



HEALTH CARE & BIOTECH

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COVID Patient Influx Strains Hospital Resources

Bed capacity and staffing in the red, mortuaries full.

By **AMY STULICK** Staff Reporter

Hospitals in the Valley are seeing surges linked to holiday gatherings, staff said, threatening to overwhelm plans put in place at the beginning of the pandemic to accommodate a massive influx of patients.

Temporary morgues have been stationed at hospitals to help overwhelmed mortuaries deal with COVID-19 victims, including West Hills Hospital and **Providence Health and Services** hospitals in the Valley.

“Providence has anticipated the need for those types of things,” said **Deb Carver**, chief nursing officer at Providence Cedars-Sinai Tarzana Medical Center. “We don’t have anything specific here, we’re managing with what we have.”

“It is real. Every day, I can tell you I’ve watched somebody die from COVID. ... Once a patient is on a ventilator, the chances of them recovering are not good.” **Yolanda Tominac**, an ICU nurse at West Hills Hospital and member of the **SEIU 121 RN** union, told the Business Journal. “We’re being honest with our families, when they have to make a decision about having to intubate a patient – their grandmother or grandfather, uncle – (pulmonary critical care doctors) have to tell them that there’s a 70 percent chance that they’re going to die.”

“Seventy percent is more across the board, if you talk to other hospitals, other physicians, the nurses have friends at other places,” said **Dr. David Kamrava**, pulmonologist at West Hills Hospital. “Ours has been only about 40 percent when they go on the ventilator.”

Added Kamrava: “Patients that go on the ventilator from the community have a better chance of survival than the ones that are from a nursing home. If they’re from a nursing home, they’re not moving around, a lot of them, they’re there for a reason, whereas the ones from the community, they definitely have a better chance of surviving.”

Nurse burnout is real too, with some having to take stress leave while others are contracting COVID either at work or through their own family members.

“We’re not superhuman, even though



Stressed: ICU Nurse Yolanda Tominac with Dr. David Kamrava at West Hills Hospital.

people like to think we are,” Tominac added. “We’re running with smaller numbers of nurses because we’ve had nurses that have been exposed, tested positive for COVID, or family tested positive for COVID. We’ve had nurses that have gone out on stress leave because they can’t take it anymore.”

As of press time, West Hills Hospital had not gotten to the point of rationing care, Tominac said — at least not yet.

“They’re going to have to decide at some point who has the best outcome. Of course, that 30-year-old, we’re going to do everything we can, but 89-year-old grandma who has been in a nursing home is not going to have that option anymore. That’s a reality,” explained Tominac. “Fortunately, we’re not at that point within our own hospital.”

A document circulated among doctors at four L.A. County-run hospitals and obtained by the **Los Angeles Times** suggested workers shift from saving every life to saving as many patients as possible; those less likely to survive would not get the same kind of care.

“We’re pretty close to capacity most days. It fluctuates day to day,” said Carver, referring to the Tarzana hospital. “Every organization at this point is looking at and thinking that those

things might be necessary, but that’s not something we’re planning for or anticipate we’ll have to do.”

“Some compromise of standard of care is unavoidable; it is not that an entity, system or locale chooses to limit resources, it is that the resources are clearly not available to provide care in a regular manner,” the document stated.

“We are caring for more COVID-19 patients and are very close to capacity,” West Hills Hospital said in an email to the Business Journal, referring to capacity even with its surge plan. That plan involved opening two floors for COVID patients, allowing capacity to be bumped up from its 25-bed ICU to care for 60-plus people two weeks into January, according to Tominac.

Surge floors need the right equipment and trained staff, Tominac added, a major hurdle for nurses caring for pandemic patients.

“The medical air that you have to attach to a ventilator only exists in the ICU and in the emergency department. You can’t put a ventilator on any other floor,” Tominac told the Business Journal. “And you have to have specially trained nurses to do that. A medical or surgical nurse doesn’t know what to do with a ventilator.”

Added to that is Gov. **Gavin Newsom**’s waiving of the State’s Title 22 regulations, which includes set nurse-to-patient ratios.

“California is the only state that has nurse-patient ratios. We fought for these ratios. A normal number would be one nurse to two patients in the ICU. On the telemetry floor it would be one nurse to four patients, and on med-surg it would be one nurse to five patients,” said Tominac. “The hospitals are taking advantage of the governor’s waiver, to allow us to take as many patients as we can take.”

Hospitalized patients with COVID require more care to begin with, the Business Journal has reported in the past, because nurses are treating a variety of serious symptoms from respiratory illnesses to heart failure.

West Hills had five travel nurses at its site in March and April as well, but the hospital let them go when the numbers didn’t warrant them to stick around, Tominac explained. Per diem nurses, contracted through various agencies to help with workload, were not dismissed early in the pandemic since they were covered under a collective bargaining agreement between Nashville-based **HCA Healthcare Inc.**, West Hills’ parent company, and **SEIU 121 RN**.

West Hills nurses, along with those at Los Robles Regional Medical Center in Thousand Oaks and Riverside Community Hospital even threatened to strike through Christmas and New Year’s Day unless HCA provided the safe working conditions, including adequate staffing.

“We have taken strategic actions to protect as many nursing roles as possible. The hospital is staffed according to our patient volumes and during the spring, due to the pandemic, our normal patient volumes were low and we did not have the need for travel nurses,” West Hills Hospital said in an email to the Business Journal.

During the first few weeks of the new year, the Los Angeles County Department of Public Health said COVID-19 hospitalizations have continued to increase, putting just under 8,000 people in the hospital with 20 percent of those patients in intensive care units.

“The anticipated surge from the winter holiday gatherings has begun. And tens upon tens of thousands of people are paying the price with new COVID-19 infections,” Los Angeles County Public Health Director **Dr. Barbara Ferrer** said in a statement.

Pandemic Alters Testing Lab’s Business Model

Universal Diagnostic tries direct-to-consumer strategy.

By **AMY STULICK** Staff Reporter

Universal Diagnostic Laboratories in Van Nuys has drastically changed its business model in the wake of COVID-19 testing.

The 23-year-old testing laboratory at 6700 Valjean Ave. has oscillated between business-to-business and direct-to-consumer platforms, depending on demand.

“In a normal circumstance, a laboratory would only do direct business with referring physicians, but COVID has created a direct-to-consumer product,” said **Natasha Madarian**, vice president of business development at UDL. “Instead of somebody having to go to their doctor to get a COVID test, which they probably cannot, they can come to five of our locations.”

Currently, 70 percent of UDL’s business

comes from COVID testing while 30 percent (UDL’s pre-COVID business) is diagnostics – drug tests, biopsies, bloodwork – at the full service, high complexity laboratory.

“With my workers’ comp background, I’ve brought in a lot of employers to the mix where we go on-site,” added Madarian, formerly with **ProHealth Medical Group** in Mission Hills. She started at UDL in September. “I have a medical surveillance team that we hired that are trained to go on site and help administer the PCR (COVID) test to keep things open like bakeries and production companies.”

Madarian, who has multiple family members in the restaurant business, believes weekly employer testing is the golden ticket to reopening the economy while keeping everyone safe.

“In the long term, the truth is everything needs to open back up again. The closure hasn’t really made a dent in the numbers,” she said. “We just go on site and all we need for the employer site is, if they have a break room or conference room, we can set everything up.



Van Nuys: Lab at 6700 Valjean Ave.

It’s only one product, and it’s a swab, so it just helps keep a safe work environment.”

Besides its on-site testing for employers, UDL’s five sites for patients offer COVID tests in shopping malls in Canoga Park and Culver City, a recreation center in Calabasas, and its latest site in Burbank.

“The biggest challenge we’ve had is staffing,” Madarian said. UDL has doubled its employee count since the beginning of the pandemic, from roughly 40 to 80 people.

Looking ahead, UDL plans to introduce more direct-to-consumer products, specifically for testing related to sexually transmitted diseases, Madarian said. The business will continue bolstering its COVID testing capabilities, but likely will not dip into vaccinations.

“We probably could; we’ve talked about it,” added Madarian. “We just don’t want to step on an area that’s not within our business model. We’re here to function as a reference laboratory for providers.”