

**Lasell Village, Inc.**  
**NONE-24030510-CL**

**APPLICANT QUESTIONS #1**

*Responses should be sent to DoN staff at [DPH.DON@State.MA.US](mailto:DPH.DON@State.MA.US)*

While you may submit each answer as available, please

- List question number and question for each answer you provide
- Submit responses as a separate word document, using the above application title and number as a running header and page numbers in the footer
- When providing the answer to the final question, submit all questions and answers in one final document
- Submit responses in WORD or EXCEL; only use PDF's if absolutely necessary. If "cutting and pasting" charts, provide them in a PDF so they can be clearly seen
- **Whenever possible, include a table with the response**
- **For HIPAA compliance Do not include numbers <11.**

**Project Description**

1. The application states that the project includes a renovation of the entire building, including all patient care, staff, and support spaces (pg.2). The application also states that the project is a phased renovation of the third floor Skilled Nursing Facility Lasell House (pg.2).

- a. Explain timeframe for phased renovation.

The Proposed Project will be completed in three phases (1, 2/2A, and 3). See the attached phasing plan including the anticipated start and completion dates. The attached phasing plan also has brief descriptions of each phase.

- b. What is the first year of operations after project completion.

As currently planned, the Proposed Project is anticipated to be complete on or about mid-April 2027.

- c. How does the Applicant plan to minimize disruption of patient care and ensure patient safety and well-being during construction?

The phasing of the Proposed Project has been developed to minimize disruption to patient care and ensure patient safety and well-being during the construction. As noted below, all but ten (10) beds will be taken offline during the construction. This will allow the Applicant to ramp down its short-term admissions in the normal course and focus on the quality of care and safety of its resident population including the short needs of Lasell Villagers and the small long-term resident population. No residents will be discharged from care out of the ordinary course to accommodate the Proposed Project. The Applicant's goal is to reduce the number of moves that the long-term residents are required to make during the Proposed Project. Specifically, the early phases of the Proposed Project focus on the new living environments for the long-term residents so that they be in their new rooms as soon as possible, which will further enhance their quality of life and mental wellbeing even in the midst of construction. Early phases of the Proposed Project will also give the long-term residents early access to the updated dining room and additional living spaces. As patient safety remains a top priority, the Applicant will maintain current staffing levels despite the reduced resident load during the construction. Lastly, the Applicant is in the process of identifying opportunities for bringing the residents off the unit and

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integrating them into other Village areas and activities during the day to minimize the disturbance/noise from any construction related activities.

As further discussed below, protecting the residents includes creating construction and HVAC isolation zones and access for the construction workers segregating the operational area of the skilled nursing facility where the residents will be located.

Major aspects of the construction logistics as planned for optimal resident environment of care as follows:

Access

As a general matter, construction activities will be isolated to the extent practicable from resident areas. Stairs directly adjacent to the construction zones will be utilized for construction worker access only. All other stairwells will be kept free and clear. Elevators will remain active and access will be maintained through construction zones. One elevator will be designated for construction material deliveries

Construction Zone Isolation

Construction zones will be isolated with temporary partitions. Starc Wall Systems will be utilized for temporary partitions. The wall panels are available with locking doors and negative air supply fan connections (see data on this wall system attached). Construction zones will be always kept under negative pressure to prevent ducts and contaminants from leaving the construction zone. Fans will be vented to the exterior away from any operable windows.

HVAC zones within the construction zones will be isolated prior to demolition operations to prevent cross contamination. New zones will similarly be controlled such that they do not extend into construction areas.

Communication

The construction manager plans to hold meetings with the Applicant on a weekly basis to review all ongoing and upcoming work. A six week look ahead schedule will be presented and reviewed at each weekly meeting. Critical activities including the following will be reviewed: material deliveries, worker and resident access revisions, disruption of power and or other utilities.

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2. The CPA report states that during construction all, but 10 beds will be taken out of service, limiting occupancy to approximately 38% (pg.10).
  - a. Will the Applicant's plan to take beds out of service have any impact on current residents?

During the Proposed Project, the Applicant will continue to be able to accommodate the short-term needs of Lasell Villagers and all long-term residents who permanently reside at Lasell House. No residents will be discharged except in the normal course to accommodate the Proposed Project. When determining the number of beds to take out of service, the Applicant reviewed historic utilization data. In the rare instance if there is not sufficient bed availability to accommodate a Lasell Village member, they would be placed at another comparable facility and brought back to Lasell House as soon as practical, consistent with the Applicant's standard practice.

3. The application states a select number of rooms will also be outfitted with additional structural blocking within the ceilings to accommodate Hoyer lifts in the future if they are needed (pg.2).
  - a. Explain the circumstances in which Hoyer lifts will be used.

Hoyer lifts will be used when clinically indicated, such as resident cannot safely bear weight or transfer safely.

4. The application states infection and infectious disease management is an integral part of the care provided (pg.2).
  - a. Describe current infection prevention and control practices at Lasell House.

The infection prevention and control (IPC) program at Lasell House is designed to prevent the spread of infectious diseases among residents, staff, and visitors. The program includes a range of practices such as proper hand hygiene, personal protective equipment (PPE) use, regular cleaning and disinfection, resident and staff vaccination, and ongoing staff education. We also emphasize surveillance for infections, antibiotic stewardship, and thorough employee and visitor health monitoring to maintain a safe environment. These protocols ensure that we reduce the risk of healthcare-associated infections (HAIs) and manage outbreaks effectively.

Resident screening is a key component of the IPC program. We conduct regular screenings for symptoms of infectious diseases, such as fever, cough, or other signs of respiratory illness. This helps us identify potential infections early and take immediate action to prevent spread. Residents with confirmed or suspected infectious conditions are placed under isolation protocols, which may include the use of PPE by staff, restricted movement, and, when necessary, placement in dedicated areas for care.

In response to respiratory illnesses and multidrug-resistant organisms (MDROs), one of the significant adaptations in our program is the increased use of private rooms through the Proposed Project (which

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converts five (5) semi private rooms to private rooms). Private rooms help minimize the risk of cross-contamination between residents and reduce the spread of airborne or droplet-transmitted illnesses, such as influenza or COVID-19. They are also critical in managing residents who are carriers of MDROs, as isolation in private rooms prevents the spread of resistant bacteria to other vulnerable individuals in the facility. This approach ensures that we not only treat the infected resident but also protect the broader resident population from potential outbreaks.

This multi-layered IPC program allows us to maintain a safer environment for everyone within the facility and also accommodate those in the greater community needing post-acute care who either have an infection as their primary need for care or as a co-morbidity.

5. The application states that the payer mix is Payor Mix: 56% Medicare A, 12% Private Pay, 8% Managed Care (contracts in place with Harvard Pilgrim, United Healthcare, Tufts Health Plan, and Aetna), and 24% Lasell Villagers.

- a. Explain the payer mix category Lasell Villagers.

Lasell Village is a Type A Continuing Care Retirement Community (CCRC). As such, it is a community that provides a spectrum of housing and health care to its members so that they can age in place as their care needs evolve. Type A CCRCs are life care communities in that they offer an all-inclusive model where the CCRC contracts with its members to provide them with all levels of care offered by the CCRC as needed. The 24% of Lasell Villagers represents the Lasell Village CCRC members who have been admitted to Lasell House because of their need for short term or long-term skilled nursing care. In addition, certain Lasell Villagers who are at Lasell House for short-term care are also included in the payer mix for Medicare A and Managed Care.

There are two primary reasons why Lasell Village members may utilize Lasell House. First, certain members require a short-term stay after a hospital visit so that they can continue to improve their functional abilities and stabilize their clinical conditions. These members aim to return to their independent living apartment at the Village. Second, certain members need long-term skilled nursing care and are unable to return to their independent living apartment at the Village. These residents permanently live at Lasell House for skilled nursing care.

- b. Is the Facility certified by both Medicare and Medicaid?

Lasell House is Medicare-certified. The Applicant is not permitted to service MassHealth residents; the Applicant's Notice of DoN from January 1996 recognized that Lasell, as a Type A CCRC, was unique and included the following mandatory condition precluding Medicaid participation: "The applicant shall not admit Medicaid patients or seek Medicaid funds for residents of the CCRC. The applicant, as a Type "A" CCRC long term care facility granted Unique Application status, is precluded from accepting Medicaid patients." In addition, the Applicant's Notice of DoN from January 1996 also provides that "the project is exempt from community health initiatives".

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- c. Explain the payer mix for 2025-2026 in the CPA report, which consists only of Village and Private (pg.9).

As discussed above, the Proposed Project will be phased and there will be a reduced capacity at Lasell House during the construction. To accommodate the reduced capacity the plan is to wind down short term admissions except for Lasell Villagers where possible to accommodate them in the reduced number of beds and also maintain residents who permanently reside at Lasell House for long term care. The payer mix in the CPA report for 2025-2026 during the construction reflects this population. The Applicant will primarily serve residents who are Lasell Village members who receive care under their CCRC contract (i.e. Villagers) and a few private pay residents who pay out of pocket or have long-term care insurance after their Medicare stay has ended (e.g. residents who could not be discharged, i.e. Private).

6. In the CPA report, it states that the Project will be financed by a \$50m construction loan, a \$50 capital project, and a \$20m line of credit refinancing.

- a. Does this include financing for the independent living services expansion and the Proposed Project at Lasell House?

Lasell Village is embarking on a significant renovation and expansion of its physical facilities across the campus (the Expansion). One component of the Expansion is the Proposed Project. Additional components of the Expansion include adding seven (7) supported living apartments and 42 additional independent living apartments. The CPA report includes the financing for the Expansion which includes the Proposed Project and other components of the Expansion. The Total Value in the DoN application is reflective of the costs for the Proposed Project only.