



April 11, 2025

(VIA EMAIL)

Karen Tritz
Director, Survey Operations Group, Center for Clinical Standards and Quality
Centers for Medicare and Medicaid Services

Re: Laguna Honda Hospital and Rehabilitation Center's Renewed Request to
Reactivate Beds

Dear Director Tritz:

In 2023, as part of its recertification in Medicare and Medicaid, Laguna Honda Hospital and Rehabilitation Center ("Laguna Honda") agreed to suspend 120 skilled nursing beds from its State-issued license. **We write now to renew our request to restore the 120 beds.** As we explain in more detail below, the Centers for Medicare and Medicaid Services ("CMS") should confirm that Laguna Honda may restore the 120 beds for the following reasons:

1. Laguna Honda is not subject to the 2016 CMS regulation reducing the maximum number of residents per room from four to two because Laguna Honda was certified prior to 2016 and, as noted, offers rooms that are even larger than required. As noted in the final rule, "[e]xisting facilities with larger rooms are effectively grandfathered into compliance." Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities, 81 Fed. Reg. 68,688, 68,695 (Oct. 4, 2016). To the extent that CMS is applying the regulation retroactively to facilities that were built and certified prior to 2016, and offer rooms that are semi-private and far exceed the minimum size, its actions are arbitrary and capricious.
2. Laguna Honda's three-resident rooms are semi-private and offer each resident privacy, dignity, and more physical space than required by CMS's own standards.
3. Even if CMS takes the position that Laguna Honda is subject to the two-resident per room rule, Laguna Honda is plainly eligible for a variance based on the fact that restoring the 120 beds would meet the special needs of Laguna Honda's residents by providing them social engagement and connection, focused staff supervision, and shared language and culture, which are associated with better health outcomes.



And, CMS has already conceded that the rooms do not adversely affect the residents' health and safety.

4. There is a well-documented shortage of skilled nursing beds across the country.¹ Unless Laguna Honda can restore the beds, 120 San Francisco residents who could receive care in their own community will likely be sent to other jurisdictions or will utilize acute care beds that are inappropriate for the residents' level of care and could be used for patients with acute care needs.

We look forward to your response and are available to answer any questions you might have about our request.

Restricting Laguna Honda to Two Residents per Bedroom is Unreasonable and Arbitrary and Capricious

1. HHS Did Not Intend the Regulation Reducing the Maximum Occupancy per Room from Four to Two Residents to Apply to Previously Certified SNFs.

In 2016, the Department of Health and Human Services ("HHS") promulgated a final rule that revised the requirements that long-term care facilities must meet to participate in the Medicare and Medicaid programs. Among the changes was a reduction in the maximum occupancy per room from four residents to two. 81 Fed. Reg. at 68,690. That restriction did not apply to all existing skilled nursing facilities, as doing so would have resulted in a catastrophic reduction in available beds nationwide. Rather, it applied only to those facilities that are "constructed, reconstructed, or newly certified after November 28, 2016."

Notably, the 2016 final rule does not define the term "newly certified." But HHS's commentary in both the proposed and final rules make clear that its intent was to apply the rule prospectively, and not to existing facilities. For example, in its notice of proposed rulemaking, HHS wrote: "we propose to require in new § 483.90(d)(1)(i) that, bedrooms in facilities accommodate not more than two residents *unless the facility is currently certified to participate in Medicare and/or Medicaid . . .*" Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities, 80 Fed. Reg. 42,168-01, 42,221 (July 16, 2015) (emphasis added).

And in its 2016 final rule, HHS noted that a number of commenters responded to the agency's request for comments in a way that suggested misunderstandings of the proposed

¹ Am. Health Care Ass'n and Nat'l Ctr. for Assisted Living, *Access to Care Report*, <https://www.ahcancal.org/News-and-Communications/Fact-Sheets/FactSheets/AHCA%20Access%20to%20Care%20Report%202024%20FINAL.pdf>.



requirements. One “notable misconception” that HHS addressed was the “[b]elief that existing facilities would have to limit occupancy to two residents per room, even if that would reduce bed count.” 81 Fed. Reg. at 68,695. HHS also confirmed that “[e]xisting facilities with larger rooms are effectively grandfathered into compliance.” *Id.* Clearly, HHS understood that potential negative impacts of reducing occupancy for existing facilities.

Thus, it is clear that HHS’s intent was not to require facilities that were certified before November 28, 2016, and had not undergone any significant physical changes to modify their rooms to meet the new requirements. Laguna Honda was certified in Medicare before that date, and has not undergone any changes to the physical environment for its residents. While CMS terminated Laguna Honda’s provider agreement, nothing else about the facility, especially the physical environment, materially changed. Accordingly, the facility should still be subject to the four resident per bedroom limit.

2. Application of the Two-Bed Restriction to Existing Facilities is Arbitrary and Capricious.

Under the Administrative Procedure Act, an agency’s interpretation of a federal regulation is arbitrary and capricious where it cannot be reconciled with the agency’s own rules. Here, it would be arbitrary and capricious to interpret the two-bed rule as applying to all facilities, regardless of the size of the rooms, as that interpretation cannot be reconciled with HHS’s rule that requires rooms to measure at least 80 square feet per resident in multiple resident bedrooms. *See* 42 C.F.R. § 483.90(e)(1)(ii).

The Department’s own regulations provide that a facility must provide a resident in a shared room a minimum of 80 square feet. That standard has been in effect since 1990, and HHS did not change it in 2016. Presumably, HHS believes that a space of that size affords residents with sufficient privacy and dignity. A facility would comply with section 483.90 if it had a two-resident room measuring 160 square feet and a curtain separated the residents. But, under HHS’s reasoning, a facility with a three-resident room measuring over 240 square feet separated by a more substantial barrier than a curtain somehow provides less privacy and dignity.

If the two-bed rule were applied to facilities regardless of room size, a facility with more than two residents per room would summarily be required to reduce occupancy simply because it lost its Medicare certification—which in many cases is for reasons completely unrelated to the physical environment of the bedroom—even if the facility complied with HHS’s minimum square footage rule, which more squarely impacts a resident’s privacy.



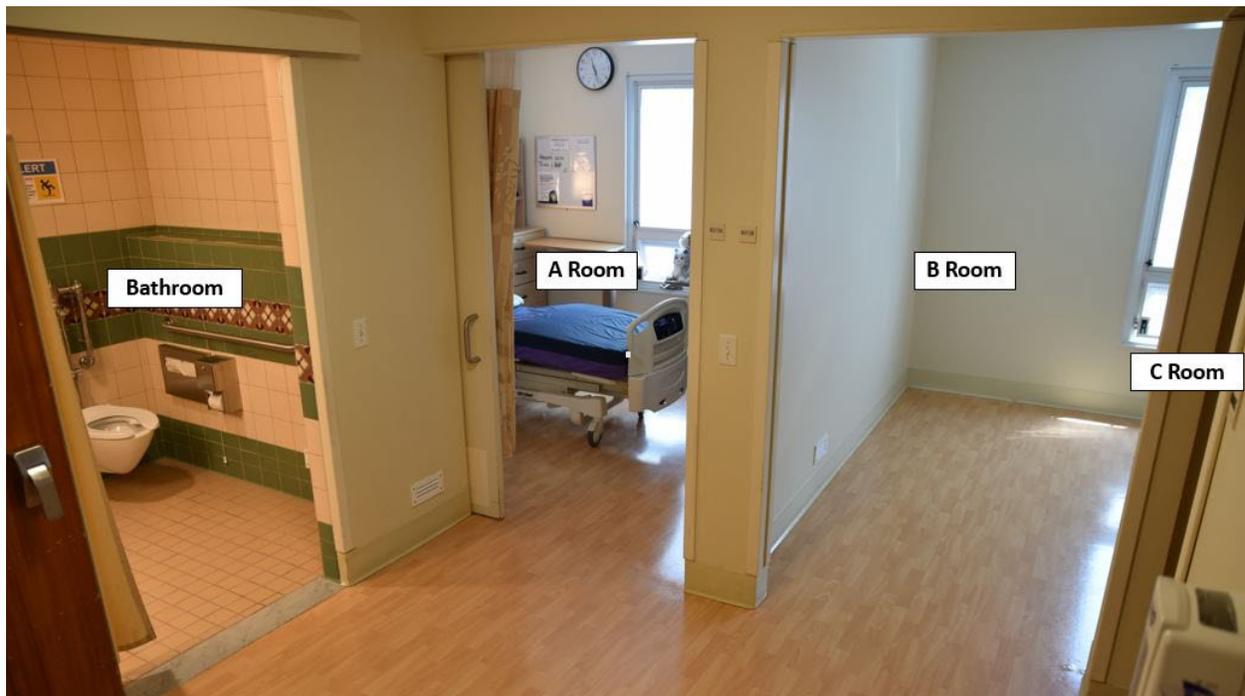
3. Application of the Two Bed Restriction to Laguna Honda is Arbitrary and Capricious.

As applied to Laguna Honda, section 483.90(e)(1)(i) is arbitrary and capricious because it does not account for Laguna Honda's room size and layout. HHS's stated rationale for imposing a two resident per room limitation was that four residents per bedroom was "not person-centered nor supportive of achieving the resident's highest practicable mental, physical and psychosocial well-being and is not an environment that promotes maintenance or enhancement of each resident's quality of life." 80 Fed. Reg. at 42,221. And, HHS went on to elaborate that "semi-private rooms are far more supportive of privacy and dignity." *Id.*

By imposing a blanket restriction across all facilities, HHS's regulation is overinclusive and unreasonable. It does not account for large rooms or multi-resident bedrooms that are semi-private. In fact, HHS received notice of this concern because, as disclosed in the final rule, "[o]ne commenter stated that their facility had large rooms and putting an occupancy limit on all rooms regardless of considering the size of the rooms would be unreasonable." 81 Fed. Reg. at 68,817.

Laguna Honda's rooms illustrate this overinclusion problem. Most notably, 100 of the 120 rooms at issue are semi-private. As shown below, each resident is able to live in a room separated from the other two residents by walls and can close a door to provide privacy. Together, the wall-divided beds and the bathroom are effectively a suite.







In addition to the semi-private layout of the rooms, they are also large, measuring an average of 123 square feet per wall-divided room. As noted above, Section 483.90(e)(1)(ii) requires bedrooms to measure at least 80 square feet per resident in multiple resident rooms and at least 100 square feet in single resident rooms. Not only do Laguna Honda's wall-divided rooms surpass the 80 square foot minimum by nearly 54 percent, they surpass the 100 square foot minimum by 23 percent.

Large, semi-private rooms, such as Laguna Honda's, clearly meet HHS's intent. Yet, CMS's application in this instance flies in the face of that intent. Indeed, HHS has already acknowledged that "as these regulations apply to every Medicare- and Medicaid-certified facility, we must also consider the potential for our requirements to discourage innovation, new construction, or reconstruction and to negatively impact access to care." 81 Fed. Reg. at 68,818. That is precisely what is occurring here—CMS's arbitrary and capricious action is negatively impacting access to care for hundreds of San Francisco residents.

For these reasons, CMS should determine that the two-resident restriction does not apply to Laguna Honda.

Granting a Variance to Allow Three Residents per Room is in Accordance with the Special Needs of Laguna Honda's Residents

While there is a compelling basis for CMS to confirm that Laguna Honda can reactivate



the 120-beds under Laguna Honda's current license and CMS need not reach the issue of a variance, Laguna Honda easily meets the standard for a variance to accommodate three residents per room. Federal regulations allow CMS, or in the case of a nursing facility CDPH, to grant a variance when the facility demonstrates in writing that the variation is in accordance with the special needs of the residents and will not adversely affect residents' health and safety. 42 C.F.R. § 483.90(e)(3).

By letter dated November 27, 2024, we asked CMS to approve a variance to permit three residents per room. See Exhibit A. On January 21, 2025, we met with CMS staff who agreed that Laguna Honda met the requirement that the variance will not adversely affect residents' health and safety. Accordingly, we primarily address the question of how the proposed variance will be in accordance with the special needs of the residents.

As described in more detail below, Laguna Honda is home to four categories of residents with special needs: (1) residents with memory care and depression diagnoses; (2) residents at high risk of falling; (3) residents who are monolingual and speak either Spanish or an Asian language; and (3) residents with an HIV/AIDS diagnosis. Granting a variance is in accordance with their special needs because these residents will have better health outcomes and a better quality of life that comes from social engagement and connection, focused staff supervision, and shared language and culture. While these benefits will primarily impact residents who stand to gain a third roommate, they will be felt throughout the facility, to the extent that more patients will result in more group activities, staffing, and community facility-wide.

1. Laguna Honda residents have special needs relating to memory care and depression, fall risks, and language access.

Laguna Honda is one of the largest skilled nursing facilities in the United States, serving a population that reflects the diversity of the San Francisco Bay Area. For example, Laguna Honda is the only dedicated SNF for residents with HIV/AIDS in the San Francisco Bay Area, a palliative care unit, and complex care units. We invite you to view this short virtual tour to familiarize yourself with our facility: <https://www.youtube.com/watch?v=7b4jRHlAlso>.

Based on a careful review of our resident population, we have identified three categories of residents that have special needs:

- Residents who have memory care and depression diagnoses;
- Residents who are at a high risk of falling;
- Residents who are monolingual and speak either Spanish or an Asian language; and
- Residents with HIV/AIDS diagnosis.



These four categories of “Special Needs Residents” live in rooms throughout the facility. We have also determined that 185 Special Needs Residents occupy the 120 rooms where Laguna Honda has voluntarily suspended a third bed. Because these 185 residents would be most directly impacted by a variance allowing a third resident to be added to their rooms, we refer to them as the “Variance Impacted Residents.”

As explained in more detail below, each of these four categories of Special Needs Residents will benefit from a variance.

2. Granting a variance will benefit residents with memory care and depression diagnoses due to the increased social interaction that comes from having an additional roommate.

By adding a third resident to the three-bed rooms, Laguna Honda will improve the health outcomes of residents with memory care issues and depression. Our records reflect that 117 of the Variance Impacted Residents have a diagnosis requiring memory care, including cognitive impairment, Alzheimer’s disease, major neurocognitive disorder, various types of dementia, Parkinson’s disease, Huntington’s disease, and traumatic brain injury. And, 153 of the 185 residents are over the age of 60. Thus, a significant portion of the Variance Impacted Resident population is elderly and needs memory care support. In addition, 30 of the Variance Impacted Residents with memory care needs also have depression as one of their diagnoses.

The Centers for Disease Control and Prevention (CDC) has warned about the health risks associated with social isolation and loneliness. These risks include depression, heart disease and stroke, Type 2 diabetes, suicidality, dementia, and earlier death.² Studies have shown that social isolation among older adults is associated with a greater dementia risk, which can worsen cognitive decline and behavioral symptoms.³ And, while frail older adults are generally at increased risk of mortality, the risk is even higher for those adults who are also lonely or socially isolated.⁴

Creating and fostering social interactions and connections is a critical intervention to address social isolation. Individuals with memory care needs benefit from social interactions that

² Ctrs. for Disease Control & Prevention, *Health Effects of Social Isolation and Loneliness*, <https://www.cdc.gov/social-connectedness/risk-factors/index.html> (May 15, 2024).

³ Alison R. Huang *et al.*, *Social Isolation and 9-year Dementia Risk in Community-Dwelling Medicare Beneficiaries in the United States*, 71:3 J. of the Am. Geriatrics Society (Jan. 11, 2023), <https://doi.org/10.1111/jgs.18140>.

⁴ Emiel O. Hoogendijk *et al.*, *Frailty Combined with Loneliness or Social Isolation: An Elevated Risk for Mortality in Later Life*, 68:11 J. of the Am. Geriatrics Society (July 23, 2020), <https://doi.org/10.1111/jgs.16716>.



can reduce loneliness, depression, and cognitive decline.⁵ For example, a scoping review of 133 studies found that social connection is good for health and well-being and important to quality of life in long-term care facilities.⁶ People with dementia frequently have behavioral and psychological symptoms such as agitation, aberrant motor behavior, anxiety, elation, irritability, depression, apathy, disinhibition, delusions, hallucinations, and sleep or appetite changes.⁷ In one study, social interaction, relationships and communication with long-term care residents, in both one-to-one and groups, helped to improve the behavioral and psychological symptoms.⁸

These interventions are particularly relevant in nursing homes. The presence of strong social networks in nursing homes enhances residents' psychological well-being and helps mitigate the health risks associated with social isolation and loneliness. According to the CDC, "[s]ocial connection not only has a positive effect on individual health and well-being, but it can lead to many positive outcomes at the community level . . ."⁹ The CDC has noted that nursing homes are one of several types of institutions that help combat loneliness.¹⁰ A study published in the *Journal of Applied Gerontology* found that nursing home residents who received consistent social support from peers, staff, and family members had better overall mental health outcomes.¹¹ The research demonstrated that interpersonal relationships provide emotional security and motivation for residents to engage in their daily activities.¹²

For the 30 Variance Impacted Residents with a depression diagnosis, social engagement also plays a crucial role in their psychosocial wellbeing. One scoping review published in the *Journal*

⁵ See Clive Ballard *et al.*, *Impact of person-centered care training and person-centered activities on quality of life, agitation, and antipsychotic use in people with dementia living in nursing homes: A cluster-randomised controlled trial*, *PLoS Med.* (Feb. 6, 2018), <https://doi.org/10.1371/journal.pmed.1002500>.

⁶ Clare Gardiner, *et al.*, *Interventions to reduce social isolation and loneliness among older people: an integrative review*, *Health & Social Care in the Comm.* (July 13, 2016), <https://onlinelibrary.wiley.com/doi/10.1111/hsc.12367>; Jennifer Bethell *et al.*, *Social Connection in Long-Term Care Homes: A Scoping Review of Published Research on the Mental Health Impacts and Potential Strategies During COVID-19*, *J. Am. Med. Dir. Ass'n* (Nov. 26, 2020), <https://pmc.ncbi.nlm.nih.gov/articles/PMC9186333/>.

⁷ Joaquim Cerejeira *et al.*, *Behavioral and Psychological Symptoms of Dementia*, *Frontiers in Neurology* (May 7, 2012), <https://doi.org/10.3389/fneur.2012.00073>.

⁸ Asuna Arai *et al.*, *Influence of social interaction on behavioral and psychological symptoms of dementia over 1 year among long-term care facility residents*, *Geriatric Nursing*, 42:2 (Mar.-Apr. 2021), <https://doi.org/10.1016/j.gerinurse.2020.09.008>.

⁹ Ctrs. for Disease Control and Prevention, *Promoting Social Connection*, <https://www.cdc.gov/social-connectedness/promoting/index.html> (May 15, 2024).

¹⁰ *Id.*

¹¹ Brian Carpenter, *et al.*, *Family, Peer, and Staff Social Support in Nursing Home Patients: Contributions to Psychological Well-Being*, *J. Applied Gerontology*, (Sept. 1, 2002), <https://journals.sagepub.com/doi/10.1177/07334648020100301>.

¹² *Id.*



of the Post-Acute and Long-Term Care Medical Association examined surveys of nursing home and long-term care residents and that tested the association between social connection and mental health outcomes, including depression.¹³ The review found that, in 28 of 35 studies, better social connection was associated with less depression.¹⁴

Three-bed rooms will provide Variance Impacted Residents with memory care needs and depression with increased opportunities for social interactions with their peers, which in turn promotes psychosocial wellbeing and develops social support networks. Three-bed rooms necessarily encourage more frequent social interactions, engagement, and conversation compared to two-bed rooms or private rooms. A roommate provides consistent companionship, reducing feelings of loneliness. The presence of a roommate can offer reassurance, particularly at night when residents with dementia may experience confusion, agitation, or sundowning symptoms.

With a variance, Laguna Honda will be better able to address the special memory care and depression-related needs of its current residents by improving social connections. As the CDC points out, nursing homes help to foster community connectedness¹⁵ and, by granting a variance, CMS will allow Laguna Honda to do just that.

3. Residents who are at high risk for falls will benefit from an additional roommate.

Residents who are at high risk for falls comprise a second special needs population within Laguna Honda. In total, 160 of the 185 Variance Impacted Residents are at high risk for falls based on their diagnosis. Figure 1, below, lists the principal diagnoses of those 160 high-fall risk residents.

Fig. 1. Principal Diagnoses of 160 LHH Residents with High Risk of Falls

Principal Diagnosis	Count	Percent of High-Fall Risk Residents	Percent of the General LHH Population
Dementia	83	52%	19%
Stroke	30	19%	7%
Paraplegia	13	8%	3%
Traumatic brain injury	13	8%	3%

¹³ Jennifer Bethell *et al.*, *Social Connection in Long-Term Care Homes: A Scoping Review of Published Research on the Mental Health Impacts and Potential Strategies During COVID-19*, J. of the Post-Acute and Long-Term Care Am. Med. Ass’n (Feb. 2021), <https://doi.org/10.1016/j.jamda.2020.11.025>.

¹⁴ *Id.*

¹⁵ Ctrs. for Disease Control and Prevention, *Promoting Social Connection*, <https://www.cdc.gov/social-connectedness/promoting/index.html> (May 15, 2024).



Quadriplegia	7	4%	2%
Spinal cord injury	5	3%	1%
Huntington’s disease	4	3%	1%
Seizure	4	3%	1%
Parkinson disease	1	1%	0%
Grand Total	160	100%	38%

Memory and mobility challenges, which are often associated with these diagnoses, compound the high fall risk. An additional risk factor is age; as noted in Appendix PP of the CMS State Operations Manual, “[o]lder persons have both a high incidence of falls and a high susceptibility to injury.” CMS State Operations Manual, Appendix PP, p. 334. At Laguna Honda, 153 Variance Impacted Residents are over the age of 60.

Falls in SNFs can have serious consequences for residents, especially elderly residents, affecting both their physical and mental well-being. Falls can cause fractures, sprains, bruises, and other injuries, which can lead to prolonged pain and limited mobility requiring further medical treatment. Falls can also significantly increase the risk of mortality. The fear of falling can lead to anxiety, depression, and social isolation—all of which are risks identified with the facility’s Special Needs Residents.

To prevent and mitigate accident hazards, such as falls, CMS requires facilities to provide adequate supervision based on the individual resident’s assessed needs and identified hazards in the resident environment. CMS State Operations Manual, Appendix PP, at p. 329. Supervision ensures residents use proper techniques, walkers, and other mobility assistive or adaptive devices when transitioning at their bed or bathroom. Because they are present, staff can quickly intervene if they notice that a resident is losing balance, or attempting to stand and not using proper adaptive devices.

Where appropriate, based on the residents’ needs and preferences, Laguna Honda groups together residents who are a high risk of falling. This facilitates staff supervision because, instead of providers having to attend to multiple residents across multiple rooms, staff can attend to multiple residents in one location. Because increased staff supervision helps prevent unassisted ambulation and mitigates fall risk, grouping residents who are at a high risk of falling benefits that population’s special needs.

Granting a variance would help meet the special needs of residents who are at high risk of falling. As Laguna Honda’s population increases, the facility has a plan to increase its staffing and, as discussed below, Laguna Honda currently exceeds the minimum staffing ratios. By



grouping together similar residents in the same rooms and units, including residents admitted because of the variance, Laguna Honda will mitigate the risk of accident hazards through increased supervision, which would improve both safety and quality of care.

4. Residents who speak Spanish or Asian languages will benefit from additional opportunities to live in units where staff and fellow residents speak their language and may share their cultural traditions.

The two most common languages spoken by San Francisco residents who have limited English proficiency are Chinese (Mandarin and Cantonese) and Spanish. *See San Francisco language diversity data, <https://www.sf.gov/data--san-francisco-language-diversity-data>* (last accessed Feb. 13, 2025). Laguna Honda reflects the broader San Francisco population because it has 50 monolingual or limited English proficiency Asian-speaking and 49 monolingual or limited English proficiency Spanish-speaking residents.

To address the special needs of monolingual residents, Laguna Honda has two language-focused units—North 4 and North 5—for residents who primarily speak Spanish or various Asian languages, respectively. Currently, North 4 has 44 residents, of whom 34 are monolingual Spanish, and North 5 has 30 residents, of whom 23 are monolingual Asian language. And, of the 17 Variance Impacted Residents on North 4, 14 are monolingual Spanish. Of the 13 Variance Impacted Residents on North 5, 10 are monolingual Asian language. By grouping residents with a common language and similar backgrounds and culture, Laguna Honda provides culturally-competent care.

Staff on these units speak the same languages as the residents. Laguna Honda had 116 certified bilingual staff members who speak the same languages as the residents on North 4 and North 5. *See Figure 2, below.* Grouping residents by their primary language and assigning staff who speak those languages to those units allows residents to express their care and other needs in a way consistent with their cultural preferences. This leads to culturally appropriate care, which improves health outcomes and a more positive living experience.

Figure 2: Certified Bilingual Staff

Language	Total Certified Bilingual Staff
Chinese (Cantonese)	42
Chinese (Mandarin)	23
Chinese (Toishan)	1
Japanese	1
Korean	1



Russian	1
Spanish	36
Tagalog	1
Vietnamese	4
Grand Total	110

Adding a third roommate who speaks the same language will benefit the existing monolingual and limited English proficiency residents by providing an opportunity to form social connections, and create a homelike environment that facilitates the residents’ care needs. In addition to benefitting roommates, adding new residents also impacts each unit as a whole. Group activities within these units are conducted in the primary language of the residents so, as discussed above, more residents participating in group activities in the same language as the current residents will increase the social connection and interaction for those current residents.

Neither North 4 nor North 5 is at or near capacity because of the restriction on more than two residents per bedroom. If CMS grants a variance, Laguna Honda will be able to admit more residents who speak the same language as current residents, which will result in better health outcomes for those residents.

5. Residents with an HIV/AIDS diagnosis will benefit from additional opportunities to live in units where fellow residents may share similar experiences.

At the end of 2023, there were 15,544 San Francisco residents living with an HIV diagnosis, which represents 11 percent of the total number of people diagnosed and living with HIV infection in California.¹⁶ And, of that number, 74 percent are 50 years old or older.¹⁷ As this population ages and also accumulates non-HIV chronic conditions, their need for skilled nursing care will continue to increase.¹⁸ One study concluded that nursing home residents with HIV experience worse outcomes in nursing homes compared to residents without HIV.¹⁹

That situation underscores the importance of providing focused care to Laguna Honda residents with HIV and AIDS. Where appropriate based on resident preference and needs, Laguna Honda groups its resident with HIV and AIDS on the South 2 unit. Currently, there are 33

¹⁶ S.F. Dep’t of Public Health, *HIV Epidemiology, Annual Report 2023*, at p. 1 (Sept. 2024), https://www.sf.gov/sites/default/files/2024-09/AnnualReport2023%20Yellow%2020240923%20Final%20w%20Covers_2.pdf.

¹⁷ *Id.* at 3.

¹⁸ David J. Meyers et al., *Understanding the Relationship between Nursing Home Experience with HIV and Patient Outcomes*, *Medical Care* (Jan. 2021), <https://doi.org/10.1097/MLR.0000000000001426>.

¹⁹ *Id.*



residents on South 2, of which 14 have an HIV diagnosis and of those, 9 are admitted with HIV/AIDS as their primary diagnosis.

Granting a variance will benefit the special needs of these residents by adding new residents who share a similar background and experiences. As discussed throughout our request, social interactions and group activities provide positive health benefits to current residents and this outcome can be amplified when the residents share common experiences.

6. Residents across the entire facility who are at risk for social isolation and loneliness will benefit from additional residents participating in group activities.

In addition to the positive health benefits associated with having an additional roommate, increasing the resident population will increase the opportunity for increased social interactions for current residents during group activities that occur in units and across the entire facility.

According to a survey of multiple studies, loneliness in older adults has been shown to be mitigated in varying degrees by interventions that are often conducted in a group setting, including animal therapy, counseling, physical exercise, social interventions, cognitive behavioral therapy, and technology-based interactions.²⁰ The survey noted that individuals in long-term care settings benefitted most from socially prescribed interventions tailored to the individual's unique needs.²¹ Activities tailored to a resident's hobbies or past occupation creates a sense of purpose and identity, improving mood and reducing distress.

At Laguna Honda, each unit has group activities that occur in the great room and/or the main dining room, which bring together residents from the entire unit—the current resident census per unit ranges from 26 to 44 residents. Smaller group activities can take place in the living rooms within the unit. Staff can tailor small group activities based on resident requests, including but not limited to: music therapy, art therapy, animal-assisted activities, therapeutic farm and garden, memory games and movie nights.²² Facility-wide activities include bingo, music, shopping at the gift shop, visiting the resident library, Friday's Clubhouse at the Art Studio, and Mahjong on Saturdays. For a sample calendar of facility-wide events, see Exhibit B.

If CMS grants a variance, resident activities will be able to operate at full capacity, and the

²⁰ Peter Hoang *et al.*, *Interventions Associated with Reduced Loneliness and Social Isolation in Older Adults: A Systematic Review and Meta-analysis*, *Geriatrics* (Oct. 17, 2022), <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2797399>.

²¹ *Id.*

²² Ctrs. for Disease Control and Prevention, *Promising Approaches to Promote Social Connection*, <https://www.cdc.gov/social-connectedness/data-research/promising-approaches/index.html> (May 15, 2024) (highlighting skill development, support groups, peer support, and animal-based interventions).



facility will be able to offer new and different activities based on resident preference and tailored to their needs. For example, Laguna Honda is planning to restart Alcoholics Anonymous and Narcotics Anonymous meetings, and current residents who will participate in these meetings will benefit from having more people with similar lived experience join their groups. By increasing the number of participants in existing and future group activities, current residents will benefit from increased interactions with residents admitted under the variance. A new resident admitted to one of the 120 rooms may be a fellow Mahjong player to a current resident or a companion in visiting the Laguna Honda therapeutic animal farm.²³

7. From 2010 to 2022, when Laguna Honda had three residents per room, resident and family satisfaction was extremely high.

From 2010 to 2022 Laguna Honda maintained 769 SNF beds near full census, including rooms with three residents. Resident satisfaction survey data from this period shows a high degree of satisfaction with the facility.

The 2017 resident satisfaction survey revealed that 79 percent of residents and 90 percent of families were overall satisfied (*i.e.*, responding either excellent or good) with Laguna Honda. See Exhibit C, at 5. Similarly, residents reported overall satisfaction with Laguna Honda at 78 percent in 2011 and 81 percent in 2013 and 2015. *Id.* Families reported an overall satisfaction at 93 percent in 2011, 92 percent in 2013, and 98 percent in 2015. *Id.* at 6. In the 2017 survey, 76 percent of residents felt that the quality of life and quality of care they received was excellent or good and 73 percent felt the quality of service they received was excellent or good. *Id.*

The reported satisfaction includes some of the core areas at issue in this request. With regard to privacy and dignity concerns, 80 percent of residents responded either excellent or good to the “respect for privacy” and “support of independence” questions. *Id.* at 15. As we’ve shown, the primary way that granting the variance will benefit the special needs of the current residents is the opportunity for social interactions and group activities. The 2017 survey shows historical satisfaction with these areas: 80 percent responded favorably to the “opportunities to participate in community outings” question, 82 percent approved of the “opportunities to pursue preferred activities,” and 75 percent approved of the “interaction with other residents at Laguna Honda.”

²³ Amanda Bassett, “A huge relief”: Laguna Honda Hospital opens its therapy farm and garden to residents again, SFGate (Apr. 9, 2021), <https://www.sfgate.com/local/article/Laguna-Honda-Hospital-Therapeutic-Farm-Garden-SF-16087305.php>.



Thus, during the 12-year period when the facility had a nearly full census and served three residents per bedroom, residents and their families consistently responded that they were satisfied with the facility and its physical environment.

8. Since 2022, Laguna Honda has improved its systems and processes as it prepares to admit new residents.

In 2022, the facility lost its Medicare and Medicaid certification for reasons unrelated to the physical environment. Since then, Laguna Honda has embarked on a comprehensive facility-wide system improvement process that has improved the facility and its staff's ability to provide for the special needs of current residents. Laguna Honda has:

- Incorporated active and frequent rounding on all resident care units;
- Developed a dedicated resident care experience team focusing on resident grievances to improve resident satisfaction;
- Enhanced resident council participation by offering virtual attendance from all 13 units to improve resident participation and satisfaction;
- Restructured its leadership to move away from a general acute model to one that aligns with SNF best practices, including hiring licensed nursing home administrators and appointing two directors of nursing;
- Restructured its quality assurance and performance improvement (QAPI) program;
- Hired consultants who are subject matter experts in SNF practices to conduct quarterly mock surveys, root cause analyses, and action plans; and
- Invested in capital improvement projects.

During that same time period, CDPH and CMS have significantly increased the number of surveys of the facility. Yet over that timeframe, Laguna Honda has seen a decrease in the number of statements of deficiencies received by CDPH and CMS. The facility continues to build on its robust quality assurance and performance improvement program to ensure the quality of care and services provide the best environment and quality of life for the residents. As a result of all this work, CMS recently rated Laguna Honda 4 out of 5 stars.

Adding up to 120 additional residents will not negatively impact the care or services delivered to the facility's current Special Needs Residents. Indeed, as noted above, in January 2025, CMS staff acknowledged that the variance will not adversely affect residents' health and safety. The facility's current nurse staffing ratio averages about 5 hours per resident day (HPRD), which easily surpasses the CMS minimum nurse staffing ratio of 3.48 HPRD, and Laguna Honda has maintained a five-star rating for its staffing. And, Laguna Honda has already developed a



workforce plan that would accommodate additional residents and provide appropriate staffing based on resident acuity to meet the special needs of the residents while continuing to deliver high quality resident-centered care in compliance with CMS regulations.

Thus, for over a decade, Laguna Honda was able to meet the special needs of its residents. In that sense, reactivating 120 beds would restore the physical environment to the status quo. But, importantly, over the past almost three years, the facility has improved significantly in virtually every respect. By every other measure, reactivating 120 beds is not just restoring the status quo, but instead placing individuals with skilled nursing needs in a facility that can address every aspect of those needs ensuring it will continue to provide safe care consistent with resident needs.

Granting a Variance Will Not Adversely Affect Residents' Health and Safety

1. Laguna Honda has never received complaints or deficiencies relating to its large three-resident rooms.

The best evidence of Laguna Honda's ability to accommodate three residents per room with no adverse impact on their health and safety is the fact that, from 2010 to 2022, Laguna Honda accommodated three residents per room with no survey findings or resident or family grievances related to the layout of the rooms or the physical environment. But even viewing the facility without the benefit of over a decade of accommodating residents in this physical environment, Laguna Honda would still meet the requirements to issue a variance.

Specifically, based on a review of the facility's grievance log, no resident has filed a grievance regarding sharing a room, sharing a bathroom, or privacy issues related to the configuration of the rooms. Nor are we aware of any deficiency findings issued by CDPH or CMS regarding privacy issues related to or the layout of the facility's three-bed rooms.

2. Laguna Honda's three-resident rooms exceed the minimum square footage requirements by 40 to 56 percent for curtain-divided rooms and 53 percent for wall-divided bedrooms, affording residents a semi-private environment.

The rooms in question afford residents a semi-private environment. Of the 120 beds that are currently suspended on the facility's license, 100 beds are located in resident rooms where walls and doors divide each of the three beds (the "wall-divided bedrooms"). The remaining 20 beds are located in rooms where ceiling-suspended curtains that afford residents full visual privacy divide each of the three beds (the "curtain-divided rooms"). In either configuration, a resident would have more square footage than the minimum requirements provided in 42 C.F.R. section 483.90(e)(1)(ii), that is 80 square feet per resident for shared rooms and 100 square feet



per resident in single rooms. In particular, the wall-divided rooms range are an average of 123 square feet per bedroom and the curtain-divided rooms are between 112 and 121 square feet per resident.

Attached as Exhibit D is the floor plan depicting the layout of a typical unit containing wall-divided bedrooms. As shown in further detail in Exhibit E depicting the floor plan of a typical wall-divided bedroom and in Exhibit F, each wall-divided bedroom has a door that affords privacy from the other residents in the larger resident room.

Attached as Exhibit G is the floor plan depicting the layout of a typical resident room containing curtain-divided bedrooms. As shown in further detail in Exhibit H depicting the floor plan of a typical curtain-divided room and in Exhibit I, each curtain-divided room is sufficiently large that, when closed off by a curtain, it affords residents a semi-private environment.

3. Laguna Honda's large three-resident rooms support effective infection prevention and control measures, and excellent quality of care.

The size and layout of the three-resident rooms allow staff to provide effective infection prevention and control measures by minimizing both the risk of cross-contamination and the spread of infection. They also provide adequate space for proper cleaning and disinfection practices that help keep the residents safe from infection. And, for both the curtain-divided rooms and wall-divided bedrooms, each resident room has an attached bathroom equipped with a sink, commode, and shower. The close proximity to bathrooms allows staff easier access to wash their hands and conduct effective infection prevention and control practices.

The layout of the resident rooms also allows staff to provide excellent quality of care. The resident rooms at Laguna Honda provide ample space for residents to rest, maintain privacy, and receive necessary care. Because the resident space ranges between 112 and 125 square feet, there is sufficient room for staff to assist with activities of daily living and wound care. The accessibility of the rooms at Laguna Honda is crucial for residents to navigate their rooms with wheelchairs, and for staff to use a lifting device for those residents with difficulty walking on their own. The layout of the rooms at Laguna Honda provides privacy for residents to create their own homelike environment and meets the minimum spacing requirements under title 42 C.F.R. section 483.90(e)(1)(ii).

Conclusion

Since 2013, San Francisco has lost approximately 10.6 percent of its licensed freestanding SNF beds (124 beds) and 23.4 percent of its hospital-based SNF beds (371 beds). These beds are



briefly identified and described below:

- 2014 – Zuckerberg San Francisco General Hospital: decrease from 89 to 30 licensed SNF beds; California Pacific Medical Center (CPMC) California East: decrease from 101 to 95 licensed SNF beds
- 2015 – Jewish Home: decrease from 478 to 378 licensed SNF beds
- 2016 – CPMC California East: loss of 95 licensed SNF beds
- 2018 – CPMC St. Luke’s: loss of 79 licensed SNF beds and transfer of 17 patients to CPMC Davies; St. Mary’s Medical Center: loss of 32 licensed SNF beds.

And in January 2025, St. Anne’s Home, a 46-bed facility, announced its closure and is planning to transfer many residents to Laguna Honda. In other words, San Francisco and California, like everywhere else in the nation, has an urgent need for skilled nursing beds for those who have no means to afford placement in other SNFs or are placed in an inappropriate level of care for their needs.

Laguna Honda has an available supply of beds that is ready to meet this deficit. Before suspending 120 beds, Laguna Honda accounted for approximately 33 percent of all SNF beds in San Francisco (769 out of 2,264), of which the 120 suspended beds accounted for over 5 percent of all SNF beds (120 out of 2,264).²⁴

Granting our request will address an urgent need. Denying the request, given the fact these rooms sit underutilized, harms California’s and San Francisco’s ability to care for its low-income and aging residents who are often placed outside of San Francisco away from their homes and loved ones.

Reactivating these unused beds is in accordance with the special needs of Laguna Honda’s current residents who will benefit from the increased social connections that result from an additional roommate or additional people at a group activity. Because Laguna Honda has already successfully demonstrated that the variance does not adversely affect residents’ health and safety, the facility meets both elements to grant a variance under 42 C.F.R. section 483.90(e)(3).

For the foregoing reasons, we respectfully urge CMS to confirm in writing that you agree that Laguna Honda may reactivate its 120 beds or, in the alternative, grant a variance to 42 C.F.R. section 483.90(e).

²⁴ See Dep’t of Health Care Access & Innovation, 2020 Calendar Year Hospital Utilization Pivot Table, https://data.chhs.ca.gov/dataset/1902083c-f16a-434d-b8ac-f7a573a305df/resource/19a02e57-a4d1-408c-9ec9-dd3c56f7a0ca/download/2020_hosp_util_pivot.xlsx.



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Roland Pickens, MHA, FACHE
Chief Executive
San Francisco Health Network

If you have any questions regarding our written request for a variance, please contact Laguna Honda's Chief Executive Officer Diltar Sidhu, LNHA, MBA (Diltar.Sidhu@sfdph.org or 415-759-5609) and the Chief Nursing Officer of the San Francisco Health Network Troy Williams (Troy.Williams@sfdph.org).

Sincerely,

Roland Pickens, MHA, FACHE
Director/CEO, San Francisco Health Network

Enclosures

CC:

Daniel Tsai, Director of Health, San Francisco Department of Public Health
Dora Hughes, Chief Medical Officer and Director, Center for Clinical Standards and Quality, CMS
James Dickens, CMS
Michelle Veach, Health Insurance Specialist, State Operations Group, CMS
Susan Fanelli, Deputy Director, CDPH

EXHIBIT “A”



San Francisco
Health Network

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH

Roland Pickens, MHA, FACHE
Chief Executive
San Francisco Health Network

November 27, 2024

(VIA EMAIL)

Benton Williams
Director, Survey & Enforcement, Region IX
Centers for Medicare and Medicaid Services

Re: Laguna Honda Hospital and Rehabilitation Center's Request for Confirmation to Reactivate Beds Under its License or In the Alternative for a Variance

Dear Director Williams:

In 2023, as part of its recertification in Medicare and Medicaid, Laguna Honda Hospital and Rehabilitation Center ("Laguna Honda") agreed to suspend 120 skilled nursing beds from its State-issued license. We are writing to ask that we be allowed to restore those beds and we are confident that we meet all regulatory requirements to do so.

Although we knew that our community would feel the loss of those beds, based on discussions with leadership from the Department of Health and Human Services ("DHHS"), the Centers for Medicare and Medicaid Services ("CMS"), and the California Department of Public Health ("CDPH"), we agreed to this suspension because our priority was to work closely with our Federal and State partners to address Laguna Honda's deficiencies, and to ensure that we are able to provide excellent care to each and every resident. Laguna Honda's decision to suspend the 120 beds helped expedite the path to recertification since it avoided a barrier to a smoother and quicker recertification.

Through our successful partnership with CMS and CDPH, we were able to obtain recertification in both Medicare and Medicaid. And in the past year, we have made great strides to improve the facility and its systems, which have been recognized in several recent successful surveys. **Given our demonstrated commitment to excellence and our ability to sustain compliance with all relevant standards, we are ready to restore the 120 beds to our license.**

As you are aware, there is a well-documented shortage of skilled nursing beds in the entire San Francisco Bay Area and across the country. Since at least 2016, the San Francisco Department of Public Health ("SFDPH") has warned that San Francisco is at risk for an inadequate supply of skilled nursing beds in the future. To address this problem, SFDPH noted that, by 2030, there would need to be a 70 percent increase in the number of skilled nursing beds to meet



growing demand.¹

Instead, the opposite has occurred. In August 2024, the American Health Care Association and National Center for Assisted Living released an “Access to Care Report”² estimating that, since the beginning of the COVID-19 pandemic, at least 774 nursing homes have closed, displacing over 28,000 residents. Even those nursing homes that have remained open, have downsized the number of beds—over 62,000 since February 2020—and 57 percent of nursing homes have a waiting list for new admissions.

Suspending 120 skilled nursing beds has directly harmed the ability of the City and County of San Francisco (“City”) to provide skilled nursing services to low and very low-income residents. As a result of this limitation, San Francisco Medi-Cal beneficiaries are either being sent to other jurisdictions or utilizing acute care beds that are inappropriate for the residents’ level of care and could be used for patients with acute care needs.

Federal regulations do not compel Laguna Honda to restrict its bedrooms to no more than two residents per room, given that Laguna Honda has not undergone any changes to its physical environment, and was certified in Medicare and Medicaid before November 2016. Therefore, we request that CMS confirm in writing that Laguna Honda may reactivate the 120 beds to our license.

In the alternative, we write to request a variance to the requirement in section 483.90(e)(1)(i) that bedrooms must accommodate no more than two residents. Laguna Honda meets the regulatory requirements for a variance.

We look forward to your response and answering any questions you might have about these requests to facilitate your approval of our requests.

Background

Laguna Honda is an 11-bed general acute care hospital and 769-bed distinct part skilled nursing facility (“SNF”) that is owned and operated by the City. For decades, Laguna Honda has participated in Medicare and Medicaid. In 2010, Laguna Honda opened newly-constructed resident buildings and state-of-the-art rooms, a portion of which were constructed to accommodate three residents per room. From 2010 to 2022, Laguna Honda operated these rooms at or near full capacity. In 2022, CMS decertified the facility from participating in Medicare

¹ Framing San Francisco’s Post-Acute Care Challenge, available at: https://sfdph.archive.sf.gov/dph/hc/HCAgen/HCAgen2016/Feb%2016/Post-Acute%20Care%20Project%20Report_02.10.16.pdf.

² Available at <https://www.ahcancal.org/News-and-Communications/Fact-Sheets/FactSheets/AHCA%20Access%20to%20Care%20Report%202024%20FINAL.pdf>.



and Medicaid, for reasons unrelated to the facility's physical environment or layout of the rooms. On September 5, 2023, the State of California recertified Laguna Honda in Medicaid and, on May 30, 2024, CMS recertified the facility in Medicare.

Because Laguna Honda wanted to obtain Medicare recertification as quickly as possible, the facility agreed to suspend 120 SNF beds on its license. We did so even though Laguna Honda's physical environment had not undergone any material changes, the facility had not undergone any reconstruction, and CDPH had not taken any action against Laguna Honda's State-issued license.

The Regulatory Restriction to Two Residents per Bedroom Applies Only to Facilities that are Constructed, Re-Constructed, or Newly Certified after November 2016

In 2016, DHHS promulgated a final rule that revised the requirements that long-term care facilities must meet to participate in the Medicare and Medicaid programs. Among the changes was a reduction in the maximum occupancy per room from four residents to two. Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities, 81 Fed. Reg. 68,688, 68,690 (Oct. 4, 2016).

Thankfully, that reduction in occupancy did not apply to all existing skilled nursing facilities, as doing so would have resulted in a catastrophic reduction in available beds nationwide. Rather, it applied only to those facilities that are constructed, reconstructed, or newly certified after November 28, 2016.

When it initially proposed the rule in 2015, DHHS explained that: “[t]herefore, we propose to require in new § 483.90(d)(1)(i) that, bedrooms in facilities accommodate not more than two residents *unless the facility is currently certified to participate in Medicare and/or Medicaid . . .*” Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities, 80 Fed. Reg. 42,168-01, 42,221 (July 16, 2015) (emphasis added). And in its final rule, DHHS noted that a number of commenters responded to the agency's request for comments in a way that suggested misunderstandings of the proposed requirements. One “notable misconception” that DHHS addressed was the “[b]elief that existing facilities would have to limit occupancy to two residents per room, even if that would reduce bed count.”

Thus, the plain language of the rule and DHHS's intent was not to require facilities that were certified before November 28, 2016, and had not undergone any significant physical changes to modify their rooms to meet the new requirements. Laguna Honda was certified in Medicare before that date and, accordingly, should be subject to the four resident per bedroom limit. While CMS terminated Laguna Honda's provider agreement, nothing else about the facility, especially the physical environment, materially changed. Indeed, through a settlement



agreement with CMS, Laguna Honda continued to receive the same federal reimbursements that it had before termination of the provider agreement.

Granting a Variance Will Not Adversely Affect Residents' Health and Safety

While as described above there is a compelling basis for CMS to confirm that Laguna Honda can reactivate the 120-beds under Laguna Honda's current license and CMS need not reach the issue of a variance, Laguna Honda easily meets the standard for a variance to accommodate three residents per room. That is because, as we provide below, the variance here will not adversely affect residents' health and safety and is in accordance with the special needs of the residents. 42 C.F.R. § 483.90(e)(3).

1. Laguna Honda has never received complaints or deficiencies relating to its large three-resident rooms.

The best evidence of Laguna Honda's ability to accommodate three residents per room with no adverse impact on their health and safety is the fact that, from 2010 to 2022, Laguna Honda accommodate three residents per room with no survey findings or resident or family grievances related to the layout of the rooms or the physical environment. But even viewing the facility without the benefit of over a decade of accommodating residents in this physical environment, Laguna Honda would still meet the requirements to issue a variance.

Specifically, based on a review of the facility's grievance log, no resident has filed a grievance regarding sharing a room, sharing a bathroom, or privacy issues related to the configuration of the rooms. Nor are we aware of any deficiency findings issued by CDPH or CMS regarding privacy issues related to or the layout of the facility's three-bed rooms.

2. Laguna Honda's three-resident rooms exceed the minimum square footage requirements by 40 to 56 percent for curtain-divided rooms and 53 percent for wall-divided bedrooms, affording residents a semi-private environment.

The rooms in question afford residents a semi-private environment. Of the 120 beds that are currently suspended on the facility's license, 100 beds are located in resident rooms where each of the three beds are in separate bedrooms divided by walls and doors (the "wall-divided bedrooms"). The remaining 20 beds are located in rooms where each of the three beds are located in one bedroom divided by ceiling-suspended curtains that afford residents full visual privacy (the "curtain-divided rooms"). In either configuration, a resident would have more square footage than the minimum requirements provided in 42 C.F.R. section 483.90(e)(1)(ii), that is 80 square feet per resident for shared rooms and 100 square feet per resident in single rooms. In particular, the wall-divided rooms range are an average of 123 square feet per bedroom and the curtain-divided rooms are between 112 and 121 square feet per resident.



Attached as Exhibit A is the floor plan depicting the layout of a typical unit containing wall-divided bedrooms. As shown in further detail in Exhibit B depicting the floor plan of a typical wall-divided bedroom and in Exhibit C, each wall-divided bedroom has a door that affords privacy from the other residents in the larger resident room.

Attached as Exhibit D is the floor plan depicting the layout of a typical resident room containing curtain-divided bedrooms. As shown in further detail in Exhibit E depicting the floor plan of a typical curtain-divided room and in Exhibit F, each curtain-divided room is sufficiently large that, when closed off by a curtain, it affords residents a semi-private environment.

3. Laguna Honda's large three-resident rooms support effective infection prevention and control measures, and excellent quality of care.

The size and layout of the three-resident rooms allow staff to provide effective infection prevention and control measures by minimizing both the risk of cross-contamination and the spread of infection. They also provide adequate space for proper cleaning and disinfection practices that help keep the residents safe from infection. And, for both the curtain-divided rooms and wall-divided bedrooms, each resident room has an attached bathroom equipped with a sink, commode, and shower. The close proximity to bathrooms allows staff easier access to wash their hands and conduct effective infection prevention and control practices.

The layout of the resident rooms also allows staff to provide excellent quality of care. The resident rooms at Laguna Honda provide ample space for residents to rest, maintain privacy, and receive necessary care. Because the resident space ranges between 112 and 125 square feet, there is sufficient room for staff to assist with activities of daily living and wound care. The accessibility of the rooms at Laguna Honda is crucial for residents to navigate their rooms with wheelchairs, and for staff to use a lifting device for those residents with difficulty walking on their own. The layout of the rooms at Laguna Honda provides privacy for residents to create their own homelike environment and meets the minimum spacing requirements under title 42 C.F.R. section 483.90(e)(1)(ii).

Granting a Variance is in Accordance with the Special Needs of Laguna Honda's Residents

Laguna Honda is one of the largest skilled nursing facilities in the United States, serving a population that reflects the diversity of the San Francisco Bay Area and that has varied special needs. To meet the special needs of low-income residents in the Bay Area, Laguna Honda provides a nationally-recognized program for people with Alzheimer's and other dementias and is the only dedicated SNF for HIV/AIDS in the San Francisco Bay Area. Laguna Honda has language-focused units for residents who speak only Spanish or various Asian languages, a palliative care unit, and complex care units. The facility also provides on-site services for the



entire resident population such as an outpatient clinic, psychiatry services for substance abuse and behavioral health issues, therapeutics and recreational activities, and a rehabilitation center.

As an example of the specialized needs of Laguna Honda's residents, the facility provides care for some residents with Huntington's disease and TBI. To our knowledge, very few skilled nursing facilities anywhere in the country are able to adequately provide care to skilled nursing residents with Huntington's disease. And, many nursing homes are not suited to care for residents with TBI and support the rehabilitation services that are necessary for the resident. Laguna Honda is uniquely situated to support this vulnerable population of residents with its rehabilitation center and skilled nursing beds.

As demonstrated, Laguna Honda's residents have complex and varied needs, and suspending 120 SNF beds means that the facility and DPH cannot serve these individuals. Without these beds, individuals with complex needs would be placed in levels of care not appropriate for their needs. Granting a variance would allow Laguna Honda to better serve low and very-low income residents with complex medical and social challenges.

Conclusion

The past several years have been challenging for skilled nursing facilities across the country in responding to the COVID-19 pandemic. While other facilities faced COVID-19 outbreaks that caused great suffering and loss of life, Laguna Honda distinguished itself through its successful and life-saving response to the COVID-19 pandemic. Starting in early March 2020, the facility implemented cutting-edge infection prevention and control systems to protect its residents, and in 2020, Laguna Honda received the top honor from the California Association of Public Hospitals and Health Systems for its response to the COVID-19 pandemic.

For over two years, Laguna Honda has invested significant time, effort, and funds to undertake a systemic improvement of the entire facility. Since the 2022 decertification from Medicare and Medicaid, CDPH and CMS have significantly increased the number of surveys of and visits to the facility. Yet over that timeframe, Laguna Honda seen a decrease in the number of statements of deficiencies received by CDPH and CMS. The facility continues to build on its robust quality assurance and performance improvement program to ensure the quality of care and services provided the best environment and quality of life for the residents.

As a result of this work, Laguna Honda has seen significant improvements in its key performance indicators, including, but not limited to, a decrease in the number of falls and new pressure injuries. And, in its most recent annual SNF certification survey, CDPH found only six minor deficiencies of which none were related to the physical environment. In addition, CDPH assessed only nine deficiencies related to life safety and emergency preparedness (including



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three deficiencies with minimal potential for harm) and no deficiencies for 29 facility reported incidents and two anonymous complaints.

San Francisco has an urgent need for skilled nursing beds for those who have no means to afford placement in other SNFs or are placed in an inappropriate level of care for their needs. Laguna Honda has an available supply of beds that not only will not adversely affect residents' health and safety, but also cater to their specialized needs.

For the foregoing reasons, we respectfully request at your earliest possible convenience that you confirm in writing that CMS agrees that Laguna Honda may reactivate its 120 beds or, in the alternative, grant a variance to 42 C.F.R. section 483.90(e). If you have any questions regarding our written request for a variance, please direct them to Laguna Honda's Interim Chief Executive Officer Diltar Sidhu, LNHA, MBA (Diltar.Sidhu@sfdph.org or 415-759-5609) and the Chief Nursing Officer & Chief Quality Officer of the San Francisco Health Network Troy Williams (Troy.Williams@sfdph.org).

Sincerely,

Roland Pickens, MHA, FACHE
Director/CEO, San Francisco Health Network

Enclosures

CC:
James Dickens, CMS
Michelle Veach, Health Insurance Specialist, State Operations Group, CMS
Susan Fanelli, Deputy Director, CDPH

EXHIBIT “B”

Sample of Laguna Honda activities calendar

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9a	Good morning check ins	Current events in the world at large	Good morning check ins	Morning stroll	Meet and greet	Arts and Crafts	Spiritual Services/Quiet meditation group
11am	Current events @ Laguna Honda	Live music n living room or great room	Sensory activities	Medical Clowns	Animal Socialization	Group stroll	Morning stretch
1pm	Seated Stretches	Karaoke/Music Appreciation	Music engagement	Small group movie in living room	Live music in living room or great room	Hospital wide activity-board games or movie	Outdoor stroll
3pm	Art Walk at Laguna Honda	Cultural activity (based on any themes in the month)	Chair Yoga	Tea Time	Video/board games	Happy Hour	Art Exploration
After dinner	Trivia	Mahjong/Dominoes	Computer skill building	Name that Tune	Movie Night w/ resident reviews	Theatre/Play (online)	Documentary of choice

EXHIBIT “C”



Laguna Honda Hospital and Rehabilitation Center Resident and Family Satisfaction Surveys **Final Draft**

January 2018

Prepared For:

Laguna Honda Hospital and Rehabilitation Center
375 Laguna Honda Boulevard
San Francisco, CA 94116

Prepared By:

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1.0 Executive Summary

Laguna Honda Hospital and Rehabilitation Center (Laguna Honda) contracted NuStats LLC (NuStats) to conduct the 2017 Resident and Family Satisfaction Surveys between June and November 2017.

NuStats mailed paper surveys to Laguna Honda in one sealed package for distribution and survey administration. The package included hand-held tablets to complete the survey electronically. The Resident Satisfaction Survey was administered by Laguna Honda volunteers. A total of 184 residents from the pool of 309 residents who were originally selected to participate completed the survey. The 184 completed Resident Satisfaction Surveys represent a 60 percent response rate with a margin of error of +/- 4.6 percent at the 95 percent confidence level. Laguna Honda mailed the completed surveys to NuStats for data processing and analysis in August 2017. Meanwhile, NuStats mailed paper surveys to family members, or other responsible parties, who were asked to mail the completed survey back to NuStats using a postage-paid envelope that was included in the survey packet. Families were given the necessary information and instructions on how to complete the survey online using a secured website, if they preferred to complete the survey electronically. Families completed a total of 217 surveys from the 615 that were mailed out for an overall 35 percent response rate with a margin of error of +/- 5.3 percent at the 95 percent confidence interval.

The service attributes for the Resident and Family Satisfaction Surveys were grouped into four critical dimensions: Global Satisfaction, Quality of Life, Quality of Care, and Quality of Service. In general, ratings provided by families tend to be higher than those provided by residents.

Once data collection concluded, NuStats staff compiled response data into a database; checked data for quality assurance; conducted data analysis, and prepared this report to document survey results and recommendations.

Residents who completed a survey are largely male (62 percent), between 45 and 64 years of age, of which 30 percent are Caucasian and another 30 percent are Black African American, with their preferred language being English (74 percent). Over one third of respondents (38 percent) have stayed at Laguna Honda for more than three years in a semi-private room (50 percent).

Overall, nearly 8 in 10 residents are satisfied with the services they receive while 83 percent would recommend the facility to families and friends. Overall satisfaction rating, over the past five survey periods, was at 71 percent in 2009, 78 percent in 2011 and 81 percent in 2013 and 2015, and 79 percent in 2017.

8 out of 10 residents are overall satisfied with Laguna Honda.



Resident Survey Overall Satisfaction Trend



Seventy-six percent of residents feel the quality of life and the quality of care at Laguna Honda are excellent or good while 73 percent feel the quality of service they receive is excellent or good.



Eighty-seven percent of residents feel safe at Laguna Honda.



Seventy-three percent of residents feel Laguna Honda management is very responsive to their needs.

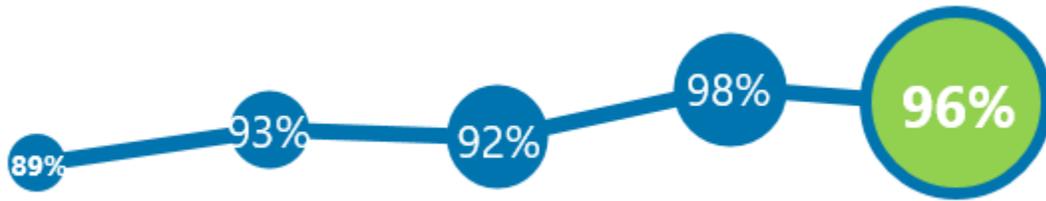
Families completed a survey on behalf of residents who are largely females (56 percent), between 65 and 84 years of age whose preferred language is English (62 percent). The majority of these residents have stayed at Laguna Honda for more than three years (48 percent). Forty-five percent of families who completed a survey did so on behalf of a parent and 31 percent on behalf of a sibling. Overall, nine in 10 families are satisfied with Laguna Honda and 96 percent of these families are likely to recommend the facility to families and friends.

9 out of 10 families are overall satisfied with Laguna Honda.



The overall satisfaction rating for the past five survey periods was at 89 percent in 2009, 93 percent in 2011, 92 percent in 2013, 98 percent in 2015 and 96 percent in 2017.

Family Survey Overall Satisfaction Trend



Eighty-five percent of families feel that the quality of life at Laguna Honda is excellent or good, 88 percent feel that the quality of care is excellent or good, and 84 percent feel that the quality of service at Laguna Honda is excellent or good.



Ninety-one percent of families agree that Laguna Honda staff do an excellent or good job at managing resident pain.



Ninety-three percent of families agree that the care provided by RNs/LVNs is excellent or good.

NuStats recommends that Laguna Honda continue to lead efforts in improving overall satisfaction by addressing items that show reduced satisfaction in the 2017 survey, from the 2015 survey results. Based on actual ratings from residents, the main priorities for improving their satisfaction are: improving the quality of meals; improving the quality of laundry services; and ensuring their personal belongings are secure. For families, the main priorities are the security of personal belongings, improving the quality of laundry services, and improving the opportunities for residents to interact with other residents.

Importance-satisfaction analysis looks at how often a service attribute is given a high or low satisfaction score, and how the score correlates with the respondent's willingness to recommend the facility to others. This relationship allows for the construction of a strength and opportunities chart that can be used to set priorities for future initiatives to improve resident and family satisfaction, which in turn improves their willingness to recommend the facility to others. While areas of **primary strength** are considered places to focus efforts for continued improvement, NuStats recommends Laguna Honda focus first in areas considered **primary**

opportunities. Primary opportunities include items that show high levels of importance yet satisfaction scores are below average. For residents, these items are: improving the attention and communication with each resident; improving the care provided by psychiatrists, psychologists, and counseling staff; improving the quality of laundry services; continue to improve how management handles the concern of the residents; and allow residents to participate in meetings where their care is discussed. Primary opportunities for families include: improving efforts to support the independence of each resident; allowing residents to participate in meetings where their care is discussed; improving the care provided by rehabilitation staff; improving the attention and communication with each resident; and paying more attention to the residents' grooming needs.

In general, the majority of consumers who completed a resident or a family survey feel that the services and care provided by Laguna Honda are "good" or "excellent." Satisfaction scores have dramatically improved since the survey was first conducted in 2009. Although there are some clear differences on how residents and families rate these performance attributes; the feedback about experiences from both consumer groups is critical in identifying the facility's strengths and weaknesses that will allow for continued improvement of services and satisfaction ratings in the future. The commitment from management and staff to pursue joint strategies and action plans to improve quality of care, quality of life, and quality of service is critical in improving the experience of individuals served by Laguna Honda.

2.0 Background and Objectives

NuStats collaborated with The San Francisco Department of Public Health (SFDPH) to conduct a Resident and Family Satisfaction Survey for Laguna Honda. Laguna Honda provides rehabilitation and nursing services to a population of about 780 seniors and adults with disabilities in 13 specialized nursing and rehabilitation programs. Located in a 62-acre campus, Laguna Honda is the first green-certified hospital in California and in FY2012-2013; the Centers for Medicare and Medicaid Services (CMS) awarded the hospital a 5-Star rating.

The intent of the survey is to gather information from Laguna Honda residents and their families on the quality of life at the facility and the quality of care and services residents receive. The purpose of the research is to identify organizational strengths, challenges, opportunities for growth, and overall satisfaction of residents and their families. In turn, this information will allow stakeholders to obtain useful and actionable data for planning, resource allocation, performance measurement, and program and policy evaluation. This research is part of ensuring that Laguna Honda's values and mission of providing a welcoming, therapeutic and healing environment that promotes health and wellbeing are, indeed, validated through the opinions of residents and their families.

To implement this research, NuStats collaborated with Laguna Honda on creating a solid work plan, designing a mail survey, creating data quality measures, performing data processing and analysis, and in creating aggregate and benchmarking reports from the data resulting from this research.

This document presents results of the Resident and Family Satisfaction Survey conducted between June and November 2017.

3.0 Scope and Methodology

NuStats conducted two satisfaction surveys - one with Laguna Honda residents, and another with family members and other adults designated as surrogate decision makers. A total of 309 residents and 615 families were selected to participate in the Resident and Family Satisfaction Surveys. Of these, 184 residents and 217 families completed a survey.

The survey universe for the Resident Satisfaction Survey included all residents who have been admitted to Laguna Honda at least one month prior to the start of data collection. These residents were selected by Laguna Honda after considering their physical and mental ability, thus ensuring respondents were able to consent to participation in the survey without coercion. In addition, Laguna Honda ensured the respondents had a clear understanding on what their participation involved, the purpose of the survey, and how the data would be used. Residents were able to ask questions as needed and were re-assured of the confidentiality of their survey responses. Families and other responsible parties were also selected by Laguna Honda based if their family member was a current resident at Laguna Honda. Both residents and families were given the option to complete the survey in English, Chinese or Spanish. Families were given the option to complete the survey online.

NuStats mailed all resident surveys in one sealed package to Laguna Honda for distribution. In addition, NuStats mailed hand-held tablets to conduct the survey electronically as an alternative to the paper survey. This was the first year the Resident Satisfaction Survey was conducted electronically, which was well received by the residents. Laguna Honda trained volunteer staff to distribute the paper survey and to use the hand-held devices to collect survey responses. NuStats was able to track and monitor electronic survey responses in real time. At the end of data collection, Laguna Honda mailed completed surveys and tablets to NuStats for data processing, tabulation and transcription of resident comments.

The Family Satisfaction Survey was mailed directly to the family member or other responsible party most involved in the resident's care as designated by Laguna Honda. The survey packet contained the paper survey, a cover letter, and a business reply mail (BRM) envelope to return the completed survey at no cost to the survey participant. The cover letter explained the purpose of the survey, provided instructions on how to complete the survey, what to do after the survey is completed, provided a statement of privacy and confidentiality and a statement that clarified that participation was voluntary. Families were also given the option to complete the survey online for the first time. The cover letter provided instructions on how to complete the survey electronically. Additionally, non-responding families were contacted by phone and were invited to complete a survey with a seasoned NuStats' interviewer. This methodology proved to be highly efficient in obtaining survey responses and most people contacted by NuStats were happy to have the personalized attention of interacting with a live agent.

3.1. Survey Instrument Design

The 2017 Family and Resident Satisfaction Surveys had fewer questions compared to previous surveys conducted in 2015. A shorter survey is likely to encourage participation and minimize survey fatigue and abandonment. The questions included in the survey had some wording changes compared to the previous survey and were grouped in three general domains: Quality of Life, Quality of Care, and Quality of Service. Quality of Life questions focus on aspects of life at Laguna Honda that celebrates resident's individuality and self-worth. These questions allow respondents to express how they feel about their personal safety, privacy; how their individuality is respected and celebrated when it comes to their personal choices, wishes and way of life; as well as their needs for establishing friendships, socializing and engaging in activities that are meaningful to them. Quality of Care questions ask

residents and families to rate care practices at the facility. Beyond general competency, these questions focus on resident's and family's perception of how staff put the care and genuine concern of residents as their highest priority. Quality of Service questions focus on how residents and families feel about meals, laundry, and general maintenance. Survey participants were asked to rate these service attribute questions using a four point Likert style scale as either "Excellent", "Good", "Fair", or "Poor". Survey participants were also asked to rate their overall satisfaction with Laguna Honda and their willingness to recommend the facility to others. Residents and families were asked to share their thoughts in their own words to share with Laguna Honda what they do best, what they can do to improve service delivery, and any comments that came to mind they found relevant and worth sharing. The survey also included demographic questions about the resident.

The service attribute domains and corresponding questions for the 2017 survey are displayed below:

Quality of Life Questions

- ✓ Safety of the facility
- ✓ Security of personal belongings
- ✓ Respect for privacy
- ✓ Respect for your culture
- ✓ Opportunities to pursue preferred activities
- ✓ Opportunities to participate in community outings
- ✓ Satisfaction with community outing program
- ✓ Religious and spiritual opportunities
- ✓ Resident and staff interaction
- ✓ Interaction with other residents at Laguna Honda

Quality of Care

- ✓ Care by RNs/LVNs (Registered/Licensed Nurses)
- ✓ Respectfulness of staff
- ✓ Attention to your grooming needs
- ✓ Care by physicians
- ✓ Care by CNAs (Certified Nursing Assistants)
- ✓ Competency of staff
- ✓ Care by Rehabilitation staff
- ✓ Management of pain
- ✓ Keeping you and your family updated on your care
- ✓ Service by social workers
- ✓ Participation in care meetings
- ✓ Care by psychiatrists/psychologists/counseling staff

Quality of Service

- ✓ Cleanliness of premises
- ✓ Support of independence
- ✓ Responsiveness of management to concerns of residents
- ✓ Staff's attention and communication to each resident
- ✓ Quality of laundry services
- ✓ Quality of meals

Family Survey Only Questions

- ✓ Support from staff during resident's change in condition
- ✓ Opportunities for families to make decisions
- ✓ Discussion of resident's end-of-life care

3.2. Data Processing Tasks

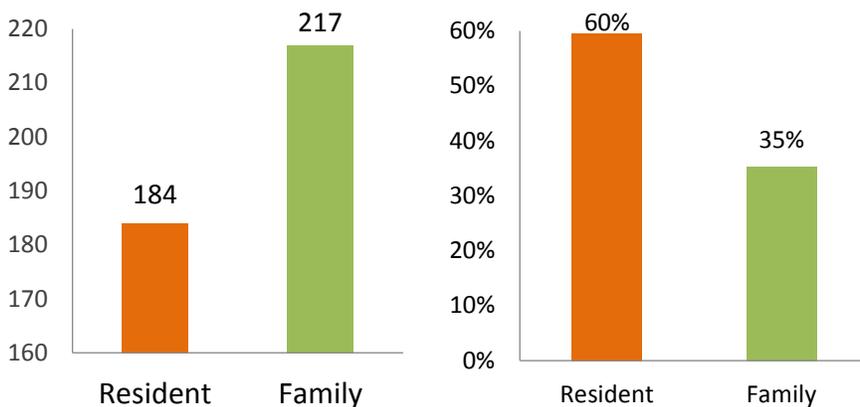
Data was collected by paper, tablet, and online. Data from tablet and online surveys was available for processing in real-time, while data collected via paper survey could not be processed until the surveys were received by NuStats. Survey responses were processed on a daily basis or when new data was available and updates were sent to the project team. Data from the tablet surveys was uploaded directed to NuStats' secure servers. Data from the online surveys is stored on NuStats' secure servers and is available for processing immediately following survey completion by respondents.

As surveys were processed, they were flagged as completed in a proprietary tracking system (NuCDF) and incorporated into a master data file. Data quality checks were run, flagging the status of each survey (i.e. data clean and ready for delivery, minor issues in the data that needed further review etc.). Once the initial data check step was completed, the data was flagged as ready for final Quality Assurance (QA). All cases identified as ready for final QA went through an in-depth inspection by QA personnel. Cases that passed were then categorized as ready for delivery and then the file was formatted in the agreed-upon data structure that met the needs of Laguna Honda. Then the data analyst reviewed the full data file and performed a variety of statistical analyses.

3.3. Survey Results

A total of 309 Laguna Honda residents were asked to complete the resident satisfaction survey by a Laguna Honda volunteer; of these, 184 were fully completed. This corresponds to a 60 percent response rate with a margin of error of +/- 4.6 percent at the 95 percent confidence interval. The response rate for the 2015 survey was 51 percent.

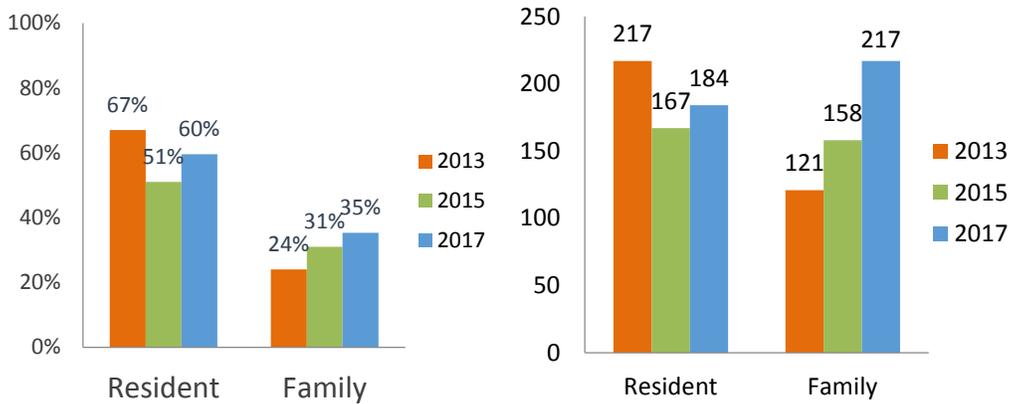
Figure 1: Number of Surveys and Response Rates by Survey Type



A total of 615 surveys were mailed out to family members or other responsible parties; 217 surveys were returned fully completed. This corresponds to a 35 percent response rate with a +/- 5.36 percent margin of error at the 95 percent confidence interval. Figure 1 shows those results.

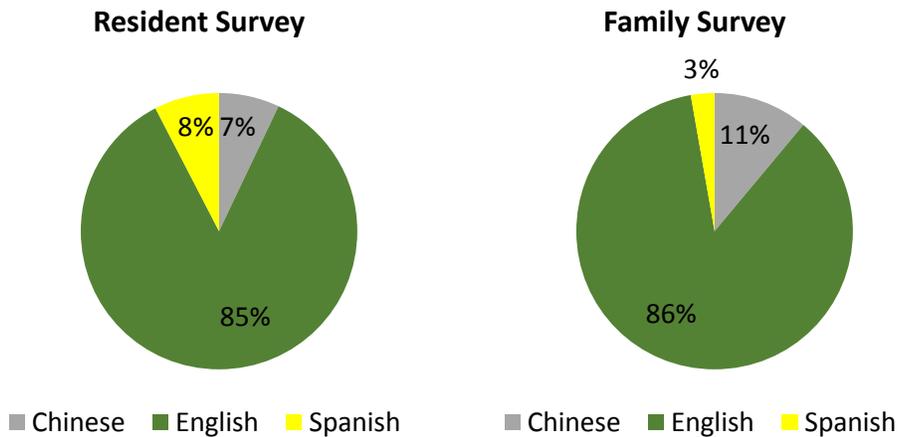
In 2017 the number of completed surveys increased compared to the 2015 survey. Laguna Honda residents completed 167 surveys in 2015 and 184 in 2017; this corresponds to a nine percent increase in participation rate. Meanwhile, families completed 158 surveys in 2015 and 217 in 2017, this corresponds to a 27 percent increase in participation. Participation rates for the family survey have steadily increased since 2013. Figure 2 shows those results.

Figure 2: Number of Surveys and Response Rates 2015-2013



The primary reading language of residents who completed a survey was English (85 percent). Eight percent completed the survey in Spanish (four percent higher than the 2015 survey) and seven percent completed the survey in Chinese (two percent higher than the 2015 survey). The 2017 Resident Satisfaction Survey reached a slightly more diverse population of Laguna Honda residents when compared to the 2015 survey. Survey results for the Family Satisfaction Survey show that 86 percent of respondents completed the survey in English (six percent higher than the 2015 survey) while eleven percent completed the survey in Chinese and three percent completed the survey in Spanish. The biggest share of Non-English surveys continue to be completed in Chinese. However, the proportion of Non-English completed surveys is lower in 2017 (14 percent) compared to 2015 (20 percent). The 2017 results are presented in Figure 3.

Figure 3: Survey Response Rates by Language by Survey Type



4.0 Key Findings

- ✓ Response rate for the Resident Satisfaction Survey between 2013 and 2015 dropped 16 percent. In 2017 response rate increased nine percent compared to 2015.
- ✓ Response rate between 2013 and 2015 increased seven percent for the Family Satisfaction Survey. In 2017 response rate increased four percent compared to the survey in 2015.
- ✓ When considering all aspects of receiving care at Laguna Honda, 79 percent of residents and 90 percent of families are overall satisfied with Laguna Honda. This corresponds to a two percent drop for resident scores and a five percent drop for family scores. Overall satisfaction scores for Laguna Honda are higher than national averages (73 percent) and statewide averages (69 percent).
- ✓ When considering how likely Laguna Honda customers are in recommending the facility to friends or family, 83 percent of the residents and 96 percent of the families feel highly compelled to recommend the facility to others. This corresponds to an eight percent increase for resident scores and a two percent drop for family scores. Recommendation scores for Laguna Honda are higher than national averages (72 percent) and higher than statewide averages (70 percent).
- ✓ Quality of Life is rated as “excellent” or “good” by 76 percent of residents and by 85 percent of families. These ratings are four percent higher for residents and three percent lower for families compared to the 2015 survey.
- ✓ Quality of Care is rated “excellent” or “good” by 76 percent of residents who completed a survey and by 88 percent of families who completed a survey. Scores in 2015 were four percent lower for residents and one percent higher for families.
- ✓ Quality of Service is rated “excellent” or “good” by 73 percent of residents and by 84 percent of families. A one percentage increase for residents and a one percent drop for families compared to 2015.
- ✓ The safety of the facility is the highest rated aspect at Laguna Honda for residents with an 87 percent satisfaction rating. Meanwhile 91 percent of families who completed a survey feel that the facility does an “excellent” or “good” job of keeping residents safe. Safety ranks 5th by families, out of the 31 categories.
- ✓ The cleanliness of the premises is the highest rated service attribute for families who completed a survey with a 93 percent of satisfaction rating. Residents rate the cleanliness at 86 percent, ranking second in satisfaction according to survey results in 2017.
- ✓ The quality of meals is the lowest rated attribute (59 percent) for residents in 2017 and also was the lowest rated attribute in 2015 (58 percent). Families rate the quality of meals at 81 percent in 2017.
- ✓ The main reason to choose Laguna Honda for long-term care as reported by 35 percent of families is the good reputation of the facility.

5.0 Combined Satisfaction Scores for Family and Resident Survey

Table 1 shows the combined “excellent” and “good” scores for all questions that rate similar items across both surveys. Scores are presented in ranking order. The cleanliness of the premises ranked the highest for both families and residents alike followed by the safety of the facility. The quality of meals is the lowest ranked service attribute.

Table 1: Combined Excellent and Good Scores for Family and Resident Survey

Question	Top Two Scores
Cleanliness of premises	90.0%
Safety of the facility	89.4%
Care by RNs/LVNs (Registered/Licensed Nurses)	88.7%
Respectfulness of staff	85.1%
Care by physicians	84.5%
Respect for your culture	84.2%
Religious and spiritual opportunities	83.7%
Care by CNAs (Certified Nursing Assistants)	83.5%
Competency of staff	82.8%
Management of pain	82.5%
Opportunities to pursue preferred activities	82.0%
Participation in care meetings	81.1%
Attention to your grooming needs	81.0%
Support of independence	80.8%
Opportunities to participate in community outings	80.2%
Respect for privacy	80.0%
Service by social workers	79.8%
Keeping you and your family updated on your care	79.6%
Resident and staff interaction	79.6%
Care by psychiatrists/psychologists/counseling staff	79.5%
Staff’s attention and communication to each resident	78.6%
Responsiveness of management to concerns of residents	78.4%
Care by Rehabilitation staff	78.4%
Satisfaction with community outing program	78.2%
Interaction with other residents at Laguna Honda	75.7%
Quality of laundry services	74.5%
Security of personal belongings	72.5%
Quality of meals	70.4%

6.0 Resident Satisfaction Results for 2017 Survey

The following section presents a top-level summary of survey findings for the 2017 Resident Satisfaction Survey.

6.1. Overall Domain Level Responses

Figure 4 displays composite scores from each of the three domains identified in the Resident Satisfaction Survey. Composite scores are calculated from each service attribute that belongs to each domain in order to form an aggregated measure of consumer satisfaction in each area. Survey results show similar distribution of satisfaction ratings across all domains. Seventy-seven and 76 percent (respectively) of residents provided an “excellent” or “good” score when rating questions that belong to the Quality of Life and Quality of Care domains and 73 percent when rating questions the belong to the Quality of Service domain. In 2017, both Quality of Life and Quality of Care show on average a four percent increase in satisfaction at the aggregate level compared to the 2015 survey. Residents rated Quality of Service one percent lower in 2017 compared to 2015.

When looking at the composite mean score for each domain we find that Quality of Life and Quality of Care show a mean score of 3.00 which corresponds to an overall “good” performance rating according to the four point rating scale used in the survey (4=excellent, 3=good, 2=fair, 1=poor). Survey results show a slightly lower composite mean score of 2.92 for Quality of Service, virtually a perfect 3 or “good” overall composite satisfaction rating.

Figure 4: Resident Survey Domain Composite Scores

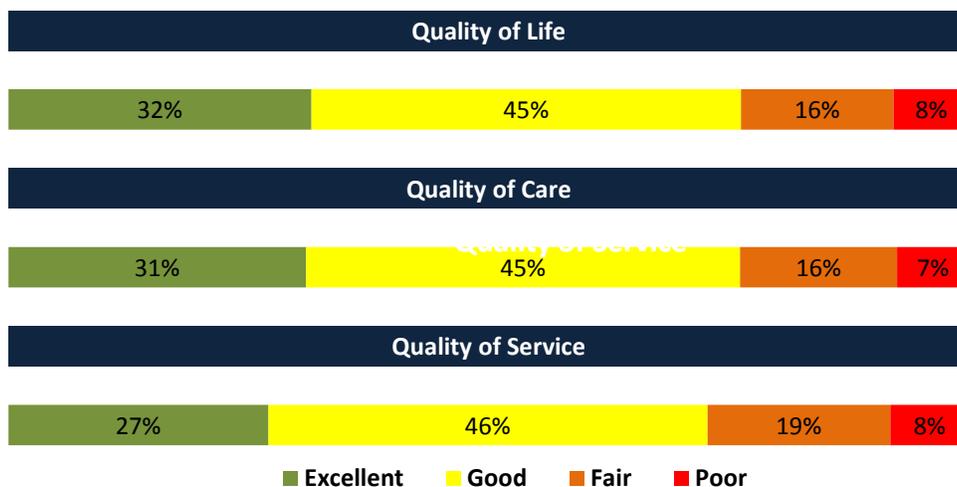
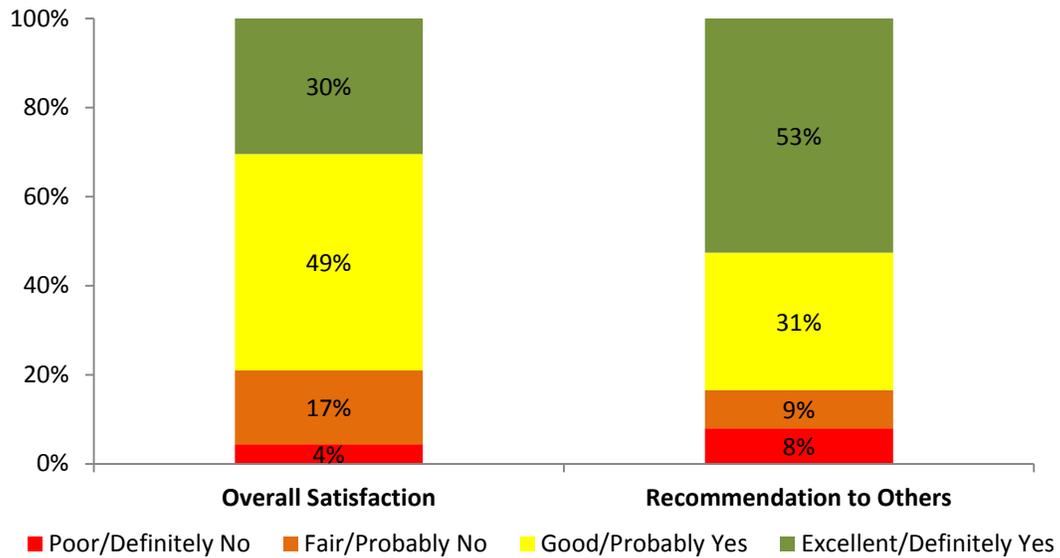


Figure 5 shows the global satisfaction ratings. Results show that 79 percent of residents rate their overall satisfaction with the facility as “excellent” or “good”. Eighty-four percent of them feel that they would definitely or probably recommend Laguna Honda to others.

Figure 5: Resident Global Satisfaction Ratings



6.2. Resident Satisfaction Survey Trends in Excellent or Good Responses

Figure 6 compares “good” and “excellent” scores across the last five waves of resident surveys conducted by Laguna Honda. Since 2009 overall resident satisfaction has ranged from 71 percent (2009) to 81 percent (2013 and 2015), with an average score of 78 percent for the past five assessments. Overall satisfaction in 2017 is 79 percent, two percent lower than 2015 but eight percent higher than 2009. The overall trend in the last five assessments has been one of increased and steady progress.

In 2017 residents are more likely to recommend the facility to others than in 2009. Recommendation scores have increased 20 percent from 63 percent in 2009 to 83 percent in 2017. In general, recommendation scores are slightly lower than overall satisfaction scores with the exception of scores in 2013 and 2017. In 2017 recommendation scores are four percent higher than satisfaction scores. This indicates that in 2017 residents are not only very satisfied but they are very likely to share their positive experiences with others.

Since 2009, Quality of Life scores have improved steadily each year¹, with 76 percent of residents being satisfied with the quality of living at Laguna Honda. The trend is indicative of a continued transformation of Laguna Honda from an “institution” to a place residents can call home. Quality of Care ratings continue to be highly positive with 76 percent of the residents being very satisfied with the performance of Laguna Honda staff, physicians, nurses, rehabilitation staff, etc. This score has remained fairly steady since 2009 except for a five percent drop in 2015, but on average six in eight residents feel highly satisfied with the quality of care provided by the facility. Quality of Service has also improved over the years with the highest ratings reported in 2013 (75 percent). Ratings have improved one percent in 2017 (73 percent satisfaction rating) compared to the previous survey (72 percent).

¹ Scores in 2015 were only two percent lower than the previous survey – well within the margin of error for that year (+/- 5.31)

Figure 6: Comparison of Resident Scores for Excellent or Good Responses



	2009	2011	2013	2015	2017
Overall Satisfaction	71%	78%	81%	81%	79%
Recommendation to Others	63%	75%	83%	75%	83%
Quality of Life	69%	73%	74%	72%	76%
Quality of Care	74%	76%	77%	72%	76%
Quality of Service	66%	69%	75%	72%	73%
Custom Questions			76%	73%	

Note: custom questions domain was used in the 2013 and 2015 surveys only.

Table 2 compares 2017 Quality of Life survey results for each attribute with the 2015 survey. The table shows the difference in the top two scores between both years under the performance gap column. Service attributes that have improved performance since 2015 are marked with a green arrow. Of the eight elements that were measured in both years, six have improved performance based on resident satisfaction ratings. The biggest improvement (10 percent) corresponds to recreational activities and residents culture identity. Eight in 10 residents feel that Laguna Honda does a great job at respecting and celebrating the cultural diversity of the residents they care for at the same time, eight in 10 residents feel that the facility tries hard to organize and facilitate activities that meet the preferences of each individual resident.

In 2017 residents feel as safe as they did in 2015 with nearly nine in 10 reporting that Laguna Honda does an excellent or a good job at keeping them safe.

Table 2: Resident Quality of Life Excellent or Good Responses 2017 vs. 2015

QUALITY OF LIFE	2015	2017	Performance Gap
Safety of the facility	86%	87%	1% ↑
Security of personal belongings	72%	70%	2%
Respect for privacy	76%	72%	4%
Respect for your culture	70%	80%	10% ↑
Opportunities to pursue preferred activities	68%	78%	10% ↑
Opportunities to participate in community outings		76%	76%
Satisfaction with community outing program		75%	75%
Religious and spiritual opportunities	69%	77%	8% ↑
Resident and staff interaction	71%	75%	4% ↑
Interaction with other residents at Laguna Honda	71%	72%	1% ↑

In the area of Quality of Care, seven out of 12 service attributes have improved ratings in 2017 compared to the 2015 survey. Those items are presented in Table 3 with a green arrow. The highest scores are given to the care provided by registered and licensed nurses with 84 percent of the residents agreeing that the quality of care they provide is excellent or good.

In 2017 residents feel more positive regarding Laguna Honda staff. Seventy-nine percent of the residents who completed a survey feel respected by facility personnel and 75 percent feel they are competent and capable of caring for the residents. Staff competence is rated seven percent higher in 2017 compared to 2015 and staff respect for the resident is rated three percent higher than in 2015. Likewise, staff’s attention to the residents’ grooming needs is rated with more approval in 2017, in fact, 79 percent of the residents feel staff pays attention to their grooming needs, six percent higher than in 2015.

In general, items related to resident care show much more positive outcomes when compared to 2015. These results are presented in the table below.

Table 3: Resident Quality of Care Excellent or Good Responses 2017 vs. 2015

QUALITY OF CARE	2015	2017	Performance Gap
Care by CNAs (Certified Nursing Assistants)	70%	77%	7% ↑
Care by RNs/LVNs (Registered/Licensed Nurses)	81%	84%	3% ↑
Care by physicians	79%	79%	0%
Care by Rehabilitation staff	72%	73%	1% ↑
Care by psychiatrists/psychologists/counseling staff	76%	72%	3%
Respectfulness of staff	76%	79%	3% ↑
Competency of staff	68%	75%	7% ↑
Management of pain	73%	73%	0%
Attention to your grooming needs	73%	79%	6% ↑
Participation in care meetings	73%	76%	3% ↑
Keeping you and your family updated on your care	74%	73%	1%
Service by social workers	71%	71%	0%

The highest performance improvement (seven percent) corresponds to the responsiveness of management in dealing with the concerns of the residents. This improvement is highly positive as it allows for the resident to receive individual personalized attention when it comes to responding to complaints or making management staff accessible to meet expectations of care and services. This improved relationship can positively impact the quality of life for residents. The quality of meals, one of the lowest rated attributes in 2017 shows a small increase in positive scores compared to 2015.

Ratings for laundry services dropped eight percent in 2017.

Table 4: Resident Quality of Service Excellent or Good Responses 2015 vs. 2013

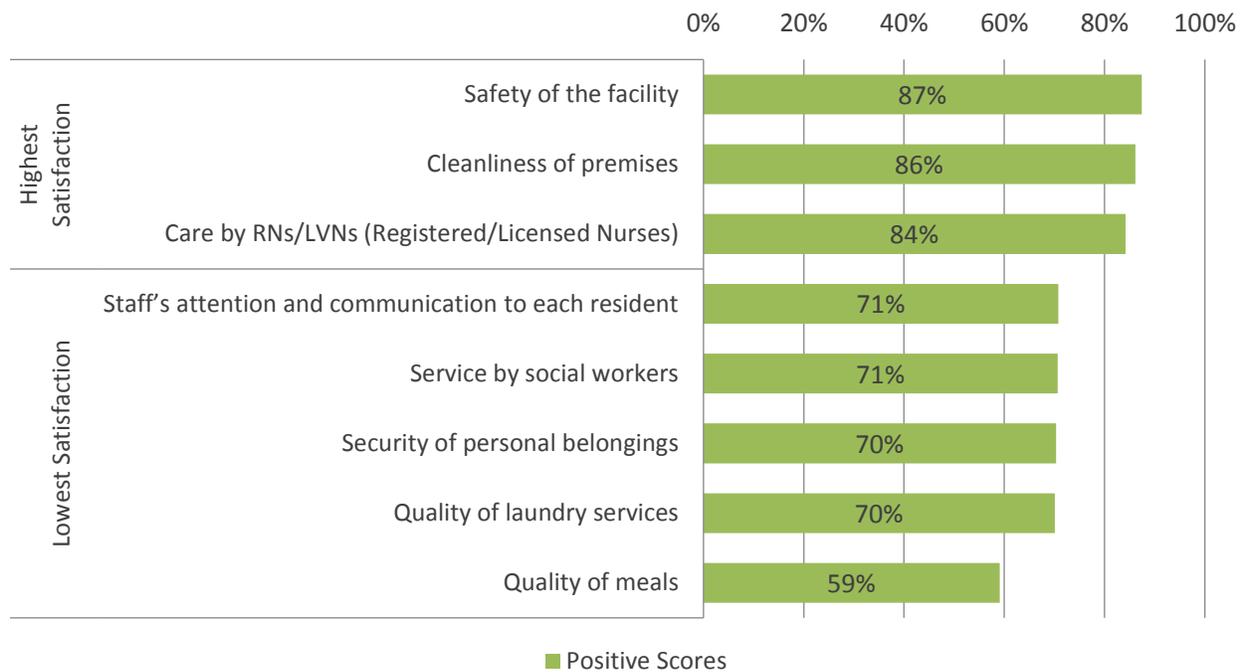
QUALITY OF SERVICE	2015	2017	Performance Gap
Quality of laundry services	78%	70%	8%
Quality of meals	58%	59%	1% ↑
Cleanliness of premises	84%	86%	2% ↑
Responsiveness of management to concerns of residents	66%	73%	7% ↑
Staff's attention and communication to each resident	66%	71%	5% ↑
Support of independence	72%	78%	6% ↑

6.3. Residents High and Low Satisfaction Ratings - Excellent or Good Responses

Figure 7 shows the highest and lowest attributes of satisfaction for resident’s regards to some specific aspects of life and care at Laguna Honda. Residents feel the most positive about the safety of the facility as nearly nine in 10 rate this aspect of life at Laguna Honda as excellent or good. This is the highest score in 2017. In contrast, resident feel the least satisfied with the quality of meals, with six in 10 rating meals as good or excellent. This is the lowest score in 2017 yet the majority of residents still feel highly positive about the food at Laguna Honda.

The top three scores for 2017 are for safety (87 percent satisfaction), cleanliness (86 percent satisfaction) and care provided by RNs and LVNs (84 percent satisfaction).

Figure 7: Residents Highest and Lowest Ratings for 2017 Survey



6.4. Residents Excellent or Good Responses by Domain

Table 5 shows individual attributes within each domain as rated by residents in 2017, ranked by mean score. Residents scored each attribute as either “excellent” which corresponds to a score of 4, “good” which corresponds to a score of 3, “fair” which equals to a 2 and “poor” which equals to a score of 1. Most positive ratings show a mean score closer of 3 and above.

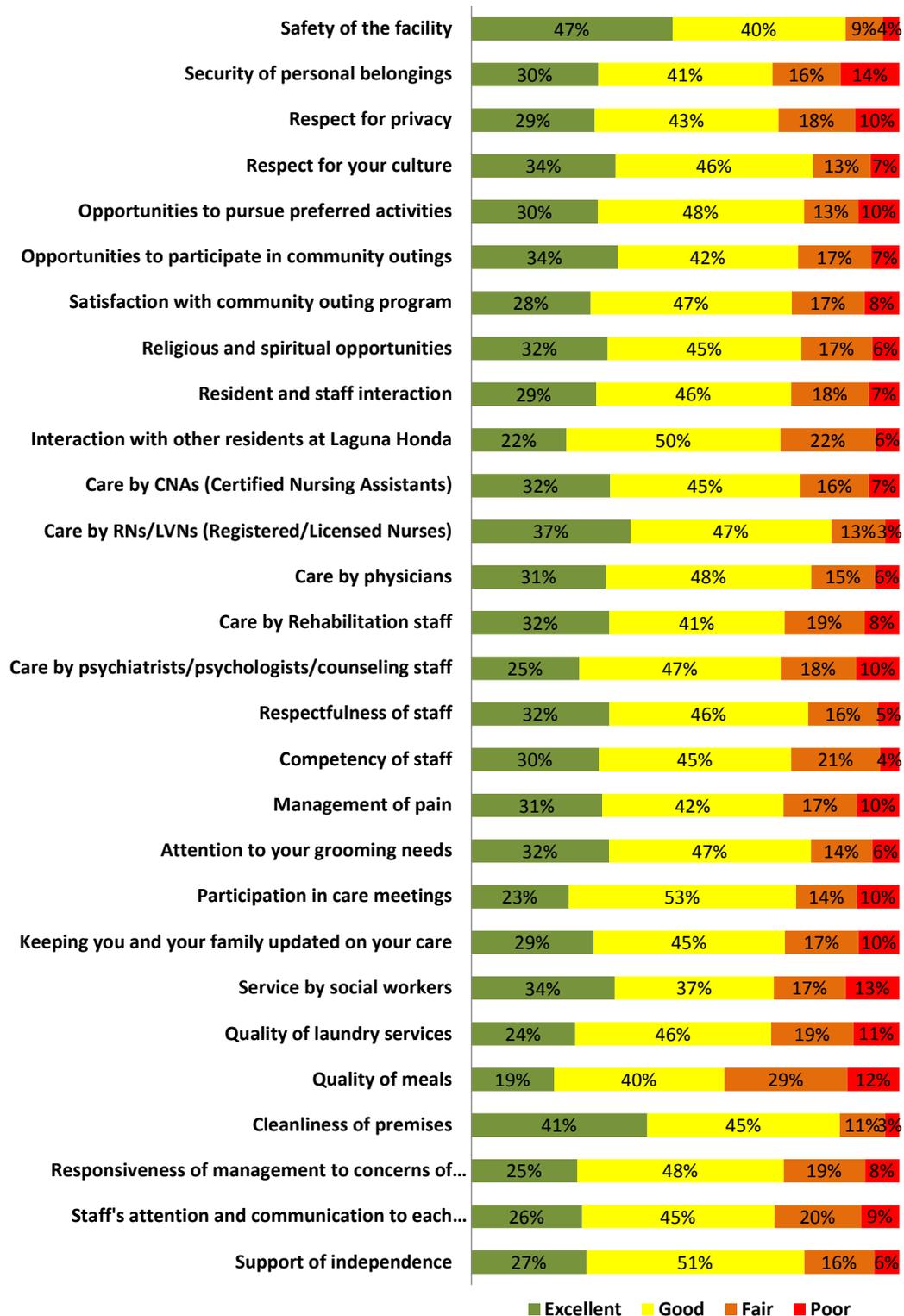
Table 5: Residents Excellent or Good Responses within Domain in Ranking Order

DOMAIN	Excellent	Good	Mean
QUALITY OF LIFE			
Safety of the facility	47%	40%	3.31
Respect for your culture	34%	46%	3.07
Opportunities to participate in community outings	34%	42%	3.04
Religious and spiritual opportunities	32%	45%	3.03
Opportunities to pursue preferred activities	30%	48%	2.98
Resident and staff interaction	29%	46%	2.97
Satisfaction with community outing program	28%	47%	2.95
Respect for privacy	29%	43%	2.90
Interaction with other residents at Laguna Honda	22%	50%	2.89
Security of personal belongings	30%	41%	2.86
QUALITY OF CARE			
Care by RNs/LVNs (Registered/Licensed Nurses)	37%	47%	3.18
Respectfulness of staff	32%	46%	3.06
Attention to your grooming needs	32%	47%	3.05
Care by physicians	31%	48%	3.05
Care by CNAs (Certified Nursing Assistants)	32%	45%	3.02
Competency of staff	30%	45%	3.00
Care by Rehabilitation staff	32%	41%	2.97
Management of pain	31%	42%	2.94
Keeping you and your family updated on your care	29%	45%	2.92
Service by social workers	34%	37%	2.92
Participation in care meetings	23%	53%	2.89
Care by psychiatrists/psychologists/counseling staff	25%	47%	2.87
QUALITY OF SERVICE			
Cleanliness of premises	41%	45%	3.24
Support of independence	27%	51%	2.99
Responsiveness of management to concerns of residents	25%	48%	2.90
Staff's attention and communication to each resident	26%	45%	2.88
Quality of laundry services	24%	46%	2.84
Quality of meals	19%	40%	2.66

6.5. Resident Satisfaction Ratings by Individual Attributes

Figure 8 shows results for all attributes rated in the 2017 Resident Satisfaction Survey.

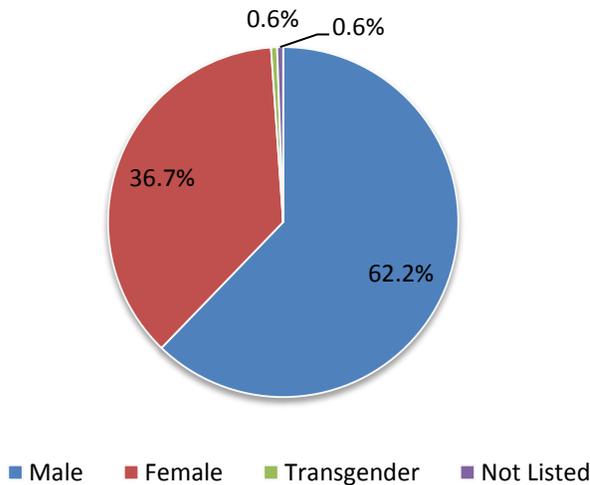
Figure 8: Resident Survey Responses by Individual Attributes



6.6. Resident Survey Demographics

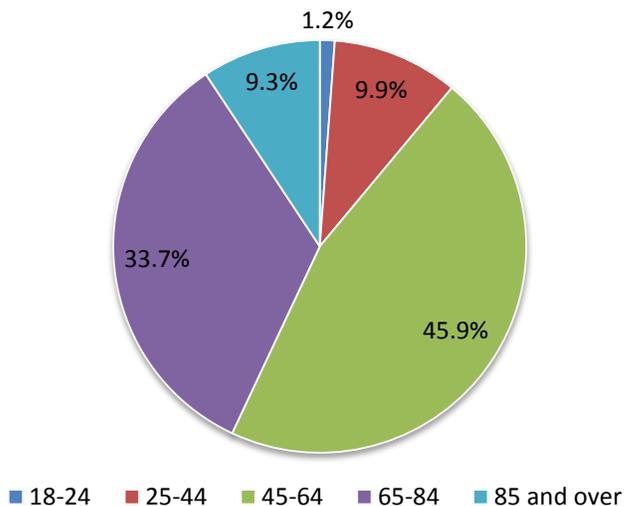
The next section displays the demographic characteristics of Laguna Honda residents who participated in the survey. This analysis excludes “prefer not to answer” responses. The resident’s ethnicity, gender and length of stay are further explored in the Demographic Analysis Section to understand the relationship between these demographics and customer satisfaction.

Figure 9: Resident Gender



Results show that 62 percent of the surveys were completed by male residents and 37 percent were completed by female residents. These results are similar to the 2015 survey where 58 percent males and 40 percent females completed a survey. Less than one percent of the surveys were completed by transgender residents and by residents who indicated that their gender was not listed.

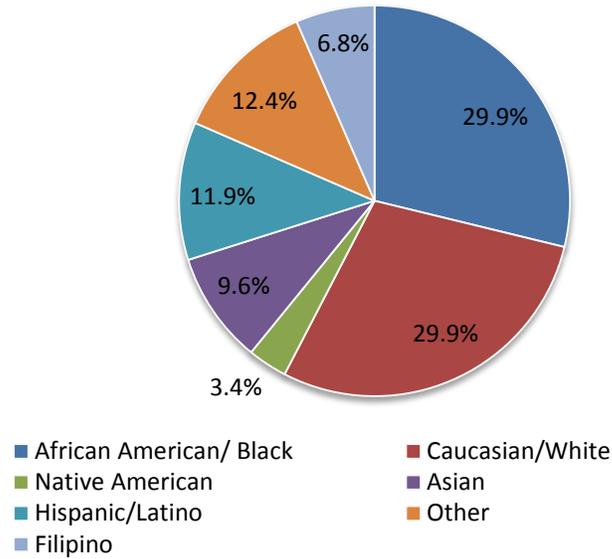
Figure 10: Resident Age



The largest group of residents (46 percent) who completed a survey are between 45 and 64 years of age. The second largest group (34 percent) corresponds to those aged 65 through 84. One percent of the residents who completed a survey are 18 to 24 years of age.

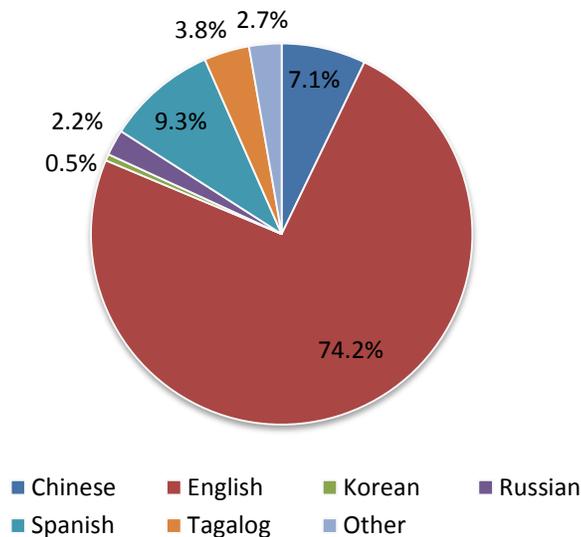
Sixty percent of survey respondents largely identify themselves as either White Caucasian (30 percent) or Black African American (30 percent). These results are similar to the 2015 survey especially for Black African Americans who completed 33 percent of surveys in 2015 compared to 40 percent of White Caucasians. In 2017 seven percent of survey respondents identified themselves as Filipino. This demographic group was added to the 2017 survey. Twelve percent identified themselves as belonging to another group not listed as an option in the survey, this category corresponded to 3 percent of respondents in the 2015 survey (a nine percent increase).

Figure 11: Resident Ethnicity



Seven in 10 residents who completed a survey report English as being their preferred language this is in contrast to the 85 percent reported in 2015. While 74 percent of survey respondents report English as being their preferred language; 85 percent of the surveys were completed in English. One in 10 residents reported Spanish as their preferred language and fewer than one in 10 reported that Chinese was their preferred language. Eight percent of Resident Satisfaction Surveys were completed in Spanish and seven percent in Chinese. These results are similar to the 2015 survey.

Figure 12: Resident Preferred Language

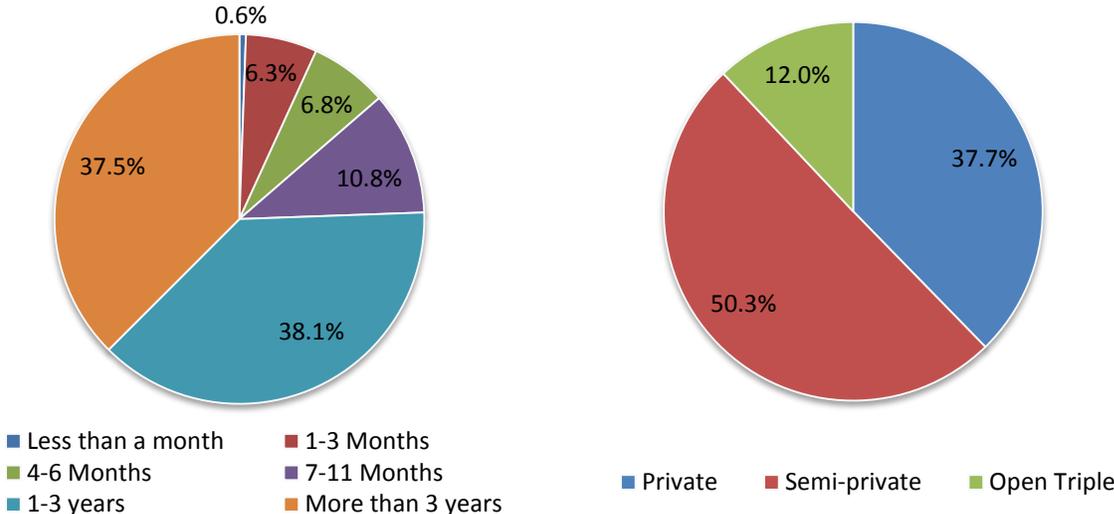


Seventy-six percent of residents who completed a survey have stayed at the facility for more than a year and can be considered long-stay residents, this corresponds to an eight percent increase since the 2015 survey. In 2017 survey results captured the opinions of residents who have been at the facility less than a month; this corresponds

to less than one percent of survey participants. The relationship of length of stay and customer satisfaction is explored later in this report.

Five in 10 residents who completed a survey stay in a semi-private room at Laguna Honda.

Figure 13: Resident Length of Stay and Type of Room



7.0 Family Satisfaction Results for 2017 Survey

The following section presents a top-level summary of survey findings for the Family Satisfaction Survey.

7.1. Overall Domain Level Responses

Families rated the Quality of Care by Laguna Honda staff higher than other areas measured in the survey. Eighty-eight percent of families of residents felt that the level of care for their relative was “excellent” or “good.” This area also showed the highest level of satisfaction in the 2015 survey. This area shows the highest share of “excellent” scores, 49 percent. Quality of Life follows family satisfaction ratings at 85 percent and Quality of Service at 84 percent. The ranking order for these domains are the same in the 2015 survey.

When looking at the composite mean scores of all four scale responses (4=excellent, 3=good, 2=fair, 1=poor) for each one of these categories, we find that all scores averages are slightly higher than a 3 which shows a “good” level of overall performance. Most positive ratings show a mean score closer to a 3 and above. The composite mean score for the Quality of Life domain is 3.23, Quality of Care is 3.33, and Quality of Service is 3.22.

In general, eight in 10 families rate Laguna Honda either “excellent” or “good” in these areas.

Figure 14: Family Domain Composite Scores

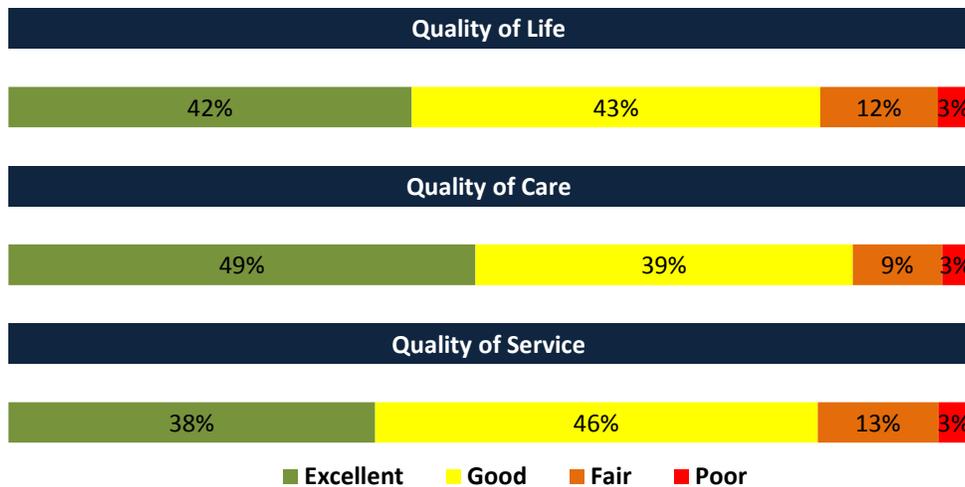
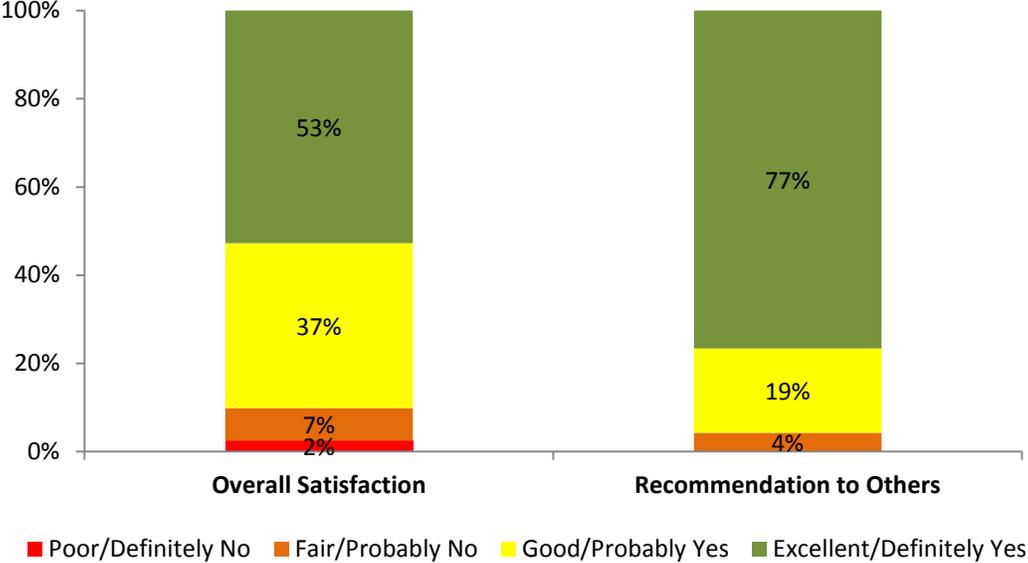


Figure 15 shows global satisfaction ratings for the Family Survey. Ninety percent of families who completed a survey are highly satisfied overall with Laguna Honda as demonstrated by the high percentage of “excellent” and “good” scores. In addition, 96 percent of families would recommend the facility to others.

Figure 15: Family Global Satisfaction Ratings



7.2. Family Satisfaction Survey Trends in Excellent or Good Responses

The Family Satisfaction Survey scores are fairly consistent across time as shown in Figure 16. Since 2009 overall satisfaction ratings have improved one percent (89 percent in 2009 and 90 percent in 2017) with the highest satisfaction rating (95 percent) reported in 2015. Between 2015 and 2017 satisfaction scores dropped five percent. The biggest gain in scores since 2009 is in recommendation scores. In 2009, eight in 10 families would recommend the facility to a friend or family, in 2017 nine in 10 families are likely to recommend the facility to a friend or family. This corresponds to a 12 percent increase since 2009. In 2017, recommendation scores fell two percent.

The quality of residents' lives at Laguna Honda, the care residents receive, and the quality of the services they receive are all perceived much more positively in 2017 when compared to 2009. Satisfaction with services has improved nine percent since 2009, care from Laguna Honda staff has improved six percent, and the general quality of life has improved four percent.

Although scores in 2017 are slightly lower than in 2015, the difference is within the margin of error for the survey in 2017 (+/- 5.36) and the overall trend since 2009 shows scores gradually improving. As a whole all these scores are highly positive.

Figure 16: Comparison of Family Scores for Excellent or Good Responses

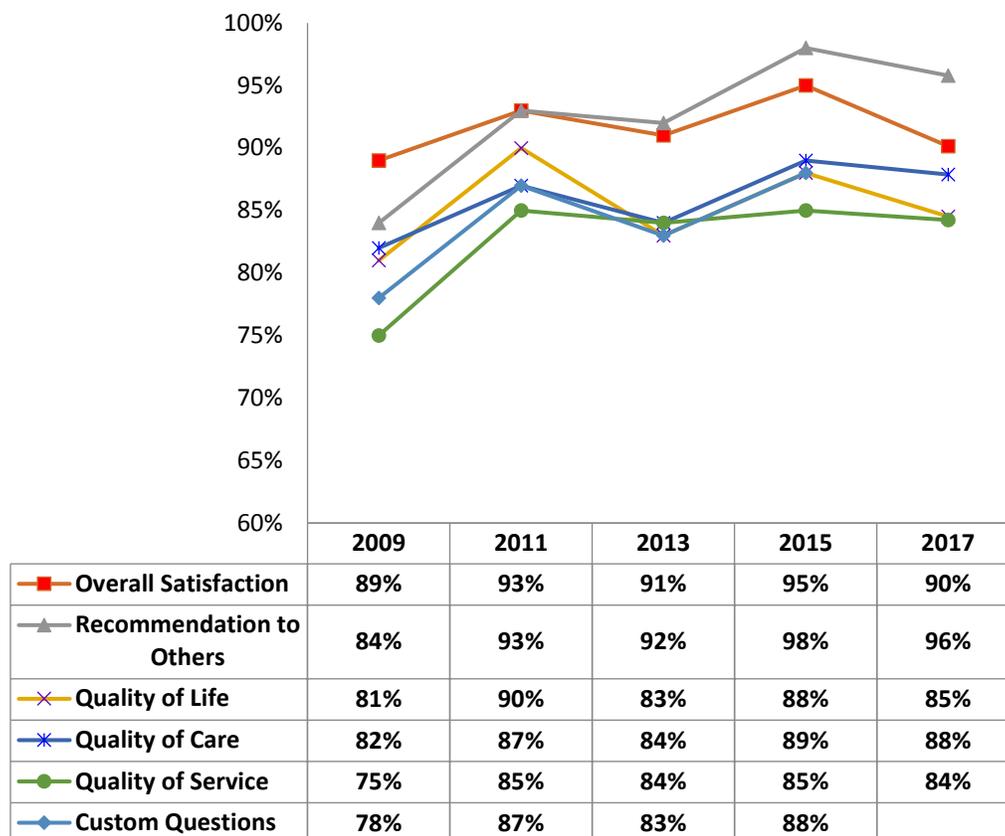


Table 6 presents a comparison between results from the 2017 and 2015 survey for each individual service attribute grouped by domain. Positive scores have been marked with a green arrow and areas of lower performance above the margin of error have been highlighted in red. The responsiveness of management and the quality of meals are

seen as more positive than in 2015. The respect for the resident’s privacy and the quality of laundry services are rated eight percent lower than in 2015.

Table 6: Family Excellent or Good Responses 2015 vs. 2013

DOMAIN	2015	2017	Performance Gap
QUALITY OF LIFE			
Safety of the facility	91%	91%	0%
Security of resident’s personal belongings	78%	74%	4%
Respect for resident’s privacy	95%	87%	8%
Respect for resident’s culture	94%	88%	6%
Opportunities to pursue preferred activities	83%	86%	3%
Opportunities to participate in community outings	81%	84%	3%
Satisfaction with community outing program		81%	
Religious and spiritual opportunities	91%	90%	1%
Resident and staff interaction	90%	84%	7%
Interaction with other residents at Laguna Honda	82%	79%	3%
QUALITY OF CARE			
Care by CNAs (Certified Nursing Assistants)	91%	89%	2%
Care by RNs/LVNs (Registered/Licensed Nurses)	95%	93%	3%
Care by physicians	91%	89%	2%
Care by Rehabilitation staff	87%	83%	4%
Care by psychiatrists/psychologists/counseling staff	85%	85%	1%
Respectfulness of staff	96%	91%	5%
Competency of staff	91%	90%	1%
Management of pain	93%	91%	1%
Attention to resident’s grooming needs	89%	82%	7%
Participation in care meetings	88%	85%	3%
Keeping you updated on resident’s care	86%	85%	2%
Support from staff during resident’s change in condition	92%	86%	5%
Opportunities for families to make decisions	95%	93%	2%
Discussion of resident’s end-of-life care	94%	89%	5%
Service by social workers	89%	87%	2%
QUALITY OF SERVICE			
Quality of laundry services	86%	78%	8%
Quality of meals	79%	81%	2% ↑
Cleanliness of premises	95%	93%	2%
Responsiveness of management to concerns of residents	80%	83%	3% ↑
Staff’s attention and communication to each resident	89%	85%	4%
Support of independence	89%	84%	6%

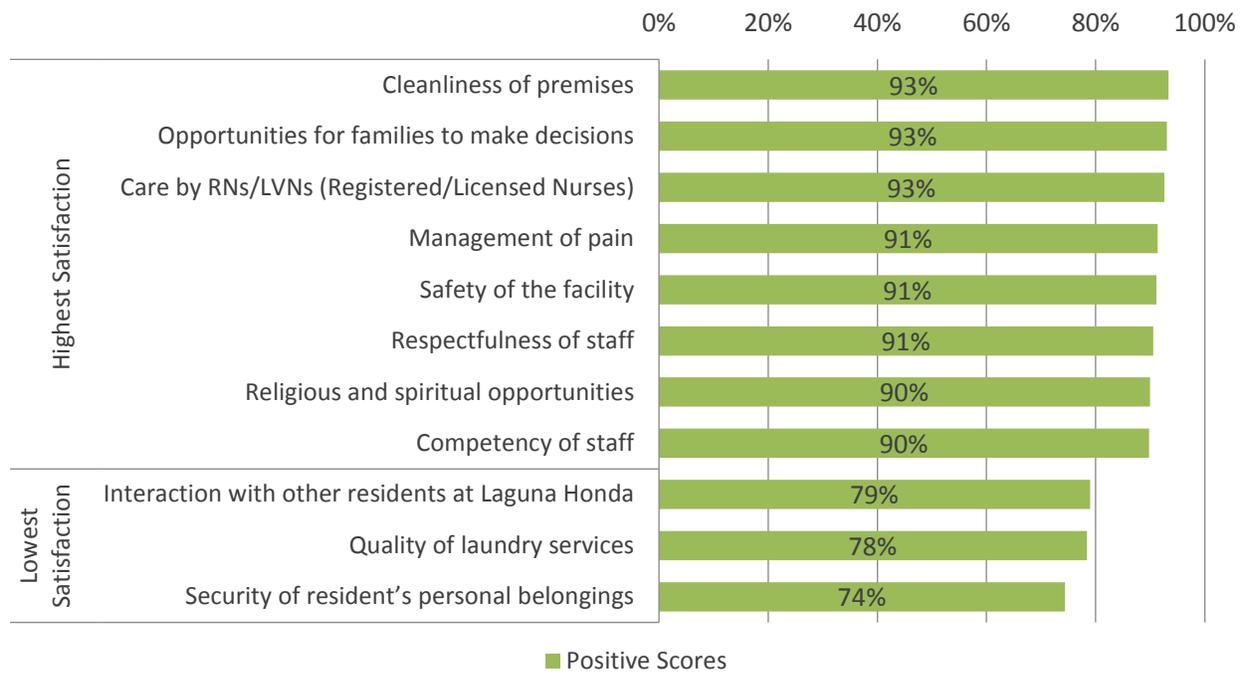
7.3. Family High and Low Satisfaction Ratings - Excellent or Good Responses

The highest satisfaction scores in 2017 correspond to the cleanliness of the facility, the opportunities families have to make decisions about the care of the resident and the care provided by RNs and LVNs. All of these scores are rated as “excellent” or “good” by 93 percent of families who completed a survey. The lowest satisfaction scores correspond to the residents’ security of personal items (74 percent), the quality of laundry services (78 percent) and the opportunities residents have to interact with other residents (79 percent).

The range of scores in 2017 is 93 percent to 74 percent compared to 96 and 78 percent in 2015.

Figure 17 shows the areas of least and greatest satisfaction for families.

Figure 17: Family Highest and Lowest Ratings for 2017 Survey



7.4. Family Excellent or Good Responses by Domain

Table 7 shows individual attributes by domain as rated by family members in 2017 ranked by mean score. Family members or another responsible party scored each attribute as either “excellent” which corresponds to a score of four, “good” which corresponds to a score of three, “fair” which corresponds to a score of two, or “poor” which equals to a score of one. Most positive ratings show a mean score closer to a three and above. In general, families rate all survey measures as “good” or better.

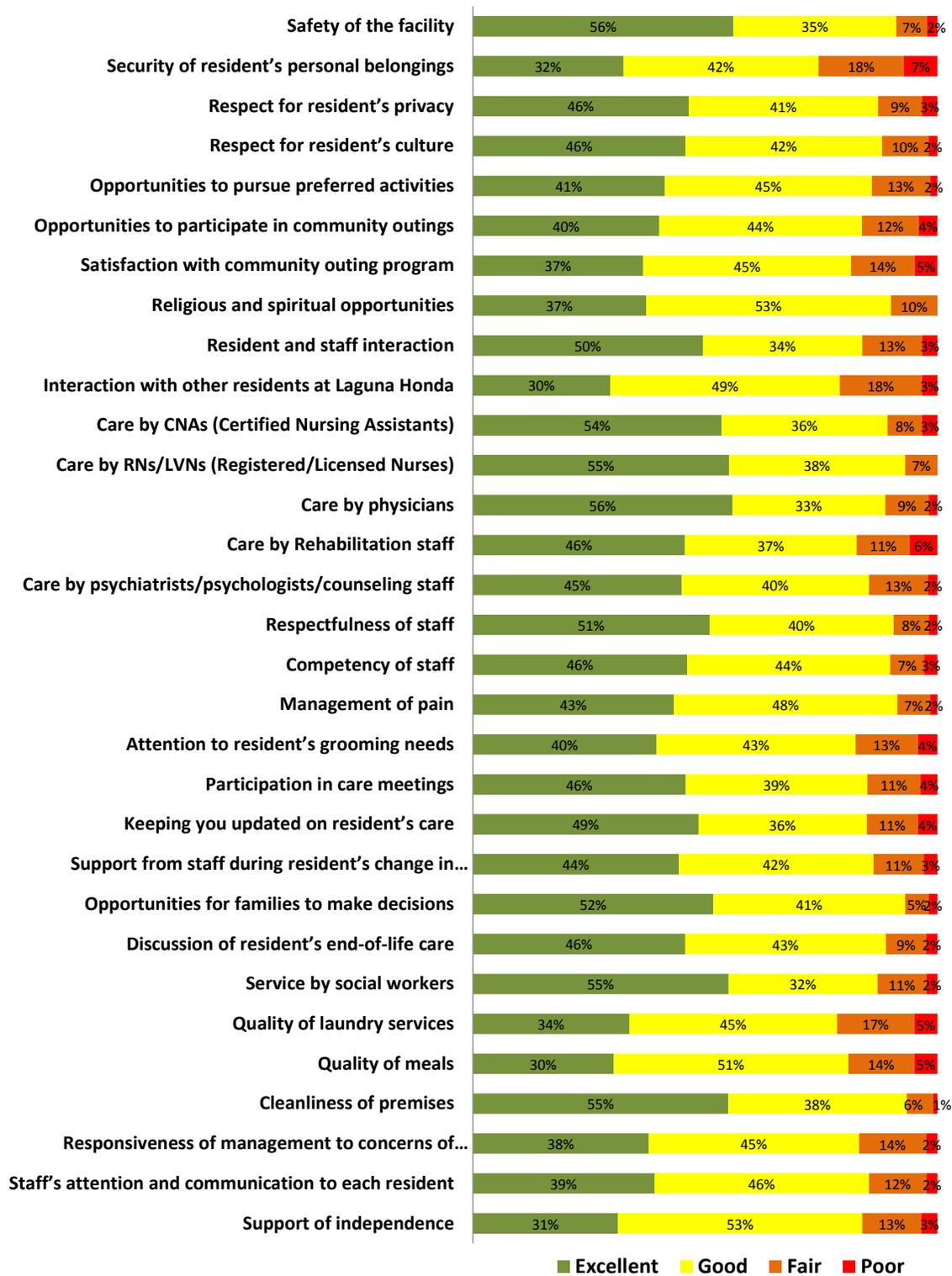
Table 7: Family Excellent or Good Responses within Domain in Ranking Order

DOMAIN	Excellent	Good	Mean
QUALITY OF LIFE			
Safety of the facility	56%	35%	3.45
Respect for resident’s culture	46%	42%	3.32
Respect for resident’s privacy	46%	41%	3.30
Resident and staff interaction	50%	34%	3.30
Religious and spiritual opportunities	37%	53%	3.27
Opportunities to pursue preferred activities	41%	45%	3.26
Opportunities to participate in community outings	40%	44%	3.20
Satisfaction with community outing program	37%	45%	3.13
Interaction with other residents at Laguna Honda	30%	49%	3.05
Security of resident’s personal belongings	32%	42%	3.00
QUALITY OF CARE			
Care by RNs/LVNs (Registered/Licensed Nurses)	55%	38%	3.47
Opportunities for families to make decisions	52%	41%	3.43
Care by physicians	56%	33%	3.43
Service by social workers	55%	32%	3.40
Respectfulness of staff	51%	40%	3.40
Care by CNAs (Certified Nursing Assistants)	54%	36%	3.39
Competency of staff	46%	44%	3.33
Management of pain	43%	48%	3.33
Discussion of resident’s end-of-life care	46%	43%	3.32
Keeping you updated on resident’s care	49%	36%	3.29
Care by psychiatrists/psychologists/counseling staff	45%	40%	3.28
Support from staff during resident’s change in condition	44%	42%	3.28
Participation in care meetings	46%	39%	3.27
Care by Rehabilitation staff	46%	37%	3.22
Attention to resident’s grooming needs	40%	43%	3.18
QUALITY OF SERVICE			
Cleanliness of premises	55%	38%	3.47
Staff’s attention and communication to each resident	39%	46%	3.22
Responsiveness of management to concerns of residents	38%	45%	3.18
Support of independence	31%	53%	3.12
Quality of laundry services	34%	45%	3.07
Quality of meals	30%	51%	3.06

7.5. Family Satisfaction Ratings by Individual Attributes

Figure 18 shows results for all attributes rated in the 2017 Family Satisfaction Survey.

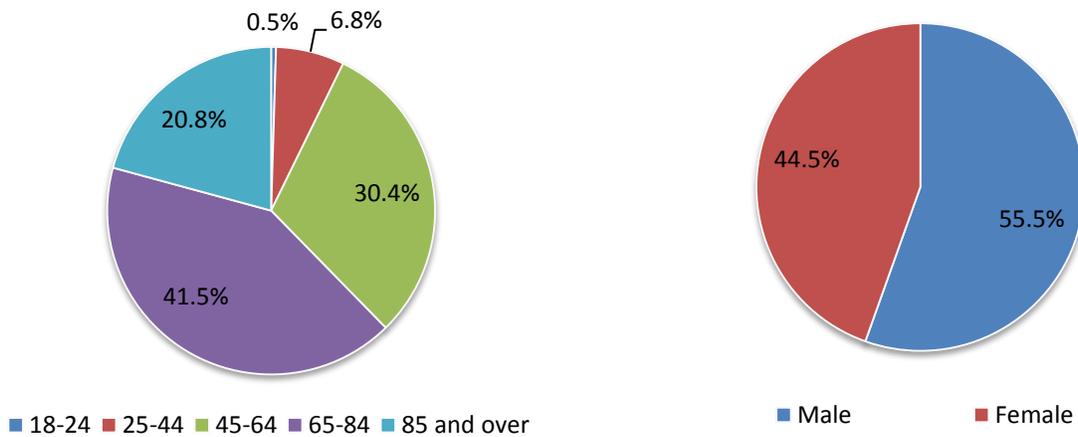
Figure 18: Family Survey Responses by Individual Attributes



7.6. Family Survey Demographics

The following section displays demographic characteristics of residents at Laguna Honda as reported by families or other significant others in charge of their care. As shown in Figure 19, fifty-five percent of families who completed a survey have a male resident at Laguna Honda and 41 percent care for a resident between the ages of 65 and 84. Only one family indicated that the gender of the resident was not listed as one of the survey options.

Figure 19: Age and Gender as Reported by Families



As shown on Figure 20, families who completed a survey care for a resident who is likely to be White Caucasian whose preferred language is English.

Figure 20: Ethnicity and Preferred Language as Reported by Families

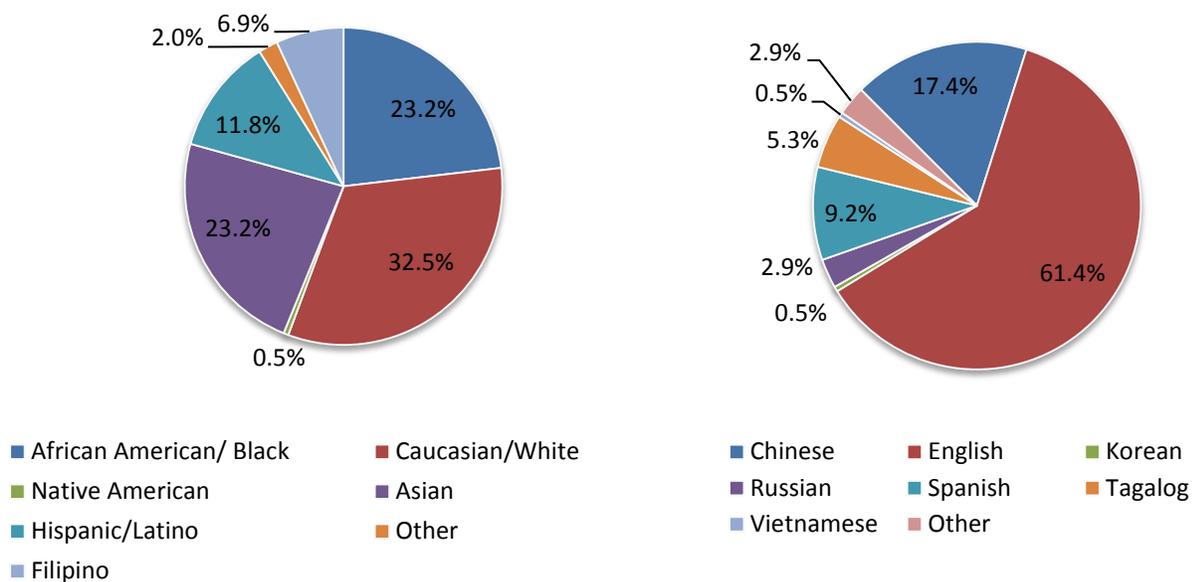
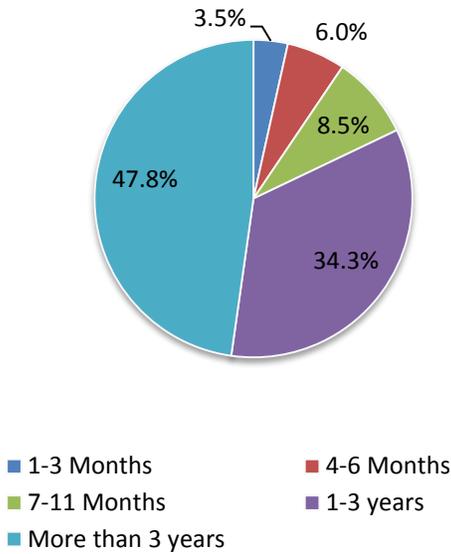


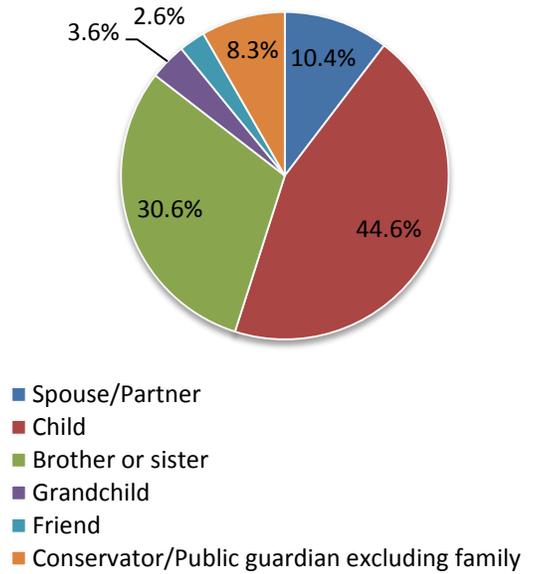
Figure 21: Resident Length of Stay



Results show that 48 percent of families who completed a survey have a relative who has been at Laguna Honda for more than three years and another 34 percent have a relative who has resided at Laguna Honda for one to three years. About 10 percent of families have a resident who has been at the facility for six months or less.

Figure 22 shows that 45 percent of survey respondents have a parent receiving care at Laguna Honda, meanwhile 31 percent have a brother or a sister at Laguna Honda. These results are similar to the 2015 survey. Eight percent of the surveys were completed by conservator or a public guardian, this percentage was 14 percent in 2015.

Figure 22: Relationship to Resident



When asked to report the most important reason the family chose Laguna Honda, the majority (35 percent) indicated the good reputation of the facility. These results line up with the 2015 survey although the proportion of responses was much higher in 2015, that is, 42 percent. Near one fourth of families mention other reasons not listed in the survey as why they chose Laguna Honda. The reason most mentioned is being recommended to Laguna Honda by the previous hospital where the patient was; followed by a recommendation by the patient’s doctor; and lastly, by the patient’s social worker or by the organization providing social services to the patient or family. Figure 23 shows results to this question and table 8 shows a summary of verbatim responses.

Figure 23: Most Important Reason to Choose Laguna Honda

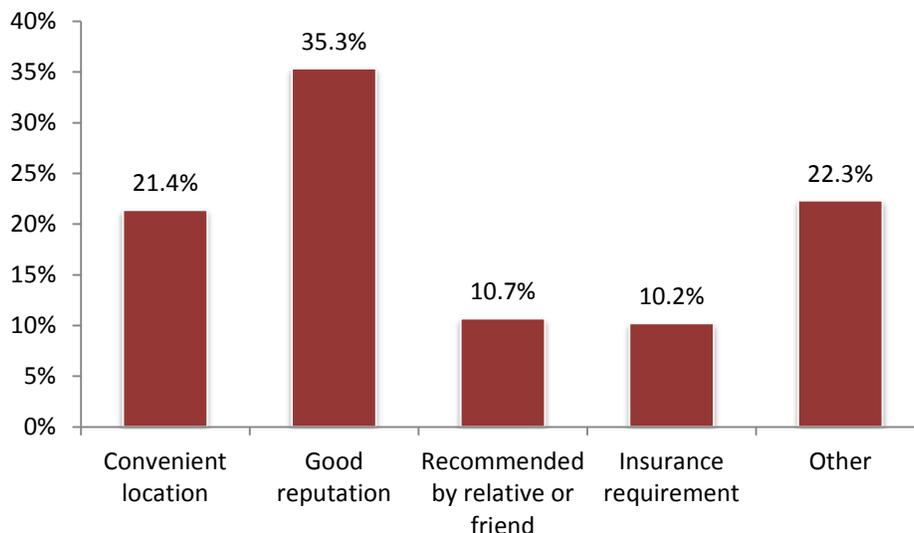


Table 8: Verbatim Comments

Most Important Reason to Choose Laguna Honda	
Other responses	
Hospital recommendation	27%
Nothing	20%
Doctor Referral	16%
social services recommendation	14%
Only option	9%
Did not make the decision	7%
All of the above	5%
Other	2%

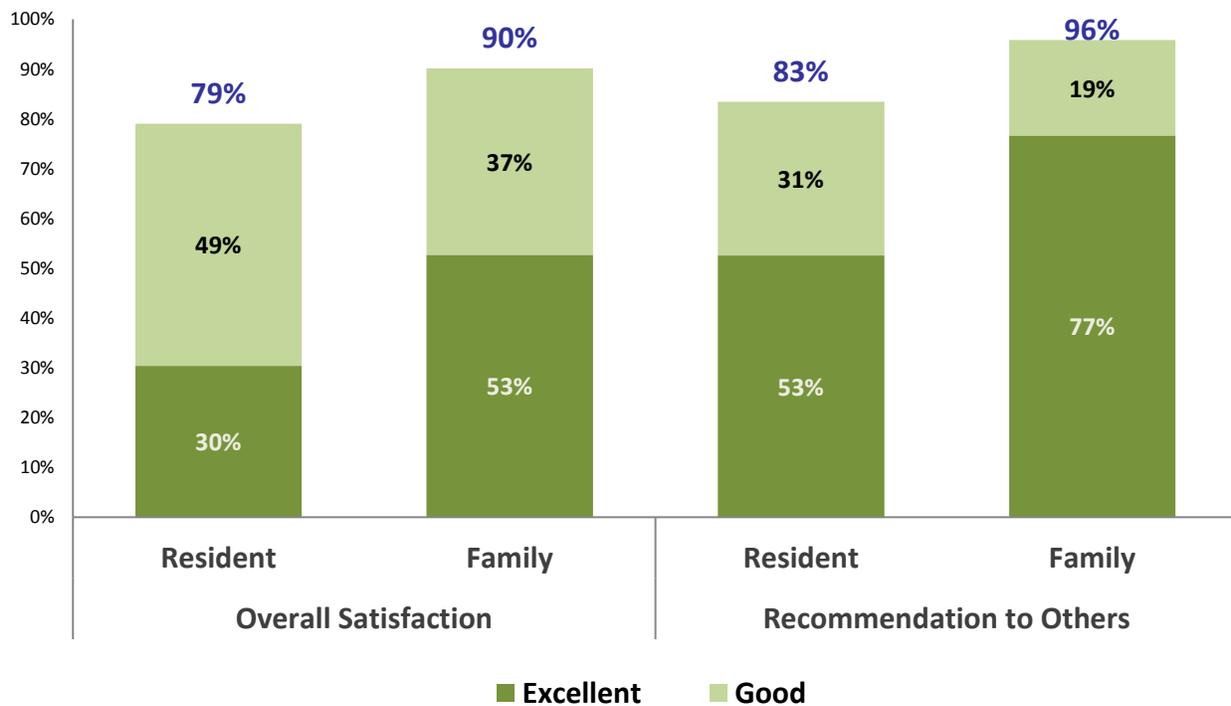
8.0 Resident and Family Comparisons

Understanding the relationships and trends in satisfaction among Laguna Honda’s customer base (residents and their families) can help Laguna Honda enhance the care experience for all. Gathering resident satisfaction data provides a good insight on the first steps to improve daily life and care; the perspective from family members or other responsible adults can enhance the resident’s experience and many times their participation allows the viewpoint of those residents who are not able to respond to the survey. This section explores how residents and families view Quality of Care at Laguna Honda and how these views may differ or be similar to one another.

8.1. Global Satisfaction Trends

When comparing global satisfaction across both groups of respondents we see that families tend to rate overall satisfaction higher (90 percent) than the residents (79 percent) and would recommend the facility to others more often (96 percent) than the actual residents (83 percent). Families rated both overall satisfaction and likelihood to recommend the facility lower than in the previous survey. The overall satisfaction dropped by five percent and likelihood to recommend the facility at a two percent drop. Residents also rated overall satisfaction lower than the previous survey by two percent, but recommendation of the facility ratings came in higher by eight percent. Similar to the previous survey, nearly twice as many families as compared to residents provide “excellent” scores to overall satisfaction. For recommendation of the facility, families provide “excellent” scores about 30 percent more often than the residents. Results for both measures for the 2017 survey are shown in Figure 24. In general, both families and residents do provide consistently high “excellent” and “good” scores across both measures and even the lowest ratings are well above 70 percent of “excellent” or “good” scores. These customers can be considered highly engaged.

Figure 24: Excellent and Good Responses by Survey Type



Both surveys show high levels of overall satisfaction and willingness to recommend Laguna Honda to others. The good reputation of the facility and word-of-mouth recommendation are highly important for families to choose long term care for their loved ones, which are seen as measures of customer loyalty.

Research shows that measures of customer loyalty correlate to organizational success. The Loyalty Business Model is built upon the premise that quality of product or service leads to customer satisfaction, which leads to customer loyalty, which leads to profitability or company success². The same premise applies to loyal and happy residents and families who are satisfied with Laguna Honda offerings. Therefore, the facility’s ability to identify areas of care that have a high correlation coefficient to recommending the facility to others can be beneficial when it comes to retaining their customer base but also in expanding their customer base.

Figure 25 shows the performance attributes that have high correlation with respondent’s willingness to recommend the facility to others. Items are sorted according to correlation coefficient, with the items that show higher correlation at the top and those with lower correlation at the bottom of the list. Items common to both residents and families are presented in bold and should provide areas to focus on.

Figure 25: Factors that Drive Recommendation Scores

Items Most Correlated with Recommendation to Others – Top 10 Drivers	
Resident	Family
<ul style="list-style-type: none"> ○ Staff’s attention and communication to each resident ○ Care by psychiatrists/psychologists/counseling staff ○ Respectfulness of staff ○ Competency of staff ○ Safety of the facility ○ Quality of laundry services ○ Responsiveness of management to concerns of residents ○ Care by CNAs (Certified Nursing Assistants) ○ Participation in care meetings ○ Management of pain 	<ul style="list-style-type: none"> ○ Attention to resident’s grooming needs ○ Staff’s attention and communication to each resident ○ Care by CNAs (Certified Nursing Assistants) ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Respect for resident’s privacy ○ Respectfulness of staff ○ Competency of staff ○ Support from staff during resident’s change in condition ○ Respect for resident’s culture ○ Safety of the facility

*Sorted from highest to lowest correlation coefficient
Common to residents and family survey are in bold*

² Storbacka, K. Strandvik, T. and Gronroos, C. (1994) "Managing customer relationships for profit", International Journal of Service Industry Management, vol. 5, no 5, 1994, pp 21-28.

8.2. Caregiver Ratings

The role of the caregiver is critical to the Quality of Life domain – the general well-being of the residents and the trust which families place in the facility to care for their relatives. In addition, interactions with caregivers can influence satisfaction ratings and customer’s willingness to recommend the facility to others and the desire to maintain a long term relationship with the facility if needed (customer retention).

Table 9 compares combined “excellent” and “good” ratings for caregivers as reported by residents and families and it shows differences in perception between the two groups. The general trend is for families to have a more positive perception than the actual residents of the work done by caregivers. The average combined positive score for caregivers in the Resident Satisfaction Survey is 76 percent and 88 percent in the Family Satisfaction Survey. The biggest perception gap of 16 percent pertains to how both groups feel regarding the Quality of Service of social workers. The second largest level of disparity is with the competency of all staff as a group (15 percent) and third, with the care by psychiatrists/psychologists/counseling staff (13 percent). Residents and families tend to agree most with the Quality of Care provided by RNs/LVNs (Registered/Licensed Nurses) – this measure shows the lowest gap in perception (eight percent). The perception gap overall is smaller in the 2017 survey than it was in the previous survey. The following table is presented sorted by perception gap.

Table 9: Combined Excellent or Good Ratings for Caregivers

Attribute	Resident Satisfaction Survey		Family Satisfaction Survey		Perception Gap
	Positive Scores	Mean	Positive Scores	Mean	
Service by social workers	71%	2.92	87%	3.40	16%
Competency of staff	75%	3.00	90%	3.33	15%
Care by psychiatrists/psychologists/counseling staff	72%	2.87	85%	3.28	13%
Care by CNAs (Certified Nursing Assistants)	77%	3.02	89%	3.39	12%
Respectfulness of staff	79%	3.06	91%	3.40	12%
Care by Rehabilitation staff	73%	2.97	83%	3.22	9%
Care by physicians	79%	3.05	89%	3.43	9%
Care by RNs/LVNs (Registered/Licensed Nurses)	84%	3.18	93%	3.47	8%

8.3. Trends in Performance Ratings

This section looks at the differences in perception between residents and families across all attributes. Table 10 shows combined “excellent” and “good” composite ratings across domains. The area where residents and families show more differences is in the Quality of Care domain (12 percent) but at the aggregate level differences across domains are pretty evenly distributed.

Differences in perception become more apparent when comparing individual attributes. Table 11 compares the positive ratings for all attributes and the perception gap between residents and families. These scores are grouped by domain and ranked by perception gap within each domain.

Quality of Life measures show that there is a 15 percent perception gap in regards to the respect for privacy. This is the largest perception gap in this area. On the one hand, 87 percent of the families feel that Laguna Honda does an “excellent” or “good” job at respecting the privacy of the residents and on the other hand, 72 percent of residents agree with this statement. The areas where residents and families agree the most is in regards to safety (four percent gap) and security of personal items (four percent gap).

Quality of Care ratings show a 18 percent disparity between how resident and families rate the management of pain, and a 16 percent difference in how they rate the service by social workers. Residents and families agree the most with the ratio of attention to resident’s grooming needs (three percent gap).

In the area of Quality of Service, the largest gap in perception is when rating the quality of meals (22 percent) and the highest level of agreement is in regards to support of independence (six percent).

Table 10: Combined Excellent or Good Ratings across Domains

Performance Domain	Resident Survey		Family Survey		Perception Gap
	Positive Scores	Mean	Positive Scores	Mean	
QUALITY OF LIFE	76%	3.00	85%	3.23	8%
QUALITY OF CARE	76%	2.99	88%	3.33	12%
QUALITY OF SERVICE	73%	2.92	84%	3.19	11%

Table 11: Combined Excellent or Good Ratings within Domains

QUALITY OF LIFE	Resident	Family	Perception Gap
Respect for resident’s privacy	72%	87%	15%
Religious and spiritual opportunities	77%	90%	13%
Resident and staff interaction	75%	84%	9%
Respect for resident’s culture	80%	88%	8%
Opportunities to pursue preferred activities	78%	86%	8%
Opportunities to participate in community outings	76%	84%	7%
Interaction with other residents at Laguna Honda	72%	79%	7%
Satisfaction with community outing program	75%	81%	7%
Security of resident’s personal belongings	70%	74%	4%
Safety of the facility	87%	91%	4%

QUALITY OF CARE	Resident	Family	Perception Gap
Management of pain	73%	91%	18%
Service by social workers	71%	87%	16%
Competency of staff	75%	90%	15%
Care by psychiatrists/psychologists/counseling staff	72%	85%	13%
Care by CNAs (Certified Nursing Assistants)	77%	89%	12%
Respectfulness of staff	79%	91%	12%
Keeping you updated on resident's care	73%	85%	12%
Care by Rehabilitation staff	73%	83%	9%
Care by physicians	79%	89%	9%
Participation in care meetings	76%	85%	9%
Care by RNs/LVNs (Registered/Licensed Nurses)	84%	93%	8%
Attention to resident's grooming needs	79%	82%	3%
Support from staff during resident's change in condition		86%	
Opportunities for families to make decisions		93%	
Discussion of resident's end-of-life care		89%	
QUALITY OF SERVICE	Resident	Family	Perception Gap
Quality of meals	59%	81%	22%
Staff's attention and communication to each resident	71%	85%	14%
Responsiveness of management to concerns of residents	73%	83%	10%
Quality of laundry services	70%	78%	8%
Cleanliness of premises	86%	93%	7%
Support of independence	78%	84%	6%

8.4. Trends in General Comments

The following section compares the areas that are most important for residents and families when asked what Laguna Honda does best and what they can do to improve services.

Table 12 shows a comparison of the top six areas residents and families feel Laguna Honda does best. The table shows these items sorted based on the number of responses received. Both groups generally agree on what makes Laguna Honda great. Appendix A shows all verbatim responses in detail.

Table 12: What Laguna Honda does best

Residents	Families
Care received	Caring/Kind/Responsible/Respectful staff
Activities/Entertainment	Quality of care received
Staff	Cleanliness
Feeling comfortable/safe	Communication with family
No comment/Don't know	Pleasant/comfortable environment
Cleanliness	Everything is good/Excellent Staff/Nurse

Table 13 shows a comparison of the six areas residents and families feel Laguna Honda can focus on to improve services. Appendix A shows all verbatim responses in detail.

Table 13: What Laguna Honda can do to Improve Services

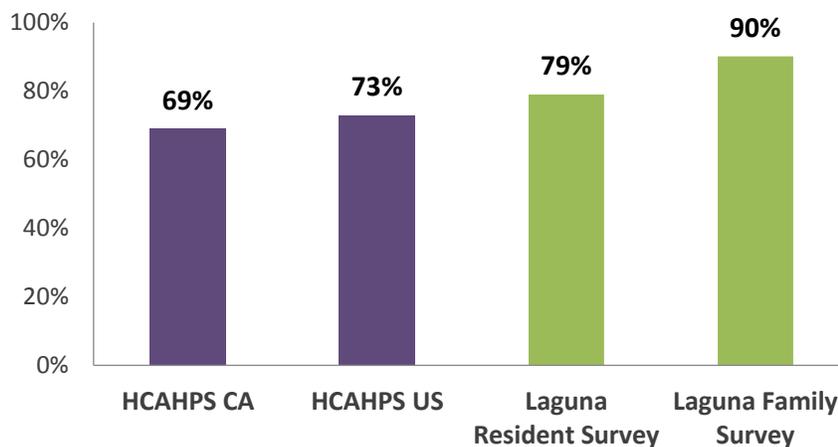
Residents	Families
Food quality/options	Give more attention/care to residents
More caring/patient staff/nurse	Additional/consistent staff
More activities/group exercises	Nothing, everything is good
Listen/communicate to patients	Communication with family
Nothing, everything is good	Communication with resident
More staff/More staff of different culture	Provide more recreational activities

9.0 Benchmark Analysis by Peer Group

This section discusses benchmark analysis that compares 2015 survey results with secondary data that is publicly available. For this analysis NuStats reviewed national and regional level data to identify items that could be compared based on the methodology used to gather the data, question wording, scale used to rate the items and the population who responded to the survey questions (residents vs families, current residents vs discharged residents, etc.). The peer group used in this comparison comes from a national and state level data collected through HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) Survey, developed by The Centers for Medicare & Medicaid Services (CMS), along with the Agency for Healthcare Research and Quality (AHRQ). This survey asks recently discharged patients questions that cover consumer satisfaction and other facility performance measures. For the purpose of this comparison, NuStats used data from the latest survey which covered patients who were discharged from January 2016 to December 2016.

Figure 26 compares survey results for the 2017 Resident and Family Satisfaction survey with the peer group. Overall satisfaction as reported by Laguna Honda residents is six percent higher than national averages and 10 percent higher than other facilities in the State of California. Overall satisfaction as reported by families is 17 percent higher than national averages and 21 percent higher than other facilities in California³.

Figure 26: Excellent and Good Responses for Overall Satisfaction Scores



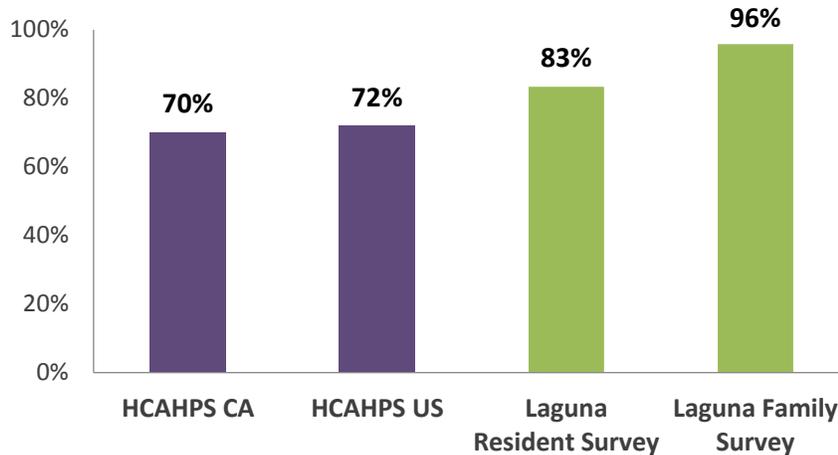
Data Source: October 2017 Public Report: Hospital Consumer Assessment of Healthcare Providers and Systems Survey, Centers for Medicare & Medicaid Services

Figure 27 compares recommendation scores to the peer group. In 2017, residents who completed a survey are 83 percent likely to recommend the facility to others. This rating is 11 percent higher than the national average and 13 percent higher than statewide ratings. Incidentally, this score was 75 percent in the 2015 survey and ranked Laguna Honda (in 2015) 13 percent lower than the national average. Thus, Laguna Honda has not only improved scores in this area but it has surpassed national averages since the last survey. Recommendation scores as

³ Please note that the respondents of HCAHPS are PATIENTS only, thus comparing results to the Family Survey should be interpreted with caution.

reported by families is 96 percent or 24 percent higher than national averages and 26 percent higher than statewide averages⁴.

Figure 27: Excellent and Good Responses for Recommendation Scores



Data Source: October 2017 Public Report: Hospital Consumer Assessment of Healthcare Providers and Systems Survey, Centers for Medicare & Medicaid Services

Figures 28 compares combined “excellent” and “good” scores for the 2017 Resident Family Satisfaction Survey with the peer group at the national level. The figure presents results for 15 service attributes that could be compared with publicly available data. Family Survey ratings are also compared to the peer group⁵.

The Resident Satisfaction Survey scores are lower than national averages for nine out of these 15 attributes and higher for six out of these 15 attributes. According to this year’s survey results, Laguna Honda scores are 21 percent higher than the national average when it comes to keeping residents and families updated on the care of the resident. This is highly encouraging in that management hands on approach helps create positive customer relationships and thus build loyalty that ultimately improves customer satisfaction and recommendation scores. The cleanliness of the premises is rated 11 percent higher than national averages and respect for privacy nine percent higher than national ratings. The safety of the facility is rated highly positive by 87 percent of the residents and this rating is one percent higher than national averages.

⁴ Please note that the respondents of HCAHPS are PATIENTS only, thus comparing results to the Family Survey should be interpreted with caution.

⁵ Please note that the respondents of HCAHPS are PATIENTS only, thus comparing results to the Family Survey should be interpreted with caution.

Figure 28: National Level Comparisons for Service Attributes

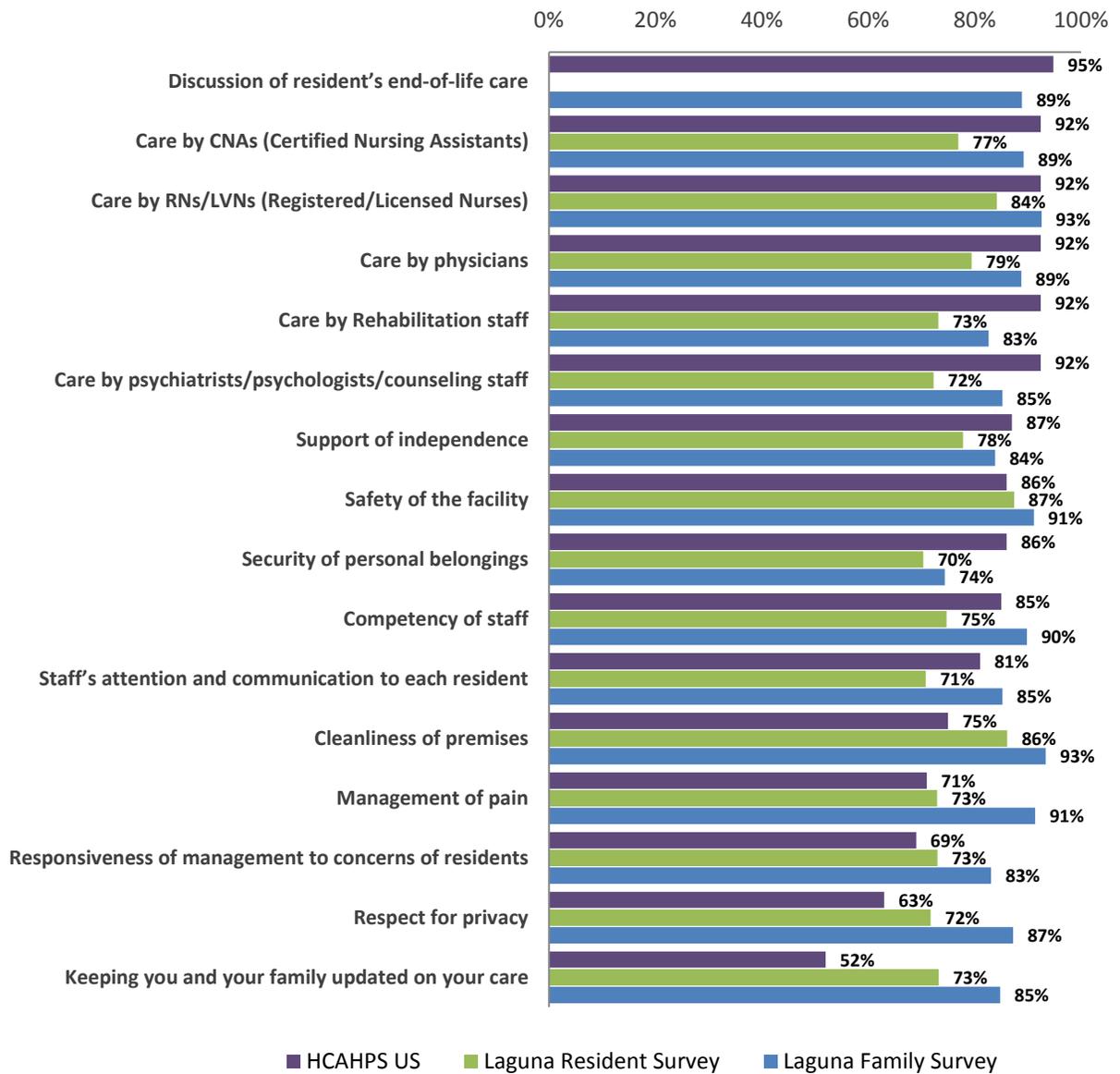
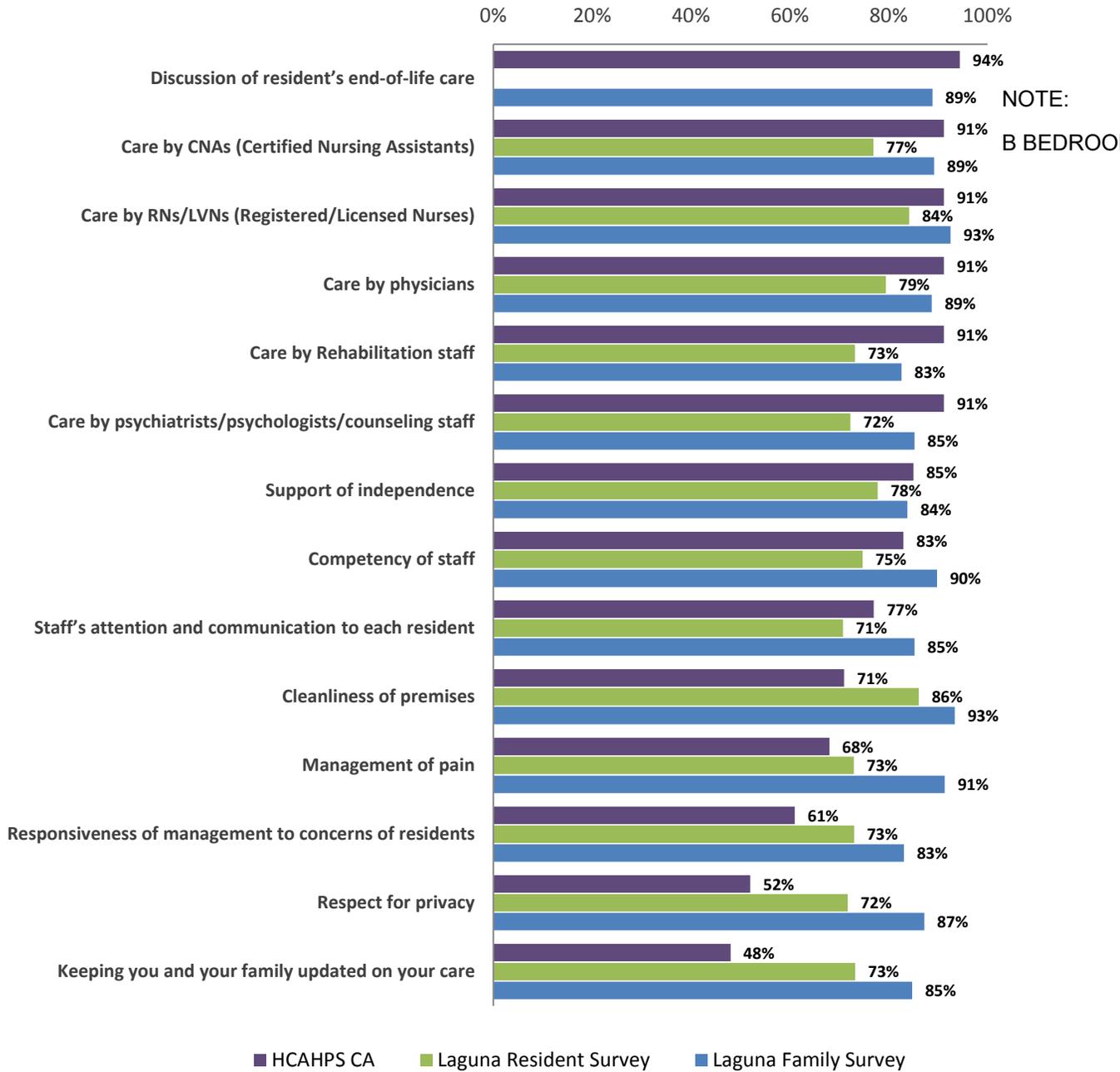


Figure 29 compares combined “excellent” and “good” scores for the 2017 Resident Family Satisfaction Survey with the peer group at the statewide level. The figure presents results for 15 service attributes that could be compared with publicly available data. Family Survey ratings are also compared to the peer group⁶.

The Resident Satisfaction Survey scores are lower than statewide averages for ten out of 15 attributes and higher for five out of 15 attributes. Laguna Honda scores are 25 percent higher than statewide averages in regards to maintaining residents and families informed on the care of the residents, 20 percent higher than statewide averages when rating respect for privacy and 15 percent higher when rating the cleanliness of the premises.

⁶ Please note that the respondents of HCAHPS are PATIENTS only, thus comparing results to the Family Survey should be interpreted with caution.

Figure 29: Statewide Level Comparisons for Service Attributes



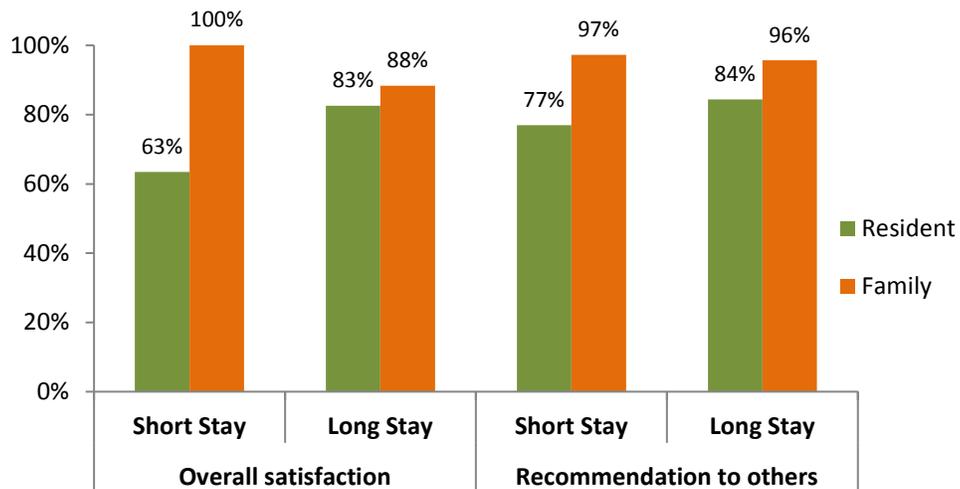
10.0 Demographic Analysis

10.1. Long Stay versus Short Stay Resident Satisfaction Ratings

For the purpose of data analysis, a length of stay of less than 12 months is considered a short-stay and a stay of 12 months or longer is considered a long-stay.

Short-stay residents (63 percent) are less satisfied with Laguna Honda experience overall compared to long-stay residents (83 percent) and are less likely to recommend (77 percent) the facility to friends and family compared to long-stay residents (84 percent). Meanwhile when asked the same questions, families with a resident who have stayed at Laguna Honda for less than a year (short-stay) are just as likely to be satisfied with services overall (100 percent) or with recommending the facility to others (97 percent). Families with a resident who have been at Laguna Honda for more than a year (long-stay) are more likely to recommend the facility to others (96 percent) but less likely to be satisfied with overall services (88 percent).

Figure 30: Excellent and Good Responses by Length of Stay



The figures below present the areas of highest and lowest satisfaction for long-stay residents and short-stay residents in that order.

Figure 31: Top 5 and Bottom 5 Positive Ratings for Long Stay Residents

	Resident	Family
Highest Rating	<ul style="list-style-type: none"> ○ Safety of the facility ○ Cleanliness of premises ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Religious and spiritual opportunities ○ Support of independence 	<ul style="list-style-type: none"> ○ Opportunities for families to make decisions ○ Cleanliness of premises ○ Management of pain ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Religious and spiritual opportunities
Lowest Rating	<ul style="list-style-type: none"> ○ Respect for privacy ○ Keeping you and your family updated on your care ○ Security of personal belongings ○ Staff’s attention and communication to each resident ○ Quality of meals 	<ul style="list-style-type: none"> ○ Quality of meals ○ Satisfaction with community outing program ○ Interaction with other residents at Laguna Honda ○ Quality of laundry services ○ Security of resident’s personal belongings

Figure 32: Top 5 and Bottom 5 Satisfaction Positive Ratings for Short Stay Residents

	Resident	Family
Highest Rating	<ul style="list-style-type: none"> ○ Cleanliness of premises ○ Respect for your culture ○ Opportunities to participate in community outings ○ Attention to your grooming needs ○ Safety of the facility 	<ul style="list-style-type: none"> ○ Discussion of resident’s end-of-life care ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Respectfulness of staff ○ Safety of the facility ○ Opportunities for families to make decisions
Lowest Rating	<ul style="list-style-type: none"> ○ Quality of laundry services ○ Management of pain ○ Participation in care meetings ○ Service by social workers ○ Quality of meals 	<ul style="list-style-type: none"> ○ Service by social workers ○ Participation in care meetings ○ Support of independence ○ Interaction with other residents at Laguna Honda ○ Care by psychiatrists/psychologists/counseling staff

Figure 33 breaks down global satisfaction scores by length of stay and age. Short-stay residents ages 65-84 are the group more likely to be satisfied with services overall (89 percent and 100 percent). The 25-44 age group in general appears more vulnerable showing lower satisfaction scores particularly those who have been at Laguna Honda for less than one year (43 percent satisfaction). Long-stay residents both the youngest group (18-24) and the oldest group (85 and older) show higher satisfaction ratings.

Figure 33: Overall Satisfaction Excellent and Good Responses by Length of Stay and Age

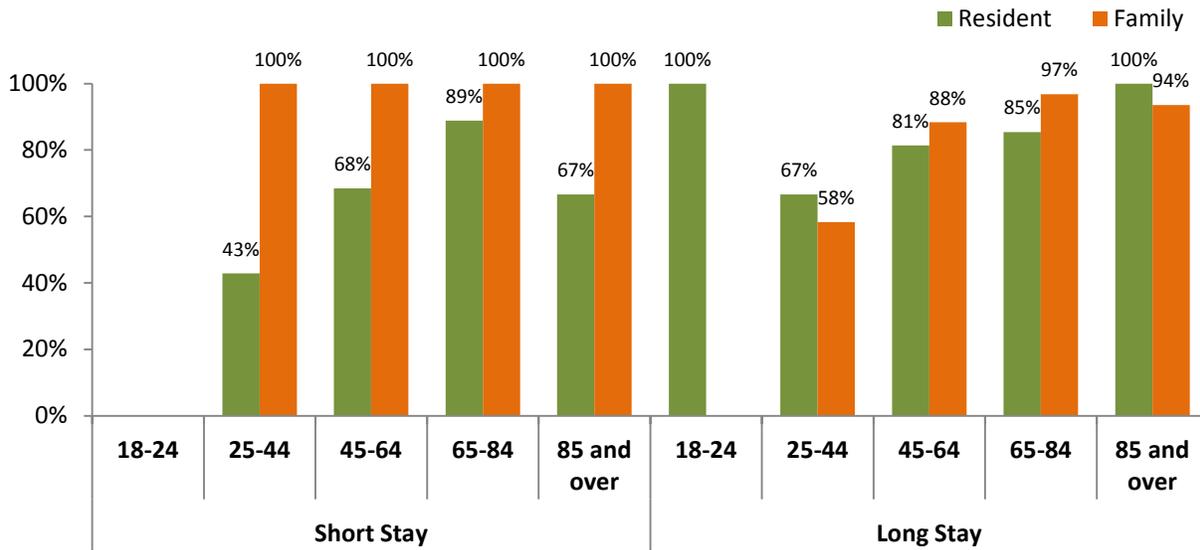
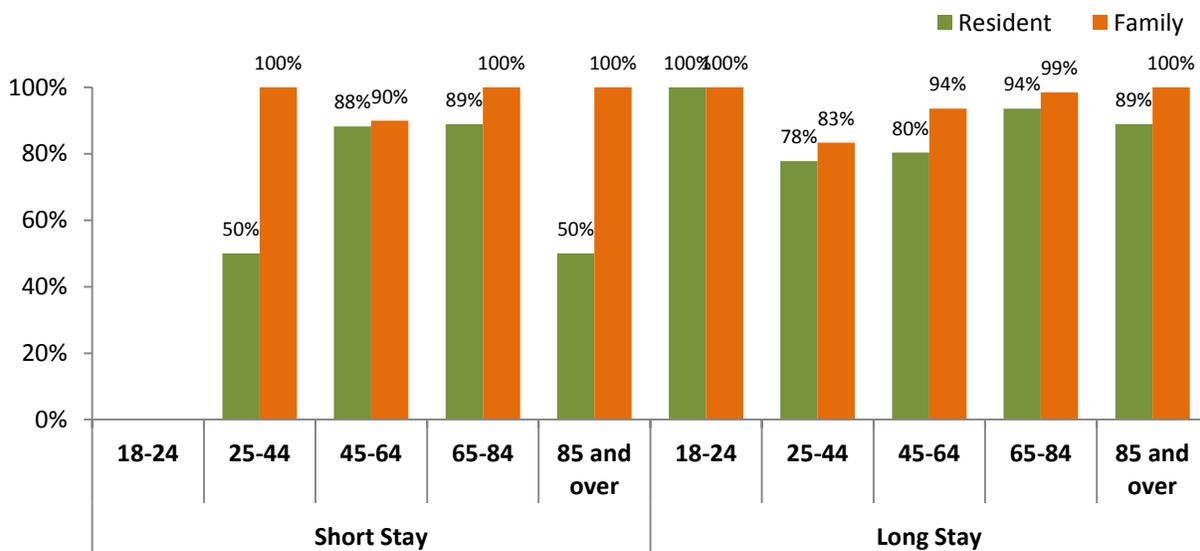


Figure 34 breaks down recommendation scores by length of stay and age. Short-stay residents ages 65-84 are the group more likely to recommend the facility to others (89 percent and 100 percent). They are also the group of long-stay residents who are most likely to recommend the facility to others.

Figure 34: Recommendation to Others Excellent and Good Responses by Length of Stay and Age



The figures below depict global satisfaction scores and recommendation scores by length of stay and ethnicity.

Figure 35: Overall Satisfaction Excellent and Good Responses by Length of Stay and Ethnicity

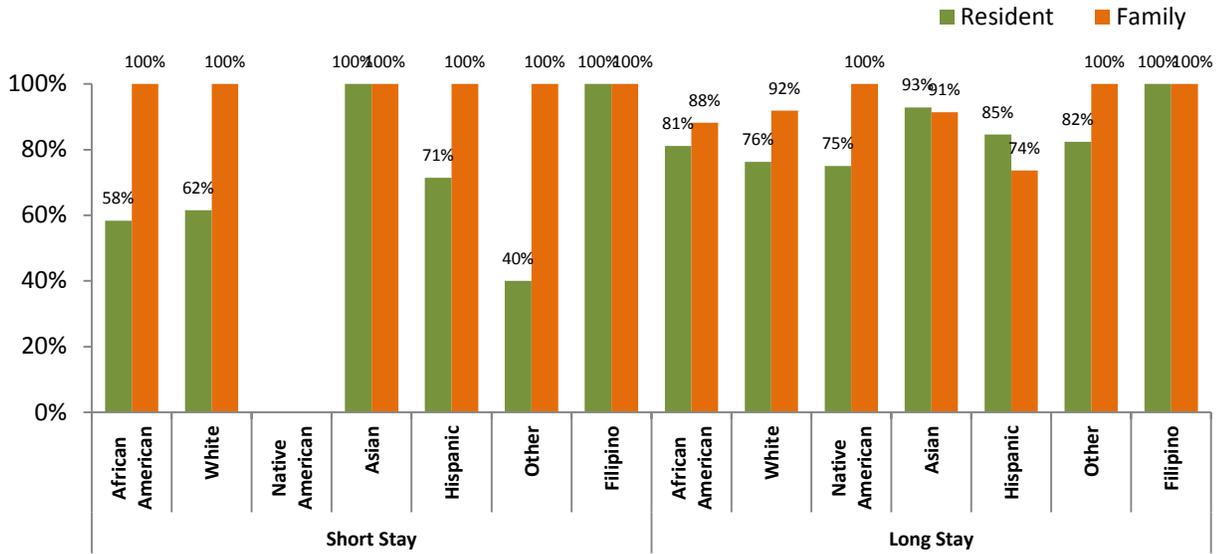
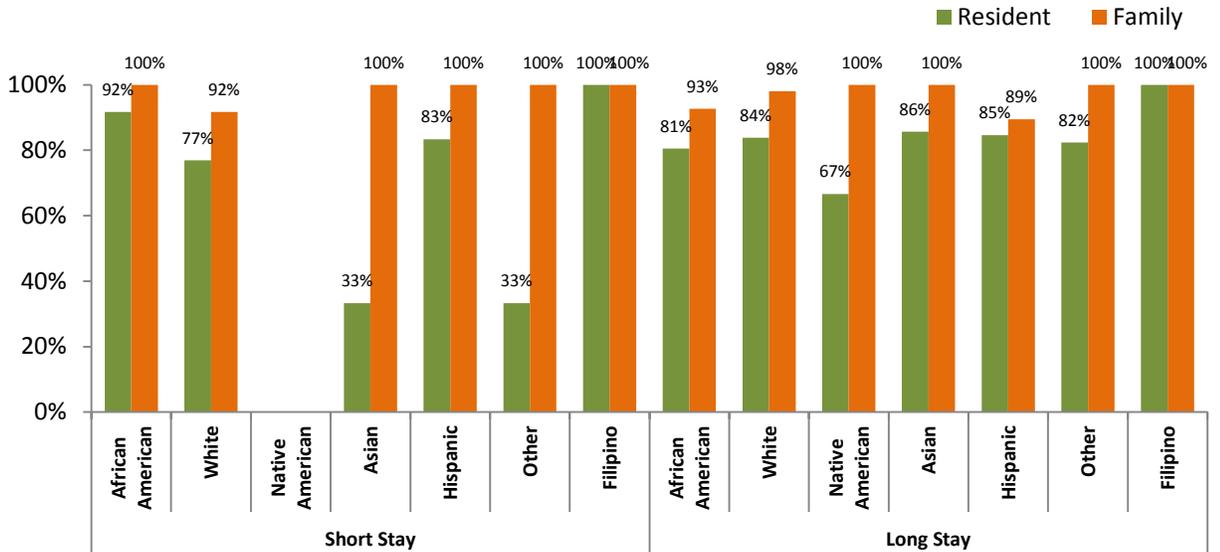


Figure 36: Recommendation to Others Excellent and Good Responses by Length of Stay and Ethnicity

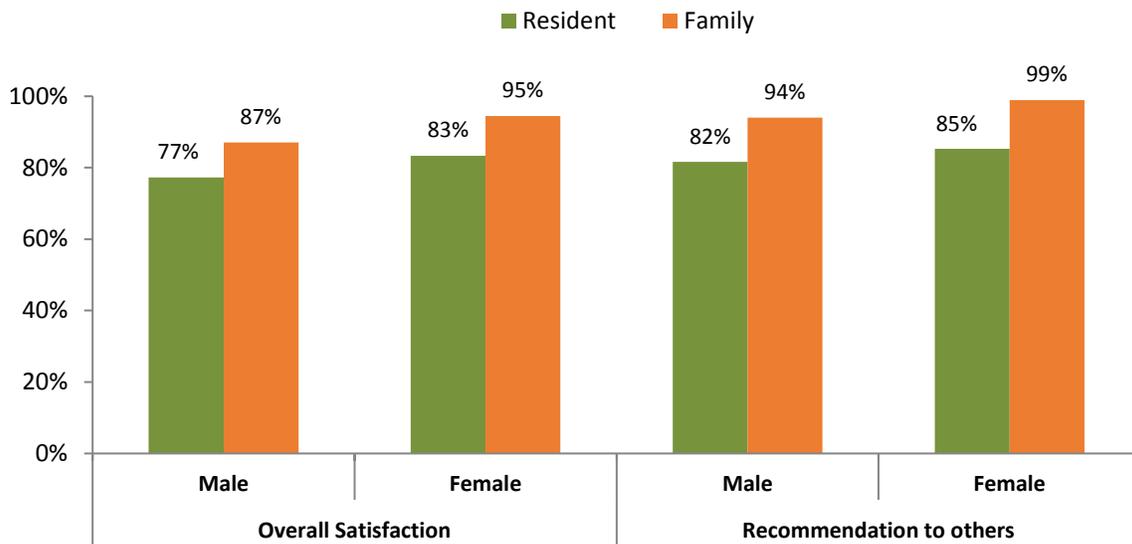


10.2. Male and Female Resident Satisfaction Ratings

Female residents rate overall satisfaction six percent higher (83 percent) than male residents (77 percent). Families who have a female resident at Laguna Honda rated overall satisfaction eight percent higher (95 percent) than families who have a male resident at Laguna Honda (87 percent). In general, female residents or their families tend to be more satisfied than male residents or their families (males 82 percent and females 89 percent).

Female residents or their families are also more likely to recommend the facility to others than males. The average female recommendation score is 92 percent while the average male recommendation score is 88 percent.

Figure 37: Excellent and Good Responses by Gender



Figures 38 and 39 display the performance attributes with the highest and the lowest scores for females and males.

Figure 38: High and Low Ratings for Females

	Resident	Family
Highest Rating	<ul style="list-style-type: none"> ○ Cleanliness of premises ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Safety of the facility ○ Respect for your culture ○ Care by CNAs (Certified Nursing Assistants) 	<ul style="list-style-type: none"> ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Management of pain ○ Safety of the facility ○ Competency of staff ○ Opportunities for families to make decisions
Lowest Rating	<ul style="list-style-type: none"> ○ Staff’s attention and communication to each resident ○ Keeping you and your family updated on your care ○ Participation in care meetings ○ Security of personal belongings ○ Quality of meals 	<ul style="list-style-type: none"> ○ Satisfaction with community outing program ○ Interaction with other residents at Laguna Honda ○ Quality of meals ○ Quality of laundry services ○ Security of resident’s personal belongings

Figure 39: High and Low Ratings for Males

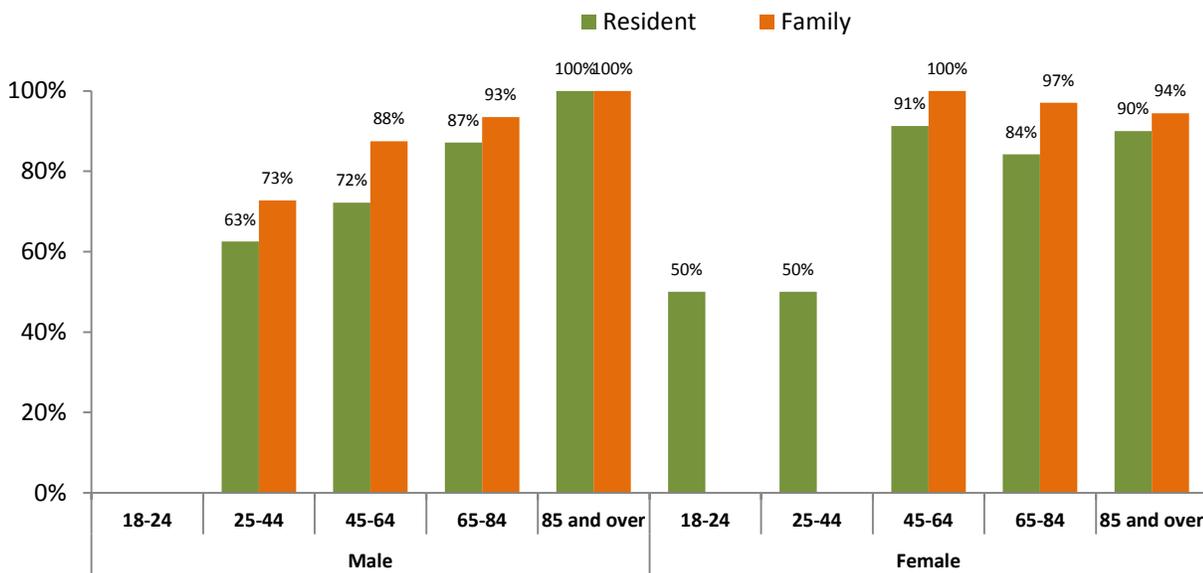
	Resident	Family
Highest Rating	<ul style="list-style-type: none"> ○ Safety of the facility ○ Cleanliness of premises ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Participation in care meetings ○ Respectfulness of staff 	<ul style="list-style-type: none"> ○ Cleanliness of premises ○ Opportunities for families to make decisions ○ Religious and spiritual opportunities ○ Care by physicians ○ Respectfulness of staff
Lowest Rating	<ul style="list-style-type: none"> ○ Staff’s attention and communication to each resident ○ Care by psychiatrists/psychologists/counseling staff ○ Quality of laundry services ○ Service by social workers ○ Quality of meals 	<ul style="list-style-type: none"> ○ Responsiveness of management to concerns of residents ○ Attention to resident’s grooming needs ○ Quality of laundry services ○ Interaction with other residents at Laguna Honda ○ Security of resident’s personal belongings

The figures below break down global satisfaction scores by gender and age.

Survey results show that males ages 65-84 are the most satisfied (87 percent) with Laguna Honda services overall. Families whose resident is the same demographic group (male, 65-84) reported a 93 percent satisfaction with Laguna Honda overall. In addition, the older group of males (85 and over) reported complete satisfaction (100 percent).

The group of females that report the highest level of satisfaction correspond to females ages 45-64. Females under the age of 45 report the lowest levels of overall satisfaction.

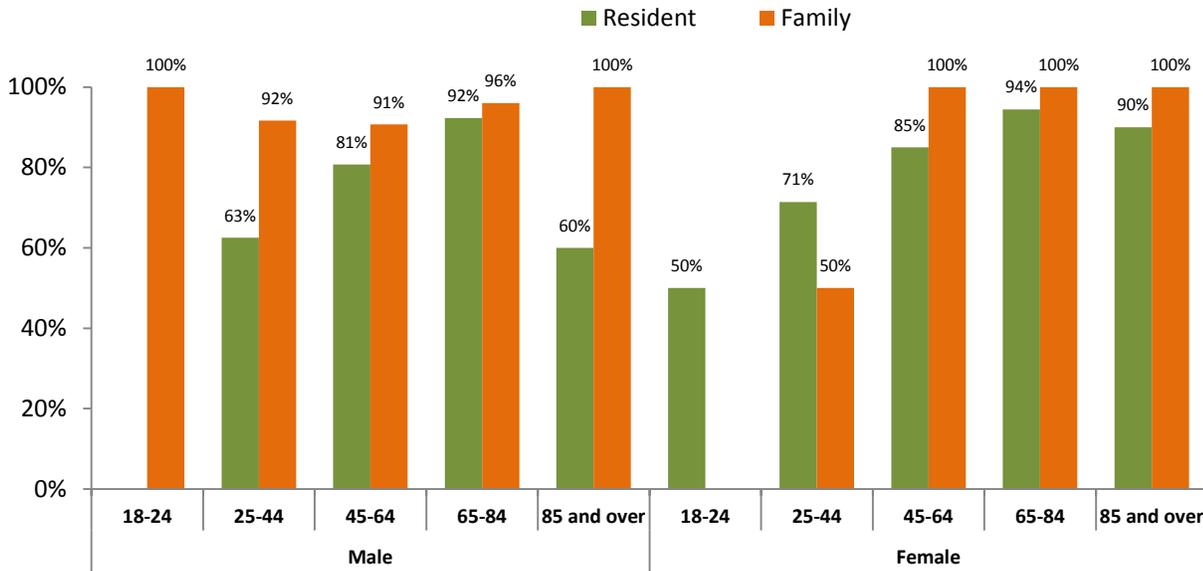
Figure 40: Overall Satisfaction Excellent and Good Responses by Gender and Age



Males ages 65-84 are more likely to recommend the facility to others, according to survey results from both residents and families. In contrast, males ages 25-44 and those 85 and older are less likely (six in 10) to recommend the facility when asked directly. Families of resident in these age groups, however, report higher levels of willingness to recommend the facility, 92 percent for the 25-44 group and 100 percent for the 85 and older group.

Females ages 65 and older are generally more likely to recommend the facility. But those ages 18-24 are less likely with only five in ten willing to recommend the facility. According to the family survey, five in ten females ages 25-44 would recommend the facility.

Figure 41: Recommendation to Others Excellent and Good Responses by Gender and Age



10.3. Satisfaction Ratings by Ethnicity

The Resident Satisfaction Survey shows that Filipinos rank highest in overall satisfaction (100 percent) followed by Asians (94 percent) and Hispanics (81 percent). The family survey ranks Filipinos first (100 percent), White Caucasians second (94 percent) and Asians third (91 percent).

Filipinos are most likely to recommend Laguna Honda to friends and family more than any other groups. Families with a Native American or Asian resident are also highly likely to recommend the facility.

Figure 42: Excellent and Good Responses by Ethnicity

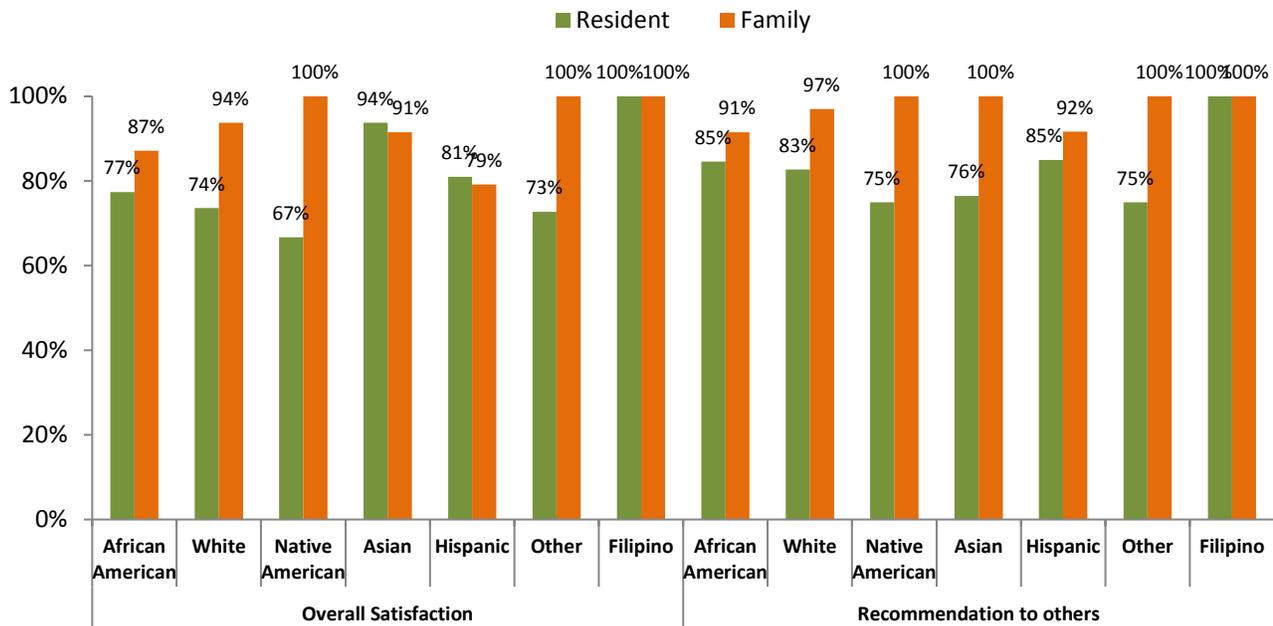


Figure 43 and 44 break down global satisfaction scores by ethnicity and age. For these figures, the “N” for each group is too small to make any meaningful comparisons.

Figure 43: Overall Satisfaction Excellent and Good Responses by Ethnicity and Age

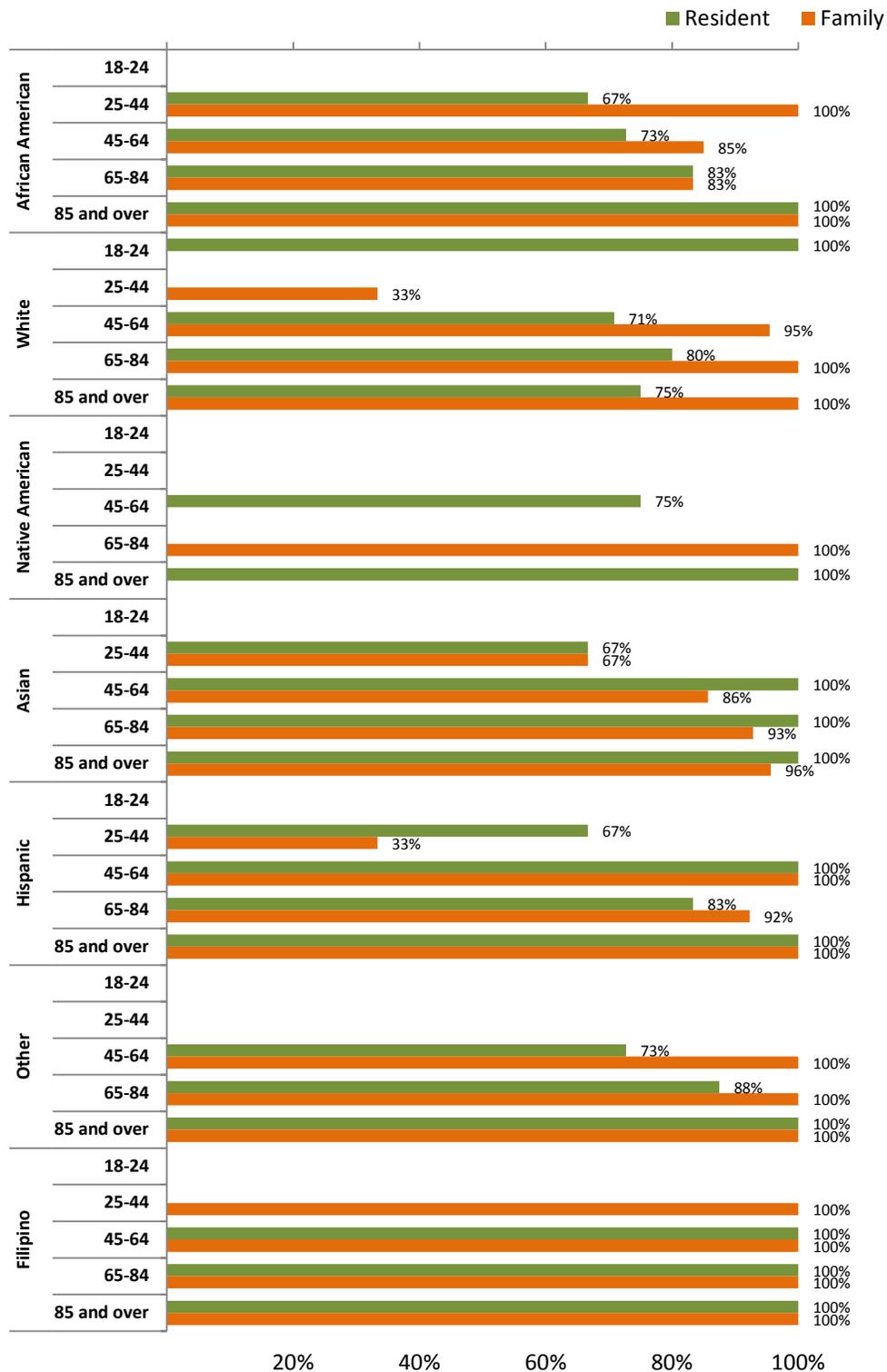
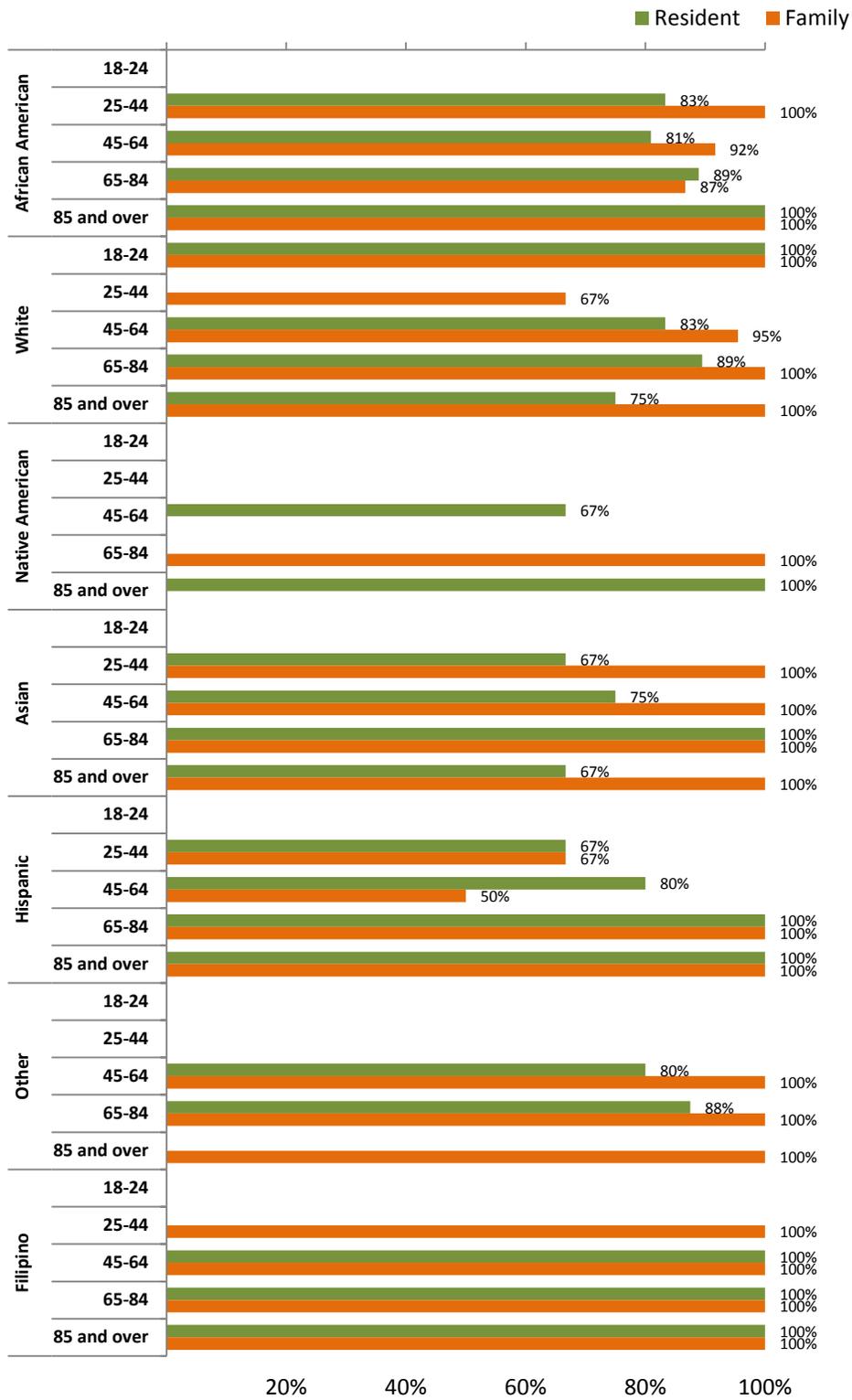


Figure 44: Recommendation to Others Excellent and Good Responses by Ethnicity and Age



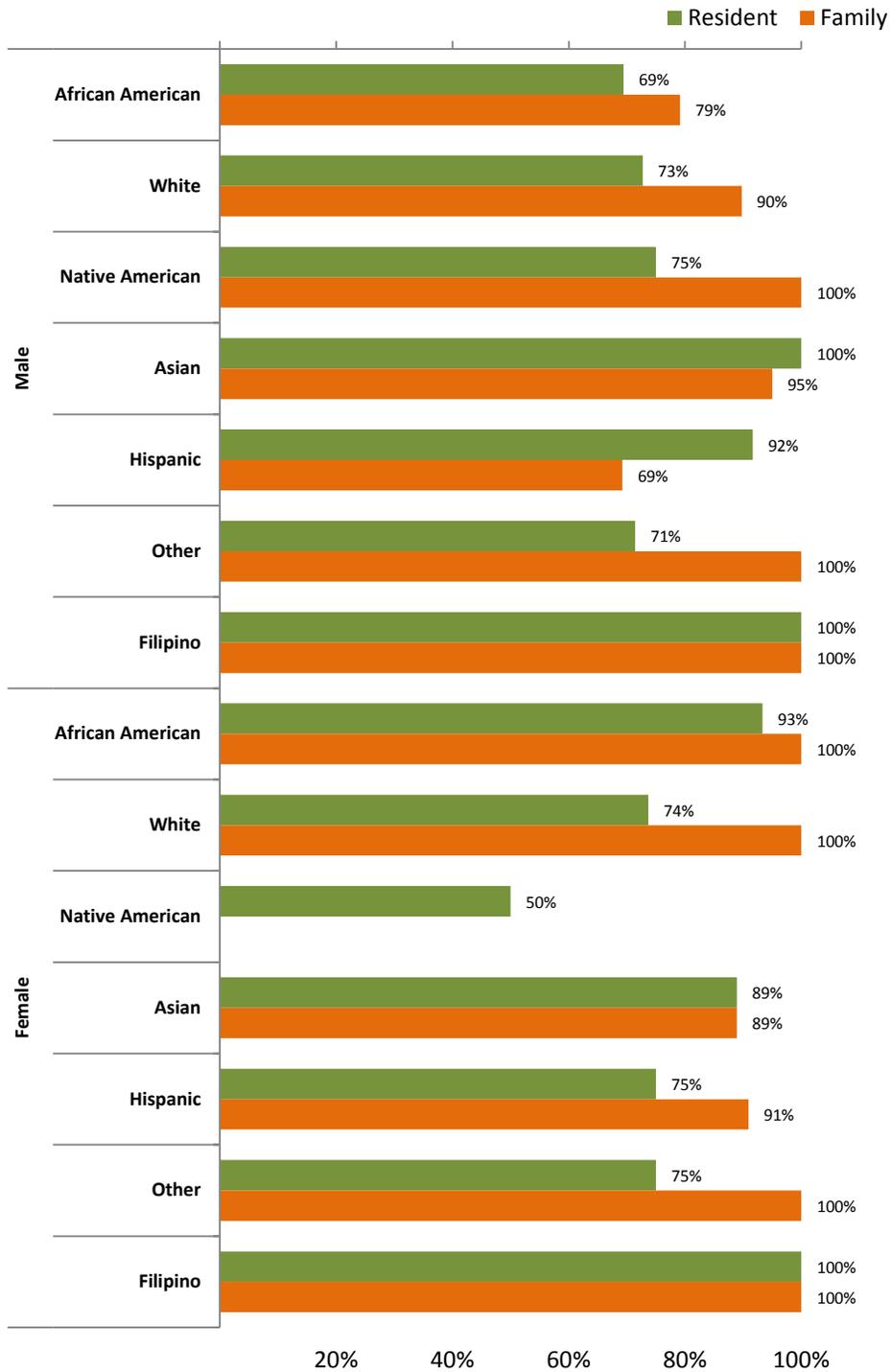
The figures below break down global satisfaction scores by ethnicity and gender.

Filipino males rank first in overall satisfaction, followed by Asian males and Native American males. Filipino females rank first in overall satisfaction followed by African American females and Hispanic females. Native American females who completed a Resident Satisfaction Survey are the least satisfied with Laguna Honda overall.

NOTE:

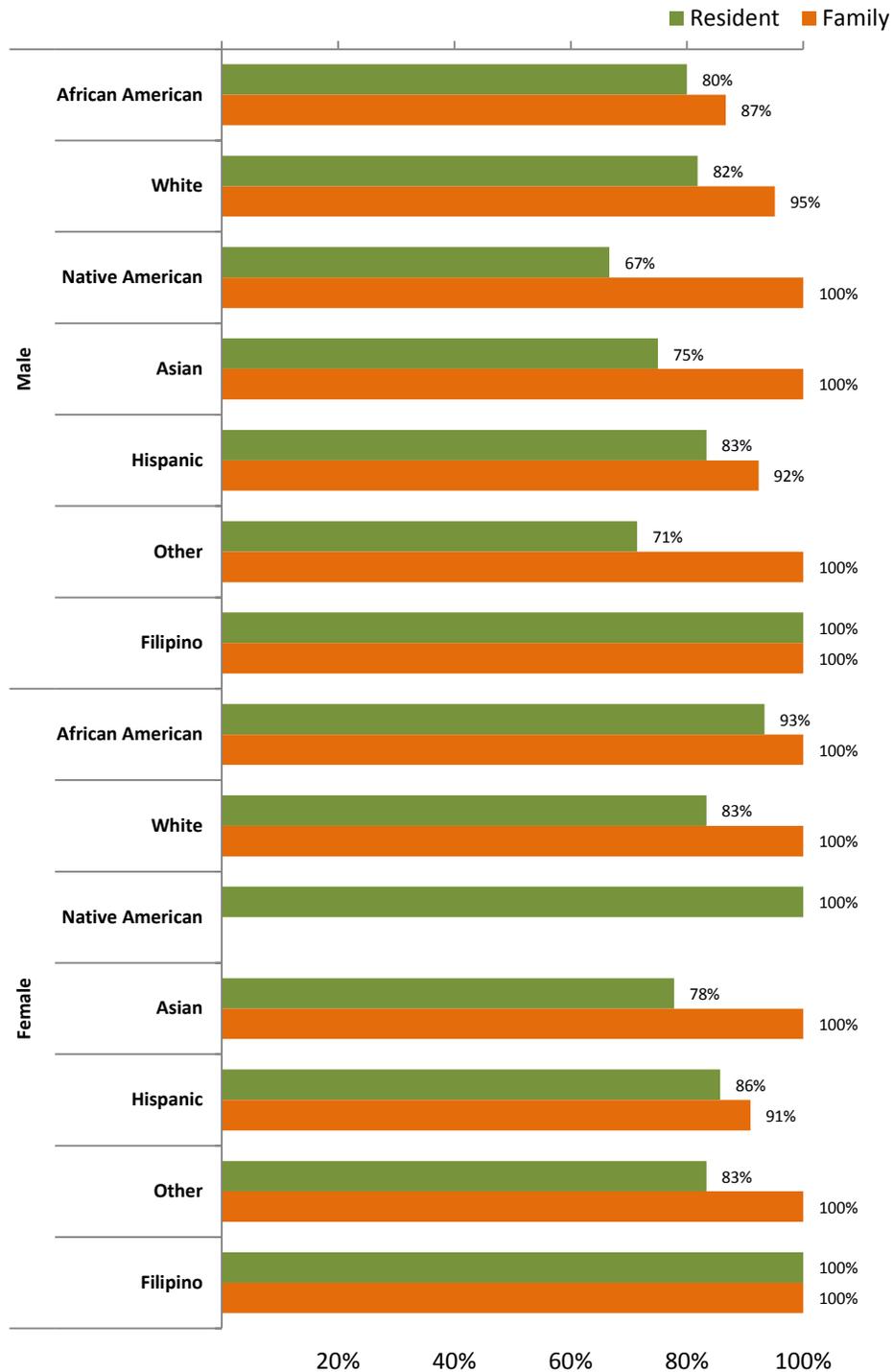
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Figure 45: Overall Satisfaction Excellent and Good Responses by Ethnicity and Gender



Filipino males rank first in recommendation scores, followed by Asian males and Native American males. Filipino females are more likely to recommend the facility, followed by African American females and White Caucasian females.

Figure 46: Recommends to Others Excellent and Good Responses by Ethnicity and Gender



11.0 Importance-Satisfaction Gap Analysis

The following section shows results of the importance-satisfaction quadrant analysis conducted with respondent data from the Resident and the Family Satisfaction Survey. The importance-satisfaction gap analysis was conducted to uncover strengths and weaknesses with the services Laguna Honda provides from the perspective of its customer base.

The quadrant analysis is a two dimensional representation of the level of satisfaction survey respondents give to each service attribute and the relative importance of each service attribute to the "recommendation to others" question. The analysis looks into how often a service attribute is given a high satisfaction rating versus the correlation between each service attribute to the "recommendation to others" question, this relation allows for the construction of a strength and opportunity chart. This chart is used to set priorities for future initiatives to improve resident and family satisfaction and recommendation scores. The importance values are located along the horizontal axis and the satisfaction values along the vertical axis. These values correspond to survey responses to all performance measures and they fall into one of four quadrants based upon whether the value is above or below the average importance score or satisfaction rating.

Figure 47 shows results of the gap analysis for the Resident Satisfaction Survey. The chart plots satisfaction score against the importance score of each service attribute to the "recommendation to others" question. The purpose is to identify strengths and opportunities to prioritize focus to improve willingness to recommend the facility to others. Analysis was performed on all service attributes and top five attributes in each quadrant are plotted into the chart.

Attributes that fall above the average satisfaction score along the vertical axis are considered **strengths** – these attributes show high levels of satisfaction and can be divided into **primary or secondary strengths**. Attributes that fall above the average importance score along the horizontal axis are considered primary strengths (high importance and high satisfaction ratings) and those that fall below the average importance score are considered secondary strengths (low importance and high satisfaction).

Attributes that fall below the average satisfaction score along the vertical axis are considered **opportunities** – these attributes show below average levels of satisfaction and can be divided into **primary or secondary opportunities**. Those that fall above the average importance score along the horizontal axis are considered primary opportunities (low satisfaction and high importance) and those that fall below the average importance score are considered secondary opportunities (low satisfaction and low importance).

Figure 47: Resident Survey Strengths and Opportunities Chart

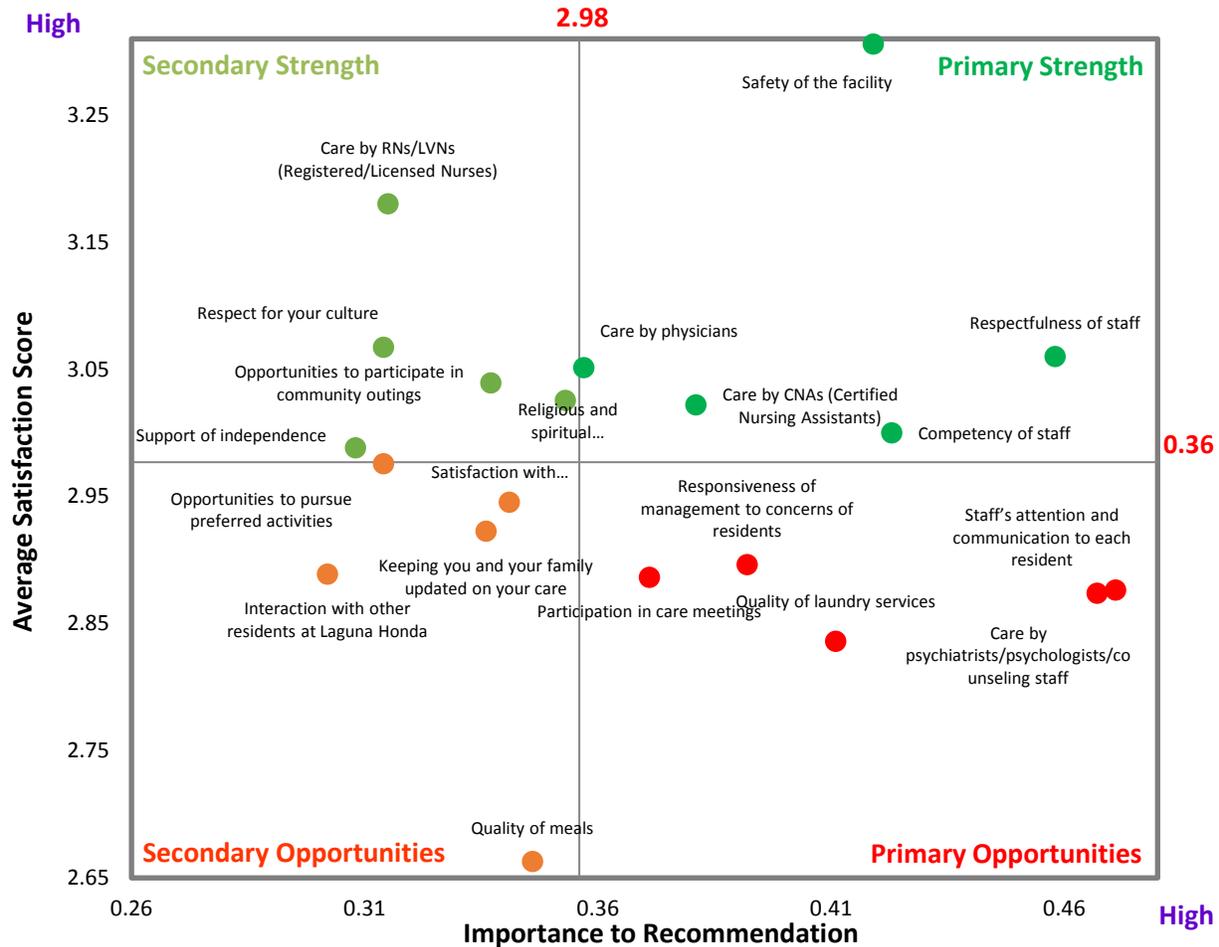


Figure 48 shows the specific areas Laguna Honda should focus on to improve ratings. Items considered primary opportunities are those that require immediate attention; secondary opportunities include areas that are less critical to improving performance but that offer good opportunities for improvement.

Items considered primary strengths indicate that the facility is doing well in delivering these services and functions and is placing the right level of effort and priority on them. These areas should be targets for continuous improvement and those responsible for these tasks should be given proper acknowledgement and positive reinforcement. Secondary strengths include areas where the facility is meeting or exceeding customer satisfaction, but are not a high priority for survey respondents. These areas should also be targets for continuous improvement.

The top five items for the priority agenda according to residents themselves include: improving staff’s attention and communication to each resident, focusing on the quality of care provided by psychiatrists, psychologists and counseling staff, improving the quality of laundry services, reviewing operating procedures regarding the responsiveness of management to concerns of residents and improving the participation of residents in care meetings.

Figure 48: Resident Satisfaction Survey Quadrant Analysis and Priority Action Items

Secondary Strengths	Primary Strengths
<ul style="list-style-type: none"> ○ Religious and spiritual opportunities ○ Opportunities to participate in community outings ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Respect for your culture ○ Support of independence 	<ul style="list-style-type: none"> ○ Respectfulness of staff ○ Competency of staff ○ Safety of the facility ○ Care by CNAs (Certified Nursing Assistants) ○ Care by physicians
Secondary Opportunities	Primary Opportunities
<ul style="list-style-type: none"> ○ Quality of meals ○ Satisfaction with community outing program ○ Keeping you and your family updated on your care ○ Opportunities to pursue preferred activities ○ Interaction with other residents at Laguna Honda 	<ul style="list-style-type: none"> ○ Staff’s attention and communication to each resident ○ Care by psychiatrists/psychologists/counseling staff ○ Quality of laundry services ○ Responsiveness of management to concerns of residents ○ Participation in care meetings

Figure 49 shows results of the analysis for the Family Satisfaction Survey. The chart plots satisfaction score against the importance score of each service attribute to the “recommendation to others” question. The purpose is to identify strengths and opportunities to prioritize focus to improve willingness to recommend the facility to others. Analysis was performed on all service attributes and top five attributes in each quadrant are plotted into the chart.

Figure 49: Family Survey Strengths and Opportunities Chart

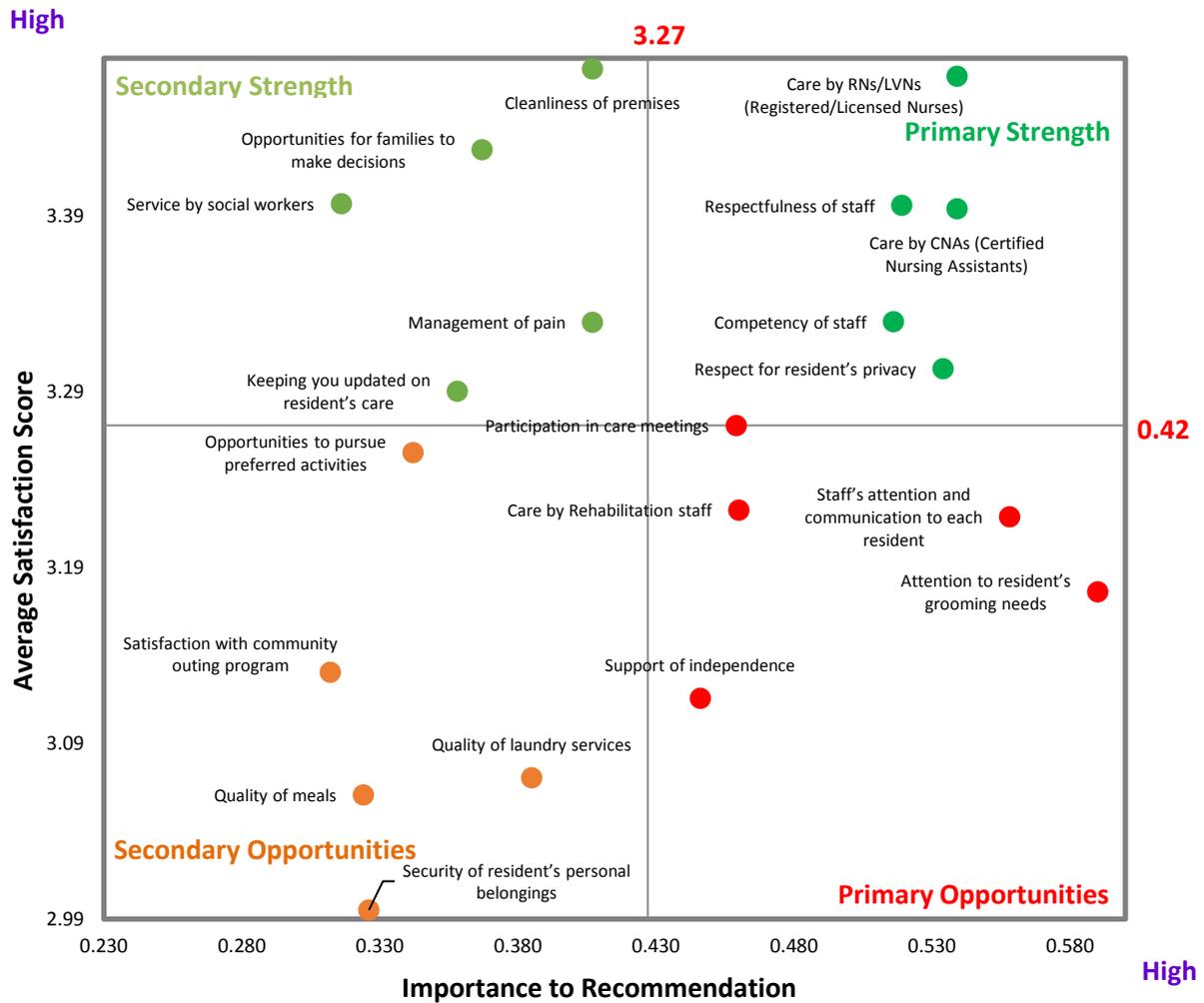


Figure 50 shows the specific areas Laguna Honda should focus on to improve ratings. The top five items for the priority agenda according to families who completed a survey include: focusing on resident's grooming needs, improving staff's attention and communication to each resident, focusing on the quality of care provided by rehabilitation staff, improving the participation of residents in care meetings and focusing on supporting resident's independence.

Figure 50: Family Satisfaction Survey Quadrant Analysis and Priority Action Items

Secondary Strengths	Primary Strengths
<ul style="list-style-type: none"> ○ Management of pain ○ Cleanliness of premises ○ Opportunities for families to make decisions ○ Keeping you updated on resident’s care ○ Service by social workers 	<ul style="list-style-type: none"> ○ Care by CNAs (Certified Nursing Assistants) ○ Care by RNs/LVNs (Registered/Licensed Nurses) ○ Respect for resident’s privacy ○ Respectfulness of staff ○ Competency of staff
Secondary Opportunities	Primary Opportunities
<ul style="list-style-type: none"> ○ Quality of laundry services ○ Opportunities to pursue preferred activities ○ Security of resident’s personal belongings ○ Quality of meals ○ Satisfaction with community outing program 	<ul style="list-style-type: none"> ○ Attention to resident’s grooming needs ○ Staff’s attention and communication to each resident ○ Care by Rehabilitation staff ○ Participation in care meetings ○ Support of independence

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12.0 Conclusion and Recommendations

Results from the 2017 Resident and Family Satisfaction Survey provide the views and experiences of customers receiving care at Laguna Honda Hospital and Rehabilitation Center. It provides a client-centered snapshot at what works and what needs improvement at the facility. It provides an opportunity for customers to share candid and honest comments on what's important to them and it helps them validate the idea that Laguna Honda is willing to listen. But survey results only provide a starting point in creating a positive customer experience and in improving satisfaction scores.

Taking action after results are in is very important and sends a good message, not only to residents and families, but also to staff in charge of resident care. NuStats recommends that communication be sent out to residents, families, and staff about the successful conclusion of data collection for 2017 and share general results. NuStats' recommends that staff level communication include thanking employees for their role in making residents' life experiences meaningful while in their care and highlighting strengths and areas of improvement that relate to their departments or work functions. The message to all should emphasize that Laguna Honda is eager to tackle the issues and is excited about the positive changes that will be coming soon.

As previously indicated the Importance-satisfaction analysis allow us to identify areas of strength and opportunities. NuStats recommends for Laguna Honda to focus in areas considered primary opportunities for items that show high levels of importance yet satisfaction scores are below average. For residents these items are: improving the attention and communication with each resident; improving the care provided by psychiatrists, psychologists and counseling staff; improving the quality of laundry services; continue to improve how management handles the concern of the residents; and allow residents to participate in meetings where their care is discussed. Primary opportunities for families include improving efforts to support the independence of each resident; allowing residents to participate in meetings where their care is discussed; improve the care provided by rehabilitation staff; improving the attention and communication with each resident; and paying more attention to the residents' grooming needs.

Special attention should be given to common items to both residents and families such as the attention and communication given to each resident. In regards to this aspect of service, NuStats recommends to provide staff on-going training on communication and interpersonal skills that include active listening or taking the time to fully concentrate on what the resident has to say and modeling behaviors that show empathy and care for the resident. It is recommended that Laguna Honda facilitate an environment where staff can take the time to pay attention to each resident that goes beyond daily care. This may include constant evaluation of staff workloads to ensure employees have time to acknowledge each resident. In many instances improving attention and communication with residents can be as easy as taking the time to smile and make eye contact. Participation in care meetings is also an item important to both families and residents. Laguna Honda may want to assess and explore opportunities to make these meetings more meaningful by incorporating discussing the specific needs of the residents and the implementation of special requests based on resident and family feedback.

The security of personal belongings is another item of concerns for both residents and families. Some ideas to improve in this area of service include making locked storage space available to all residents and making sure that all residents and families are aware of the house rules for preventing theft and loss of personal items as well as the procedures to report and investigate missing items.

NuStats also recommends to focus on service attributes that score below the average satisfaction score. The average percentage of positive responses for all performance attributes for the Resident Satisfaction Survey is 75 percent. The average percentage of positive responses for all performance attributes for the Family Satisfaction

Survey is 86 percent. The recommended strategy to improve scores that fall below the mean is to target the core, that is; the main topics or themes addressed by these attributes; and then send a single message to staff to focus on such service attributes. The single message should be for Laguna Honda to determine, but it can be as tangible as improving satisfaction scores by ten percent in those target areas. The lowest rated attribute for the Resident Satisfaction Survey is the quality of meals (59 percent customer satisfaction) and for the Family Survey the security of personal belongings (74 percent).

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Finally, best practices in survey research supports a multi-mode methodology where respondents are given different options on how to participate in a survey. This methodology is often associated with higher response rates and a better survey respondent experience. In the 2017 survey NuStats introduced a tablet survey for the Resident Satisfaction Survey, and an online option for the Family Satisfaction Survey. We recommend these options continue to be made available to survey respondents in future surveys. We also recommend the use of telephone follow ups with families to improve participation rates in the Family Survey.

In conclusion, Laguna Honda should be proud of the high level of satisfaction residents and families place on the services and care they receive. This data will help Laguna Honda to target service improvements and set action priorities on those services with lower satisfaction scores but hold higher importance levels among residents and families.

13.0 Appendices

13.1. Appendix A: Respondent Comments

This information is included in a separate file.

13.2. Appendix B: Demographic Comparison

This information is included in a separate file.

13.3. Appendix C: English Survey Instruments

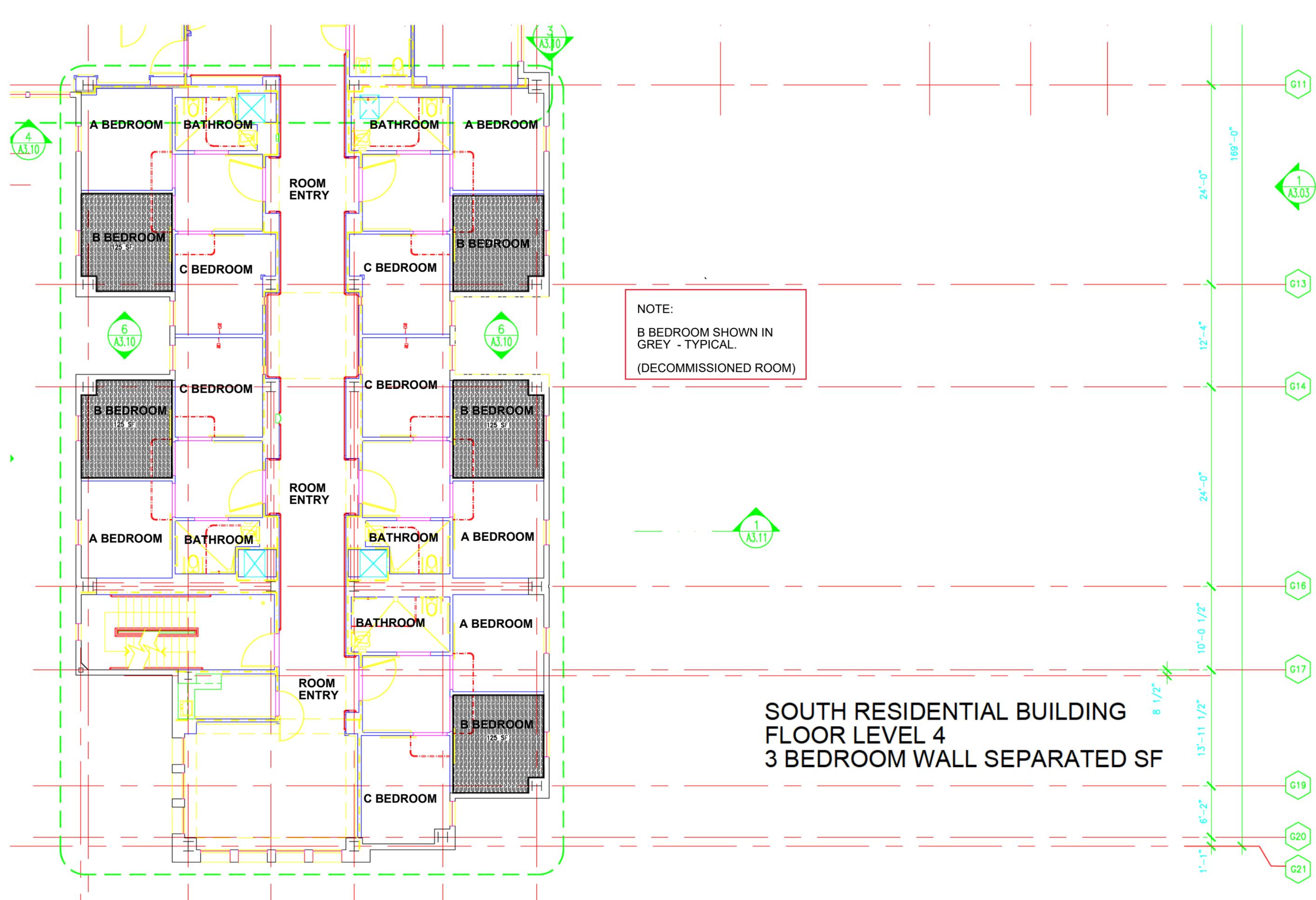
This information is included in a separate file.

NOTE:

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EXHIBIT “D”

EXHIBIT “E”



NOTE:
 B BEDROOM SHOWN IN
 GREY - TYPICAL.
 (DECOMMISSIONED ROOM)

**SOUTH RESIDENTIAL BUILDING
 FLOOR LEVEL 4
 3 BEDROOM WALL SEPARATED SF**

EXHIBIT “F”





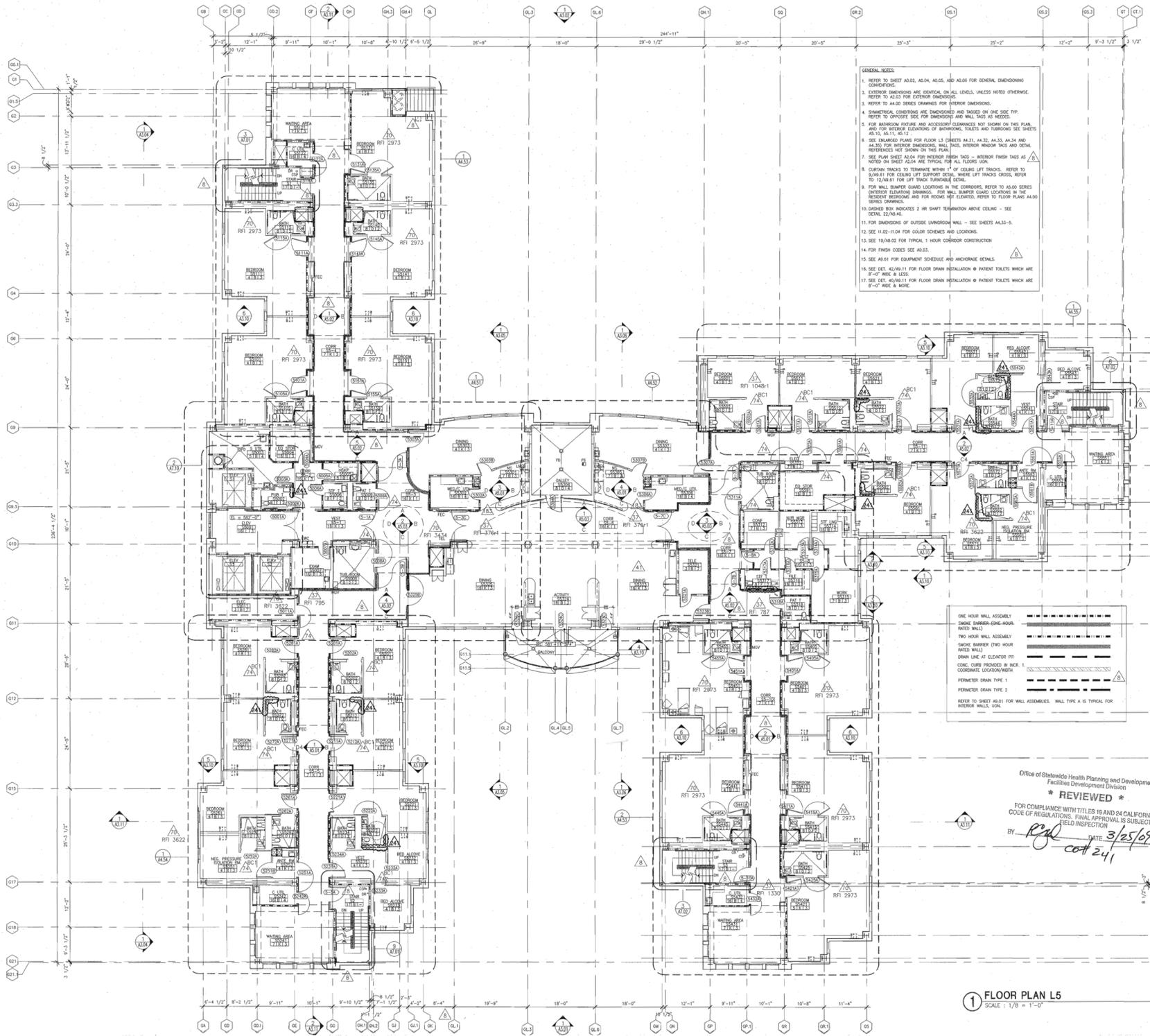
NOTE:
B BEDROOM



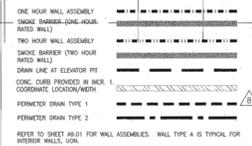




EXHIBIT “G”



- GENERAL NOTES:**
1. REFER TO SHEET A2.01, A2.04, A2.05, AND A2.06 FOR GENERAL DIMENSIONING CONVENTIONS.
 2. EXTERIOR DIMENSIONS ARE IDENTICAL ON ALL LEVELS, UNLESS NOTED OTHERWISE. REFER TO A2.03 FOR EXTERIOR DIMENSIONING.
 3. REFER TO A2.00 SERIES DRAWINGS FOR INTERIOR DIMENSIONS.
 4. SYMMETRICAL CONDITIONS ARE DIMENSIONED AND SIGNED ON ONE SIDE ONLY. REFER TO OPPOSITE SIDE FOR DIMENSIONING AND WALL SIGN AS NOTED.
 5. FOR BEDROOM FURNITURE AND ACCESSORY CLEARANCES NOT SHOWN ON THIS PLAN, AND FOR INTERIOR ELEVATIONS OF BEDROOMS, SOLETS AND TUBROOMS SEE SHEETS A2.10, A2.11, A2.12.
 6. SEE ENLARGED PLANS FOR FLOOR L5 (SHEETS A2.31, A2.32, A2.33, A2.34 AND A2.35) FOR INTERIOR DIMENSIONS, WALL TAGS, INTERIOR WINDOW TAGS AND DETAIL REPRESENTATIONS NOT SHOWN ON THIS PLAN.
 7. SEE PLAN SHEET A2.04 FOR INTERIOR WINDOW TAGS - INTERIOR WINDOW TAGS AS NOTED ON SHEET A2.04 ARE TYPICAL FOR ALL FLOORS UNLESS NOTED OTHERWISE.
 8. CURTAIN TRACKS TO REMAIN WITHIN 1" OF CEILING LIFT TRACKS. REFER TO 2/A/61 FOR CEILING LIFT SUPPORT DETAIL. WHERE LIFT TRACKS CROSS, REFER TO 2/A/61 FOR CEILING LIFT TRACKS DETAIL.
 9. FOR WALL BUMPER GUARD LOCATIONS IN THE CORRIDORS, REFER TO A2.00 SERIES (OUTDOOR ELEVATION DRAWINGS). FOR WALL BUMPER GUARD LOCATIONS IN THE RESIDENT BEDROOMS AND FOR ROOMS NOT ELEVATED, REFER TO FLOOR PLANS A2.00 SERIES DRAWINGS.
 10. DASHED BOX INDICATES 2 HR SHAFT PENETRATION ABOVE CEILING - SEE DETAIL 22.08-02.
 11. FOR DIMENSIONS OF OUTSIDE LAMINAR WALL - SEE SHEETS A4.33-5.
 12. SEE 18/09/02 FOR TYPICAL 1 HOUR CORRIDOR CONSTRUCTION.
 13. FOR FINISH CODES SEE A2.03.
 14. SEE A2.01 FOR EQUIPMENT SCHEDULES AND ANCHORAGE DETAILS.
 15. SEE DET. 42/09/11 FOR FLOOR DRAIN INSTALLATION @ PATIENT TOILETS WHICH ARE 8'-0" WIDE & LESS.
 17. SEE DET. 42/09/11 FOR FLOOR DRAIN INSTALLATION @ PATIENT TOILETS WHICH ARE 8'-0" WIDE & MORE.



Office of Statewide Health Planning and Development
 Facilities Development Division
*** REVIEWED ***
 FOR COMPLIANCE WITH TITLES 16 AND 24 CALIFORNIA CODE OF REGULATIONS. FINAL APPROVAL IS SUBJECT TO FIELD INSPECTION
 BY: *RJD* DATE: *3/25/09*
 CORR: *241*

1 FLOOR PLAN L5
 SCALE: 1/8" = 1'-0"

**LAGUNA HONDA HOSPITAL
 REPLACEMENT PROGRAM**
 Department of Public Health &
 City and County of San Francisco

**ANSHEM-ALLEN Architects
 GORDON H CHONG & PARTNERS**
 Laguna Honda Hospital Replacement Architects

901 Market Street
 San Francisco, CA 94103
 415.862.2800

Consultant 1

Consultant 2

Registration Stamp



Approval

No.	Revision	Date
CHANGE ORDER #5		05/05/05
OSHPD C.O. #37		04/05/06
OSHPD C.O. #47		11/15/06

BC2 OSHPD CHANGE	03/28/2008	#14 BC2
BC1 OSHPD CHANGE	01/28/2008	#14 BC1
OSHPD CHANGE	01/25/08	#14
OSHPD CHANGE	04/10/08	#41

OSHPD CHANGE ORDER #163	04/04/08	
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OSHPD C.O. #241	3/18/09	
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Project
 SOUTH RESIDENCE
 OSHPD NO: HSD13117-38
 Laguna Honda Hospital
 Replacement Program
 375 Laguna Honda Boulevard
 San Francisco, CA 94116

Sheet Title
FLOOR PLAN L5

ELEV 582'-0"
 OSHPD INCREMENT 2: ENCLOSURE & INTERIOR BUILDOUT

Scale
 1/8" = 1'-0"

Date
 12/17/02

Project No.
 20032.00

Drawing No.

EXHIBIT “H”

NOTE:
 B BEDROOM SHOWN IN GREY - TYPICAL. ONE EXCEPTION NOTED IN TOP LEFT WHERE A BEDROOM IS IN GREY.
 (DECOMMISSIONED ROOM IN GREY)

**SOUTH RESIDENTIAL BUILDING
 FLOOR LEVEL 5
 3 BEDROOM CURTAIN SEPARATED SF**

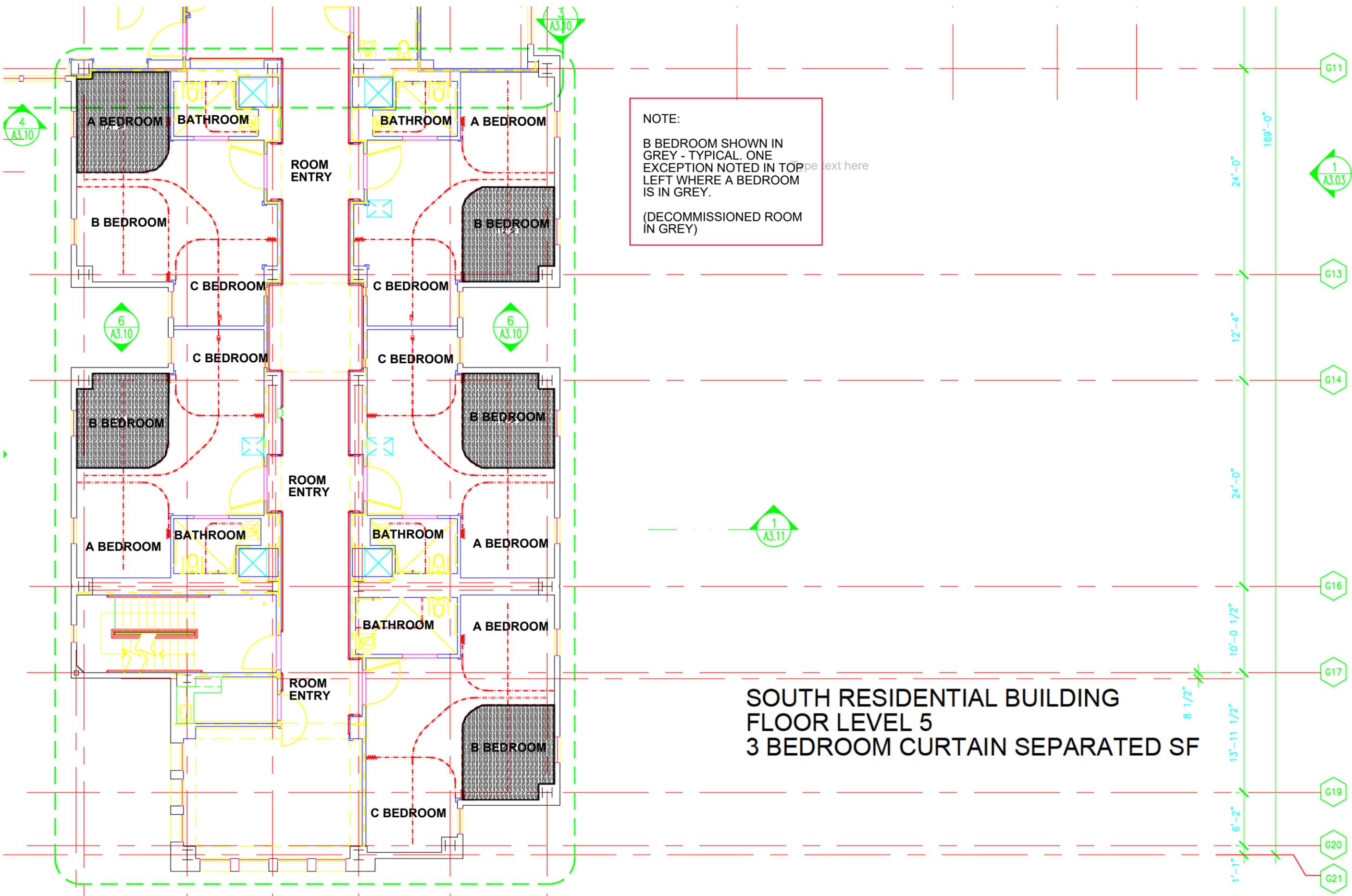


EXHIBIT “I”







NOTE:
B BEDROOM



