

**WakeMed Health & Hospitals
Petition for the State Health Coordinating Council for
Dedicated Pediatric Operating Rooms in Wake County**

*Remarks by: W. Stan Taylor, Vice President Corporate Planning, WakeMed
Proposed 2013 State Medical Facilities Plan Public Hearing
August 1, 2012*

Good afternoon. I am Stan Taylor, Vice President Corporate Planning for WakeMed Health & Hospitals. I am here today to request the State Health Coordinating Council's consideration of WakeMed's Special Need Determination petition for 2 dedicated pediatric operating rooms allocated to Wake County.

Almost a decade ago, WakeMed brought together the community's pediatricians and created a Children's Advisory Council. That council, and the community pediatrician's input from its members, has lead to several innovative advances in the services available for children in Wake County, not the least of which is the WakeMed Children's Hospital. Another key initiative is the charge from the council to recruit pediatric general surgeons and begin to provide the necessary surgical services to meet the needs of local children. Simply put, the community was tired of not having healing resources available, especially for trauma or emergent situations.

Dr. Duncan Phillips was recruited first, followed by Dr. George Wadie and Dr. David Hoover. They are 3 of only 28 pediatric general surgeons practicing in North Carolina. They are able to meet the vast majority of the general surgery needs of the children in Wake County. Now the community needs a state-of-the-art facility to match the surgical talent that has been recruited. Hence our request is before you today.

WakeMed made a similar request in 2010. As a result of that petition, a Work Group was commissioned in 2011 to study pediatric surgery in North Carolina. That Work Group was chaired by Dr. Dennis Clements, a pediatrician, and staffed by SHCC members and several pediatric specialists from across the state. Ultimately, the Work Group chose not to recommend revisions to the operating room need methodology, but did recommend that this dilemma for WakeMed could be best addressed through the SMFP Special Need Determination petition process. WakeMed's petition is in response to that recommendation.

Many of the arguments WakeMed used in 2010 to support the need for dedicated pediatric operating rooms in Wake County are still true today. Wake County's total population is growing rapidly, as is its pediatric population.

Operating rooms in Wake County are, for the most part, very highly utilized, making providers' abilities to dedicate OR facilities solely to pediatrics impossible from a practical standpoint. An applicant proposing pediatric operating rooms over adult operating rooms in a CON review is following the least financially viable path. This would fare poorly in both non-competitive and competitive reviews, and is not viewed favorably by the financial stewards of for profit or even non-profit organizations.

In reviewing pediatric surgery data from Truven (formerly Thomson-Reuters), WakeMed noted that Wake County residents had the highest proportion of pediatric surgery cases in the State from 2009-2011. Not every pediatric surgery case need be performed in a dedicated pediatric OR. However, complex surgical procedures, generally those that would be performed on an inpatient basis, are best accommodated in a dedicated pediatric OR. If one applies the standard operating room need methodology to Wake County's *inpatient* pediatric surgery volume, Wake County's case volume generates a need for 2 operating rooms.

In filing this latest petition for pediatric ORs, WakeMed is following the suggestion of the Pediatric Operating Room Work Group, to allow the SHCC to

consider these requests on a case-by-case basis. WakeMed's petition is not without precedent. In 2004, the SHCC received a petition for an adjusted need determination in the 2005 SMFP for a dedicated pediatric MR scanner. Justification for that petition rested on the unique and unmet need that could only be addressed through an MR dedicated to serve pediatric patients. The petition was approved by the SHCC, and the 2005 SMFP included a need determination for one dedicated pediatric MR scanner, which today is in operation at Levine Children's Hospital in Charlotte. Approval of that petition did not lead to a proliferation of subsequent proposals for pediatric MRI. There is no reason to believe that approval of WakeMed's petition would lead to a proliferation of requests for dedicated pediatric operating rooms.

In summary, WakeMed appreciates the opportunity to present its case, and asks that the State Health Coordinating Council give its full consideration to this petition for dedicated pediatric operating rooms.

I am now pleased to turn our presentation over to Dr. Duncan Phillips, a pediatric general surgeon serving Wake County's children.