KERN COUNTY EMS DEPARTMENT

HOSPITAL EMERGENCY SERVICES REDUCTION IMPACT ASSESSMENT REPORT

MERCY WESTSIDE HOSPITAL EMERGENCY DEPARTMENT

Final – June 9, 2003

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Director

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Overview:

The purpose of this report is to provide an assessment of impact to the public, community and local EMS system related to the planned permanent closure of the Emergency Department provided by Mercy Westside Hospital located at 110 East North Street in Taft, California. This report is provided in accordance with Kern County EMS Department - Policy 4200.5995 entitled Hospital Emergency Services Reduction Impact Assessment Policies, and Sections 1255.1 and 1300 of the California Health and Safety Code for General Acute Care Hospitals providing Stand-By, Basic or Comprehensive Emergency Services.

Elimination of hospital emergency services may have a profound impact on the emergency medical services system and can result in a threat to public health and safety. Thorough public education is indicated for a permanent Emergency Department closure to ensure that people requiring emergency services do not go to a hospital that is not qualified to provide emergency services. In fact, much of the process required by Sections 1255.1 and 1300 of the California Health and Safety Code is intended to provide a complete public disclosure of permanent Emergency Department closure.

A hospital does have the ability to voluntarily surrender it's special permit for basic emergency services to the Licensing and Certification Division of the California Department of Health Services, which is the issuing agency. A General Acute Care Hospital is not required by the California State Department of Health Services to provide a basic, stand-by or comprehensive Emergency Department.

Unique to this situation is that Mercy Westside is a rural hospital providing stand-by emergency services. The planned permanent closure of the stand-by Emergency Department means that patients in the area requiring hospital emergency services will have to be transported to an Emergency Department at least forty-five (45) minutes in travel time away.

This report is intended to provide an objective analysis of the planned permanent closure of the Mercy Westside Hospital Emergency Department with available data and to provide public disclosure related to potential impact to the public. This report is also intended to provide appropriate notification to providers and the public, and to allow time to adjust EMS system resources to mitigate risks to the public when possible.

Notification of Emergency Department Closure:

Mercy Westside Hospital provided a complete written notice of the closure of the Emergency Department to the Kern County EMS Department (Department) on April 11, 2003. An initial written notice received April 7, 2003 did not have sufficient content in accordance with policy. Based upon the April 11, 2003 notice, the Mercy Westside Hospital Emergency Department can be closed on or after July 11, 2003 in accordance with statutory time limits.

In accordance with Kern County EMS Department - Policy 4200.5995 entitled Hospital Emergency Services Reduction Impact Assessment Policies, the following information is required to be provided in the written notice. The following provides excerpts from the Mercy Westside Hospital written notice in accordance with each of the requirements:

a. The name of the hospital;

Mercy Westside Hospital

b. The effective date and time of the pre-planned reduction or elimination of emergency services;

July 7, 2003, 12:01 a.m.

c. A specific, itemized description of services currently provided and pre-planned changes;

"Mercy Westside Hospital currently offers standby emergency services and plans to eliminate the standby emergency medical service at the hospital."

d. The reason(s) for the elimination or reduction;

"Continued financial losses and anticipated closure of the acute care facility."

e. Description of local geography, surrounding services and the annual average volume of emergency services patients received by ambulance, interfacility transfer, private vehicle or walk-in;

"Local service area includes: Taft, Ford City, Fellows, Maricopa, Cuyama, Derby Acres, Valley Acres, Dustin Acres.

Hospitals in the surrounding area include: Mercy Hospital (Southwest campus), Mercy Hospital (Truxtun campus), Memorial Hospital, San Joaquin Hospital, Kern County Hospital, Good Samaritan Hospital, Marian Medical Center.

Annual average patients received by ambulance is 812; intra facility 0; vehicle or walk-in 5456. Approximately 650 of these patients are eventually transferred to other acute care facilities, generally because they require a higher level of care than is available at Mercy Westside Hospital."

f. Description of the potential impact on the EMS system regarding patient volume and type of prehospital and emergency department services available, including a pre-implementation and post-implementation comparison;

"Patient Volume – Little or no impact on overall net volume in the system.
Pre hospital and Emergency Department. Services currently available – See response to item "e." above.
Post implementation – Patients would be required to access hospitals and emergency departments in Bakersfield for standby emergency services. There is potential for an increase in 911 calls and ambulance utilization. Any calculation of increase in patient volume to area hospitals should be decreased by approximately 650 to reflect the number of patients currently transferred from Mercy Westside Hospital to area hospitals."

g. Description of the potential impact to the public regarding accessibility of comparable alternative facilities or services, including a pre-implementation and post-implementation comparison;

"Pre implementation – No impact as the Mercy Westside Hospital emergency department will remain fully functional until closure.
Post-implementation – Patients would be required to access hospitals and emergency departments in Bakersfield for services. There is potential for an increase in 911 calls and ambulance utilization. Patients who currently seek care at Mercy Westside Hospital prior to transfer to other area hospitals will now generally seek care directly from area hospitals with capacity to provide the level of service required."

h. Reporting party name, mailing address and telephone number.

"Timothy Moran, 2215 Truxtun Avenue, Bakersfield, California, 93301; (661) 632-5537."

Description of the Proposed Change:

Mercy Westside Hospital plans to discontinue Stand-By Emergency Services provided to the public on July 11, 2003. Currently, Mercy Westside Hospital provides the capacity of four (4) Emergency Department beds, physician and nursing staff, and is an authorized Receiving Hospital for Kern County. As a General Acute Care Hospital with a special permit for Stand-By Emergency Services, Mercy Westside Hospital is authorized to receive patients in the Emergency Department by private vehicle, walk-in, ambulance, physician referral, and by interfacility transfer.

Additionally, as a General Acute Care Hospital with a special permit for Stand-By Emergency Services, Mercy Westside Hospital is obligated to provide a medical screening examination and emergency care to all patients received by the Emergency Department, irrespective of any patient ability to pay for such services.

Upon discontinuance of Stand-By Emergency Services, Mercy Westside Hospital would not be licensed to provide emergency services for the public. The community will incur Emergency Department bed capacity loss of four (4) Emergency Department beds, which is 100% of the total Emergency Department bed capacity in the Taft area. The next closest Hospital Emergency Department is in Greater Bakersfield, roughly forty-five (45) minutes in travel time away from the Taft area. Furthermore, it is expected that the entire hospital as an acute care facility will be closed in addition to the Emergency Department as described in the notice.

In summary, the proposed change is significant and will place a greater burden on the EMS system. Although most high acuity patients are transferred to Greater Bakersfield from Mercy Westside Hospital, loss of the Stand-By Emergency Department to provide initial patient stabilization prior to transfer creates a significant public health and safety risk.

Cited Reasons for the Proposed Change:

Mercy Westside Hospital administration notes significant financial losses, limited use of hospital admission capacity and eventual closure of the entire General Acute Care Hospital as reasons for closure of the Emergency Department. Other reasons are not specified in the written notice.

Mercy Westside administration has indicated that the local hospital district may have sufficient funding to offset the continuing financial losses and negotiations are underway to determine if sufficient funding can be redirected to keep the General Acute Care Hospital and the Emergency Department open.

Geographic and Demographic Considerations (relative to facility isolation and type of services available including service area population density, travel time and distance to the next nearest facility, number and type of other available emergency services, and availability of prehospital resources):

Mercy Westside Hospital primarily services the population of communities in western Kern County including Taft City (6,400), Ford City (3,512), South Taft (1,898), Taft Heights (1,865), Maricopa City (1,111), Dustin Acres (585), Valley Acres (512), Derby Acres (376), Tupman (227), McKittrick (160) and Fellows (153) with an overall resident population of 16,799 [1] people.

It is important to note that a significant population of workers for oilfields and oil production/distribution facilities commute to the Taft and surrounding areas daily which are not included in the resident population data. To an undetermined extent, Mercy Westside Hospital also services some resident population originating from surrounding counties of San Luis Obispo (California Valley), and Santa Barbara (Cuyama and New Cuyama).

Mercy Westside Hospital is located within the City of Taft and is the only General Acute Care Hospital in western Kern County. Five (5) other General Acute Care Hospitals licensed to provide Basic Emergency Services exist in Greater Bakersfield including San Joaquin Community Hospital, Mercy Hospital, Bakersfield Memorial Hospital, Kern Medical Center and Bakersfield Heart Hospital. Mercy Southwest Hospital and Good Samaritan Hospital are General Acute Care Hospitals in Greater Bakersfield that are not licensed to provide Comprehensive, Basic or Stand-By Emergency Services. One (1) General Acute Care Hospital licensed for Basic Emergency Services, Delano Regional Medical Center, is located in Delano. Three (3) other General Acute Care Hospitals licensed for Stand-By Emergency Services are located in Mountain Mesa (Kern Valley Healthcare District), Tehachapi (Tehachapi Valley Healthcare District) and Ridgecrest (Ridgecrest Regional Hospital).

The center of Taft City is 39.1 miles distance in roadway travel from the center of Bakersfield City with Mercy Hospital currently providing the closest Basic Emergency Services Emergency Department in ground travel time from the Taft area. Taft is currently covered with two (2) Paramedic Ambulances provided by Hall Ambulance Service on a 24-hour basis. The closest Air Ambulance is provided by Hall Ambulance Service based at Meadows Field – Bakersfield. Air Ambulance flight time to the area (after lift-off) is roughly 18 minutes. Two (2) Fire Departments provide EMT-1 First Responder services to the area including the Taft City Fire Department and Kern County Fire Department. Both Fire Departments provide EMT-1 Defibrillation and EMT-1 Combitube (an advanced patient airway device) level of service.

[1] *Census 2000 Report Data*

Map Illustrating Taft & Mercy Westside to Greater Bakersfield General Acute Care Hospitals with Basic Emergency Services:

It is expected that the emergency patient population previously serviced by the Mercy Westside Hospital Emergency Department will predominately be shifted to San Joaquin Community Hospital, Mercy Hospital, Bakersfield Memorial Hospital, Bakersfield Heart Hospital and Kern Medical Center in Greater Bakersfield with a significant difference in travel time and distance.

Prehospital resource availability from the western Kern County area will be negatively affected by the emergency patient shift to hospitals in Greater Bakersfield based on the extended travel distance and prolonged time for return to the service area. It is expected that ground Paramedic Ambulance resources will need to be increased in the area. Higher acuity patients will likely require Air Ambulance transport when available, likely involving an increased use of Air Ambulance resources.

It should be mentioned that historically, most higher acuity patients received by Mercy Westside are transferred to a Greater Bakersfield Hospital Emergency Department. Mercy Westside has a relatively high outgoing interfacility transfer volume on an ongoing basis. Therefore, a shift in higher acuity patient volume to Greater Bakersfield Hospitals is expected to be minimal. The shift in lower acuity patients to the Bakersfield area hospitals will create an additional burden.

Year 2002 EMS related patient demand data for the areas primarily serviced by Mercy Westside Hospital is as follows:

Ambulance Data Year 2002 [2]:

Area Overall EMS Call Volume: 1,727 (all calls - including transfers, dry runs)

Area Prehospital Transport Volume: 892

Area Prehospital Transports to Mercy Westside E.D.: 697

Area Prehospital Transports to Another E.D.: 195

Interfacility Transfers from Mercy Westside: 472

Hospital Data:

Patients Received by Walk-In or Private Vehicle (annual average [3]): 5,456

Based upon available data, roughly 700 patients requiring ambulance transport would be subjected to prolonged transport times to access an Emergency Department. Further examination of the prehospital data indicates 202 higher acuity patient cases where the prolonged transport time to an Emergency Department could constitute a significant risk.

From hospital data on patients received by walk-in or private vehicle, the annual average of 5,456 patients seen by the Emergency Department is a significant concern. It is presumed that a significant number of these patients would seek medical care from clinic and physician office resources in the area. Of significant concern would be patients, especially those with underlying and unknown life-threatening emergency medical conditions, deciding to travel to Greater Bakersfield for Emergency Department level care.

Base Hospital Designation (number of calls, impact to patients, impact to prehospital personnel, impact on other hospitals):

Mercy Westside Hospital operates as an authorized EMS Receiving Hospital and is not an authorized Paramedic Base Hospital. Therefore, Paramedic Base Hospital Designation has no bearing or impact related to Mercy Westside Hospital Emergency Department closure.

[2] *Source: Kern County Patient Care Record Database*
[3] *Source: Mercy Hospital*

<u>Trauma Care</u> (number of trauma patients, impact to other hospitals, impact to trauma centers, impact to trauma patients):

Mercy Westside Hospital is not a designated Trauma Center, but is an important participant in the inclusive Kern County Trauma Care System. Most higher acuity trauma patients that meet Trauma Care System Activation Criteria are transported direct to Kern Medical Center, the closest Level II Trauma Center in Bakersfield. Prehospital Patient Care Record data for 2002 indicates that a total of 160 trauma patients were transported to Mercy Westside Hospital Emergency Department from the area. For the same time period, thirty-four (34) trauma patients met Kern County Trauma Care System Activation Criteria, two (2) of which were transported to Mercy Westside Hospital and thirty-two (32) of which were transported directly to Kern Medical Center.

The shift of trauma patients meeting Kern County Trauma Care System Activation Criteria to other hospitals will be insignificant. However, the shift of trauma patients that do not meet criteria to other hospitals could be considered significant. Certain types of critical trauma patients can benefit from immediate Emergency Department intervention and prompt transfer to a Trauma Center, but these cases occur relatively infrequently. In most cases, there is a greater benefit for a critical trauma patient to be transported directly to a Trauma Center.

<u>Specialty Services Provided</u> (for example – neurosurgery, obstetrics, burn center, pediatric critical care; and the next closest availability of the specialty service):

Mercy Westside Hospital does not provide any of the specialty services as described in this required impact report topic. However, Mercy Westside currently provides the only Emergency Department in the area.

<u>Patient Volume</u> (number of emergency service patients received annually by ambulance, interfacility transfer, private vehicle or walk-in):

Year 2002 EMS related patient demand data for the areas primarily serviced by Mercy Westside Hospital is as follows:

<u>Ambulance Data Year 2002 [2]</u>:

Area Overall EMS Call Volume: 1,727 (all calls - including transfers, dry runs)

Area Prehospital Transport Volume: 892

Area Prehospital Transports to Mercy Westside E.D.: 697

Area Prehospital Transports to Another E.D.: 195

Interfacility Transfers from Mercy Westside: 472

[2] *Source: Kern County Patient Care Record Database*

Hospital Data:

Patients Received by Walk-In or Private Vehicle (annual average [3]): 5,456

[3] *Source: Mercy Hospital*

Summary of Negative Impact Evaluation Results:

Mercy Westside Hospital Emergency Department closure will result in a significant impact, especially for patients in Taft and surrounding communities of the Westside area requiring immediate Emergency Department level intervention. The variance in transport time of forty-five (45) minutes or more to the next closest Emergency Department in Greater Bakersfield is a significant concern for higher acuity patients. This creates a risk to public health and safety compared to services currently provided.

Mercy Westside Emergency Department closure will place a greater burden on prehospital EMS resources in the area and increase the demand for Air Ambulance utilization. Because of the relatively high volume of interfacility patient transfers, impact to other General Acute Care Hospital Emergency Departments is expected to be generally minimal.

The reality in fiscal constraints to maintain hospitals in rural areas is an ongoing challenge. We are hopeful that a cooperative effort between Catholic Healthcare West, Mercy Westside, the Westside Hospital District and local communities can provide results to maintain this important resource for the public.

Impact Mitigation Options:

The limited options for impact mitigation are:

1. Public and medical provider education related to the changes planned by Mercy Westside Hospital;

2. Coordinate changes with prehospital EMS providers to include Fire Departments (Taft City Fire Department, Kern County Fire Department), Ground Ambulance Service (Hall Ambulance Service) and Air Ambulance Service (Hall Ambulance Service); and

3. Inform General Acute Care Hospitals in Greater Bakersfield.

It should be noted that unless a cooperative agreement is reached to retain the Stand-by Emergency Department at Mercy Westside Hospital, the negative impact to the public cannot be realistically mitigated or lessened.

<u>Department Action Plan</u> (which includes EMS System strategies for accommodating the reduction or loss of emergency services and a process for public education):

The Department action plan is limited due to minimal statutory authority over this subject. Furthermore, the Department is not in the position to deny permanent closure of the Mercy Westside Hospital Emergency Department. The Department will request that prehospital EMS providers examine the increased demand on prehospital EMS resources and take actions necessary to reduce impact to prehospital EMS resource availability. The Department Action Plan is as follows:

1. Complete the impact report in final draft and refer to a wide distribution of local government agencies, public agencies, public and private medical providers.

2. Schedule and promote the public hearing to receive public comment regarding the Emergency Department closure and the draft impact report.

3. Provide a review of the impact report during public hearing and collect public hearing comments to include in the impact report.

4. Finalize the impact report and issue to the California Department of Health Services and the California EMS Authority.

5. Issue a request to prehospital EMS providers to mobilize resources necessary to minimize negative impact on prehospital resource availability for the public.

6. Provide public information related to the change through the media.

7. Post the impact report on the EMS Department Web Site.

8. Monitor and evaluate actual impact after Emergency Department closure.

<u>Recommendations for Action</u> (Department determination of whether the request for downgrade or closure should be approved or denied based on the results of the Impact Evaluation Report):

There is no State or local requirement for a General Acute Care Hospital to provide Comprehensive, Basic or Stand-By Emergency Services. Mercy Westside Hospital has indicated that once the Emergency Department is closed, the General Acute Care Hospital will also be closed.

The California Department of Health Services has clarified that the special permit for Stand-By, Basic or Comprehensive Emergency Services issued to a General Acute Care Hospital is voluntary and may be surrendered by a hospital. The California Department of Health Services has also indicated that they would not likely be in a position to deny surrender of the special permit for Stand-By Emergency Services by Mercy Westside Hospital.

Although the Department acknowledges the fiscal concerns, from a public service perspective, the Kern County EMS Department does not support closure of the Mercy Westside Hospital Emergency Department.

Exhibit A

Public Hearing Feedback on the Proposed Change

Public Hearing – Emergency Department Closure by Mercy Westside Hospital (Taft) & Draft Hospital Emergency Services Reduction Impact Assessment Report
Wednesday, May 21, 2003, 3:00 p.m.
Kern County Emergency Medical Services Department
Location: West Side Recreation and Park District
500 Cascade Place, Taft, CA 93268

I. Introduction by David Baumstark, EMS Department Director:

Welcome everyone. This is the public hearing regarding the planned Emergency Department closure by Mercy Westside Hospital, location at 110 East North Street, Taft. We begin with introductions. My name is David Baumstark, Director of the EMS Department for the County. Russ Blind and Julie Bycott are with the Department as well. There are also a few individuals I would like to point out in the audience among us: Ray Hatch, Mayor of the City of Taft; Kern County Fire Chief Steve Gage; Becky Napier, City Manager of Taft; and Bernie Heimos, Taft Fire Chief. We also have at least one media representative, Peter Rooney up here from KUZZ.

The purpose of this meeting is to receive public comment for the record, it is required by statute for our Department to conduct this meeting. Comments will be included in the Impact Reduction Assessment Report, which will be submitted to local government and the State Department of Health Services. Although the EMS Department acknowledges that fiscal concerns facing Mercy Westside, we do not support the prospective closure. However, the Department has no authority to deny it.

II. Overview of Draft Hospital Emergency Services Reduction Impact Assessment Report:

We do have about 50 copies of the Draft Reduction Impact Assessment Report. We will not take time to read through the body of the report, but the Department will make a few comments. We are very concerned about the potential impact to the public due to extended transport travel time to an emergency department in greater Bakersfield, if in fact Mercy Westside Emergency Department closes. We are also concerned about the impact to the emergency medical resources here, ground and air, and the increased necessary use of air ambulance resources. We are actually hopeful that CHW Mercy and Westside Healthcare District, the City of Taft, and the public can collaborate together to reach some conclusion and solution to keep this emergency department open. We believe it is a critical resource for the Westside area.

It has been communicated to our Department, by the Chairman of the Westside Healthcare District, that the District has submitted to CHW Mercy a Letter of Intent to repurchase the hospital. However, at this point, negotiations are underway and no conclusions have been reached. In fact, nothing has developed at this point to prevent the closure at the scheduled date. Based upon the April 11, 2003 notice to the Department, Mercy Westside Hospital Emergency Department can be closed on or after July 11, 2003 in accordance with statutory time limits. It should be mentioned that historically most higher acuity patients received by Mercy Westside are transferred to a greater Bakersfield hospital emergency department. Therefore, a shift in higher acuity patient volume to greater Bakersfield emergency departments is expected to be minimal. A shift in lower acuity patients to Bakersfield hospitals will create an additional burden.

III. Public Hearing Instructions:

I would like to give a few instructions about how the hearing will be conducted. We will have an opportunity in just a moment for questions about the conduct of the hearing. First, to maintain the integrity of the recording, and you will be recorded in your comments, both by machines here and individually on paper, to be incorporated into the impact assessment report. To maintain the integrity of the recording, only one person will be allowed to speak at a time. We cannot allow any debates going on, for two reasons. It is not really in the spirit of decorum for debates, and secondly, one person would probably not be picked up by the microphone, for the record. Each speaker will be allowed no more than five minutes and will be allowed to speak only once. Each speaker must identify yourselves, your address, and your organization if appropriate. Please speak slowly and clearly, because as the tape is rolling, and we transcribe that tape, we need to be able to hear your words exactly. Please refrain from applause or other signs of support or opposition to statements being made. And any written comments that you have can be submitted either in hard copy or you can e-mail those to us, preferably e-mail, because we can cut and paste and put it in the report. Those can be given to us after the meeting.

We will close the hearing at precisely 5:00 p.m. or allow that last speaker their five minutes, unless all comments have been received prior to that time. It could be that we end sooner. I will make a comment as the speaker approaches the four-minute mark, that you have one minute left, just out of courtesy so you know you have a minute to wrap up. Are there any questions?

IV. Open Public Hearing:

A. *Alberta Dougherty, Kern County Sheriff's Department, Taft Substation, 315 Lincoln Street, Taft*. My name is Alberta Dougherty, I am a commander in charge of south area substations, which encompasses the response area for the Taft community and Maricopa community. I would also like to introduce Sgt. Otis Winery, he is the Sergeant in charge of the Taft substation area. Given that we have many citizens who are concerned and other emergency response personnel, there are so many collateral issues involved in this, we could snowball our issues here. So what I chose to introduce are the surface impact for the Kern County Sheriff's Department from the law enforcement side, how we feel this will impact our operation. The closure of this facility will have a critical impact on the Kern County Sheriff's Department's operation. When a subject is arrested in this community area, or a surrounding area, and they have potential medical problems, they have to be medically cleared before we can book them into our reception facility. Given the fact that we operate the Taft substation pretty much on minimum staffing levels anyway, we almost all the time use the Taft Police facility, their holding facility, to book our prisoners in so that our officers can get back on the street. We have minimal downtime at the current medical facility, and operationally it is very good for our location given that we are a rural area so far away from other facilities. If we were to shut this facility down, minimal downtime for my officers if they had to have someone that was medically cleared, just to get to Bakersfield and back without even the medical clearance at Kern Medical Center, would be two to three hours. Depending on the potential medical problem, that we need cleared in order to get the people booked into our central receiving facility in Bakersfield, you have the potential for putting one of my patrol officers off the street in the community and in Bakersfield for three to eight hours. That is a full shift. And if you didn't wipe out my entire staff at the time, if I only had one on at the time, which occasionally we do, generally we'll average two to three, but if you take one officer out of the community for the Taft substation, you have just depleted my manpower for safety response to the citizens by 50 percent. We also use the hospital for blood

and drug testing for suspects. Again, you can imagine how many alcohol and drug related, if you read the newspaper our here, you know how, whether we like it or not, we have an active drug community, but this is not just isolated to Taft, it is generally everywhere now. But we make a lot of drug arrests and alcohol arrests. So for every arrest that you have to get a blood or urine from, you are going to have to go to Bakersfield. Again, I go back to the time down, because you are taking an officer out of the area. Normally, a drug or blood screen will take less than half an hour, 45 minutes, if the emergency room is not busy. And then the officer is back on the street as soon as he hands over the prisoner to the Taft Police Department holding facility. Now, if we have victims of crimes, if you have a victim that has been injured [ONE MINUTE NOTICE] victims of crimes, we interview them here. They would have to be interviewed at Kern Medical Center. Say we had one of our emergency personnel that are injured, you've got that golden hour you're dealing with, everything has to go to KMC and you have 45 minutes just to get to KMC, and I really believe that we're going to have a catastrophic event and we're going to lose lives if this facility is closed, and I'd hate to think it was one of our citizens, but it would touch me dearly to have it be one of our emergency personnel and I'm telling you it will be. And backup officers, relief officers, callout officers, if we have to call someone out if we have the time to call someone out, your response time is 30 to 45 minutes before I can get someone else on duty. So, I don't know if you remember Rick McCale, but I think we're looking, he was an officer that was killed because of manpower shortages and unavailability of backup. [WRAP UP NOTICE] Thank you. It's critical and I don't want to see another Rick McCale scenario in this town. Thank you very much.

David Baumstark: Just for clarity, once again, the Department's role in this is just to facilitate your involvement in the process, your ability to make comments to become part of the public record. I understand that the comments, when sometimes the word "you" is used, it's editorializing. Our Department is not in favor of this, and we don't have the authority to deny it, either. I just wanted to say that for clarity, that our Department is facilitating your discussions. Thank you.

B. *Charles Walker, Dentist, 700 Center Street, Taft*. There are five general dentists here in town, and two orthodontists. That makes seven, sometimes eight or nine, depending on specialists that are coming into town. My concern is that dental offices have medical emergencies. They're not common, but they do on occasion happen, and we do utilize our local hospital when these medical emergencies arise. My concern is that one of these medical emergencies is going to occur and we are going to have someone potentially lose their life because of the transport time over to Bakersfield. That is a likely scenario to happen. Adverse reactions to some of the medications that we use, there are several scenarios, aspirating on dental material can cause a loss of life or a serious medical condition that could otherwise be taken care of here locally. I have talked to several of the other dentists in town, and we are concerned. I would not feel as safe working on my patients here in town without that emergency room available. It would be a real concern to me. That's all I have to say.

David Baumstark: We would request that all your cell phones, pagers, devices of that nature be put on stun or buzz, instead of ring, just for the courtesy of the speaker, and if you do in fact get a call, and you would like to take that call, by stepping out, you preserve the speaker's comments on the tape.

C. *Bernard Heimos, Fire Chief, Taft Fire Department, 801 Center Street, Taft*. Good afternoon, my name is Bernard Heimos. I am the fire chief for the City of Taft Fire Department. On behalf of the population served by the City of Taft Fire Department, I would like to express my appreciation for allowing the department's input on this matter. I am here today to provide some additional insight into the negative effects of closing Mercy Westside Hospital. The Kern County EMS Department report of May 8, 2003 does a comprehensive job of outlining the spectrum of impacts affecting the communities served by the hospital. Most notably on page 5 of the report four references are made. I would like to define how those four points affect the Taft City Fire Department charged with first responder responsibilities:

1. *The emergency room patient population currently served by Mercy Westside will be predominately shifted to 5 hospitals in the Greater Bakersfield area*. There were 5,456 walk-in patients last year at Mercy Westside. Once the hospital is closed a portion of those patients will be utilizing the 911 system for their pre-hospital care and transportation needs. While the Taft City Fire Department currently has the capacity to handle a portion of the potential patient increase, ultimately that capacity will be reduced to a point where additional staffing will be required in order to maintain response time and patient care standards. The additional cost of staffing translates into a financial burden on the city and its taxpayers.

2. *Pre-hospital resource availability from the western Kern County area will be negatively affected by the emergency patient shift to hospitals in Greater Bakersfield based on the extended travel distance and prolonged time for return to service area*. There are two significant impacts to the Taft City Fire Department: a) Firefighters regularly ride with Hall Ambulance Paramedics to assist en route to the hospital. Seventy percent of our current hospital transports are to Mercy Westside. When that hospital closes your firefighters will be required to carefully assess the impact on the levels of staffing in town before assisting on a minimum two hours round trip to Bakersfield. b) This situation is further complicated by the fact that Hall Ambulance may not be able to return our firefighters immediately to the fire station. This would reduce our staffing levels for a prolonged period of time and will likely require the additional cost of recalling off-duty or paid-call personnel. Keep in mind, as we operate today with the hospital open, this is not an issue.

3. *It is expected that ground Paramedic Ambulance resources will need to be increased in the area*. It is not uncommon for simultaneous alarms to occur in our service area. With 80% of the fire department's alarm responses as medical aids, we feel certain additional paramedic units will be needed to sustain the same response profile we have today.

4. *Higher acuity patients will likely require Air Ambulance transport when available; this will likely involve an increased use of Air Ambulance resources*. Patient stabilization and rapid transport to an appropriate medical facility are the key components of successful pre-hospital care emergency medical responses. Clear-cut diagnosis of symptoms to determine the appropriateness of Air Ambulance services presents unnecessary complications to critical patient care. We, in the fire service, would rather error on the side of being conservative, than under diagnosing a symptom. There is no question in our minds that when we are in doubt about the successful outcome of rapid transportation of a patient, we will call for Air Ambulance.

In closing, to respond to the question, "Can the Taft City Fire Department maintain a level of service equal to what we enjoy with Mercy Westside Hospital?" The answer is "Yes," but with additional staffing costs and concerns for the eventual outcome of our patient's long-term prognosis. Thank you and I will provide a transcript of my comments to facilitate their inclusion into the record.

D. *Bob Connick, 27509 Acacia, Taft*. I've been here since 1941 and I have had heart problems and I have been in this hospital. I have used this hospital because of the heart. Without it, I might have been dead. And if we close it, with the response time to Bakersfield, it would have happened. So that's exactly why I feel that it's a necessity to have our hospital and have it operating. And there's something else I was curious about is what happened, what did they do with the money that we were supposed to have gotten from Mercy Southwest when they bought this hospital? And nobody seems to give me an answer. And that's why I'm here. Thank you.

E. *Richard Connick, 205 4th Avenue, Taft*. I am also a safety engineer out here in this petroleum field. If we do not have this hospital, I can guarantee with the industrial accidents that the west side has had in the last five years, the death toll will climb to 98%. I back the City Fire Department and I also back the Kern County Fire Department. I also back my father. My father had four heart attacks back to back. And if it wouldn't have been for this Taft hospital, I would have buried him back in 1994. If anybody can close this hospital, or if anybody does, this town and this district and everybody involved is dumber than a damn box of rocks.

F. *Wilma McElmurry, 400 Pierce Street, Taft*. I've been here since God, I think. I've had two surgeries in this hospital, I've had two strokes, and a heart attack. If it hadn't been for the Fire Department and our hospital, I wouldn't be here today. I went into seizures and they prepared me for Bakersfield. Otherwise I would have never made it. I can't for my life understand, and I mean this hospital is a business, losing that much money and not doing something about it. Why not start at the top, not with the peons, start at the top and do away with some of the big price operators. We don't need those. Nobody, everybody can do exactly what they're doing. Then another thing is their billing. Why is it done in Bakersfield? Why isn't it done here so it'll get out within two months to three months, instead of a year? Bakersfield, a man told me just the other day that he got a bill one year after he was in this hospital. That is all uncalled for. We need our own staff to where they can bill within at least a month after we've been in the hospital, to where they'll have the money to work on. I go every week, at least every two weeks, for a blood test, which I have a condition that my blood clots too fast, and if I don't get this, then I'm doomed. And if it closes, I'm doomed anyway, because I will not go to Mercy in Bakersfield. Thank you.

G. *Dan Caulfield, 717 Vista View, Taft*. My comments would be primarily for the workers in the area, besides the folks that live here on the west side. There are at least a couple hours worth of folks every morning and in the evening that come to the area and there's just a ton of people working the oil patch and I made about 30 years in the oil fields myself. Used the hospital a time or two, got banged up, that happens. I, we, would have had to run to Bakersfield, it could be real meaningful if you're hurt real bad. For the safety issue, for the oil companies, I can't imagine that they won't have some input if they're aware of the closure, these major companies, I worked for Standard which is Chevron now, they were very, very interested in the hospital, we used it all the time. The doctors for our physicals and the hospital for emergency forever. I

can't imagine they wouldn't support a tax increase to facilitate the hospital staying open. There are hundreds of men in the field that this is important to, should be considered, besides the people in the community, which the community has grown and there's a lot of people here since I came, and I came in the sixties. I just can't imagine getting along without it, the ranchers and farmers and there's a great deal more farming and farm workers as well. I know to go to the emergency room here is maybe an hour at the longest, I've never waited that long. We've had our family in there, elderly parents and so on. Thirty-minute wait at the worst if you're really hurt bad get right in. You can't do that in Bakersfield. We sat with our mother for ten hours in Bakersfield, just trying to get a bed. Had her on a gurney in the hall, it was pitiful. Taking the extra people from here to Bakersfield, I can't see that's an improvement or not going to downgrade their community function there. They're hurting so bad over there already I can't imagine closing this, might be a real mess. But we need the hospital and I know you guys feel the same, but we desperately want to keep it. We want to work to keep it open. Thank you.

H. *Terri Jordan, Nurse, Taft City School District, 8 Gray Way, Taft*. I'm here today representing Taft City School District as a registered nurse. I've also been employed by Taft Hospital and a hospital in Bakersfield, and I also do home health. What the School District would like me to have recorded today is the fact that we have 2,265 children in our school district, that's just Taft City School District. That's kindergarten through eighth grade. Out of those 2,265 children, we have approximately 350 children with asthma. Everybody knows asthma is a major health issue for children and we have a diabetic in our district that is insulin dependent. We rely on the hospital, we have several epileptics, probably close to one hundred epileptic children. That's not including the preschool district and that's not including the high school district. So we have chronically ill children there attending school everyday. We rely on that hospital to be able to send those kids to an emergency. A lot of these children have got parents that work and when it comes time to get a hold of them in an emergency, we're not always able to contact them. We have written permission from the parents to take the children to the hospital at the discretion of the nurse, and I have done that multiple times, ridden in the ambulance or followed the ambulance to the hospital. If we've got to put those kids in the air ambulance or we've got to haul them to Bakersfield, not knowing when we leave here which hospital they're going to end up at, I think it's really going to impact the lives of these kids. We probably send on an average everyday probably 10 children home to seek medical attention of some kind. I know if we send them to their regular doctor and they need x-rays, they may have to go to Bakersfield. I know one month alone, we had probably, we had 20 broken bones in November and all of them required those children to be seen at our local hospital to get x-rays. Sometimes it's not always something that can wait to get to Bakersfield. We have several children that have severe allergies, they're allergic to nuts. Well, you can't totally keep a school district from having nuts. You have a kid at the table next to them that's eating peanut butter and they're severely allergic to peanut butter. And if they get exposed to that, they have a severe life-threatening reaction immediately and they need help now. We have kids, like right now, we're coming up with kids that are allergic to bees, or wasp stings. That's a life-threatening emergency and it needs to be taken care of right away. You have those kids and what you're saying is you're going to take these 2,265 kids and now they're going to have a 45-minute wait for a potentially life-threatening problem. We have our fire department here and they're wonderful to respond and they're trained well. But there again, like the Fire Chief was talking, he said that fireman, that paramedic, in the ambulance with that child, you're taking a child out of town, maybe without a parent, you're taking a firefighter out of town away from his job, and putting the lives of other people in danger so that he can go with them so that child can get better care. So, it really, I

think it's going to be a great impact on our kids. We also have Taft hospital is our hospital for our district employees, which there are probably between 250 and 260 district employees, and we have had to use the hospital on numerous occasions for injuries for our employees. Falls, different injuries or illnesses. It's going to affect a lot of people. [ONE MINUTE NOTICE] Also speaking from an employee of the hospital, I think our hospital has done a great job. I am always proud to say that I worked at Taft hospital. It was for a very short time before I came to this school district and I thought they did an excellent job and I always recommend my parents that don't run them to Bakersfield, take them here, they need to be seen right away. A lot of times that's what it is, they do need to be seen right away, and I really just hate to see those kids have to wait 45 minutes to get to Bakersfield, I think it's just too long in some cases.

I. *Maryanne Hawkins, Taft College, 5 West Park Way, Taft*. I am here today representing Taft College, Transition to Independent Living Program. Taft College has a very special program, the only one of its kind in the nation. We have adults with developmental disabilities travel from all over California to attend Taft College to learn how to live independently and to learn social skills so that they can be successful members in the community. We have had several emergencies. Along with their cognitive deficits, they also have many health deficits. The biggest ones being congenital heart failure and epilepsy. Myself have been to the hospital with my students on at least eight occasions for epileptic seizures. On three occasions, I watched three different students turn blue, which means that they were dying and needed to get to Taft hospital. There is no way that the ambulance nor myself could have got them in time. When adults live independently in their own home and they have a disability, they often do not recognize when symptoms are serious or when they're not. So by time, they decide that they need to call someone for help, often it's too late. The other is that if we lose the Taft hospital here there is no way that we can console parents that Taft is a good place to send your young sons or daughters with a disability to gain an education because there is no way that we can guarantee that we could address their special health needs. And so it would be a real deficit to the Transition to Independent Living Program along with all the adults in Taft with special needs who have epileptic seizures, severe asthma attacks, any kinds of cuts or lacerations that they cannot address themselves. So it would be severely detrimental to Taft College if the hospital closes.

J. *Edie Dooty, Mercy Westside Hospital, 110 East North Street, Taft*. I'm here representing all my co-workers who are working at a hospital and also our facility skilled nursing on Ash Street. We are very concerned about the closing of this hospital. Patient cares are very important and very critical to us. Not a single day goes by we don't see anybody fell, have a big cut, or somebody have a seizure or a little attack. Our emergency is right next door. It's very critical to our community and all our elders, is about 80-90% of elderlies we are serving in both facilities from our surrounding community. Therefore, we are very concerned. We like to keep this hospital open for the sake of our loved ones. Thank you.

K. *Becky Napier, City Manager, City of Taft, 209 East Kern Street (home 400 Hillard Street), Taft*. Today I'm speaking primarily for the Police Chief, Chief Humphrey could not be here this afternoon. So I just have a few thoughts from him, some of them are going to be repeats of Sergeant Dougherty. When the Taft Police Department arrests a drunk driver, by law he or she must be given three options to test for blood alcohol content. One of those options is a blood test. Currently, if a blood test is chosen, Taft Police Department takes the individual to Mercy Westside Hospital. If the hospital closes, the Department would be required to take the

individual to Kern Medical Center in Bakersfield for the required blood test. This would take an officer out of the community and off patrol for at least three to five hours, maybe more, depending on how busy KMC is. When Taft Police Department arrests individuals who are either injured or ill, which is often the case in alcohol or drug related arrests, they must be medically cleared before they can be booked, appear in court, or before Kern County transportation will transport them. Currently, Taft Police Department utilizes Mercy Westside Hospital for this service. If the hospital closes, the Department would be required to take the individual to KMC, again, taking an officer out of the community and off patrol. And of the most concern to the City, Chief Humphrey and Chief Heimos, is this is if an officer or firefighter is injured, it is usually serious, and a 45-minute trip into Bakersfield could mean the difference between life and death for that officer or firefighter. And as a City Manager, I certainly don't want to see that happen. This hospital is critical to our community. Thank you very much.

L. *Steve Gage, Fire Chief, Kern County Fire Department, 5642 Victor Street, Bakersfield, 93308*. The Kern County Fire Department provides first responder EMS service to all of the regional area covered by the Westside Hospital except for the City of Taft, and we would just like to go on record expressing our concerns for the potential impact to the regional emergency service that could be affected by the closure of the hospital. You've heard from other law enforcement and fire agency, the downtime of having to send a firefighter from the west side into Bakersfield and the downtime for those engine companies and us having to relocate people around. It could have a very large potential impact. So that's the comment for today. Thank you.

M. *Ray Hatch, Mayor, City of Taft, 209 East Kern Street, Taft*. I have several comments to make. First, we've already heard the negative impact that the closure of the emergency room will have on public safety. We will lose police response, we will lose fire response, not only in the city but also in the county. I think that is one very big reason that your report should really emphasize even more that this emergency room should not be closed. I would also like the report that you're putting together to emphasize a little more the impact of the closure and Mr. Connick touched on this very clearly. What I didn't read in the report was that if the emergency room closes, people will die. That is just simply what is going to happen. I think that should be just clearly stated in the report that because of the response time to Bakersfield, and because of the loss of fire protection when our fire department is offline because one of our firemen is in an ambulance going to Bakersfield supporting Hall Ambulance, or we'd lose police staff because we're having to deliver a prisoner for medical treatment into Bakersfield and this is not just the city, but this is the county. People will die. I would like to see that stated very clearly in the report. The report, though, you asked for comments regarding affects on community. That's certainly a major affect on our community and as our fire chief pointed out that we could add staff and make up for that, but we're all in the same budget problem throughout the state, and we're not going to have those funds available to just add staff to fix these problems. Also, the community will be impacted very negatively from an economic point of view. I'm not sure that the report mentions that there will be 100 people that will lose their jobs if the hospital closes, and that will be the entire hospital. I don't think the report really mentions or addresses the fact that many of the current patients in the skilled nursing facility will no longer be located in Taft, they will be located perhaps in Bakersfield, perhaps much further away, their families in Taft will now have to travel at least to Bakersfield, maybe further away. We have Highway 119 between us and Bakersfield, you traveled that road. If you traveled it in the morning or in the afternoon, it is a two-lane dangerous highway, and we're going to be putting many more people going back and forth to Bakersfield, not just more ambulances, more people seeking emergency

help in Bakersfield, but people who are visiting their loved ones who now will be residing in Bakersfield. I heard also here that we have major concerns in our schools, in our city schools and our high schools and our college. We have sports activities there, they're inherently dangerous. And now, if a student is injured, they're going to have to be transported to Bakersfield because we won't have the emergency room here in Taft. There's other impacts and I won't go into those right now, but there are many other impacts. We're just learning all of these impacts. I think we heard a week ago about the impact on the police department and that is going to be a major impact in our entire community. So thank you very much and I appreciate you coming over taking this testimony and I look forward to seeing your final report. Thank you.

V. Hearing no other comments, the hearing was closed at 3:59 p.m.

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Exhibit B

Electronic Mail Public Feedback on the Proposed Change

Mercy Westside Emergency Department Closure
Public Feedback by Electronic Mail

>>> "Kecia Frost-TC" <kfrost@taft.org> 05/22/03 05:38PM >>>
To whom it may concern, I am a resident of Taft, and I believe that closing our hospital will be a huge mistake. I have 3 children, and at any time they may be in need of emergency medical care. I also work for the T.I.L program at Taft College, and my students need access to an ugent care facility, We have had several situations where we have had to call 911, or take them to the hopital ourselves. I worry that in some of those situations if we didn't have our hospital, their health would have been in serious jeopardy. I am a home owner, and would be willing to pay whatever it would take to keep the hospital running, and everyone I have spoken to about it feels the same way. Please for the sake of all people who live in and around Taft, lets do whatever we need to do and lets keep our hospital running.
Thank You,
Kecia Frost

>>> "Paula Criddle-TC" <pcriddle@taft.org> 05/22/03 03:09PM >>>
Hello

I think closing our hospital in Taft would be a terrible mistake. I have 4 children and I have already used the hospital several times.

My children ride bikes rollerblade, skateboard you name it, and there is always a chance something terrible might happen. If there is no hospital in Taft that would mean driving to Bakersfield, 45 minutes away, that's a long way when someone is critically injured.

We need a hospital, for our children, the elderly, everyone.

Thank you
Paula

>>> "Lee Schryver-TC" <lschryver@taft.org> 05/22/03 11:36AM >>>
I have 2 asthmatic children. They have been seen many times at the emergency room for breathing treatments. If the hospital closes, I guess I will have to drive my children to Bakersfield for treatments, if they aren't dead by the time I get them there. I also have an elderly grandmother and an elderly uncle that require specific needs from time to time. I might as well start getting ready for their funerals as well.

I also work at the Taft College Transition to Independent Living Program. We serve special needs students. Many of them have used the hospital for various tests and emergencies.

I spoke with the athletic trainer at Taft College and he remarked that if he was a parent of an athlete he would definitely not send his son or daughter to live in that town. So if enrollment goes down due to the closing of the hospital, I guess we can say goodbye to some classes and staff.

So this small ripple will have huge repercussions for the small town of Taft.

Lee Schryver

>>> <Garyggg724@aol.com> 05/22/03 12:06PM >>>

Dear David,

Having been born and raised in Taft, I believe I understand the importance of the hospital not only to the health of the members of the community but also as a defining symbol of the community. I will not state the obvious importance of the emergency room; all I will ask is that every avenue for keeping the hospital open be explored before a final decision is made. Thank you for your time.

Gary Graupman
Taft College

>>> "Reed D (David) at Aera" <dreed@aeraenergy.com> 05/28/03 07:03AM >>>

Mr. Blind,

I just wanted to take a moment and voice my displeasure at the possible closure of our local hospital. I had the opportunity to serve as a volunteer fireman for the City of Taft for almost five years. During that time, I was able to witness first hand the benefit of having a local emergency room. I know beyond a doubt, that many of the medical aid patients that we transported would not have survived the trip to a Bakersfield area hospital. I believe that the Westside area residents need to do what ever is necessary to keep our facility open, including a tax increase if justified. I also believe that Catholic Healthcare West needs to open their books to a forensic audit, to verify that the losses they are claiming are truly coming from the operation of this facility, and only this facility.

In closing, I would like to thank you for your support of the WSDH, and allowing me to offer my input.

Best Regards,

David C. Reed
Sr.Project Manager, The Braun Group
Office 661.665.4154
Braun Nextel 661.343.1579
Pager 661.335.3125

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Exhibit C

Excerpts from Division 2.5 California Health & Safety Code

EXCERPTS FROM DIVISION 2.5 CALIFORNIA HEALTH AND SAFETY CODE

1300. (a) Any licensee or holder of a special permit may, with the approval of the state department, surrender his or her license or special permit for suspension or cancellation by the state department. Any license or special permit suspended or canceled pursuant to this section may be reinstated by the state department on receipt of an application showing compliance with the requirements of Section 1265.
(b) Before approving a downgrade or closure of emergency services pursuant to subdivision (a), the state department shall receive a copy of the impact evaluation of the county to determine impacts, including, but not limited to, an impact evaluation of the downgrade or closure upon the community, including community access to emergency care, and how that downgrade or closure will affect emergency services provided by other entities. Development of the impact evaluation shall incorporate at least one public hearing. The county in which the proposed downgrade or closure will occur shall ensure the completion of the impact evaluation, and shall notify the department of results of an impact evaluation within three days of the completion of that evaluation. The county may designate the local emergency medical services agency as the appropriate agency to conduct the impact evaluation. The impact evaluation and hearing shall be completed within 60 days of the county receiving notification of intent to downgrade or close emergency services. The county or designated local emergency medical services agency shall ensure that all hospital and prehospital health care providers in the geographic area impacted by the service closure or change are consulted with, and local emergency service agencies and planning or zoning authorities are notified, prior to completing an impact evaluation as required in this section. This subdivision shall be implemented on and after the date that the county in which the proposed downgrade or closure will occur, or its designated local emergency medical services agency, has developed a policy specifying the criteria it will consider in conducting an impact evaluation, as required by subdivision (b).
(c) The Emergency Medical Services Authority shall develop guidelines for development of impact evaluation policies. On or before June 30, 1999, each county or its designated local emergency medical services agency shall develop a policy specifying the criteria it will consider in conducting an impact evaluation pursuant to subdivision (b). Each county or its designated local emergency medical services agency shall submit its impact evaluation policy to the department and the Emergency Medical Services Authority within three days of completion of the policy. The Emergency Medical Services Authority shall provide technical assistance upon request to a county or its designated local emergency medical services agency.

1255.1. (a) Any hospital that provides emergency medical services under Section 1255 shall, as soon as possible, but not later than 90 days prior to a planned reduction or elimination of the level of emergency medical services, provide notice of the intended change to the state department, the local government entity in charge of the provision of health services, and all health care service plans or other entities under contract with the hospital to provide services to enrollees of the plan or other entity.
(b) In addition to the notice required by subdivision (a), the hospital shall, within the time limits specified in subdivision (a), provide public notice of the intended change in a manner that is likely to reach a significant number of residents of the community serviced by that facility.
(c) A hospital shall not be subject to this section or Section 1255.2 if the state department does either of the following: (1) Determines that the use of resources to keep the emergency center open substantially threatens the stability of the hospital as a whole. (2) Cites the emergency center for unsafe staffing practices.

1255.2. A health facility implementing a downgrade or change shall make reasonable efforts to ensure that the community served by its facility is informed of the downgrade or closure. Reasonable efforts may include, but not be limited to, advertising the change in terms likely to be understood by a layperson, soliciting media coverage regarding the change, informing patients of the facility of the impending change, and notifying contracting health care service plans as required in Section 1255.1.

1255.3. On or before June 30, 1999, with the state department as the lead agency, the state department and the Emergency Medical Services Authority, in consultation with hospitals and other healthcare providers and local emergency medical services agencies, shall designate signage requirements for a health facility holding a special permit for a standby emergency medical service located in an urban area. The signage shall not include the word "emergency" and shall reflect the type of emergency services provided by the facility, and be easily understood by the average person. The facility shall not post signs, distribute literature, or advertise that emergency services are available at the facility. Nothing in this section shall be construed to mean that a facility is no longer providing emergency services for purposes of billing or reimbursement. A small and rural hospital, as defined in Section 124840, is not subject to the requirements of this section.