

MOTION BY SUPERVISORS GLORIA MOLINA
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Earlier this month, HDR Architecture released a report regarding overcrowding and excessive wait times at the LAC+USC Medical Center, Harbor and Olive View, to illustrate where we are struggling to provide appropriate inpatient and emergency care to our patients.

The report confirmed what we have been told by the Department of Health Services every other week since the hospital opened—LAC+USC has a deficit of available inpatient beds. The report concludes that “LAC+USC bed capacity is sized too small relative to its inpatient bed demand, which is consequently affecting conditions in its ED. LAC+USC is in need of access to additional Med-Surg beds.” The report goes on to state that the only other County hospital with a deficit of Med-Surg beds is Rancho, and that is only to handle the current LAC+USC transfer policy. The report approximates that LAC+USC is approximately 106 med-surg beds short.

Many years ago, a decision was made that better technology and more efficient management could compensate for the reduction in size. There is no question that this has helped significantly. We certainly did not anticipate the closure of MLK and so

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many other private hospitals and emergency rooms. In addition, health care reform could be a game-changer—if it succeeds, we will hopefully see a significant reduction in need for beds as more people have access to primary and specialty care. Even HDR Architects recommend that we take a careful look at the effects of health care reform before deciding on the best solution to resolve bed capacity issues at LAC+USC and our other public hospitals.

We are all optimistic that health care reform will succeed and reduce emergency room usage and hospitalizations. But we must also be realistic that we will always be the safety net provider for those who cannot or will not seek care elsewhere. Last month, LAC+USC's emergency room was overcrowded 80% of the time, with conditions considered severe or dangerous for half of the month. This has been the situation since the hospital opened. Olive View and Harbor are also experiencing overcrowding in their emergency departments. Hopefully health care reform will be the solution to these problems, but, we should prepare in case it is not.

WE, THEREFORE, MOVE THAT Chief Executive Office (CEO) and the Department of Public Works, in consultation with the Department of Health Services (DHS), develop a detailed contingency plan to add 150 med-surg beds to the LAC+USC campus to be implemented in the event that health care reform fails to significantly reduce the need for inpatient beds at LAC+USC. This must include a construction plan with cost estimates and funding sources identified, a timeline for plan design, engineering and construction, recommendations for possible locations and an analysis of licensing, staffing and other related requirements, to be reported back to the Board within 90 days.

WE, FURTHER, MOVE THAT DHS and CEO develop projections for how many indigent DHS patients are likely to obtain insurance per year between now and 2014, and the effect that this is likely to have on demand for inpatient beds at LAC+USC, Olive View, Rancho and MLK Hospital. This is vital in order for the County to measure whether demand for inpatient beds is decreasing as health care reform is implemented. The analysis should take into account any potential increases in *scheduled* admissions as a result of care management for the newly insured. These projections must be included in the report provided to the Board within 90 days.

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