be covered by LHH's insurance policies, or whether the repairs would be funded through recovery of funds via the lawsuit the City has filed against LHH's architects. Thomas further noted that in 2011, the Replacement Project was directed to redesign the cart wash space, since it was "incompatible with its use," and the space had to be redesigned.

In January 2013, Belfor submitted invoices for \$328,644 for remediation work completed through November 2012, and Belfor estimated it would cost an additional \$266,723 to reconstruct the facilities, for a total not-to-exceed cost of \$595,367. This led to the Resolution Yee introduced in May, four months after the City received in January 2013 Belfor's revised costs to complete the remediation.

But Mr. Rose noted that the emergency was not officially declared until June 2012 and that Belfor estimated the project would be completed in September 2013, fully two years after the "emergency" leak was first discovered. Rose had to point out to Supervisor Yee and the Budget and Finance Sub-Committee that Administrative Code Section 6.60 defines emergencies as those which demand immediate action for "conditions that involve clear and imminent danger to prevent or mitigate loss of, or damage to, life, health, property or essential public services."

As such, Rose questioned whether the mold problem at LHH met the City's definition of an emergency, and concluded that in his professional judgment it did not rise to the level of an emergency. Rose recommended that Yee's Resolution be revised to put the remaining \$266,723 in uncompleted work out to competitive bid to seek the lowest-responsive bid to compete the remaining reconstruction.

"This mold saga makes you wonder what else is wrong with the construction of LHH's replacement facilities, and when there will be more million-dollar fixes to repair substandard construction."

Yee charged ahead, ignoring Rose's recommendations. Yee had his Resolution calendared for a hearing, proposing to bypass competitive bids by awarding Belfor an amendment to complete the full \$595,367 in work. But following astute questioning by Supervisor John Avalos, Mr. Thomas admitted the work was not an emergency; Avalos got Thomas to agree to accept Rose's recommendation to seek competitive bids.

Poor Norman Yee. Hopefully he has now learned from this that when Harvey Rose speaks, the Board of Supervisors typically listens.

This mold saga makes you wonder what else is wrong with the construction of LHH's replacement facilities, and when there will be more million-dollar fixes to repair substandard construction.

In Rose's June 5 Budget and Legislative Analyst's recommendations analyzing Yee's proposed Resolution, Louise Simpson from the City Attorney's Office advised that San Francisco has sued Stantec, the LHH Replacement Project architect, for "total estimated damages in excess of \$45 million," but she provided no explanation as to why that lawsuit — initially reported as being filed in Superior Court hoping to recover \$70 million from Stantec in design and construction errors — has been potentially reduced by \$25 million to just \$45 million.

Man Behind Patient Dumping: Mayor Lee

Ever since planning for San Francisco's two-year budget got underway in early 2013, Mayor Ed Lee has been quietly working with San Francisco's Department of Public Health (DPH) and its Health Commission to "reconfigure" the Mental Health Rehabilitation Facility (MHRF) — renamed to the Behavioral Health Center — on SFGH's campus. The MHRF was supposed to be a long-term care facility for the mentally ill to keep them in-county.

DPH submitted a list of "Bielenson" budget cuts that totals between \$29.6 million and \$39 million, mostly in cuts to mental health services, that the Mayor appears to have incorporated into his budget submission for the upcoming two-year budget cycle.

DPH proposed — and the Mayor appears to have accepted — cutting \$12.7 million (43 percent) of the \$29.6 million, by “reprogramming” the MHRF into housing and dumping patients into Laguna Honda Hospital; cutting \$1 million (3.5 percent) from tuberculosis control programs; cutting \$8.8 million (30 percent) from various community-based services, most of which are mental health services, which cuts will grow to \$17 million beginning in July 2015; and cutting just \$7 million (23.7 percent) from HIV health services. The HIV cuts are the only ones being aggressively backfilled, and will likely not occur.

By accepting DPH’s budget proposal and incorporating it into the budget he submitted to the Board of Supervisors, Mayor Lee will be no better than Governor Ronald Reagan who shut down California’s mental health hospitals in the 70’s, and ended federal community mental health centers while President in the 80’s, because it will effectively eliminate all but 24 of the mental health rehab beds at the MHRF on the campus of San Francisco General Hospital.

It appears “consensus” Mayor Ed Lee has conned this compliant Board of Supervisors into reaching consensus to shut down the MHRF, even if it involves dumping San Francisco’s psych patients or the elderly out-of-county.

As reported in “[Who’s Dumping Grandma?](#)” in last month’s *Westside Observer*, the Board of Supervisors was required to conduct a State-mandated Bielsonson hearing on the Department of Public Health’s proposal to cut the remaining 47 mental health beds in the MHRF down to just 24. The MHRF had opened with 147 mental health beds, but was “reconfigured” to only 47 in 2003. It won’t be long before those remaining 24 beds are simply eliminated altogether.

During the Board’s Bielsonson hearing held on June 18, Director of Public Health Barbara Garcia tried to reassure the Board of Supervisors that only 12 of the mental health patients at the MHRF would be transferred to Laguna Honda. She claimed — falsely it seems — that the remaining 22 MHRF patients would be placed “in the community,” but Garcia failed to inform the Board of Supervisors that the plan appears to be to dump them into out-of-county facilities, not “into the community.” Managers throughout DPH are aware the plan will most likely use locked psych facilities out-of-county.

At the start of the Bielsonson hearing and prior to taking public comment, Garcia repeatedly acknowledged that “in preparation for healthcare reform [ObamaCare] to reduce costs and increase revenue generation, in the coming fiscal year DPH needs to reduce services that are not revenue generating.” Most of the \$17 million in the proposed cuts to community-based services are because DPH does not generate revenue by providing those services. Later in the hearing following public testimony, Garcia indicated that “one of the important things we’ve been looking at this facility [the MHRF/BHC] it’s about \$19 million [to operate annually] with only about \$2 million in revenue.”

Garcia testified “We will be closing one of the two skilled nursing facilities on the SFGH campus, and organizing those services to support discharges from SFGH, [which] we believe [will] increase revenue.” What this Garcia-speak means is that by closing skilled nursing beds for psych patients in the MHRF, SFGH will gain vacated space in the MHRF to be converted, essentially, into “housing” to more quickly discharge acute-care patients from General Hospital into. DPH will be able to increase SFGH revenues by being able to more quickly accept paying, revenue-generating new admissions into the acute-care hospital beds, using the MHRF as transitional housing to quickly dump patients out of the City’s acute-care hospital and trauma center.

Throughout the Bielsonson hearing, Garcia noted over and over that DPH needs to increase revenue, even though it is not an “enterprise” department like other City departments expected to earn revenue and not rely on the City’s general fund. Following impassioned public testimony during the Bielsonson hearing, Board President David Chiu asked Garcia if she had any final comments to make.

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Garcia suddenly felt an urge to present additional clarification, indicating, “DPH is closing the [MHRF] skilled nursing facility because we have a larger-scale nursing facility,” meaning, of course Laguna Honda Hospital. She conveniently ignored that the two skilled nursing facilities were designed for totally different types of patients — one with mental health needs, and the other for long-term care of the elderly and disabled, patient populations that rarely thrive well together.

Garcia further claimed that the patient movements from the MHRF to LHH were simply “lateral” moves, and then backpedaled, saying that only 12 of the MHRF’s 34 patients “need LHH’s admission policy,” trying to reassure members of the Board of Supervisors that DPH was planning to transfer 12, not 34, patients. Garcia — mimicking Slavin’s deconstruction techniques — failed to elucidate for the Board of Supervisors, whether only 12 of the 34 MHRF patients *need* placement at LHH, vs. whether only 12 of the 34 actually *meet* LHH’s admission criteria, and if they don’t will be dumped out-of-county, deconstruction being a one-way ticket.

Garcia didn’t clarify what she meant by “need LHH’s admission policy,” and the Board of Supervisors failed to ask her for clarification between “need” vs. “meet” the criteria.

For their part, a few senior managers at LHH are claiming to community leaders that only 6, not 12, of the MHRF patients are slated to move to LHH, clearly contradicting Garcia’s 12; the senior managers have also acknowledged the remaining MHRF patients will be placed out-of-county, not in “the community,” as Garcia may have misinformed the Board of Supervisors.

“Consensus” Supervisors Support Bielson Patient Dumping

Only four of the Board of Supervisors bothered to ask Garcia questions about the Bielson cuts; the remaining seven Supervisors raised no questions. The Board’s two gay supervisors — David Campos and Scott Wiener — asked only about the \$7 million in HIV service cuts, both men knowing that well over half of those cuts had already been backfilled, and all but a handful of those cuts will likely also be backfilled. Neither man asked about the mental health cuts, as if the LGBT community is immune from mental health issues, and as if there has never been admissions of gay men, lesbians, or transgendered people to the MHRF.

Only the Board’s two African-American Supervisors — Malia Cohen and London Breed — bothered asking Garcia questions about the mental health cuts and Laguna Honda Hospital.

Supervisor Cohen asked about the mental health cuts. Garcia lamely claimed “many of those individuals will be going into community placement,” for those who need “locked facilities,” but neglected telling Cohen that Garcia meant into out-of-county placements, since San Francisco has few, if any, in-county locked facilities.

Cohen pushed further, asking if there was sufficient room at Laguna Honda, indicating her concern that “the number of folks who need [skilled nursing facilities] will outnumber the number of beds that are available at Laguna Honda Hospital.” Again, Garcia played disingenuous, indicating that as individuals leave LHH, then DPH will transfer people over. But Cohen’s a smart woman, and she must surely understand that for every bed formerly housing the elderly who need skilled nursing care that is converted into beds for mental health patients, there will be one fewer bed for elderly demented patients needing 24/7 skilled nursing care.

Finally, Cohen noted that Garcia had said the Mayor had restored the mental health care cuts. Repeatedly, Garcia noted that the Mayor had restored *all* of the mental health cuts. But this doesn’t appear to be the case, since the mental health beds at the MHRF/BHC were not restored, and it’s not clear how the Mayor could have restored the \$17 million in looming community-based cuts, which haven’t even been identified yet, and won’t be until an RFP is issued in 2014 to determine which community-based providers will lose their City contracts.

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Moreover, this reporter placed a records request with Ms. Garcia and DPH's public information officer Eileen Shields on June 19 requesting a list of all of the mental health cuts the Mayor restored, but by June 27 neither Garcia nor Shields had even bothered to acknowledge receipt of the records request, nor did they provide a list of mental health services purportedly restored by Mayor Lee.

Nobody explained why the mental health cuts remained on the Bielsonson roster of services being eliminated, if the Mayor had already restored *all* of the mental health cuts before the Bielsonson notice was generated and issued on June 4, 14 days before the Bielsonson hearing as required by State law. After all, Bielsonson hearings are held to vet services being cut, not those that were restored. And nobody was forthcoming about when the Mayor may have restored the mental health cuts, or whether Lee did so between June 4 and June 18.

For her part, Supervisor Breed initially asked only about cuts to the HIV program and mental health cuts to community-based providers, and only later asked about whether beds at Laguna Honda are "being used for people who aren't necessarily elderly, or don't necessarily fit the [admissions] criteria." Breed may not know that the LHH admissions policy permits admitting anyone over age 17, since there are many young patients who wind up with traumatic brain injuries or orthopedic fractures who need skilled nursing care and physical medicine rehabilitation services, or LHH's Hospice.

Garcia indicated DPH is following LHH's admissions policy, not changing that policy, but she didn't acknowledge that LHH is — by reliable report — internally considering changing the admission criteria to its North Mezzanine patient neighborhood from "dementia" to using "cognitive impairment," potentially paving the way for an admissions policy change, which internal conversation Garcia chose not to share with Supervisors during the Bielsonson hearing.

At the end of the hearing, President Chiu simply moved the agenda to its next item, without taking a vote on whether to accept or reject the Bielsonson cuts. State law only requires that a hearing by County supervisors be held, not that they are required to vote on proposed cuts. So that's all Supervisor Chiu allowed before moving the agenda.

Supervisors Actively Ignore Public Testimony

Rather than "actively listening" to members of the public who took time to attend the Bielsonson hearing, the Board of Supervisors actively and studiously ignored listening to the testimony, displaying pure hubris and clear disrespect to over 100 members of the public who testified.

The Supervisors were busy chatting among themselves when a woman named Colleen who works at St. Anthony's testified that the City has been reducing behavioral health services over the years, and there has already been "about a \$70 million reduction to community-based mental health and behavioral health services," on top of the \$29 million to \$38 million cut DPH now proposes to chop, mostly involving mental health services.

The Supervisors ignored Michael Lyon, a long-time patient advocate affiliated with the Gray Panthers and Senior Action Network, when he testified that behavioral health beds have already been severely cut back and converting the MHRF into residential housing is no substitute for so-called "supportive housing" with supports being offered on-site. Lyon testified that reprogramming the MHRF is not just robbing Peter to pay Paul; it's robbing both Peter *and* Paul.

But the Supervisors weren't listening. They were too busy texting from their cell phones, sending e-mails from their laptop computers, and chatting among themselves.

“ Nobody explained why the mental health cuts remained on the Bielsonson roster of services being eliminated, if the Mayor had already restored all of the mental health cuts before the Bielsonson notice was generated and issued on June 4. ”

“ Rather than ‘actively listening’ to members of the public who took time to attend the Bielsonson hearing, the Board of Supervisors actively and studiously ignored listening to the testimony, displaying pure hubris and clear disrespect. ”

The Supervisors ignored testimony from the second public speaker, Vivian Imperiale, a past president of the National Alliance on Mental Illness San Francisco and past president the National Alliance on Mental Illness California, who testified that “transferring patients from the MHRF to LHH was *not* a viable alternative,” and that “patients deserve nothing less than an environment where hope is the road, and recovery is the destination,” to applause that erupted.

Instead, two Supervisors sat at the back of the room lost in deep discussion during the entire public comment period, while Supervisor Scott Wiener paced about Board Chambers talking with various people, and other Supervisors were observed e-mailing, and texting. None of them — with the sole exception of Supervisor Norman Yee — appeared to be actively listening to public testimony regarding the Bielsonson cuts being presented.

After all, the Health Commission’s minutes for May 7, 2013 show that the Health Commission did not discuss in any detail the proposed Bielsonson cuts, either. Its minutes also show that the Health Commission did not discuss publicly in any detail a proposed *increase* of \$21.2 million for out-of-county locked facilities introduced for a separate Board of Supervisors hearing that will occur sometime after adoption of the Mayor’s two-year budget.

What are San Franciscans to expect from this crop currently sitting as our Board of Supervisors? Supervisor Jane Kim claims she believes in “values-based budgeting,” but is cutting mental health services in San Francisco to the tune of over \$100 million across the past decade really a San Francisco “value”?

“ How long will it take for historians to look back and finger this ‘consensus’ Mayor and his now-compliant ‘consensus’ Board of Supervisors as being responsible for the death of in-county mental health beds at San Francisco’s MHRF, all in the name of increasing revenue — making them no better than Ronald Reagan? ”

How long will it take for historians to look back and finger this “consensus” Mayor and his now-compliant “consensus” Board of Supervisors as being responsible for the death of in-county mental health beds at San Francisco’s MHRF, all in the name of increasing revenue — making them no better than Ronald Reagan?

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