

Los Angeles Hospital slated for closure amid pandemic

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On New Year's Eve, the hospital giant Alecto Healthcare Services, announced that they will be closing the 200-plus-bed Olympia Medical Center Hospital in Los Angeles County on March 31, 2021 and laying off all staff. The announcement came as the majority of the state of California was reporting zero percent ICU capacity and hospitals throughout Southern California were strained to the brink as ambulances snaked around emergency rooms and health care staff were given directives to ration care.

The planned closure of the hospital in the middle of a deadly pandemic—as the death toll approaches half a million victims—is a testament to the utter irrationality of the capitalist system and dire need to remove the profit motive from health care entirely.

The closure of Olympia will have a devastating impact on Los Angeles County, which has been one of the major epicenters of the pandemic in the US. According to the state's tracking system as of February 9, at least 44,997 people have died in California where cases exceed 3,428,698. In Los Angeles County alone there are 1,110,384 positive COVID-19 cases, of which 17,764 have resulted in death. The county's ICU capacity has run dangerously low, as average daily admissions remain at approximately 400 according to County Health Director Dr. Christina Ghaly. The state's tracking system predicts that a total of 51,950 deaths will occur in California by February 27. The closure of Olympia Medical Center will only put further strain on hospital systems and drive up the number of deaths.

The announcement of the hospital closure has been met with outrage by nurses, health care workers, and the larger community as a whole, which will lose access to crucial medical services provided by Olympia. UCLA Health Services plan to convert the medical center into a neuropsychiatric center, which will leave the region without direct access to vital services such as an emergency room, medical surgical beds, intensive care unit, surgical services, hyperbaric wound care center and their internationally-recognized digestive disease institute.

Patients and ambulances will have to travel farther to other

area hospitals in a region with some of the heaviest traffic in the state. The next closest medical centers are Cedars-Sinai Medical Center, 1.9 miles; Ronald Reagan UCLA Medical Center, 6.2 miles; Southern California Hospital at Culver City, 3.6 miles. For patients suffering a heart attack or stroke travel times to reach emergency rooms are a matter of life and death. This is true under “normal” or non-COVID-19 circumstances, but the impending closure is unfolding under a pandemic in which hospitals are already overwhelmed and will now need to absorb patients that would have been admitted to Olympia Medical Center.

Adding insult to injury, the entire staff at Olympia faces layoffs at the end of next month, on top of being expected to maintain the daily care of COVID-19 patients under conditions where many health care workers are suffering from PTSD, and what one nurse described to the WSWs as the “endless conveyor belt of death.” The uncertainty of employment at the end of March has now been hoisted upon their shoulders. The knowledge of the impending closure has already forced nurses and health care workers to seek employment at other hospitals, leaving Olympia further short-staffed and placing patient lives at risk. It is unclear where and how these patients will be relocated throughout the region and the effect this will have on their care.

The hospital profiteer Lex Reddy, M.D., former president and CEO of Ontario, California-based Prime Healthcare Services (PHS), a for-profit hospital chain that was investigated by the Department of Justice for Medicare fraud, founded Alecto. Reddy stepped down from PHS in 2012 after initial accusations of Medicare fraud and an investigation by the Department of Justice surfaced. In 2018 the PHS agreed to pay \$65 million for engaging in what the DOJ called a “deliberate corporate-driven scheme” to fraudulently bill Medicare. This amounted to a slap on the wrist for the multibillion-dollar chain that owns 45 acute-care hospitals around the country. Reddy deemed he would then start another for-profit hospital chain, Alecto Healthcare Services. He has since been named nine times by *Modern Healthcare* as one of the “50 Most Influential

Physician Executives,” and among the “25 Top Minority Executives in Healthcare.”

Last Thursday a rally was held outside of the Medical Center to demand the new owner, UCLA Health Services, keep medical services open. Olympia nurse Shenita Anderson told the gathered crowd that many of the hospital’s patients are low-income and unhoused, with some 40 percent of admittances being African Americans and 60 percent of patients over the age of 60.

Olympia serves a racially diverse working class community, and the forthcoming closure has everything to do with the profit considerations of Alecto and its shareholders. However, attempts have been made to portray the closure as a purely racial issue. Cathy Kennedy, vice president of the California Nurses Association told ABC7 News that “If this hospital were to close it would exacerbate the racial disparities we are seeing play out in this county during the COVID-19 pandemic.” Mark-Anthony Clayton-Johnson from Frontline Wellness Network also told ABC7 that the closure of this facility would be “devastating to Black, Latinx and indigenous communities who are dying at alarming rates.”

By focusing on race, the Democratic Party seeks to conceal the fact that the majority of the 470,000 US COVID-19 victims, whatever their ethnicity, come from poorer working class communities. According to statista.com, as of January 2021 the racial breakdown of the nearly half a million deaths stands at 60.7 percent White, 18 percent Hispanic/Latino, 15.6 percent African American/Black, and 3.6 percent Asian. Instead of outrage over the fact that the virus has been allowed to continue to rip through the entirety of the population, the proponents of this narrative focus on race, to conceal the vast class gulf in society.

According to a December 2020 report in *Becker’s Hospital Review*, at least 21 hospitals closed last year. Among them, multiple hospitals were closed in the states of Tennessee, West Virginia, Georgia, Kansas, Pennsylvania and Texas. The opening of the economy and the devastating closures of hospitals from urban Los Angeles to rural West Virginia are not the result of racist decisions but of profit considerations and, fundamentally, a product of the crisis of the capitalist system, which is indifferent to the preservation of human life.

In California, the Democratic Party led by Governor Gavin Newsom, is spearheading a broad reopening of the economy despite the rising death toll and resultant strain on the health care systems. This has included a push for reopening of schools and relaxed restrictions on businesses.

Health care workers have responded to these policies with grave concern and have begun linking up with educators

throughout the state to oppose the policy of school reopenings that threaten to ignite major outbreaks and push hospital systems far past the horrors of December and January. Health care workers and educators are natural allies who must unite together along with other sections of the working class, begin to build independent rank-and-file committees and join a national network of committees dedicated to policies that put human life and safety above profit considerations.

The calls for Olympia Medical Center to remain open must be accompanied by the demand that billions of dollars be injected into the crumbling hospital systems, new hospitals must be built, the most advanced PPE and protection provided for health care staff, with resources directed to the training and hiring of large numbers of health care workers to help provide the highest levels of patient care. Staffing and the organization of patient care must be under the control and direction of health care workers themselves. The trillions handed to the corporations through the ill-named CARES act must be seized and used to pay for these measures.

Educators in Chicago and beyond are fighting for their lives to keep schools closed. All sections of workers throughout the US and globally must come to their aid with an understanding that their struggles are one. If Chicago’s Democratic Mayor Lori Lightfoot, assisted by the Chicago Teachers Union, succeeds in forcing schools to open, the same awaits millions of children and their families throughout the country, which will further drive up the death toll and devastate hospital systems.

The ruling class is doubling down on its bipartisan policy of reopening and herd immunity, no matter the death toll. On the other side is the working class, which must begin organizing and uniting for a policy and program that puts human life above all considerations, including the profits of the financial elite. Nurses and educators in California and beyond must come to the support of Chicago teachers, build rank and file committees, and take up the demands that schools remain closed everywhere and full financial assistance be provided to workers, parents and small business owners to ensure they can stay home and protect themselves and their families. To learn about how to build a rank-and-file safety committee in your area or to join one already in existence, please visit wsws.org/edsafety.



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