



MINUTES OF THE BOARD OF SUPERVISORS  
COUNTY OF LOS ANGELES, STATE OF CALIFORNIA

Sachi A. Hamai, Executive Officer-  
Clerk of the Board of Supervisors  
383 Kenneth Hahn Hall of Administration  
Los Angeles, California 90012

At its meeting held June 26, 2007, the Board took the following action:

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Dr. Bruce A. Chernof, Director of Health Services, presented the attached report relating to contingency plans, including the Emergency Room services, to ensure the County's continued provision of appropriate health care and emergency services to the community in the event that Martin Luther King, Jr.-Harbor Hospital is unsuccessful in meeting federal standards within the designated timeframe.

After discussion, Supervisor Knabe made the following statement:

"The evidence is clear. Despite great effort to improve, the emergency department care at Martin Luther King, Jr.-Harbor Hospital (MLK-Harbor) is unacceptably poor. The risk to the safety of patients is intolerable. For that reason alone, until and unless someone can come up with a way to immediately fix it, this Board must act expeditiously to discontinue emergency and hospital services there and find safer places for the patients.

"However, this must be planned carefully and implemented flawlessly, for we all know how fragile the emergency and hospital care system is, especially in south Los Angeles. To do otherwise is to risk even greater harm to the patients we are seeking to protect. That is why I ask my colleagues to consider postponing the decision to close MLK-Harbor's emergency and hospital services three weeks from now. This will allow the Chief Administrative Officer and Director of Health Services time to present us with a detailed implementation plan, timetable and impact analysis, all vetted by independent expert health planners. This is what the Board needs to make a sound and wise decision, which truly protects the patients we serve.

"This is not to suggest that immediate action be avoided. The elements of the DHS contingency plan that can be done safely should begin immediately. This includes the diversion of 9-1-1 paramedic transport patients away from MLK-Harbor to surrounding emergency rooms whenever it may safely be done.

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“We should also immediately begin the steps necessary to open additional ICU and Medical-Surgical beds at Rancho and Harbor-UCLA and to start negotiating terms for the purchase of additional services from surrounding hospitals.

“What we should not do today is vote to eliminate hospital services at MLK-Harbor. This consideration should occur in three weeks when we will have before us an implementation plan which details the availability of alternate service sites, and an impact analysis which shows whether the community’s emergency care and hospital system can safely absorb MLK-Harbor’s workload. The contingency plan outline before us lacks these specifics.

“I therefore, move that the Board of Supervisors approve the following:

1. Authorize and instruct the Chief Administrative Officer (CAO) and the Director of Health Services (DHS) to immediately activate those parts of the DHS contingency plan outline, which will serve to safely reduce the patient load in MLK-Harbor’s emergency department. This includes, but is not limited to, diverting 9-1-1 ambulance transports away from MLK-Harbor in a manner that is determined by the County’s Emergency Medical Services Agency to be safe;
2. Request that the CAO, in consultation with DHS, to return in three weeks with a detailed implementation plan, timetable and impact analysis to discontinue hospital services at MLK-Harbor Medical Center;
3. Instruct the CAO to immediately identify and contract with independent health planning specialists to review and consult with DHS on the implementation plan, timetable and impact analysis, and to provide the Board and CAO with an expert second opinion on the feasibility and safety of the implementation plan;
4. Instruct the CAO to:
  - a) Provide a financial analysis of the implementation plan; and

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- b) A list and assessment of the options available to best reestablish hospital services at MLK-Harbor through privately contacted operations, transfer or sale of the facility; and
5. Instruct the Executive Officer of the Board to place on the Board's July 17, 2007 agenda as a set item, consideration of the implementation plan, impact analysis and financial analysis for discontinuing hospital services at MLK-Harbor, the list and assessment of the best options available to reopen those services later through contract operation, transfer or sale."

Supervisor Burke made a suggestion that Supervisor Knabe's motion be amended to include the following:

2. Request that the Chief Administrative Officer, in consultation with the Director of Health Services, to return in two weeks with a detailed implementation plan, timetable and impact analysis to discontinue hospital services at MLK-Harbor Medical Center, should the Hospital fail to meet the Centers for Medicare & Medicaid Services' (CMS) conditions of participation; and/or should the Board be required to close the Hospital in the interest of patient safety; and
6. Instruct the Chief Administrative Officer and Director of Health Services to continue to take action as necessary to meet the licensure requirements of the State of California and to successfully complete the CMS survey.

Further, Supervisor Yaroslavsky made a suggestion that Supervisor Knabe's motion be amended as follows:

1. Amend Recommendation No. 3 to read:

~~Instruct~~ Authorize the Chief Administrative Officer (CAO) to ~~immediately~~ identify and contract with independent health planning specialists to review and consult with the Director of Health Services on the implementation plan, timetable and impact analysis, and to provide the Board and CAO with an expert second opinion on the feasibility and safety of the implementation plan; and

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2. Add the following:

Endorse, in principle, the attached contingency plan submitted by the Director of Health Services'.

The following statement was entered into the record for Supervisors Molina and Antonovich:

“This Board has made repeated efforts over the last several years to transform Martin Luther King, Jr.-Harbor Hospital (MLK-Harbor) into a hospital that provides reliable, safe and effective health care services. Today, this hospital is on the precipice of closure and loss of funding by state and federal agencies for repeatedly failing to meet minimum standards of care.

“Consequently, the Board directed the Chief Administrative Officer and Director of Health Services to develop a contingency plan to provide the community with alternative emergency and inpatient services. Given the very real jeopardy of closure, it would be prudent for the County to immediately begin contingency preparations rather than risk being ill-prepared and create a flood of emergency room patients at other hospitals. A number of steps are outlined in the contingency plan beginning with noticing a hearing required should the emergency room close, negotiating with area emergency rooms to take the ambulance patients, and making preparations for establishment of an urgent care center to operate at MLK-Harbor.

“By beginning this process now, it provides the most effective means to protect the vital services in the immediate term, and could result in retaining the MLK-Harbor State License so that the hospital can reopen under new management and staff in the future.

“We therefore move that the Board of Supervisors direct the Chief Administrative Officer, with the assistance of Director of Health Services and other appropriate departments, to immediately begin preparations to implement the MLK-Harbor contingency plan, and specifically:

1. Immediately begin negotiations with area hospitals to absorb the ambulance and walk-in portions of Emergency Room patients that would otherwise be seen at MLK-Harbor;

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2. Provide for required legal notice by July 3, 2007 to initiate the 90-Day period required by State Statute prior to the closure of an Emergency Room, and initiate preparation for the completion of the Impact Statement and scheduling the necessary hearings;
3. Initiate preparations for the required Beilenson hearings;
4. Develop an expedited Request for Information/Qualifications process to select a new contractor to operate an Urgent Care Center at MLK-Harbor, and examine whether such a facility should operate 16 hours per day or 24 hours per day;
5. Request analysis from County Counsel to clarify differences between voluntary and involuntary license suspension on the hospital, and on the necessary measures to put the hospital license in suspense so that the facility can retain the grandfather provisions it currently enjoys from State seismic and building codes;
6. Develop a bilingual community education plan to inform area residents of the best available emergency, urgent, and non-urgent health care facilities during the interim period;
7. Develop, in consultation with employee representatives, an effective plan to transfer MLK-Harbor employees into alternative County positions where they will have effective oversight and support;
8. Initiate a dual-track strategy for the eventual reopening of MLK-Harbor Hospital by:
  - a) Beginning development of an expedited and abbreviated selection process of a provider of emergency and inpatient healthcare services at MLK; and
  - b) Develop plans for a fully Harbor-UCLA operated and controlled satellite hospital; and
9. Report back to the Board of Supervisors with the first progress report on each of these actions by July 17, 2007."

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Supervisor Burke made a suggestion that Supervisors Molina and Antonovich's motion be amended to delete Recommendation Nos. 2, 3 and 8 and add the following:

10. *The foregoing should apply should the hospital fail to meet the Centers for Medicare & Medicaid Services' conditions of participation; and/or should the Board be required to close the Hospital in the interest of patient safety.*

Columba Avena, Jasmyne Cannick, representing Assemblymember Mervyn Dymally, Chris Edwards, Miguel Guzman, Carl Populus, Celes King, representing the Congress of Racial Equality of California, Lark Galloway Gilliam, representing Community Health Councils, Dr. Frederick O. Murph, representing Brookins Community A.M.E. Church, Lynn Kersey, and other interested persons addressed the Board.

After further discussion, the Board requested County Counsel, in collaboration with the Chief Administrative Officer, to combine the various motions and amendments set forth by the Board and return with a new set of recommendations for consideration later in the meeting.

The following revised statement was entered into the record for the Board, as prepared by County Counsel and the Chief Administrative Officer:

"The Board has made repeated efforts over the last several years to transform Martin Luther King, Jr. - Harbor Hospital (MLK-Harbor) into a hospital that provides reliable, safe, and effective health care services. Today, this hospital is on the precipice of closure and loss of funding by state and federal agencies for repeatedly failing to meet minimum standards of care.

"Consequently, the Board directed the Chief Administrative Officer and Director of Health Services to develop a contingency plan to provide the community with alternative emergency and inpatient services. Given the very real jeopardy of closure it would be prudent for the County to immediately begin contingency preparations rather than risk being ill-prepared and create a flood of emergency room patients at other hospitals."

Therefore, on motion of Supervisor Knabe, seconded by Supervisor Molina, unanimously carried, the Chief Administrative Officer was directed, with the assistance of the Director of Health Services and other appropriate Departments, to:

1. Endorse, in principle, the attached contingency plan submitted by the Director of Health Services;

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2. Immediately take all actions necessary to prepare the Director of Health Services (DHS) to operationalize its contingency plan, including beginning discussions with area hospitals and other affected third parties so that DHS will be in a position to immediately implement the plan should the hospital fail to meet the Centers for Medicare & Medicaid Services' (CMS) conditions of participation or the hospital is otherwise subject to closure, however, DHS shall not reduce or terminate services at the hospital pending completion of the CMS' survey;
3. Begin discussions with impacted hospitals and Emergency Medical Services (EMS) providers, as set forth in DHS' contingency plan related to emergency department services, so that DHS is best prepared to implement the plan as timely as possible;
4. Develop an expedited Request for Information/Qualifications process to select a contractor to operate an urgent care center at MLK-Harbor, and examine whether such a facility should operate 16 hours a day or 24 hours a day;
5. Request an analysis from County Counsel to clarify differences between voluntary and involuntary license suspension on the hospital and on the necessary measures to put the hospital license in suspense so that the facility may maintain the grandfather provisions it currently enjoys from State seismic and building codes;
6. Take steps to increase bed capacity at other County facilities as set forth in DHS' contingency plan;
7. Develop a bilingual community education plan to inform area residents of the best available emergency, urgent and nonurgent health care facilities during the interim period;
8. Develop, in consultation with employee representatives, an effective plan to transfer MLK-Harbor employees in the event of closure of the hospital into alternative County positions where they will have effective oversight and support;
9. Undertake an expedited public solicitation to identify potential private hospital operators with the ability and interest to operate MLK-Harbor to serve patients now served at MLK-Harbor;

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10. Return in 3 weeks, at the July 17, 2007 Board meeting, with the detailed implementation plan, time table and financial and impact analysis to discontinue hospital services at MLK-Harbor;
11. If the Chief Administrative Officer (CAO) determines it is necessary, authorize the CAO to immediately identify and contract with independent hospital planning specialists to review and consult with DHS on the implementation plan, time table and analysis and provide the Board and CAO with an expert second opinion; and
12. Report back to the Board with the first progress report on each of these actions by July 17, 2007.

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Attachment

Copies distributed:

- Each Supervisor
- Chief Administrative Officer
- County Counsel
- Director of Health Services
- Director, Emergency Medical Services,  
Department of Health Services
- Director of Personnel