

**VIRGINIA DEPARTMENT OF HEALTH**  
**Office of Licensure and Certification**  
**Staff Analysis**

April 28, 2020

**Bon Secours St. Mary's Hospital, LLC (4/22/2020)**

Richmond, Virginia

Temporarily add 100 Beds at St. Mary's Hospital

**Hospital**

Bon Secours St. Mary's Hospital, LLC. ("St. Mary's") is a nonprofit limited liability company. St. Mary's is located in Health Planning Region ("HPR") IV, Planning District ("PD") 15.

**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 ("VHI"), St. Mary's operates an inventory of 410 beds (**Table 1**). St. Mary's 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.

On April 13, 2020, the State Health Commissioner authorized St. Mary's to temporarily add 19 additional beds to its inventory in response to the COVID-19 crisis.

**Request**

St. Mary's 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. Mary's requests authorization to temporarily add an additional 66 intensive care unit ("ICU") beds, and 34 medical surgical beds. The requested ICU beds will be located in St. Mary's post-anesthesia care unit ("PACU"), endoscopy area, pediatric emergency department, as well as the Bon Secours Short Pump Emergency Center, where its bays will be converted into ICU beds, and the facility would cease to operate as a freestanding emergency department. The requested medical/surgical beds will

be located in the cardiovascular surgery area, nursing units on the second and fifth floors, and through the conversion of 16 beds in the Bon Secours Community Hospice House, into medical/surgical beds for palliative care patients. These temporary beds are all equipped with oxygen, medical gases and vacuum capabilities, and are monitored. The resulting bed configuration at St. Mary’s is shown in Table 1.

**Table 1: St. Mary’s Requested Temporary Bed Inventory**

<b>Bed Type</b>	<b>Beds</b>	<b>Additional Beds Authorized 4/14/20</b>	<b>Requested Additional Beds</b>	<b>Resulting Available Beds</b>
Adult ICU	34	19	66	119
Med/Surg	251	0	34	285
Obstetric	33	0	0	33
Pediatric	29	0	0	29
Pediatric ICU	12	0	0	12
Psychiatric Bed – Other Adult	32	0	0	32
<b>Total</b>	<b>391</b>	<b>19</b>	<b>100</b>	<b>510</b>

Source: VHI (2018)

**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. Mary’s 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 non-essential procedures and surgeries.

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

St. Mary’s 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 ambulatory surgery unit will be used to staff the additional beds and provide care in a safe and effective environment of care. St. Mary’s is also planning to use other clinical staff redeployed from outpatient departments of the hospital and other outpatient locations in the community which have either temporarily closed or where operations have been severely curtailed. Cross training programs have been developed and staff is already being trained and oriented to potential new roles. Finally, St. Mary’s intends to work with members of the Virginia Medical Reserve Corps, if ultimately

necessary dependent on the response demanded by a potential surge of COVID-19 positive patients.

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

St. Mary's has made assurances that it has sufficient access to available medical supplies and personal protection equipment ("PPE") in the facility. As part of Bon Secours Mercy Health, St. Mary's works with sister facilities in Richmond, Hampton Roads, and nationwide for access to all necessary medical supplies and PPE. In addition, St. Mary's has initiated the reprocessing of N95 masks to ensure adequate supply. The Virginia Disaster Medical Advisory Committee ("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:**

St. Mary's requests authorization to temporarily add another 66 ICU beds and 34 medical surgical beds. The requested ICU beds will be located in St. Mary's PACU, endoscopy area, pediatric emergency department, as well as the Bon Secours Short Pump Emergency Center, where its bays will be converted into ICU beds, and the facility would cease to operate as a freestanding emergency department. The requested medical/surgical beds will be located in the cardiovascular surgery area, nursing units on the second and fifth floors, and through the conversion of 16 beds in the Bon Secours Community Hospice House, into medical/surgical beds for palliative care patients. These temporary beds are all equipped with oxygen, medical gases and vacuum capabilities, and are monitored. The Bon Secours Community Hospice House is licensed as a hospice but not as acute care beds. The hospice house is located at 1133 Old Bon Air Road in north Chesterfield County. Bon Secours Community Hospice House intends to transition their hospice patients to home based hospice to make room for this response to the pandemic.

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

St. Mary's intends to locate the requested ICU beds in St. Mary's PACU, endoscopy area, pediatric emergency department, as well as the Bon Secours Short Pump Emergency Center, where its bays will be converted into ICU beds, and the facility would cease to operate as a freestanding emergency department. The requested medical/surgical beds will be located in the cardiovascular surgery area, nursing units on the second and fifth floors, and through the conversion of 16 beds in the Bon Secours Community Hospice House, into medical/surgical beds for palliative care patients. The beds will be located in an existing part of St. Mary's Hospital that is already in use for patient care, as are the Bon Secours Short Pump Emergency Center and Bon Secours Community Hospice House, therefore the spaces meet life safety code requirements for the type of patients or residents expected to occupy the spaces.

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

Per the 2018 data provided by VHI, there are 3,448 licensed inpatient beds in PD 15, of which 1,837 are medical surgical beds and 368 ICU 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. Mary's, and the area's, capacity to treat patients, thereby jeopardizing the quality of care for residents of PD 15. St. Mary's proposal increases their bed capacity by 24%, and is a 3% increase in bed capacity in the PD. More importantly, St. Mary's proposal increases its standing ICU inventory by 124% and PD 15's ICU inventory by 18%, and increases its standing medical/surgical inventory by 13% and PD 15's medical/surgical inventory by 2%.

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

As discussed, given that St. Mary's has already provided assurances that they have suspended all of elective procedures, as well as the difficulty in anticipating how many cases of COVID-19 may arise in PD 15, the addition of beds in space that has been freed up as a result of the cancelation of all non-essential procedures and surgeries in an existing medical care facility 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 14,339 positive cases of COVID-19, the illness caused by the virus, and 492 deaths.<sup>1</sup> To date, the Centers for Disease Control and Prevention has confirmed 957,875 cases in the United States, with 53,922 deaths.<sup>2</sup> Richmond City Health District currently reports 312 COVID-19 patients, with another 1,378 COVID-19 patients in the surrounding jurisdictions.

**Findings and Conclusions**

St. Mary's requests authorization to temporarily add another 100 beds. The requested ICU beds will be located in St. Mary's PACU, endoscopy area, pediatric emergency department, as well as the Bon Secours Short Pump Emergency Center, where its bays will be converted into ICU beds, and the facility would cease to operate as a freestanding emergency department. The requested medical/surgical beds will be located in the cardiovascular surgery area, nursing units on the second and fifth floors, and through the conversion of 16 beds in the Bon Secours Community Hospice House. DCOPN finds that, due to the sudden and overwhelming increase in acute care cases resulting from COVID-19 infection throughout the Commonwealth, St. Mary's has an immediate need to temporarily add 66 ICU beds and 34 medical/surgical beds. Furthermore, DCOPN finds that St. Mary's plan for training and shifting staff is a reasonable solution for staffing the requested beds. Additionally, DCOPN concludes that St. Mary's plan and ability to obtain

---

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

<sup>2</sup> [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](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)

equipment and supplies is reasonable within the confines of the current crisis. Moreover, DCOPN finds that St. Mary's plan to expand bed capacity in existing hospital and hospice space assures patient safety is maintained from a fire and life safety code perspective. DCOPN finds that in the absence of a temporary increase to bed capacity in the PD, 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. Mary's Hospital, LLC's request to temporarily add another 66 ICU beds and 34 medical/surgical beds. at Bon Secours St. Mary's Hospital. This staff recommendation is based on the following findings.

1. St. Mary's has demonstrated that, due to the reasonable expectation of a sudden and overwhelming increase in acute care patients resulting from COVID-19 infection, St. Mary's has an immediate need to temporarily add another 100 beds.
2. St. Mary's plan for training and shifting ambulatory staff is a reasonable solution for staffing the additional beds.
3. St. Mary's plan and ability to obtain equipment and supplies is reasonable within the confines of the current crisis.
4. St. Mary's 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.