



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Determination of Need (DoN) Program
250 Washington Street Boston, MA 02108

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

August 23, 2019

David Fisher
Vice President Corporate Services
Signature Healthcare
680 Centre Street
Brockton, MA 02302

VIA EMAIL

RE: Notice of Final Action DoN # 19032512-AS

Dear Mr. Fisher:

At their meeting of August 21, 2019, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, §25(c) and the regulations adopted thereunder, to approve the Determination of Need application filed by Signature Healthcare Corporation (the Applicant) for renovations to add two operating rooms and six pre and post-operative rooms for hospital based ambulatory surgery, located at 680 Centre Street, Brockton, MA 02302. This Notice of Final Action incorporates by reference the Staff Report and the Public Health Council proceedings concerning this application, all of which are incorporated herein by reference.

This Application was reviewed pursuant to M.G.L. c. 111, § 25(c), and the regulatory provisions of 105 CMR 100.000 et seq. Based upon a review of the materials submitted, the Department found that the Applicant has met each DoN factor and approves this Determination of Need application for renovation of 6,720 gross square feet (GSF) of space for \$4,119,450 (March 2019 dollars) subject to all standard conditions (105 CMR 100.310) and pursuant to 105 CMR 100.360, subject to other conditions listed below. The total required CHI contribution of \$205,972.50.

In compliance with the provisions of 105 CMR 100.310 A (2) and (11) the Holder shall submit an acknowledgment of receipt to the Department (attached) and also include a written attestation of participation or intent to participate in MassHealth.

In compliance with the provisions of 105 CMR 100.310 A (12), which require a report to the Department, at a minimum on an annual basis, including the measures related to achievement of the DoN factors for a period of five years from completion of the Proposed Project, the Holder shall address its assertions with respect to all the factors.

Other Additional Conditions:

In order to demonstrate that Proposed Project will add measurable public health value in terms of improved health outcomes and quality of life for Applicant's Patient Panel, the Holder shall, on a yearly basis:

1. Report on the following health outcomes and quality measures related to outpatient surgical procedures:

a) Validated patient-reported outcome measures (PROMs), such as those in HOOS-12, HOOS JR, KOOS-12, and KOOS JR. At minimum, Signature shall report on two joint-specific PROMs that measure functional status following a procedure:

- Hip Disability and Osteoarthritis Outcome Score through HOOS (HOOS-12) (12 questions), or HOOS JR (6 questions)
- Knee Injury and Osteoarthritis Outcome Score through (KOOS) (42 questions), KOOS-12 (12 questions), or KOOS JR (7 questions)

b) Quality Measures:

- Unplanned Hospital Visits from all outpatient surgical procedures, using Centers for Medicare and Medicaid Services (CMS) Hospital Outpatient Quality Reporting Program measure on outpatient surgery (OP-36: Hospital Visits after Hospital Outpatient Surgery)
- For outpatient ophthalmologic surgical procedures, using Centers for Medicare and Medicaid Services (CMS) Hospital Outpatient Quality Reporting Program measure on vision improvement following cataract procedures (OP-31: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery)
- For outpatient hip and knee arthroplasty procedures. Surgical site infections, using Center for Disease Control and Prevention's National Healthcare Safety Network (NHSN) measures.

2. Report on the description of, and protocols for, Preoperative Education Programs for each outpatient surgical procedure. Yearly reports shall include the number of patients receiving each program as well as assessment of program effectiveness.

CHI Conditions to the DoN

3. Of the total required CHI contribution of \$205,972.50

a) \$20,597.25 will be directed to the CHI Statewide Initiative

b) \$185,375.25 will be dedicated to local approaches to the DoN Health Priorities

c) To comply with the Holder's obligation to contribute to the Statewide CHI Initiative, the Holder must submit a check for \$20,597.25 to Health Resources in Action (the fiscal agent for the CHI Statewide Initiative).

i. The Holder must submit the funds to HRiA within 30 days from the date of the Notice of Approval.

ii. The Holder must promptly notify DPH (CHI contact staff) when the payment has been made.

4. The Holder will recruit new members from the Housing, Planning and Transportation, Municipality, and Community Health Center sectors for the Advisory Committee. The Applicant will also recruit Brockton community residents for participation in the Advisory Committee. The Applicant will provide information to DPH on actions taken relative to these matters within one month of the Notice of Approval.

5. The Holder will send to DPH a document formally describing the Advisory Committee's decision making role in priority setting and in the funding plan within one month of the Notice of Approval. Document will provide a description of how the document was reviewed and approved by committee members.

6. In order to obtain approval to proceed to strategy implementation, DPH requires the Holder to submit the final 2019 CHNA for review upon completion, but no later than November 1, 2019. DPH will ensure the CHNA demonstrates adequate Social Determinant of Health analysis and community engagement processes required to select Health Priority strategies through the Tier 1 process described in the Community-Based Health Initiative Planning Guideline. Accordingly, the Holder must meet, as determined by the Department, the standards presented in:

- a) The description of barriers to community participation, as noted in Appendix A of the Community Engagement for Community Health Planning Guideline; and
- b) Incorporate an analysis of the social determinants of health into needs assessments, priority setting and strategy implementation, as outlined in the DoN Health Priority Guideline.

If, upon review of the 2019 CHNA, DPH determines there is inadequate social determinant of health analysis and community engagement processes required to select Health Priority strategies, the Holder will be required to complete the Health Priority Strategies form. By requiring this step, DPH will ensure that strategies being implemented meet Health Priority standards as described in the Health Priority Guideline. If this step is required, the Form will be due by December 1, 2019.

7. The Applicant and the Department have agreed to certain post PHC approval steps and a timeline as spelled out in the Community-Based Health Initiative Planning Guideline:

- The Holder will select Health Priority Strategies, after reviewing the strategy selection criteria in the DoN Health Priority Guideline, from the 2019 Signature/Brockton Hospital community health needs assessment in consultation with the Advisory Committee (after taking action as required in condition #4).
- Within 3 months of the completion of the 2019 CHNA shall publicly post the funding plan to allow for public comment, or shall conduct a public request for proposal (RFP) process.

Ongoing compliance with the conditions and all terms of the DoN is, pursuant to the Regulation, a precondition to the filing of any future DoN by the Holder.

Sincerely,

A handwritten signature in black ink, appearing to read "Margo Michaels". The signature is fluid and cursive, with the first name "Margo" and last name "Michaels" clearly distinguishable.

Margo Michaels MPH
Director
Determination of Need Program

cc: Sherman Lohnes, Director, Division of Health Care Facility Licensure and Certification
Elizabeth Kelley, Director, Bureau of Health Care Safety and Quality
Daniel Gent, Division of Health Care Facility Licensure and Certification
Rebecca Rodman, Deputy General Counsel
Samuel Louis, Office of Health Equity
Mary Byrnes, Center for Health Information Analysis
Steven Sauter, MassHealth
Katherine Mills, Health Policy Commission
Ben Wood, Office of Community Health Planning
Elizabeth Maffei, Office of Community Health Planning
Eric Gold, Attorney General's Office