

August 10, 2021

Via E-Mail

Sherman Lohnes, Esq., Director  
 Division of Health Care Facility Licensure and Certification  
 Massachusetts Department of Public Health  
 67 Forest Street  
 Marlborough, MA 01752

Re: Anna Jaques Hospital – Response to Essential Services Finding

Dear Attorney Lohnes:

On behalf of Anna Jaques Hospital (“the Hospital”), please find a response to the Department of Public Health’s (the “Department”) Essential Services Finding letter, dated July 27, 2021, concerning the closure of its inpatient pediatric service. In compliance with the regulatory requirements at 105 CMR 130.122, the Hospital offers the following plan to maintain access to inpatient pediatric services for residents of the Hospital’s service area, along with the additional information requested in the Department’s Finding letter.

**Part 1**

**(1) Information on utilization of the services prior to proposed closure.**

As indicated in the chart below, the Hospital has experienced low utilization of the Service for several fiscal years (“FYs”). The Hospital has approximately 30 pediatric inpatients annually, with 28 in FY18, 33 in FY19, and 30 in FY20. This amounts to less than one pediatric inpatient per week. In FY21 year-to-date, the Hospital had one pediatric inpatient.

	FY18	FY19	FY20	YTD FY21
	Pediatric <18	Pediatric <18	Pediatric <18	Pediatric <18
IP Medical	8	10	12	1
IP Surgical	4	12	5	-
Observation	16	11	13	-
Transferred	1	-	3	1
<b>IP Total</b>	<b>28</b>	<b>33</b>	<b>30</b>	<b>1</b>

**(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:**

The Hospital anticipates that most patients in its service area requiring inpatient pediatric services will seek treatment at another Beth Israel Lahey Health hospital, specifically Beverly Hospital or Winchester Hospital. Pediatric patients who require tertiary care may obtain care at Boston Children's Hospital, Tufts Medical Center or at other appropriate hospitals as requested by the patient.

**(a) Current utilization at these alternative sites;**

Beverly Hospital has a current average daily census ("ADC") of two (2) pediatric inpatients through year-to-date through June 2021. Winchester hospital historically has an ADC of 3.43 pediatric inpatients, though the year-to-date utilization (ADC of 1.08) is artificially low due to the COVID-19 pandemic. The current utilization at Boston Children's Hospital is unknown.

**(b) Type of services available at the alternative sites;**

Beverly Hospital has a Level II inpatient pediatric service, with access to pediatricians and specialists such as surgery and orthopedics. Winchester Hospital is also licensed to provide Level II inpatient pediatric services, and similarly provides numerous pediatric specialists, such as a Pediatric Emergency Department, pediatric rehabilitation, and asthma management. Both hospitals provide the same level of pediatric care currently offered at Anna Jaques Hospital. As Boston Children's Hospital is a tertiary hospital, it offers a broader range of services, representing the highest acuity services for a pediatric service, including multiple specialties and sub-specialties. Accordingly, Boston Children's Hospital provides higher acuity services than the current service at Anna Jaques Hospital.

**(c) Type of medical diagnoses accepted; and**

Beverly Hospital and Winchester Hospital both provide secondary pediatric services and therefore accept medical diagnoses appropriate for that level of care, including numerous specialties. Accordingly, both of these alternative sites accept the same medical diagnoses as the Level II inpatient pediatric service Anna Jaques Hospital. As described above, Boston Children's Hospital accepts the highest acuity patients and therefore accepts the same and higher acuity medical diagnoses as the current service at Anna Jaques Hospital.



**(d) Adequacy of space and resources at the alternative sites.**

Beverly Hospital's inpatient pediatric ADC is 2 patients and has 11 licensed inpatient pediatric beds. Winchester Hospital's inpatient pediatric ADC is approximately 3 patients and has 12 licensed inpatient pediatric beds. This data is provided in table form below.

	<b>Beverly Hospital</b>	<b>Winchester Hospital</b>
<b>ADC</b>	2	3
<b># Licensed Beds</b>	11	12
<b>Occupancy</b>	18%	25%

In accordance with this data, both hospitals have an average of 9 inpatient pediatric beds available each day. As Anna Jaques Hospital currently sees less than 1 patient per week, both alternative sites have adequate space and resources to accommodate this patient volume. Moreover, while this data is not available for Boston Children's Hospital, the utilization at Anna Jaques Hospital is so low that the Service closure is anticipated to have a negligible effect on 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;**

The following table represents the distance and approximate peak and non-peak travel times to several alternative delivery sites from the Hospital:

<b>Hospital</b>	<b>Mileage</b>	<b>Non-peak (10 am)</b>	<b>Peak (5 pm)</b>
Primary - BIDMC Beverly Hospital	25 miles	33 min	30 - 40 min
Primary - BIDMC Winchester Hospital	36 miles	39 min	35 - 50 min
Primary - Children's Hospital Boston	40 miles	51 min	50 min - 1 hr 15 min
Primary - Tufts Hospital for Children	39 miles	47 min	45 min - 1 hr 5 min
Secondary - Lawrence General Hospital	23 miles	26 min	24 - 35 min
Secondary - Lowell General Hospital	34 miles	38 min	40 min - 1 hr 5 min
Secondary - Portsmouth Regional Hospital	20 miles	22 min	20 - 26 min
Secondary - Exeter Hospital	17 miles	22 min	20 - 28 min
Secondary - Emerson Hospital	48 miles	50 min	45 min - 1 hr 5 min

\*Source: Google Maps

**(4) An assessment of transportation needs post discontinuance and a plan for meeting those needs;**

The Hospital does not anticipate significant transportation access challenges to the community following closure of the Service. As described in part (1) above, the Hospital sees very few

pediatric inpatients. Consistent with the Hospital's current policies and procedures, pediatric patients requiring transfer to another site for inpatient care will be provided transportation via ambulance.

**(5) A protocol that details mechanisms to maintain continuity of care for current patients of the discontinued service; and**

Following closure of the Service at Anna Jaques Hospital, pediatric patients may still present to the Emergency Department ("ED") for emergent screening and treatment. Patients discharged from the ED receive discharge instructions that are communicated to the patient and their parents/legal guardians. This is an existing practice that will remain in place following closure of the Service. Patients who require pediatric inpatient admission will be transferred to an appropriate accepting facility. The Hospital will ensure all of the patient's relevant medical records are transferred to the accepting facility, and will provide physician-to-physician and nurse-to-nurse reports to ensure continuity of care following the transfer, consistent with current practice for ED transfers.

**(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;**

If a pediatric patient presents to the ED and requires transfer to another facility for inpatient care, prior to the transfer the Hospital will ensure that the facility has available space to care for the patient, has qualified personnel to treat the patient, and has agreed to accept the transfer and provide treatment. The sending physician will communicate with the receiving physician regarding the patient's diagnosis and treatment, and a similar communication will occur between the sending and receiving nurse. These protocols ensure continuity of care and proper diagnosis and treatment.

**(b) The impact that this may have on the current occupancy rates at alternative delivery sites;**

As described throughout this response, the Hospital currently cares for less than one pediatric inpatient per week. This shift in volume to alternative sites for inpatient pediatric will have a minimal impact on current occupancy rates at the alternative site.

**(c) The ability of the alternative delivery sites to meet the needs of these patients; and**

Each of the alternative sites provide the same or higher level of pediatric care as Anna Jaques Hospital and have the space and resources necessary to accommodate the low



volume of patients that historically require admission at the Hospital. Accordingly, the alternative sites are able to meet the needs of pediatric inpatients.

**(d) Other alternatives if medical needs cannot be accommodated at the proposed alternative sites.**

If the medical needs of pediatric patients cannot be accommodated at the proposed alternative sites, the Hospital would seek to transfer the patient to an additional alternative site with the capacity and resources to treat the patient. As referenced in (3) above, there are several hospitals within an hour of Anna Jaques Hospital that can accommodate the low volume of pediatric patients that currently present to the Hospital with inpatient needs.

**Part 2**

**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) Pediatric Advisory Council: Based on opening remarks given by the Hospital at the July 20th hearing, the Hospital has created a Pediatric Advisory Council. The plan which you are required to submit must address the makeup of this council and whether it represents the diversity of the community served by the Hospital.**

The Hospital's Pediatric Advisory Committee ("PAC") is comprised of Hospital physicians and leaders, as well as a member of the community. The members include pediatricians, ENT surgeons, and emergency physicians who are familiar with the diversity of the surrounding community that obtains care at Anna Jaques Hospital. Several of the physician members have offices in Newburyport and Haverhill, and therefore provide the PAC with an understanding of the patient population in terms of culture, gender, sexual orientation, religious beliefs, and socioeconomic realities.

**(2) Day Surgery: Based on opening remarks given by the Hospital, Anna Jaques Hospital will continue to provide outpatient services, including day surgery and emergency services. The plan which you are required to submit must address how the Hospital will address the potential need for a day surgery pediatric patient to stay overnight.**

The Hospital will ensure appropriate care for pediatric patients who require an overnight stay following a day surgery. In accordance with Hospital policies, in the event a pediatric surgical patient does not meet the criteria for discharge from the PACU and requires a stay less than 8 hours, the patient will be cared for by a Pediatric Advanced Life Support ("PALS") certified nurse until the patient is stable for discharge.

If a patient requires a length of stay greater than 8 hours, the patient will be transferred to an inpatient pediatric unit within the Beth Israel Lahey system, such as Beverly Hospital or

Sherman Lohnes, Esq., Director  
Division of Health Care Facility Licensure and Certification  
Massachusetts Department of Public Health  
August 10, 2021  
Page 6

Winchester Hospital. If the hospitals cannot accommodate the patient, other hospitals with Level I or II pediatric services will be considered for transfer.

If a patient requires tertiary care of pediatric subspecialists, the patient will be transferred to an appropriate hospital, such as Boston Children's Hospital or Tufts Hospital for Children. The pediatric patient will remain in the care of the PACU nurses until the patient can be transferred to an appropriate facility.

**(3) Transportation: Based on the 90-day notice submitted by the Hospital to the Department on June 26, 2021, patients will continue to have access to nearby hospitals for inpatient pediatric services following the closure of Pediatric Service at Anna Jaques Hospital. The plan which you are required to submit must address how the Hospital will assist families and patients with transportation when inpatient care is needed. Additionally, the Hospital must provide information on methods of transportation for patients who need access to inpatient care after the elimination of Pediatric Service.**

Following closure of the Service, depending on the child's acuity, the Hospital in conjunction with the EMS system, can facilitate patient transportation by the appropriate level of ambulance transport (e.g., Advanced Life Support or Basic Life Support) for patients who require a transfer to another hospital for inpatient treatment. This transportation will be conducted pursuant to the Hospital's contract with Atlantic Cataldo Ambulance ("Cataldo"). Please note that physicians at the Hospital are medical control for Cataldo and that the hospital reviews and makes recommendations at the bi-monthly Trauma Committee on care for all patients, including pedi-trauma cases. This role will help facilitate the Hospital's ongoing role with respect to transports.

We thank you for your attention to this matter. Please do not hesitate to contact me or Andrew S. Levine, Esq. at (781) 898-4379 if you have any questions or require additional information.

Sincerely,



Mark Goldstein  
President  
Anna Jaques Hospital

cc: S. Boyd, Esq., AJH  
M. Callahan, Esq., DPH  
S. Carlson, DPH  
S. Davis, DPH  
R. Kaye, Esq., DPH  
E. Kelley, DPH

Sherman Lohnes, Esq., Director  
Division of Health Care Facility Licensure and Certification  
Massachusetts Department of Public Health  
August 10, 2021  
Page 7

A. Levine, Esq.  
W. Mackie, DPH  
R. Maki, AJH  
D. Perry, AJH  
R. Rodman, Esq., DPH  
M. Schuyler, AJH  
M. Smith-Mady, Esq.  
M. Taberner, Esq., AJH