



**ADOPTED**

BOARD OF SUPERVISORS  
COUNTY OF LOS ANGELES

39 September 3, 2019

CELIA ZAVALA  
EXECUTIVE OFFICER

Los Angeles County  
Board of Supervisors

Hilda L. Solis  
First District

Mark Ridley-Thomas  
Second District

Sheila Kuehl  
Third District

Janice Hahn  
Fourth District

Kathryn Barger  
Fifth District

September 03, 2019

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Christina R. Ghaly, M.D.  
Director

Hal F. Yee, Jr., M.D., Ph.D.  
Chief Medical Officer

Dear Supervisors:

**ADOPTION OF FINDINGS AND RECOMMENDATIONS ON THE CLOSURE  
OF GLENDORA COMMUNITY HOSPITAL EMERGENCY DEPARTMENT  
AND GENERAL ACUTE CARE SERVICES  
(SUPERVISORIAL DISTRICT 5)  
(3 VOTES)**

313 N. Figueroa Street, Suite 912  
Los Angeles, CA 90012

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patient-centered, cost-effective  
health care to Los Angeles County  
residents through direct services at  
DHS facilities and through  
collaboration with community and  
university partners.*

**SUBJECT**

Request approval of findings and recommendations in Emergency Medical Services Agency's Impact Evaluation Report regarding the planned closure of Glendora Community Hospital's Emergency Department and general acute care services, to occur by September 16, 2019; and authorization to submit the adopted report to State of California Department of Public Health.

**IT IS RECOMMENDED THAT THE BOARD:**

1. Approve the Impact Evaluation Report (IER) and the recommendations within the IER which: (a) conclude that the closure of Glendora Community Hospital's (GCH) Emergency Department (ED) and General Acute Care Services by September 16, 2019 will have some negative impact upon the community, and (b) instruct the Emergency Medical Services (EMS) Agency to partially mitigate the negative impact of the closure of GCH's ED and General Acute Care Services.
2. Instruct the Director of Health Services (Director), or her designee, to forward the IER to the State of California Department of Public Health (CDPH)



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within three days of adoption by the Los Angeles County Board of Supervisors (Board) as required by the California Health and Safety (H&S) Code Section 1300.

## **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

### Background

On June 6 and 18, 2019, respectively, the CDPH and Glendora City Council, and the EMS Agency, were notified in writing by Mr. Parrish Scarboro, GCH's Chief Executive Officer, that GCH would be closing its Emergency Department (ED), and intended to cease operating as a general acute care hospital at 150 W. Route 66, Glendora, CA 91740 on or by September 16, 2019. Following the notification, the EMS Agency scheduled the required public hearing as per H&S Code Section 1300.

Mr. Scarboro cited GCH's yearly decline in the number of acute care patients (including emergency patients) treated at the hospital, which has been operating at between 10 to 15 percent capacity, and the resulting financial losses, as the main reasons for closing its ED and all General Acute Care Services. However, GCH recognizes that there is a critical shortage of inpatient behavior health services in the County of Los Angeles (County). GCH, therefore, will add 23 acute psychiatric beds in approximately eighteen months to the current capacity of 21 beds at its facility, bringing the total acute psychiatric beds to 44.

The EMS Agency prepared an IER outlining the impact of the closure of GCH's ED and General Acute Care Services on the EMS system in the County.

### Recommendations

Approval of the first recommendation will result in the adoption of the findings and recommendations in the IER (Attachment I) which: (a) concludes that the closure of GCH's ED and General Acute Care Services by September 16, 2019 will have some negative impact on access to, and delivery of, emergency medical services in Glendora, northwest San Dimas and east Azusa; and (b) instructs the EMS Agency to partially mitigate the negative impact of the closure of GCH's ED and General Acute Care Services by continuing to monitoring Ambulance Patient Offload Times and work with the impacted hospitals to ensure that ambulances are released in a timely manner.

Approval of the second recommendation will instruct the Director, or her designee, to forward the IER to the CDPH within three days of adoption by the Board as required by the H&S Code Section 1300.

## **Implementation of Strategic Plan Goals**

The recommended actions support Strategy II.2 "Support the Wellness of Our Communities" and III.3 "Pursue Operational Effectiveness, Fiscal Responsibility, and Accountability" of the County's Strategic Plan.

## **FISCAL IMPACT/FINANCING**

There is no direct net County cost associated with the closure of GCH's ED and General Acute Care Services. However, other hospitals in the County could be indirectly impacted if patients previously seen at GCH, or future patients that would have otherwise been treated at GCH, seek medical care at those hospitals.

## **FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

H&S Code Section 1255.1 requires hospitals to provide at least 90 days advance notice of any planned reduction or elimination of emergency medical services to the CDPH, the County, the healthcare service plans or other third party payers under contract with the hospital, and the Public. Public notice must be provided in a manner that is likely to reach a significant number of residents of the community served by the hospital.

In addition to providing public notice of the planned closure, H&S Code Section 1300 requires at least one public hearing to provide timely notice to stakeholders and the public so that alternate arrangements for care can be made, and to incorporate information from the hearing into the IER. For the County, the Board has appointed the Emergency Medical Services Commission (EMSC) to conduct the public hearing and the local EMS Agency to prepare the IER. The County is required to provide CDPH with the results of the IER within three days of its completion.

The required public hearing was conducted by the EMSC on July 17, 2019 from 5:30 p.m. to 6:00 p.m. at the La Fetra Senior Center in the City of Glendora. Notification of the closure and an invitation to attend the public hearing was widely disseminated throughout the community. Individuals and organizations were invited to participate in the public hearing and/or submit written testimony relevant to the proposed closure of GCH's ED and General Acute Care Services. Fourteen people attended the public hearing. Oral testimony was accepted from four individuals. The IER concludes that GCH serves the eastern San Gabriel Valley - primarily the City of Glendora, a northwest section of the City of San Dimas, and an eastern section of the City of Azusa. There are a total of five acute care facilities within ten miles of GCH. Of these five facilities, three are within five miles of GCH. As of this date, all of GCH's patients have been made aware of the facility's upcoming September 16, 2019 closure. Barring further developments, GCH will close its ED and General Acute Care Services on or before September 16, 2019.

## **CONTRACTING PROCESS**

Not applicable.

## **IMPACT ON CURRENT SERVICES (OR PROJECTS)**

The closure of GCH's ED and General Acute Care Services will have some negative impact on the community and the County's EMS system.

The Honorable Board of Supervisors

9/3/2019

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Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Christina R. Ghaly".

Christina R. Ghaly, M.D.

Director

CRG:am

Enclosures

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors  
Auditor-Controller  
Emergency Medical Services Agency

**IMPACT EVALUATION REPORT**  
on the Proposed Closure of  
GLENLORA COMMUNITY HOSPITAL'S EMERGENCY DEPARTMENT

**I. PURPOSE OF IMPACT EVALUATION**

On June 10, 2019, Glendora Community Hospital (GCH) notified the 5<sup>th</sup> District of the Los Angeles County Board of Supervisors regarding the planned closure of GCH's emergency department (ED) and general acute care services by September 16, 2019 (Exhibit I). The notification also indicated that GCH will maintain its 21 acute psychiatric inpatient beds and plans to add 23 acute psychiatric beds. Written notices were also provided to the Los Angeles County Emergency Medical Services (EMS) Agency (Exhibit II), the California Department of Public Health (Exhibit III), the City of Glendora City Council (Exhibit IV) and the Public (Exhibit V, VI, VII, VIII, IX). GCH made all the necessary notifications.

The purpose of this report is to assess the impact of the proposed closure of GCH's ED upon the community, including the impact on access to emergency care, the impact on services provided by surrounding hospitals, the impact on services provided by public and private EMS provider agencies, and the impact on local law enforcement agencies.

Following adoption by the Los Angeles County Board of Supervisors, the Impact Evaluation Report (IER) will be submitted to the State of California Department of Public Health (CDPH), in accordance with provisions of the Health and Safety Code (H&SC) Section 1300.

**II. SCOPE OF IMPACT EVALUATION**

The required scope of the IER is set forth in H&SC 1300 (Exhibit X). The impact evaluation will consider:

1. Impact of the GCH ED closure on surrounding hospitals, including specialty and disaster services;
2. Impact of the GCH ED closure on prehospital EMS provider agencies, including public and private providers;
3. The impact of GCH's ED closure on the surrounding community;
4. Public Hearing Testimony, including received written correspondence

Compliance with public notification requirements as outlined in H&SC are monitored by the State Department of Health Services.

**III. IMPACT EVALUATION PROCESS**

California State Law (H&SC 1255 and 1300) places requirements upon general acute care hospitals related to downgrades and closures of emergency departments. Section 1255 outlines

the hospital's obligations to proper notification, and section 1300 imposes the completion of the IER upon counties. Hospital notification must be made to the CDPH, to the local government agency in charge of health services, to health plans under contract with the hospital, and to the public. This notification must be made as soon as possible but **not later than 90 days prior to the proposed reduction or elimination of emergency services**. Public notice must be provided in a manner likely to reach a significant number of residents of the community served by the hospital whose services are being reduced or downgraded.

Section 1300 requires that the counties conduct an IER to determine impacts, including but not limited to, an impact evaluation of the downgrade or closure upon the community, including community access to emergency care, and how that downgrade or closure will affect emergency services provided by other entities. The IER must include at least one public hearing and **must be completed within 60 days of notification** by the hospital. The IER must be submitted to the CDPH within three days of completion. In Los Angeles County, the Board of Supervisors has designated the EMS Commission as the body to conduct the required public hearing.

In accordance with Section 1300, the Los Angeles County EMS Agency has established the procedure to be followed if a general acute care hospital plans to downgrade or eliminate emergency services (Exhibit XI).

The IER of GCH's ED closure was prepared by the Los Angeles County EMS Agency. The required public hearing was conducted by the EMS Commission on July 17, 2019, from 5:30 pm to 6:00 pm at La Fetra Senior Center in the City of Glendora. Notification of the pending closure and an invitation to attend the public hearing was widely disseminated throughout the community. The City of Glendora's City Manager and the Glendora Police Department were notified and invited to participate in the public hearing and/or submit written testimony relevant to the proposed closure of GCH. 14 people attended the public hearing. Oral testimony was accepted from 4 individuals. No written statements were provided. Transcripts from the hearing are available for review.

Data used in the IER were obtained from the Rapid Emergency Department Digital Information Network (ReddiNet<sup>®</sup>) system, the Los Angeles County Trauma and Emergency Medicine Information System (TEMIS), GCH, interviews with surrounding hospitals; health care organizations, affected EMS provider agencies, law enforcement and the Department of Mental Health.

Preliminary statistical data were prepared by Los Angeles County EMS Agency for the EMS Commission to assist in its conduction of the public hearing. This final report, which includes the proceedings and findings of the public hearing, is submitted by the Department of Health Services to the Los Angeles County Board of Supervisors for adoption.

#### **IV. SUMMARY OF FINDINGS**

1. GCH filed the required notifications to close GCH as an acute care facility on or before September 16, 2019.
2. GCH serves the eastern San Gabriel Valley- primarily the City of Glendora, northwest section of the City of San Dimas, and eastern section of the City of Azusa. There are a total of five acute care facilities within ten miles of GCH. Of these five facilities, three are within five miles (Exhibit XII).

3. GCH's ED treated 6,124 patients in 2017, or approximately 17 patients per day.
4. GCH's ED received 775 patients transported by the LA County 9-1-1 system in 2017, or approximately 2 patients per day.
5. From an EMS perspective, the closure of GCH's ED will impact the residents of Glendora, northwest San Dimas and eastern Azusa. EMS provider agencies that will be impacted are Los Angeles County Fire Department and Care Ambulance Service. The closure of GCH's ED will have the following impact:
  - a. Longer travel times to reach emergency services.
  - b. Possible delays in obtaining prehospital emergency services as a result of longer out-of-service times for EMS personnel engaged in patient transports to more distant hospitals.
  - c. Loss of a community resource for disaster purposes.
  - d. Loss of 10 critical care beds.
  - e. Possible increased utilization of 9-1-1 by citizens who currently walk or drive to GCH.
6. The combined total number of emergency treatment stations in the 10-mile radius is 137 beds (does not include urgent care beds). The closure of GCH's ED would reduce the number by 4% to 131 treatment stations.
7. Hospital emergency visits to facilities within the 10-mile radius were 235,697 patients for 2017. This equals 1,720 patients per treatment station. The closure of GCH's ED would result in a ratio of 1,799 patients per treatment station (assuming patients currently seen at GCH would seek emergency care at one of the hospitals within the 10-mile radius (Exhibit XIII).
8. Patients with non-life-threatening illness or injury will most likely experience longer waiting times in the emergency departments of surrounding hospitals due to the closure of GCH's ED.
9. There are 51 licensed psychiatric beds within the 10-mile radius. GCH's licensed acute psychiatric beds account for 41% within this radius. GCH is currently undergoing construction with the plan to add 23 additional licensed psychiatric beds. This will increase the number of psychiatric beds within the 10-mile radius to 73. The increase in available licensed psychiatric beds will have a positive impact to the community's access to inpatient psychiatric services.
10. GCH is not an Emergency Department Approved for Pediatrics (EDAP). There will be no impact to children age 14 or younger in terms of 9-1-1 transports. The only children evaluated and cared for in the GCH ED would have been walk-ins.
11. GCH is not a designated trauma center. There will be no impact on patients that meet trauma center criteria or guidelines.

12. GCH is not a ST Elevation Myocardial Infarction (STEMI) Receiving Center. There will be no impact to 9-1-1 patients experiencing a STEMI.
13. GCH is not an Approved Stroke Center. There will be no impact to 9-1-1 patients experiencing a stroke.

## **V. RECOMMENDATIONS**

It is recommended that your Board take the following actions:

1. Advise the CDPH that closure of GCH's ED will have some negative impact upon the community.
2. Support the addition of psychiatric beds within the County, particularly in this geographic area of Glendora.
3. Instruct the EMS Agency to continue monitoring Ambulance Patient Offload Times (APOT) and work with the impacted hospitals to ensure that ambulances are released in a timely manner.
4. Ensure that GCH provides a public information campaign and outreach program to direct the public on the appropriate use of Urgent Cares in the impacted area.

## **VI. CONCLUSION**

Based on the above findings, the Los Angeles County EMS Agency concludes that:

1. GCH met the regulatory requirements of notification.
2. Closure of the emergency department and acute care beds at GCH will have some negative impact on access to, and delivery of, emergency medical services in Glendora, northwest San Dimas and east Azusa.



**EXHIBITS**

- Exhibit I Glendora Community Hospital Letter, Dated June 10, 2019 to 5<sup>th</sup> District of the Los Angeles County Board of Supervisors
- Exhibit II Glendora Community Hospital Letter, Dated June 18, 2019 to LA County Emergency Medical Services Agency
- Exhibit III Glendora Community Hospital Memorandum, Dated June 6, 2019 to California Department of Public Health
- Exhibit IV Glendora Community Hospital Letter, Dated June 6, 2019 to Glendora City Council
- Exhibit V Public Notice posted on Glendora Community Hospital's Entrances
- Exhibit VI Glendora Community Hospital's Online Public Notice
- Exhibit VII Glendora Community Hospital's Press Release
- Exhibit VIII Glendora Community Hospital's Public Notice Advertising Order Confirmation
- Exhibit IX Glendora Community Hospital Letter, Dated June 13, 2019 to Patients of Glendora Community Hospital
- Exhibit X California Health and Safety Code Section 1300
- Exhibit XI Los Angeles County Prehospital Care Policy Reference No. 222, Downgrade or Closure of 9-1-1 Receiving Hospitals or Emergency Medical Services
- Exhibit XII Map - Hospital within 5 and 10 miles of GCH
- Exhibit XIII Hospital Services within 10 miles of GCH
- Exhibit XIV Public Hearing Agenda
- Exhibit XV Public Hearing Attendee Sign-In Rosters



**June 10, 2019:** Notification letter sent to LA County Board of Supervisors (Attachment 3)

June 10, 2019

Supervisor Kathryn Barger  
Los Angeles County Supervisor, 5<sup>th</sup> District  
500 West Temple Street  
Room 869  
Los Angeles, CA 90012

**RE: Notice of closure of emergency room and general acute care services at Glendora Community Hospital**

Dear Ms. Barger:

Glendora Community Hospital is a 128 bed non-profit hospital that currently offers in-patient acute psychiatric services as well as general acute care services. The hospital is currently licensed for 107 general acute care beds and 21 acute psychiatric beds. The general acute care units are consistently underutilized and operate between 10 to 15 percent capacity while the acute psychiatric unit typically operates at full capacity. Construction is currently underway to add 23 acute psychiatric beds.

The purpose of this letter is to inform your office that emergency room services and all other general acute care services will be discontinued at Glendora Community Hospital on September 16, 2019. **The hospital will continue to provide the much needed in-patient acute psychiatric services.**

Specific information regarding the elimination of services is below.

**Description of Elimination of Services**

The hospital will close its general acute care services on September 16, 2019. This closure will include the elimination of the following departments and services:

- Emergency Department
- Surgical Services
- Coronary Care Unit: five beds
- General Acute Care: 67 beds
- Intensive Care Unit: five beds
- Perinatal Unit: 30 beds (Please note this unit is currently under construction and is being converted to 23 additional psychiatric beds.)
- Nuclear Medicine Service
- Occupational Therapy
- Physical Therapy

 **Glendora Community Hospital**

The hospital currently has 21 psychiatric beds and **will continue to provide in-patient psychiatric services** and move forward with the expansion of 23 additional psychiatric beds.

Personnel will be reduced by approximately 189 employees and will be considered for other opportunities within Prime Healthcare.

**Nearest Available Comparable Services**

The nearest three general acute care hospitals serve Medi-Cal and Medicare patients and are listed below.

Foothill Presbyterian Hospital  
250 South Grand Avenue  
Glendora, CA 91741  
*Located 0.8 miles from Glendora Community Hospital*

San Dimas Community Hospital 3.9  
1350 West Covina Boulevard  
San Dimas, CA 91733  
*Located 3.9 miles from Glendora Community Hospital*

Intercommunity Hospital  
210 West San Bernardino Road  
Covina, CA 91723  
*Located 4.3 miles from Glendora Community Hospital*

**Comments**

Interested parties may direct comments to the individuals listed below.

Parrish Scarboro, Chief Executive Officer  
Glendora Community Hospital  
150 West Route 66  
Glendora, CA 91740  
Phone: (909) 394-2729

Christopher Doan, Managing Associate General Counsel  
Prime Healthcare  
3300 E. Guasti Road  
Ontario, CA 91761  
(310) 259-4706



Please do not hesitate to contact me with any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Parrish Scarboro", written over a horizontal line.

Parrish Scarboro  
Chief Executive Officer  
Glendora Community Hospital

Enclosures: Correspondence dated April 4, 2019



# Glendora Community Hospital

June 18, 2019

Dear LA County Emergency Medical Services Agency,

Glendora Community Hospital will convert to an in-patient behavioral health facility to better address the growing demands for mental health services in Los Angeles County. Glendora Community Hospital currently operates the only in-patient geriatric psychiatric facility within an 18-mile radius in East San Gabriel Valley, providing a crucial safety net service to a vulnerable and growing population of seniors. The hospital intends to expand to 44 behavioral health beds as part of the conversion, with additional beds and services potentially added in the future.

This conversion to behavioral health will result in the closure of Glendora Community Hospital's general acute care services on September 16, 2019, including the elimination of the following departments and services:

- Emergency Department
- Surgical Services
- Coronary Care Unit: five beds
- General Acute Care: 67 beds
- Intensive Care Unit: five beds
- Perinatal Unit: 30 beds (Currently under construction and is being converted to 23 additional psychiatric beds)
- Nuclear Medicine Service
- Occupational Therapy / Physical Therapy

Glendora Community Hospital has many years of expertise in gero-psych services, and has built longstanding relationships with other local hospitals which routinely transport patients to the facility. It has developed a strong reputation as a premier provider of behavioral health services to senior constituents of your community.

California's senior population is growing and with it, the need for additional mental health services. UCLA projects the state's senior population to increase by 64 percent by 2035. In Los Angeles County, 4.3 percent of adults suffer from a serious mental illness, according to the California Healthcare Foundation, while statewide 62.8 percent of adults with mental illness did not receive mental health services between 2011 and 2015.

We are committed to offering continued inpatient psychiatric services, along with the inpatient psychiatric bed expansion at Glendora Community Hospital after the closure of the acute care services. Our commitment to quality care, safety and emergency preparedness requirements remains of highest importance. We respectfully request for your office's support and would continue to request participation in Hospital Preparedness Program or a similar program to assist us in maintaining our current level of emergency preparedness.

Maintaining an agreement and continued grant funding would assist us, as a nonprofit to continue to offer emergency management education to staff. Continued participation in the program would allow us to keep our decon team and paprs, ensuring mutual assistance to the community as described in our current statement of work.

Sincerely,



Parrish Scarboro  
Chief Executive Officer  
Glendora Community Hospital



June 6, 2019

Ms. Rose McDowall, MBA  
Staff Services Manager 1  
California Department of Public Health  
Centralized Applications Branch  
Licensing and Certification Program  
P.O. Box 997377, MS 3207  
Sacramento, CA 95899

**RE: Notice of closure of emergency room and general acute care services.**

Dear Ms. McDowall:

Glendora Community Hospital is a 128 bed non-profit hospital that currently offers in-patient psychiatric services as well as general acute care services. The hospital is currently licensed for 21 acute psychiatric beds and 107 general acute care beds. The hospital's 30 bed perinatal unit is currently under construction and will be converted to 23 additional psychiatric beds in approximately 18 months (OSHPD project number 2714006).

The information required by CDPH AFL 11-24 and Health and Safety Code Section 1255.1 and Section 1255.25 is below.

**Description of Elimination of Services**

The hospital will close its general acute care services on September 16, 2019. This closure will include the elimination of the following departments and services:

- Emergency Department
- Surgical Services
- Coronary Care Unit: five beds
- General Acute Care: 67 beds
- Intensive Care Unit: five beds
- Perinatal Unit: 30 beds (Please note this unit is currently under construction and is being converted to 23 additional psychiatric beds.)
- Nuclear Medicine Service
- Occupational Therapy
- Physical Therapy

The hospital currently has 21 psychiatric beds and **will continue to provide in-patient psychiatric services** and move forward with the expansion of 23 additional psychiatric beds.

Personnel will be reduced by approximately 189 employees.

 **Glendora Community Hospital**

Nearest Available Comparable Services

The nearest three general acute care hospitals serve Medi-Cal and Medicare patients and are listed below.

Foothill Presbyterian Hospital  
250 South Grand Avenue  
Glendora, CA 91741  
*Located 0.8 miles from Glendora Community Hospital*

San Dimas Community Hospital 3.9  
1350 West Covina Boulevard  
San Dimas, CA 91733  
*Located 3.9 miles from Glendora Community Hospital*

Intercommunity Hospital  
210 West San Bernardino Road  
Covina, CA 91723  
*Located 4.3 miles from Glendora Community Hospital*

Comments

Interested parties may direct comments to the individuals listed below.

Parrish Scarboro, Chief Executive Officer  
Glendora Community Hospital  
150 West Route 66  
Glendora, CA 91740  
Phone: (909) 394-2729

Christopher Doan, Managing Associate General Counsel  
Prime Healthcare  
3300 E. Guasti Road  
Ontario, CA 91761  
(310) 259-4706

Please feel free to contact me if need additional information or have questions.

Thank you.

Sincerely,



Parrish Scarboro  
Chief Executive Officer  
Glendora Community Hospital

 **Glendora Community Hospital**

June 6, 2019: Memo sent to Glendora City Council (Attachment 1)

**MEMORANDUM**

Date: June 6, 2019

To: Glendora City Council

From: Parrish Scarboro  
CEO

CC: Prime Healthcare Corporate Leadership

**RE: Glendora Community Hospital Conversion**

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Glendora Community Hospital (GLEN) has served residents in Los Angeles County for more than 60 years. With a mission to deliver compassionate, quality healthcare to patients and better healthcare to communities, we have always focused on the most important needs of our community. That will never change.

Today, Los Angeles County is facing a critical shortage of inpatient behavioral health services. At the same time, Glendora Community Hospital has developed an excellent reputation for our inpatient behavioral health services. This combination of factors has led us to make the decision to expand inpatient behavioral health services here at the hospital. As the only facility in the East San Gabriel Valley currently offering these services, our hospital provides a crucial safety net to a vulnerable and growing population of seniors.

The conversion to behavioral health, which includes adding an additional 23 beds, will result in the closing of our hospital's six-bed Emergency Department and all acute care services by mid-September. These critical decisions are not made lightly and require thoughtful discernment. Many of our valued employees will be affected by the hospital's conversion to behavioral health. The affected employees will be contacted directly, and will be offered outplacement services and considered for job openings at other Prime Healthcare hospitals.

Glendora Community Hospital has seen a yearly decline in the number of acute care patients, including emergency patients, and has been operating at between 10 to 15 percent capacity. The declining use of our hospital is likely related to the fact that there is an abundance of hospitals with acute care and emergency services in the area. GLEN is one of four acute care hospitals within a 4.2-mile radius, including Foothill Presbyterian Hospital, which is located less than a mile away from GCH. There are 11 acute care hospitals within a 15-mile radius.

Troubled by the lack of resources for psychiatric patients, the Los Angeles County Board of Supervisors recently directed the Department of Mental Health to develop a plan to increase the number of mental health beds in the county. Since 1995, the state has lost 37 psychiatric care facilities, either through the





elimination of psychiatric inpatient care or hospital closure. I'm proud of our hospital's strong reputation for caring for senior behavioral health patients and their families in times of need. This is due to the excellent care and service provided by our hospital's dedicated employees and physicians.

I will continue to keep you informed as we move through the process. If you have any questions, please reach out to your supervisor, and always know that my door is open.

# PUBLIC NOTICE

## Glendora Community Hospital will close its general acute care services on September 16, 2019.

This closure will include the elimination of the following departments and services:

- Emergency Department
- Surgical Services
- Coronary Care Unit: five beds
- General Acute Care: 67 beds
- Intensive Care Unit: five beds
- Perinatal Unit: 30 beds (Please note this unit is currently under construction and is being converted to 23 additional psychiatric beds)
- Nuclear Medicine Service
- Occupational Therapy
- Physical Therapy

The hospital currently has 21 psychiatric beds and will continue to provide in-patient psychiatric services and move forward with the expansion of 23 additional psychiatric beds.

### Nearest Available Comparable Services

The nearest three general acute care hospitals listed below offer comparable services and serve Medi-Cal and Medicare patients.

**Foothill Presbyterian Hospital**  
250 S. Grand Avenue  
Glendora, CA 91741  
*Located 0.8 miles from  
Glendora Community Hospital*

**Intercommunity Hospital**  
201 W. San Bernardino Road  
Covina, CA 91723  
*Located 4.3 miles from  
Glendora Community Hospital*

**San Dimas Community Hospital**  
1350 W. Covina Boulevard  
San Dimas, CA 91733  
*Located 3.9 miles from  
Glendora Community Hospital*

### Comments

Interested parties may direct comments to the individuals listed below.

**Parrish Scarboro**  
Chief Executive Officer  
Glendora Community Hospital  
150 W. Route 66  
Glendora, CA 91740  
909-394-2729

**Christopher Doan**  
Managing Associate General Counsel  
Prime Healthcare  
3300 E. Guasti Road  
Ontario, CA 91761  
310-259-4706

June 10, 2019: Public Notice Posted on Hospital Entrances (Attachment 2)



**Glendora  
Community Hospital**

150 W. Route 66, Glendora, CA 91740 | 626-852-5000

JUNE 10, 2019



Glendora Community Hospital, Main Entrance / Lobby



Glendora Community Hospital, Side Entrance



Glendora Community Hospital, Emergency Department Entrance



Glendora Community Hospital, Emergency Department Entrance

June 11, 2019: Press release posted to Glendora Community Hospital Website:

https://www.glendorahospital.com/News/2019/June/Glendorra-Community-Hospital-Plans-to-Convert-to-.aspx

(Attachment 4)

**Glendora Community Hospital Plans to Convert to In-Patient Behavioral Health Facility**

Glendora Community Hospital (GCH) today announced plans to expand behavioral health services at the hospital to address the growing need for acute psychiatric inpatient health care in Los Angeles County. This expansion, which is currently underway, will more than double the number of dedicated inpatient health beds at the hospital.

Glendora Community Hospital currently operates the only inpatient psychiatric psychiatric facility within its 15-mile radius in East San Gabriel Valley, providing a critical safety net services a vulnerable and growing population of patients. The hospital intends to expand its behavioral health beds as part of the expansion, with additional beds and services potentially added in the future.

"The demand for inpatient behavioral health care continues to grow, not just in East San Gabriel Valley but throughout the state," said Patrick Stachura, CEO of Glendora Community Hospital. "With our current behavioral health work frequently at capacity, converting the hospital to the best way to further serve the needs of the community."

Glendora Community Hospital is a nonprofit hospital owned and operated by the Prime Healthcare Foundation, part of the nationally recognized Prime Healthcare system.

Los Angeles County is in dire need of hospital beds for mental health care patients. Touted by the act of insurance for psychiatric patients, the Los Angeles County Board of Supervisors recently directed the Department of Mental Health to develop a plan to increase the number of mental health beds in the county.

"For the last long, the number of mental health hospital beds has declined, leaving a significant number of patients and their families without access to the appropriate level of care," said Los Angeles County Supervisor Jimmy Rogge. "That is why the Board of Supervisors has directed the L.A. County Department of Mental Health to work with us in creating additional inpatient health hospital beds. We believe it is the responsibility of mental health systems in Glendora Community Hospital, which are helping to address the critical need for our communities."

The national demand for inpatient psychiatric beds is 100,000 inpatient, Los Angeles County has only 22,7 beds. Since 1992, the state has lost 27 psychiatric care facilities, while through the elimination of inpatient care or hospital closures in Los Angeles County, 42 percent of acute inpatient beds in a mental health system, according to the California Healthcare Foundation, while inpatient beds 82.8 percent of acute inpatient beds did not receive mental health services between 2011 and 2015.

The conversion to inpatient health will result in the closing of the hospital's skilled nursing emergency department and all acute care services in mid-September. These services will continue to be available nearby in the Prime Healthcare hospital including San Gabriel Community Hospital, Glendora Hospital, Medical Center and Ohio Valley Medical Center. Specialty care doctors who practice at Glendora Community Hospital also plan to practice at other regional hospitals to continuity of patient care should not be disrupted. Employees whose positions are not included in the provided replacement services and/or opportunities to transfer to other job opportunities with Prime Healthcare hospitals.

GCH has seen a steady decline in the number of acute care patients, including emergency patients, with its acute care facilities operating at between 10 to 20 percent capacity. The declining use of GCH's acute care services is likely related to the fact that there is an abundance of acute care hospitals in the area.

GCH is one of four acute care hospitals within a 4.2-mile radius, including a hospital which is located less than a mile away from GCH. There are 31 acute care hospitals within a 15-mile radius of GCH, and 28 within a 25-mile radius, providing a total of 622 emergency room beds to serve the community's emergency needs.

Meanwhile, GCH has developed a strong reputation for its behavioral health services, which are widely recognized. Many patients are accepted at GCH for inpatient from nearby hospitals, in part due to the acute mental health system as an inpatient beds.

"Glendora Community Hospital is locally renowned for the care of acute behavioral health patients," said Dr. Chris Inoué, a Psychiatrist and Co-Honorary Director of Behavioral Health at GCH. "Coordination between behavioral health and primary care providers that includes a consistent exchange of information is very important at every point of the patient's journey, and leads to improved patient experience and quality care."

Public notices are being issued, and residents of the community will have 60 days to comment on the proposed conversion of Glendora Community Hospital.

**Original Here**

**Most Popular**

Prime Healthcare Foundation Announces Closing of East Valley Since 2014, Best Overall Glendora Community Hospital

The Joint Commission has recognized Prime Healthcare included as 2017 Hospital Quality Top Performers

Dr. Ruddy in Conversation with The Advisory Board's Managing Director, Inclusion

NATIONAL STUDY: Prime-Healthcare California Indicates Achieve ST Prime and a Specialty Superior Award for Inpatient Services

**Information Center**

- During Your Stay
- Treatment Plans
- Community Outreach
- Dive Resources
- My Chart - Patient Portal



**For Release**  
**June 11, 2019**

**June 11, 2019: Press release sent to 19 media sources (see attached list) (Attachment 5)**

Contact: Brianne Underwood  
Glendora Community Hospital Marketing and Communications  
909-305-5616

## Glendora Community Hospital Plans to Convert to In-Patient Behavioral Health Facility *Transition Addresses Growing Demand for Mental Health Services in Los Angeles County*

(GLENDDORA, CALIF – June 11, 2019) - Glendora Community Hospital (GCH) today announced plans to expand behavioral health services at the hospital to address the growing need for senior inpatient behavioral health care in Los Angeles County. The expansion, which is currently underway, will more than double the number of dedicated behavioral health beds at the hospital.

Glendora Community Hospital currently operates the only in-patient geriatric psychiatric facility within an 18-mile radius in East San Gabriel Valley, providing a crucial safety net service to a vulnerable and growing population of seniors. The hospital intends to expand to 44 behavioral health beds as part of the conversion, with additional beds and services potentially added in the future.

“The demand for in-patient behavioral health care continues to grow, not just in East San Gabriel Valley but throughout the state,” said Parrish Scarborough, CEO of Glendora Community Hospital. “With our current behavioral health unit frequently at capacity, converting the hospital is the best way to further serve the needs of the community.”

Glendora Community Hospital is a non-profit hospital owned and operated by the Prime Healthcare Foundation, part of the nationally recognized Prime Healthcare system.

Los Angeles County is in dire need of hospital beds for mental health care patients. Troubled by the lack of resources for psychiatric patients, the Los Angeles County Board of Supervisors recently directed the Department of Mental Health to develop a plan to increase the number of mental health beds in the county.

“For far too long, the number of mental health hospital beds has dwindled, leaving a significant number of patients and their families without access to the appropriate level of care,” said Los Angeles County Supervisor Kathryn Barger. “That is why the Board of Supervisors has directed the L.A. County Department of Mental Health to draft a plan for creating additional mental health hospital beds. We





## Glendora Community Hospital

welcome efforts like the expansion of mental health beds at Glendora Community Hospital, which are helping to address this critical need for our communities.”

The national target is a minimum of 50 psychiatric beds per 100,000 residents; Los Angeles County has only 22.7 beds. Since 1995, the state has lost 37 psychiatric care facilities, either through the elimination of psychiatric in-patient care or hospital closure. In Los Angeles County, 4.3 percent of adults suffer from a serious mental illness, according to the California Healthcare Foundation, while statewide 62.8 percent of adults with mental illness did not receive mental health services between 2011 and 2015.

The conversion to behavioral health will result in the closing of the hospital’s six-bed Emergency Department and all acute care services in mid-September. These services will continue to be available nearby in other Prime Healthcare hospitals including San Dimas Community Hospital, Montclair Hospital Medical Center and Chino Valley Medical Center. Specialty care doctors who practice at Glendora Community Hospital also generally practice at other regional hospitals, so continuity of patient care should not be disrupted. Employees whose positions may be eliminated will be provided outplacement services and given opportunities to transfer to other job openings with Prime Healthcare’s hospitals.

GCH has seen a yearly decline in the number of acute care patients, including emergency patients, with its acute care facilities operating at between 10 to 15 percent capacity. The declining use of GCH’s acute care services is likely related to the fact that there is an abundance of acute care hospitals in the area. GCH is one of four acute care hospitals within a 4.2-mile radius, including a hospital which is located less than a mile away from GCH. There are 11 acute care hospitals within a 15-mile radius of GCH, and 26 within a 25-mile radius, providing a total of 625 emergency room beds to serve the community’s emergency needs.

Meanwhile, GCH has developed a strong reputation for its behavioral health services, which are under increasing demand. Many patients are accepted at GCH on referral from nearby hospitals, which don’t treat severe mental health patients on an inpatient basis.

“Glendora Community Hospital is locally preferred for its care of senior behavioral health patients,” said Dr. Cyrus Nasserian, a psychiatrist and Co-Medical Director of Behavioral Health at GCH. “Coordination between behavioral health and primary care providers that includes a constant exchange of information is very important at every point of the patient’s journey, and leads to improved patient experience and quality care.”

Public notices are being issued, and members of the community will have 90 days to comment on the proposed conversion of Glendora Community Hospital.

###

***About Glendora Community Hospital:*** Built in 1958, Glendora Community Hospital is a not-for-profit community hospital serving the community with quality care. Glendora’s team of employees, physicians and other clinicians work together to deliver a compassionate patient experience for everyone. For more information, visit <https://www.glendorahospital.com/>

A		B		C		D		E		F		G	
First Name	Last Name	Title	Sources	Email Address	Phone Number	Beats							
1	Terry	Assignment Editor - Weekends	CBS2/KCAL9 News	tmdoyle@cbs.com	(818) 655-2299								
2	Alex	Field Reporter - Inland Empire	Channel 4 News	alex.vasquez@nbcuni.com	(626) 378-3604								
3	Joshua	Reporter	Chino Champion Newspapers	ithompson@championnewspapers.com									
4	Matthew	City Reporter	Claremont Courier	news@claremont-courier.com	(909) 621-4761	Local news, Regional news							
5	Hector	Reporter	Highland Community News	reporter@highlandnews.net	(909) 862-1771 x27	Current affairs, Local news, Regional news							
6	Maryjoy	Managing Editor	Inland Empire Community News	editor@iecn.com	(909) 381-9898 x 207	Current affairs, Local news, Regional news							
7	Jeanne	Editor	Inland Empire Magazine	jeanne@iemag.biz	(951) 682-3026 x233	Regional interest, Regional news, Restaurants & Gastronomy, Lifestyle							
8	Robert	Journalist, Reporter	Inland Valley Daily Bulletin	rgundran@scng.com	(951) 368-9460	Crime, Local news							
9	Cindy	Host	KOLA-FM, Triton Digital	garv@kolafm.com	(909) 798-5600	Local news, Music (general), Regional interest, Entertainment (general)							
10	Assignment	Desk	KTLA News	ktla@ktla.com									
11	Rick	Assignment Desk	KVCR-FM	rdulock@kvcr.org	(909) 384-4444	Local news, Regional news							
12	Ben	Program Director	KVCR-TV	bholland@kvcr.org	(909) 384-4444	Local news, Regional news							
13	Ben	Holland	KVCR-TV	bholland@kvcr.org	(909) 384-4444	Local news, Regional news							
14	Abel	Alamillo	KVEA-TV - Telemundo Los Angeles	abel.alamillo@nbcuni.com	(818) 260-5711	Local news, Regional news							
15	Sandra	Emerson	Los Angeles News Group, San Bernardino County	semerison@scng.com	(626) 422-4305	Broadcasting, Current affairs, Local news, Regional news							
16	Heidi	Fron	Mountain News	HFront@mountain-news.com	(909) 337-6145 x 228	Local news, Regional interest, Wildlife							
17	Tina	Journalist, Freelance Writer	San Bernardino County Sun	news@pe.com	(951) 368-9460	Local news, Regional news							
18	Alberto	Mendez	KTLA-TV	alberto.mendez@ktla.com	(323) 460-5500	Food industry, Restaurants & Gastronomy, Wine, Lifestyle							
19	Martin	Plascencia	KVEA-TV - Telemundo Los Angeles	martin.plascencia@nbcuni.com	(818) 260-5720	Local news, Regional news							
20	Telemundo		KVEA-TV Telemundo	telemundo.losangeles@nbcuni.co	(818) 684-5711	Local news, Regional news							

June 13, 2019: Notice to run in the Inland Valley Public Bulletin (Attachment 6)

# Advertising Order Confirmation

Ad Number: 0011281430-01  
Ad Size: 4 X 85 Li

Color

Production Color

Ad Attributes

Production Method: AdBooker

Production Notes

External Ad Number

Pick Up

Ad Type: Legal Liner

Released for Publication

# PUBLIC NOTICE

## Glendora Community Hospital will close its general acute care services on September 16, 2019.

This closure will include the elimination of the following departments and services:

- Emergency Department
- Surgical Services
- Coronary Care Unit: five beds
- General Acute Care: 67 beds
- Intensive Care Unit: five beds
- Perinatal Unit: 30 beds (Please note this unit is currently under construction and is being converted to 23 additional psychiatric beds)
- Nuclear Medicine Service
- Occupational Therapy
- Physical Therapy

The hospital currently has 21 psychiatric beds and will continue to provide in-patient psychiatric services and move forward with the expansion of 23 additional psychiatric beds.

### Nearest Available Comparable Services

The nearest three general acute care hospitals listed below offer comparable services and serve Medi-Cal and Medicare patients.

**Foothill Presbyterian Hospital**  
250 S. Grand Avenue  
Glendora, CA 91741  
Located 0.8 miles from  
Glendora Community Hospital

**San Dimas Community Hospital**  
1350 W. Covina Boulevard  
San Dimas, CA 91733  
Located 1.5 miles from  
Glendora Community Hospital

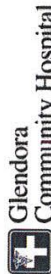
**Intercommunity Hospital**  
201 W. San Bernardino Road  
Covina, CA 91723  
Located 4.3 miles from  
Glendora Community Hospital

### Comments

Interested parties may direct comments to the individuals listed below.

**Parish Scarboro**  
Chief Executive Officer  
Glendora Community Hospital  
150 W. River Road  
Glendora, CA 91740  
909-394-2729

**Christopher Doan**  
Managing Associate General Counsel  
Prime Healthcare  
3300 E. Guasti Road  
Ontario, CA 91761  
310-259-4706



150 W. River 66, Glendora, CA 91740 | 626-852-5000  
**Published: June 13, 2019**    **Inland Valley Daily Bulletin**    **Ad#11281430**    **JUNE 10, 2019**

Product: Daily Bulletin

Requested Placement: Legals CLS IVDB LA

Requested Position: General LA - 1076~

Run Dates: 06/13/19

# Inserts: 1

# Advertising Order Confirmation

<u>Ad Order Number</u> 0011281430	<u>Customer</u> PRIME HEALTHCARE	<u>Pavor Customer</u> PRIME HEALTHCARE	<u>PO Number</u>
<u>Sales Representative</u> Mikki Almeida	<u>Customer Account</u> 5258572	<u>Pavor Account</u> 5258572	<u>Ordered By</u> ARACELI
<u>Order Taker</u> Mikki Almeida	<u>Customer Address</u> 3300 E. GUASTI ROAD ONTARIO, CA 91761	<u>Pavor Address</u> 3300 E. GUASTI ROAD ONTARIO, CA 91761	<u>Customer Fax</u>
<u>Order Source</u> Select Source	<u>Customer Phone</u> 909-987-3582	<u>Pavor Phone</u> 909-987-3582	<u>Customer EMail</u>
<u>Current Queue</u> Ready	<u>Invoice Text</u>		
<u>Tear Sheets</u> 0	<u>Affidavits</u> 0	<u>Blind Box</u>	<u>Special Pricing</u>
		<u>Materials</u>	
		<u>Promo Type</u>	



# Glendora Community Hospital

June 13, 2019: Notice distributed to general acute care in-patients (Attachment 7)

June 13, 2019

Dear Patient of Glendora Community Hospital,

Glendora Community Hospital will close its general acute care services on September 16, 2019. This closure will include the elimination of the following departments and services:

- Emergency Department
- Surgical Services
- Coronary Care Unit: five beds
- General Acute Care: 67 beds
- Intensive Care Unit: five beds
- Perinatal Unit: 30 beds (Please note this unit is currently under construction and is being converted to 23 additional psychiatric beds)
- Nuclear Medicine Service
- Occupational Therapy
- Physical Therapy

The hospital currently has 21 psychiatric beds and will continue to provide in-patient psychiatric services and move forward with the expansion of 23 additional psychiatric beds.

The nearest three general acute care hospitals listed below offer comparable services and serve Medi-Cal and Medicare patients.

**Foothill Presbyterian Hospital**

250 S. Grand Avenue  
Glendora, CA 91741  
Located 0.8 miles from  
Glendora Community Hospital

**Intercommunity Hospital**

201 W. San Bernardino road  
Covina, CA 91723  
Located 4.3 miles from  
Glendora Community Hospital

**San Dimas Community Hospital**

1350 W. Covina Boulevard  
San Dimas, CA 91733  
Located 3.9 miles from  
Glendora Community Hospital

Interested parties may direct comments to the individuals listed below.

**Parrish Scarboro**

**Chief Executive Officer**  
Glendora Community Hospital  
150 W. Route 66  
Glendora, CA 91740  
(909) 374-2729

**Christopher Doan**

**Manager Associate Generical Counsel**  
Prime Healthcare  
3300 E. Guasti Road  
Ontario, CA 91761  
(310) 259-4706

**CALIFORNIA HEALTH AND SAFETY CODE SECTION 1300**

**1300.** (a) Any licensee or holder of a special permit, may with the approval of the state department, surrender his or her license or special permit for suspension or cancellation by the state department. Any license or special permit suspended or canceled pursuant to this section may be reinstated by the state department on receipt of an application showing compliance with the requirements of Section 1265.

(b) Before approving a downgrade or closure of emergency services pursuant to subdivision (a), the state department shall receive a copy of the impact evaluation of the county to determine impacts, including, but not limited to, an impact evaluation of the downgrade or closure upon the community, including community access to emergency care, and how that downgrade or closure will affect emergency services provided by other entities. Development of the impact evaluation shall incorporate at least one public hearing. The county in which the proposed downgrade or closure will occur shall ensure the completion of the impact evaluation, and shall notify the state department of results of an impact evaluation with three days of the completion of that evaluation. The county may designate the local emergency medical services agency as the appropriate agency to conduct the impact evaluation. The impact evaluation and hearing shall be completed within 60 days of the county receiving notification of intent to downgrade or close emergency services. The County or designated local emergency medical services agency shall ensure that all hospital and prehospital health care providers in the geographic area impacted by the service closure or changes are consulted with, and that local emergency service agencies and planning or zoning authorities are notified, prior to completing an impact evaluation as required by this section. This subdivision shall be implemented on and after the date that the county in which the proposed downgrade or closure will occur, or its designated local emergency medical services agency, has developed a policy specifying the criteria it will consider in conducting an impact evaluation, as required by subdivision (c).

(c) The Emergency Medical Services Authority shall develop guidelines for development of impact evaluation policies. On or before June 30, 1999, each county or its designated local emergency medical services agency shall develop a policy specifying the criteria it will consider in conducting an impact evaluation pursuant to division (b). Each county or its designated local emergency medical services agency shall submit its impact evaluation policy to the state department and the Emergency Medical Services Authority within three days of completion of the policy. The Emergency Medical Services Authority shall provide technical assistance upon request to a county or its designated local emergency medical services agency.

SUBJECT: **DOWNGRADE OR CLOSURE OF 9-1-1  
RECEIVING HOSPITALS OR EMERGENCY  
MEDICAL SERVICES**

REFERENCE NO. 222

PURPOSE: To establish a procedure to be followed if a general acute care or psychiatric facility plans to downgrade or eliminate emergency medical services or close the hospital completely.

AUTHORITY: California Code of Regulations 70105(a), 70107(a), 70107(a)(12), 70351(a), 70351(b)(1), 70351(b)(5), 70367(a)  
Health and Safety Code, Sections 1255.1, 1255.2, 1255.25, 1300

PRINCIPLES:

1. Hospitals with a basic or comprehensive emergency department permit provide a unique service and an important link to the community in which they are located. In certain instances, the reduction or withdrawal of these services may have a profound impact on the emergency medical services (EMS) available in their area and to the community at large.
2. Every effort should be made to ensure that essential emergency medical services are continued until emergency care can be provided by other facilities or until EMS providers can adjust resources to accommodate anticipated needs.
3. Before any changes are finalized, the Emergency Medical Services Agency should have sufficient time and opportunity to develop an EMS Impact Evaluation Report (IER) that examines the closure's affect on the community.
4. Before approving a downgrade or closure of emergency services, the California State Department of Public Health (Department) shall receive a copy of the IER to determine the expected impact of the changes, including access to emergency care and the affect of the closure on emergency services provided by other entities.


PROCEDURE:

- I. Responsibilities of the Health Facility Proposing the Downgrade or Closure
  - A. Not less than 30 days prior to closing a health facility, the facility shall provide public notice of the proposed downgrade or elimination of emergency services. Public notice shall include:
    1. A notice posted at the entrance to all affected facilities.
    2. A notice to the local government entity in charge of the provision of health services and the Board of Supervisors of the county in which the health facility is located.

EFFECTIVE: 06-30-99  
REVISED: 01-01-17  
SUPERSEDES: 07-01-13

PAGE 1 OF 4

APPROVED:

  
Director, EMS Agency

  
Medical Director, EMS Agency

3. The California State Department of Public Health, Licensing and Certification Division.
  4. All health care service plans.
  5. Other entities under contract with the hospital that provide services to enrollees.
- B. The required notice shall include:
1. A description of the proposed downgrade or elimination.
  2. The description shall be limited to publicly available data, including the number of beds eliminated, if any, the probable decrease in the number of personnel, and a summary of any service that is being eliminated, if applicable.
  3. A description of the three nearest available comparable services in the community. If the health facility closing these services serves Medi-Cal or Medicare patients, the health facility shall specify if the providers of the nearest available comparable services serve these patients.
  4. A telephone number and address for each of the following where interested parties may offer comments:
    - a. The health facility.
    - b. The parent entity, if any, or contracted company, if any, that acts as the corporate administrator of the health facility.
    - c. The chief executive officer.
  5. The notice shall be provided in a manner that is likely to reach a significant number of community residents serviced by the facility.
  6. It shall be provided within the 30-day time frame specified in Section I.
  7. The facility should make reasonable efforts at public notice including, but not limited to:
    - a. Advertising the change in terms easily understood by a layperson.
    - b. Soliciting media coverage regarding the change.
    - c. Informing patients of the facility of the impending change.
    - d. Notifying contracting health care service plans.
  8. This does not apply to county facilities subject to Health & Safety Code Section 1442.5.



- C. A hospital is not subject to the above if the Department:
  - 1. Determines that the use of resources to keep the emergency department (ED) open substantially threatens the stability of the hospital as a whole.
  - 2. Cites the ED for unsafe staffing practices.
- II. Responsibilities of the Local EMS Agency
  - A. Develop an IER in consultation with impacted hospitals and 9-1-1 providers.
    - 1. Include, at minimum, the following evaluation criteria:
      - a. The hospital's geographic proximity to other facilities within a five- and ten-mile radius.
      - b. The annual number of 9-1-1 basic life support (BLS) and advanced life support (ALS) transports.
      - c. The number of ED treatment stations and total emergency department volume.
      - d. The number of paramedic contacts per month if the hospital is a paramedic base.
      - e. The number of trauma patients received per month if the hospital is a trauma center.
      - f. A list of the services provided by the hospital and the surrounding facilities (Emergency Department Approved for Pediatrics, burn, perinatal, STEMI Receiving Center, PMC/PTC, Disaster Resource Center, Approved Stroke Center).
      - g. The average emergency department diversion of surrounding facilities.
  - B. Conduct at least one public hearing if the service being downgraded or closed is the facility's emergency department. The public hearing shall be conducted by the Emergency Medical Services Commission (EMSC).
    - 1. The EMSC may hold the public hearing at their normally scheduled meeting or convene a special meeting at the request of the Director of the EMS Agency.
    - 2. The hearing shall be held within 30 days following notification of the intent to downgrade or close services.
  - C. Notify planning or zoning authorities of the proposed downgrade or closure so that street signage can be removed.
  - D. Reconfigure the EMS system as needed.
    - 1. If the EMS Agency determines that the downgrade or closure of a hospital ED will significantly impact the EMS system, the Agency shall:
      - a. Determine the reason(s) a hospital has applied to do so, and

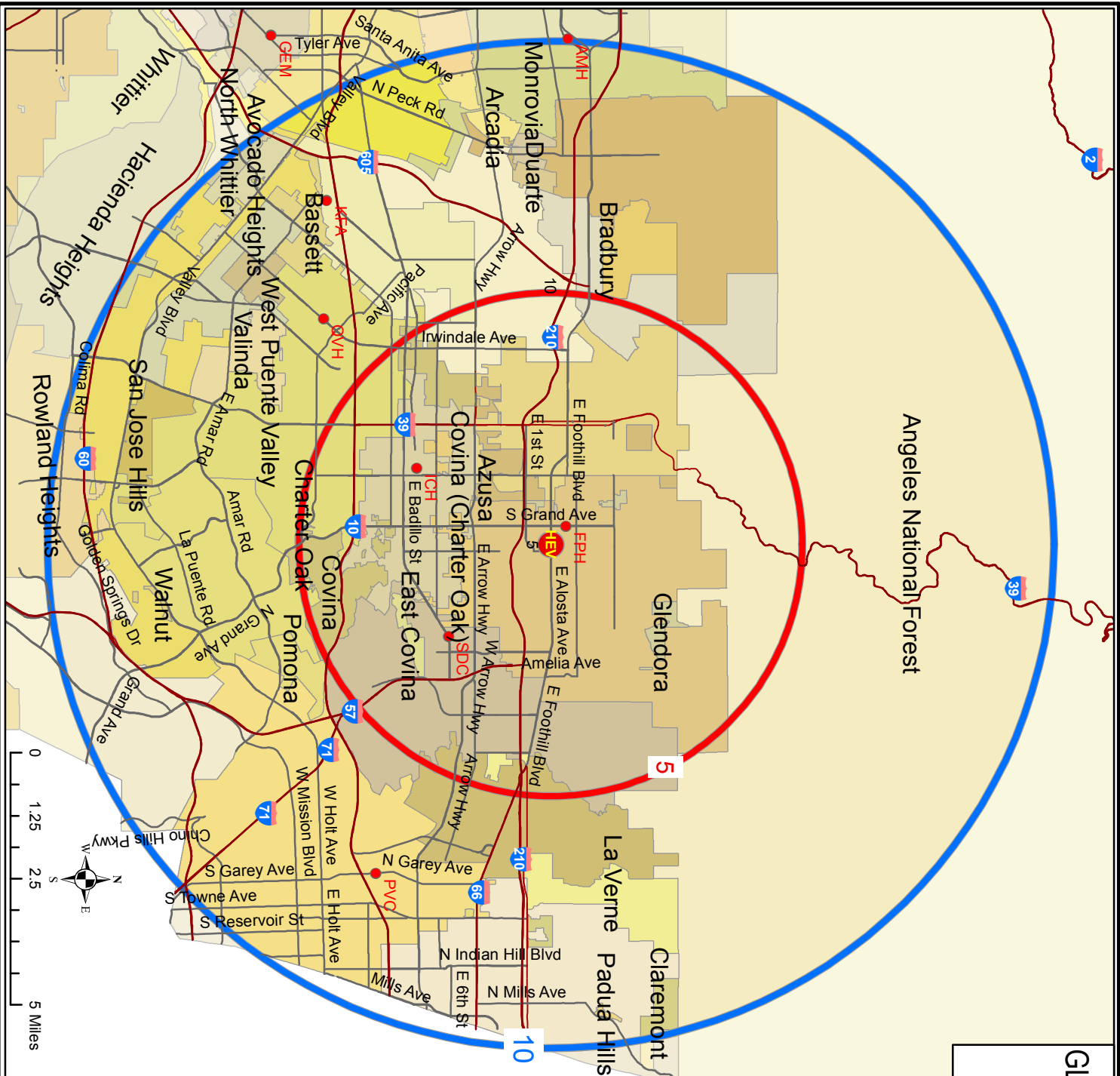
- b. Determine whether any system changes may be implemented to maintain the hospital service within the system, or
    - c. Develop strategies to accommodate the loss of the ED or other identified specialized service to the system.
  - E. Forward the IER to the Board of Supervisors for adoption.
  - F. Forward the IER to the Department within three days of its adoption by the Board of Supervisors and within 60 calendar days after the initial notification from hospital of the proposed downgrade or closure.
- III. Following receipt of the IER, Department shall notify the hospital, in writing, of its decision regarding the application to downgrade or close emergency services or the facility.

CROSS REFERENCES:

Prehospital Care Manual:

Reference No. 206, **Emergency Medical Services Commission Ordinance No. 12332-  
Chapter 3.20 of the Los Angeles County Code**

**GLENDORA COMMUNITY HOSPITAL**  
 and Surrounding 9-1-1 Hospitals  
 within 5 and 10 Miles Radius



**9-1-1 Receiving Hospitals near Glendora Hospital**

Code	Hospital Name
FPH	Emanate Health Foothill Presbyterian Hospital
HEV	Glendora Community Hospital
ICH	Emanate Health Inter-Community Hospital
KFA	Kaiser Foundation Hospital - Baldwin Park
PVC	Pomona Valley/Hospital Medical Center
QVH	Emanate Health Queen of the Valley Hospital
SDC	San Dimas Community Hospital



## HOSPITAL SERVICES WITHIN 10 MILES OF GLENDORA COMMUNITY HOSPITAL      EXHIBIT XIII

Licensed Beds	Emergency Dept.	General Acute	Critical Care	Psychiatric	Other Specialty Services
<b>GLENDORA COMMUNITY HOSPITAL</b>	6	67	10	21	Adding an additional 23 in-patient psychiatric beds
Emanate Health Foothill Presbyterian Hospital (0.7 miles)	22	74	18		
San Dimas Community Hospital (3.8 miles)	8	86	8		
Emanate Health Inter-Community Hospital (4.4 miles)	17	116	22	30	ST-Elevation Myocardial Infarction Center (SRC)
Emanate Health Queen of the Valley Hospital (9.4 miles)	24	195	18		Primary Stroke Center, Sexual Assault Response Team (SART) Emergency Department Approved for Pediatrics (EDAP)
Pomona Valley Hospital Medical Center (9.6 miles)	60	191	50		Trauma Center, ST-Elevation Myocardial Infarction Center (SRC), Comprehensive Stroke Center (CSC), Emergency Department Approved for Pediatrics (EDAP), Sexual Assault Response Team (SART)

Mileage determined by driving distance from Google maps



**COUNTY OF LOS ANGELES  
EMERGENCY MEDICAL SERVICES COMMISSION**

10100 Pioneer Boulevard, Suite 200, Santa Fe Springs, CA 90670  
(562) 347-1604 FAX (562) 941-5835  
<http://ems.dhs.lacounty.gov/>

**LOS ANGELES COUNTY  
BOARD OF SUPERVISORS**

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**Mark Ridley-Thomas**  
Second District

**Sheila Kuehl**  
Third District

**Janice Hahn**  
Fourth District

**Kathryn Barger**  
Fifth District

**COMMISSIONERS**

**Ellen Alkon, M.D.**

*Southern California Public Health Assn.*

**Lt. Brian S. Bixler**

*Peace Officers Association of LA County*

**Erick H. Cheung, M.D.**

*Southern CA Psychiatric Society*

**Chief Eugene Harris**

*Los Angeles County Police Chiefs' Assn.*

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*American College of Surgeons*

**James Lott, PsyD., MBA**

*Public Member (2<sup>nd</sup> District)*

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*LA County Ambulance Association*

**Margaret Peterson, Ph.D.**

*Hospital Association of Southern CA*

**Paul S. Rodriguez**

*CA State Firefighters' Association*

**Nurses Sanossian, MD, FAHA**

*American Heart Association*

*Western States Affiliate*

**Carole A. Snyder, RN**

*Emergency Nurses Association*

**Mr. Joseph Salas, Vice-Chairman**

*Public Member (1<sup>st</sup> District)*

**Atilla Uner, MD**

*California Chapter-American College of*

*Emergency Physicians (CAL-ACEP)*

**Mr. Gary Washburn**

*Public Member (5<sup>th</sup> District)*

**Chief David White**

*Los Angeles Area Fire Chiefs Association*

**Pajmon Zarrineghbal**

*Public Member (4<sup>th</sup> District)*

**VACANT**

*League of Calif. Cities/LA County Division*

*LA County Medical Association*

**Cathy Chidester**

*Executive Director*

*(562) 378-1604*

[Cchidester@dhs.lacounty.gov](mailto:Cchidester@dhs.lacounty.gov)

**Denise Watson**

*Secretary, Health Services Commission*

*(562) 378-1606*

[Dwatson@dhs.lacounty.gov](mailto:Dwatson@dhs.lacounty.gov)

**PUBLIC HEARING ON IMPACT OF THE CLOSURE OF  
GLENORA COMMUNITY HOSPITAL'S  
EMERGENCY DEPARTMENT UPON  
EMERGENCY MEDICAL SERVICES**

**JULY 17, 2019**

**AGENDA**

- 1. Call to Order and Introductory Remarks:**  
  
*Dr. John Hisserich, Chairman*  
  
*Emergency Medical Services Commission*
- 2. Presentation: Glendora Community Hospital**
- 3. Presentation: Emergency Medical Services Agency**
- 4. Presentation: Los Angeles County Fire Department**
- 5. Presentation: Care Ambulance**
- 6. Testimony: Elected Public Officials (or designee)**
- 7. Testimony: Professional Healthcare Organizations/  
Providers**
- 8. Testimony: Public Members/Community Groups**
- 9. EMSC Comments**
- 10. Closing Remarks**

**EMERGENCY MEDICAL SERVICES COMMISSION – PUBLIC HEARING**  
**GLENDORA COMMUNITY HOSPITAL ~ Pending Closure of General Acute Care Services**  
 July 17, 2019 – 5:30 pm to 8:00 pm  
 La Fetra Senior Center, 333 E. Foothill Boulevard, Glendora, CA 91741

PLEASE NOTE: The Commission meetings are open to the public. Sign-in is **OPTIONAL** unless you wish to address the Commission. You may address the Commission on any agenda item before or during consideration of that item, and on other items of interest which are not on the agenda, but which are within the subject matter jurisdiction of the Commission.

Name (Please Print)	Organization	E-Mail
Stacy Timothy	Public	
Elizabeth Ike	Glendora Community Hospital	eike@primehealthcare.com
Abelle Walsh-Rubio	Glendora Community	NRUBIO@primehealthcare.com
Bill Westros	CARE AMBULANCE	
Michael Collette	GCH	
Leona Olvera	VP - Ben Heath-Prime	toruvala@primehealthcare.com
Fred Ortega	Govt Relations Prime Healthcare	fortega@primehealthcare.com
Wesley Thompson	CST of Care Center	
Les - J-1	San Dimas Hospital	<del>les@sdh.com</del>

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Name (Please Print)	Organization	E-Mail
Branne Underwood	Glendora Hospital	Brunnerwood Prime Healthcare.com

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