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*Kingsbrook Community Action Committee - Urgent Data Brief*

## **Dispersing Kingsbrook Patients May Overwhelm Other Hospitals and ICUs**

Pursuing its **dangerous plan to close Kingsbrook** Jewish Medical Center, the One Brooklyn Health (OBH) system today **refused to admit more patients**. Yet the hospital is very busy. **This evening, with no beds free in OBH's other 2 hospitals, about 40 patients in Kingsbrook's emergency room reportedly await admission**, some facing transfer to other hospital systems.

**Hospital staff also say that the intensive care and coronary care units, each with 10 beds, had only a total of two empty beds today.** They were similarly full for most of the past few months. Staff are alarmed that on Monday the administration said it aims to quickly close one of those units, even though both were nearly full. Some staff expressed **fears that patients may be endangered** if there is pressure to move patients out of the intensive care unit (ICU) before they are ready or perhaps transfer to another hospital even while they are medically unstable.

While hospitalizations decline across New York State, central/southern Brooklyn for weeks has been the area with the highest intensive care unit occupancy rates. (See screenshots.) **OBH's Interfaith Hospital now has the 2nd-highest ICU occupancy rate (97%) of any hospital in New York City and state. OBH Brookdale is tied for 3rd-highest in NYC, at 92%.**

**If Kingsbrook's ICU and CCU closed right now, and its current patients were dispersed among other nearby Brooklyn hospitals, several other ICUs could be totally full**, given the volume of patients now needing intensive care in central Brooklyn. In the latest [published data](#), for the week ending June 3, ICU/CCU occupancy at Kingsbrook was lower than this week, but even so, 14 of the 20 beds reportedly were full. It is impossible to know how 14 patients would be distributed, but based on occupancy data from that week (see table and NY Times screenshots below), **some plausible alternatives would fill as many as five other ICUs:**

- **Five Brooklyn hospitals could have ICU capacity entirely or almost entirely filled** if Brookdale got 3 more ICU patients, SUNY Downstate 4 more, NY Community Hospital of Brooklyn 2 more, and Wyckoff Heights 5 more. The week would average one empty ICU bed at Wyckoff Heights, less than one at Interfaith and none at three other hospitals.
- Another possibility would be adding 3 ICU patients at Brookdale, 4 at Downstate, plus 7 at NYC Health & Hospitals-Kings County. That raises Kings County's occupancy to 86% (the highest seen there in the past 2 months), **a level possibly unworkable for Kings County -- and 3 ICUs, at Interfaith, Brookdale and Downstate, would all be full.**
- Alternatively, suppose 3 of the 14 patients were at Brookdale, filling its ICU (and again, Interfaith's ICU would be essentially full), while 11 patients were at NY Presbyterian - Brooklyn Methodist Hospital, which has one of the largest ICUs in Brooklyn. During the pandemic peak (according to comments 6/7/21 by OBH's CEO) last year, it had arranged to take an overflow if necessary from One Brooklyn. **Adding 11 patients at Methodist would mean ICU occupancy of about 87%, far above its current 63%**

## Such a risk of overload shows how reckless it is to close Kingsbrook’s ICU/CCU beds

One Brooklyn’s leadership insists it will be able to “surge” to greater capacity to absorb potential big increases in volume if the pandemic peaks again. **But here we see how hard it will be for local hospitals to merely absorb current intensive care volume at a fairly slow time.**

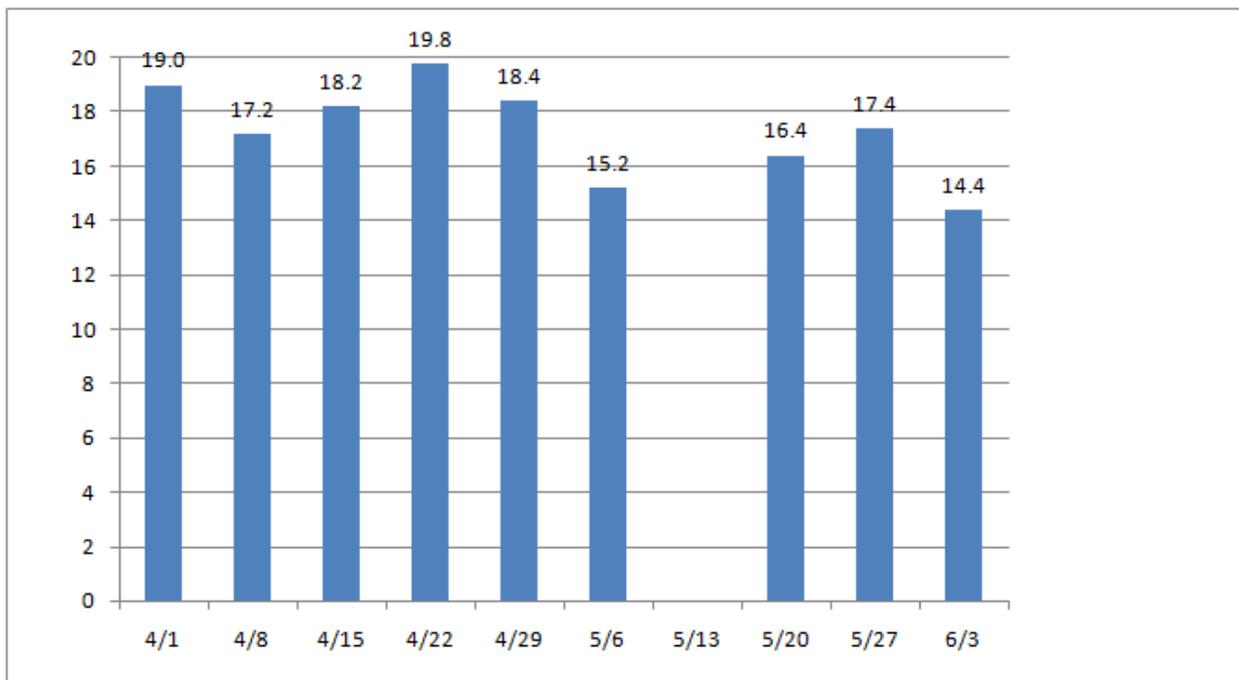
Source: <https://www.nytimes.com/interactive/2020/us/covid-hospitals-near-you.html> (Accessed 6/9/21)

	<b>Intensive care unit occupancy % for week ending 6/3</b>	<b>Available ICU beds for week ending 6/3</b>
<i>NY state average</i>	61%	
<i>National average</i>	70%	
<b>Interfaith - OBH</b>	<b>97%</b>	<b>0.4</b>
<b>Brookdale - OBH</b>	<b>92%</b>	<b>3</b>
NY Cmty Hosp. of Bklyn	92%	2
Wyckoff Hts	79%	6
Coney Island	78%	11
Univ./SUNY/Downstate	75%	4
<b>Kingsbrook - OBH</b>	<b>72%</b>	<b>6</b>
Kings County	69%	13
Bklyn Hosp. Ctr - Downtown	67%	6
Maimonides	64%	25
NYP Bklyn Methodist	63%	17
Woodhull	56%	8

The alternative scenarios above each assume that the 14 patients go to hospitals within about four miles of Kingsbrook, but many other variations are possible. The reality would partly reflect patient preferences in scheduling surgery, and whether some patients resist using certain hospitals. For example, Kingsbrook Emergency Department staff have reported since late March that when patients are told they need to be admitted for surgery, but cannot be admitted at Kingsbrook, some cry, decline to be transferred to OBH's Interfaith or Brookdale hospitals, and leave against medical advice. Some might also, for example, avoid the public Kings County Hospital, because of a local reputation for long wait times and serious understaffing. But recall that the numbers in the table above are weekly averages, so on some days the patient volume needing to find ICU space would have been even higher.

One Brooklyn has, since at least late March, been steering surgical patients and others away from Kingsbrook and to its two other affiliated hospitals, Interfaith and Brookdale. In addition, the citywide hospitalization rate for COVID-19 patients has been declining through the spring. So it is not surprising that the Kingsbrook reported ICU/CCU occupancy rates have declined from the 99 percent level of less than 2 months ago, in mid-April. (See bar chart.)

**Recent ICU occupancy for 12 Brooklyn hospitals appears to have averaged 75-80%, well above a 70% threshold that Gov. Cuomo's administration set last year for ICU occupancy, indicating a level of over-crowding too high to permit local economies to reopen. (Note: the 72% average shown in the Brooklyn screenshot includes two lower-occupancy hospitals in Queens.)**

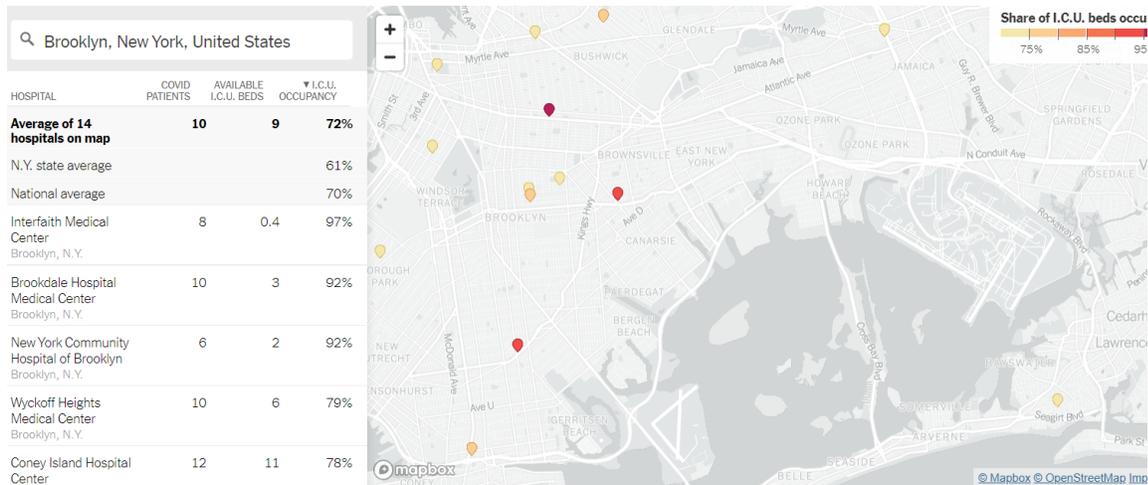


**Kingsbrook ICU and CCU Beds Occupied, Weekly Averages, Late March to Early June**

(Source: Weekly postings of data on <https://www.nytimes.com/interactive/2020/us/covid-hospitals-near-you.html> )

In summary, rushing ahead with the reckless plan to close Kingsbrook poses several dangers:

- As the OBH administration refused to admit any more patients to Kingsbrook today, its other two hospitals quickly filled up, and patients already face transfer to other hospital systems because of inadequate inpatient capacity in the OBH system. This undermines their ability to get care from the Kingsbrook physicians many have used for years. The first day without admissions to Kingsbrook was the debacle that many have predicted.
  - With occupancy rates in Brooklyn ICUs recently averaging 75-80%, the governor and the NY State Department of Health should halt OBH's closure of Kingsbrook. Brooklyn ICU occupancy clearly exceeds a 70% standard set by the Cuomo administration. Further, the COVID-19 pandemic is not over. Use this time to re-assess the OBH plan.
  - Intensive care units in central/south Brooklyn hospitals in fact have fewer available beds now than any other cluster of hospitals in the state. Though hospital use rates are declining elsewhere, Interfaith currently has the 2nd-highest ICU occupancy rate (97%) of any hospital in NYC and Brookdale (92%) is tied for 3rd-highest.
  - Losing the Kingsbrook ICU and CCU seems likely to pose serious risks for other nearby hospitals' ICUs. Even now, typically a slow time for hospital use, if Kingsbrook's 20 ICU/CCU beds are eliminated, and patients who would have used Kingsbrook are dispersed across other nearby hospitals' ICUs, those other ICUs may be overburdened. Several are likely to be completely filled and others will be far busier than they have been lately -- possibly busier than they can readily handle.
  - For all these reasons and others, closing Kingsbrook's inpatient services -- and notably closing the 20 ICU and CCU beds -- would endanger patients in this already underserved, predominantly Black and immigrant community, worsening NYC's existing racial inequities in access to hospital care. Kingsbrook is needed and must be saved.
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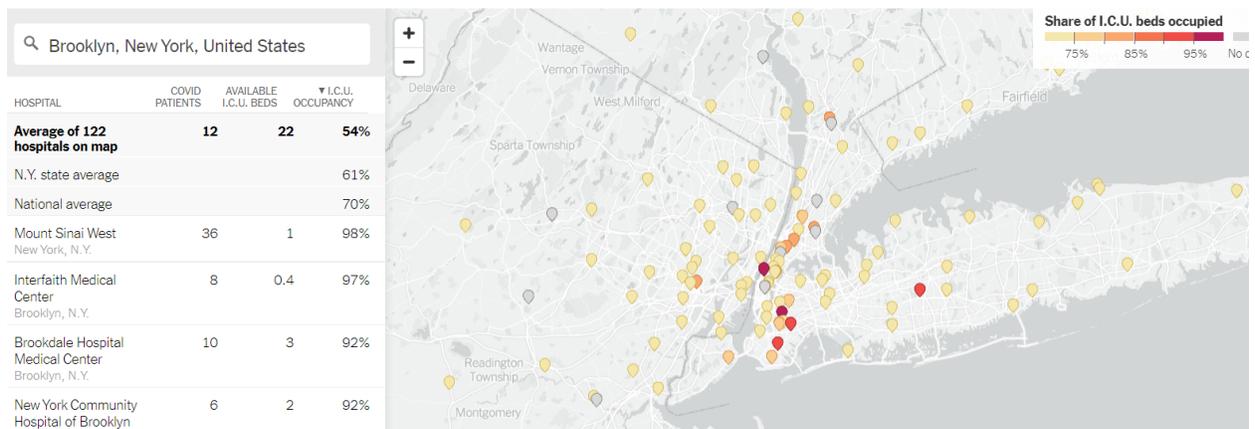
Source: U.S. Department of Health and Human Services data. A hospital may not appear if it does not report this data to H.H.S., if its data was reported through a parent hospital or if its location information was not

This screenshot shows 12 Brooklyn hospitals (plus 2 in Queens with low occupancy rates). The dark red dot is Interfaith. Kingsbrook is the pale yellow dot below that, Brookdale an orange dot to the east. <https://www.nytimes.com/interactive/2020/us/covid-hospitals-near-you.html> (Accessed 6/9/21. Data are for the week ending June 3, as shown in screenshot below.)

**The New York Times** PLAY THE CROSSWORD Account

beds were full. In the week ending June 3, an average of 68 percent of intensive care hospital beds were occupied nationwide, according to a dataset released weekly by the Department of Health and Human Services.

You can see recent hospital capacity in the below map, which shows data reported by individual hospitals.



This map shows ICU occupancy for hospitals in the greater New York City area. The darker dots in central and south Brooklyn represent a group of hospitals that had (in the week ending 6/3) the highest ICU occupancy rates of any such cluster in New York State.

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