

As pandemic surges, California hospitals move to ration care

Brian Dixon

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As the COVID-19 virus continues to spread unabated, infecting tens of thousands every day throughout California, overwhelming health care systems and completely filling intensive care units (ICUs), hospitals are moving to implement plans to ration care, withholding it from those deemed unlikely to survive the disease.

This disaster is not unpredictable but the outcome of the bipartisan “herd immunity” policy pursued by the ruling class—refusing to close non-essential workplaces and schools with full compensation—which has allowed the virus to spread unabated, sacrificing hundreds of thousands of lives for corporate profits.

According to the *Los Angeles Times*, there were 53,326 confirmed cases on Friday (a new record), bringing the total to nearly 1.9 million, while there were 265 deaths, adding to the nearly 23,000 California residents who have lost their lives to the disease. As of Monday, nearly 18,000 Californians were hospitalized with COVID-19, with more than 3,400 placed in ICUs. The state will soon surpass the single-day record for hospitalizations set by New York state at the peak of its deadly first wave in April.

ICUs are at zero capacity throughout Southern California and the 12-county San Joaquin Valley area, while the state’s overall capacity stands at 2.1 percent. The state’s models currently project that at the current rate there could be 100,000 COVID-19 hospitalizations in the next month alone.

Last week, the state was forced to activate its “mass fatality” program, which occurs when more deaths take place than can be handled by the local coroner or emergency personnel. Governor Gavin Newsom ordered tens of thousands of additional body bags and the deployment of dozens of refrigerated trailers to hold corpses.

The catastrophe in California is unfolding as a new strain of the disease has been identified in the United

Kingdom that is reported to be 70 percent more infective than the variants found in the US or other parts of Europe.

A document outlining the shift toward rationing care circulated among doctors at four Los Angeles-area hospitals was revealed by the *Times* over the weekend.

“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,” reads the document, according to the *Times*.

Decisions on how to allocate scarce resources—especially respiratory therapists, ICU nurses, and critical care physicians—will be made by a triage officer. For those patients lucky enough to receive such resources, they will be limited to only two days, at which time the decision to continue treatment will be reassessed.

“The ethical justification,” reads the document, “is that in a public health emergency when there are not enough critical care resources for all, the goal of maximizing population outcomes would be jeopardized if patients who were determined to be unlikely to survive were allowed indefinite use of scarce resources.”

While these measures had not yet been instituted as Friday, health officials have emphasized that it is only a matter of time as the pandemic surge only worsens.

Dr. Christina Ghaly, L.A. County health services director, told the *Times* that the current measures of bringing in some additional staff and requesting additional resources from the state “are not anticipated to be enough to meet the continuously escalating number of patients that are presenting across the county of care.” Ghaly emphasized that “the worst is yet to come.”

Moreover, delaying the admittance of patients until they are very sick means that they will be less likely to survive and, under conditions of rationing care, less likely to receive the treatment necessary to save them. Many of these patients’ lives could have been saved if hospitals

were not overcrowded and they were able to receive care in a timely fashion. This was the experience of many patients in Wuhan, China, and New York City at the start of the pandemic.

The flooding of COVID-19 patients into overwhelmed hospitals also poses a threat to anyone requiring medical care for any issue not related to COVID-19. “If you have a heart attack, if you get into a car accident, if you fall off a ladder, or have a stroke, we may not have a bed for you,” Dr. Brad Spellberg, chief medical officer of L.A. County–USC Medical Center, told the *Times*.

The situation is made worse by the fact that the surge in the pandemic is no longer limited to particular regions of the country but has spread across every state. This has removed the option of bringing in additional health care workers from other areas to assist with the surge, which was done in New York City early on in the pandemic.

Corona Regional Medical Center in Los Angeles has been forced to set up disaster tents to support emergency room patients, while health officials in Fresno, California, are making plans to move patients to the Fresno Convention Center. Fresno and surrounding counties are currently having paramedics responding to emergencies evaluate whether patients’ conditions are severe enough to justify an emergency room visit.

Politicians and the mainstream media have sought to place the blame for the spread of the pandemic onto individuals who gathered during the holidays or who refuse to wear masks or social distance. Completely ignored is the real culprit of the current surge: the demand by the ruling class that schools and non-essential businesses stay open no matter what the costs in terms of human lives. The only things the political establishment is willing to spend money on are disaster tents, refrigeration trucks and body bags.

Health care workers at hospital facilities continue to face untenable working conditions, as they are forced to deal with the pandemic surge in understaffed hospitals, work 12-hour shifts without a break and still lack adequate personal protective equipment (PPE) and regular testing.

Nurses and other health care workers have indicated their willingness to struggle against these dire circumstances through protests and strikes. However, they face the obstacle of not only ruthless hospital executives, but the trade unions that nominally “represent” these workers.

For example, nearly 2,500 nurses and health care professionals at three Southern California hospitals

located in Riverside, Los Angeles and Thousands Oaks—all operated by the largest for-profit health care system in the US, HCA Healthcare—recently voted 92 percent in favor of authorizing a strike. The union, SEIU Local 121RN, claimed it was planning on holding a 10-day strike starting on Christmas Eve, but called it off on Saturday after stating it had negotiated a deal, although it refused to release any details on the three-year contract.

It is essential that nurses take their struggle out of the hands of the trade unions, which have a long history of shutting down and isolating strikes, smothering worker opposition and keeping workers tied to the dead end of the Democratic Party, the party of Wall Street, the national security apparatus and war. Health care workers must establish rank-and-file safety and action committees to organize, coordinate and lead the struggle for safe working conditions and higher pay.

The fight to save lives and bring the pandemic under control, however, cannot be limited to the halls of hospitals and other medical facilities. Hospitals and ICUs will continue to be overwhelmed until schools and non-essential business are shut down. That is why it is essential for health care workers to appeal to other sections of the working class—educators, auto workers, logistics workers, meat processors and others—to push for a general strike to shut down non-essential production with full compensation for all impacted workers and small business.

Moreover, to conduct a successful fight, workers must unify their struggles with those in other countries who are facing similar conditions of austerity and mass death. Thus, US workers should closely follow the activities of the Health Workers Action Committee (HWAC) in Sri Lanka, which recently held its first public meeting.

As the pandemic rages on, workers around the world are quickly realizing that their shared class interests, and indeed their very lives, depend on entering into a fight against capitalism and for socialism.



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