

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
67 Forest Street, Marlborough, MA 01752

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September 10, 2020

Andrew Levine, Esq.
Barrett & Singal
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Boston, MA 02108
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BY EMAIL ONLY

Re: Essential Services Finding

Facility: MetroWest Medical Center – Leonard Morse Campus
Services: 64 Bed Medical/Surgical Service
10 Bed Intensive Care Unit,
Operating Rooms,
Emergency Service,
Outpatient Rehabilitation Service
Ref. #: 2039-306

Dear Attorney Levine:

On August 26, 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 all medical hospital services at its Leonard Morse Campus (the "Hospital") in Natick, MA, effective October 25, 2020. This includes Medical/Surgical services, Intensive Care Unit, Operating Rooms, Emergency Service and Outpatient Rehab Service. 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 Medical/Surgical services, Intensive Care Unit, Operating Rooms, Emergency Service and Outpatient Rehab Service 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:
 - (a) Current utilization by service line at these alternative sites;
 - (b) Type of services available at the alternative sites;
 - (c) Type of medical diagnoses accepted; and
 - (d) Adequacy of space and resources at the alternative sites.
- (3) 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;
- (4) An assessment of transportation needs post discontinuance and a plan for meeting those needs;
- (5) A protocol that details mechanisms to maintain continuity of care for current patients of the discontinued service; and
- (6) 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:
 - (a) The process that will be employed to effectively refer patients to other facilities or providers;
 - (b) The impact that this may have on the current occupancy rates at alternative delivery sites;
 - (c) The ability of the alternative delivery sites to meet the needs of these patients; and
 - (d) 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 which will result in a reduction of the availability of medical services in the Hospital's service area at a time when communities and public health officials are responding to an unprecedented need for access to services, your plan must also address the following:

- (1) **Second Wave of COVID-19:** Based on written comments submitted to the Department regarding the August 26, 2020 hearing, concern was expressed regarding how the discontinuance of medical services at the Hospital will affect

the community in the event of an anticipated second wave of COVID-19. The plan which you are required to submit must address how MetroWest Medical Center plans to accommodate COVID-19 patients in the event there is a second wave during the 2020 -2021 flu season. Specifically, your plan must include data that details the bed capacity and use of beds, including intensive care and medical/surgical beds, on a daily basis by the Hospital from January 1, 2019 through September 5, 2020 with information about patient origin and language spoken, and how the proposed closure of the Leonard Morse campus is projected to impact utilization through December 31, 2020. The Hospital's response must specifically include:

1. Information on how unlicensed space or beds was used as surge capacity in the first surge of COVID 19, and the utilization of that space, including those beds which were set up for surge capacity;
2. Whether and how any of the surge capacity discussed in 1, above, could be stood up, should the Framingham campus be unable to accommodate patients at a future date or go into a surge status;
3. Information on the number of flu patients treated at the hospital, and the number of beds and capacity occupied by flu patients during the last three flu seasons, broken down by season;
4. The Hospital's plan to treat patients should the community risk level shift during the upcoming flu season; and,
5. An attestation from the Hospital that it would stand up surge capacity at its Leonard Morse campus during the upcoming flu season should the community risk level reach red and Framingham's capacity be insufficient.

(2) **Emergency Services:** Based on written comments submitted to the Department regarding the August 26, 2020 hearing, concern was expressed regarding the discontinuance of Emergency Services and the effect this will have on patients experiencing behavioral health crises. The plan which you are required to submit must include information on steps taken to ensure patients experiencing behavioral health crises receive the emergency care they require, and must include data that details the number of patients boarding in Emergency Departments of the Hospital broken out by location, on a daily basis from January 1, 2019 through September 5, 2020 and how the proposed closure of the Leonard Morse campus is projected to impact that utilization through December 31, 2020. In addition, your response must include for this period the number of patients arriving at each location by ambulance, how many were admitted to each location; how many were transferred from the Leonard Morse campus to either the Union Hospital campus or another hospital; and information regarding the number of COVID 19 patients who entered the Hospital through the Emergency Department and whether the Hospital's Framingham campus will have sufficient capacity to provide care for those patients in the event of another surge subsequent to the closure of the Emergency Department at the Leonard Morse campus.

(3) **Framingham Union Hospital Infrastructure:** Based on written comments submitted to the Department regarding the August 26, 2020 hearing, concern was expressed regarding promises of investment in infrastructure at Framingham

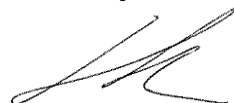
Union Hospital. The plan which you are required to submit must detail plans for improvements in Framingham Union's infrastructure in the event medical services are discontinued at Leonard Morse Campus. In addition, your response must include a detailed listing of projects proposed and completed at both campuses over the past ten years, specifically from January 1, 2010 to September 1, 2020 and be attested to by a duly authorized representative of the Hospital.

- (4) **Public Health Impact:** Based on concerns identified by the Department as a result of the proposed closure of services at the Leonard Morse campus, the plan submitted must address how subsequent to the proposed closure the Hospital will monitor the effectiveness of the implementation of its plan for preserving access and health status within the Hospital's service area, specifically detailing what will be assessed in regard to health outcomes overall in the community, its quality of life and health equity, including access to COVID 19 testing and treatment as necessary, as well as ongoing communication and messaging to groups for whom English is not their primary language regarding the need and importance of continuing access to care and how to do so.
- (5) **Community Engagement:** Based on concerns identified by the Department as a result of the proposed closure of services at the Leonard Morse campus, the plan submitted must address in a detailed way how the Hospital will ensure that all members of the community, by city or town in the Hospital's service area, and each of those groups for whom English is not their primary language, will be educated on the changes which will result from the closure, and for each group include how the hospital will identify and work with that group to meet their needs.

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 Medical/Surgical services, Intensive Care Unit, Operating Rooms, Emergency Service and Outpatient Rehab Service at Leonard Morse Campus.

Thank you for your continued cooperation in this process. If you have any questions, please contact me at Sherman.Lohnes@Mass.Gov or 617-869-5932.

Sincerely,



Sherman Lohnes
Division Director

cc: E. Kelley, DPH
S. Davis, DPH
R. Rodman, DPH
M. Callahan, DPH