



October 1, 2020

Via Email

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

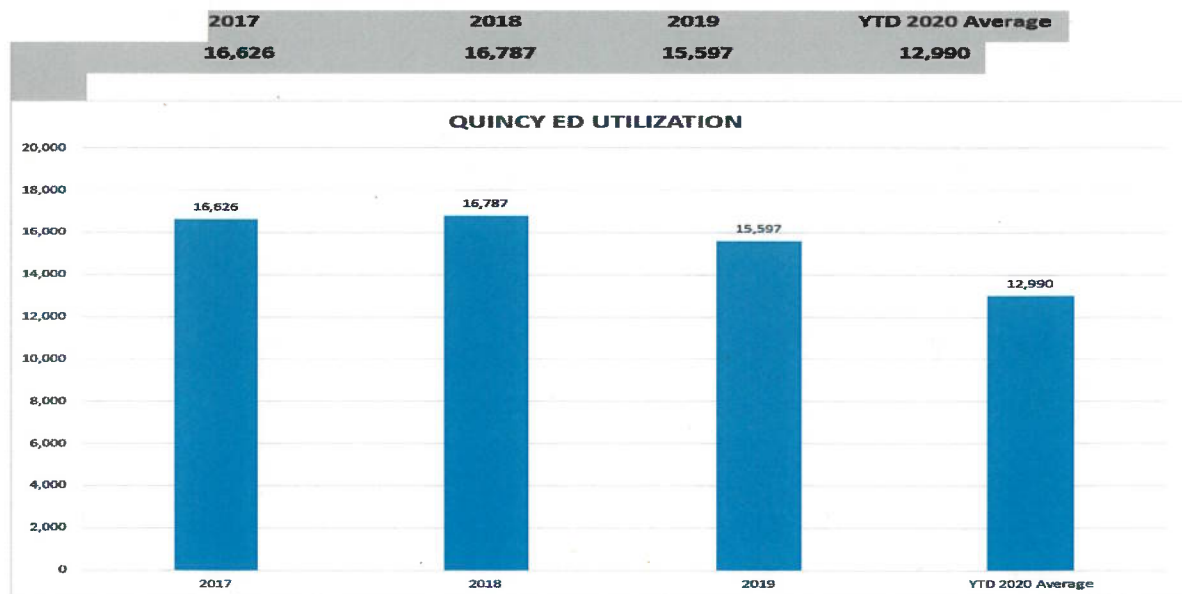
Re: Steward Carney Hospital, Inc. – Response Plan to DPH Regarding Closure Satellite Emergency Facility – Quincy

Dear Attorney Lohnes:

In response to the Department of Public Health’s (the “Department”) Essential Services Finding letter dated September 16, 2020 and pursuant to 105 CMR 130.122(F) concerning the closure of the Satellite Emergency Facility (the “SEF”), Steward Carney Hospital, Inc. (“the Hospital”) presents the following response plan that details the elements required by the Department, including how access to the appropriate level of services (collectively, the “Services”) will be maintained for the residents of the Hospital’s service area, along with the additional information requested in the Finding letter.

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

Utilization of the SEF has been low and declining since 2017. As shown in the chart below, annual visits to the SEF in 2017 through YTD 2020 has been less than 17,000.



Utilization has trended downward in that time. By 2019, visits were less than 16,000 visits, and YTD 2020 visits are projected to be only an annualized 12,284 visits by the end of the year. Therefore, 2020 annual volume is expected to be 26% less than 3 years ago.

In addition, the SEF is being utilized primarily by patients who can be effectively treated at alternative locations. As shown by the calendar year 2019 data, most patients seeking treatment at the SEF were experiencing lower acuity illness and medical conditions. Lower acuity patients (ESI of 3 or more) represented 12,745 of SEF visits (81.6%) and could have received effective treatment at such local facilities as urgent care centers. Higher acuity patients accounted for less than 20% of all visits to the SEF. The acuity data for 2020 (annualized) is similar, with approximately 81.5% of patients visiting the SEF having an ESI level of 3 or more. Following closure of the SEF, the higher acuity patients (up to 8 per day on average) have access to acute emergency care at five (5) full-service Emergency Departments which are open 24/7, two are within 3.9 miles and all five are 10-30 mins of travel time from the SEF.

ESI	YTD Reg Dec-2019	% of total visits
-	58	0.4%
1	136	0.9%
2	2,685	17.2%
3	7,508	48.1%
4	4,707	30.1%
5	530	3.4%
	15,624	100%

ESI	YTD Reg (2020 Annualized)	% of total visits (rounded)
-	48	0.39%
1	134	1.09%
2	2,100	17.10%
3	6,499	52.91%
4	3,259	26.60%
5	244	1.99%
	12,284	100%

(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:

There are alternative delivery sites in the SEF’s service area that have the capacity to treat patients seeking both emergency care and/or urgent care services. A majority of patients in the service area are using the SEF for medical conditions which can be effectively treated in urgent care settings and would not need emergency level care. The Hospital anticipates that this trend will continue in light of its utilization history over the past several years. The Hospital’s Emergency Department operates at the Hospital’s main campus and the emergency departments of other area hospitals are also within a short travel distance.

In 2020, the SEF averaged 35 patients per day. The Hospital’s ED has the capacity to absorb the patients that would have visited the SEF for treatment. In addition, within a 10-30 minute travel time from the SEF (depending upon peak/non-peak hours), there will continue to be five (5) EDs available to care for the patients. Spread evenly, each ED would take in only 7 patients if all such 35 patients needed emergency care. However, as lower acuity ESI patients comprise 81.6% of SEF visits, patients will also have the opportunity to utilize the six (6) urgent care centers and two (2) community health centers within a similar travel time and geographic radius.

(a) Current utilization at these alternative sites.

The Hospital has identified the following alternative delivery sites where patients may obtain emergency and/or urgent care services.

Alternative Delivery Sites	Services
<p>Carney Hospital 2100 Dorchester Avenue Dorchester, MA 02124 24 Hour Operation</p>	<p>Emergency Department Care – provides a full range of emergency services that include:</p> <ul style="list-style-type: none"> • Pediatric • Adult • OB-GYN • Psychiatric emergency medical services
<p>South Shore Medical Center 1495 Hancock Street Quincy, MA 02169 24 Hour Operation</p>	<p>Emergency Department Care – provides a full range of emergency and trauma level services</p> <p>Trauma: Level II Adult</p>

<p>Tufts Medical Center 800 Washington Street Boston, MA 02111 24 Hour Operation</p>	<p>Emergency Department Care – provides emergency room services, trauma center, pediatric services, and an express care center.</p> <p>Trauma: Level I Adult, Level I Pediatric</p>
<p>Boston Medical Center One Boston Medical Center Plaza, Boston, MA 02118 24 Hour Operation</p>	<p>Emergency Department Care – provides a full range of emergency and trauma level services</p> <p>Trauma: Level I Adult, Level II Pediatric</p>
<p>BIDMC – Milton 199 Reedsdale Avenue Milton, MA 02186 24 hour Operation</p>	<p>Emergency Department Care</p>
<p>ConvenientMD Urgent Care 479 Washington St Suite 2, Quincy, MA 02169 8am-8pm</p>	<p>Walk-in and/or Urgent Care services</p>
<p>Health Express 119 Parkingway, Quincy, MA 02169 9am-6pm Monday – Friday 9am-4pm Sat and Sun</p>	<p>Walk-in and/or Urgent Care services</p>
<p>Compass Medical Quincy 54 Miller St, Quincy, MA 02169 8am-6pm</p>	<p>Walk-in and/or Urgent Care services</p>
<p>AFC Urgent Care 485 Granite Street Braintree, MA 02184 8am-8pm</p>	<p>Walk-in and/or Urgent Care services</p>
<p>Atrius Health 1250 Hancock Street Quincy, MA 02169 8am-6pm</p>	<p>Walk-in and/or Urgent Care services</p>
<p>Minute Clinic 626 Southern Artery</p>	<p>Walk-in and/or Urgent Care services</p>

Quincy, MA 02169 8am-7pm Monday-Friday 9am-5:30pm Saturday 9am-4:30pm Sunday	
Manet Community Health Center 110 West Squantum Street Quincy, MA 02171 Monday 8:00 am to 8:00 pm Tuesday 8:00 am to 8:00 pm Wednesday 8:00 am to 8:00 pm Thursday 8:00 am to 8:00 pm Friday 8:00 am to 5:00 pm Saturday 9:00 am to 2:00 pm	Community Health Center services
South Cove Community Health Center 435 Hancock St. Quincy, MA 02171-2428 Monday 8:30 am to 6:30 pm Tuesday 8:30 am to 6:30 pm Wednesday 8:30 am to 5:30 pm Thursday 8:30 am to 5:30 pm Friday 8:30 am to 5:30 pm Saturday 8:30 am to 3:00 pm Sunday 8:30 am to 2:00 pm	Community Health Center services

The following data available from the Center for Health Information and Analysis (CHIA) show the utilization of emergency services at the alternative emergency department sites: (ED Visits)

ACUTE HOSPITAL

Name	Emergency Department Visits			
	FY15	FY16	FY17	FY18
Beth Israel Deaconess Hospital - Milton	24,889	27,334	26,573	26,089
Boston Medical Center	125,430	132,148	133,528	130,163
South Shore Hospital	94,667	97,679	95,898	97,630
Steward Carney Hospital	50,385	52,170	52,652	52,803
Tufts Medical Center	43,612	45,959	45,952	45,943

Source: Statewide Number of Emergency Department Visits
 Hospital Profiles FY18 Databook
 (Appendix E)

This data shows each of the alternative ED sites has been able to handle a difference of a few hundred to a few thousand patients across recent years. For example, the Hospital was able to see 50,385 ED patients in FY2015, then over 52,000 in FY2017, and almost 53,000 in FY2018. Likewise, Boston Medical Center saw 125,430 ED visits in FY2015 and then over 130,000 ED visits in each year from FY2016 through FY2018. Volume data for 2019 and 2020 YTD (August) also corroborates that these alternative ED providers experience variations in volume in different years.

	2019	YTD 2020 (Aug.)
BIDMC – Milton	25,205	11,719
Boston Medical Center	112,481	50,804
Tufts Medical Center	35,301	17,280
Steward Carney Hospital	45,089	23,952

*These volume figures are based on data provided by Vizient. South Shore Hospital data not available from Vizient.

Accordingly, in light of the different levels of emergency volume that each of these alternative ED providers have been capable of handling, these alternative ED providers have the service capacity necessary to care for the small number of patients that obtain emergency care from the SEF.

(b) Type of services available at the alternative sites.

The alternative sites offer a range of emergency department and urgent care services, including, but not limited to, the following:

- Emergency Care
- Trauma Level Emergency
- Surgery
- Internal Medicine
- Ambulatory Care
- Psychiatric Emergency care
- Primary Care
- Diagnostic Medicine
- Laboratory Services

(c) Type of medical diagnoses accepted.

The Emergency Department at the Hospital and other area hospitals provide treatment to patients of all ages and for a wide variety of emergency medical conditions, including, but not limited to:

- Emergency Medicine and/or Trauma level medical conditions
- Critical Care needs
- Surgical needs (General and Specialty)
- Cardiology/cardiovascular conditions
- Neurology
- Orthopedics
- Internal & Family Medicine needs
- Gastrointestinal conditions
- Obstetrics & Pediatric medical needs
- Renal medical conditions
- Diagnostic Radiology and other Imaging needs
- Laboratory needs
- Ambulatory Care needs
- Adolescent, Adult, and Geriatric Psychiatric conditions

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

The alternative emergency departments (5 sites), urgent care centers (6 sites), and the dedicated community health centers (2 sites) that have been identified can accommodate the 35 patients per day that present to the SEF. If all such 35 patients needed emergency care, each of the 5 emergency departments may see an average increase of only 7 patients. However, given that most SEF patients are lower acuity than emergency level, looking at these 35 patients spread across all 13 sites may result in an average increase of less than 3 patients per day at each location.

(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 Hospital is confident that closing the SEF will not adversely affect the ability of patients to access equivalent Services in a safe, timely fashion. The declining volume trend over the last few years indicates that patients are already traveling to other providers for care. In the SEF's service

area, there is a large number of such alternative providers, many of which are within approximately 20 minutes from the SEF during peak and non-peak hours as shown below. The providers and travel times include the following below. (Source – Google Maps)

From SEF	6 AM (non-peak)	1 PM (peak)	Miles
To Carney Hospital	10 – 14 mins	12 – 20 mins	3.9
To Beth Israel Deaconess Hospital- Milton	10 – 14 mins	10 – 20 mins	3.9
To South Shore Hospital	12 – 18 mins	14 – 26 mins	7.6
To Manet Community Health Center	7 – 10 mins	8 – 14 mins	2.5
To South Cove Community Health Center	7 – 9 mins	7 – 12 mins	2.4
To Tufts Medical Center	18 – 35 mins	16 – 26 mins	8.7
To Boston Medical Center	18 – 35 mins	14 – 26 mins	8.6
To ConvenientMD Urgent Care (Quincy)	6 – 8 mins	7 – 16 mins	2.2
To Health Express (Quincy)	5 mins	5 – 7 mins	1.0
To Compass Medical Quincy	5 mins	5 – 7 mins	1.7
To AFC Urgent Care Braintree	8 – 10 mins	9 – 16 mins	4.5
To Atrius Health (Quincy)	5 – 6 mins	5 – 6 mins	0.8
To MinuteClinic (Quincy)	7 – 8 mins	8 – 12 mins	2.1

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

The Hospital will identify all patients who have visited the SEF within the past year. The Hospital will send letters to such patients notifying them of the SEF's closure and what facilities and providers are available to them for equivalent care. In addition, the Hospital will make use of traditional notice media, such as newspapers, and internet-based social media platforms to make people aware of the closure and access to care options.

The patient community will be able to access alternative providers of the SEF's emergency Services by public transportation. The MBTA has routes from Quincy to the five hospital EDs located at Carney Hospital, BID-Milton, South Shore Hospital, Boston Medical Center, and Tufts Medical Center. The MBTA routes are provided below.

- MBTA Route to Carney Hospital: Bus Route 245
- MBTA Route to South Shore Hospital: Braintree Shuttle Bus #230, 236
- MBTA Route to BID-Milton: Bus Route 45
- MBTA Route to Boston Medical Center: Bus Route 47
- MBTA Route to Tufts Medical Center: MBTA Red Line (Trolley/Subway)

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

Assigned SEF and their PCPs of record will receive notifications about the SEF closure. Unassigned patients will receive notifications about PCPs in the community available to them. All communications to patients will provide information as to what alternative emergency service and urgent care providers are available in the service area. The Hospital will also provide information about mental health and substance abuse services available in the community.

(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.

The Hospital will identify all patients who have visited the SEF within the past year. The Hospital will send letters to such patients notifying them of the SEF's closure and what facilities and providers are available to them for equivalent care. In addition, the Hospital will make use of traditional notice media, such as newspapers, and internet-based social media platforms to make people aware of the closure and access to care options.

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

Daily volume at the SEF in 2020 has averaged up to 35 visits per day, resulting in 3 admissions per day. Accounting for the high number of alternative providers in the service area, this low volume of visits can be absorbed by other facilities. The 3 daily admissions is also a small figure that would result in minimal impact on occupancy rates at other hospital facilities in the area.

(c) The ability of the alternative delivery sites to meet the needs of these patients.

Patients who present to the five hospitals with Emergency Departments in the service area, all within short travel time during both peak and non-peak times, will have access to a wider range of services. As fully licensed hospitals, these facilities have hospital-based capabilities that exceed what the SEF offers. A SEF is limited to emergency services only and transports to higher levels of care. Patients who begin receiving care at a hospital will be able to more efficiently access follow-up treatment options, including emergency surgery.

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

If medical needs cannot be accommodated at the proposed alternative sites, local PCPs, Community Health Centers, and Urgent Care Centers all have escalation protocols in place with other partner hospitals and EMS providers. Patients will be able to access health care treatment options through those processes.

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) Hours of Operation at Alternative Care Sites: Based on testimony presented at the hearing on September 1, 2020, concern was expressed regarding the hours of operation of alternative care sites in Quincy, most of which are closed by 8pm. The plan which you are required to submit must include information on steps taken to ensure patients in the SEF's service area have access to emergency medical services 24 hours a day.

The Hospital is committed to ensuring that members of its patient community are able to access emergency services following closure of the SEF. As part of the communication efforts with patients and providers that the Hospital is undertaking, the Hospital will be including information about the availability of 24-hour emergency services in the vicinity of Quincy to enable patients and family to make effective health care decisions. Such information will include the names and

locations of other hospitals, directions, distance and approximate travel times to those locations from the SEF's existing site, public transportation and parking options, a summary of the services that are provided at each location, and the names of local EMS providers. Patients will also be able to contact the Hospital directly to ask questions about other local emergency departments.

(2) Boarding Patients: Based on testimony presented at the hearing on September 1, 2020, concern was expressed regarding the thousands of patients a year that have been boarding in the SEF while awaiting a mental health bed. The plan which you are required to submit must include information on steps taken to ensure patients in need of a mental health bed will have access to an alternative care site that is open 24 hours a day while waiting for a bed.

The following represents behavioral health volume at the SEF from 2018 to 2020 YTD (September):

SEF BH Visits

2018 – 3,614

2019 – 3,819

2020 YTD as of September 21st – 2,451

Since 2019, the SEF has had an average boarding time for behavioral health patients ranging from 142 minutes to 166. This represents the average time from a bed request to departure from the SEF.

- ED Boarding Time BH QSEF 2019 – 142 minutes (318 patients boarded and admitted)
- ED Boarding Time BH QSEF 2020 Q1 – 166 minutes (77 patients boarded and admitted)
- ED Boarding Time BH QSEF 2020 Q2 – 149 minutes (56 patients boarded and admitted)

The Hospital offers behavioral health/psychiatric care at its main campus for adolescent, adult, and geriatric patients. The Hospital will work with alternative care providers and local shelters serving Quincy to ensure that information about its services are available, including how best to contact the Hospital to arrange for intake and beds, as well as what transportation options may be appropriate or available under the circumstances. The Hospital will also provide local providers and shelters with available information about behavioral health services offered at other area hospitals, such as South Shore Hospital.

(3) Patients without Insurance: Based on testimony presented at the hearing on September 1, 2020, concern was expressed regarding homeless individuals not having access to services at urgent care centers that require some form of insurance. The plan which you are required to submit must include information on steps taken to ensure the uninsured homeless population of the SEF's service area have access to emergency medical services after the closure of the SEF.

The City of Quincy has numerous homeless shelters, such as:

- Father Bill's Place
- Anchor Inn
- Friends of the Unborn
- Queen of Peace Family Shelter

The Hospital will provide homeless shelters in Quincy with information about the SEF closing and alternative emergency care facilities in the service area, including Carney Hospital, other area hospitals, and how such services may be accessed.

(4) Cultural and Linguistic Needs of Population Served: Your plan must include information on what the Hospital has done to assess the cultural and linguistic needs of the population it currently serves, what those needs have been determined to be; and to what extent the alternate sites identified as likely to provide care after the proposed closure will be able to address the needs identified.

The Hospital remains fully prepared to serve patients at its main campus who currently are seen in the SEF. It stands ready to continue to provide quality medical care to all populations and has staff fluent in other languages to help bridge the language gap. For example, the Hospital has a robust team of highly experienced medical interpreters that speak Cantonese, Mandarin, French, Haitian Creole, Portuguese, Spanish and Cape Verdean Creole. In addition to the Hospital's staff interpreters, it also has over 35 interpreter iPads and hundreds of dual hand-set phones to facilitate interpreting. It can meet any increase in interpreter utilization.

With respect to providers outside of the Hospital:

- BID-Milton Hospital provides interpreters 24 hours per day via in-person, video and phone.
- South Shore Hospital provides interpreters 24 hours per day via in-person, video and phone.
- Tufts Medical Center offers 24/7 medical interpreter access
- Boston Medical Center offers 24/7 medical interpreter access
- Manet Health Center provides interpreters via in-person, video and phone.
- Urgent Care Centers in Quincy have access to telephonic interpreters.

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We thank you for your attention to this matter. Please do not hesitate to contact me or Andrew Levine, Esq. if you have any questions or require additional information.

Sincerely,

A handwritten signature in blue ink that reads "Tom Sands". The signature is written in a cursive style with a large, prominent "T" and "S".

Tom Sands, MBA, MHA, FACHE
President
Steward Carney Hospital, Inc.

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