



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
Bureau of Health Care Safety and Quality  
Division of Health Care Facility Licensure and Certification  
67 Forest Street, Marlborough, MA 01752

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September 1, 2023

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BY EMAIL ONLY

**Re: Review of Response Following Essential Services Finding**  
**Facility:** HealthAlliance – Clinton Hospital, Leominster Campus  
**Services:** Maternal Newborn Services  
**Ref. #:** VWPE-012

Dear Attorney Rodman:

On August 22, 2023, the Department of Public Health (the "Department") received from you, on behalf of UMass Memorial HealthAlliance - Clinton Hospital, Inc., a response to our August 7, 2023, letter (the "Response") indicating that HealthAlliance - Clinton Hospital, Leominster Campus (the "Hospital") must file a plan with the Department detailing how access to services will be maintained following the discontinuation of Maternal Newborn Service (the "Service"). This includes nineteen (19) licensed antepartum, labor and delivery, and postpartum beds, twenty-one (21) well-infant nursery bassinets and an operating room. Thank you for responding to our request in a timely manner.

Pursuant to 105 CMR 130.122(G) the Department has completed its review of the submitted access plan. As a result of this review, the Department has prepared the following comments:

1. **Assessment of Transportation Needs:** In your response dated August 22, 2023, the Hospital stated it is developing a plan to address transportation needs for its patients after the closure of the Service; however information was not provided on how the Hospital will assure ongoing access to the Service, as required by MGL c. 111, s. 51G(4) and 105 CMR 130.122. The Department is concerned that a plan to meet the transportation needs of the patients in the Hospital's service area post discontinuance of the Service has not been developed fully and provided to the Department, and from the Hospital's August 22, 2023 letter it does not appear the

complete plan would be available for Department review prior to the indicated closure date of September 23, 2023. The Department has determined your Response does not meaningfully address the statutory and regulatory requirements noted above, and requests additional detailed information on 1) what transportation barriers exist currently, how these barriers were determined, and how they will be addressed 2) timing for availability of the transportation plan to the Department prior to Service closure, and 3) confirmation these transportation services will remain available for patients and families going forward. Additionally, the Hospital's response indicated you intend to contract with the local regional transit authority, Montachusett Regional Transit Authority (MART). Please confirm the Hospital intends to complete the contract with MART prior to the specified closure date, and what alternate mechanism for regional transportation will be if the contract is not completed prior to the specified closure date.

2. **Location and Service Capacity of Alternative Delivery Sites:** In your response dated August 22, 2023, the Hospital provided data which included, among other metrics, information on licensed beds and occupancy rates at alternative sites. In response to the Department's comment on staffing, the Hospital indicated staffing challenges are a "well-documented, nation-wide problem," and further elaborated, "The challenges are further exacerbated for small community-based programs such as the one at the Hospital..." The Department requests clarification on how staffing challenges affect all of the identified alternate sites listed and impact the occupancy and availability of services at these sites.
3. **Protocol that describes how patient's will access the services at alternative delivery sites:** In your response dated August 22, 2023, the Hospital stated that patients can choose to deliver at UMass Memorial Medical Center (the "Medical Center"), or at one of the other hospitals that offer inpatient maternity services. Please provide the Department information on how the Hospital has and will continue to engage the Medical Center and other hospitals to ensure the continued availability of capacity to accept the Hospital's projected births.
4. **Ambulance Service Availability:** In your response dated August 22, 2023, the Hospital stated it has met with EMS providers and the Central Mass EMS Corporation (CMEMSC) several times to discuss the potential impact of closing the Service. The Department requests information summarizing the meetings and describing action steps you are taking to address EMS providers and CMEMSC feedback and concerns shared. Specifically, detail what effect these meetings had on transportation plans and steps taken to mitigate the impact to local EMS providers including if any additional vehicles will be provided where towns have only 1-2 ambulances in total and a vehicle is required to transport a patient in active labor.

- 5. Transfer during Labor:** In your response dated August 22, 2023, the Hospital stated ACOG recommends determining whether transport is appropriate by using a tool such as the maternal fetal triage index. The Hospital currently engages in such triage determinations when necessary, and this will not change after the services close.

While the Department recognizes that the hospital may have existing mechanisms in place to ensure the expeditious and safe transfer of patients to another hospital, it is unclear what those mechanisms are. Please provide the Department with detailed information regarding these mechanisms.

- 6. Emergency Department Volume:** In your response dated August 22, 2023, the Hospital indicated nursing staff and emergency medicine providers in the emergency department are receiving additional education to augment their care of obstetric emergencies and this training would continue after the closure. The Department requests detailed information on how the Hospital will provide training to and assess the staff's continued competency in obstetric emergency training to ensure appropriate care for emergencies when they present, no matter how infrequently, including scenarios in which staff may need to perform a delivery.

Additionally, the Hospital indicated that when the emergency department determines consultation is necessary, it will seek guidance from OB/GYN staff who will rarely need to be present in the ED to manage these conditions. Please provide information, including the policy and plan for communicating the process by which ED staff will determine when to seek clinical consultation from OB/GYN providers and when it is appropriate to transfer a patient to another hospital. For each month between July 1, 2022 to June 30, 2023 please provide the number of ED visits where a pregnant person presented for care and, of those visits, how many times an obstetric provider formally consulted on the patient's care.

The Department also requests that the Hospital provide data for each month between July 1, 2022 and June 30, 2023 to include, (i) how many of these types of patients present to the Marlborough Hospital and Harrington Hospital, (ii) how many of these patients need referral to the Medical Center, (iii) distance of the Marlborough Hospital and Harrington Hospital to the Medical Center, (iv) how the Hospital defines success of this model at Marlborough and Harrington Hospitals, and (v) what measures are used to monitor patient safety for emergency care of pregnant persons.

- 7. Engagement with Community Groups:** In your response dated August 22, 2023, the Hospital stated it has engaged HRiA to conduct a focused community needs assessment and gap analysis pertaining to access for women and birthing people in the Hospital's service area. The Hospital further states that HRiA has begun to engage in activities including asset mapping current clinical care and social services for prenatal and postpartum populations, key informant interviews with stakeholders

working in women's health and social services, and focus group discussion with community residents and other stakeholder groups. Based upon comments received at the time of public hearing and the lack of a plan to address this feedback, the Department is extremely concerned that this level of assessment was not completed prior to the decision to discontinue the Service at the Hospital and requests the assessment and related access plan be completed and submitted to the Department prior to closure. Please provide the completed plan prior to the specified closure date, as well as a timeline for engagement with the community on the plan, and updates to your overall closure process that guarantees this will be finalized prior to any possible closure.

8. **Staffing:** In your response dated August 22, 2023, the Hospital indicated that staffing challenges are part of well documented, nationwide problems for health care facilities and these problems are intensified for maternity units. The Hospital further indicated it will continue to have maternity care expertise available for consultation to emergency department providers through the Hospital's OB/GYN and Family Medicine staff along with UMass Memorial Health (UMMH) OB/GYN clinicians available for consultation and coordination. The Department requests a detailed description of the mechanism through which emergency department staff will determine need and request consultation from these other providers.
9. **Alternative Solutions:** In your response dated August 22, 2023, the Hospital indicated that financial support alone is not enough to maintain the program and to maintain the current service the Hospital would need to recruit numerous additional nurses, surgical technicians, OB/GYN physicians, and anesthesiologists. The Department is unclear how many of these positions would be required to continue operating the Service based on current volume statistics. Please provide a detailed account of the staffing plan needed to operate the Service, the additional staffing required to maintain the Service and what alternative staffing models were considered to compensate for the staffing vacancies.

Consistent with the requirements of MGL c. 111, s. 51G(4) and 105 CMR 130.122, the Department expects the Hospital to have a fully developed and implemented access plan and should not contemplate closure of the Service until the Department deems the essential service process complete. Based upon the information provided to date, the Department does not believe the Hospital's closure plan is adequate, particularly as related to transportation and community engagement via the HRiA assessment, to allow for closure on September 23, 2023. In your follow up response to the Department, please include a viable closure date beyond September 23, 2023.

Under the provisions of 105 CMR 130.122(G), the Hospital must submit a timely response to the comments of the Department. Please submit your comments within 10 days of your receipt of this letter to my attention, in order that we may complete our review of the pending closure.

Thank you for your continued cooperation in this process. If you have any questions, please contact me at [Stephen.Davis@Mass.Gov](mailto:Stephen.Davis@Mass.Gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Step Davis". The signature is written in a cursive, flowing style with a large initial "S" and "D".

Stephen Davis  
Division Director

cc: E. Kelley, DPH  
J. Bernice, DPH  
K. Fillo, DPH  
S. Lewis, DPH  
R. Kaye, DPH  
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