**Cambridge**

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**Health Alliance**

Margo Michaels, MPH

Director, Determination of Need Program Department of Public Health

250 Washington Street

Boston, MA 02511

**CHA Executive Offices**

1493 Cambridge Street • Cambridge, /VIA 02139

April 15, 2020

Re: Cambridge Health Alliance: Alternative Care Site at Tufts University Dear Ms. Michaels:

In accordance with the March 24, 2020 Guidance issued by the Department of Public Health' s Determination of Need Program (the " Department"), Health Care Facility Cambridge Public Health Commiss ion, d/b/a Cambridge Health Alliance ("CHA"), hereby notifies the Depa11ment of the following Proposed Project.

1. **Description of Proposed Project.**

CHA is collaborating with Tufts University to use a dormitory on the Tufts campus as a temporary alternative housing and patient care space, the CHA/ Tufts Alternate Care Site (the " ACS"). The ACS will provide temporary housing and supportive care for stable recovering

COVID-19 patients who meet the clinical criteria for discharge to home, and have been clinically cleared for discharge to home, but cannot be safely discharged to home for non-clinical social and/or housing/ living reasons. Consistent with CDC guidelines for "General (non-acute) Care" facilities, the ACS will be for patients who do not require extensive nursing care, and who can generally move about on their own and have no requirements for assistance with activities of daily living.

The ACS will initially have 10 beds and will expand to 25 beds. CHA may expand the ACS beyond 25 beds to meet need, subject to availability of staffing and other resources. There will be one patient bed per dormitory room. The ACS will start on the first and second floors of Miller Hall, with males on one floor and women on the other. It will expand to upper floors if and as needed. CHA will provide bedding and meals, and patients will have access to Tufts' wireless network.

The ACS will be staffed on a 24/7 basis by a medical receptionist with medical assistant skills. Depending on the number of recovering patients, one or more registered nurses will be on-site daily for eight hours a day. CHA will check temperatures, oxygenation, and pulses twice a day. Oxygen need may be addressed as we gain experience with the ACS and the patients' needs .

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Physicians will perform daily " tele-rounding" on each patient and will be on call 24/7 for any concerns or guidance. In the event of any adverse change in status, EMS will be activated and the patient will be immediately transferred via ambulance to the nearest emergency depai1ment.

# Why the Proposed Project is Necessary to Address the COVID-19 Emergency

CHA is a safety net health care system serving some of the Commonwealth ' s communities that have been hardest hit by the COVID-19 pandemic. CHA has identified two key priorities for addressing the COVID-19 emergency: (**1)** ensuring that patients who are ill with the disease receive the medical care they need and (2) supporting patients to prevent further community spread of the disease. The Proposed Project is needed to address CHA's first priority because the Proposed Project will decompress CHA's acute inpatient services by opening beds for patients, thereby providing needed access to these services. It will address the second priority by allowing patients to isolate themselves from others if their own living conditions preclude self­ isolation , either generally or specifically from a high-risk person in the household (immunosuppressed, elderly, person with chronic diseases). This is especially important for CHA' s underserved population who live in very dense housing where self-isolation is impossible.

# Why the Public Health will be Measurably Harmed without Issuance of a Notice of Determination of Need.

The public health will be measurably harmed in if a Notice of Determination is not issued. The Proposed Project is an essential element of CHA's strategy to respond to the COVID-19 emergency. As noted above, the Proposed Project is one strategy that CHA is relying upon to decompress its acute inpatient units. Beds occupied by otherwise well patients are not available for new patients needing acute care services. The Proposed Project will help prevent a shortage of services for patients. The public health will also be harmed without the issuance of a Notice because many of the patients for whom the Project is designed live in crowded housing situations that do not permit the isolation that is needed to prevent further community spread of COVID- 19.

ATTESTATION: Under the pains and penalties of pe1jury, as the Chief Executive Officer of CHA, I attest to the Department that the Proposed Project is intended to be used for the management and treatment of the COVID-19 virus.

Yours truly,

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Chief Executive Officer

Cambridge Health Alliance