

From: [Ramey Harris-Tatar](#)
To: [DPH-DL - DoN Program](#)
Subject: BCH Support
Date: Sunday, December 19, 2021 8:36:04 AM

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Hello,

My name is Ramey Harris-Tatar and I live in Needham. I was unable to speak at the hearing due to a family emergency so I appreciate you reading this.

I am connected to Boston Children's Hospital both personally and professionally. My personal connection is as a mother since my son is a patient in the Celiac Disease Program. Professionally, I am a Pediatric Nurse Practitioner and Practice Manager in the MetroWest region and I refer my own patients to BCH.

I am writing today in support of Boston Children's Hospital's proposed project.

I'd first like to talk about the care my son has received at BCH. For several years my son endured intermittent and varying symptoms as we sought care through other organizations. He was finally diagnosed with celiac disease at age 9 when we came to BCH. The outstanding care he received has allowed him to grow and thrive and he is now a healthy and strong 9th grader. While he is now stable and our need for care is only yearly (knock on wood), early on we had multiple visits to different satellite locations in Waltham and Lexington.

While accessing this care was not difficult for our family, through my professional work I know that is not the case for all families. Adding a BCH location in Needham and updating and adding services in Waltham and Weymouth would make it easier for more children and families to visit Boston Children's locations outside of Boston for the services they need. For working families and those with transportation challenges, making it easier for them to access the care they need improves their quality of life and allows for improved access to a broader range of services.

In summary, I feel, both personally and professionally, that the proposed improvement and expansion of Boston Children's Hospital services would benefit the children in these areas and beyond as access to care is improved. Thank you again for taking the time to read this.

Sincerely,
Ramey Harris-Tatar, CPNP

Massachusetts Department of Public Health
Att: DoN Applications Review Team
250 Washington Street
Boston, MA 01000

RE: The Children's Medical Center Corporation BCH-21071411-HE DoN Application

December 13, 2021

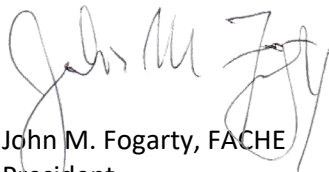
Dear Determination of Need Applications Review Team,

Over the past year, the leadership at Beth Israel Deaconess Hospital in Needham (BIDN) has been informed and updated by representatives of Boston Children's Hospital (BCH) about their plans for the construction of a pediatric surgical facility in Needham. As a community hospital member of the Beth Israel Lahey Health system, BIDN does feel that the development of general purpose ASCs in the greater Boston area require much thought and analysis as to their impact on the Commonwealth's highly important healthcare infrastructure. In the case of the BCH facility in Needham, we do feel expanded access to pediatric services will be positively received in our community. As a general acute care community hospital, BIDN does not offer the services proposed at the facility, requiring those patients from our community to access care in Boston.

Further, we are intrigued by the potential opportunities that BCH's presence in the Needham area may afford both organizations to collaborate on enhancement of pediatric services, behavioral health initiatives, as well as staff and community education efforts for the greater Needham community. We have had preliminary discussions with BCH leadership in this regard should the project be implemented.

While we can make no comment on the proposed BCH expansions in Waltham and Weymouth and urge cautious review of the development of general ASCs in the greater Boston area, we do feel a BCH presence in the Needham area as proposed would bring positive health benefits to our community.

Sincerely,



John M. Fogarty, FACHE
President
Beth Israel Deaconess Hospital Needham



Boston Children's Hospital

Where the world comes for answers



**HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL**

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

I want to thank the entire Department of Public Health team for your time and commitment to improving healthcare for all residents of Massachusetts. On behalf of Boston Children's Hospital, we appreciate the opportunity to highlight our proposed project and our investment in patients, families and communities. I am hopeful you will find this information informative and that our proposal meets the Department of Public Health's requirements as you conduct your comprehensive review process.

My name is Dick Argys. I am Boston Children's Executive Vice President, Chief Administrative Officer, Chief Culture Officer, and Chief Operating Officer for Ambulatory & Satellites. I am privileged to have worked at Boston Children's for the past 12.5 years and in healthcare for another 35 years. My work at hospitals like Colorado Children's has afforded me the opportunity to see what great pediatric care looks like across the country. This is clearly an exciting time for Boston Children's and how we continue to deliver world class pediatric care to children and families.

Boston Children's Hospital is **the only freestanding comprehensive pediatric care system in Massachusetts**. We are committed to improving the health and well-being of all the children of Massachusetts:

- Children of all races
- Children of all ethnicities
- Wherever they live
- Whoever pays for their care

Our goal is to improve access to the unique services we provide to children, families and communities, including access for patients with special health needs, such as behavioral health and medically complex children.

As part of this longstanding commitment, we plan to:

- Modernize our existing facility in Waltham;
- Relocate existing physician practices with limited pediatric hospital services in Weymouth; and
- Build an ambulatory surgical center and provide pediatric specialty care as well as physician practices in Needham



Boston Children's Hospital

Where the world comes for answers



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

Our proposed investment in Waltham, Weymouth, Needham and surrounding communities – including several underserved communities – is part of our ongoing efforts to **ensure that patients and families have access to a full range of integrated pediatric care services in convenient settings as close to home as possible.**

The need for our services has been growing steadily, and our proposed investment is part of a comprehensive planning process that has been underway for several years.

As we emerge from the pandemic **it is essential that we make the investments required to meet the unique needs of children—with respect to the differences in conditions and the nuances of how best to care for them** and that we are well positioned to continue to improve their health and well-being both now and in the future.

In closing, I would like to reiterate that our investment in Waltham, Weymouth and Needham are part of our longstanding commitment to meeting the unique needs of children throughout Massachusetts – and to ensuring that we are well positioned to continue to improve their health and well-being in the years ahead. This is important work that is essential to our mission and our future and to the future of our patients and their families.

Thank you,

Dick Argys

Executive Vice President, Hospital, Satellite and Ambulatory Operations, Chief Culture Officer

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

My name is Julee Bolg, and I am the Executive Director of Satellite Clinical Operations at Boston Children's Hospital with responsibility for the overall nursing/patient care services at all of our satellite locations. In this role I have worked at Boston Children's for 15 years. Primarily based at Boston Children's Waltham, I witness the extraordinary care our patients and families receive on a daily basis and the resulting positive experiences and outcomes. With greater than 30 years of experience working in pediatric hospitals and healthcare systems across the country, I can confidently say that Boston Children's is among the leaders in providing pediatric care in community settings.

Boston Children's has responded to the needs of our patients and communities for more than 25 years by bringing specialty ambulatory care to the community in order to improve access and convenience. It's an understatement to say we have created something special.

The most rewarding part of my job is blending my business and nursing experience and skills. I have a unique perspective into the amazing things that are taking place in nursing and patient care, and I am able to use those insights to collaborate with other hospital leaders on business strategies that make our satellites operate as safely and efficiently as possible.

Providing care in the community makes access easier for families. From parking to passing through the lobby to arriving at appointments, there's a different feel to our satellite facilities. These satellites are not as crowded as you may find on our Boston campus, so they are easier to navigate, easier to access, and they enable the child to stay within a familiar environment closer to home. We have found that this really resonates with kids and families, and helps them stay calm when they arrive at our satellite facilities for visits. Our satellite locations allow us to provide greater access to the same high-quality care available at our Boston campus, and to minimize delays in scheduling appointments as we can offer more availability across different locations. Providing ambulatory services in the community relieves the stress of having to choose an inconvenient location.

Our community locations have allowed us to reach groups of patients we hadn't reached before. For instance, our location in North Dartmouth was carefully selected as it enabled families with transportation challenges to see Boston Children's providers in the community closer to home without having to arrange travel into Boston. For many North Dartmouth families, the journey into Boston is simply not possible, so intentionally locating a facility in this community provided them unprecedented access to care. This location has also enabled us to reach a lower income population in the Fall River and New Bedford area that might have particular challenges accessing care in Boston.

Relationships matter. We have a stable group of clinicians and staff in each satellite who are part of Boston Children's. They work hard to know patients and families, forming meaningful relationships that provide an increased level of comfort before, during and after appointments. These relationships have been developed over the years and truly help in delivering care.

At the same time, we are fortunate to have a highly specialized set of providers, clinicians and staff who rotate between Boston and the satellites offering unique surgical and medical services. This enables us to further expand access while assuring highly consistent care across locations. Examples include surgical patients requiring a one to two day stay post-procedure may be able to stay in our 11-bed post-surgical unit in Waltham. We also have a ten chair Infusion unit in Waltham that is open seven days a week to meet the needs of patients requiring therapeutic treatment including those with immunology issues like Inflammatory Bowel Diseases. And the Adolescent Substance Abuse Program brings their team out to Waltham once a week to see patients in the community. Early in the pandemic it was very effective for nurses in the satellites to check in with families who may have cancelled or were unable to have in person appointments; because they already had trusted relationships built over many years, nurses were able to provide meaningful support to families by phone.

Coordinated care and collaboration takes place between the satellites and Boston Children's main campus in Longwood. This is critical for maintaining consistency and the same high quality care across all Boston Children's locations. Things may look different in different satellites, but the overarching programs, objectives and outcomes are the same. Working as a team, collaboration regularly takes place to plan together how we can best deliver care to patients and families. For example, a committee with representation from the main campus and the satellites meets regularly to discuss our patients with behavioral needs who may make the delivery of medical or surgical care more challenging and require extra planning and appropriate staffing and space resources for appointments. This planning committee identified that most patients would be able to be seen in the satellites with thoughtful planning for necessary resources. By putting the right staff in place and working with the hospital's Behavioral Response team, this collaboration helps to make care more efficient and ensures we can accommodate as many patients and families as possible at locations other than the Boston campus. Another example of collaboration across our satellites is around important safety measure work to reduce errors. This teamwork resulted in the ongoing implementation of a plan for all patients, including ambulatory, to have an ID band for every visit across our system, a proven mechanism for reducing errors.

The patient experience is high quality and family centered, which is consistent across all Boston Children's locations. We strive to make patients feel comfortable and look for ways to allay fears and make the experience more child-friendly while also supporting parents, caregivers, and family members. One interesting example takes place at Boston Children's Waltham where children of a certain age can drive a toy car into the OR as they prepare for a procedure. Having such a fun opportunity makes them feel comfortable and distracts them from their visit, and also serves to reduce stress for parents.

Similarly, the importance of specially trained pediatric staff and providers, from pediatric phlebotomists to pediatric radiologists, cannot be underestimated. Phlebotomists and radiologists both require specific training to understand the nuances of pediatric care and provide the correct support – having a pediatric specialist makes a huge difference in all aspects of care.

Beyond the clinical aspects of care, providing culturally competent support and services is a key part of a positive patient experience. Boston Children's offers a range of interpreter services at all of its satellite locations to support language needs for patients and families.

The facilities need to be child-friendly. For example, Boston Children's Peabody was the first to be designated as an autism-friendly environment by Boston Children's Hospital's Autism Center in 2019. This is incredibly important for patients and families as there is assurance that staff have expertise in

interacting with kids on the autism spectrum and the environment is conducive to patient needs. Patients are taken directly into their appointments without having to wait in the waiting room, and they build strong relationships with the team, which follows patients through the different components of their visit (e.g., phlebotomy, clinic, radiology). Boston Children's Peabody is a powerful example of the positive impact a facility can have when the physical space is adapted to meet specific pediatric needs. For example, a patient may be seen in a room without medical equipment, or in one case, a provider saw a child with autism outside when he was reluctant to enter the building. We are incorporating these learnings into the design and operations of our other locations.

We thoughtfully planned our ambulatory satellite strategy to make sure we could effectively address community needs and work with providers to build programs for success. We want to make sure we get the right kids into a program and build it from there. Our 12-bed residential Community Based Acute Treatment program and our Sleep program are two examples of something we created to address pediatric and community needs. We have outpatient psychiatry appointments in our Waltham facility and we have begun planning for Weymouth, building upon this success.

We've got something very special here as the result of hard work, strong relationship building with patients and families, and a heightened level of collaboration across all of Boston Children's, which clearly reflects and reinforces the importance of our satellite strategy. Boston Children's has clearly demonstrated the importance of providing care in the community.

The depth and breadth of what Boston Children's does in its facilities will only be strengthened by the proposed project in Waltham, Weymouth and Needham. I fully support this project and look forward to the even greater opportunities it will create.

Sincerely,

Julee Bolg, DNP, MBA, RN, NEA-BC
Executive Director of Satellite Clinical Operations

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

As Vice Chair for Clinical Affairs in the Department of Pediatrics at Boston Children's Hospital and in my longstanding prior role as the Associate Chief of the Division of Gastroenterology, Hepatology, and Nutrition at Boston Children's, I am writing to support Boston Children's Hospital's proposal to modernize existing facilities in Waltham and Weymouth. As part of this proposal, Boston Children's wishes to build a center of excellence for pediatric gastroenterology in Needham, significantly improving access to life-changing care for children throughout Massachusetts.

Our division has over 50,000 patient visits per year caring for children with complex medical conditions including Crohn's disease, ulcerative colitis, abdominal pain, constipation, pancreatic disease, liver disease, celiac disease, and allergic disorders. Our physicians always go above and beyond in caring for sick children and accommodate as many patients as possible, but a lack of space hinders our providing optimal care to every child in need. The hospital's ambulatory clinic in Boston was established in the 1970s. Since that time, our patient volume has increased tremendously but we have been unable to enlarge adequately to accommodate the volume. We have worked to expand our patient appointments and services at our clinics outside of Boston, but within the confines of limited space. Patients cannot always be seen in a timely manner, which can translate into potentially preventable hospitalizations. The expansion of our facilities, overdue for about 20 years, will enable us to provide healthcare to an ever-increasing patient population, comprised solely of children, whose families are in search of timely and specialized care.

The documentation accompanying our application details the need for pediatric gastroenterology services within the state of Massachusetts and Boston Children's proposed solutions. The cornerstone of our proposed gastroenterology center of excellence in Needham is an expanded Growth and Nutrition Program (GNP), caring for children who:

- (1) lack financial resources to obtain food (food insecurity),
- (2) have developmental disorders (e.g., autism),
- (3) are unable to take adequate nutrition by mouth, and
- (4) have complex medical needs (e.g., cerebral palsy, cystic fibrosis, bronchopulmonary dysplasia, congenital heart disease) and are malnourished as a result of their underlying illness. Despite the rapid, successful, expansion of this program, there is a several months wait list to schedule patients, and delays can further increase the challenges these children and their families face.

The partnership between the Growth and Nutrition Program and the Department of Public Health has improved the health of vulnerable children in the state of Massachusetts for over two decades. However, relative to other states, our ability to support children with feeding disorders is restricted. For example, Milwaukee Children's Hospital has a comprehensive feeding and swallowing program which includes a facility with a one-way mirror system, which observers utilize to watch parent-child interaction while feeding their children, ultimately hoping to reduce the number of children needing to be tube fed and reducing hospitalizations. Expansion in Needham would enable us to establish these types of specialized treatment areas. Clinical nutrition is present at each satellite and enables access to these services in all locations.

Boston Children's has had a successful partnership with the Massachusetts Department of Public Health for decades, and we aim to continue to expand the critical comprehensive gastroenterology services and resources we offer to the residents of the Commonwealth. Specifically, our proposed project will provide children access to gastrointestinal procedures without traveling into Boston. Children with complex medical needs, such as cerebral palsy, feeding tubes, gastroesophageal reflux, and orthopedic issues, will be able to schedule all of their specialists at one time, eliminating multiple visits.

Multidisciplinary care for children with chronic conditions such as obesity, inflammatory bowel disease, and aerodigestive disorders, as well as behavioral challenges, is becoming the standard of care across the country. At Boston Children's, we utilize teams of physicians, psychologists, nurses, social workers, and dietitians to provide comprehensive care. Our facilities are open to all. We provide inclusive, multicultural care with the assistance of skilled interpreters, and care for children with developmental needs for whom other facilities are unequipped. Currently, a lack of space in Boston limits the accessibility of our services for families throughout the state.

Our proposed project is an investment in the health and well-being of families across the Commonwealth, enabling Boston Children's to expand its outreach, clearly demonstrating our hospital's commitment to provide a full range of high quality, integrated pediatric care services in convenient, lower-cost settings, meeting the needs of underserved communities.

I am confident Boston Children's Hospital's investment in children, families, and communities will have a long-lasting impact, and benefit future generations of children.

Thank you for accepting my letter of support for this critical growth project.

Sincerely,

A handwritten signature in cursive script that reads "Athos Bousvaros MD".

Athos Bousvaros MD, MPH

Professor of Pediatrics, Harvard Medical School

Attending Physician in Gastroenterology, Boston Children's Hospital

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

I am writing to support Boston Children's Hospital's proposal to modernize its existing facilities in Waltham and Weymouth and build an ambulatory surgical center in Needham. I believe this project will greatly benefit children, families, and communities across our state and improve access for patients seeking lifesaving or life-changing care.

I currently serve as the Chair of the Department of Anesthesiology, Critical Care, and Pain Medicine at Boston Children's Hospital. In this position I serve as the organizational lead for oversight of our anesthesia and pain control operations. I have worked at Boston Children's for ten years focusing on outcomes analysis for the care we provide in the perioperative venue. My role continues to relate to coordinating our services in a manner that will optimize the safety and quality of the care for children that is provided at all of our sites.

With respect to ambulatory surgery such as we provide in Waltham and Needham, the provision of care by trained pediatric anesthesiologists has been shown to improve overall safety and quality of care when infants and young children are involved. It has been well established that pediatric anesthesia care is safer with pediatric anesthesiologists than with general anesthesiologists. The provision of our care in the ambulatory setting in Needham and Waltham will allow us to bring world-leading pediatric anesthesia care to the ambulatory setting. It will improve access to this level of anesthesia care for children in our region.

In addition, our department is involved in the provision of leading edge ambulatory perioperative care – including the provision of extended regional anesthesia utilizing home-based regional anesthesia catheters for pediatric patients undergoing orthopedic or general surgery procedures. This unique program provides extended pain control for outpatients in their home setting by keeping the operative area “numb” for several days after surgery. The result is the ability to provide some surgeries in an outpatient setting that would otherwise have to be done in association with a one- or two-day inpatient stay, which not only supports quality of life for patients and families but also contributes to cost containment. In addition, we have proven that this care results in the use of much less perioperative opioid medications. This is particularly important since the use of perioperative opioids has been shown to be a significant precursor for opioid use disorders.

I would also point out that our pediatric anesthesia services are unique in the manner in which they include an advanced integration with professionals who are optimally prepared to address the psychological and emotional needs of the pediatric surgical patient and families. Our outpatient anesthesia teams work closely with the hospital's Child Life Specialists to minimize the stress and anxiety that is commonly associated with surgery in this age group. As there is ample literature that suggests the need to be cautious about the exposure of small children to anesthesia, including an FDA warning to avoid elective anesthesia before the age of three years, we carefully discuss the need for anesthesia with each patient family in the preoperative setting. Through the use of selective pharmacology,

behavioral interventions, interactive technologies, and customized environments, the improvement in perioperative wellness has been shown to translate into better behavioral and functional outcomes after surgery.

The Anesthesiology service at Boston Children's has also developed leading edge technologies for interacting with and intervening with patients in the perioperative time frame. We now have the ability to interact with patients via text messaging and surveys that allow us to document a pediatric patient's status at numerous times in the days/weeks after surgery. This data is used to generate further follow up as indicated. The result is a system that provide just the right amount of follow up and interaction that a patient and family desire – and urgent interventions when needed.

The proposed project and investment will help Boston Children's Anesthesiology leading care techniques reach even more families and more patients, clearly demonstrating the hospital's commitment to the health and well-being of children throughout Massachusetts. The project will ensure that patients and families have access to a full range of high quality, integrated pediatric care services in convenient, lower-cost settings. In addition, the project will meet the needs of surrounding underserved communities.

I am confident Boston Children's growing investment in children, families and communities will have a long-lasting impact and benefit future generations of children for many years.

Thank you for accepting this letter of support.

Sincerely,

Joseph Cravero

Chair of the Department of Anesthesiology, Critical Care, and Pain Medicine

Boston Children's Hospital

David R. DeMaso, MD

Psychiatrist-in-Chief, Chairman, & The Leon Eisenberg Chair in Psychiatry,

Boston Children's Hospital;

George P. Gardner - Olga E. Monks Professor of Child Psychiatry & Professor of Pediatrics,

Harvard Medical School

300 Longwood Avenue, Boston, MA 02115

December 16, 2021

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

Dear Determination of Need Program,

As Chief of Psychiatry Boston Children's for nearly 20 years and a practicing child and adolescent psychiatrist in Massachusetts for over 40 years, I am writing to wholeheartedly support Boston Children's proposal to modernize its existing facilities in Waltham and Weymouth and build an ambulatory surgical center in Needham. This project will greatly benefit children, families, and communities across our state and improve access for patients seeking life-changing medical and behavioral health (BH) care.

This week, on December 15, we had 58 children boarding at Boston Children's on a medical floor or in the emergency room waiting for placement in an intensive psychiatric treatment setting. During this past winter this number reached into the 50's and 60's. I expect the numbers to be similar this coming winter season. Clearly, we are in the midst of a behavioral health crisis where children are not receiving early intervention or effective treatment. The downstream adverse effects on education and occupational achievement, family stability, increased morbidity and mortality, cross-generational transmission of disadvantage, and substantial costs to society are well known and remains evident in the continuing and rising demand for BH services. We are in the midst of a BH access crisis that has been impacting care, that has only been exacerbated due to COVID.

In response, Boston Children's is focused on the development and implementation of a responsive psychiatric care continuum in order to provide children and their families with the *right services* in the *right setting* at the *right time*. We have implemented a new 12-bed inpatient psychiatry unit in Waltham with plans to build a new 8-10 slot partial hospitalization unit in the near future. This response occurs with the decision to expand BH clinical staffing in order to ensure that patients who are boarding receive timely evidence-based interventions as they wait and even to allow them to return home safely with less intense BH. We have greatly expanded access to our outpatient psychiatry services both in Boston and in Waltham along with plans to do so in Weymouth – though our waiting lists continue. These individual components of our plan each play an important role in building out a continuum of services for children to receive care in the setting most appropriate to their unique needs, recognizing that the ideal course of action is intervention early in the progression of a behavioral health issue but that many

children continue to struggle as their condition escalates and they require intensive services on an outpatient or inpatient basis.

Boston Children's understands that the establishment of an effective care continuum requires successful collaborative care partnerships with primary care pediatric providers, school professionals, and community mental health providers. Our community school program, Boston Neighborhood Partnerships Program, has provided elementary schools with critically needed access to our BCHNP team that helps educators, parents, and child health professionals to identify psychological stress and behavioral issues early in a child's life. Our primary care collaborative program, Behavioral Health Integration Program, is training primary care providers statewide and nationally in BH integration, filling critical gaps in the psychiatric workforce, contribute to workforce development, and fostering effective BH integration across the continuum of care. Success in this endeavor will lead not only to reduced suffering and improved health for our patients but, also, to a BH system that functions in a more cost effective manner focused on intervention at a point of lower acuity.

Through a multifaceted program that integrates psychiatry, neuroscience, genetics, stem cell science, bioinformatics, and brain imaging, our Tommy Fuss Center for Neuropsychiatric Disease Research aspires to unlock the genetics and biology of psychiatric disease, with a focus on early detection, prevention, and intervention to protect and treat the most vulnerable community of children and young adults. By improving early identification techniques and intervention strategies we aim to transform clinical care and bringing childhood mental illness out of the shadows into a brighter future. Boston Children's has provided training in child and adolescent psychiatry, clinical child psychology, and psychiatric social work as well as medical students knowing full well the BH clinician workforce shortage crisis.

It is in this context that the proposed project and investment will help Boston Children's grow its impact and reach to even more families and more patients and, in doing so, make a true difference in the health and well-being of children throughout Massachusetts and beyond. This project will ensure that patients and families have access to a full range of high quality, integrated pediatric behavioral health care services in convenient, lower-cost settings as well as meet the needs of surrounding underserved communities.

I have seen Boston Children's investments in the behavioral health of children, families and communities making a difference. I am fully confident that Boston Children's proposal will have an even more long-lasting impact and benefit future generations of children and their families for many years.

Thank you for accepting this letter of support.

Sincerely,

A handwritten signature in black ink, appearing to read "D. DeMaso MD". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

David R. DeMaso, MD

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

I am writing to support Boston Children's Hospital's proposal to modernize its existing facilities in Waltham and Weymouth and build an ambulatory surgical center in Needham. I believe this project will greatly benefit children, families, and communities across our state and improve access for patients seeking lifesaving or life-changing care.

I am Surgeon-in-Chief of Boston Children's Hospital. Born, raised and educated in Chicago and trained in Surgery in Philadelphia, I came to Boston in 1992 for the opportunity to get the best training in the world for the surgical care of children. Despite many opportunities to lead elsewhere, I have remained at Boston Children's for three decades because of its unique status. Like all Children's Hospitals, Boston Children's provides care to the children of Boston and the surrounding region, a laudable mission in and of itself. Every major city is proud of and supports its Children's Hospital. But Boston Children's is the finest such institution in the world, both in care quality and training. Thus, we have the opportunity to innovate and advance our many pediatric fields of specialty, benefitting children around the world, while at the same time making the best possible care available to our own families here in Boston and the region.

I take great pride in the fact that I personally and our faculty and staff more broadly care on a daily basis for patients from around the globe interspersed with the children of our neighbors. Boston Children's is a destination hospital for those patients from around the nation and the world with the most challenging of conditions. We provide hope and solutions when others cannot. I often relate to local friends and patient families how fortunate we are to have access in our own backyard to the world-class specialists and expertise that others can only access with an airplane.

As Surgeon-in-Chief, I am responsible for the coordination of services across our surgical subspecialties. I know how much planning has gone into this proposal and the efforts that have been made by many of our surgical leaders to collaborate on the most cost-effective approach for delivering the highest quality care to our patients. We seek to avoid any duplication of services and consolidate surgical cases whenever possible.

Our facility in the Longwood Medical Area is resource intense, landlocked and difficult for many to access with ease. Traffic and parking alone are a significant dissatisfier and barrier to many families. All gladly endure the challenges in coming to Longwood Avenue when their child is seriously ill requiring complex procedures or critical care. But for less complex or repeated services, it is a significant burden for families to come to Longwood. Furthermore, there are cost and operational inefficiencies inherent in intermixing complex and less resource intense care. We can best serve our local families by providing efficient, family-friendly, easily accessible care near the communities in which they live. With regard to operative procedures in particular, it is far preferable for us to provide interventions for low-risk and/or low-complexity patients needing predictable care in satellite facilities specifically designed and run for this purpose. This would optimize our ability to perform the more challenging, high-risk, and less

predictable procedures in our main hospital facility. Of course, critically ill and medically complex children would also require care in Longwood, even when they are undergoing more straightforward procedures.

The proposed project and investment will help Boston Children's grow this impact and reach even more families and more patients, clearly demonstrating the hospital's commitment to the health and well-being of children throughout Massachusetts. This project will ensure that patients and families have access to a full range of high quality, integrated pediatric care services in convenient, lower-cost settings. In addition, they will meet the needs of surrounding underserved communities.

I am confident Boston Children's growing investments in children, families and communities will have a long-lasting impact and benefit future generations of children for many years.

Thank you for accepting this letter of support.

Sincerely,

Steven J. Fishman, MD
Surgeon-in-Chief
Chief of Surgery

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

My name is Dr. Sarah Fleet. I am a pediatric gastroenterologist at Boston Children's Hospital and the director of the Growth and Nutrition Program. I am writing with unwavering and enthusiastic support of the proposed Boston Children's project.

Our Growth and Nutrition Program was established in 1984, with support from the Bureau of Family Health and Nutrition at the Department of Public Health, the same branch that stewards the Special Supplemental Nutrition Program of Women, Infants and Children or "WIC" program. We care for children with malnutrition, poor growth and feeding difficulties and are currently comprised of five gastroenterologists, two nurse practitioners, five dietitians, four feeding therapists, a visiting nurse, a social worker, and two feeding psychologists. We use a biopsychosocial model to promote improved feeding and swallowing, reduction of oral aversion, restoration of nutrition, relief of anxiety, and appropriate family functioning around feeding and mealtimes.

While we are very successful in treating our patients, our waitlist continues to grow and is upwards of 4-6 months. For an infant or toddler with malnutrition or poor weight gain, this lengthy wait can have a significant impact on their future potential. It has been well documented that poor nutrition in the first 1,000 days of life (from conception to age 2) can cause irreversible damage to a child's developing brain, affecting her ability perform well in school and her future earning potential, thus making it harder for a child and family unit to rise out of poverty. It can also predispose these children for poor health outcomes including obesity, diabetes, and other chronic diseases.¹⁻³ Our program takes particular pride in our psychology and social work services that, when paired with excellent medical care, help to provide social supports and frameworks to families in need. This combination of services, when accessed in a timely manner, can avoid hospitalization and feeding tube placement for a child.

The Needham location is proposed to be the new state-of-the-art home for the Growth and Nutrition Program, allowing us to provide even better and more accessible care related to feeding and nutrition upon its opening. It will allow us to care for more patients, reduce our wait list times, and reach a geographic area we have so far been less able to serve. The new facility will be built with our patient population in mind, and help us to further revolutionize the care of children with malnutrition.

Thank you for accepting this letter.

Sarah Fleet, MD
Director, Growth and Nutrition Program
Program Director, Advanced Nutrition Fellowship
Director of Medical Education, Center for Nutrition
Pediatric Gastroenterology, Hepatology & Nutrition
Boston Children's Hospital

1. <https://thousanddays.org/the-issues/>. Accessed 12/3/2021.
2. Black, R. E., et al. Maternal and Child Undernutrition Study Group. (2008). Maternal and child undernutrition: global and regional exposures and health consequences. *The lancet*, 371(9608), 243-260
3. Black, R. E., et al. Maternal and Child Nutrition Study Group. (2013). Maternal and child undernutrition and overweight in low-income and middle-income countries. *The lancet*, 382(9890), 427-451

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

My name is Jonathan Greenwood and I have been at Boston Children's Hospital for nine years. I oversee Physical Therapy and Occupational Therapy (PTOT) Services, which employ over 80 people, all with special training in serving the unique needs of pediatric patients. We offer both inpatient and outpatient rehabilitation services to children with orthopedic, neurologic, developmental, vestibular, acute and chronic conditions which impact their function.

I am excited to express my full support for Boston Children's to implement outpatient PTOT programs into the surrounding communities in Massachusetts.

PTOT Services works with patients from birth through young adulthood to improve their ability to function and participate in age-appropriate activities. We provide more than 45,000 visits per year to children in our communities. More than half of those visits represent care delivery for children already admitted to the hospital who are undergoing surgical interventions, oncology treatment, and cardiac procedures, and who further require physical therapy and occupational therapy in order to return home safely. Other visits can include time sensitive or unique needs, for example children with limited function are able to obtain specialty adaptive equipment such as wheelchairs to access their homes, schools and communities. Furthermore, visits may involve care delivered the same day the child arrived to see another specialty provider. In these instances, it was determined unsafe for that child to go home prior to seeing PT or OT for the following: evaluation and treatment on the safe use of crutches; receiving a custom fabricated splint from OT, education and training on safe caregiver transfers; or support for the family as they bring their injured child home.

We appreciate the complexity of care needed for our patients and families and we strive to continually deliver that care alongside our partners in healthcare. As a result of the COVID-19 pandemic, providing the highest level of care now also includes the ability to deliver telehealth to our patients and families. Adjusting to an increased focus on telehealth visits has improved continuity of care to an even higher standard and allowed caregivers to avoid countless trips and added travel time to see specialty providers. Our department has embraced a hybrid model of in-person and virtual care customized to each patient's needs for optimal outcomes.

The proposed expansion of PTOT Services into our satellites will provide physical therapy service for ambulatory patients, including evaluation and treatment for children who have experienced disabling diseases, congenital conditions, traumatic injuries and a host of other conditions that affect a child's ability to complete daily tasks. The physical therapy services provided improve movement, range of motion, strength, muscle tone, coordination, balance, gait and functional ability with the goal of maximizing each patient's function and independence in all areas of their life, including at home, in school, and in their community. The physical therapy team works closely with physicians, nurses, patient care coordinators and others within and outside of the Boston Children's Hospital system to achieve this goal. The occupational therapy services provided are aimed at helping the patients to maximize

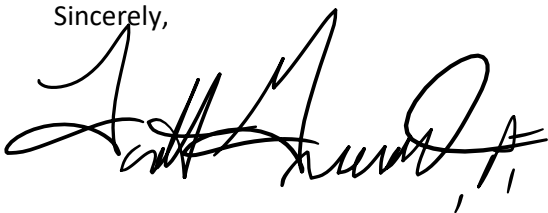
functional independence and participation in all occupations, across several environments (e.g. home, work, school, community). Occupational therapists work with the patient and caregivers to help regain and/or develop the skills necessary for the highest level of functions and independence.

Our outpatient PTOT service provides a range of services to a diverse patient population that is local, national and international for conditions ranging from common conditions (sports injuries, surgeries, pain management) to rare and complex conditions where Boston Children's may be one of the only medical facilities in the world treating these conditions. PTOT provides outpatient care to patients ranging in age from newborns to young adults. By bringing these services into the communities, Boston Children's will provide a comprehensive therapy space for the joint PTOT services to allow for a better, collaborative patient care experience delivered in the patient's local community.

Providing PTOT services to a wide range of children, especially for those with chronic or congenital conditions, can maximize potential over the course of a lifetime. The Physical Therapy staff works with a variety of diagnoses including musculoskeletal, neurologic and orthopedic disorders; sports injury management; gait disorders; balance and coordination deficits; movement disorders; congenital conditions; infant torticollis and plagiocephaly; delayed gross motor development; posture deviations, and equipment and seating needs. The Occupational Therapy staff is clinically trained to provide comprehensive evaluation and individualized treatments to patients with a variety of pediatric medical conditions including orthopedic and musculoskeletal disorders, neurological disorders, and learning difficulties, such as motor, sensory processing and life skills.

Improving access to services within the community improves the overall health and wellbeing of the community and reduces the time spent away from work and school when receiving recurring care from PTOT Services. The comprehensive training and specialization of our therapy team will be extended to our satellites, where we will be able to deliver excellent care to our patients in more convenient locations. We hope to continue to grow and support patients and families close to their homes.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jonathan Greenwood, PT, MS, DPT, CEIS, PCS, FACHE'. The signature is fluid and cursive, with a large initial 'J' and 'G'.

Jonathan Greenwood, PT, MS, DPT, CEIS, PCS, FACHE

Senior Director

Physical Therapy, Occupational Therapy and Rehabilitation Services

Boston Children's Hospital
300 Longwood Avenue - Farley 6 (BCH 3031)
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Boston Children's Hospital

Where the world comes for answers



**HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL**

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

As the Senior Vice President for Real Estate and Planning, I am intensely involved with every aspect of developing Boston Children's Hospital's ambulatory locations, from site selection to construction. I have been at Boston Children's for nearly five years and have the privilege and responsibility of ensuring all of our current and future facilities are designed to deliver the highest level of care, services and programs to meet the needs of our patients and families from across Massachusetts.

Throughout our thorough and collaborative multi-year ambulatory planning process, we have carefully considered many options for the site of a new facility, just as we have done for all our other satellite locations. In tandem with the renovation and renewal of our existing Waltham satellite and Weymouth physician practices, the proposed new facility in Needham was specifically chosen to meet the needs of our unique patient population. It's an exciting challenge to collaborate with internal stakeholders from many departments and programs and external stakeholders, including planners and architects, to create an ambulatory strategy that is comprehensive, cohesive, accessible, brings together the appropriate programs, and is energy efficient and environmentally responsible.

It is imperative that access and patient care are at the foundation of how we review different locations and structure our programs within our facilities. Patients and families need to have an experience with the physical facility that matches the world-class care they receive from us. This begins when they arrive on site and carries through every aspect of their appointments, up to and including their departure. Every family's journey at a healthcare facility needs to be as short and easy to navigate as possible; this is especially important for pediatric patients, whose needs can be more challenging than adult patients. Affordable parking within a very short distance of the entrance is of utmost importance to pediatric patients. Since most of our patients arrive with multiple rolling supports – such as wheelchairs and strollers – and other siblings in tow, having to walk a long way to get to the lobby is simply not feasible, particularly in inclement weather. Selecting a site close to the highway that has ample parking space was a priority for us to support our patient population.

The selection of our satellite sites also attempts to appropriately balance patient and community needs in thoughtful ways, identifying locations that are appropriately distanced from one another. With accessibility at the forefront of our review, including the importance of transportation for families to these satellite locations, we looked at locations that could reach children and families in surrounding communities, especially underserved areas with lower income families and ensure our satellites are as accessible as possible from all directions. The proposed project will expand our ability to reach more children and will assure we are able to offer comprehensive services for our patients now and in the future.



Our proposed project in Waltham, Weymouth and Needham is designed to fit together as part of a comprehensive ambulatory strategy. Much deliberation went into selecting these three locations and the programs and services that are offered at each site to ensure they could address patient and family needs as effectively as possible, minimizing any duplication of services.

In Waltham, we engaged with town officials and neighbors over the course of the past several years and, based on their feedback, we determined it was best to renovate and modernize our existing facility. This includes updating the Sanderson Building, which is currently unusable, and modernizing and expanding spaces to fit the needs of the clinical programs and physician affiliated practices already housed in Waltham. Undertaking these renovations also provides an opportunity to improve the infrastructure for the facility and focus on sustainability and energy efficiency - for instance, we have begun a multi-year project to redo the façade, which will contribute to increased energy efficiency. Additionally, one of the tenants in the building did not renew their lease, which freed up space for us to create a much-needed inpatient psychiatry unit and brand new infusion center.

One priority for our ambulatory planning was the addition of operating rooms (ORs) and surgical subspecialties. We assessed sites in Framingham, Natick, Weston and Needham as part of our extensive planning process. Ultimately, we selected the location at 380 1st Avenue in Needham for our new comprehensive ambulatory surgical center, which includes all wrap around services (e.g., lab, radiology, PT and OT), based on its ease of access to Route 128 and other major highways. This location also provides an opportunity to reach children in many underserved surrounding communities. We have worked closely with Needham town officials over many months and have received zoning approval for this location.

Since 2011, Boston Children's Hospital's affiliated physician practices have been providing patients and families the highest quality care for medical, surgical and neurology services in the Stetson Building in Weymouth. To address an expiring lease at the Stetson Building in June of 2024, we reviewed new spaces in Braintree, Quincy and Weymouth that will provide access to integrated care in the most convenient location for patients and families and enable us to provide certain hospital ancillary services, benefitting patients and families on the South Shore and accommodating our growing affiliated physician practices. The Stetson Building's wood structure limits what can be offered in this facility and what could be licensed. Our proposed site on Libbey Parkway, which is less than a mile from our existing location, is owned by a developer who would build the facility. This location would provide more space and allow us to move existing practices and add hospital support services, including laboratory, radiology, and PT and OT.

As a forward-thinking leader in pediatric care, Boston Children's is conscious of other societal imperatives, such as sustainable building design and diversity of the workforce specifically related to construction and well-paying union jobs. We target LEED silver certification for all of our construction projects, and prioritize community partnerships when hiring for construction jobs – we stand by our commitment of encouraging our construction partners to prioritize hiring from within the community, with an emphasis on employment opportunities for people of color, women and veterans. These priorities are incorporated into our satellite planning and will be addressed as part of the projects in each location.

Boston Children's Hospital is committed to improving the health and well-being of children in communities throughout Massachusetts. Our investment in children and families in Waltham, Weymouth, Needham, and



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surrounding communities is part of our continuing efforts to ensure that patients and families have access to a full range of integrated pediatric care services in a convenient, lower-cost setting as close to home as possible. Our carefully planned ambulatory strategy is focused on meeting the unique needs of children and improving their health and well-being both now and in the future.

Sincerely,

Lisa Hogarty
Senior Vice President, Real Estate Planning and Development
Boston Children's Hospital

DAVID G HUNTER, MD, PhD

Ophthalmologist-in-Chief

Richard M. Robb Chair of Ophthalmology

December 16, 2021

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

Dear Determination of Need Program:

As Chief of the Department of Ophthalmology at Boston Children's Hospital, I write to provide my wholehearted support for the proposal to modernize its existing facilities in Waltham and Weymouth and build an ambulatory surgical center in Needham.

The Ophthalmology Department, with 40+ clinicians, is one of the busiest departments in Boston Children's, the top-rated pediatric hospital in the country. We leverage our 12+ physician practice locations in three states (as well as virtual visits) to develop and enhance referrals across New England and meet the increasing medical demand. We are continually adding subspecialty doctors to provide families access to world-leading experts in extremely rare (and often vision- or even life-threatening) conditions, including pediatric glaucoma, pediatric retinal surgery, and childhood eye tumors. Our patients are evaluated with the latest in a growing number of sophisticated diagnostic ophthalmic devices and tests. This depth and breadth of experience attracts the most medically complex patients, not only locally but also nationally and internationally.

At the same time, the department is severely constrained by lack of clinical space on our main campus, in Boston's Longwood Medical Area. We have juggled increases in staff as well as patients as effectively as possible within those constraints; still, families must wait for as long as eight months to obtain appointments for certain conditions and receive necessary tests. There would be tremendous advantages to having more alternative satellite sites and more space at these sites to offer our families. With more space for each specialist per session, visits can be more efficient, thereby further improving access. With additional clinical sites, patient/family travel time will be reduced, lessening the demands on stressed parents who sometimes have to return for weekly examinations over extended periods of time if their child has a certain vision-threatening condition.

Under the proposed project, there will be both hospital and physician offices located at the three locations. The physician office component will include the following:

- **Weymouth:** The Ophthalmology Department hopes to expand in Weymouth, from

three eye lanes to six eye lanes, along with space for specialized testing. (An eye lane is an exam room outfitted for ophthalmic and vision testing, used for one patient/family at a time.)

- **Needham:** The Ophthalmology Department proposes to create a large clinical satellite in Needham, including 17 eye lanes and other rooms for testing and simple, outpatient procedures. Our associated optical shop will also relocate to Needham (from Waltham).
- **Waltham:** If the Needham expansion proceeds as planned, the Ophthalmology Department intends to reduce its offices and clinical space from eight eye lanes to four in order to maintain a presence (and access for our existing patients) in Waltham.

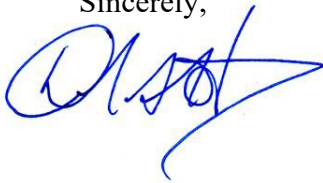
This proposed project will benefit our practice and patients by:

- Increasing overall ophthalmology clinical space and therefore capacity to keep up with current and future patient demand and advances in diagnostic equipment;
- Broadening access for patient families, giving them suburban options (easier to reach from points west, north, and south of the city as well as ample parking);
- Decreasing waiting times for appointments as well as time spent per appointment;
- Increasing access for our urban patients as well as those traveling nationally or internationally for care by allowing suburban patients to remain closer to their homes;
- Being equally accessible for the underserved cities and towns outside of Boston; and
- Increasing our catchment area for the kind of complex patient that Boston Children's is known to attract.

In conclusion, it is in the interest of providing appropriate patient access to our services and enhancing the patient experience overall that I support the proposed project.

Thank you for accepting this letter of support.

Sincerely,



David Hunter, MD, PhD
Ophthalmologist-in-Chief; Richard Robb Chair in Ophthalmology
Professor and Vice Chair of Ophthalmology, Harvard Medical School

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

In our capacity as the Co-Medical Directors for Boston Children's Hospital's Sleep Center, we are writing to share how our program, which will be expanded at Boston Children's Waltham under the pending DON proposal, benefits children through the services it provides in a conveniently situated satellite facility. We strongly support the hospital's proposed project because we have seen firsthand how our sleep program provides crucial access to an already large, and growing, number of children from communities throughout Massachusetts.

Sleep disorders are common in children and the most common conditions are obstructive sleep apnea, childhood insomnia, excessive daytime sleepiness, restless sleep disorder, and narcolepsy. Sleep apnea is estimated to affect 3-5% of children, with higher prevalence in racial minorities. Although the American Academy of Pediatrics recommends an in lab overnight sleep study as the "gold standard" for the diagnosis of obstructive sleep apnea in children, it is estimated that only about 10% of children with clinical symptoms undergo the optimal diagnostic testing. Expansion of our bed capacity to conduct these tests will significantly improve the quality of and access to care for children in the Commonwealth.

Sleep apnea is seen in neonates and can present with apnea and desaturations; these infants are at high risk for sudden infant death. In addition, sleep disorders are commonly seen in children with complex disorders such as asthma, cystic fibrosis, children with tracheostomies and congenital heart disease. It is also commonly seen in children with autism and ADHD. Underdiagnosis of sleep disorders in children impacts their quality of life and long-term neurocognitive outcomes.

As the oldest pediatric sleep program in the country and the only freestanding pediatric sleep program in Massachusetts, we have seen a growing need for our clinical services, even as sleep disorders remain underdiagnosed in the community. On top of the causes of sleep disorders that we have seen historically, throughout the COVID pandemic, cases of insomnia and other sleep disorders have skyrocketed among children, emphasizing the need for our services to be readily available. In recent years, there has been increased recognition of sleep as a co-morbid condition with asthma and obesity – two of the most significant health issues facing children. Boston Children's is in a unique position to monitor and treat sleep disorders from infancy to young adulthood in patients with complicated medical issues and neurological disorders.

Treatment of sleep disorders in children enables them to achieve better health outcomes over the course of a lifetime. If sleep disorders go untreated, particularly in children who are already dealing with other complex disorders such as asthma, diabetes, and obesity, it greatly compounds the negative impact on their overall health. Our sleep program can improve a child's overall quality of life and support the management other underlying chronic diseases. Simply put, other hospitals can't provide the same services we do.

Our location in Waltham will serve pediatric patients throughout Massachusetts. We conduct more than 2,000 sleep studies and see nearly 5,000 sleep patients annually, including patients referred from places like Boston Children's pulmonary, otolaryngology (ENT), neurology, or Down Syndrome programs. We are the main referral center for pediatric sleep disorders amongst the community pediatricians. With 14 beds and a larger sleep program than our Boston campus, our modern and innovative Sleep Center in Waltham will utilize the latest advanced technology to meet the needs of children and treat them in a timely manner. Typically, patients in our sleep studies are not acutely ill and are stable at home, but many have ongoing health issues such as asthma. We work with patients based on their individual needs to design a sleep study, if needed, and to determine the most appropriate treatment options to address their sleep issues. The wait list for our Boston sleep program was three to four months before the COVID pandemic - waiting this long for an appointment affects health outcomes, especially in developing children. Currently, the wait time has decreased from three and a half months to approximately two and a half months as the result of adding two sleep beds to our Waltham location, and we expect with the addition of more beds this will further decrease. Expanding the clinical services in Waltham ensures that our talented and highly specialized physicians are able to meet the huge patient demand and backlog.

In addition to our direct patient care, we are actively involved in broader prevention strategies, including public education and public policy initiatives. These are intended to both help address individual sleep problems and assure broader public health/child wellness outcomes. We have provided input and recommendations to the Department of Public Health and school districts throughout the state on the issue of school start times, encouraging a later start time for high schools based on the biological development of teenagers. They need to sleep longer and later than the standard school start times; for teenagers, an extra hour of sleep in the morning can help increase attention span, reduce risky decision-making, decrease anxiety and depression, and improve academic performance.

Providing an expanded Sleep Center in the local community also offers significant benefits to the patient and family experience, especially as patients typically have multiple appointments for testing and care. Our location at Boston Children's Waltham will be less noisy and overwhelming than our main campus; it's a quieter and calmer environment, which also makes it more conducive to sleep. Children do not feel like they are in a hospital, and parents have a better experience and less anxiety, which is very important as they are required to stay overnight with children under 18 years old. Tracking and treating sleep disorders often means that patients need to stay with us for several days as part of their plan of care; being able to see them in our Waltham location means they are not occupying a bed in the main hospital in Boston that might be more urgently needed for a critically ill child. At the same time, we will still maintain a Sleep Program in Boston for our most complex patients.

In closing, the improved access to services and programs such as Boston Children's Sleep Center in Waltham is a tremendous benefit to patients and families. Sleep disorders are a healthcare burden to children, families, and society. By addressing patient needs and providing care in local communities, our children will have better healthcare outcomes.

Thank you for accepting this letter of support.

Umakanth Katwa, MD
Judith Owens, MD, MPH
Co-Medical Directors
Sleep Center
Boston Children's Hospital

December 16, 2021

Department of Public Health
Determination of Need Program
250 Washington Street
Boston, MA 02111

Dear Determination of Need Program:

I am writing to you in my role as a pediatrician and Executive Director for Community Health at Boston Children's Hospital to express my support for the hospital's proposed project in Needham, Waltham, and Weymouth. I oversee the Hospital's community mission: improving the health and well-being of children and families in our local community, with a particular emphasis on addressing disparities and promoting health equity. For over 25 years, Boston Children's has carried out our community mission in the City of Boston by establishing community health programs and building community partnerships with the Boston Public Health Commission, Boston Public Schools, community health centers and many other community-based organizations – both large and small. I also serve on the board of the Boston Children's Health Accountable Care Organization (BCH ACO) and have done so since its launch in 2018. BCH ACO is a MassHealth ACO serving 120,000 children across Massachusetts, with a significant emphasis on supporting children and families through coordination of care and initiatives addressing social determinants of health. The proposed project, if approved, would create an opportunity for Boston Children's to bring our energetic and evidence-based approach to community health initiatives to a wider range of communities in the Greater Boston area.

I take great pride in the fact that our approach to population health is informed by research and best practices, as well as by in-depth community needs assessments, which are conducted regularly, and the ongoing advice of a very active and engaged Community Advisory Board and Board of Trustees Sub-Committee. This is true across our direct clinical care operations (including the work of the primary care providers serving patients through the MassHealth ACO) as well as the community based initiatives spearheaded or supported by the hospital's Office of Community Health. Prioritizing community health allows Boston Children's to focus on health and social issues that impact health outcomes in a way that supports identification and mitigation of health disparities for children and families, particularly in underserved populations.

Our goal as we carry out our community mission is to implement programs that have potential to result in long-term systemic change, which ultimately improves health outcomes for all children. Our Community Asthma Initiative, which was established 15 years ago and has resulted in improved asthma management for many patients and families, as well as changes in the way insurers cover asthma, is a powerful example of how successful these programs can be at affecting systemic change.

Boston Children's has brought this thoughtful, data-driven and community-informed approach to bear on community health initiatives that were made possible by our previous Determination of Need Community Health Initiative (CHI) funding from our Hale Clinical Building project and Brookline Place expansion. You can read more about our efforts, which are collectively referred to as the Collaboration for Community Health, at www.Bostonchildrens.org/community. The Collaboration for Community Health has made significant strides in bringing together a wide range of child-serving health and social service organizations to identify ways to enhance their collective impact through increased collaboration.

While our historic focus has been on communities in the City of Boston, it has become clear over the last five years that many of the low and moderate income families that we previously served in Boston, most of whom are families of color, have now moved out of the city. This relocation is, in large part, the result of increased costs of housing: these families can no longer afford to remain in the city. As the cost of living has continued to rise dramatically in recent years, low and moderate income families moved out along Route 9 towards Framingham, down Route 24 to Randolph and Brockton, or south to Quincy. Modernizing our existing facilities in Waltham and Weymouth as well as providing expanded access to pediatric ambulatory care in Needham will directly impact these populations, allowing easier access to health care services while also providing an important opportunity to expand our community health work. We have proposed a CHI process that engages these suburban (yet still underserved) communities and look forward to building new and robust partnerships with community organizations similar to those in Boston.

Given the scope of this project, the community health resources it would generate present an opportunity to have a significant impact on the health and well-being of some of the most vulnerable children and families in the Greater Boston area. For this reason, I strongly urge the Department of Public Health to approve Boston Children's Determination of Need application.

Sincerely,

Shari Nethersole, M.D.
Executive Director for Community Health
Boston Children's Hospital

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

As Chief of the Department of Dentistry at Boston Children's Hospital, I am writing to support Boston Children's Hospital's proposal to modernize its existing facilities in Waltham and Weymouth and build an ambulatory surgical center in Needham. I believe this project will greatly benefit children, families, and communities across Massachusetts and improve access for patients seeking lifesaving or life-changing care.

The Boston Children's Hospital Dental Department is a safety net for children residing in the Commonwealth of Massachusetts. Our patient population is very diverse in terms of race, ethnicity, socioeconomic status and medical complexity. Seventy percent of our dental patients are covered by MassHealth insurance. More than fifty percent of our patients have medically complexities and/or developmental disabilities and receive their medical care at Boston Children's Hospital.

In 2019, the Dental Department saw 28,500 out-patient visits and provided dental treatment to over 1,000 patients in the operating room (OR) under general anesthesia. Half of the OR procedures were completed at the Lexington outpatient surgical facilities. 70-80% of our patients who received OR treatment reside outside of Boston's urban core.

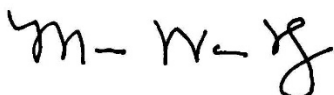
Over the years, many families have shared with me their deep appreciation for the care they receive at Boston Children's. Many patients are only able to receive their medical and dental care at Boston Children's Hospital. At the same time, many families residing outside of Boston have asked about possible access to Boston Children's Hospital closer to home instead of having to travel into Boston and the Longwood Medical Area.

I therefore believe that the proposed project and investment will help to provide access to more families and more patients, clearly demonstrating the hospital's commitment to the health and well-being of children throughout Massachusetts. The project will ensure that patients and families have access to a full range of high quality, integrated pediatric care services in convenient, lower-cost settings. In addition, it will meet the needs of surrounding underserved communities.

I am confident Boston Children's growing investments in children, families and communities will have a long-lasting impact and benefit future generations of children for many years.

Thank you for accepting this letter of support.

Sincerely,

A handwritten signature in black ink, appearing to read "M-N-J". The letters are stylized and connected, with a long horizontal line extending from the end of the "J".

Man Wai Ng, DDS, MPH

Dentist-in-Chief

Boston Children's Hospital

Manwai.ng@childrens.harvard.edu

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

My name is Richard Robertson, MD. I am the chief of Radiology, Emeritus at Boston Children's Hospital, have been a pediatric imager for more than 27 years, and was chief of Radiology for the last 13 years, until September 1, 2021. As a result, I have a deep understanding of what is needed for high quality pediatric imaging and wish to express my strongest support for the proposed Boston Children's facilities project in Waltham, Weymouth, and Needham as it is vitally important to increasing the accessibility to pediatric-focused imaging resources in the state of Massachusetts.

As in adults, imaging is used extensively in children in the diagnosis and management of a myriad of diseases and medical conditions. However, the approach and resources required to effectively and safely image children often differ significantly from those needed for adults.

To better understand Boston Children's approach to imaging, I would like to highlight key differentiators that will be integrated into radiology services in Waltham, Weymouth and Needham, enabling Boston Children's to provide innovative, effective and safe imaging for children throughout the state.

1. **Tightly integrating radiology and clinical care is especially important for children as they require unique care.** Many of the physician practices that will be sited in these locations, such as Orthopedics, Sports Medicine, Neurology and Otolaryngology rely on radiology services. Locating imaging close to the program that requires this service enhances patient care and improves the patient and family experience. It also supports collaboration and communication between radiologists and clinicians.
2. **Innovation in imaging is key to addressing pediatric specific requirements and is a key differentiator of Boston Children's Hospital.** As an example, the simple fact that young children, or those with developmental challenges, may not be able to hold still for an exam is frequently addressed through the use of sedation for the exam. Sedation typically is only provided in a hospital setting and adds significantly to the cost of performing an imaging study. Through innovative solutions, Boston Children's has achieved a national leading rate of sedation of only 15% for MRI's in children which compares favorably to other pediatric hospitals around the country that typically sedate from 30%-45% of children for MRI's. General hospitals that see both children and adults often have much higher sedation rates for MRI than pediatric hospitals. Through the use of specialized imaging approaches, real-time imaging supervision by the radiologist, imaging equipment and imaging protocols tailored to pediatric conditions and personnel experienced in the imaging of children, we are able to image many children without sedation that at other sites would require sedation.

Avoiding sedation improves the safety of the exam, decreases the cost to payers by two-thirds and allows Boston Children's to image more children in satellite locations, improving accessibility to these services. On-site access to child-life specialists and supports in our satellite

locations for children with behavioral challenges improves our ability to safely image children that would be more difficult to accommodate in settings that lack these resources, and alleviates the burden of needing to see all of these patients on the Boston campus.

3. **Boston Children's is also a recognized leader in radiation dose optimization** for studies such as diagnostic radiography, CT, and fluoroscopy that rely on the use of ionizing radiation for the exam. At Boston Children's a team of five medical physicists work with our radiologists and technologists to ensure that the radiation dose is optimized for the size of the child and the indication for exam. This approach is especially important for children with complex or chronic conditions who may require serial imaging over time.

The imaging equipment will be the same in the satellites proposed and we use the same imaging protocols across sites, so imaging at our satellites benefits the same as in Boston from our approach. The same physicists also do the acceptance testing of the equipment in the satellites and help to optimize image quality on individual units as needed.

4. **An important consideration in ensuring the quality of all imaging is access to information in the medical record and a continuous, consistent imaging record.** Information in the medical record is essential to supplementing the request for an exam to ensure that the study meets the clinical need. Understanding the patient's symptoms, clinical concerns to be addressed and treatment history influence how an exam is protocolled, performed and interpreted. An intact and consistent imaging record is also important for children undergoing serial exams as a comparison to prior exams and is critical to understanding the effects of treatment or the progression of disease over time.

Our patients' imaging needs are best met when the clinical and imaging records are complete and readily available to the radiologist, which is supported by a shared medical records system across all Boston Children's sites. When a child is imaged at any Boston Children's location, that information is seamlessly available to all providers involved in their care. This same level of care does not occur when the child is imaged in another hospital system or free-standing imaging center. More than 90% of patients imaged at Boston Children's are being evaluated by Boston Children's specialists or primary care physicians, which reduces the possibility of errors and ensures those patients will receive the best possible continuity of care. The more availability of imaging in Boston Children's satellites, the more children will be able to have their follow up care within the Boston Children's system.

5. **Subspecialization within pediatric imaging is unique to Boston Children's radiology services,** not only within Massachusetts, but within the country as a whole. Boston Children's has more than 40 diagnostic and interventional pediatric imagers and proceduralists. Each of these individuals has additional focused areas of interest that are closely aligned with the clinical services that they support (for example pediatric urology or pediatric neuroimaging). Subspecialty exam supervision and interpretation improves the alignment between the imaging and clinical specialties leading to a greater likelihood that the imaging addresses the specific clinical concern (for example pediatric urology or pediatric neuroimaging). The approach of utilizing highly subspecialized pediatric imagers has the potential to decrease the time to diagnosis, avoid additional testing and associated costs and improve outcomes.

Increasing access to radiology services in satellite locations will support the critically important work being undertaken in these subspecialties. Since 2007, Boston Children's has used a distributed system across the enterprise to have the imaging supervised and interpreted by the most appropriate radiologist. Most imaging sites have the on-site radiologist supervise and interpret the exams. The on-site radiologist may not be the person with the most expertise in a given condition. The ability to transfer images to the subspecialty radiologist is especially important. However, within Massachusetts, even in those systems where imaging can be sent to another radiologist more familiar with pediatric conditions, it is unlikely that the health care system will have the breadth of pediatric subspecialty imaging expertise that is available at Boston Children's.

The proposed Boston Children's project is essential to expanding our capacity to deliver the quality of imaging and care that makes Boston Children's a premier pediatric health care provider.

I thank you for your consideration and urge you to approve the Boston Children's application.

Sincerely,

Richard Robertson, MD
Boston Children's Radiologist-in-Chief, Emeritus



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TEACHING HOSPITAL**

Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

As the Executive Vice President, Enterprise Services and System Chief Financial Officer, I lead Boston Children's financial, technology, real estate, network development and strategy teams. The work of these teams has a profound impact on how and where the hospital cares for children throughout Massachusetts.

I am writing to support Boston Children's Hospital's proposal to modernize its existing facilities in Waltham and Weymouth and build an ambulatory surgical center in Needham. This project and investment clearly demonstrate the hospital's commitment to the health and well-being of children throughout Massachusetts.

Boston Children's has engaged in thoughtful and comprehensive planning for several years to ensure that patients and families have access to a full range of high quality, integrated pediatric care services in convenient, lower-cost settings as close to home as possible. Shifting care from our main campus to satellites is an important part of our ambulatory strategy. It will contribute to controlling the cost of healthcare in Massachusetts and ensure the Boston campus can continue to meet the needs of the most complex patients.

Pediatric healthcare is a complicated environment with many factors and cost constraints that we must pay careful attention to as we do what's best for children. We will continue to care for all children in Massachusetts and will maintain our ongoing and unwavering commitment as an essential provider of Medicaid; Boston Children's takes its obligation to care for all children throughout Massachusetts very seriously. Further, we remain committed to supporting national and international growth, and understand that we must be aligned to cost containment guidelines within Massachusetts.

In some instances, children are being served by adult providers. We believe this project provides an opportunity to ensure children have access to pediatric providers and programs that are designed to meet their unique needs. For example, Boston Children's has experienced more demand for our surgical care for GI patients. This leads to capacity issues, which in turn leads to longer wait times, resulting in patients not getting the timely care they need or going somewhere else for their care. By providing surgical care in an ambulatory facility, we can meet demand when and where it is most critically needed.

I am confident this proposed project and investment, which are part of our 10-year strategic plan, will have a long-lasting impact and meet the unique needs of children for generations to come.



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Thank you for accepting this letter of support for Boston Children's Hospital and its proposal to further invest in children, families and communities. We look forward to the opportunity to continue to provide patients and families with access to our world-class care.

Sincerely,

Doug Vanderslice

Executive Vice President, Enterprise Services and System Chief Financial Officer



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Determination of Need Program
MA Department of Public Health
250 Washington St.
Boston, MA 02108

December 16, 2021

Dear Determination of Need Program,

As the Executive Vice President of Patient Care Operations and System Chief Nursing Officer, I have the privilege of overseeing nursing and the coordination of pediatric-focused clinical, patient care, and family services. Since I first started in the nursing profession, I have seen the ongoing evolution of family-centered care and the growing benefits of team-based care for pediatric patients. Throughout my tenure at Boston Children's, I have been fortunate to work with exceptional nurses and professionals who are always striving to advance our ability to meet the complex physical and emotional health needs of children and adolescents. I'd like to address what it means to offer child and family-centered care, and how our facilities are consciously designed to support that care. This approach to care would continue with the proposed project in Waltham, Weymouth and Needham, which I strongly support.

Children and Adolescents Require Access to Specialized Preventative, Primary Care and Specialty Pediatric Services.

Massachusetts has a long-standing commitment to advance maternal-child health, including support of a broad range of preventative and primary care services strengthened through federal programs administered via the Massachusetts Department of Health. This commitment directs efforts to reduce infant mortality, provide preventative and primary care services for children and adolescents and to support comprehensive care for children and adolescents with special care needs. Massachusetts families need geographic access to these essential pediatric services given the risk for rapid deterioration in vulnerable infants, children and adolescents.

Access to child and adolescent specialty care also matters greatly for a wide spectrum of pediatric conditions. Timely and accurate diagnostic services not only provide lifesaving interventions but provides true value for the Commonwealth of Massachusetts and their residents by mitigating the potential for the costly and sometimes tragic consequences associated with delayed or missed diagnoses. Procedures considered standard for adults often require very different processes for children. As an example, pediatric phlebotomy requires highly specialized skills. While both children and adolescents benefit greatly when phlebotomy is performed by a technically proficient practitioner, children are all too frequently traumatized resulting in lasting fears and anxiety that may deter them from healthy self-care practices as they progress to adulthood. The processes, and support infrastructure required to deliver care to infants, pre-school, school age children and adolescents is distinct. Many details must be integrated to tailor developmentally-focused, family-centric and equitable child health services – age, developmental level, past health history, family context and social determinants of health. Treatment settings and facilities need to be soothing, engaging and designed from the perspective of children and families in the communities we serve.



Boston Children's care delivery model is intentionally inclusive. Our care processes are co-created with families. Parents are encouraged to contribute as active collaborators with Boston Children's health care team members. Children and adolescents are likewise supported to actively participate in the management of their health and well-being commensurate with their developmental readiness. It's critical to create an environment of care and care delivery processes that are unified and consider the child in the context of a family and community systems. Our care processes incorporate not only immediate household members, but further consider the social network extending from family to schools, churches, and into the community. A surprisingly large subset of children and families will at some point need to seek medical and surgical care for chronic health conditions of childhood such as childhood asthma and pediatric orthopedic services. Other families are plunged into profound crises and challenges that arise with a new, life-altering and in some cases life-threatening childhood illness or trauma event such as childhood cancer, type I diabetes, seizure disorders, or organ failures. While never routine, Boston Children's recognizes the impact soothing environments and private spaces provide and have long committed to child and family-centered facility designs to best serve the broad range of needs of the children in the Commonwealth. Parents are essential partners with the care team in the delivery of safe, equitable, and high value health care.

Let me give you a representative example that has become a routine, standard of care at Boston Children's – yet one rare in healthcare beyond our walls within Massachusetts nor nationally. A 10-year-old child with autism has an appointment scheduled with a Boston Children's provider at one of our satellite facilities. This patient is known to have increased anxiety with these visits and often times either refuses to travel with their parent or acts aggressively toward parents and health care team members upon arrival. Needed healthcare services are often delayed or lead to missed care. This disruptive behavior is often more intense when experiencing increased stimuli entering an unfamiliar or unpredictable setting and can be upsetting or worse threatening for other children and families in the vicinity to experience. It also adds another layer of complexity for the parents, who are doing their best to support their child's complex needs in their daily lives. To reduce stress for this child and the parent who is accompanying her, a "storybook" of photos and captions to visualize the entire journey – from the parking garage all the way to the outpatient office or specialty clinic location – is created jointly by the family and key care members in advance of the appointment to help familiarize children and teens with the environment they will soon enter. The appointment itself is often scheduled at the start or end of the day to provide for a less stimulating environment. After reviewing the exact images of the facility and detailed instructions from the "storybook" ahead of time, both the child and parent benefits from feeling they are now receiving care in a familiar and welcoming physical space with support for a moment in time that might otherwise present many challenges. Instead of these families deferring care for the growing volume of children and adolescents with neurodevelopmental challenges in Massachusetts, Boston Children's has integrated care processes and facilities planning to make sure these and all children have meaningful access to high quality medical and surgical care.

Boston Children's has formally engaged families for more than half a century via creation of formal Patient Family Advisory Councils (PFAC). Child, adolescent and family voices change and strengthen what we do. Parents participate in a wide-range of organization-wide committees to contribute to the evolution of care delivery processes. Examples include contributions to the Patient Access Committee to design scheduling and registration practices in an inclusive way to bridge the needs and preferences of families who may or may not have ready access to digital resources. These processes are further shaped by parents through their contributions to the organization's Digital Strategy and Innovation Committee. A member of the PFAC meets with all newly hired hospital employees during their first week of orientation to communicate the role of parents as full partners and central to the design of the care delivery process and facilities themselves at Boston Children's. Parents also serve on Boston Children's Patient Care Assessment Committee, a Massachusetts specific quality and safety



board committee – bringing their perspectives and stressing that accessible, high-quality, specialty pediatric health care services provided within inviting child-centric settings be accessible within their communities or nearby.

The way we deliver care is intentionally intimate and it is built upon a foundation of trust and relationships. This unwavering focus will continue to be central to how Boston Children's cares for patients and families. The care we deliver and the specialty services we provide helps to set a child on a positive trajectory as they manage healthcare over their lifetime, over time transitioning from adolescence to adulthood as advocates for their own healthcare. Children and teens who learn from an early age that healthcare appointments are a positive experience for their whole family are more likely to prioritize effective self-care and preventative health services as adults. We incorporate tools and resources for children to receive needed care and to take responsibility for their own well-being as they move from adolescence to adulthood.

At Boston Children's we appreciate that what happens to a child also deeply impacts the whole family unit – we cannot overlook the needs of the entire family and community system that provides critical support to each child. Our Boston Children's teams support both family presence and participation in the care process, providing emotional support through their physical presence with their children. Furthermore, the family-centered care model includes support for all family members, such as siblings who often attend visits and are impacted themselves by their brother or sister's care needs.

A crucial piece of family-centered care is ensuring that all children and families receiving healthcare have access to culturally competent care, including a diverse clinical staff and interpreter services with proficiency in medical terminology. Boston Children's is steadfast in our commitment to further strengthen health equity to reduce existing barriers to access. To that end, the hospital is making progress, through workforce development and mentorship innovations to hire and support nurses and other health care team minorities, specifically Hispanic and Black populations.

As our proposed project in Waltham and Needham will provide surgical services, we will be able to care for patients closer to home, providing increased access in more convenient locations. We will also be able to continue our pioneering work in performing procedures such as imaging studies without general anesthesia, a true innovation in pediatric care made possible through the work of physicians, nurses, child life therapists and radiology technicians who skillfully engage children during radiologic procedures and enable the performance of exams without anesthesia. Furthermore, we excel at pediatric phlebotomy, which will be located at all three sites. Children often have tremendous and lasting fears related to blood collection. Having staff who are highly skilled and can turn this experience into a forgettable moment is a huge benefit.

The implementation of seemingly small, but intentional elements in the design of care add up to exceptional health care experiences for children and families. Whether it's letting kids pick their cast colors for their broken bones, which provides a sense of ownership and participation in care, or ensuring parents are with their child as they awaken from anesthesia, these child and family-centered practices differentiate us from our peers. Our research and science have established Boston Children's as the leading pediatric health care delivery organization in Massachusetts and the world. Our family-centered care model is equally distinct and a critical asset to advance health and healthcare in the Commonwealth.



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Please accept this testimony in strong support of Boston Children's Hospital's proposed project in Waltham, Weymouth and Needham. It is clear to me that the pediatric patients accessing these locations will truly benefit from the critical services delivered by our physicians, clinicians and other team members in the context of a pediatric system that is uniquely designed for and with the very families who require specialized services. Providing the family-centered care that we have become known for will be part of the fabric of this project and will continue to evolve over time to benefit children, adolescents and the citizens of the Commonwealth of Massachusetts today and well into the future.

Sincerely,

Laura J. Wood, DNP, RN, NEA-BC, FAAN

Executive Vice President, Patient Care Operations & System Chief Nursing Officer

Boston Children's Hospital DON Testimony – December 9, 2021

Hello, my name is William Lorenzen. I live on 5 Cleveland Road here in Waltham. I have lived in Waltham all my life. My parents moved here in 1952 where they raised three children. I have 2 boys now adults with their own families one of which still lives in Waltham and whose wife is a teacher in the Waltham school system.

I work at Boston Children's Hospital as radiation & health physicist. I work both in the clinical and research applications of radiation used to research, diagnose, and treat a variety of illnesses and conditions. I have worked at Boston Children's Hospital for over 30 years.

I am speaking today as both a life-long community member and a staff member in support of Boston Children's Hospital's proposed project.

Let me start off by sharing some personal experiences. While I nor my 2 children ever needed the exceptional care Boston Children's Hospital provides 2 of my 5 grandchildren have. While neither had life-threatening conditions both did require specialty care that could only be found at Boston Children's Hospital. We were lucky that in our case the conditions were easily treatable. Not everyone is so lucky. We were so thankful to have such skilled professionals help our family through these issues. I am happy to say that both are doing well and actively engaged in typical kids' stuff, including sports of all types.

But I'm not alone. There are hundreds of thousands of families just like mine who have benefited from the unique and specialized care only offered at such a special place as Boston Children's Hospital. Like it says by our name "*where the world comes for answers*".

As for my experience as a professional working at Boston Children's Hospital let me just say that it has been a remarkable and rewarding journey. I often get asked *how I can work around sick kids all day.... That must get depressing*. My simple answer is NO... I look at all the kids that we have cared for and watch them walk out the door knowing that if it were not for what we do at Boston Children's Hospital the outcome might have been different.

We need Boston Children's Hospital. Recent studies have shown that hospital beds for children have declined in the last 10 years. The percentage of U.S. hospitals with inpatient units for pediatric care has decreased, as did the number of beds in the units that remained open.

One study reported that on average approximately 34 pediatric units are closed, and 300 beds are removed each year.

You see, we are so lucky to have a hospital like Children's in our backyard. It has continued to recognize the need for pediatric care to be expanded and to make pediatric care more widely available and accessible. Like in Waltham.

What can I say about the level of care BCH offers? Well, the U.S. News & World Report publishes a ranking of the country's best children's hospitals each year and this year Boston Children's Hospital topped the list for the eighth year in a row. I think that says it all..

So yes. I am in support of Boston Children's Hospital's proposed project. As are the countless children and families that have been transformed. There is not enough time to share the many accomplishments and accolades.

So, thank you for the opportunity to speak tonight and thank you to Boston Children's Hospital for all that you have done for me, my family, and our community.

William A. Lorenzen
5 Cleveland Road
Waltham, MA 02453

December 9, 2021

Lisa Burgess

97 South Washington Street

Norton, MA 02766



Testimony for Determination of Need (DON) for Department of Public Health (DPH)

My name is Lisa Burgess, and I live in Norton, MA.

I am a parent and sibling of several Boston Children's hospital patients, a longtime family advisory council member and a member of the Ten Taxpayer group.

I am speaking in support of Boston Children's Hospital's proposal to modernize their Weymouth and Waltham Campuses and create an ambulatory surgical center in Needham, providing locally-based, life-changing care. Healthier communities for our children enable a brighter future for our Commonwealth. The proposal before you would allow more families greater and more timely access to comprehensive, life-saving pediatric care.

I have personally witnessed countless incredible stories over the years at Boston Children's Hospital. I can unequivocally say that there is a clear public health need for this proposal to go forward. Ensuring that patients can access high quality pediatric care in their communities positively impacts patient and family lives in numerous ways. The barriers to high-quality care are reduced and underserved children have their needs better met when care is accessed in their local community. I receive calls every week from families asking questions and seeking care at Boston Children's Hospital. They often ask questions about more convenient locations outside of Boston. Expanding the services in the proposal additionally means less waiting for children in urgent need of appointments, consults, and surgical procedures. Travel time to and from appointments would be reduced; this equates to children spending less time out of school and parents missing less work. For many families with children diagnosed on the Autism Spectrum, just the long car ride to Longwood can be extremely trying.

I know this firsthand, as the mother of now three young men, who have all received care at Boston Children's Hospital. My oldest son accessed primary care and ophthalmology services. My middle son, an extremely medically complex patient, sees over 20

specialists, and has had over 500 admissions to date. He is alive today because of the enduring commitment and expertise of the clinicians found at Boston Children's. My youngest son was diagnosed with Autism Spectrum Disorder at 3 years old and later Generalized Anxiety Disorder. Having services available closer to home and more options for access is crucial to the common goal of making healthcare more equitable; it insures better outcomes for ALL children.

The unwavering commitment and the lifelong impact that Boston Children's Hospital has daily on the lives of our Commonwealth's most vulnerable children is seen each and every day. Making the delivery of the best medical care available to individual communities is an investment in health equity for Massachusetts.

This proposal before you all is so much more than a brick-and-mortar building project. This proposal is an investment in our children's lives and their children's lives for generations. This proposal is a commitment to the future of our children.

Thank you for the opportunity to speak tonight on behalf of our children and families.

Respectfully,

LM Burgess

Lisa Burgess