

# VIRGINIA DEPARTMENT OF HEALTH

## Office of Licensure and Certification

### Staff Analysis

April 10, 2020

#### **Bon Secours St. Francis Medical Center, LLC (4/1/2020)**

Midlothian, Virginia

Temporarily add 39 Beds at St. Francis Medical Center

### Hospital

Bon Secours St. Francis Medical Center, LLC. (“St. Francis”) is a nonprofit limited liability company. St. Francis is located in Planning District (PD) 15, Health Planning Region (HPR) IV.

### 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.

According to the 2018 data provided by Virginia Health Information (VHI), St. Francis operates an inventory of 130 beds (**Table 1**). St. Francis is taking all reasonable efforts to reduce inpatient census to free beds to respond to the COVID-19 crisis, including complying with the March 25, 2020 Order of Public Health Emergency 2.

### Request

St. Francis 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, St. Francis requests authorization to temporarily add 39 beds; 12 medical/surgical and 27 ICU. The requested ICU beds will be located in the St. Francis Ambulatory Surgery Unit (“ASU”), located on the second floor of a connected medical office building to St. Francis, which currently houses four licensed general purpose operating rooms and all necessary support space for pre- and post-operative services as well as a post anesthesia care unit (“PACU”). The remaining 12 medical/surgical beds will be located on the second floor of the main hospital, where St. Francis

proposes to convert some of its preoperative procedure area not in use due to essential surgery curtailing to allow the creation of 12 private inpatient medical/surgical beds. The resulting bed configuration at St. Francis is shown in Table 1.

**Table 1: St. Francis Requested Temporary Bed Inventory**

<b>Bed Type</b>	<b>Existing Beds</b>	<b>Requested Additional Beds</b>	<b>Resulting Available Beds</b>
ICU	16	27	43
Med/Surg	93	12	105
Obstetric	21	0	21
<b>Total</b>	<b>130</b>	<b>39</b>	<b>169</b>

### **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:**

St. Francis 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:**

St. Francis has made assurances that it has the necessary professional staff to provide care in the additional beds. Staff temporarily displaced by the curtailing of non-essential surgery that used to be performed in the ASU will be used to staff the additional intensive care beds and provide care in a safe and effective environment of care. In addition, St. Francis is also working with its anesthesia providers, hospitalist group, and intensivist/pulmonary specialists to ensure the necessary physicians and professional coverage is available for these temporary beds.

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

St. Francis has made assurances that it has sufficient access to available medical supplies and personal protection equipment in the facility. As part of Bon Secours Mercy Health, St. Francis works with sister facilities in Richmond, Hampton Roads, and nationwide for access to all necessary medical supplies and PPE.

**4. The specific plan for increasing bed capacity:**

St. Francis requests authorization to temporarily add 39 beds; 12 medical/surgical and 27 ICU. The requested ICU beds will be located in the St. Francis Ambulatory Surgery Unit, located on the second floor of a connected medical office building to St. Francis, which currently houses four licensed general purpose operating rooms and all necessary support space for pre- and post-operative services as well as a post anesthesia care unit. The remaining 12 medical/surgical beds will be located on the second floor of the main hospital, where St. Francis proposes to convert some of its preoperative procedure area not in use due to curtailing of elective surgery.

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

St. Francis intends to locate the requested ICU beds in the St. Francis Ambulatory Surgery Unit, located on the second floor of a connected medical office building to St. Francis. The remaining 12 medical/surgical beds will be located on the second floor of the main hospital. Therefore the space already meets life safety code requirements for the type of patients 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 3,448 licensed inpatient beds in PD 15. There are 2,449 acute care beds available, of which, 368 are intensive care unit beds. 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 St. Francis' and the area's, capacity to treat patients, thereby jeopardizing the quality of care for residents of PD 15. St. Francis' proposal increases their bed capacity by 30%, and is a 1.1% increase in bed capacity in the planning district.

**7. Other alternatives to adding bed capacity:**

As discussed, given that St. Francis has already provided assurances that they have suspended all of elective procedures, and the high bed occupancy rate, as well as the difficulty in anticipating how many cases of COVID-19 may arise in PD 15, the addition of beds in an existing medical care facility space represents the best option.

**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 4,509 positive cases of COVID-19, the illness caused by the virus, and 121 deaths. To date, the Centers for Disease Control and Prevention has confirmed 427,460 cases in the United States, with 14,696 deaths. Chesterfield Health District currently has 187 confirmed cases, with another 51 cases in the surrounding jurisdictions.

### **Findings and Conclusions**

St. Francis requests authorization to temporarily add 39 beds; 12 medical/surgical and 27 ICU. The requested ICU beds will be located in the St. Francis Ambulatory Surgery Unit, located on the second floor of a connected medical office building to St. Francis, which currently houses four licensed general purpose operating rooms and all necessary support space for pre- and post-operative services as well as a post anesthesia care unit. The remaining 12 medical/surgical beds will be located on the second floor of the main hospital, where St. Francis proposes to convert some of its preoperative procedure area not in use due to essential surgery curtailing to allow the creation of 12 private inpatient medical/surgical beds. St. Francis 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 15, and limit the ability of health care providers adequately treat and limit the spread of the virus.

### **Staff Recommendations**

The Division of Certificate of Public Need recommends the **approval** of Bon Secours St. Francis Medical Center, LLC's request to temporarily add 39 bed at Bon Secours St. Francis Medical Center. This staff recommendation is based on the following findings.

1. St. Francis has demonstrated that, due to the reasonable expectation of a sudden and overwhelming increase in acute care patients resulting from COVID-19 infection, St. Francis has an immediate need to temporarily add 39 licensed inpatient beds.
2. St. Francis' plan for training and shifting ambulatory staff is a reasonable solution for staffing the additional beds.
3. St. Francis' plan and ability to obtain equipment and supplies is reasonable within the confines of the current crisis.
4. St. Francis' plan to expand bed capacity in existing hospital space throughout the campus assures patient safety is maintained from a fire and life safety code perspective.