To: Honorable Members of the City Council

From: Mayor Jesse Arreguín, Councilmembers Kate Harrison and Lori Droste

Subject: Health Impact Assessment Outreach Coordinator

RECOMMENDATION

Refer to the Mid-Year Budget Process an amount of $25,000 for Berkeley’s contribution towards a budget of $50,000 to support an Outreach Coordinator for the purpose of community education about the health impacts associated with the proposed closure of Alta Bates Hospital as indicated in the Health Impact Analysis completed by the Institute of Urban and Regional Development, University of California Berkeley in December 2018.

BACKGROUND

In 2016, Sutter Health announced its intention to close Alta Bates hospital, the only full service acute care hospital between Richmond and Oakland, by 2030. This is in spite of Sutter’s pledge to the community to keep the hospital open after its merger with Summit in 1999. Ostensibly this is to avoid the cost of retrofitting the hospital per SB 1953 requirements.

On July 12, 2016, City Council passed Resolution No, 67,615–N.S, opposing the plans to close the hospital resolving, among other things, that the Mayor and City Council would establish open forums to inform and educate Berkeley residents and ensure that the residents would be notified of any and all forums to ensure a full service acute care general hospital for future generations. The Resolution further resolved that the Mayor, City Council and City Departments pledged to cooperate fully to facilitate this process (Attachment 1).

The Alta Bates Task Force, a group of elected officials and health experts was formed in 2017, with the purpose of investigating options that would maintain a full-service acute care hospital in Berkeley and educating the public around the impacts of a potential closure. Following over two years of task force meetings, community events, and futile outreach to Sutter Health, a formal request was sent to Sutter Health on February 7, 2019 requesting that they provide a plan, in writing, for the retrofitting/rebuild of the hospital or provide their future plans for the property (Attachment 2). As of September 23, 2019, a written reply has not been received.

Alta Bates, colloquially known as the Birthplace of the East Bay, served 66,268 patients in 2016, including 5,863 live births. With a capacity of 347 beds, it is the third largest...
general acute care facility in the region. Its service area includes almost 850,000 residents, of whom 44% are people of color and 36% are below 200% of the federal poverty level.

The Health Impact Assessment report provides highlights of the likely health impacts of the closure of Alta Bates (Attachments 3 and 4). With the hospital serving as a regional hub for pregnancy and birthing, there would be reduced high quality prenatal, birthing & neonatal care, which is alarming in a country that already has an increasing rate of maternal mortality - higher than any other developed country. A potential closure would disproportionately impact people of color and low-income/uninsured residents, many of whom are already at a higher risk of having health complications. Emergency departments in hospitals throughout the region would see increased crowding, leading to longer wait times, longer travel times, and placing additional strains on ambulances, negatively impacting both the Berkeley Fire and Police Departments. It also places the entire I-80 corridor at additional risk in the event of a disaster such as an earthquake or wildfire, with victims having less access to emergency services.

The Alta Bates Task Force, has been developing its work plan for 2020, which focuses on the engagement of an Outreach Coordinator. The role of the Outreach Coordinator would be to raise awareness and educate residents along the I-80 corridor based on the Health Impact Assessment findings. They would also work on community engagement that would include organizational outreach such as faith-based organizations, neighborhood associations, students, seniors, labor, the disability community, and businesses. They would also be responsible for an overarching communications plan, among other tasks.

To help fund this position, the City of Berkeley as the host city will provide $25,000 for this position, with other jurisdictions (Oakland, Emeryville, Albany, El Cerrito, and Richmond) contributing $5,000 each for a total of $50,000. In 2017, a similar action was taken to fund the research and development of the Health Impact Assessment report.

**FINANCIAL IMPLICATIONS**

$25,000 from excess equity available in the November Annual Appropriations Ordinance.

**ENVIRONMENTAL SUSTAINABILITY**

Not Applicable

**CONTACT PERSON**

Mayor Jesse Arreguín 510-981-7100

Attachments:

1: Resolution 67,615
2: Letter to Sutter
3: Health Impact Assessment Findings
4: Health Impact Assessment of the Proposed Closure of Alta Bates Recommendation
RESOLUTION NO. 67,615-N.S.

OPPOSE SUTTER HEALTH CORPORATION’S PLAN TO CEASE ACUTE CARE HOSPITAL OPERATIONS AT ALTA BATES HOSPITAL IN BERKELEY, FURTHER REQUESTING CITY DEPARTMENTS TO IDENTIFY PENDING OR FUTURE APPLICATIONS SOUGHT IN FURTHERANCE OF SUCH CLOSURE AND REPORT SUCH APPLICATIONS

WHEREAS, Alta Bates Summit Medical Center, has been providing “full service” Acute Care hospital services in Berkeley, the East Bay and in Alameda and other counties for decades, and

WHEREAS, Alta Bates Summit Medical Center is licensed for 944 acute care beds with more than half of them in Berkeley, and 347 of those at the Ashby facility; and

WHEREAS, Alta Bates Summit Medical Center’s Ashby facility is crucial for providing timely healthcare services for the people of Berkeley and cities beyond Berkeley’s border; and

WHEREAS, from 2002 through 2015, records from CA’s Office of Statewide Health Planning and Development, OSHPD, revealed very high utilization of acute care services at Alta Bates’ Berkeley facility, including over one million total days that hospital beds were occupied; which consisted in part of the following:

- 559,136 days patients were treated in Medical units;
- 228,498 days babies treated in Neonatal Intensive Care;
- 103,157 babies delivered;
- 111,946 admissions through the Emergency Departments;
- 73,612 adult Critical Care patients treated; and

WHEREAS, these numbers do not reflect the full scope of the amount of patients treated at the Berkeley facility because census data reported to CA’s OSHPD agency does not include patients in “observation” status despite stays of up to 48 hours with "observation" patients; and

WHEREAS, these numbers reflect only the Ashby facility and not the Alta Bates Summit census data at the Oakland Summit site; and

WHEREAS, Sutter Health Corporation has announced its intention to dramatically reduce services by closing the Alta Bates’ Berkeley facility in light of SB 1953; and

WHEREAS, the consolidation of hospital services results in loss of services as happened when Alta Bates Hospital merged with Summit Medical Center in 2000, and despite Sutter Health arguing that services would be enhanced, not reduced, when many in the community opposed the merger at that time, Alta Bates Summit afterwards experienced
the loss of many services in the past 15 years, overwhelmingly at the Alta Bates and Herrick campuses; and

WHEREAS, the national average for bed capacity per 1000 residents is 2.9 beds according to World Bank statistics. In Alameda County, the bed capacity is at 1.8 beds and neighboring Contra Costa at 1.4 beds, a figure that does not reflect the final phase of the 2015 closure of Doctor’s Medical Center in San Pablo; and

WHEREAS, many hospital departments are often at capacity, and all of the local Emergency Departments already have large delays in service, which will only be exacerbated by the merging of the two full-service Acute Care Hospitals with their Emergency Departments to one Oakland location, increasing even further wait and admission times; and

WHEREAS, the University of California, has 37,581 Undergraduate and Graduate students who depend heavily on hospital services at the Alta Bates campus, including the Alta Bates Emergency Department in close proximity to campus, to address the students’ life-threatening illnesses and injuries, and need for medical care; and

WHEREAS, the Berkeley, North Alameda, West Contra Costa area recently suffered the closure of an acute care hospital in San Pablo, and the loss of acute care hospital services as a result, and further, is subject to severe earthquakes, frequent urban interface with wild fires, industrial chemical releases and mass traffic casualties—all of which require emergency services; and

WHEREAS, when Berkeley’s first responders are mandated to travel to Summit Campus in Oakland, they are unavailable for service for the rest of Berkeley for prolonged periods of time presenting a significant danger to the lives of Berkeley residents, and forcing an unacceptable standard of healthcare upon them; and

WHEREAS, closures and relocations of corporations on the community, impacting an array of businesses including family-owned businesses, with losses often doubling or tripling those who either lost jobs or had to relocate; and

WHEREAS, when access to healthcare is made more difficult, patients often delay healthcare but also stop seeking the care that is necessary; and

WHEREAS, the stated mission of corporate Sutter Health is to “enhance the well-being of people in the communities we serve through a not-for-profit commitment to compassion and excellences” in health care services; and

WHEREAS, Sutter Health as a non-profit corporation pays little or no property taxes for operations which are non-profit, such as its non-profit hospitals (as opposed to its for-profit operations) and is a highly profitable healthcare corporation whose total assets in the billions grow substantively each year, as shown:
• 2011: $11,820,000,000
• 2012: $12,390,000,000
• 2013: $14,215,000,000
• 2014: $14,290,000,000
• 2015: $14,344,000,000

WHEREAS, Sutter Health needs to live up to its stated mission, be held accountable for its actions, and provide the necessary healthcare for Berkeley residents, and must not be allowed to put profits before lives nor endanger the residents of Berkeley; and

WHEREAS, the Berkeley City Council has a role and responsibility to provide resources to the public to promote and protect its health with no regional body researching the health needs of the greater community.

NOW THEREFORE, BE IT RESOLVED that the Mayor and City Council of the City of Berkeley oppose Sutter Health Corporation's plan to close its acute care services at Alta Bates Hospital and calls upon Sutter Health to cease and desist all actions in furtherance of any and all plans to close Alta Bates hospital.

BE IT FURTHER RESOLVED that the Mayor and City Council shall establish open forums to inform and educate Berkeley residents of the possibility of Sutter Health's seismically retrofitting Berkeley's Alta Bates facility; shall ensure the residents of Berkeley are notified of any and all forums under the City of Berkeley's purview; and ensure a full service acute care general hospital for future generations.

BE IT FURTHER RESOLVED that the Mayor, City Council, and City Departments pledge to cooperate fully to facilitate this process such that it is expedited as much is legally permitted.

The foregoing Resolution was adopted by the Berkeley City Council on July 12, 2016 by the following vote:

Ayes: Anderson, Arreguin, Capitelli, Droste, Maio, Moore, Wengraf, Worthington and Bates.

Noes: None.

Absent: None.

[Signature]
Tom Bates, Mayor

Attest: Mark Numairville, City Clerk
February 7, 2019

Ms. Sarah Crevans  
Chief Executive Officer, President and Director  
Sutter Health  
2200 River Plaza Drive  
Sacramento, CA  95833

Dear Ms. Crevans:

On December 11, 2018, the Berkeley City Council voted unanimously to send the following letter:

The City of Berkeley is committed to retaining a full service acute and emergency care hospital in Berkeley to serve residents, students, workers and visitors of the City of Berkeley and UC Berkeley, and of neighboring I-80 Corridor cities including Emeryville, Albany, El Cerrito and Richmond. This letter is requesting that Sutter Health open formal discussions with the City of Berkeley to create a timeline and determine needs to retain Alta Bates Hospital as a full service acute and emergency care hospital in Berkeley. We would also like updated information on current plans for the future of the Alta Bates Summit Ashby Campus.

Recent waves of devastating fires in the North Bay and other California communities have resulted in evacuated or destroyed hospitals. Berkeley and the East Bay is at serious risk of wildfires, earthquakes, chemical releases and other potential manmade and natural disasters. These events, and the reality that there will be more like them, is of great concern. “Without functioning hospitals, it takes much longer for a community to recover ….. This prolonged recovery seriously retards the area’s economic and social renewal”, stated the Office of Statewide Health Planning and Development (OSHPOD) in highlighting the critical role hospitals occupy when disaster strikes.

Additionally, a 2018 University of California Health Impact Assessment found that the proposed closure of Alta Bates Campus at Berkeley would likely:

- Create a harmful cascade effect on remaining hospitals and emergency services, exacerbating already overcrowded ERs
- Lengthen wait times for hospital beds
February 7, 2019
Ms. Sarah Crevans, Sutter Health

- Reduce the ability of first responders and emergency service vehicles to respond
due to increased transport times through the East Bay’s congested roadways
- Disproportionally affect marginalized communities; and
- Impact acute care services in this region that need to be expanded, not
  consolidated.

The City of Berkeley very much wants to work in collaboration with Sutter Health to
develop a plan to keep a full service, acute care hospital in Berkeley. We are
committed to exploring all options. We would like to engage in dialogue with you.
Please provide a response to this letter by March 1, 2019, with a goal of working with
the City and retaining Alta Bates as a full-service, acute-care hospital. The City of
Berkeley is looking forward to participating with Sutter in these conversations.

Sincerely

Dee Williams-Ridley
City Manager

cc: Mayor Jesse Arreguin and City Councilmembers, City of Berkeley
Deputy City Manager Paul Buddenhagen, City of Berkeley
Governor Gavin Newsom
Congresswoman Barbara Lee
Attorney General Xavier Becerra
State Senator Nancy Skinner
Assemblymember Buffy Wicks
## Figure 2: Likely Health Impacts from the Closing of Alta Bates Medical Center, Berkeley, CA
(Magnitude: 1 = less likely to 3 = highly likely)

<table>
<thead>
<tr>
<th>Key Issue</th>
<th>Likely Health Impact</th>
<th>Magnitude of impact</th>
<th>Examples of Supportive Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birthing/obstetrics</td>
<td>Reduced access to high quality prenatal, birthing &amp; neonatal care</td>
<td>***</td>
<td>Over 5,000 births per year at Alta Bates - highest in the region Current birthing center has excellent maternal &amp; infant outcomes</td>
</tr>
<tr>
<td>Elderly care</td>
<td>Delayed care, increased severity of disease &amp; likely avoidable hospitalizations</td>
<td>*</td>
<td>Already high % Medicare serving facility; senior population increasing Hospital closures have resulted in delayed care &amp; increased mortality for elderly</td>
</tr>
<tr>
<td>Uninsured &amp; homeless</td>
<td>Delayed care, increased unnecessary hospitalizations, increased care costs &amp; potential spread of infections</td>
<td>**</td>
<td>About 41% of patients in 2016 were Medi-Cal or uninsured 600% increase in homeless patients at Alta Bates between 2016 - 2017</td>
</tr>
<tr>
<td>People of color</td>
<td>Delayed care, increased unnecessary hospitalizations, increased care costs &amp; some increase in unnecessary deaths</td>
<td>***</td>
<td>Over 63% of patients at Alta Bates were people of color (PoC) in 2016 West Contra Costa County has high % PoC utilizing Alta Bates &amp; will experience greatest increased travel times to reach Summit campus</td>
</tr>
<tr>
<td>People with Disabilities</td>
<td>Accessibility barriers due to increased distance and unfamiliarity with relocated services</td>
<td>**</td>
<td>12% of the population in the HSA are living with a disability, of which at least 61% are racial/ethnic minorities</td>
</tr>
<tr>
<td>UC Berkeley Students</td>
<td>Loss of familiar ED &amp; in-patient care; loss of some emergency mental health &amp; suicide prevention</td>
<td>**</td>
<td>Estimated 4,000 UCB student visits to Alta Bates ED per year About 2 ambulance transfer per day from Tang Health Ctr. to Alta Bates Loss of familiarity &amp; proximity of care may adversely impact students</td>
</tr>
<tr>
<td>Emergency Department</td>
<td>Increased crowding at EDs across the region, increasing wait times; Increase travel times to ED for some; Increased ‘time-on-task’ for many regional EMS providers.</td>
<td>***</td>
<td>Loss of 22 ED treatment stations at Alta Bates Increase private vehicle travel times to Summit hospital during PM peak rush hour, with some areas needing over 50 minutes to reach ED. Summit will need to double current ED capacity to accommodate all Alta Bates patients Berkeley EMS reports 10-12 min. increase in transport times to Summit compared to Alta Bates, which would add on average 2 extra hours of EMS ‘time-on-task’ per day if Alta Bates closes</td>
</tr>
<tr>
<td>Disaster preparedness</td>
<td>Loss of ED capacity to treat earthquake &amp; fire victims, potential increase in avoidable deaths &amp; hospitalizations; likely increased cost of long-term care.</td>
<td>***</td>
<td>Est. 900 people needing ED care in first days of HayWired scenario earthquake &amp; 1,000-1,200 from a major fire at Chevron in Richmond w/out Alta Bates. Regional ED capacity in an emergency/disaster will be significantly compromised without Alta Bates Concentrating ED capacity in fewer locations may limit access during a disaster if roadway network to those facilities is compromised.</td>
</tr>
<tr>
<td>Economics</td>
<td>Local government EMS spending increase; low wage workers disproportionately lose jobs; Nurses may also be adversely impacted; local service economy suffers</td>
<td>*</td>
<td>Potential increased cost to local governments to provide additional EMS services due to longer time on task Potential loss of nurses out of region, increasing shortage of skilled practitioners Potential loss of $1.5B in local economic activity</td>
</tr>
</tbody>
</table>
To: Honorable Mayor and Members of the City Council
From: Community Health Commission
Submitted by: Holly Wertman, Chairperson, Community Health Commission
Subject: Health Impact Assessment of the Proposed Closure of Alta Bates

RECOMMENDATION
Adopt a Resolution supporting the preparation of a Health Impact Assessment, incorporating a proposed scope, and referring to the City Manager a request that the Public Health Division assist with (1) interagency arrangements such as contracting with the University of California, Berkeley, Alameda County, and/or another governmental entity or consultant(s) to conduct the Assessment, (2) sharing access to existing data for researchers conducting the HIA, and (3) supporting educational opportunities for community members.

FISCAL IMPACTS OF RECOMMENDATION
Short-term minor costs to assist with the Assessment. Long-term savings to the Police, Fire, and Health, Housing, Community Services Departments.

CURRENT SITUATION AND ITS EFFECTS
Alta Bates Summit Medical Center has been providing “full service” Acute Care hospital services in Berkeley, serving the East Bay I-80 corridor at the Herrick Campus since 1904, and at the Alta Bates Campus since 1905, and from their merger in 1984. Alta Bates’ Berkeley facility is crucial for providing timely health care services for residents of Berkeley and neighboring communities. In spite of this, Sutter Health Corporation has announced its intention to close Alta Bates’ Berkeley facility. Sutter has also closed the Cardiac Catheterization Unit and the Pulmonary Sub-Acute Unit at Alta Bates, requiring cardiac and stroke cases to be rerouted to further locations such as Summit.

BACKGROUND
Many hospital departments are often at capacity, and all of the local Emergency Departments reportedly have long delays in service. These delays will only be exacerbated by the merging of the two full-service Acute Care Hospitals, Alta Bates and Summit, to one Oakland location, increasing even further wait and admission times. The increased travel time to a more distant location raises questions about the potential for negative health outcomes, particularly for cardiac, stroke, and pulmonary patients. Further, when Berkeley’s first responders are mandated to travel to Summit Campus in Oakland, they may take longer to respond to subsequent emergencies in Berkeley,
raising questions about the impact that the closure of Alta Bates may have on public safety.

On July 27, 2017, the Community Health Commission moved to approve the proposed Health Impact Assessment of the Proposed Closure of Alta Bates:

M/S/C (Katz/Lingas) Motion to approve Health Impact Assessment of the Proposed Closure of Alta Bates.

Ayes: Commissioners Carter, Smart, Chen, Wong, Speich, Stein, Katz, Morales, Chin, Lingas and Kesarwani
Noes: None
Abstain: None
Absent from vote: Commissioners Wong, Teunis, Kim and Engelman
Excused: Commissioners Franklin, Brosgart, and Wertman

Motion passed.

ENVIRONMENTAL SUSTAINABILITY
Consistent with Berkeley’s Environmental Sustainability Goals and no negative impact.

RATIONALE FOR RECOMMENDATION
A Health Impact Assessment (HIA) is an analysis and community education tool for the community to learn about the health impacts and participate in actions affecting public health. Discussions are in progress with the U.C. Berkeley School of Public Health to identify researchers to conduct the assessment.

ALTERNATIVE ACTIONS CONSIDERED
Do not conduct the Health Impact Assessment. This is not recommended since the City and Community will not have adequate information to respond to the proposed actions regarding hospital closure.

CITY MANAGER
The City Manager supports the Commission’s work on this matter and reiterates that City of Berkeley staff support will be extremely limited and contingent on available resources and capacity.

CONTACT PERSON
Rebecca Day-Rodriguez, Commission Secretary, HHCS, (510) 981-5337

ATTACHMENTS
1. Resolution
RESOLUTION NO. ##,###-N.S.

SUPPORTING A HEALTH IMPACT ASSESSMENT OF THE PROPOSED CLOSURE OF ALTA BATES

WHEREAS, the Berkeley City Council has previously adopted a resolution in opposition to the proposed closure of Alta Bates Medical Center; and

WHEREAS, the closure of Alta Bates Medical Center is expected to have serious impacts on the health of Berkeley and East Bay residents; and

WHEREAS, the health impacts likely include delay of care for emergency medicine events, impacting patient health outcomes for cardiac and stroke, pulmonary, obstetrics, psychiatric, alcohol and drug poisoning, and trauma emergencies; and

WHEREAS, the health impacts likely include impacts to safe hospital operations, including hospital acquired infections, inpatient bed capacity; and

WHEREAS, the health impacts likely include impacts to community access to primary and specialty care, reduction in services for safety-net and special needs populations; and

WHEREAS, the health impacts likely include impacts to first responder operations and heightened risk in a disaster event; and

WHEREAS, a Health Impact Assessment (HIA) is an analysis and community education tool for the community to learn about the health impacts and participate in actions affecting public health; and

WHEREAS, the Berkeley Mayor’s Office has identified faculty at the U.C. Berkeley School of Public Health to conduct a Health Impact Assessment; and

WHEREAS, the Community Health Commission has proposed a Scope of a Health Impact Assessment of the proposed closure of Alta Bates Medical Center.

NOW THEREFORE, BE IT RESOLVED by the Council of the City of Berkeley that a Health Impact Assessment (HIA) should be conducted regarding the proposed closure of the Alta Bates Medical Center, including the scope recommended by the Community Health Commission.

BE IT FURTHER RESOLVED that the City Council refers to the City Manager a request that the Public Health Division assist with (1) interagency arrangements such as contracting with the University of California, Berkeley, Alameda County, and/or another governmental entity or consultant(s) to conduct the Assessment, (2) sharing access to existing data for researchers conducting the HIA, and (3) supporting educational opportunities for community members.