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 8, 2020

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BY EMAIL ONLY

**Re: Essential Services Finding**

 **Facility:** MetroWest Medical Center – Framingham Union Campus

 **Services:** 21 Bed Pediatric Service

 **Ref. #:** 2020-426

Dear Attorney Levine:

On September 24, 2020, the Department of Public Health (the "Department") held a public hearing in response to the notification received from you on behalf of MetroWest Medical Center regarding their proposed plans to discontinue operation of its 21 bed inpatient pediatric service at Framingham Union Campus (the “Hospital) in Framingham, MA, effective November 27, 2020. As a result of its review, the Department has made a finding that the services provided by the Hospital are in fact necessary for preserving access and health status within the Hospital’s service area.

Accordingly, pursuant to 105 CMR 130.122(F), the Hospital is required to prepare a plan that details how access to inpatient pediatric services will be maintained for the residents of the service area. The plan must be submitted to the Department no later than 15 calendar days of receipt of this letter. The Hospital’s plan must include the elements specified in 105 CMR 130.122(F) as listed below:

1. Information on utilization of the services prior to proposed closure;
2. Information on the location and service capacity of alternative delivery sites. Include an explanation of the basis for the Hospital’s determination that the alternative delivery sites ***do*** or ***do*** ***not*** have the capacity (necessary space, resources, etc.) to handle the increased patient volume at the identified sites. To support that assertion, please provide the following specific details:
3. Current utilization at these alternative sites;
4. Type of services available at the alternative sites;
5. Type of medical diagnoses accepted; and
6. Adequacy of space and resources at the alternative sites.
7. Travel times to alternative service delivery sites, for both peak and non-peak travel times, and an explanation as to the source for this information or what these estimates are based on;
8. An assessment of transportation needs post discontinuance and a plan for meeting those needs;
9. A protocol that details mechanisms to maintain continuity of care for current patients of the discontinued service; and
10. A protocol that describes how patients in the Hospital’s service area will access the services at alternative delivery sites. The protocol should specifically address the following:
11. The process that will be employed to effectively refer patients to other facilities or providers;
12. The impact that this may have on the current occupancy rates at alternative delivery sites;
13. The ability of the alternative delivery sites to meet the needs of these patients; and
14. Other alternatives if medical needs cannot be accommodated at the proposed alternative sites.

In addition to the regulatory elements listed above, and in light of the Department’s review of comments on the proposed closure, your plan must also address the following:

1. **Health Needs of Communities of Color:** Description of the Hospital’s plans to ensure the health needs of culturally, linguistically, and racially diverse patients will be met, when these patients from the MetroWest area are referred to alternate delivery sites outside of Framingham.

Under the provisions of 105 CMR 130.122(G), the plan the Hospital submits to the Department will be reviewed to determine if it appropriately assures access to the essential services in question following the plans to discontinue operation of inpatient pediatric services at Framingham Union Campus.

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

Sincerely,

Sherman Lohnes

Division Director

cc: E. Kelley, DPH

 S. Davis, DPH

R. Rodman, DPH

M. Callahan, DPH