



# Transition to the New Laguna Honda

Report to the  
Health Commission  
February 2011

# Laguna Honda Transition Report to the Health Commission, February 2011

## EXECUTIVE SUMMARY

The new Laguna Honda began full operations on December 9, 2010. Residents were able to enjoy the holidays in their beautiful new environment.

The hospital's staff members and nearly 500 volunteers flawlessly executed a two-day resident move on Tuesday, December 7 and Wednesday, December 8, 2010. It took a community effort to achieve a successful transition.

Thanks to the staff's immeasurable effort, commitment and dedication the move stayed resident-focused. The hospital also had many community partners who helped -- the 500 volunteers, 50 employees from San Francisco General Hospital and the Department of Public Health central office, past Laguna Honda employees, and our union partners who sent staff and volunteers to assist.

We are grateful to each of the 728 residents for their participation in the journey to the new Laguna Honda.

This report describes the long hours, hard work and community effort that went into the startup and activation of the new hospital.

## MILESTONE DATES

Relocation of Services approved by the Health Commission	11/1/10
Certificate of Occupancy issued by California Office of Statewide Hospital Planning and Development (OSHPD)	11/18/10
Licensure Survey by California Department of Public Health (CDPH)	11/22/10 to 11/23/10
Start of Relocation to the New Facility by Hospital Departments	11/20/10
Approval by CDPH of Connecting Corridor and Resident Move Plan	12/2/10
Move Day #1: 352 residents move to the Pavilion and North Residence	12/7/10
Move Day #2: 376 residents move to the Pavilion and South Residence	12/8/10
Operations Begin in the New Laguna Honda	12/9/10

## MOVE DAYS

### *Giving Thanks*

Spiritual Care Director Bob Deel read a specially written interfaith blessing over the hospital public address system at 7:30 am to begin each move day.

### *Mobilization*

Volunteers and staff members met each morning in the hospital's Moran Hall to receive assignments and last minute instructions, and to pick up their move day guidebooks and t-shirts that identified them as move day personnel.

### *Move Planners*

The planning and execution of the two-day move was coordinated by David Woods, DPH Pharmacy Director and Regina Gomez, Laguna Honda Quality Management Director. The move plan was modeled after the Hospital Incident Command Structure (HICS). Move drills were conducted throughout the year. The Move Planning Committee met monthly for 18 months, and weekly for the final two months before the move. The successful outcome is a testament to a team effort dedicated to resident safety.

### *Move Day Operations*

Based on the HICS model, the following designated jobs were assigned:

- Incident Commander — responsible for overall strategy and tactics
- Operations Section Chief — responsible for overall operations
- Resident Move Coordinator — responsible for resident assignments in the new hospital
- Hospital Sending Coordinator — responsible for overall resident departures
- Unit Senders — responsible for departures at units
- Hospital Receiving Coordinator — responsible for smooth and safe transfers
- Neighborhood Receivers — responsible for reception
- Labor Pool Coordinator — responsible for move day staffing
- Volunteer Labor Pool Coordinator — responsible for move day volunteers
- Resident Transport and Equipment Coordinator — responsible for transport equipment
- Transporters — responsible for accompanying residents
- Clinical Hall Monitors — responsible for trouble-shooting along move route
- Elevator Monitors — responsible for controlling traffic



*The New Laguna Honda*

### *Resident Dispatch*

Resident dispatch coordinators followed a minute-by-minute schedule to send each unit to its new neighborhood in an orderly fashion. Most residents traveled the designated move route in wheelchairs. Some were transported by shuttle bus.

Residents traveled along the move route in groups of three, and each resident was accompanied by a staff member or volunteer. Medical charts accompanied each resident. Route safety was continuously monitored by clinical nurse specialists.

### *Reception*

Residents and transporters were received by a unit clerk at check-in stations in each neighborhood. The clerk updated a computerized neighborhood list to reflect the resident's arrival. The list was monitored in real time by staff in a central Command Center so each resident's departure and arrival could be closely monitored.

In the new neighborhood, a licensed nurse reviewed the newly arrived resident's transport record and receiving staff presented the resident with a new identification wrist band. A medical records clerk entered the resident's chart into the filing system on the neighborhood.

### *Command Center*

A Command Center began operations the weekend before the move. The Command Center was operated by executive committee members and support staff. Command personnel were responsible for trouble-shooting problems and ensuring startup and activation processes were fully functioning throughout the transition period, December 4, 2010 through December 15, 2010. On move days, a computerized system in the command center tracked each resident's departure and arrival to ensure safety and efficiency. Every call to the command center has now been resolved or is awaiting implementation as soon as ordered parts arrive.

### *Surveyors Onsite on Move Days*

An OSHPD evaluator from the San Bernardino Office was present on the morning of December 7 and did a walkthrough with Chief Operating Officer Mike Llewellyn through the connecting corridor. On both move days, four CDPH surveyors were on site to monitor the process. The surveyors visited residents on their units and followed them to their new neighborhoods. They praised the hospital staff and volunteers for a flawless move.

### *Connecting Corridor*

The connecting corridor linking the Administration Building to the Esplanade in the Pavilion was clean and well-lit. A mock move on December 6, requested by CDPH, confirmed that the corridor was safe and accessible. Per CDPH guidelines, no more than two residents moved through the corridor at any one time. Each resident was transported through the corridor by a Laguna Honda staff member. A volunteer carried the resident's medical record chart. The second floor of the connecting corridor was used by Crown movers to transport furniture and equipment.



*Resident rooms all have views and operable windows*

### *Elevator Preparedness*

Elevator technicians were on hand for trouble-shooting from Monday, December 6 to Wednesday, December 8, 2010. Elevator traffic moved smoothly. Crown movers completed the equipment transport ahead of schedule on the weekend before the resident move. Elevator monitors, critical to ensuring a safe and smooth traffic flow on move days, were coordinated by Laguna Honda Rehabilitation Center Manager Paul Carlisle and Clinical Nurse Specialist Laurie Agrillo.

### *Large Volunteer Effort*

A total of 494 volunteers participated in the two-day resident move. There were 254 volunteers on day one and 240 on day two. The volunteers helped push wheelchairs, organized medical

records, assisted with dispatch at the old units or reception at the new neighborhoods, and helped unpack belongings. The volunteers were recruited, trained, and assigned to tasks by Director of Therapeutic Activities Bill Frazier and Clinical Nurse Specialist Laurie Agrillo. The Safeway company, a Laguna Honda community partner, generously provided dozens of volunteers as well as tote bags for residents to carry their own medical charts on the move route.

#### *Surge Staffing*

So that residents and staff were supported before and after the move, staff were scheduled to work longer hours and many chose to delay vacations and other planned events to help with the transition. The scheduling flexibility speaks highly of staff commitment to residents and to a successful transition.

#### *Move Day Parking*

Valet parking was made available in Laguna Honda's two parking lots on move days to ease hospital access for volunteers, family members, and staff.



*Aqua Therapy at the Wellness Center*

#### *Closing Departed Units*

Nursing Director Bronwyn Gundogdu and Facilities Services Director Diana Kenyon were responsible for ensuring that each former unit was locked safely after the last resident departed. Throughout December 2010 and into early January 2011, operations and nursing staff as well as employees of Criterion Systems worked to decommission the units in preparation for the upcoming abatement and demolition.

## **RESIDENT PREPARATION**

#### *Residents Council Move Workshops and FAQs*

A total of nine workshops were held for residents to learn about the new hospital in the year preceding the move. The sessions provided a forum for questions and answers. Five editions of a booklet containing answers to frequently asked questions about the move were developed and distributed to residents and staff.

#### *Notice of Room Assignments*

Beginning in the fall before the move, resident care teams met with residents, families and designated decision makers to discuss neighborhood, household and room assignments. A script and guidelines for these conversations were developed by social worker Cindia Lok as a reference for resident care team members. Written notices of room assignments were sent in October 2010.

#### *Resident Guidebook*

The newly revised resident guidebook was distributed to residents, family members and designated decision makers during the week after the move.

### *Packing and Resident Belongings*

Residents, families, and designated decision makers began sorting belongings in summer 2010. On October 9, 2010, moving boxes arrived at Laguna Honda and residents started packing with the help of nursing assistants and family members. Property inventory forms were completed by nursing assistants on the weekend before the move. Thousands of boxes were moved with no reports of lost resident belongings.



*A Household Living Room*

### *Resident Tours*

Following approval by CDPH, tours of the new hospital for residents began the week of November 29, 2010. Nurse Manager Flavia Bayati and Director of Therapeutic Activities Bill Frazier established safety guidelines for resident tours.

Residents were escorted and supervised by staff when they toured the new building.

### *A Welcome Home Gift*

Gift bags were distributed to each resident's room before move day. The gift bags were donated by Laguna Honda Volunteers, Inc. Each bag contained a cap with the Laguna Honda logo, a reusable green tote bag, pens, postcards, a bookmark, and toiletry items. The effort was coordinated by Nursing Director Mercy German, Clinical Nurse Specialist Laurie Agrillo, Director of Therapeutic Activities Bill Frazier, Home Health Aides Rey Ejanda and Joseph Mateo, Laguna Honda supervolunteer Gary Speer and volunteers from Walden House.

## **STAFF PREPARATION**

### *Staff Embracing Change Early On*

The strength of Laguna Honda has always been the staff who are here 365 days providing resident care. Laguna Honda staff have exhibited great resiliency and flexibility for the last five years when the hospital started closing units in anticipation of the transition.

In Summer and Fall 2010, department heads, human resources staff and labor representatives met, conferred, and implemented a successful bidding process for activity therapists, nursing assistants, licensed vocational nurses, registered nurses, porters, and food service workers. Over 900 Laguna Honda staff participated in the bid process, making it one of the largest in the city's history.

The job assignments resulting from the bids took effect in advance of the move from October through November 2010 to provide time for staff to familiarize themselves with residents and co-workers.

The massive undertaking was led by Human Resources Director Willie Ramirez, Director of Therapeutic Activities William Frazier, Environmental Services Director Maxwell Chikere, Environmental Services Supervisor Estrella Lander, Nutrition Services Manager Steve KoneffKlatt, Nutrition Services Supervisor Chris Lai, Assistant Manager of Nutrition Services Ed

Shiels, Chief Nursing Officer Debbie Tam, and Nursing Directors Lenora Jacobs, Ghodsi Davary, Bronwyn Gundogdu, and Mercedes German.

#### *Fire and Life Safety Orientation*

The hospital Department of Education and Training conducted a four-hour training for all staff to familiarize them with the systems and safety features of the new buildings. All staff members completed the training, which was coordinated by education and training staff Jill LeCount, RN, CNS, Michael Mikolasek, RN, Laurie Agrillo, RN, CNS, and Christina Ortiz.



#### *Departmental-Specific Training*

Vendors worked with hospital staff to conduct practice drills on new equipment, rehearse new building workflows, and check skill levels.

This department-by-department training ensured that staff members would have familiarity with the new building technologies on day one of operations.

*Residents' Library*

#### *Superusers*

Approximately 160 staff members from all departments were identified as superusers and assigned to participate in focused training, change management, coaching and team building sessions during 2010. Superusers mentored peers and colleagues to ensure competence on new equipment and workflow familiarity with the new hospital. They also participated in guiding CDPH licensure surveyors through the new buildings and describing to them new processes of resident care. The superusers continue to play a central role in providing refresher courses and new systems and workflow education for neighborhood staff on all shifts.

#### *Day in the Life Workshops*

The hospital's Day in the Life training was a central feature of move preparation. Day in the Life is a national best practice that simulated a day in the new living environment, including potential crisis scenarios. The training was a collaboration of the hospital's nurse educators and human resources staff with the transition logistics consultant, Healthcare Technology Systems (HTS). Day in the Life training sessions were based on actual past occurrences and from protocols for staff engagement and resident-directed care developed as part of the hospital's organizational effectiveness initiative.

#### *Post-Move Education and Training*

Nursing education and informatics staff worked 24/7 in the weeks leading up to and following the move to help staff acclimate to the technology and equipment in the neighborhoods. This team continues to be available to consult and troubleshoot when questions arise.

#### *Departmental Move Plan*

Criterion Systems, the consulting company that coordinated and facilitated the move planning and execution effort, developed a departmental move plan and schedule based on interviews and information gathered since the start of transition planning activities in 2008. Criterion

directed and coordinated the work of Crown Moving Company, which transported resident belongings, equipment, department-packed items and furniture from the old to the new buildings. Equipment was packed by hospital staff. All departments met the deadlines established in a move scheduling timeline. There were no reports of lost departmental items.

#### *Staff Access and Hospital Security*

Coordinating and making the ID badges and keys to the new hospital offices, departments, neighborhoods and other entrances was spearheaded by the Facilities Services Department. Locksmith Jack Bradley and Facilities Services Director Diana Kenyon ensured staff received secure card key ID badges before departmental and resident moves. Refinement of security access via ID badges continues today.



*Farm and Gardens*

## **BUILDING COMMUNITY**

#### *Weekly Huddles*

Hospital executive staff initiated weekly move huddles on October 18, 2010. The huddles continued up to the day before the move. They were a source of important information exchange as well as problem solving for move planning issues.

#### *Laguna Honda Grapevine*

The staff newsletter served as a communications tool to provide up-to-date information. It was published at least weekly or more often from November through December 2010.

#### *Neighborhood Community Meetings*

Activity Therapists facilitated and coordinated monthly community meetings on each unit open to residents, families, staff and volunteers. Months before the move, the focus of the community meetings shifted to move planning. The meetings have continued in the new neighborhoods as a way for neighborhood community members to exchange and share information.

#### *Family Council*

The Family Council was convened in the John T. Kanaley Community Center by Social Services Director Janet Gillen on January 9, 2011. Nine family members and five residents attended to provide the hospital feedback about their transition to the new hospital. The general sentiment was that the new building is a beautiful environment. Family members said they are working toward re-establishing their visiting routines now that the move is complete. Monthly meetings will continue on the 2<sup>nd</sup> Sunday of the month from 12:30 pm to 1:30 pm in the Community Center.

#### *Residents Council*

The first Residents Council meeting in the new building was held on January 20, 2011. The meeting was well attended. Residents expressed thanks for the new hospital and their new rooms. Hospital administrators were in attendance to hear feedback and take requests from residents. Key issues were television channels, room set up, and equipment needs.



### *The Pavilion Café*

The Pavilion Café on the Esplanade is open for breakfast, lunch, breaks and snacks. The Café opened in mid December 2010 with a greatly expanded menu, and seating at an outside patio for those who prefer to dine al fresco. The total seating capacity has increased by approximately 40% over the old hospital cafeteria.

The expanded menu features an entire line of "Heart Healthy" food, regular specialties, including grilled Panini, vegetarian sandwiches, fresh broiled burgers and sweet potato fries. The Café also features theme lunches such as Wok Wednesday, Burrito Tuesday, and Mediterranean Thursday.

With the opening of the new Café, the hospital's composting and recycling programs have increased. The Café has been an overwhelming success. Daily sales have increased by \$300 - \$500 per day over the old cafeteria.

## **TECHNOLOGICAL ADVANCES**

### *Milestones*

Network Implementation	April 2010
PC and Printer Deployment	September 2010
Medical Devices Network Activation	October-November 2010
Facilities Management Systems Network Activation	October-November 2010
Network Fine-Tuning and Acceptance Testing	November 2010
Systems Relocation (from old building to new building server room)	November 2010
User Acceptance Testing	November 2010
Information Technology Move Support	December 2010
Active Directory Migration Completion	December 2010

### *IT Equipment Deployment*

Altogether, the IT team installed 370 PC's and laptops, 100 printers, 30 multi-function devices, and 25 small laptops. The DPH Information Technology (IT) Team was led by Managers Pat Skala, John Applegarth, Linh Duong, and Nancy Wong.

### *Systems Integration*

The technological sophistication of the new buildings is coordinated by a Johnson Controls system that combines building management, fire alarms and security into one unified facility management system (FMS). The FMS gives staff the ability to view any of the three systems from a single computer screen. It also allows manipulation of the building management system, which controls air flow, temperature, boilers, and generators. Pursuant to code requirements, the fire alarm and security systems must be operated separately from the FMS. The hospital security system controls the card key locks on every door and operates 79 high definition security cameras.

### *Pharmaceutical Dispensing Technology*

With the move to the new hospital, Laguna Honda expanded the use of its automated pharmaceutical dispensaries (Omniceil) from six in the old hospital to twenty-seven. Use of the Omnicell devices is an element of the hospital's medication error reduction plan. Omnicell devices decrease delays in medication availability, provide greater security and accountability, and lower the likelihood of medication errors. A pilot project in the old hospital allowed nurses

to become familiar with the technology before the move enabling a smooth transition for nursing and pharmacy staff.

### *Resident Safety*

The new hospital features substantial technological innovations to promote resident safety.

- Bed exit alarms to alert nurses when a resident at risk for falling gets out of bed unsupervised.
- An advanced nurse call system that enables nurses to move freely throughout the workplace while receiving and delivering reliable and voice and data communications. The system displays active calls in an easy-to-read list that includes the room number and bed of the resident who placed the call. The system automatically answers the highest priority call, and assigns the resident's request to the correct staff member.
- A locator system that supports the autonomy of residents at risk of wandering by allowing access within hospital safety zones.
- Ceiling lifts in 112 rooms to assist residents who have difficulty transferring from bed to bath and bed to wheelchair.
- A climate control system designed to monitor a variety of equipment such as blanket warmers, pharmacy refrigerators, and kitchen cold storage.



*The Pavilion*

### *Environmental Sustainability*

Laguna Honda was awarded silver certification by the U.S. Green Building Council's Leadership in Energy and Environmental Design (LEED) program in June, 2010, making it the first green-certified hospital in California. The LEED program is the leading national standard for designating green buildings. The hospital's three new buildings address environmental impacts in their design, construction and operation across six LEED-designated categories: sustainable sites, water efficiency, energy and atmosphere, materials and resources, indoor environmental quality, and innovation and design process.

## **PROGRAMS AND SERVICES**

As a safety net facility, Laguna Honda serves a wide variety of healthcare needs. Names of resident programs and services for each neighborhood were jointly selected by residents and staff to better indicate the nature of the services provided. The hospital's programs now fall into seven categories, as follows:

**Acute Care.** Laguna Honda provides acute medical services to residents.

**Rehabilitation.** Rehabilitation services include programs in physical therapy, occupational therapy, speech therapy and audiology. Licensed therapists assist individuals who have experienced a traumatic injury or are living with a chronic condition and can benefit from an intense level of rehabilitation with a goal of achieving their maximum level of independence.

**Enhanced Support.** The hospital's enhanced support program is dedicated to improving the independence of residents with chronic or complex conditions who require extensive assistance

with activities of daily living such as eating, bathing and toileting. The program serves people living with the effects of stroke, traumatic brain injury, and neurological disorders among others.

**Memory Care.** Laguna Honda provides memory care services for residents with Alzheimer's or other dementias who have advanced stages of the disease and are no longer able to be cared for at home by family members. The program is featured in a training film for practitioners produced by the national Alzheimer's Association.

**Positive Care.** Laguna Honda provides the Bay Area's only skilled nursing service for people with HIV and AIDS.

**Integrated Wellness.** Residents who have multiple, complex physical illnesses as well as mental health or behavioral challenges receive services in the integrated wellness program, which combines nursing, medical and counseling therapies.

**Monolingual Care.** The hospital's award-winning cultural competency services include care in Spanish and Chinese for monolingual speakers.

**Hospice and Palliative Care.** The palliative care program provides symptom management and holistic care for people nearing the end of life. It includes an in-house hospice operated with the Zen Hospice Project of San Francisco.



*Banners announcing the new Laguna Honda along Divisadero*

*Licensed Beds*

The hospital's census in relation to number of licensed beds is as follows:

Level of Care	# of Beds	Comments
Acute Medical	8	1 bed is an isolation room
Acute Rehabilitation	7	
Skilled Nursing	765	6 beds are in isolation rooms
Total	780	

*Dining Service*

After a pilot of galley dining service for all three meals that began on December 13, 2010, the hospital made adjustments based on feedback from staff and residents. On December 30, breakfast and dinner meals began to be delivered on trays from the main kitchen. Service from the galleys continues for lunch. An "all hands on deck" approach engages all staff members in meal service.

*Outpatient Clinics*

The outpatient clinics were open and ready to see patients on Thursday, December 9.

*Clinical Support Services*

The provision of Laboratory, Radiology and Respiratory Care Services was uninterrupted during the move days.

### *Designated Smoking Area*

Harmony Park, the campus' designated smoking area, has been relocated outside the mezzanine between the North Residence and the Pavilion. The hospital continues to be smoke-free, and smoking at Harmony Park is restricted to the hours of 6 am to 11 pm.

## **TRANSITION METRICS**

Success indicators for occupancy, equipment and move planning were established in August 2010.

### *Occupancy Planning Success Indicators*

Indicator(s)	Goal(s)	Result(s)
1. Training completed and documented	100% of active employees receive training	Goal met. All 1,408 active employees received life safety orientation
2. CDPH Licensing and Certification Process is completed	Successful licensing visit as scheduled	Goal met. Successful licensing visit including approval of the connecting corridor
3. Equipment and devices work properly and user or operator errors are minimized	Zero errors for critical patient care equipment	Goal met. No downtime occurred. Minor system access issues related to directory migration; Minor number of cases where printers had to be configured to a different workstation
4. Systems function appropriately and no significant system failures	99.8% uptime during licensing and move period	Goal met. 100% uptime; no downtime related to integrated security and nurse call systems

### *Equipment Planning Success Indicators*

Indicator(s)	Goal(s)	Result(s)
1. FF&E procurement is completed	100% of FF&E items are purchased	Goal met. 100% of 24,238 items purchased on schedule
2. FF&E Delivery is completed	100% of FF&E items are delivered	Goal met. 100% of FF&E delivered on time prior to residents' move
3. FF&E installation is completed	100% of FF&E items that need installation are installed	Goal met. 100% of FF&E installed on time prior to residents' move

### *Move Planning Success Indicators*

Indicator(s)	Goal(s)	Result(s)
1. Safety is maintained during resident move	Zero injuries related to move activities	Goal met. Zero injuries of 728 residents
2. Staff safety is maintained during department and resident moves	Zero injuries related to move activities	Goal met. Zero staff injuries; one volunteer with a minor cut to the finger out of 494 volunteers for the two-day move
3. Staff/Department move is planned and executed	All moves are completed as scheduled; no unplanned operational downtime for all patient care critical departments	Goal met. 100% of Staff/Departmental moves were completed on schedule; no unplanned operational downtime for all patient care critical departments
4. Equipment move is planned and executed	Equipment is moved per schedule; no lost equipment, patient care equipment or unplanned downtime	Goal met. 100% of all equipment moved on schedule; no lost equipment; no unplanned downtime

## POST-MOVE FOLLOW UP

As we reach the three month point after the move, Laguna Honda will continue to monitor for quality by tracking resident, family and staff feedback as well as following up on post-move outstanding issues. We are committed to informing the Health Commission with periodic updates.

## OUR VALUES

Laguna Honda Hospital and Rehabilitation Center prides itself on being a therapeutic community offering skilled nursing, acute care and rehabilitation services to a safety net population of 780 seniors and adults with disabilities.

At Laguna Honda, caring for others is a vocation that we cherish. We are committed to providing the highest standards of quality and culturally competent service to a culturally and linguistically diverse population reflective of the communities of San Francisco. We are proud to serve as part of the San Francisco Department of Public Health safety net services for vulnerable populations.

Laguna Honda's person-centered approach promotes well-being and independence by integrating an award-winning nursing program with 24-hour medical care, a state-of-the-art Rehabilitation Center, therapeutic activities, nutritional counseling and social services that support individual needs and preferences. Laguna Honda's residents, along with their families and loved ones, are active participants in the decisions that affect their care.

Our attention to multiple and changing health needs assists residents to adapt to any ongoing challenges they may face, and to successfully integrate into the civic life of San Francisco. Our promise is to strive for therapeutic excellence and a healing environment that puts people first.

Respectfully submitted,



Mivic Hirose, RN, MS, CNS  
Executive Administrator



*Looking out over the campus*