



COUNCIL AGENDA: 09-11-07
ITEM: 3.8

Memorandum

TO: HONORABLE MAYOR AND
CITY COUNCIL

FROM: Lee Price, MMC
City Clerk 

SUBJECT: SB 275 (CEDILLO) – HEALTH CARE
FACILITIES: PATIENT TRANSPORT

DATE: August 29, 2007

RECOMMENDATION

As recommended by the Rules and Open Government Committee on August 29, 2007 approve a support position of SB 275 (Cedillo) if amended as recommended by the Rules & Open Government Committee.



Memorandum

**TO: RULES AND OPEN
GOVERNMENT COMMITTEE**

FROM: Leslye Krutko

SUBJECT: SEE BELOW

DATE: August 24, 2007

Approved

Deanne Arma

Date

8/24/07

Council District: All
SNI: All

**SUBJECT: SB 275 (CEDILLO) - HEALTH CARE FACILITIES: PATIENT
TRANSPORT- SUPPLEMENTAL MEMO**

REASON FOR SUPPLEMENTAL

At the Rules and Open Government Committee meeting on August 8, 2007, staff brought forward a position of support for SB 275. The Committee requested that staff contact area hospitals to determine their position on SB 275.

RECOMMENDATION

The Housing Department recommends that:

1. The Mayor and City Council support, if amended, SB 275 (Cedillo).
2. The Committee provide a one-week turn around for Mayor and City Council review.

OUTCOME

If the Rules and Open Government Committee and the Mayor and City Council accept staff's recommendation, the City lobbyist could begin seeking amendments to SB 275.

BACKGROUND

SB 275 prohibits hospitals from transporting patients to locations other than the patient's residence without the explicit consent of the individual to be transported. Specifically, this bill authorizes the California Department of Public Health (DPH) to issue an administrative penalty of up to \$100,000 for a first hospital patient dumping incident and allows the Attorney General, a district attorney or a city attorney to bring a civil action and levy a penalty of \$250,000 when a second incident of patient dumping occurs. A third patient dumping conviction is a misdemeanor with a penalty of up to \$500,000.

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RE: SB 275 – PATIENT TRANSPORT

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ANALYSIS

As noted in the analysis, the California Hospital Association and its affiliates have taken an oppose position on the measure. However, members of the Rules and Open Government Committee questioned the position taken by area hospitals. In order to better understand the hospitals' position, Housing staff contacted both the Santa Clara County Valley Medical Center and Regional Medical Center for more information.

First, Housing staff spoke with the Legislative Director for the Santa Clara County Executive's Office. The County's Legislative Director stipulated that the Santa Clara County Board of Supervisors takes the issue of homelessness very seriously, which is why they established the Office of Homeless Concerns to develop policies and coordinate services benefiting the homeless population. The County also operates a Homeless Health Care program, which provides medical services to the homeless. This year, Chairperson Don Gage convened the Blue Ribbon Commission on Affordable Housing to identify additional solutions to this problem.

However, the Legislative Director indicated that, due to the County's role as operator of a public hospital, they closely examined SB 275 and identified the following concerns:

- The legislation, while making hospitals responsible for the problem of homeless patients, does not offer any authority or resources to meaningfully address the problem.
- Hospitals are also not equipped – either from a policy or fiscal perspective – to address the problem of homelessness.
- This legislation would require approval from the entity accepting the patient, or the patient themselves, before discharge. Valley Medical Center would bear the cost of keeping patients in the hospital while the transfer/discharge process is occurring with outside agencies.

For these reasons, the County of Santa Clara has not taken a position on SB 275.

Secondly, Housing staff contacted Leslie Kelsay at Good Samaritan Hospital. Ms. Kelsay noted that the incidents that occurred in Los Angeles were egregious and that these situations should never happen, however, the hospital is concerned that the bill over-reaches. She noted that Good Samaritan and other regional hospitals have worked closely to provide appropriate placements on a regular basis. Ms. Kelsay noted that the situation in Los Angeles really pointed to a systemic problem with healthcare. She noted that the incident was clearly wrong, but speaks to the precarious financial situation of hospitals in Southern California and it was her position that this bill would not solve the overwhelming social issues surrounding homelessness or fix the problems of the healthcare system. She stated that the language of bill implies that if someone did not provide their consent they could in theory be allowed to stay indefinitely in the hospital.

A third call was placed to Pamela Martin-Smith, Regional Vice President of the South Bay Hospital Council. Ms. Martin-Smith confirmed its opposition to SB 275 stating that the bill was drafted too broadly and that a more effective means for dealing is through the work they are doing with the County's Blue Ribbon Task Force to end chronic homelessness and developing discharge planning.

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She stated that this group is working on a plan for releasing post operation patients to a respite care center as a better solution than SB 275.

In order to respond to the comments received from the area hospitals, staff would like to change its recommendation to a “support if amended.” Staff would recommend the following issues be addressed prior to adopting a position of support:

1. The language of the bill should be clarified to stipulate that the hospital makes the decision regarding the discharge date. However, prior to discharge, the hospital should consult with the patient about their release and ensure that any homeless patients are discharged to a safe location; and
2. Include State funding to help local governments, hospitals, and service providers to prepare an action plan for the proper discharge of patients.

Staff believes that the bill, with these amendments, would help discourage the reckless abandonment of homeless patients without overburdening hospital administration. Additionally, it would create the funding needed to plan for discharge planning, which supports the work of the Blue Ribbon Task Force.

PUBLIC OUTREACH/INTEREST

- Criteria 1:** Requires Council action on the use of public funds equal to \$1 million or greater. **(Required: Website Posting)**
- Criteria 2:** Adoption of a new or revised policy that may have implications for public health, safety, quality of life, or financial/economic vitality of the City. **(Required: E-mail and Website Posting)**
- Criteria 3:** Consideration of proposed changes to service delivery, programs staffing that may have impacts to community services and have been identified by staff, Council or a Community group that requires special outreach. **(Required: E-mail, Website Posting, Community Meetings, Notice in appropriate newspapers)**

This legislative item does not meet any of the above criteria.

COORDINATION

This memorandum was coordinated with the City Attorney’s Office, the County of Santa Clara’s Executive Office, the South Bay Hospital Council, and Good Samaritan Hospital.

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POLICY ALIGNMENT

This position is consistent with the Council-adopted 10-Year Strategy to End Chronic Homeless, which stipulates the following action by the City:

“Work with the County of Santa Clara to improve coordination between those discharging agencies and mainstream shelter and service providers regarding the discharge process. Agencies should identify options for those being discharged so there is an action plan already outlined before they leave. No one should be discharged without a housing plan in place.”

CEQA

Not a project


LESLYE KRUTKO
Director of Housing

For more information call Melissa Whatley, Policy Manager, at (408) 975-4418