

**Senate Health Committee
Oversight Hearing on Hospital Seismic Compliance
Wednesday, March 3, 2010**

Beth Capell on behalf of the Service Employees International Union

Madame Chair and members, thank you for the opportunity to testify today on this important topic.

As a union, in this state, we represent doctors, registered nurses, professional and technical workers, housekeepers, clerks: if someone works in a hospital, somewhere in California we represent them.

In California, we also represent over 700,000 workers and their families who expect that when an earthquake happens, their local hospital will be there to serve. No American, no Californian expects that what happened in Haiti will happen here.

In 1971, in the Sylmar quake, much of Olive View hospital, a LA County facility, collapsed into rubble. Our members worked in that building.

In 1994, in the Northridge quake, 2500 beds were put out of service just when we needed those beds the most. Twelve hospitals closed or curtailed services. Almost a thousand patients were evacuated. We represented workers in some of those hospitals.

Any hospital building that is not survivable in an earthquake was built prior to 1972, almost forty years ago. That building is not economically competitive, it is not energy efficient, it is not compliant with the ADA, it is not set up for modern medical technology, and it is fully amortized. It is in every sense an old building.

OSHPD has indicated that over 90% of hospital buildings are on track to comply with the existing requirements for seismic safety.

Over the last decade, SEIU has recognized that hospitals face both financial challenges and practical obstacles in coming into compliance.

We have advocated for the best science that engineering can provide. We supported the reclassification of hospital buildings using the updated HAZUS methodology.

We did not oppose Senator Cox' SB1661 which allowed hospitals that were under construction in 2013 to have until 2015 to complete that construction.

We did not oppose the SB306 package by Senator Ducheny which allowed for some extensions due to financial circumstances of private hospitals and which also allowed county hospitals needed time to come into compliance.

We continue to recognize that there are some hospitals, and some hospital systems, that face significant financial challenges in meeting seismic requirements, including those for the year 2013. We are particularly concerned by those hospitals that have faced truly severe financial problems, that are essential providers in their community and that also provide care in medically underserved areas to a high proportion of low-income individuals who rely on Medi-Cal or who are uninsured. In that spirit, we are willing to revisit SB306.

We are dismayed to note that a number of for-profit hospitals are not on track to comply---despite the fact that virtually every one of these hospitals has been purchased and even re-purchased by a for-profit operator since 1996. California law was changed to allow for-profit operators to purchase hospitals only in 1996—two years after the seismic retrofit requirements were put in place.

We have been particularly troubled by Prime Healthcare, a for-profit hospital system which now owns 13 hospitals in California, most of them seismically unsound. I have with me today Martha Alvarez, who works as a nurse aide at one of these hospitals, Centinela in Los Angeles.

Thank you.

If you have questions or seek more information, please contact Beth Capell, Ph.D., legislative advocate at (916) 497-0760.