



March 4, 2008

State Health Coordinating Council  
Dan Myers, MD - Chairman  
c/o Victoria McClanahan  
2714 Mail Service Center  
Raleigh, NC 27699-2714

DFS Health Planning  
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Medical Facilities  
PLANNING SECTION

Re: Operating Room Need Methodology

Dear State Health Coordinating Council Members:

I am writing to you today to request that the SHCC reevaluate the impact of the Operating Room Methodology on Rural Healthcare Providers and counties with 5 or fewer operating rooms. At Randolph Hospital, we believe in the Certificate of Need process and support the use of need methodologies in the State Medical Facilities Plan. However, we are compelled to ask you to reevaluate the Operating Room Need Methodology as it applies to rural counties and providers.

As you may recall, I presented a petition to the SHCC during a Public Hearing this past summer regarding Randolph County's need for an additional Operating Room. We appreciate that several SHCC members understood the unique needs of rural providers and counties and presented comments that supported the spirit of our petition. You may also recall that there were several other similar petitions from rural counties such as ours, which should be a continuing indication that while the methodology is sound on a statewide basis, the operating room need in rural communities is not consistently recognized in a timely manner.

Our petition was denied, but Operating Room Capacity continues to be an issue in our community. The lack of sufficient OR capacity affects our ability to recruit and retain surgeons and to provide the citizens of Randolph County with appropriate access and convenience to surgical services. It remains difficult to attempt to explain to the surgeons, health care leaders, and the public in our community why Operating Rooms were granted outside of the methodology in Pitt County and Wake County in the 2008 SMFP, but our smaller, more rural county was not given the same consideration.



The agency report encouraged us to "continue to work with existing resources to maximize the efficient utilization of current surgical operating room capacity." It appears that our only option is to trigger an OR need through increasing our volume. Of course, increasing our volume cannot be accomplished without recruiting surgeons to perform operations and by providing surgeons and their patients with operating room availability that is conducive to their schedules and allows for appropriate recovery time. Since our petition was denied we have had three surgeons state the lack of OR capacity as the reason they would not interview or relocate to Randolph County. We are currently recruiting six physicians in surgical specialties. Without the ability to recruit these additional surgeons, we are already beginning to experience gaps in our ability to provide emergency call coverage for surgeons.

The Randolph Hospital petition filed in the summer of 2007 illustrated the ratio of population to operating rooms experienced in similar sized communities. This table revealed that Randolph County citizens have the lowest degree of access to Operating Rooms of the comparative counties. Randolph County citizens have access to one OR per 28,300 citizens while similarly populated counties have ratios of one OR per 4,600 citizens to one OR per 15,000 citizens. This disparity causes a hardship as surgical services are not available in a timely fashion or patients must travel away from their home to receive procedures that could be offered locally if there was additional Operating Room capacity. While the agency report argued that these counties have surpluses in Operating Room capacity, it cannot be argued that these surpluses translate into readily available operating room space. This ratio should be considered in the Operating Room Need Methodology.

Please consider an addition to the Operating Room Need methodology that takes into account the needs of smaller, more rural communities and the welfare of their citizens. We stand ready to provide you additional information or comment throughout your review. Thank you in advance for your careful consideration of this important matter.

Best regards,



Robert E. Morrison  
President  
336-633-7730  
REM@RandolphHospital.org

cc: Bob Fitzgerald  
North Carolina Hospital Association