

Health Agency Director Would Dump 'Paper Beds'

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So-called "paper" beds will be eliminated wherever they are found in Santa Cruz hospitals if the executive director of the Mid-Coast Health Systems Agency (MHSA) has his way.

If that cannot be done, Alan Samuels said further, he will seek to deduct "paper" beds from the state-developed mathematical formula the MHSA must now use to determine the number of hospital beds an area actually needs.

A "paper" hospital bed is defined as a bed for which a state license has been issued but which is actually either non-existent or cannot be set up and staffed within 24 hours.

The present "battle over beds" between Dominican Santa Cruz Hospital and Community Hospital of Santa Cruz stems from this formula.

In applying this formula to the area served by Dominican and Community, the MHSA has computed there are now 328 medical-surgical beds, that only 223 will be needed by 1985, that there is actually an excess of 105 beds.

But Dominican wants to include 47 more medical-surgical beds in a \$12 million expansion that will also include 53 skilled nursing care beds, eight critical care beds, six pediatric beds and 30 inpatient psychiatric beds.

The formula says they are not needed, these 47 more medical-surgical beds.

But Samuels told The Sentinel Tuesday that the 47 beds Dominican wants are the 47 "paper" beds owned by the county but not now even set up at the former county hospital.

Samuels said, further, that Community Hospital of Santa Cruz does not have set up and staffed all the beds for which it holds licenses. Based on a statement by Anthony Daigle to one member of the press, Community has 146 beds set up of its 180, and using that quoted figure Samuels said that here would possibly be an example of 34 more "paper" beds.

If the county's 47 and Community's 34 were deducted from the formula, Samuels said, the determinations of bed need here through the formula might change significantly.

Application of the formula for 1980 shows this area will need by 1985 24 perinatal beds, 11 pediatric beds, 22 intensive care/coronary care beds and 28 acute psychiatric beds. This computation shows the area needing in 1985 one less medical-surgical bed than was computed

in 1979, one less pediatric bed, one less intensive care/coronary care bed and six more psychiatric beds.

Samuels emphasized the problems MHSA has in handling Dominican's announced expansion plans because of the bed formula MHSA must use.

"The MHSA did not create the problem of 'paper' beds, we inherited it," he said. "We are the federally designated health planning agency for the four-county area of Santa Cruz, San Benito, Monterey and San Luis Obispo, and in our use of the formula we are trying to implement the law of California. The law does not have the term 'paper' beds. All licensed beds, used or not used, are included in the formula.

"But they are merely beds on paper if they are not used, and that makes a severe health planning problem.

"But don't forget that these 'paper' beds are a salable commodity. That is not talked about in some hospital circles, but the beds are worth dollars, they are property and in some respects are similar to franchises and liquor licenses. Hospitals pay big, big money for medical-surgical bed licenses, because these beds are very profitable."

SANTA CRUZ SENTINEL
July 30, 1980