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## Hospital Quiet om Its Inspection

Groups say they were denied right to

## appear at Long Beach accreditation hearing

By David Zimman

Newsday Science Writer
Long Beach—Consumer groups and the public were unable to appear before an accreditation team inspecting Long Beach Memorial Hospital last month because the hospital did not publicize the inspection dates, it was learned yesterday.

At least eight community groups said they would have appeared. They said many interested citizens would have attended as well. "I would have gotten community people together," said Flossie Anderson of REACH, a nonprofit drug-education group.

Dr. Martin F. Nester, the administrator of the hospital, which serves a large elderly population and a poverty area, said he did not issue a news release publicizing the inspection days. But he said that his aides had notified one community group, the Long Beach Health Planning Committee. He said he expected that group to spread the word.

Spokesmen for the committee, however, denied having been told about the inspection. "I think the community should have been allowed to have been there," said Frank Andrews, the committee's immediate past president.

Last August, consumer advocates nearly lost their right to participate in the accreditation inspection of Nassau County Medical Center. The county-owned center refused to disclose the inspection dates until—a few days before the inspection was made.

Informed of the inspection controversies, Steven J. Wilson, chairman of the Nassau-Suffolk Hospital Council's public information committee said he felt that Long Island hospitals should give consumers ample public notice of these sessions. He said his group would discuss the matter at its next meeting.

The Long Beach hospital, inspected Nov. 19-20 by the Joint Commission on Accreditation of Hospitals, is operating under a provisional one-year accreditation. Although that technically is full accreditation, it means that the hospital must bring certain services up to the commission's standards within 12 months. A hospital must be accredited by the commission—a nonprofit private group based in Chicago—to continue getting Medicare funds and Blue Cross reimbursements.

Two interested parties, Newsday and Community Advocates Inc., a health-oriented consumer group in Great Neck, had written to the accreditation commission last September asking that they be informed of all Long Island hospital inspections. However, the commission failed to notify either one of the inspection in Long Beach. "All I can say," said Edward Van Natta, the commission's public information coordinator, "is that it [notification] just got bogged down in the system."

In addition to REACH, Consumer Advocates and the Health Planning Committee, other groups who said they would have attended the inspection were: The Jewish Association for Services for the Aged, the Senior Forum, the Long Beach Older Americans Council, the Hempstead Town Older Americans Volunteers Committee, and the Long Beach Can-Do-Center. Spokesmen for these groups said they would have made these allegations to inspectors:

o That many elderly persons needing psychiatric care are not being serviced by the hospital's mental health clinic. The city has a large aged population, and an estimated 500 former mental patients recently discharged from state mental institutions are now living in hotels for older persons. Nester said that the hospital has attempted to expand psychiatric services but has been unable to get additional county funds to do so.

That there is need for around-the-clock social

complyus o

CONTINUES worker staffing in the emergency room to help elderly. people, whose health prob-lems often stem from home situations. Nester said a lack of money limited staffing beyond Monday to Friday daytime hours.

That there are long waits for clinic care and in the emergency room. Nester said he did not think that was true

any longer.

One consumer group group, Joan Saltzman of Community Advocates, said she thought that the accreditation commission should share blame for the public's disenfranchisement. noted that instead of requiring hospitals to notify the public of inspection dates, the commission's regulations say only that a hospital must give the dates to anyone who

It puts the burden on the public to find out the dates, said Edward Gluckman, executive vice president of the Consumer Commission on the Accreditation of Health Services. The commission is a New York City-based consumer group that seeks to inform patients of their right to participate in hospital activities.

ies. If consumer groups are not warned that an inspection is imminent, Gluckman said, the experience has been that few ever find out the inspection date. If they do, he said, it is sometimes so close of Nassau Medical Centér

last August—that it does not leave them enough time to prepare a careful pregentation. In most cases, Gluckman said, inspection dates come and go without any consumers showing up for the hearings.

Some consumers have acoused the acoreditation commission, which is funded heavily by the American Medical Association and the American Hospital Association, of deliberately writing vague rules. Neither the hospitals nor the commission. really wants the public there, one consumer group spokesman said.

Dr. John Porterfield, director of the accreditation commission, said the commissionhas not established a policy of trying to bring consumers into the accreditation process-only agreed they have a right of entry into the pro-cess. "We don't want to in-vite harassment," he said. Porterfield added that consumer testimony is not, "completely useful." Much of it, he said, is related to isolated complaints and individual grievances.

Some consumer groups; have accused the commission of having a "clubby", rela-tionship with hospitals. In 1972, about five per cent of all hospitals inspected nationally failed to be accredited. Consumers also? have attacked the federal government for allowing a! to the hearing—as in the case, private, body to rate hospitals, -- annango, or or or or or or

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