

VIRGINIA DEPARTMENT OF HEALTH

Office of Licensure and Certification

Staff Analysis

April 8, 2020

Bon Secours Mary Immaculate Hospital, LLC (3/27/2020)

Newport News, Virginia

Temporarily add 29 Beds at Mary Immaculate Hospital

Hospital

Bon Secours Mary Immaculate Hospital, LLC., doing business as Bon Secours Mary Immaculate Hospital (Mary Immaculate) is a Virginia non-stock, 501(c)(3) corporation located in Newport News, Virginia, in Planning District (PD) 21 and Health Planning Region (HPR) V. Mary Immaculate operates as part of the Bon Secours Hampton Roads Health System, which has two members—Bon Secours Health System, Inc., and the Order of St. Francis (Bernardine Franciscan Sisters). Bon Secours Health System, Inc. is a not-for-profit, non-stock membership corporation. Mary Immaculate wholly owns the Mary Immaculate Nursing Center, Inc. and Mary Immaculate Foundation.

Background

On March 12, 2020, Governor Ralph Northam declared a state of emergency throughout Virginia in response to the coronavirus pandemic. Subsequent to this declared state of emergency, on March 20, 2020, Governor Northam signed Executive Order 52 (EO 52) providing that notwithstanding the provisions of Article 1.1 of Chapter 4 of Title 32.1 of the Code of Virginia the State Health Commissioner (Commissioner), at his discretion, may authorize any general hospital or nursing home to increase licensed bed capacity as determined necessary by the Commissioner to respond to increased demand for beds resulting from COVID-19. Such beds authorized by the Commissioner under EO 52 would, notwithstanding Virginia Code § 32.1-132, constitute licensed beds that do not require further approval or the issuance of a new license.

Per the 2018 data provided by Virginia Health Information and the Office of Licensure and Certification license records, Mary Immaculate operates an inventory of 123 licensed beds.

Request

Mary Immaculate cites an emergent need to expand bed capacity due to the sudden and overwhelming increase in acute care cases resulting from COVID-19 infection. Specifically, Mary Immaculate requests authorization to temporarily add 29 beds. Specifically, Mary Immaculate requests to add 15 intensive care unit (ICU) beds, and 14 medical/surgical beds.

Table 1: Mary Immaculate Bed Inventory

Bed Type	Licensed Beds	Added Beds	Resulting Licensed Beds
ICU	10	15	25
Medical/Surgical	99	14	113
Obstetric	14	0	14
Total	123	29	152

Source: VHI and Office of Licensure and Certification

Considerations

In determining whether a need exists for the requested additional bed capacity, the State Health Commissioner established the following factors for consideration, when applicable.

1. Ongoing efforts to increase the availability of existing beds, such as suspension of elective procedures:

Mary Immaculate has made assurances that, in an effort to free up existing capacity, and in compliance with the March 25, 2020 Order of Public Health Emergency 2, they have suspended all elective procedures that, if delayed, are not anticipated to cause harm to the patient with exceptions and as provided below.

2. The availability of professional and ancillary staff to provide care in the additional beds:

Mary Immaculate has made assurances that it has the necessary professional staff to provide care in the additional beds. Mary Immaculate has indicated that staff that has temporarily been displaced by the curtailing of non-essential surgery will be used to staff the additional beds and provide care.

3. The availability of medical supplies and personal protection equipment in the facility:

Mary Immaculate has not made assurances that it has sufficient access to available medical supplies and personal protection equipment (PPE) in the facility. Given that the availability of PPE is a State and National concern Mary Immaculate will have access to PPE commensurate with that of other acute care hospitals. The VDMAC has suggested moving toward the adoption of crisis standards of care to, in part, preserve available supplies.

4. The specific plan for increasing bed capacity:

With respect to the requested ICU beds, Mary Immaculate intends to convert space in the existing PACU unit to allow for the addition of 12 private inpatient beds, equipped with oxygen, medical gases and vacuum capabilities. Mary Immaculate also intends to convert space in the existing MRI holding area to allow for the addition of three inpatient beds, equipped with oxygen, medical gases and vacuum capabilities. With respect to the requested medical/surgical beds, Mary Immaculate intends to convert space in the existing procedural

recovery area to allow for the addition of 14 private medical/surgical beds, equipped with oxygen, medical gases and vacuum capabilities.

5. Where the beds will be located and the life safety code considerations of the location:

Mary Immaculate intends to convert space in the existing PACU unit to allow for the addition of 12 private inpatient beds, equipped with oxygen, medical gases and vacuum capabilities. Mary Immaculate also intends to convert space in the existing MRI holding area to allow for the addition of three inpatient beds, equipped with oxygen, medical gases and vacuum capabilities. With respect to the requested medical/surgical beds, Mary Immaculate intends to convert space in the existing procedural recovery area to allow for the addition of 14 private medical/surgical beds, equipped with oxygen, medical gases and vacuum capabilities. Therefore the space meets life safety code requirements for the type of patients or residents expected to occupy the space.

6. The availability of beds at other community hospitals and nursing homes in the community:

Per the 2018 data provided by Virginia Health Information, there are 1,183 licensed inpatient beds in PD 21. The overall bed capacity data does not inherently take into account the extent to which, due to the rapid rate of infection of COVID-19, how many new cases may arise, and thereby overwhelm Mary Immaculate's capacity to treat patients, thereby jeopardizing the quality of care for residents of PD 21, and limit the ability of health care providers adequately treat and limit the spread of the virus. Mary Immaculate's proposal increases their bed capacity by approximately 24% and is an approximate 2% increase in bed capacity in the planning district. More importantly, because Mary Immaculate proposes to add ICU beds, the request represents an approximate 150% increase in available intensive care beds at Mary Immaculate.

7. Other alternatives to adding bed capacity:

As discussed, given that the applicant has already provided assurances that they have suspended all non-essential surgeries, and the modest number of beds requested, as well as the difficulty in anticipating how many cases of COVID-19 may arise in PD 21, there are no alternatives that are as advantageous as the proposed project.

8. The current state of COVID-19 in the community:

At the time of this writing, the Virginia Department of Health reports that Virginia has 3,645 cases of COVID-19, the illness caused by the virus, and 75 deaths.¹ To date, the Centers for Disease Control and Prevention has confirmed 395,011 cases in the United States, with

¹ <http://www.vdh.virginia.gov/coronavirus/>

12,754 deaths.² With respect to the area to be served, there have been 48 COVID-19 cases in the Roanoke, Salem and Alleghany Health Districts.

With respect to the area to be served, there have been 227 cases in the Peninsula Health District.

DCOPN Findings and Conclusions

Mary Immaculate proposes to temporarily add 29 beds. Mary Immaculate intends to convert space in the existing PACU unit to allow for the addition of 12 private inpatient beds, equipped with oxygen, medical gases and vacuum capabilities. Mary Immaculate also intends to convert space in the existing MRI holding area to allow for the addition of three inpatient beds, equipped with oxygen, medical gases and vacuum capabilities. With respect to the requested medical/surgical beds, Mary Immaculate intends to convert space in the existing procedural recovery area to allow for the addition of 14 private medical/surgical beds. Though inpatient beds throughout PD 21 have been demonstrably underutilized historically, Mary Immaculate has demonstrated that the rapid rise in COVID-19 cases has created an emergent need for a temporary increase in bed capacity. In the absence of a temporary increase to bed capacity in the planning district, it is conceivable that the continued rise of COVID-19 cases could overwhelm the hospital's capacity to treat patients, thereby jeopardizing the quality of care for residents of PD 21, and limit the ability of health care providers adequately treat and limit the spread of the virus, which the Virginia Department of Health deems unacceptable.

DCOPN Staff Recommendations

The Division of Certificate of Public Need recommends the **approval** of Bon Secours Mary Immaculate Hospital, LLC's request to temporarily add 29 beds at Bon Secours Mary Immaculate Hospital. DCOPN's recommendation is based on the following findings.

1. Mary Immaculate has demonstrated that, due to the reasonable expectation of a sudden and overwhelming increase in acute care patients resulting from COVID-19 infection, Mary Immaculate has an immediate need to temporarily add 29 licensed inpatient beds.
2. Mary Immaculate's plan for training and shifting ambulatory staff is a reasonable solution for staffing the additional beds.
3. Mary Immaculate's plan to expand bed capacity in existing hospital space throughout the hospital assures patient safety is maintained from a fire and life safety code perspective.

² https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcases-in-us.html