JOSEPH RODRIGUES
State Long-Term Care Ombudsman
Office of the State Long-Term Care Ombudsman
California Department of Aging
1300 National Drive, Suite 200
Sacramento, California 95834
Telephone: (916)419-7510
Facsimile: (916)928-2503

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN FRANCISCO DIVISION

In re:	
AgeSong Genesis, LLC,	Case No. 17-30175 HLB
	Chapter 11
	SECOND REPORT OF THE PATIENT CARE OMBUDSMAN
Alleged Debtor	(No Hearing Required)

Pursuant to the order directing the appointment of a Patient Care Ombudsman entered by this court on March 2, 2017, Tracy Hope Davis, the United States Trustee, duly appointed Joseph Rodrigues as the Patient Care Ombudsman in this case.

In compliance with the notice of appointment, the Patient Care Ombudsman is submitting his second 60-day report.

May 22, 2017

Respectfully submitted,

/s/Joseph Rodrigues
Joseph Rodrigues
State Long-Term Care Ombudsman

SECOND REPORT OF THE PATIENT CARE OMBUDSMAN

The Felton Family Service Agency of San Francisco is the designated local Long-Term Care (LTC) Ombudsman entity for the City and County of San Francisco and is the representative of the Office of the State LTC Ombudsman. As mandated by the federal Older Americans Act (42 U.S.C. 3058g), LTC Ombudsman representatives identify, investigate and resolve complaints that are made by, or on behalf of residents of LTC facilities that relate to action, inaction or decisions that may adversely affect the health, safety, welfare or rights of residents.

AgeSong University is located at 350 University Street, San Francisco, California. The California Department of Social Services, Community Care Licensing Division, licenses this facility as a Residential Care Facility for the Elderly. Residential Care Facilities for the Elderly, also known as assisted living facilities, provide 24-hour non-medical care and supervision, including housing, meals, personal care, social activities, and coordination of medical appointments, to people who have physical, cognitive, or behavioral conditions that prevent them from living alone.

The following information describes the visits of local

Ombudsman representatives, observations about staffing, the general status of the residents, communication between and among staff and residents of the facility, and any complaints made by or on behalf of residents to the LTC Ombudsman Program. Benson Nadell, Ombudsman Program Coordinator and Melanie Carroll, Ombudsman representative conducted these visits to the facility.

The licensed capacity of the facility is 74, with a current occupancy of 63. Most of those admitted have been short term placements for respite by Kaiser. While these admissions may be characterized as short term, some stay longer. As against that number there are long term residents. The short term Kaiser residents are medically complex. There are not too many long term admissions. Presently there are 10 short term respite residents. The remaining 53 are long term residents. There have been four residents who expired. One was 104 years of age. Their passing was in keeping with their care.

One person who was evicted for assault of another resident was admitted to another assisted living facility. The LTC Ombudsman Program heard he expired somewhat unexpectedly.

Of the Kaiser related admissions, most have neurological problems with cognitive deficits. The AgeSong philosophy in

conjunction with interns from the AgeSong non-profit arm, the Pacific Institute, has always touted admission for the neurologically challenged. The interns work in therapeutic dyads with each impaired person. This is considered an enrichment of the placement. During the summers however, the interns are not available and these intense interactions fall back on activity personnel.

These Kaiser placements are challenging to the caregivers who work on the floor. It is not clear if the number of caregivers from the last report has increased. The caregivers during this observational period seem to work hard and the Ombudsman representative has not witnessed any supervisorial huddles or care meetings to discuss progress or regress. The Kaiser short term residents do have external care coordination with the Kaiser team, who do visit their members.

One the May 4, 2017 visit, Ombudsman Melanie Carroll reported that the television service was down and remained down for a week. The Ombudsman representative received different explanations. The receptionist said a cable was missing to connect to the box in the resident's room. The maintenance staff said that he could not find cables to connect to boxes. Another source said that the bill for the television service was not paid for a week. Numerous residents

complained that week to Ombudsman Nadell about the television outage. Since all residents were getting television before, the attribution to a cable shortage appears, in the opinion of the Ombudsman representative, to be a deflection.

This same maintenance staff alleges that the Trustee was not paying bills on janitorial supplies, including toilet paper, garbage bags and soap.

On an April 21, 2017 visit, the maintenance staff told Ombudsman Carroll that the heating system needed an overhaul. This old building relies on radiators in each room. The maintenance staff said the boiler in the basement needs replacement. Yet on a subsequent Ombudsman visit on April 28, the heaters were on but inconsistently. The maintenance staff may be misleading the Ombudsman in estimates.

During the May 12, 2017 Ombudsman visit, a licensed vocational nurse (LVN) reported to Ombudsman Nadell that there were a total of seven LVNs, with two as full time employees. The full time LVN who is the Wellness Nurse recently gave notice that she is leaving her position. The nurse is taking another position in a different assisted living facility.

Also on the May 12 visit, Ombudsman Nadell observed a pendant specialist setting up a new system and checking it. The pendants are used by residents to call for assistance when they need it.

On May 20, 2017, an LVN told Ombudsman Nadell that the pendant specialist was brought in to review the present pendant system, not replace it. She concurred that persons with cognitive impairments do not benefit from a call system. She stated the old University Mound had a pull cord system, which was replaced by the pendant system. She said some of those residents who can use the pendant system have misplaced it. She said there are pendants assigned to each room number. The pendants go to the computer, which is often unattended; and to pagers that the staff carries. The LVN discovered that the caregivers do not always have the pagers with them. They are in a box. Some lack battery replacements; others just do not work, which is why the pendant specialist was reviewing them on May 12. The LVN said that at other communities she worked at, there was a sub-contractor who came and reviewed pendants at least quarterly. Ombudsman Nadell suggested that just as glucose monitoring devices have a log for testing accuracy, there could be a log to review the pendant and pager system on a regular basis. As residents leave and new ones arrive, and occupy previously unused rooms, they have to be set up with pendants.

Again on the May 12 visit, the Ombudsman representative read a document on the receptionist's desk which was the Wander Guard Log Event Report. This system is able to identify most frequented exits from which residents were able to leave. This device sets off a warning which is logged, e.g., Bacon Street 143, Sunroom 79, and Front Door 59. This Log was for a period of time from April 17 - May 5, 2017. This log could be construed as data supporting more supervision of residents is needed. The Bacon Street exit is the least observable by staff. Ombudsman Nadell does not know the number of identifiable wanderers. With the continuous admission of Kaiser short term residents with neurological impairments, it is understandable, some may try to leave. AgeSong University does not focus on dementia care to the extent that there is a delayed egress system in place. That system usually is in a segment of an assisted living facility which has a memory care unit. To have an entire building with delayed egress could create a potential fire safety issue.

On the May 20, 2017 Ombudsman visit, one female resident summoned Ombudsman Nadell to her room. Her roommate was back from the hospital said the air was cold. The radiator was cold. The day was becoming hot in the front to the building. The Ombudsman representative interviewed the Wellness Coordinator about a number of issues. She said, in reference to the heating system, that there

is no thermostat, but rather, a central on/off switch in the first floor office. She also stated that the radiators are difficult to turn on or off; one needs a plier to turn the switch on or off.

According to the LVN responsible for staffing, six caregivers are on the A side (including upstairs rooms) and six caregivers are on the B side of first floor of the facility. They work until 5:00 p.m. Some staff work overtime. The LYN stated that despite using agencies for staffing on the weekends (at a higher hourly rate), some who work, decide not to return because of the high acuity of residents. The LVN stated that 15 residents require two caregivers for personal care, getting out of bed, etc. The LVN also stated one resident requires four caregivers to assist with showers. The LYN reported that when a pendant goes off, these caregivers often get pulled away. In the evening, the staffing is reduced to three caregivers for each wing of the building. As the LVN shared these details, she opined that maybe the Trustee does not know the full picture. She said there is a hiring freeze for May, and therefore no new caregivers can be interviewed. The LYN stated Sunday is the most difficult day. Fewer persons from agencies are willing to come back to AgeSong University.

The LVN also stated that she is worried about next month and the summer and is worried about staffing. Some have families and

will want to take time off. In the envelope with the last paycheck (some get direct deposit) was a note to each employee explaining the Trustee and his role. The caregivers know of the bankruptcy filing. Some will be looking for other jobs because they have families to support. They see the future as uncertain as AgeSong University.

Some caregivers have worked at AgeSong University since the University Mound period. Some remember the near-closing back then, and have remained at the facility. One caregiver has worked in this facility for 20 years. One laundry staff person has worked at the facility thirty years.

Ombudsman Nadell was informed on the May 20 visit that there were only laundry supplies to last until the next day. Staff informed the Ombudsman representative that the Wellness Director had to buy detergent at the store. The vendor is owed money. The laundry washes linen, towels, washcloths, as well as residents' clothing.

Based on random visits by the Ombudsman representatives, the food elicits no complaints. There seems to be enough supplies. In addition, there are supplies for adult diapers and incontinence briefs and toilet paper.

On May 20, 2017 Ombudsman Nadell interviewed a few residents. One resident said he heard the facility is closing in July. The resident also stated a few of the on the floor management staff are leaving. The resident was concerned who would replace them. One female resident complained about a male putting both hands down his own pants. Another was worried about her family. A recently arrived resident told the Ombudsman representative that he loves this place, its spaciousness, the workers, and the outside grounds. It is very nice. Upon leaving the facility, the Ombudsman representative came away with a sense of uncertainty. Despite the concerns identified during these visits, AgeSong University was functioning. Residents were going about their routines. But there is an overarching unfolding uncertainty among staff and caregivers. This next 60 day period will be telling.

The Patient Care Ombudsman has several recommendations:

1. Should the facility close, residents need to plan. Finding similar placements in San Francisco is difficult.

2. There has to be a well thought out notification process.

3. AgeSong University is still holding on to its management contact, but the Patient Care Ombudsman recommends that it is time to bring on someone to talk to residents, families, and caregivers, who is compassionate and supporting. The conflict has riven the facility.

4. Janitorial and laundry supplies need to be provided immediately.

5. There has to be a staff deployment plan through the summer.

6. The outgoing Wellness Coordinator needs to be replaced with a skillful person, expert in care coordination, and working with agencies, doctors and families. That person needs to have compassion and strong care planning experience.

May 22, 2017

/s/Joseph Rodrigues
Joseph Rodrigues
State Long-Term Care Ombudsman