

Medicalisation of Hotels in Spain

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1. Process & Parties Involved

Hotels' new role

Aiming to decongest hospitals and ease the burden of hospital care, hotels in Spain are being used as field hospitals to treat COVID-19 patients with mild conditions, that need hospitalisation (ABC, 2020a; MSF, 2020; Johnson, 2020). Therefore, hotels receive those patients who require medical monitoring in isolation without needing to be admitted at a hospital (NH Hotels, 2020; Sanz and Delgado, 2020). Patients of the medicalised hotels are tested constantly until they prove to have overcome the infection, and only then they are allowed to return to their homes (Sanz and Delgado, 2020). By contrast, if their condition gets more severe, then they will be transferred to hospitals (ABC, 2020b). This aims to support intensive care units in treating people with critical symptoms, that account for 7% (4,165 cases) out of the total active cases in Spain (58,598 cases; WorldMeters, 2020). Apart from treating patients, hotels have also been used as safe places for isolating people who have been exposed to confirmed cases as well as for accommodating hospital workers who are in contact with patients on a daily basis (Johnson, 2020). This way, workers are offered a safe house to sleep in and have the benefit of being close to their work (ibid).

Medicalisation process

In this whole process of turning hotels in medical establishments, the Health Ministry has been providing available nursing staff and care technicians, that are supervised by health professionals coming from the Madrid Health Service. Moreover, the Minister has explained that these medicalised hotels will feature a doctor and a nurse with a ratio of patients to be treated by each one (Sanz and Delgado, 2020). Furthermore, amongst the staff within these medicalised hotels, there seems to be approximately 4,400 medical graduates still pending to earn their specialisation(Güell and Sevillano, 2020). The choice of hotels to be used as medical centres is strongly influenced by their proximity to the hospitals that are facing high pressure due to the large number of patients in severe condition. Another criterium is the number of beds to be offered by the hotel to be medicalised (Sanz and Delgado, 2020).

Madrid Hotel Industry Association and Ministry of Health

The Community of Madrid is suffering from the highest number of cases within Spain, with 22,7 thousand cases as of March 30, 2020 (Statista, 2020). Therefore, Madrid Hotel Industry Association (AEHM) has been in close contact with the Ministry of Health in order to coordinate the collaborative work between health authorities and hotel managers (AEHM, 2020). According to AEHM, hoteliers in Madrid region alone have offered authorities access to approximately 40 hotels, thus enabling 9,000 beds to treat COVID-19 patients (Güell and Sevillano, 2020; Sanz and Delgado, 2020). In order to prevent a possible saturation of health centres, field hospitals are also being erected in other regions within Spain, including those without a large number of reported cases, such as Valencia (Güell and Sevillano, 2020). Throughout this process, AEHM has constantly shared with the Ministry of Health the number of rooms available, the location, any additional services that might have been required as well as the capacity of each hotel (AEHM, 2020). The choice of hotels to be used as medical centres is strongly influenced by their proximity to the hospitals that are facing high pressure due to the large number of patients in severe condition. Another criterium is the number of beds to be offered by the hotel to be medicalised (Sanz and Delgado, 2020).

Since this collaboration programme with the Community of Madrid has been activated, the number of hotels' requests associated with AEHM has been rising, with more hotels deciding to offer their facilities. The first hotel to be turned into a medical establishment has been Gran Hotel Colón from Madrid, with the owner Abel Matutes Prats having contacted the Community of Madrid and having delivered his property for as long as it is needed (Sanz and Delgado, 2020).



2. Implications & Practicalities

Turning hotels into healthcare centres implies that hotel managers hand over the keys to their property after sending all their staff at home (O'Mahony, 2020). They regard this action as a temporary solution to alleviating the pressure on hospitals and making resources available to authorities and social organisations to help combat the COVID-19 crisis (NH Hotels, 2020). The medicalisation of hotels turns out to strengthen the contact of hospitality companies with both national and local authorities and aims to contribute to the virus' resolution (ibid).

For hotels to be used as healthcare centres, indoor work needs to be performed to ensure that the space is adapted to meet the health workers' needs (Sanz and Delgado, 2020). Taking the example of NH Parla with 99 rooms into consideration, one floor will be used to accommodate patients and one will be made available for health staff (NH Hotels, 2020). Overall, hotels need oxygen supply and ventilation (i.e. invasive ventilation, masks to be worn by staff), thus filling up the lobbies with oxygen tanks as well as medical supplies (BBCNews, 2020; O'Mahony, 2020). The lobbies are also full with medical staff wearing protective suits, face masks as well as gloves (Boutreux, 2020; O'Mahony, 2020).

The furniture and beds from the rooms are moved into the hotels' open spaces, including restaurants and cafés and facilitated with medical equipment (Sesay, 2020; Euractiv, 2020). In the case of Melia Palma Bay Hotel, the conversion into a hospital is done by the military, with them being responsible for moving the furniture (Sesay, 2020).

In order to warn the public that the hotel has been turned into a healthcare centre, signs are being placed at the entrance of the building (Sanz and Delgado, 2020).



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