

Goodbye to Daniel Freeman Marina Hospital

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It is with heart-filled sadness that we say goodbye to Daniel Freeman Marina Hospital in Marina Del Rey, California. As of this month, the hospital will be closing its doors. What saddens me even further is the loss of an acupuncture internship program that had been established there six years ago through Emperor's College of Traditional Oriental Medicine. Having had the privilege to work at Daniel Freeman, first as a nurse manager of the hospital's chemical dependency and psychiatric units, then 10 years later as an acupuncturist and clinical supervisor of Emperor's externship program, the loss is even deeper. I watched the acupuncture program grow and expand to an area of specialization within addiction medicine. Every patient admitted into the chemical dependency unit was referred for acupuncture. While simultaneously involved with other aftercare facilities, I often saw patients who went through Daniel Freeman's program. It touched my heart to see so many of these patients at a new stage of recovery and be so grateful to have had acupuncture as part of their treatment.

In the chemical dependency unit (CDU), we treated a variety of patients, from high-profile personalities to people who had been sent there through the court system. Interns learned about the importance of confidentiality within the behavioral health system. We saw people at their lowest point in the first few days of detox. Three weeks later, we would see the same person transformed. Interns learned how to deal with patients who were at their worst without antagonizing them, while at the same time not allowing themselves (the interns) to be manipulated.

The CDU was a great backdrop for teaching interns about the psychological, physiological and spiritual approaches to working with addicts. Many interns become baffled about how to treat patients who presented with a whole barrage of complaints (which patients trying to get detoxified from drugs will do). Here the interns began to apply, and really understand, the "root vs. branch" theory. This is where one really needs to pull from the vast array of acupuncture techniques to provide the patient with immediate relief. Some patients were only there for a three-day stay in detox; some remained for the full 30 days, so one cannot always approach them in the same manner as you would seeing a patient in a clinic setting.

Ten years ago as a consultant, I worked at Daniel Freeman as a nurse manager of behavioral health in the CDU, and assisted in opening their psychiatric unit. Over the last few years, we had the unique opportunity of treating patients in both of these units with acupuncture. I had worked with a number of the physicians at Daniel Freeman 10 years ago; a few of them I had known almost 20 years ago from another hospital where we had worked together. The physicians were extremely supportive of the acupuncturists, though it took years to build this trust. As the physicians continued to witness our track records of efficacy and safety, referrals from all areas of specialties grew.

Working on inpatient units in an acute care facility such as Daniel Freeman afforded interns a wealth of experience they would not have received by just having interned in a clinic. Although we specialized in addiction, we treated patients hospital-wide. In addition to the CDU, we treated patients in the psychiatric and medical units. We were often called in to treat patients recovering

from strokes; motor vehicle accidents; and knee and hip surgeries.

We also treated patients with very rare medical syndromes. It was a great opportunity for the interns to be able to treat some of these patients, comb through the charts and read the history and physicals as written by the physicians in various specialties. Because of my nursing background, I was able to help the interns learn the complexities of these medical syndromes and recognize complications. Interns became familiar with various medications and began to recognize syndromes associated with the use of these drugs. Pharmaceutical companies are moving at rapid speed in developing new medications, with new drugs being approved daily for treatment. It is essential for acupuncturists to recognize medications and associated Western syndromes, and to understand interactions and side-effects. Oftentimes making a correct diagnosis, whether Western or Chinese, is like good detective work. The more skilled the practitioner becomes in understanding the intricacies of Western medicine and how it applies to TCM, the more adept he or she becomes in accurately diagnosing and treating patients with TCM.

The hospital setting provided a wonderful opportunity to focus on accepted medical-legal standards of documentation, with an emphasis on liability issues. Because our field has not traditionally been affiliated with hospitals and other medical centers, students are not challenged in this area. The overall standard of documentation that is set in the Oriental medical colleges lags behind the standards set in Western medical training. The interns in an inpatient hospital setting with supervision are far more motivated to raise the standard of their documentation skills. Knowing that they must document their notes in the progress records, which are shared and read by physicians and nurses, provides encouragement to write more detailed and accurate notes. Proficient documentation skills from the interns often bought the patient more time from their managed care company to remain hospitalized. An insurance company's decision on length of stay is often negotiated based on the need reflected through progress notes. Administrators and regulatory agencies such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and the Department of Health also audit these notes. The only way regulatory agencies can oversee the quality of care being delivered at hospitals is through documentation of the specific care provided, the reason for care, and the patient's response. Constant reinforcement of the patient's chart as a legal document, with many people monitoring its content, tends to motivate students to think in terms of providing a more detailed clinical assessment.

Daniel Freeman's chemical dependency unit was one of the few remaining inpatient CDUs within Los Angeles. Ten years ago, there was a CDU at every major hospital in L.A. In my 20 years of work in the health care industry, I have seen many changes take place.

Reimbursement issues from insurance companies have caused most of the CDUs to close. Daniel Freeman's unit was no different in that it had been losing money for quite some time. The entire hospital was losing millions of dollars a year. After a long, hard financial struggle to avoid bankruptcy, Daniel Freeman made the decision to sell both of their hospitals to Tenet Healthcare Corporation. They knew it was a calculated risk because they knew about the possibility of Tenet turning around and selling a hospital, yet they needed to take that gamble. Companies buy up hospitals, then sell the ones that are too costly to turn around. Tenet is in the business of making money, and Daniel Freeman Marina, a small 166-bed non-profit hospital owned by Carondelet Health System, was losing too much money. The land the hospital was built on in the marina is prime real estate and probably will be sold off to developers. This is not an uncommon story in this day and age. I can only imagine how painful and difficult this decision was for everyone involved.

It is said that where one door closes, another one opens. To all of the physicians, nurses, Sisters and ancillary staff that must also say goodbye and move on, you will be missed. I know our paths will cross again. Until then, we bid you all a fond farewell!

I would especially like to acknowledge Robert Waldman, MD; Michael Shwayder, MD; Charles Burstin, MD; Dagmar Bauer, LAc; Steve Givens, LAc; Patricia Walton, LAc; and all the nurses and counselors on the chemical dependency unit. I thank you for your contributions in having created a unique program and wonderful environment rich in learning for interns in Oriental medicine.

The more we progress in the field of TCM, the more we are able to integrate ourselves in the health care system. A strong background and understanding of Western medicine and its modalities is becoming essential to our continued interaction with other health care providers and our assimilation into institutions. Despite the closing of Daniel Freeman Marina Hospital, Emperor's College still has three other externship programs: one at the Los Angeles Free Clinic specializing in pain management; one at the Arthur Ashe Student Health Center at UCLA; and one at the Pflieger Center/Cri-Help in North Hollywood specializing in addiction. It is my hope for the future of TCM training that all colleges will have the ability to offer specialization within a hospital or treatment setting.

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