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 and Certification

67 Forest Street, Marlborough, MA 01752

MAURA T. HEALEY

Governor

KIMBERLEY DRISCOLL

Lieutenant Governor

Octavio J. Diaz, MD, MPH President North Region & System Chief Medical Officer

Steward Health Care System, LLC BY EMAIL ONLY

October 29, 2024

KATHLEEN E. WALSH

Secretary

ROBERT GOLDSTEIN, MD, PhD

Commissioner

**Tel: 617-624-6000**

[**www.mass.gov/dph**](http://www.mass.gov/dph)

**Re: Review of Closure Plan Facility:** Norwood Hospital **Ref. #:** 2114-767

Dear Dr. Diaz:

On October 7, 2024, an Emergency Motion to authorize the closure of Steward Norwood Hospital (“the Hospital”) and the satellite facilities related to the Hospital, was allowed in connection with the bankruptcy filing of the Steward Health Care System in Massachusetts.

Pursuant to the order, on October 11, 2024, the Department of Public Health (the "Department") received the Hospital’s notice of intent to close. Additionally, on October 21, 2024, the Department received from the Hospital a Closure Plan (the “Plan”) for the Hospital intended to address the requirements of 105 CMR 130.122(F)

On October 21, 2024, and October 22, 2024, the Department held hearings in response to the notification received from you regarding the closure of the Hospital and satellite facilities related to the Hospital.

105 CMR 130.020 includes within the definition of essential health service a “campus, or any of the services enumerated in the definition of service in 105 CMR 130.020 that is not included in the Excluded Services list.” As a result of its review, including testimony presented at the hearings, and pursuant to M.G.L. c. 111, section 51G and 105 CMR 130.122(E), the Department has made a finding that the Hospital is in fact an essential service necessary for preserving access and health status within the Hospital’s service area. This determination does not give the Department the power to mandate that the Hospital remain open, but rather,

mandates the Hospital to submit a plan for assuring access to such necessary service(s) following the closure, *see* 105 CMR 130.020(F).

The Department has completed its review of the submitted closure plan. As a result of this review and in light of the testimony given at the public hearings, the Department has prepared the following comments:

1. **Information on the Location and Service Capacity of Alternative Delivery Sites:** While the Hospital’s October 21, 2024 Plan included limited information on the location of alternate locations for certain specific services, you failed to identify the service capacity of alternative delivery sites for the full complement of the Hospital’s services and its satellites post closure. The Department requests a comprehensive assessment of the location and service capacity of alternative delivery sites for each of the Hospital’s and satellites’ licensed services, including communication to date regarding capacity at the alternative delivery sites to provide services to patients who will be displaced by the Hospital’s and satellites’ permanent closure. The Department also expects the assessment to include how the Hospital intends on maintaining communication with the alternate sites to ensure capacity and plans for communicating information to patients and the community.
2. **Emergency Department Capacity**: During the hearing on October 21, 2024, members of the public expressed concern regarding the continued effect the permanent closure will have on emergency department capacity at alternative hospitals. The Department requests a comprehensive assessment of the ED capacity of alternative sites and the subsequent impact on ED boarding expected at the alternate hospitals.
3. **An Assessment of Transportation Needs Post Closure and a Plan for Meeting Those Needs:** In the Plan submitted to the Department on October 21, 2024, you listed public transportation resources available to residents of the community. The Department requires information on how the Hospital assessed the transportation needs of its patients and the community, the results of that assessment, and how the Hospital intends to meet those assessed needs. Additionally, at the hearing on October 21, 2024, members of the public raised concerns over the lack of any direct public transit from Norwood Hospital’s service area to communities with alternate delivery sites, such as Needham, MA. The Department expects the Hospital to provide a detailed assessment of the travel needs of its current patients and the community post closure and the solutions to meet those needs.
4. **Ambulance Times:** During the hearings on October 21st and 22nd, 2024, commentors expressed concerns regarding the effect the Hospital’s permanent closure will have on ambulance run times. The Department requests information on the effect the closure will have on ambulance run times to and from alternative delivery sites along with information on what these estimates are based on and whether they take into consideration the time it takes for an ambulance to return to its primary service area.
5. **A Protocol that Details Mechanisms to Maintain Continuity of Care for Current Patients:** In the Plan received October 21, 2024, you identified alternative care sites within the community, the services they provided, and travel times to these sites, and indicated that letters will be sent to patients alerting them of the closure, that these letters will include information on how to contact an alternate site, reschedule any appointments necessary, and that a patient assistance line number will be included in case of questions. Based on this and testimony received at the hearings held on October 21, 2024 and October 22, 2024, the Department is concerned that the applicant has not secured and patients are not receiving the necessary support to arrange ongoing services elsewhere and the plan lacks detail as to what, how, and when current patients will receive information about options for care available to them, what resources are and will be available to patients to ensure they are able to navigate the change, and answer any care continuity questions. The Department requires that the Hospital provide additional details on how it intends to meet these continuity of care needs for current patients of the Hospital’s satellites both immediately prior to the satellites closing and once they have permanently closed. Specifically, the Department requests information on how continuity of care will be maintained for each service line and what resources will be available to patients who need assistance immediately and once the satellites have closed.
6. **A Protocol that Describes how patients in the Hospital’s Service Area will Obtain the Services at Alternative Delivery Sites:** Based on testimony presented at the hearings on October 21, 2024 and October 22, 2024, community leaders, patients, and staff are concerned about how they will obtain services that are closing immediately, and post closure. In your response received October 21, 2024, you indicated that patients will be referred to their Primary Care or Specialty provider to assist with rescheduling needed for services at alternative sites. The Department is concerned that patients are not receiving the necessary support to arrange ongoing services elsewhere. The Department requests information on steps the Hospital has proactively taken to assist patients in obtaining services at alternative delivery sites, including how the hospital will immediately communicate support to their patients and the community, including but not limited to how to access the patient assistance line.
7. **Public Outreach:** At the hearings on October 21, 2024 and October 22, 2024, members of the public raised concerns regarding an overall lack of transparency and information provided to patients, staff, local officials from affected communities, and elected officials. The Department requests information on what steps have been taken to keep all stakeholders informed of the pending closures and the resources that will be available to them post-closure.
8. **Staff Impacts:** In the Plan submitted to the Department on October 21, 2024, you indicated steps were taken to notify employees of the closure and assist with career and job support during the closure periods. This includes a virtual town hall for employees on October 18, 2024, and additionally as needed. Based on testimony provided at the hearing on October 21, 2024, employees have had minimal

communication from the Hospital regarding the closure, including when their benefits will expire. The Department requests information on the protocol of how and when another staff town hall will be held, and what additional, immediate steps will be taken to ensure that Hospital employees have the information and support they need going forward.

1. **Communication Plan for Patients**: In the Plan submitted to the Department on October 21, 2024, you stated letters would be sent to all current patients of the Hospital satellites and that there would be a patient assistance line staffed Monday - Friday 7:00 AM – 7:00 PM. The Department requests additional information on if/when these letters were sent out, copies of the letter template for each patient letter sent, the actual patient assistance line number, and how long the patient assistance line will be available.
2. **Timeline and Communication Post-Closure**: The Department requests a timeline for the total closure and decommissioning of the partially completed Hospital and its four (4) satellites after November 5, 2024**.** Additionally, the Department requests the information for a point of contact at the Hospital and Steward Health Care after November 5, 2024.
3. **Preservation of Cultural Competencies:** The Department directs the Hospital to submit a plan for the preservation of cultural competencies in care, including the breadth of translation services currently provided to the patients of the Hospital and its satellites and throughout alternative service delivery sites identified.
4. **Additional Information:** The Department requests the name and contact information for the following:
   1. Medical records vendor
   2. Employee records storage vendor
   3. Plan for Pharmacy located at 70 Walnut Street, Foxborough.

Under the provisions of 105 CMR 130.122(G), the Hospital must submit a timely response to the comments of the Department. Please submit your comments within 2 days of your receipt of this letter to my attention, in order that we complete our review of the permanent closure of Norwood Hospital and its satellite facilities.

Thank you for your continued cooperation in this process. If you have any questions, please contact me at [Stephen.Davis@Mass.Gov](mailto:Stephen.Davis@Mass.Gov).

Sincerely,



Stephen Davis Division Director

cc: A. Sousa, DPH

J. Bernice, DPH

K. Fillo, DPH

J. Gagne, DPH

M. Callahan, DPH

R. Rodman, Husch Blackwell