



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
Division of Health Care Facility Licensure & Certification
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October 14, 2020

Janice Hamilton-Crawford
President
Trinity Health of New England
2021 Albany Avenue
West Hartford, CT 06117

BY EMAIL ONLY

Re: **Closure Plan Comments**
Facility: Farren Care Center
Ref. #: 0926-735

Dear Ms. Hamilton-Crawford:

The Department of Public Health (the "Department") received from you a draft closure plan (the "Plan") for Farren Care Center (the "Facility") on August 17, 2020. The proposed date of closure under the plan is December 31, 2020. Pursuant to 105 CMR 153.023(B), a public hearing on the proposed closure was held on September 16, 2020 and September 30, 2020.

Pursuant to 105 CMR 153.023(D), the Department has completed its review of the plan and all comments received on the proposed closure. As a result of this review, the Department has the following comments on the Plan:

- (1) **Transfer and Discharge:** The plan states that "Farren Care Center will provide health and other resident information to the receiving location in compliance with all applicable state and federal regulations to ensure continuity of care." The Department is unclear as to what steps the Facility will be taking to ensure compliance with state and federal regulations regarding transfer and discharge. Please update the closure plan to address the requirements below:

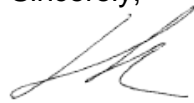
- The Facility must assess the needs of each resident prior to closure, and work with each resident or their legal surrogate to identify appropriate placement that is consistent with the needs and preferences of the resident.
 - The Facility must provide and document sufficient preparation and orientation to each resident to ensure safe and orderly transfer or discharge from the Facility. This orientation must be provided in a form and manner that the resident can understand.
 - The Facility must ensure that each transfer or discharge is documented in the resident's medical record, and appropriate information is communicated to the receiving health care institution or provider.
 - The Facility must ensure that the information provided to the receiving provider includes at a minimum the following:
 - Contact information of the practitioner responsible for the care of the resident; and
 - Resident representative information including contact information; and
 - Advance Directive information; and
 - All special instructions or precautions for ongoing care, as appropriate; and
 - Comprehensive care plan goals; and
 - All other necessary information, including a copy of the resident's discharge summary, and any other documentation, as applicable, to ensure a safe and effective transition of care.
- (2) **COVID-19 Protocols:** Based on written comments submitted to the Department, and comments made during the public hearing process, the Facility must ensure that documented protocols and procedures are in place to protect residents and staff from COVID-19 during the closure process. For clarity, applicable requirements to be addressed include any requirements currently in place at the federal or state level during the COVID-19 public health emergency. The Facility must provide COVID-19 PCR testing to each resident at or about the time of transfer (no more than 72 hours before the time of transfer).
- (3) **Plan to Ensure Sufficient Staffing Prior to Closure:** Based on written comments submitted to the Department, comments made during the public hearing process, and the needs of the residents as known to the Department, you must include in your response those steps that the Facility is taking, or will take, to ensure there will be sufficient and competent staffing throughout the closure to meet those needs. Your response must be reflective of all state and federal regulatory requirements for staffing, including 42 CFR 483.35 which specifies that all facilities "... must have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.70(e)."

- (4) **Preparation for Closure:** Based on written comments submitted to the Department, and comments made during the public hearing process, elected and local officials, and members of the community expressed concern regarding the impact of the closure of the Facility on the community and staff currently employed at the Facility. You must include in your response information regarding the Facility's plan to communicate with the local community regarding closure, including but not limited to, securing the campus after the closure, and detailed information regarding the steps that will be taken to assist facility staff in preparing for closure.

Under 105 CMR 153.023(D), the licensee must respond in writing to the Department's comments within 14 days of receipt of this letter. Your response should be emailed to my attention at Sherman.Lohnes@Mass.Gov, with a copy to Walter.Mackie@Mass.Gov. in order that we may complete our review of the closure plan.

Thank you for your continued cooperation in this process. If you have any questions, please contact Walter.Mackie@Mass.Gov.

Sincerely,



Sherman Lohnes
Division Director

Cc: E. Kelley, DPH
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