

### County of Los Angeles **CHIEF ADMINISTRATIVE OFFICE**

713 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012 (213) 974-1101 http://cao.co.la.ca.us

May 3, 2006

**Board of Supervisors GLORIA MOLINA** First District

YVONNE B. BURKE Second District

ZEV YAROSLAVSKY Third District

DON KNABE Fourth District

MICHAEL D. ANTONOVICH

Fifth District

To:

Mayor Michael D. Antonovich

Supervisor Gloria Molina

Supervisor Yvonne B. Burke Supervisor Zev Yaroslavsky

Supervisor Don Knabe

From:

David E. Janssen

gusse Chief Administrative Officer

FINAL RESPONSE TO 2005-06 CIVIL GRAND JURY REPORT ON THE JAIL WARD AT LAC+USC MEDICAL CENTER

On February 9, 2006, the 2005-06 Los Angeles County Civil Grand Jury released its report on the management of inmate-patients within the jail medical services system.

The Grand Jury report dealt with the number of Sheriff's Department (LASD) inmate patients transported to LAC+USC and with services provided for inmate-patients in the Los Angeles County + University of Southern California (LAC+USC) Jail Ward, as well as the general hospital wards. The report also mentioned the pay differential between nursing positions in LASD and nursing positions in the Department of Health Services (DHS), as well as the fact that inmate patients were placed, with supervision, on general hospital wards, due to nurse staffing shortages in the LAC+USC Jail Ward or if clinical needs dictated such a placement. Attachment I is a copy of the preliminary response we provided to your Board on the issues raised in the Grand Jury's report.

This memorandum provides additional information on the immediate and short-term steps already taken by DHS staff to increase nurse staffing on the LAC+USC Jail Ward, as well as the development in progress by DHS and LASD of a longer-range plan, to address the issues raised in the Grand Jury's report.

In order to address the immediate need to maximize bed capacity on the inpatient Jail Medical Services Unit, DHS increased nurse staffing for that unit effective February 21, 2006 and has been able to accommodate the average census of 15 to 20 inmate patients who require medical/surgical beds. Nurse staffing requirements

Each Supervisor May 3, 2006 Page 2

continue to be evaluated on a daily basis, and when additional Jail Ward beds require increased staffing beyond available County nursing staff, LAC+USC will assign traveler and registry nurses to that unit to meet the need.

As a short-term and continuing effort, LAC+USC has developed and is strengthening current strategies to improve recruitment and retention of staff nurses to ensure that the inpatient Jail Medical Services Unit continues to be properly staffed with nurses, as well as to meet nurse staffing needs of other LAC+USC medical wards and at all County hospitals. DHS staff indicate, however, that although LAC+USC will continue to ensure that inmate patients are not unnecessarily placed in open wards, a small number of inmate patients will still require placement in open wards due to their specialized clinical needs. Attachment II is the DHS response to the Grand Jury's Recommendation Number 4 regarding placement of inmate patients on open wards at the hospital.

For the immediate and short-term at Men's Central Jail and Twin Towers, the LASD Medical Services Bureau (MSB) clinical staff have agreed to treat routine, less critical injuries on site at LASD facilities, rather than transporting those inmates to LAC+USC. Since LASD staff have not performed such procedures for some time, protocols are being developed, and LASD is currently consulting with staff from LAC+USC that teach these such courses on an ongoing basis. LASD is continuing to review procedures which might be performed by LASD clinicians, in order to further reduce the number of cases transported to the Jail Medical Services Unit at the hospital.

In addition, LAC+USC and LASD clinical staff are working on changes to the current processes related to ordering diagnostic tests for inmate patients, to enable LASD physicians to directly order diagnostic testing at LAC+USC rather than first requiring another in-person examination of inmate patients by LAC+USC physicians. Staff are developing a system which will allow direct access to LAC+USC diagnostic test results by authorized LASD clinical staff. In order to facilitate diagnostic testing, LASD is also working with LAC+USC staff to expedite necessary laboratory services.

On a related issue, to improve the clinical care provided to inmate patients, discussions have also dealt with improving the flow of medical records information between DHS and LASD, with the potential of allowing access by authorized LASD and DHS staff to their respective information systems, consistent with confidentiality requirements.

Many of the issues related to jail medical services, primarily in the area of outpatient medical services and specialty clinic services, require a longer-range plan, one that is expected to take approximately 12 months to 18 months to implement. The timing of this effort is particularly important in light of the upcoming move, targeted for November 2007, of the LAC+USC Medical Center programs into the LAC+USC Replacement

Each Supervisor May 3, 2006 Page 3

Facility, which will reduce the amount of outpatient clinic space available at the hospital for jail medical services. In late February 2006, DHS and LASD established a working group consisting of both clinical and management staff to develop the plan for providing clinical services on-site at Men's Central Jail or at Twin Towers and of using LASD's telemedicine system, where appropriate, to reduce the need to transport inmate patients. Staff from my office also participate in the working group meetings.

The working group has met several times over the past two months to identify the specific clinical programs that might best be set up at LASD sites. At the most recent meeting, on Monday, April 24, 2006, members of the working group toured the Men's Central Jail and Twin Towers, to evaluate the available space at those locations which could be established as additional clinical treatment space. Several areas were identified as potential sites as a result of that visit and will be discussed further by the working group members.

The group will continue to meet on at least a monthly basis, and more frequently as needed, over the coming months to develop the plan. Next steps will include a more detailed review and discussion of current workload and the needed outpatient and specialty clinical services. Discussions by LAC+USC staff will include the clinical department chairs and this review of clinical programs will serve as the basis for the next phase of discussions about which services would best be provided in the available LASD space or at the LAC+USC Medical Center. The discussions will also review which services would lend themselves to the use of telemedicine. While the group is still developing the specific milestones within its timeline, the target date for implementation of this plan is May/June 2007, to ensure that a workable approach has been implemented by the November 2007 date for occupancy of the Replacement Facility.

Finally, we are continuing to review the issue regarding the pay differential between nursing positions in DHS and LASD. As of April 27, 2006, preliminary discussions with Service Employees International Union (SEIU) Local 660 have concluded concerning a new pay structure and differential for LAC+USC jail ward nurses, as well for other corrections facility nursing assignments, some of which are currently receiving a pay differential amount. Meetings with managers of nursing and related medical services will take place within the next two to three weeks. This is a negotiable issue, and a bargaining position concerning a bonus or some other option of additional compensation will be considered and, if appropriate, developed for your Board's consideration when bargaining for the nursing units commences.

In summary, our Departments continue to work together to develop and implement the short range and longer-range proposals to address the Grand Jury recommendations.

Each Supervisor May 3, 2006 Page 4

These recommendations are consistent with efforts both Departments had already begun and will now move forward aggressively in order to improve the delivery of medical services to inmate patients, while continuing to ensure the safety of the general public served by County health facilities.

If you have questions or need additional information, please contact me or your staff may contact Sheila Shima of my staff, at (213) 974-1160. In addition, questions regarding LASD or DHS programs, may be directed to Captain Rodney Penner, LASD at (213) 893-5460 and Wesley Ford, Director of Ambulatory Care, DHS at (213) 240-8334.

DEJ:SRH:DL SAS:CA:bjs

#### **Attachments**

c: Sheriff
Executive Officer, Board of Supervisors
County Counsel
Auditor-Controller
Acting Director of Health Services
Director of Personnel



## County of Los Angeles CHIEF ADMINISTRATIVE OFFICE

713 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012 (213) 974-1101 http://cao.co.la.ca.us

Board of Supervisors GLORIA MOLINA First District

YVONNE B. BURKE Second District

ZEV YAROSLAVSKY Third District

DON KNABE Fourth District

MICHAEL D. ANTONOVICH Fifth District

February 9, 2006

To:

Mayor Michael D. Antonovich

Supervisor Gloria Molina Supervisor Yvonne B. Burke Supervisor Zev Yaroslavsky

Supervisor Don Knabe

From:

David E. Janssen

Chief Administrative Officer

Leroy D. Baca

Sheriff

Bruce A. Chernof

Acting Director and Chief Medical Officer

PRELIMINARY RESPONSE TO 2005-06 CIVIL GRAND JURY REPORT ON THE JAIL WARD AT LAC+USC MEDICAL CENTER

We were recently provided with a copy of the 2005-06 Los Angeles County Civil Grand Jury's report on the Sheriff's Department's (LASD) transfers of inmate-patients to the Los Angeles County+University of Southern California (LAC+USC) Medical Center and nurse staffing issues for the LAC+USC Jail Ward.

Our staff met today to discuss the report and recommendations and this is our initial review and preliminary response to the Grand Jury recommendations. However, we will return at a later date with a more detailed review, including action steps and timeframes needed to implement the recommendations.

The Grand Jury report deals with LASD staff transfers of patients to LAC+USC and with services provided by LAC+USC for inmate-patients in the LAC+USC Jail Ward, as well as the general hospital wards. The report mentions the pay differential between nursing positions in LASD and nursing positions in the Department of Health Services (DHS), as

Each Supervisor February 9, 2006 Page 2

well as the fact that inmate patients are placed, with supervision, on general hospital wards, if there are nurse staffing shortages in the LAC+USC Jail Ward or if clinical needs dictate (placement in the general intensive care unit).

The report has four recommendations which are summarized as follows: (1) LASD should increase the use of medical personnel at Twin Towers; (2) LASD should fast-track implementation of telemedicine programs; (3) the Chief Administrative Office (CAO) should authorize DHS to hire nurses using LASD nurse classifications or allow a manpower shortage bonus for LAC+USC jail ward nurses; and (4) DHS should cease accepting inmate-patients onto general hospital wards, amongst the general public.

In response to the first recommendation, LASD concurs and has already initiated steps to increase the number of incidents wherein LASD Jail Medical personnel perform suturing. LASD suturing efforts will focus on routine, less-critical injuries, and LASD will continue to refer cases to LAC+USC with wounds on the face, neck, head, and certain extremity areas. This will require updated training for some LASD physician staff who have not performed this type of procedure in some time. LASD will establish protocols and provide training to Registered Nurse Practitioners, so they can also provide this service.

LASD indicates that the Medical Services Bureau's (MSB) new Chief Physician is supportive of increasing LASD activity in this area. LASD Personnel were recently sent to specialized training to enhance their ability to perform Incision and Drainage (IND) procedures, and MSB will continue to explore their ability to perform other types of minor surgical procedures.

The recommendation that MSB staff engage in the setting of fractures and other related orthopedic functions will require further study, due to the specialty of the involved process and the potential accompanying liability. The MSB is already aggressively pursuing the implementation of a Bureau-wide telemedicine system, which they believe will significantly enhance their ability to provide continuing quality health care. They have identified equipment and software and have made on-site visits of existing telemedicine systems already in use. Acquisition of the initial system will proceed once the County purchasing and contracting process has been completed.

In response to recommendation 2, LASD has had ongoing discussion with LAC+USC Medical Center staff, specifically as it relates to the provision of specialty clinic follow-up appointments. Dr. Marie Russell, head of Jail Ward operations at LAC+USC has partnered with LASD in the development and implementation of the DHS link to the

Each Supervisor February 9, 2006 Page 3

LASD telemedicine system. Once final procurement issues are resolved, LASD anticipates the system will go online sometime during summer 2006.

With respect to recommendation 3, the CAO recognizes that Registered Nurses assigned to the LAC+USC Jail Ward work in a unique environment. A new nursing pay plan has been designed which will consider compensability for factors such as unique work characteristics. In the interim, the CAO will be working with DHS to resolve any classification and compensation issues pending the full implementation of a new nursing pay plan.

In response to recommendation 4, DHS agrees with the spirit of the Civil Grand Jury recommendations of limiting the placement of inmate patients to the LAC+USC Jail Ward. Unfortunately, there will always be a small subset of patients with special clinical needs requirements that can only be done on open wards. Examples include Intensive/Critical Care units, burn units, obstetrics, etc. DHS will work to staff up the LAC+USC Jail Ward to full capacity using appropriate adult medical surgical nurses. Further, DHS will assist LASD in their development of alternate acute care delivery strategies should LAC+USC need to go on diversion because the Jail Ward is at full capacity.

Please contact us if you have questions or need additional information.

DEJ:LDB:BAC SRH:DL:SAS:bjs

c: Executive Officer, Board of Supervisors
County Counsel
Auditor-Controller
Director of Personnel

# COUNTY OF LOS ANGELES – DEPARTMENT OF HEALTH RESPONSE TO THE GRAND JURY FINAL REPORT

SUBJECT:

2005-2006 GRAND JURY RECOMMENDATIONS FROM

LAC+USC MEDICAL CENTER - DEPARTMENT OF HEALTH

SERVICES (DHS)

### **RECOMMENDATION NO.4**

Cease and desist accepting inmate-patients for bed placement on <u>Open Wards</u> amongst the general public.

### **RESPONSE**

DHS concurs with this recommendation and with its intended purpose of protecting patients, staff and visitors to the Medical Center. Nurse staffing was increased in the inpatient Jail Medical Services unit on February 21, 2006 to accommodate the current census of 15 to 20 inmate patients who require a medical/surgical bed. Nurse staffing requirements are evaluated daily, and if additional beds require staffing for inmate patients, traveler and registry nurses will be assigned to the unit. In order to ensure that the inpatient jail medical services unit is properly staffed with nurses for the long-term, LAC+USC is developing strategies to improve recruitment and retention of staff nurses for the Jail Medical Services Unit

However, it is important to note that there will always be a small subset of inmate patients with specialized clinical needs that can only be accommodated on open wards. Examples of such requirements for specialized care include those that can only be delivered in Intensive/Critical Care units, burn units and obstetrical units. We work closely with the Sheriff's Department to assure that security for these inmates is maintained at the proper level to meet patient, staff and visitor security needs.

It is LAC+USC's goal that all inmate patients not requiring higher level of care settings will be placed in the Jail Medical Services Unit. Physicians requesting their inmate patients be placed outside of the Jail Medical Unit for reasons other than higher acuity must receive authorization for the Jail Services Medical Director.

DHS is also working closely with the Sheriff's Department to increase the scope and size of clinical services that are available at Twin Towers which may reduce the number of inpatient admissions to the Jail Medical Services Unit at LAC+USC or permit the faster transfer of patients back to the Jail for the non-acute portion of their inpatient stay.