



November 5, 2019

Donna Jerry  
Senior Health Policy Analyst  
Green Mountain Care Board  
144 State St.  
Montpelier, VT 05602

RE: Docket No. GMCB-003-19con, Emergency Department Modernization Project

Dear Donna:

Thank you for your October 29, 2019 requests and questions regarding the above-referenced project.

Attached you will find our responses to your questions and the verification under oath form.

I hope you will find these clarifications complete and satisfactory. If you have any additional questions, please contact Jonathan Billings, NMC's Vice President of Community Relations & RiseVT, at [jbillings@nmcinc.org](mailto:jbillings@nmcinc.org) or (802) 524-1044.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jill Berry Bowen", is written over a printed name and title.

Jill Berry Bowen, RN  
Chief Executive Officer

CC: Jonathan Billings, NMC Vice President of Community Relations & RiseVT  
Anne Cramer, Esq.

**Verification Under Oath**

**STATE OF VERMONT  
GREEN MOUNTAIN CARE BOARD**

In re: Northwestern Medical Center's        )  
Emergency Department                        )  
Modernization Project                         )  
Response to 10/29/19 Request                )        Docket No. GMCB-003-19con

**Verification Under Oath to file with Certificate of Need Application, correspondence and additional information subsequent to filing an Application.**

Jill Berry Bowen, being duly sworn, states on oath as follows:

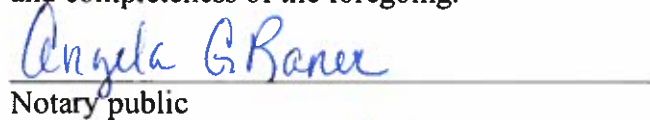
1. My name is Jill Berry Bowen. I am the Chief Executive Officer of Northwestern Medical Center. I have reviewed Northwestern Medical Center's response to the Green Mountain Care Board's questions dated 10/29/19 regarding NMC's Certificate of Need Application for our Emergency Department Modernization project (Docket No. GMCB-003-19con).
2. Based on my personal knowledge and after diligent inquiry, I attest that the information contained in Northwestern Medical Center's response to the Green Mountain Care Board's questions dated 10/29/19 regarding NMC's Certificate of Need Application for our Emergency Department Modernization project (Docket No. GMCB-003-19con) is true, accurate and complete, does not contain any untrue statement of a material fact, and does not omit to state a material fact.
3. My personal knowledge of the truth, accuracy and completeness of the information contained in the Northwestern Medical Center's response to the Green Mountain Care Board's questions dated 10/29/19 regarding NMC's Certificate of Need Application for our Emergency Department Modernization project (Docket No. GMCB-003-19con) is based upon either my actual knowledge of the subject information or upon information reasonably believed by me to be true and reliable and provided to me by the individuals identified below in paragraph 4. Each of these individuals has also certified that the information they have provided is true, accurate and complete, does not contain any untrue statement of a material fact and does not omit to state a material fact.
4. The following individuals have provided information or documents to me in connection with Northwestern Medical Center's response to the Green Mountain Care Board's questions dated 10/29/19 regarding NMC's Certificate of Need Application for our Emergency Department Modernization project (Docket No. GMCB-003-19con) and each individual has certified, based either upon his or her actual knowledge of the subject information or, where specifically identified in such certification, based on information reasonably believed by the individual to be reliable, that the information or documents provided are true, accurate and complete, do not contain any untrue statement of a material fact, and do not omit to state a material fact:

- JoAnn Manahan, RN, NMC Emergency Department Nurse Manager
- Dr. Steve Broer, Director of Behavioral Health Services at Northwestern Counseling & Support Services
- Tyson Moulton, NMC Director of Facilities
- Jonathan Billings, NMC Vice President of Community Relations & RiseVT

5. In the event that the information contained in the Northwestern Medical Center's response to the Green Mountain Care Board's questions dated 10/29/19 regarding NMC's Certificate of Need Application for our Emergency Department Modernization project (Docket No. GMCB-003-19con) becomes untrue, inaccurate or incomplete in any material respect, I acknowledge my obligation to notify the Green Mountain Care Board and to supplement the Northwestern Medical Center's response to the Green Mountain Care Board's questions dated 10/29/19 regarding NMC's Certificate of Need Application for our Emergency Department Modernization project (Docket No. GMCB-003-19con) as soon as I know, or reasonably should know, that the information or document has become untrue, inaccurate or incomplete in any material respect.

  
[signature]

On 11/5/2019, 2019, Jill Berry Bowen appeared before me and swore to the truth, accuracy and completeness of the foregoing.

  
Notary public

My commission expires 1/31/2021  
[seal]



**Northwestern Medical Center Certificate of Need Response to 102919 Requests  
Emergency Department Modernization: GMCB-003-19con**

The following are Northwestern Medical Center's (NMC's) responses to the Green Mountain Care Board's (GMCB's) requests/questions dated 10/29/19 regarding NMC's Certificate of Need application and request for expedited review relating to NMC's Emergency Department (ED) Modernization project – GMCB-003-19con.

**1. NMC involve mental health patients and their families and/or advocates in the design and use of the rooms dedicated for mental health patients?**

Yes, individuals who receive mental health services and those who identify themselves as mental health patients, as well as key clinicians from Northwestern Counseling & Support Services (NCSS) were involved in the design process. We involved the NCSS mental health crisis clinicians Matt Everett and Tony Stevens who work within the NMC Emergency Department as well as Dr. Steve Broer, the Director of Behavioral Health Services at NCSS. They reviewed the design and provided input for the behavioral health rooms. In addition, they shared the floor plan for input with the NCSS Behavioral Health Division Standing Committee (which is "made up mostly of those who receive services" according to Dr. Broer. In addition, a member of that committee participated in one of the ED design meetings along with Mr. Everett and Mr. Stevens.

It is also important to note that the final design being proposed is aligned with standard best-practice and regulations. It mimics the design used at Rutland Regional Medical Center which the Centers for Medicare and Medicaid (CMS) repeatedly advised was best practice.

**2. Explain whether the two rooms dedicated to mental health patients and the two additional rooms that can also be flexibly used for mental health patients (or any patients) will be locked, and the circumstances or policies under which those rooms will be locked verses being monitored by staff.**

There will be a badge access lock on the door that separates the two behavioral health rooms from the rest of the area and we will utilize that as needed based on patient specific behaviors and risks. There is also another double set of doors outside of the 'flex' rooms that can be locked as needed in certain circumstances. An example would be when we have a behavioral health patient in one of the behavioral health rooms who is not a high risk patient and we have a low enough census in the Emergency Department, we can lock that outer door and thus provide a safe space for the behavioral health patient to walk in that hallway if desired. We would also lock it if we had more than two behavioral health patients in the department and were utilizing one or both 'flex' rooms.

We are planning on following the design from Rutland Regional Medical Center, specified by the Centers for Medicare and Medicaid (CMS) as best practice, that includes installing the ability to lock the individual behavioral health and flex rooms. This is not a capability we currently have with our interim behavioral health room. While we can see its potential benefit, it is not a capability we would currently anticipate using except in certain extreme circumstances where safety would be significantly enhanced by the use. Our practice is, and will continue to be, that behavioral health patients are monitored by staff regardless of which doors were locked.