

AUG 02 2010

MEDICAL FACILITIES
PLANNING SECTION

WakeMed Health & Hospitals
Petition for Dedicated Pediatric Operating Rooms in Wake County
Remarks by: J. Duncan Phillips, M.D.,
Wake Specialty Physicians & WakeMed Children's Hospital
August 2, 2010

Good afternoon, members of the State Health Coordinating Council and Planning Section staff. My name is Duncan Phillips, and I am a pediatric surgeon with Wake Specialty Physicians and surgeon-in-chief at WakeMed Children's Hospital in Raleigh. WakeMed is requesting a special need determination in the 2011 State Medical Facilities Plan for four dedicated pediatric surgical operating rooms for Wake County. Because of the special population that these ORs would serve, WakeMed requests that they be excluded from the general operating room inventory.

I will briefly go over a few of the reasons we believe Wake County should receive dedicated pediatric ORs.

- Wake County is now North Carolina's most populous county, having surpassed Mecklenburg County in 2010. Further, Wake County's pediatric population is growing rapidly, and Wake is projected to have the largest pediatric population in the state as early as 2014.
- Data from Thomson Reuters indicate that pediatric surgical volumes in Wake County are also growing rapidly. During the period 2005-2009, total

pediatric surgical volume for Wake County residents increased by nearly one-third, with an annual growth rate of over 7 percent. Inpatient case volume alone increased by approximately 25 percent. This clearly demonstrates that demand for pediatric surgery in Wake County is strong, and should continue to grow.

- Data on file at the Division of Health Service Regulation show that, in 2009, Wake County's existing surgical operating rooms were utilized at well above 90 percent. With operating rooms being used at this level, no provider has the OR capacity to dedicate solely to pediatric surgery.
- Operating rooms allocated in the State Medical Facilities Plan are hotly contested. Because pediatrics is not a distinct surgical specialty, and includes both inpatient and outpatient cases, a proposal for dedicated pediatric ORs would be at a distinct disadvantage in a competitive review.

The differences between pediatric and adult patients, and the unique needs of each patient population in surgery, are generally not delineated. Children are not small adults. They have a unique set of diseases and responses to diseases, as well as different social and emotional needs. In recent years, there has been a growing trend nationally, as well as within North Carolina, to provide distinct

health care facilities for adults and children. Many larger hospitals, including WakeMed, have created specialized medical/surgical and intensive care units geared toward children, to better address their physical and emotional needs. Several hospitals across the state have developed or proposed dedicated children's emergency departments that provide a full range of services in a separate setting. The delineation of pediatric surgical services, with dedicated operating rooms and pre- and post-operative areas, represents another effort to distinguish between adult and pediatric health care services. Doing so improves patient safety and clinical outcomes, helps reduce medical errors, and boosts patient and family satisfaction.

In conclusion, WakeMed respectfully requests that the Council allocate four dedicated pediatric operating rooms to Wake County in the 2011 State Medical Facilities Plan. Doing so will be a proactive step toward ensuring an adequate supply of pediatric surgical resources to residents of Wake County.

Thank you for the opportunity to provide these comments.