

# ✓ Hospital wants surgeries delayed

Dominican unprepared; asks doctors to postpone non-emergency operations

By GUY LASNIER  
Sentinel staff writer

817-80  
SANTA CRUZ — Dominican Hospital has asked local doctors to postpone elective surgeries until at least Aug. 22 while it gets new acute-care beds ready.

In an Aug. 10 "dear doctor" letter, Chief Executive Officer Sister Julie Hyer asked doctors to limit surgeries to those that simply cannot, for medical reasons, be delayed."

The request has caused inconveniences, and prompted some doctors to again question the swift closing and conversion of Community Hospital. Dominican shut down all emergency and acute-care operations at Community last week, five months after it bought its neighboring competition.

"What was the urgency to close Community if they didn't have the facilities available?" asked general surgeon Dr. Walt Alexander.

Other doctors questioned the planning that went into the transition from one hospital to the other. Dr. Paul Berman, an orthopedic surgeon, said Dominican has created a "self-imposed crisis."

'What was the urgency to close Community if (Dominican) didn't have the facilities available?'

— Dr. Walt Alexander, surgeon

Dr. Joe Anzalone, a member of Dominican Hospital's board of directors and former chief of staff, said a shortage of nurses and other support staff forced the early closing and shifting of all acute care to the Dominican "campus."

"We were having trouble covering both hospitals," he said.

The former Community Hospital on Frederick Street now houses the Adrian Center, Dominican's drug and alcohol recovery program. It also houses patients who need long-term rehabilitation.

The birth center closed this week. The emergency room closed more than a week ago.

There has never been a question Dominican Hospital had enough square footage to handle the increased business. The problem has

been staff, particularly nurses and technical support workers.

Dominican, like other hospitals, is finding it difficult to maintain nursing staff, but Anzalone said the hospital has a full complement of operating room nurses. It's had a tougher time getting regular nurses for night shifts.

Anzalone said non-emergency surgeries must be delayed so that new nurses can get accustomed to a new workplace. "It really takes some transition," he said. There are different techniques and materials. "Supplies are kept in different places," he said, citing examples of differences that take getting used to.

Roger Hite, Dominican executive vice president and chief operating officer, said the hospital needs two

more weeks to get "monitored beds" ready. The hospital needs the beds to accommodate patients after surgery. If the beds aren't ready with technical equipment for monitoring vital signs, pressure is put on the intensive care unit which then is not available for emergency room patients.

"Let's take as much pressure off as we can," Hite said. He anticipates having the hospital ready by Aug. 22.

Critics charged that better planning would have had the beds ready before the transition.

"I'm sure they'll get it together," Berman said. "I hope to God we'll be able to handle the next emergency."

Hite said the hospital is further trying to relieve pressure by hiring back Santa Cruz nurses who have taken jobs elsewhere.

Dominican had been criticized for not assuring Community Hospital nurses they would have jobs and would retain seniority and desirable shifts. Hite said the hospital did make those assurances, but that many nurses chose to leave anyway.