

Transition Plan for University of Maryland Laurel Regional Hospital

The University of Maryland Laurel Regional Hospital (“UM LRH”) has the mission and vision to be the health care provider to meet the needs of the community we serve. As health care delivery and focus has changed across the nation and the state, the focus of care has shifted to invest in more preventative care and wellness for patients but still provide a safety net for patients’ immediate urgent care needs and stabilization.

The Prince George’s County Community Needs Assessment and current emergency room utilization has guided the planning process to ensure the new UM Laurel Medical Campus will continue to meet the health care needs of the community it serves. In addition, UM LRH has engaged in extensive planning involving many community stakeholders in developing its plans to convert UM LRH to the UM Laurel Medical Center. Phase I of the planning process for the UM Laurel Medical Center began more than two years ago in July 2016 when the University of Maryland Medical System (“UMMS”), Laurel Mayor Craig Moe and other elected leaders launched a community engagement work group called the Laurel Strategic Planning Work Group (the “SPWG”).

The SPWG was tasked with the coordination of “an open, collaborative process to obtain community input that would inform a set of recommendations regarding the transformation and modernization of Laurel Regional Hospital.” It was comprised of an 11-member Executive Committee co-chaired by Mayor Moe and Dr. Stephen T. Bartlett, EVP and Surgeon in Chief for UMMS. The Co-Chairs identified seven major issues that would be key to a successful campus transition and created subcommittees that were open to the public and focused on the following areas:

- Behavioral Health
- Campus Development

- Clinical Operations
- Emergency Medicine / EMS
- On-Campus Services
- Volunteer Services
- Workforce Development

The membership of both the Executive Committee and subcommittees included local elected representatives, business leaders, first responders, health care providers, hospital administrators, LRH employees and volunteers, union representatives, K-12 and higher education leaders and members of the community at large. In total, this group included over 100 stakeholders who provided invaluable input regarding the transition of the Laurel medical campus.

The work of the SPWG spanned the better part of a year. It submitted its recommendations to UMMS President and CEO Robert Chrencik and the UMMS Board of Directors in July 2017. Shortly thereafter, in September 2017, UMMS and Dimensions Health System (“DHS”) formally affiliated and rebranded DHS as University of Maryland Capital Region Health. The deliberations and recommendations of the SPWG laid the foundation for subsequent Phase II planning for the transition of UM LRH to the UM Laurel Medical Center began at the time of the UMMS affiliation and is ongoing.

The Phase II planning work has included more detailed planning around the sizing and design of the proposed freestanding medical facility and the other services that will be offered at the UM Laurel Medical Center and on the campus in order to continue serving the needs of the surrounding community. Meetings with various stakeholders including emergency room clinicians, EMS personnel, law enforcement and other LRH and UMMS clinicians have informed the design of this facility. In addition, market research, ongoing community needs assessments and feasibility analyses helped refine the optimal list of services to be provided in

the freestanding medical facility and the surrounding medical campus. Phase II planning efforts have also focused on system integration at University of Maryland Capital Region Health (“UM CRH”) and UMMS to better coordinate services between and among our affiliate hospitals, including interfacility transport services.

The Phase II planning efforts have also focused on continued community engagement and the implementation of robust internal and external communications plans regarding the transition and services that will be available at the UM Laurel FMF Center. UM LRH is unique in that its ED service area spans four Maryland counties, Prince George’s, Howard, Anne Arundel and Montgomery Counties, as well as the District of Columbia. Approximately 70% of the patients transported by ambulance to UM LRH come via the Prince George’s County EMS system, whose leadership was a part of the SPWG committee and the facility design team for the FMF building. UM LRH has met with EMS and hospital leadership in neighboring counties to advise them of planning efforts to date, hear their concerns, and discuss opportunities to further coordinate with them. UM LRH intends to continue ongoing dialogue with them to coordinate throughout the transition process. UM LRH has also engaged in other community outreach and education efforts to inform community members of the transition and hear their concerns. UM LRH’s outreach efforts have included meeting with Senior Community Groups, Civic Associations, Senior Housing, Local post-acute facilities, Pastoral Care Groups, and the Laurel City Council. UM LRH is confident that these communications and outreach efforts will help to ensure a smooth transition from UM LRH to the UM Laurel Medical Center.

Plan for Transitioning of Acute Care Services Previously Provided at UM LRH

The projected timeline for the transitioning of acute care services at UM LRH will depend on the regulatory approval of the UM Laurel Medical Center. UM LRH is engaged in

ongoing planning in order to prepare for the upcoming transition. Emergency services currently provided by UM LRH will continue to be provided at the UM Laurel Medical Center. The FMF's emergency treatment spaces will be staffed by University of Maryland Emergency Physicians who are board certified emergency physicians. The FMF will continue to accept all priority levels and communicate via base station to EMS providers and coordinate care that is in the best interest of the patients. The FMF will also continue to provide diagnostic testing, respiratory and ancillary services, case management, and observation care.

Patients who present at the UM Laurel Medical Center and are in need of inpatient medical, surgical or critical care will, subject to the patient's expressed preferences, be transferred to UM PGHC. UM PGHC will increase its staffing and re-operationalize physical bed capacity in order to accommodate the increase in inpatient cases that are anticipated to be transferred from the UM Laurel Medical Center. UM PGHC will budget for staffing of existing overflow beds and of additional rooms that are not currently occupied. Once patients are stabilized at the FMF by the emergency physician and clinical staff, the "One Call " system that is currently used to transfer patients within the UM CRH system will be activated. This system allows for physician to physician communication to coordinate acceptance of patients at other facilities and transportation. Currently, there is a 30-60 minute turnaround time for patient transports once the patient is accepted by UM PGHC. The increase in capacity and staffing at UM PGHC are currently being planned for and will be in operation at the time of the transition.

Patients arriving at the UM Laurel Medical Center in need of behavioral health services will continue to have a psychiatry liaison and psychiatry assessment and outpatient support services available to them. Patients who need inpatient behavioral health services will, if appropriate to the patient's needs and consistent with the patient's preferences, be transferred to

UM PGHC inpatient behavioral health unit. UM CRH expects that this unit should have sufficient capacity to handle behavioral health patients transferred from the UM Laurel Medical Center, as it has 28 beds and is usually at 80% capacity.

UMMS is also working to expand the capacity and efficiency of its ExpressCare service to accept transfers of UM Laurel Medical Center patients requiring acute inpatient or critical care services. UMMS ExpressCare service includes a Transfer/Communications Central Access Center that provides 24/7 access to physician consultations and transportation coordination services. UMMS intends to create an additional Central Access Center for the University of Maryland Medical Center (UMMC) and will combine Maryland ExpressCare, UMMC Patient Placement Center, Tele-ICU and UMMC Services. This integration is being done in an effort to facilitate timelier and improved access to care for patients within UMMS and throughout the state so that the right care for the right patient, can be delivered at the right time, in the right place. All of the components above will be co-located to facilitate better internal communication, collaboration and coordination of the patient transfer process. The Central Access Center will be the coordinating center for the patient transfer process. The Center will have access to existing electronic health record (EHR) systems of facilities and accompanying bed board information, which will provide contemporaneous hospital occupancy or bed utilization levels. UMMS also anticipates that all its hospitals will be on a single integrated EHR in the near future and the Center will have access to this information to timely coordinate transfers. Patient preference and bed capacity levels will also factor into transfer destinations outside of UMMS facilities.

In addition, to increase the efficiency of interfacility transportation, UM CRH is in the process of engaging a dedicated commercial ambulance service that can commit to certain

performance metrics that will improve the availability of local ambulances and response times. UM CRH anticipates that the dedicated commercial ambulance service will utilize Specialty Care Transport services, which includes highly trained critical care paramedic, an ALS paramedic and an EMT driver on an ALS ambulance when needed to accommodate critical care patients requiring transports; this will create efficiencies for UM Laurel Medical Center by alleviating the need for its emergency nursing staff to travel with critical care patients. UM CRH will also have a dedicated commercial service to provide air transports using the helipad to efficiently transport the appropriate patients to the next level of care after stabilization.

Plan for Job Retraining and Placement of UM LRH's Employees

The SPWG that was formed in June 2016 included a workforce subcommittee that helped develop an initial plan to address the comprehensive needs of the workforce related to the transition. The subcommittee engaged in a collaborative process, including perspectives from across multiple disciplines. Internal and external stakeholders were tasked with reviewing options and making recommendations regarding alternative placement and training options for employees in the event of job loss, as well as providing strategies to ensure employees were kept well-informed and engaged throughout the transition process. The workforce subcommittee developed a draft set of recommendations for the transition, which were submitted to UM LRH in early 2017. UM LRH then organized a work group, the Staff Transition Plan Team, comprised of Human Resources Department and other key stakeholders to begin implementing the recommendations of the SPWG workforce subcommittee, including a plethora of activities to train, engage, and present opportunities of benefit to the UM LRH workforce.

UM LRH conducted an initial projection of the number of full time equivalent employees needed for the freestanding medical facility. The initial projections identified those employees whose roles may be impacted by the transition and focused outreach efforts to these employees.

UM LRH has worked to provide clear and regular communications to employees about the transition, including various means of internal communications, hosting town hall meetings to answer questions about the conversion and timeline, and other methods to engage employees regarding their interests and plans. UM LRH Human Resources representatives continue to meet and work one-on-one with employees to provide information about resources and opportunities available to them.

UM LRH has prioritized finding placements for current staff at the new UM Laurel Medical Center or within the UM CRH System. The Human Resources Department has worked to identify open positions and any training that may be needed to successfully transition UM LRH staff to other positions within UM CRH. UM LRH will also provide training, career shadow days, and other resources to help staff transition to new roles. In addition, UM LRH plans to provide a link to other position vacancies within the UMMS system to connect those staff members would prefer to transfer to another UMMS facility with additional job opportunities. By identifying open positions and offering additional training, UM LRH is hopeful that it will be able to place all staff within UM CRH or UMMS should employees elect to stay within the system. UM LRH will be providing resources to its staff regarding other job opportunities in the community for staff members who want to pursue other opportunities.

Human Resources leadership has worked to build meaningful relationships with community partners, such as Prince George's Community College, Prince George's Economic Development Corporation, and others in the surrounding area to provide information to employees on how UM LRH can assist with the development of skills they need to expand their job placement opportunities. UM LRH has collaborated with these groups and plans to host a job fair to provide opportunities for employees to meet with recruiters and learn of job

opportunities in the area. UM CRH is beginning to provide onsite computer skills training classes as well as a certified nursing assistant certification course, which are offered free of charge to employees and taught by educators from Prince George's Community College at the College's Laurel College Center.

In addition, plans are in place to organize a job shadowing exercise, an activity that will provide employees with an enriched experience to show them a typical work day at another UM CRH location, UM PGHC. Employees at UM LRH will be provided a shuttle to transport them to UM PGHC to experience a first-hand account of working at an alternative location. The goal of this activity is to proactively show UM LRH employees what they can expect from working at a different location.

Over the next several months, plans are in place to continue to implement recommendations and prepare employees for the changes that will accompany transitioning to a freestanding medical facility.

Plan for Existing UM LRH Plant and Site

Once the FMF relocates to the new building, UM CRH intends to demolish the existing building in order to facilitate redevelopment of that portion of the medical campus. UM LRH is considering partnering with other organizations to bring a variety of other health related services to this portion of the campus.