- **B. Comprehensive Project Description:** The description must include details, as applicable, regarding:
  - (1) Construction, renovation, and demolition plans;
  - (2) Changes in square footage of departments and units;
  - (3) Physical plant or location changes;
  - (4) Changes to affected services following completion of the project; and
  - (5) If the project is a multi-phase project, describe the work that will be done in each phase. If the phases will be constructed under more than one construction contract, describe the phases and work that will be done under each contract.

## **APPLICANT RESPONSE**

Calvert Memorial Hospital ("CMH") is a 95-bed licensed-bed not-for-profit community hospital located in Prince Frederick, Maryland.<sup>1</sup> CMH's service area includes all of Calvert County and portions of Anne Arundel, Charles and St. Mary's counties. (See Exhibit 12)

A noted deficiency in CMH's physical plant, an insufficient number of private patient rooms, will be addressed in the Project, which involves demolition of portions of the existing hospital building, construction of a new 3-story patient tower, and renovations to the existing building to provide the necessary interface with the new tower, and to make use of existing facility space for hospital services, departments and functional areas, as described below.

As shown on TABLE B. DEPARTMENTAL GROSS SQUARE FEET AFFECTED BY THE PROPOSED PROJECT (Exhibit 5), several departments and functional areas of the Hospital will be affected by the project, either through new construction, renovations or both. Because some of the existing DGSF of the Hospital will be demolished to accommodate the ground/first floor of the new patient tower, some relocations of existing departments and functional areas will take place on that level. Principal among these relocations is the opportunity to create a new outpatient infusion/medical oncology unit, with more space and access to outside

<sup>&</sup>lt;sup>1</sup> Of the 95 licensed beds, 18 are licensed as comprehensive care beds. In addition, the hospital is licensed for 12 bassinets in it newborn nursery.

natural light during extended treatment times.

To accommodate the proposed 3-story patient tower, a portion of the existing physical first/ground floor of CMH will be demolished. Currently, the space to be demolished is occupied by some Administrative/Medical Staff offices, the Hospital Gift Shop, the Cardiac Rehab Unit, the Chapel, portions of the Hospital's Entrance Lobby and some storage space. All Administrative offices are planned to be temporarily relocated to an attached Medical Office Building.

The Gift Shop will be temporarily relocated to the basement near the elevator lobby.

The only clinical service that needs to be temporarily relocated is the Cardiac Rehabilitation Clinic. It is our intent to relocate that service to an existing on campus building that will provide patients with easy access.

The infusion Center will remain in place until the new tower is complete. Once the Infusion Center moves into its permanent location in the new Tower, its existing space will be renovated for the Cardiac Rehabilitation Clinic and the Vascular Lab. The Cardiac Rehabilitation Clinic and Vascular lab will then move to its new home and the old Vascular lab space will be renovated for Administration space. (See Exhibit 2).

The Project will provide approximately 43,000 additional DSGF to the Departments and Functional Areas of the Hospital facility through new construction, as shown on TABLE B. (Exhibit 5)

In summary, following demolition and the construction of the new patient tower, several of the Hospital's existing patient care units currently on the first floor will be permanently relocated: 1) the existing outpatient infusion/medical oncology unit will be moved from its existing first floor location to the first floor of the new patient tower (increasing the size of the unit from 2,990 DGSF to 5,100 DGSF); 2)

the existing cardiac rehabilitation unit will be moved from its temporary location to a new location in renovated space currently occupied by some of the Hospital's outpatient infusion/medical oncology unit (increasing the size of the cardiac rehabilitation unit from 1,600 DGSF to 2,115 DGSF; 3) the existing Gift Shop and Chapel will be moved from their temporary locations to the first floor of the new tower; 4) some of the existing Administrative/Medical Staff Offices will be demolished and rebuilt in the new tower, and some Administrative/Medical Staff Offices will be renovated in existing space; and 5) the existing Vascular Lab will be moved from its existing first floor location to renovated space currently occupied by some of the Hospital's outpatient infusion/medical oncology unit (increasing the size of the Vascular Lab from 755 DGSF to 840 DGSF). (See Exhibit 5)

The new patient tower will also house two new 20-bed general medical/surgical inpatient MSGA units, one each on the second and third floor. These two units will feature all private rooms, and will be available for admitted medical/surgical inpatients as well as Outpatient Surgical Observation patients.

The second and third floors of the existing hospital will also be renovated. The second floor of the Hospital houses one general medical/surgical inpatient unit which comprises of 33 patient rooms with a physical capacity of 50 beds. This unit will be renovated, which will eliminate seven patient rooms: five private rooms and two semi-private rooms. In their place, the Hospital will provide space for an inpatient dialysis unit currently located on the third floor of the Hospital, and space for offices, staff support and ancillary services. With the new construction and renovation, the number of patient rooms on the second floor will increase from 33 total patient rooms to 46 total patient rooms. The physical bed capacity of the second floor will increase from 50 inpatient beds to 61 inpatient beds.

The third floor of the existing hospital houses one general medical/surgical unit

which comprises of 20 patient rooms with a physical bed capacity of 31 beds. This unit will also be renovated to create an 18-bed unit dedicated for Medical Outpatient Observation services. Thus, after the project is completed, the only general medical/surgical inpatient unit that will be located on the third floor will be the proposed 20-bed unit to be located in new construction, featuring all private rooms. With the new construction and renovation, the number of patient rooms on the third floor for medical/surgical inpatient services will remain at 20 patient rooms. The physical bed capacity of the third floor for medical/surgical inpatients will decrease from 31 beds to 20 beds.

Thus, the net change in the number of general medical/surgical inpatient beds in the Hospital following the completion of the project will be zero.

The need for the proposed medical/surgical inpatient units, the dedicated outpatient observation unit, and the expanded outpatient infusion/medical oncology unit is discussed in this CON Application under COMAR 10.24.08G(3)(a) The State Health Plan, and COMAR 10.24.01.08G(3)(b). Need.

The Project will be undertaken in phases commencing with the demolition of portions of the first/ground floor of the Hospital, the construction of the 3-story patient tower, and the renovations of the existing Hospital facility. The entire project in anticipated to take 38 months from the initiation of construction to completion.