Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 2, 2022

Dear Determination of Need Program,

As the Executive Director of the Massachusetts Society for the Prevention of Cruelty to Children (MSPCC) and an executive member of the Children’s Mental Health Campaign, I fully support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

At a time that the demand for pediatric mental health care overwhelms supply, Boston Children’s and Franciscan Children’s decision to join forces is a significant step to solving this crisis. Together, they bring a deep commitment and expertise to developing innovative models, including new behavioral and mental health inpatient and outpatient psychiatric services for children with a special focus on children with autism. Their collective leadership represents an important opportunity to create a unique system of pediatric behavioral health and rehabilitative care*,* research and teaching that will improve the lives of patients and families throughout Massachusetts and New England.

In addition, this affiliation will also strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric behavioral health and rehabilitation clinicians during a time of workforce challenges.

I am confident that this affiliation will result in transformative and sustained change in the system of care for children, families and communities and have a long-lasting impact and benefit future generations of children for many years.

Thank you for accepting this letter of support.

Sincerely,

[signature on file]

Mary A. McGeown

Executive Director



Determination of Need Program

MA Department of Public Health

250 Washington Street

Boston, MA 02108

June 2, 2022

Dear Determination of Need Program,

I am writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

If the affiliation is approved, the two hospitals will combine their collective experience and expertise to create a unique system of pediatric behavioral health and rehabilitative care*,* research and teaching that will improve the lives of patients and families throughout Massachusetts and New England. In addition, it will modernize the Franciscan Children’s campus, creating a state-of-the-art center for pediatric behavioral health and rehabilitative care, improving patient access while also increasing community-based programming that will substantially decrease geographic and racial disparities.

Massachusetts, along with the rest of the country, is in the midst of a behavioral health crisis that has been exacerbated by the COVID-19 pandemic. Children, adolescents, and young adults are suffering greatly, and this suffering is compounded by the inability of the health care system to meet the increased demand for culturally responsive behavioral health services. Expanding the behavioral health workforce, and training providers dedicated to pediatric behavioral health care, is critical to our collective efforts to mitigate the long-term impacts of this crisis and support children and families in the communities that we serve.

As a pioneer in the field of workforce development, William James College is dedicated to educating behavioral health specialists of many disciplines to meet the evolving mental health needs of society. For more than a decade, the College has taken bold and strategic steps to assess the training needs of the behavioral health workforce, implement best practices for recruiting and retaining students and providers from culturally diverse backgrounds, develop career ladder programs with a focus on unserved and underserved groups, secure funding to provide scholarships and other academic supports to individuals who are underrepresented in the field, and build sustainable partnerships with local, state, federal, and community-based agencies. The College’s core mission is to expand and diversify the behavioral health field by training behavioral health professionals and paraprofessionals, and equipping them with the knowledge and skills to deliver culturally responsive mental health and substance use services throughout the Commonwealth.

Of particular relevance to this proposal, William James College works closely with Boston Children’s Hospital to expand diversity within the children’s mental health field and increase community engagement and impact. We are deeply committed to this work, and we greatly appreciate the commitment that we see from Boston Children’s to support community-oriented approaches to workforce issues affecting the availability and cultural competency of behavioral health access for children and their families. We are pleased to know that the proposed affiliation between Boston Children’s and Franciscan Children’s will strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric behavioral health clinicians.

The benefits to patients and families will be substantial and transformative, and will advance the health and well-being of thousands of children and adolescents. I urge you to approve this innovative and effective approach to the widespread and worsening pediatric behavioral crisis that is severely affecting young people across our state, region and country.

Thank you for accepting this letter of support. Should you have any questions or require additional information, please do not hesitate to contact me at (617) 327-6777 ext. 1241or via email at Gemima\_Stlouis@williamjames.edu.

Respectfully,

[signature on file]

Gemima St. Louis, PhD

*Vice President for Workforce Initiatives & Specialty Training*

*Associate Professor, Clinical Psychology Department*

*Director, Child & Adolescent Mental Health Initiative (CAMHI)*

Center for Workforce Development at William James College

1 Wells Avenue, Newton, MA 02459

Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 3, 2022

Dear Determination of Need Program,

We are writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

The Massachusetts Children’s Health Ten Taxpayer Group formed out of a shared interest in the health and wellbeing of children across the Commonwealth. Our members include clinicians and parents with deep experience caring for children and adolescents with medical complexity and behavioral health needs. We have collectively seen the challenges that families face when seeking care for their children with complex needs and the struggles of providers to cope with overwhelming demand amid a pandemic that has exacerbated the existing behavioral health crisis. We also know the power of the right care delivered in the right place and the right time to change the trajectory of a child’s life, whether it is post-acute care after a complicated hospitalization for a medically fragile child or timely intervention to address an emerging behavioral health issue before it escalates to the point of crisis.

If the affiliation is approved, Boston Children’s and Franciscan Children’s will combine their collective experience and expertise to create a unique system of pediatric behavioral health and rehabilitative care*,* research and teaching that will improve the lives of patients and families throughout Massachusetts and New England.

This affiliation will also strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric behavioral health and rehabilitation clinicians. We know that workforce issues are a crucial component of our state’s efforts to address both the lack of timely access to behavioral health care at all levels of the continuum and the needs of children with medical complexity whether they are cared for in an inpatient setting or at home.

In addition, this affiliation will allow for the modernization the Franciscan Children’s campus, creating a state-of-the-art center for pediatric behavioral health and rehabilitative care, improving patient access while also increasing community-based programming that will substantially decrease geographic and racial disparities.

The benefits to patients and families will be substantial and transformative, and will advance the health and well-being of thousands of children and adolescents. We urge you to approve this application, which will enable these two institutions to better address the widespread and worsening pediatric behavioral crisis that is severely affecting young people across our state and to enhance the services they provide to many of the most medically complex children in Massachusetts.

Thank you for accepting this letter of support.

Respectfully submitted by:

[signature on file]

Jonas Bromberg, Psy.D.

Also, submitted on behalf of:

Katie Curran, MSW

Eugene J. D'Angelo MSW PhD

David R DeMaso, MD

Erin Graham

Robert J. Graham, MD

Gina Hartley, MA

Patricia Ibeziako, MD

Shahzina S. Karim, MSW

Man Wai Ng, DDS, MPH

Patricia Pratt



**300 Longwood Avenue, Boston, MA 02115**

Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 3, 2022

Dear Determination of Need Program,

We are writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

As practicing child and adolescent psychiatrists with a combined 56 years of experience, we believe this project will greatly benefit children, families, and communities across our state and improve access for patients seeking life-changing medical and behavioral healthcare.

Boston Children’s currently has 36 children boarding at the hospital on a medical floor or in the emergency room waiting for placement in an intensive psychiatric treatment setting. Over the winter, the average number of children boarding number reached into the 50’s. Prior to the pandemic, we faced a deficit of behavioral health care in Massachusetts; now, we are in the midst of a behavioral health crisis, amplified by the isolation and disruption of the pandemic, in which children are not receiving early intervention or effective treatment.

In response, Boston Children’s has brought to bear new resources to try to meet the need. We have focused on implementing a responsive psychiatric care continuum that will provide children and families with the right services in the right setting at the right time. We have opened a 12-bed inpatient psychiatry unit at Boston Children’s Waltham in fall 2021 with plans to build a partial hospitalization unit with space for 8 to 10 patients. We are also expanding behavioral health clinical staffing to ensure that patients who are boarding receive timely evidence-based interventions that allow them to return home safely. 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.

If the proposed affiliation between Boston Children’s and Franciscan Children’s is approved, the two hospitals will combine their collective experience and expertise to create a unique system of pediatric behavioral health*,* research and teaching that will build on our current work to improve the lives of patients and families throughout Massachusetts and New England. Integrated and expanded research will occur across all areas of behavioral health that will greatly enable new discovery together with the development of new strategies for effective management across the care continuum. This affiliation will also strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric behavioral health clinicians and researchers, one of the central challenges we confront as we work to stem the crisis.

In addition, it will allow for the opportunity to modernize the Franciscan Children’s campus, creating a state-of-the-art center for pediatric behavioral health and rehabilitative care, improving patient access while also increasing community-based programming that will substantially decrease geographic and racial disparities.

The benefits to patients and families will be substantial and transformative, and will advance the health and well-being of thousands of children and adolescents. We urge you to approve the application so we can address the widespread and worsening pediatric behavioral crisis that is severely affecting young people across our state, region and country.

Thank you for accepting this letter of support.

Sincerely,

[signature on file]

Patricia Ibeziako, MD

Associate Chief for Clinical Services

[patricia.ibeziako@childrens.harvard.edu](mailto:patricia.ibeziako@childrens.harvard.edu)

[signature on file]

David R DeMaso, MD

Psychiatrist-in-Chief & Chair of Psychiatry

[david.demaso@childrens.harvard.edu](mailto:david.demaso@childrens.harvard.edu)

June 3, 2022

Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

Dear Determination of Need Program,

We are writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

As long-time pediatric behavioral health clinicians working with children in both outpatient and school-based programs, we have seen firsthand the effect of the pediatric mental health crisis facing our state and our country. Franciscan Children’s has a robust outpatient behavioral health clinic and also provides a fulltime, on-site counseling program in 11 Boston public schools.

One recent day in our outpatient clinic waiting room, we had a teenaged girl bleeding from her wrists from a suicide attempt. As we were trying to help her, a 5-year-old boy was behaviorally dysregulated in the room next door.

Earlier this week, our school-based counseling program had a 12-year-old girl who wrote a farewell letter to a friend. She then came to school with cuts on both of her arms and reported that she used a knife and scissors in an effort to die.

Frequently in our clinic and our schools, we are seeing crisis upon crisis.

You don’t have to be in the behavioral health field to know kids are hurting and need help. Well before the pandemic, the data showed the disturbing truth that more kids were experiencing mental health issues than ever before. Since the pandemic began, not only has the number of kids we are seeing increased, but also the severity of their conditions has grown to the worst levels we’ve ever seen.

The National Institute of Mental Health has estimated that nearly half of U.S. adolescents ages 13-18 will have at least one behavioral health condition in their lifetime, with nearly a quarter of those with a condition having severe impairment. One in five children have experienced a psychiatric disorder within the past year and **60 percent** of these kids do not get treatment. The impact among youth from communities of color is even worse.

As clinicians on the front lines of the pediatric behavioral health crisis, it has become alarmingly clear to us that thecurrent system simply is not able to meet the growing demand. We cannot effectively address this crisis with the same old system. We need a new, creative and collaborative system that addresses the problem early on and prevents behavioral health issues from escalating.

The affiliation between Boston Children’s Hospital and Franciscan Children’s would provide that system. Each of our organizations has a long and successful history of treating children with behavioral health conditions in inpatient, outpatient and school settings. This affiliation will combine our collective experience and expertise to create a new system of pediatric behavioral health*,* research and teaching that will improve the lives of children and families throughout Massachusetts and New England.

Our shared vision includes the development of an integrated continuum of pediatric behavioral health care ranging from innovative services in schools, primary care and community settings, to the delivery of effective specialty services, including inpatient, outpatient and short-term residential programs.

This affiliation will also strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric behavioral health clinicians, especially during this time of severe workforce shortage.

Individually, our organizations have accomplished much in this field, but together we can do so much more for children and families in Massachusetts.

We urge you to approve the application to allow the proposed affiliation between Franciscan Children’s and Boston Children’s Hospital.

Thank you for accepting this letter of support.

Sincerely,

Fatima Watt, PsyD

Vice President and Director Behavioral Health Services

Franciscan Children’s

30 Warren Street

Brighton, MA 02135

[fwatt@franciscanchildrens.org](mailto:fwatt@franciscanchildrens.org)

Kristan Bagley Jones, LICSW

Program Director, Children’s Wellness Initiative

Franciscan Children’s

30 Warren Street

Brighton, MA 02135

[kbagley-jones@franciscanchildrens.org](mailto:kbagley-jones@franciscanchildrens.org)

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Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 3, 2022

Dear Determination of Need Program,

I am writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

As the President and CEO of Boston Children’s Hospital, I know this proposed affiliation would allow Franciscan Children’s and Boston Children’s to combine our collective experience and expertise to create a unique system of pediatric behavioral health and rehabilitative care*,* research and teaching that will improve the lives of patients and families throughout Massachusetts and New England.

***What is the need?***

Our institutions are putting forth this application at a time of profound need among our children, which has been exacerbated by the pandemic and its ongoing effects on children and families. In particular, I would point to two issues:

* ***Children’s behavioral health***: The American Academy of Pediatrics, the American Academy of Child & Adolescent Psychiatry and the Children’s Hospital Association have all declared pediatric behavioral and mental health a health care emergency. There is a significant and well-documented need for investment in children’s behavioral health, including services across the continuum of care to support children and adolescents and when possible prevent their conditions from escalating to the point of crisis. We need a broad reimagining of the continuum of care to address the spectrum of needs we see and better address patients’ needs before they escalate to the point of requiring a hospitalization. Both the breadth and severity of the crisis have been exacerbated—more kids struggling, and they are seeking care at later stages in the progression of their condition with more acute needs.  
    
  Boston Children’s has been doing everything in our power to address the growing need created by the pandemic. We have brought to bear resources for telehealth to facilitate outpatient treatment, added inpatient behavioral health beds at our Waltham campus, added staffing to address the behavioral health boarding crisis, and worked to ensure we are providing services for patients awaiting a behavioral health placement. Still the need outpaces our capacity: last week there were over 40 children boarding at Boston Children’s on a medical floor or in the emergency room waiting for placement in an intensive psychiatric treatment setting; over the winter, the average number of boarding patients stretches into the 50s.
* ***Complex and post-acute care***: Boston Children’s and Franciscan Children’s are at the forefront of treatment of children with medical complexity (CMC), in the acute care and post-acute care settings respectively. The challenges of serving this population cannot be overstated. These children have a wide range of incredibly complex medical needs, and situations that would represent a bump in the road for a typical child can lead to a cascade of complications that require dedicated care to resolve. The average inpatient length of stay for hospitalized children with medical complexity is nearly twice that of non-CMC.[[1]](#footnote-1) Further, the number of children with medical complexity is expected to rise as our ability to treat and support children with a range of conditions continues to grow.   
    
  In many cases, children with medical complexity treated at Boston Children’s are good candidates for discharge to Franciscan Children’s, where they can receive supportive care in a less resource intensive setting until they are ready to go home. More consistently coordinating care across the continuum from acute to post-acute in this manner would not only benefit these children, it could also be an important approach to addressing the frequent capacity challenges facing Boston Children’s.

**How does this proposal address the need?**

If approved, our proposed affiliation would enable more effective care for patients in the right setting to serve their needs. It would expand a longstanding collaboration between Boston Children’s and Franciscan Children’s that has included clinical coordination, preferred provider arrangements, staffing/coverage arrangements and advocacy for children’s issues.

We plan to dedicate the significant resources necessary to fundamentally transform and reimagine the delivery of pediatric care for children with behavioral health and complex post-acute medical and rehabilitation needs.

***Behavioral health:*** We will be well positioned to address the widespread and worsening pediatric behavioral health crisis. We plan to establish a fully integrated continuum of pediatric behavioral health services, including school and community-based services, primary care integration, short-term residential programs, intensive outpatient services, and specialized inpatient care. This work will enable our two organizations to collaborate on issues related to the pediatric behavioral health workforce, a crucial consideration in any plans to address the ongoing crisis.

***Complex and post-acute care:*** This affiliation would enable stronger clinical integration to serve patients more effectively across many aspects of care. In particular, for those patients who receive care at both Boston Children’s and Franciscan Children’s and who may require subsequent care at one or both institutions, better alignment would improve the quality of care across their lifetime.

Both our institutions are deeply committed to being accessible to our communities, and together we will continue to promote health equity. It should go without saying that Boston Children’s and Franciscan Children’s will continue to support and improve access to care for all children of Massachusetts. Our planned affiliation will also strengthen our ability to jointly recruit and retain the next generation of pediatric behavioral health and rehabilitation clinicians.

In addition, at Boston Children’s we continue to look to the future by taking the long-term view of promoting the Commonwealth’s goals for cost containment, improved health outcomes and delivery system transformation. Studies have shown that if not properly addressed, childhood mental health conditions often persist into adulthood and may result in negative social outcomes and increased financial burdens on social support and disability programs. Providing timely and appropriate care to complex medical populations reduces the need for other more intensive and expensive downstream care that may result when care is delayed.

The benefits of our affiliation to patients and families will be substantial and transformative, and will advance the health and well-being of thousands of children and adolescents for decades to come. I urge you to approve this application that will bring a creative and effective new approach to the pediatric behavioral crisis that is severely affecting young people across our state, region and country.

Thank you for accepting this letter of support.

Sincerely,

[signature on file]

Dr. Kevin B. Churchwell

President and CEO, Boston Children’s Hospital

[Kevin.churchwell@childrens.harvard.edu](mailto:Kevin.churchwell@childrens.harvard.edu)

Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 3, 2022

Dear Determination of Need Program,

We are writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

Both of these hospitals have played a critical role in helping our daughter Yarielis survive and thrive.

Yarielis was born July 20, 2020, in Providence, RI. Prior to my delivery, the doctors diagnosed me with polyhydramnios, an excessive accumulation of amniotic fluid. When Yarielis was born, doctors discovered she had a heart defect and had trouble breathing. They intubated her and sent her to Boston Children’s Hospital where doctors performed open heart surgery to fix the defect. They installed a tracheostomy for a ventilator to keep her alive and a feeding tube to nourish her.

This was a very difficult and frightening time for Yari’s dad and me as we saw our little baby hooked up to so many wires and cables – we expected the worst.

My pregnancy was uneventful until 35 weeks. I had undergone the standard genetic testing which showed no abnormalities. When Yari was born however, we knew there was something else wrong, or different about her. Genetics experts at Boston Children’s soon diagnosed her with Kabuki Syndrome, a rare genetic disorder characterized by multiple abnormalities including distinctive facial features, growth delays, intellectual disabilities and skeletal abnormalities.

We now knew what we were dealing with – but had no idea what kind of a life our daughter would have.

Once she was stable, Yarielis was transferred to Franciscan Children’s for rehabilitation with the goal of getting her strong enough to go home. She was ventilator dependent and still needed a feeding tube. Yari didn’t move much; she couldn’t put her hands in her mouth, move her head or even smile.

Yari’s team included doctors, nurses, a social worker, plus respiratory, occupational and speech therapists. Over the next 15 months, this team worked so hard to rehabilitate her. Soon, Yarielis started to move her head and legs. She started to make noises with her mouth which meant she was breathing over the ventilator. Yari also started to smile, a very big, bright smile. It was like a miracle with her making so much more progress than we had expected.

The Franciscan team also worked with my husband Danny and me, training us to care for our baby girl. We learned how to suction her trach to keep her breathing and how to clean the tubes that fed her. We learned how to administer the many medicines Yarielis needed. We also learned how to bathe a baby hooked up to a ventilator machine – no small task.

Franciscan Children’s became our second home, but Boston Children’s was still very much a part of Yari’s care. We made frequent trips to the rare disease clinic for checkups and had various procedures done at BCH. Each time, we had to get an ambulance to take Yari and all her medical equipment on the 3-mile drive to Boston Children’s.

My husband and I are grateful to both of these hospitals for what they have done for our child and our family. On December 22, three days before Christmas, we were able to take Yari home with us – what a gift!

This was made possible by the expert care Yarielis received at Boston Children’s and Franciscan Children’s. If this affiliation is approved, the two hospitals could work more closely together and perhaps eliminate the need to take an ambulance to travel to and from follow-up checkups.

We strongly urge you to approve this application and the proposed affiliation.

Thank you for accepting this letter of support.

Sincerely,

Yarielis’ Parents

Aris Pepin and Danny Paulino

Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 6, 2022

Dear Determination of Need Program,

As the President and CEO of Franciscan Children’s, I proudly write in support of the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

At Franciscan Children’s, we are deeply committed to our mission of serving children and their families. Franciscan Children’s was founded in 1949 by the Franciscan Missionaries of Mary to provide a compassionate environment for children with complex medical conditions, mental health challenges, and special education needs. Our goal is to help children achieve their full potential and live their best lives.

In the past seven decades since our institution was founded, Franciscan has become an indispensable leader in the health care landscape in treating children from across the Commonwealth. Our institution has always been committed to promote equity in health care, with 60% of our patients covered by MassHealth.

If approved, this affiliation will create a new model for pediatric behavioral health and rehabilitative care, research and teaching in Massachusetts. It will help enable a paradigm shift to better care for children and families, and serve as a national model.

We were experiencing a pediatric behavioral health crisis well before the pandemic, but the last two years have only exacerbated this crisis. Today, the National Institute of Mental Health estimates that nearly half of U.S. adolescents ages 13-18 have at least one behavioral health condition, with nearly a quarter experiencing severe impairment. Fewer than half of those young people receive treatment. We also know that the number of children with complex medical needs is increasing nationally at a rate of 5% each year.

While our passionate and dedicated teams work hard every day, the current health care system is simply not equipped to meet the growing need for rehabilitation and behavioral health services for children. The system is being overwhelmed. As the regional provider that specializes in caring for children with special health care needs, it is critical that the state approves this application so we can continue to meet the evolving needs of children and families today.

Franciscan Children’s and Boston Children’s Hospital are two organizations with a longstanding commitment to providing the highest quality of care to children throughout the region. For these reasons, I believe our institutions working together can better address the needs of the community. This affiliation will create a system in which Franciscan and Boston Children’s become sister organizations, allowing us to share expertise, expand services, and build a more integrated system of care.

When it comes to the pediatric behavioral health crisis, this affiliation will yield immediate benefits, including greater investment and coordination. At Franciscan, we do not have enough beds to meet the growing need and face significant staffing challenges. Through this affiliation, both organizations will make significant investments immediately into the behavioral health system. These investments will allow us to expand access to desperately needed services, reimagine the care delivery paradigm and fill gaps, address workforce challenges, and modernize and rebuild our campus.

Through the affiliation, both organizations will be able to offer a comprehensive continuum of behavioral health care where patients can receive the right treatment in the right setting instead of boarding in an emergency room. We will expand our community-based behavioral health services, including school-based programs, to address children’s mental health needs before they reach a crisis point. We will also expand our research programming.

I am also excited about the opportunities this affiliation will provide to better serve children with complex medical needs. These children arrive at Franciscan with medical conditions that require dedicated, specialized care. They are also at the heart of Franciscan’s mission and a population we are uniquely suited to serve. The affiliation with Boston Children’s will allow us to expand to meet the growing need and modernize our facility to further meet the needs of children and families. Care coordination is also vital for our patients given their medical complexity. Improved integration between both institutions will only enhance the care our patients receive, including in the event they require care from one or both institutions in the future.

This affiliation will expand access to care, not restrict it. It will enable us to enhance existing services and create new ones that help more children and families in service of our enduring mission.

Both Franciscan Children’s and Boston Children’s Hospital will continue to serve as community resources to all children. Franciscan will continue to work with health care systems throughout the state and the region – as it has done throughout its history – to expand access to the critical, specialized care children require. Our goal is to expand our services and improve access for children who desperately need it.

In summary, this affiliation will provide long-overdue investments into our pediatric behavioral health and rehabilitative care system. It will allow Franciscan to modernize its campus, increase capacity to serve patients, and offer more community-based services, while working to reduce disparities in health care.

As you can tell, I am extremely excited about the possibilities for this affiliation to transform pediatric behavioral health and rehabilitative care in the Commonwealth, and feel an urgency to act. I ask that you approve this affiliation to ensure that Franciscan’s mission-driven service to children and their families will continue for generations to come.

Thank you so much for your consideration.

Sincerely,

Joseph A. Mitchell, MD

Joseph Mitchell, MD

President and CEO

Franciscan Children’s

30 Warren Street

Brighton, MA 02135

[jmitchell@franciscanchildrens.org](mailto:jmitchell@franciscanchildrens.org)

Determination of Need Program

MA Department of Public Health

250 Washington St.

Boston, MA 02108

June 6, 2022

Dear Determination of Need Program,

I am writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

I am the Chief Medical Officer at Franciscan Children’s (FC) and have been in this role for more than 35 years. As a long-time pediatric clinician and recognized expert in the field of pediatric post-acute and rehabilitative care, I feel strongly that if this affiliation were approved, it would create a novel system of pediatric rehabilitative care that includes increased capacity, coordinated teaching and training to create a larger and stronger workforce, and cutting-edge research, all of which will improve the lives of patients and families throughout Massachusetts and New England.

Franciscan Children’s is a 70+ year-old pediatric hospital and day school in the Brighton neighborhood of Boston that cares for children with mental health challenges, complex medical conditions and special education needs. It includes a 48-bed, post-acute care/rehabilitation​ medical unit. Most patients admitted to FC are transferred from hospitals throughout Massachusetts and New England.

Every child admitted to FC has suffered a catastrophic event: premature birth leading to ventilator dependence/feeding tube dependence/renal disease/bone disease; illness or surgery leading to debilitation; rare genetic condition leading to physical and/or cognitive disability, or a serious accident requiring inpatient rehabilitation services to recover and regain function.

Studies show the prevalence of medically complex children is growing 5 percent annually. Right now, there are not enough pediatric post-acute care (PPAC) beds in Massachusetts to meet the current need. There are many babies and children "stuck" in hospitals without specialized pediatric services because there is not an open PPAC bed.

Franciscan Children’s is the only rehab hospital in Massachusetts that accepts babies on ventilators. We have had days where, as many as 10 of these babies are on a waiting list for an open bed at FC. Having these children stuck in hospitals not only delays appropriate treatment for the child, but it also reduces the critical care services available to children with acute life-threatening conditions.

Through this proposed affiliation, FC and Boston Children’s plan to expand pediatric post-acute services for children with complex care needs, allowing more timely transfer of children who are ready for post-acute care in order to begin their recovery and transition to home.

This affiliation will also allow for closer collaboration and integrated care between a post-acute care hospital and an acute care hospital. At present, PPAC facilities across the country must send their complex inpatients by ambulance back to acute care facilities for consultations and procedures -- usually multiple times during a post-acute stay. Through this affiliation, FC will be able to provide much more on-site subspecialty care, as well as tests and procedures for its inpatients which will help reduce the need for time consuming and costly transports between the facilities. Our goal is a seamless care model that will certainly be more patient and family-centered and allow for the right care at the right time in the right setting.

This affiliation will also strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric rehabilitation clinicians. The healthcare industry is in the midst of a serious workforce shortage and creating a pipeline of clinicians is critically important.

Finally, we look forward to the modernization of our Franciscan campus that this affiliation will provide. We have an expert, dedicated and compassionate staff caring for these children, but our facility is more than 70 years old and desperately needs modernization. Having a state-of-the-art center for pediatric behavioral health and rehabilitative care on our Brighton campus will improve patient access while substantially decreasing geographic and racial disparities.

I urge you to approve this application so our organizations can develop a model system of post-acute rehabilitative care for kids here in Massachusetts and beyond.

Thank you for accepting this letter of support.

Sincerely,

[signature on file]

Jane O’Brien, MD

Chief Medical Officer

Franciscan Children’s

30 Warren Street

Brighton, MA 02135

 

Division of General Pediatrics Associate Professor of Pediatrics

Department of Medicine Department of Pediatrics

June 3, 2022

Determination of Need Program

Massachusetts Department of Public Health

250 Washington St

Boston, MA 02108

Dear Determination of Need Program,

I am writing to support the proposed affiliation between Boston Children’s Hospital and Franciscan Hospital for Children (DON application #: BCH-22031810-TO).

If the affiliation is approved, the two hospitals will combine their collective experience and expertise to create a unique system of pediatric behavioral health and rehabilitative care, research and teaching that will improve the lives of patients and families throughout Massachusetts and New England.

This affiliation will also strengthen the organizations’ ability to jointly recruit and retain the next generation of pediatric behavioral health and rehabilitation clinicians. In addition, the affiliation will modernize the Franciscan Children’s campus, creating a state-of-the-art center for pediatric behavioral health and rehabilitative care, improving patient access while also increasing community-based programming that will substantially decrease geographic and racial disparities.

As a pediatrician dedicated to caring for children with complex medical needs, I have been working closely with Franciscan Children’s for nearly 20 years. Consistent with my research, pediatric post-acute care hospitals are the only facilities who are able to keep uo with the evolving care needs of the medically complex patients that they serve. As a result, I routinely try to send my patients to Franciscan for rehabilitation following major surgeries (e.g., spinal fusion for neuromuscular scoliosis) and major acute illnesses (e.g., complicated pneumonia). Franciscan does an amazing job transitioning my patients from the acute-care setting to their post-acute care health services. My patients often need to stay at Franciscan for long periods of time before they are strong and healthy enough to go home. Were it not for Franciscan, my patients would be stuck in expensive, acute-care hospitals that are not equipped to provide the rehabilitation care that my patients need.

I believe so strongly in the post-acute care provided by Franciscan for children with complex medical needs that I partnered with Franciscan clinicians and researchers on a series of research projects. That work clearly showed that the pediatric patient demand for post-acute care facilities like Franciscan substantially exceeds the bed supply for the facilities.

I truly believe that the affiliation between Franciscan Children’s and Boston Children’s will advance the health and well-being of thousands of children and adolescents, especially those with complex medical needs. I urge you to approve this application, which will ensure a creative and effective project to support the health care delivery system for these children.

Thank you for considering this letter. Please do not hesitate to contact me with any questions.

Sincerely,

[signature on file]

**Jay G. Berry, M.D., M.P.H.**

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1. Massachusetts Health Policy Commission. “[Children with Medical Complexity in the Commonwealth](https://www.mass.gov/doc/children-with-medical-complexity-cmc-1062021/download).” October 6, 2021. <https://www.mass.gov/doc/children-with-medical-complexity-cmc-1062021/download> [↑](#footnote-ref-1)