



STATE OF CONNECTICUT
OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

August 1, 2006

Barbara Durdy
Director, Planning and Business Development
Hospital of Saint Raphael
1450 Chapel Street
New Haven, CT 06511

Re: Certificate of Need Determination; Report Number: 06-30807-DTR
Hospital of Saint Raphael
Mobile to Fixed Locations of Hospital's MotherCare Programs

Dear Ms. Durdy:

On July 26, 2006, the Office of Health Care Access ("OHCA") received a Certificate of Need Determination request regarding the Hospital of Saint Raphael's proposal to provide its MotherCare programs at fixed locations rather than through use of a mobile van, at a total capital expenditure of \$52,120. OHCA has reviewed the information contained in your request and makes the following findings:

1. The Hospital of Saint Raphael ("Hospital") is an acute care hospital located at 1450 Chapel Street in New Haven, Connecticut.
2. Under Docket Number 92-505, an Agreed Settlement between the Hospital and the Commission on Hospitals and Health Care (the precursor agency to OHCA), the Hospital was authorized to expand its services and provide the MotherCare service.
3. MotherCare service has been housed in a tractor trailer/van which is parked in five different locations each week. The MotherCare van currently parks at the following addresses:
 - East Rock Elks Lodge, 87 Webster Street, New Haven;
 - McConaughy Terrace, New Haven Housing Authority, South Genesee Street, New Haven;
 - Life Haven, 447 Ferry Street, New Haven;
 - Salvation Army, 1359 Dixwell Avenue, Hamden; and
 - Wheat Program, 674 Washington Avenue, West Haven.

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4. MotherCare services are provided by Physician Assistants and Advanced Practice Registered Nurses under the medical guidance of Hospital attending physicians.
5. The Hospital is proposing to change the MotherCare service from the mobile van clinic to a fixed site clinic service. The van currently in use is now fifteen years old and is well beyond its intended useful life. The van is constantly in need of costly repair to keep it operational. A new van outfitted to provide the MotherCare service will cost the Hospital between \$300,000 and \$400,000. The change to fixed sites will allow the Hospital to achieve operational efficiencies and costs savings through reduced staffing and the elimination of maintenance expense for the van.
6. The Hospital has secured five fixed sites to replace the mobile sites; each is close to the location where the van has historically been parked. Each site was offered to the Hospital by local authorities at no cost and will require minimum renovations to provide the MotherCare service. The sites are as follows:
 - Edith Johnson Towers, 114 Bristol Street, New Haven;
 - McConaugh Terrace, Unit 81, New Haven Housing Authority, South Genesee Street, New Haven;
 - Atwater Community Center, 26 Atwater Street, New Haven;
 - Regional VNA, 1110 Sherman Avenue, Hamden; and
 - Wheat Program, 674 Washington Avenue, West Haven.
7. The Hospital currently bills for this service, and will continue to do so, in a manner consistent with other outpatient clinic services.
8. The primary service area and target population will not change as a result of the relocation of the program.
9. The total estimated capital expenditure for the proposed project is \$52,120. The expenditure will be for medical equipment, such as examination tables, otoscopes, ophthalmoscopes, and other minor equipment. Non-medical equipment will include computer equipment and waiting room furniture.
10. The Hospital proposes to pay for the relocation through its operating funds.
11. Section 19a-638 (a) (2) of the Connecticut General Statutes ("C.G.S.") states, in part, the following:

Each health care facility or institution or state health care facility or institution...which intends to introduce any additional function or service into its program of health care shall submit to the office, prior to the proposed date of the institution of such function or service, a request for permission to undertake such function or service.

Based on the above findings and pursuant to Section 19a-638, C.G.S., OHCA has determined that the Hospital's proposal does not represent a new function or service. Therefore, Certificate of Need approval from OHCA is not required for the Hospital to change its MotherCare service from a mobile van clinic to fixed sites clinic.

Thank you for informing OHCA of your plans. If you have any questions concerning the above, please feel free to contact Laurie Greci, Associate Research Analyst, at (860) 418-7032.

Sincerely,

Signed by Cristine A. Vogel
Commissioner

cc: Rose McLellan, Licensing Examination Assistant, DHSR, DPH

CAV: lkg