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THE CHILDREN'S MEDICAL CENTER CORPORATION  
d/b/a BOSTON CHILDREN'S HOSPITAL  
300 LONGWOOD AVENUE, BOSTON, MA 02115  
APPLICATION FOR DETERMINATION OF NEED  
NUMBER: BCH-20171411-HE

PUBLIC AUDIO HEARING CONDUCTED BY THE  
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH, before  
Robin Picariello, Registered Merit Reporter and  
Notary Public in and for the Commonwealth of  
Massachusetts, via telephone, taken on Thursday,  
December 9, 2021, commencing at 6:03 p.m.

1 (Audio Hearing Begins)

2 LARA SZENT-GYORGYI: Boston Children's  
3 Hospital who we will refer to as the applicant or  
4 BCH moving forward. Upon receipt of the  
5 application, DoN staff reviewed the application,  
6 and after finding it to be in compliant with the  
7 DoN statute and regulation for filing, assigned it  
8 a filing date of August 10th, 2021.

9 The enabling statute for the DoN  
10 program requires that any person or government  
11 agency intending to undertake a substantial  
12 capital expenditure must apply in the DoN  
13 regulations, must apply for a DoN approval before  
14 engaging in such a project.

15 The DoN application is for a  
16 substantial capital expenditure, ambulatory  
17 surgery center and DoN required equipment project  
18 located at 300 Longwood Avenue, Boston,  
19 Massachusetts 02115, which will include renovation  
20 and equipping of Boston Children's Hospital's  
21 existing facility in Waltham, that will contain  
22 the following: expansion of clinical areas,  
23 including existing infusion, sleep disorders,  
24 radiology, behavioral health services, including

1 the establishment of a medical-psychiatric partial  
2 hospitalization program.

3 Land acquisition, construction,  
4 fit-out, and equipping of a facility for pediatric  
5 medical use in Needham to include eight operating  
6 rooms dedicated to ambulatory surgery services,  
7 one interventional radiology suite, 30 surgery  
8 preparation recovery bays, as well as hospital  
9 outpatient space to include phlebotomy, physical  
10 and occupational therapy, ophthalmology, and  
11 diagnostic radiology, including one magnetic  
12 resonance imaging or MRI system.

13 Leasing construction, fit-out, and  
14 equipping of space within a building in Weymouth  
15 to accommodate diagnostic and therapeutic hospital  
16 services including audiology, speech therapy,  
17 vision function testing, phlebotomy,  
18 echocardiography, and radiology, including one  
19 MRI.

20 The total value of the proposed  
21 project based on the maximum capital expenditure  
22 is \$434,691,000.

23 In accordance with the statute and  
24 regulations governing the DoN process, the DoN

1 program is analyzing BCH's application for  
2 compliance with a set of standards and criteria,  
3 including, but not limited to, a justification of  
4 the need for the project, its planning process,  
5 financial achievability, environmental impact and  
6 the reasonableness of its cost and expenditures.  
7 These are the key criteria which the DoN program  
8 will apply this analysis of this application.

9 This public hearing is an effort to  
10 gather information and to hear the opinions of  
11 interested parties about the proposed project. It  
12 is not intended to be a question and answer  
13 session. No questions will be permitted. The DoN  
14 program will take all relevant information into  
15 account in preparing its recommendations in the  
16 Massachusetts Public Health Council.

17 This decision on whether to approve  
18 the DoN for the proposed project will be made at  
19 one of its upcoming public meetings. We will  
20 accept written comments on this application for  
21 ten days following this hearing through December  
22 19th, 2021.

23 As this is a virtual hearing, the  
24 logistics are different from in-person hearings.

1 I will review our process for today. We ask for  
2 your patience if and when we encounter any  
3 difficulties. We will work to resolve any  
4 problems we experience.

5 Our plan for today is as follows: we  
6 are using a moderated conference call line, so our  
7 moderator Dexter will manage the queue before  
8 speaking. This meeting is being recorded and  
9 transcribed.

10 As indicated in the notice for the  
11 meeting, press Star 1 if you would like to  
12 testify, this will put you in the queue. You will  
13 not be told where you are in the queue, nor will  
14 you get much notice that you are about to testify.

15 When it is your turn to testify, you  
16 will be told you are now the speaker and you will  
17 experience a short silence and will then become  
18 the speaker. If you have muted your phone, you  
19 may need to unmute.

20 Please begin by stating your name  
21 clearly and slowly and your affiliation of town  
22 and residence. Please speak clearly so our  
23 transcriber can record everything accurately.

24 Because we expect several speakers,

1 we will limit everyone to three minutes. I will  
2 be timing people, and when you have about 30  
3 seconds left, you will hear a chime. And when  
4 your three minutes is through, I will say, Time's  
5 up, and the moderator will mute you and give the  
6 floor to the next speaker. You may experience a  
7 slight pause between speakers.

8 If testimony is lengthy, we suggest  
9 you present a three-minute summary of those  
10 remarks and submit a full text of your comments in  
11 writing. If you have written copy of your  
12 remarks, regardless of length, please feel free to  
13 submit it to the Department by e-mail or via  
14 postal service. E-mail address is  
15 DPH.DON@state.ma.us. Mail will get to us more  
16 quickly if it is sent to Determination of Need,  
17 Massachusetts Department of Public Health at 67  
18 Forest Street, Marlborough, Massachusetts 01752.

19 Be assured that the Department will  
20 consider all comments whether presented orally or  
21 in writing. Whether you comment or not, please  
22 know that the Department greatly values and  
23 appreciates your participation in the DoN process.

24 Before we open the line to the

1           general public, the Applicant will go first and  
2           will be allotted four minutes to present  
3           information about the proposed project.

4                       I will now ask Kevin Churchwell,  
5           President and CEO of Boston Children's Hospital to  
6           talk about the project.

7                       KEVIN CHURCHWELL: Thank you and good  
8           evening. My name is Dr. Kevin Churchwell and I am  
9           President and Chief Executive Officer of Boston  
10          Children's Hospital. I want to thank the entire  
11          Department of Public Health team for your time and  
12          commitment to improving health care for all  
13          residents of Massachusetts.

14                      And on behalf of Boston Children's  
15          Hospital, we appreciate the opportunity to  
16          highlight our proposed project in our investment  
17          in patients, families and our communities.

18                      I'm hopeful you'll find this  
19          information informative and that our proposal  
20          meets the Department of Public Health's  
21          requirements as you conduct your comprehensive  
22          review process.

23                      I will now introduce my colleague,  
24          Dick Argys, the executive in charge of planning

1 for this proposal to provide additional  
2 information.

3 DICK ARGYS: Thank you, Kevin. Good  
4 evening, Lara and BCH colleagues. My name is Dick  
5 Argys and I am Boston Children's Executive Vice  
6 President, Chief Administrative Officer, Chief  
7 Culture Officer, Chief Operating Officer for  
8 ambulatory and satellites.

9 As many of you know, Boston  
10 Children's Hospital is the only freestanding  
11 comprehensive pediatric care system in  
12 Massachusetts. We are committed to improving the  
13 health and well-being of all the children of our  
14 great State, children of all races, children of  
15 all ethnicities wherever they live, whoever pays  
16 for their care.

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

22 As part of this long-standing  
23 commitment, we plan to modernize our existing  
24 facility in Waltham; relocate existing physician



1 practices with limited pediatric hospital services  
2 in Weymouth; and build an ambulatory surgical  
3 center, and provide pediatric specialty care  
4 services in Needham.

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

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

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

23 In closing, I would like to reiterate  
24 that our investments in Waltham, Weymouth and

1           Needham are part of our long-standing commitment  
2           to meeting the unique needs of children throughout  
3           Massachusetts and to ensuring that we are well  
4           positioned to continue to improve their health and  
5           well-being in the years ahead.

6                       This is important work that is  
7           essential to our mission and our future, and to  
8           the future of our patients and their families.

9                       Throughout the evening you will hear  
10          from a number of speakers who will highlight the  
11          ways in which our proposed project meets the needs  
12          of our patients while addressing the public health  
13          priorities of the Commonwealth.

14                      Boston Children's physicians and  
15          referring physicians will share their commitment  
16          to serving all patients through Massachusetts,  
17          throughout Massachusetts and highlight some of the  
18          unique aspects of their respective clinical  
19          programs.

20                      Patient families will discuss their  
21          personal experience with our existing satellite  
22          facilities and how these facilities enhance access  
23          to care.

24                      Community organizations we partnered

1 with will highlight our strong community  
2 commitment and how we've addressed the wide range  
3 of determinants of health.

4 Boston Children's administrative  
5 leaders will address enhanced access for patients  
6 and families, the importance of family centered  
7 care and how this proposed project will address  
8 the behavioral health and medically complex needs  
9 of children.

10 So, in closing, thank you again for  
11 the opportunity to be here today. We are  
12 confident our proposed project meets the unique  
13 needs of children and families throughout  
14 Massachusetts and we hope to gain your support for  
15 our project. Thank you.

16 LARA SZENT-GYORGYI: Thank you. Dexter,  
17 if you want to open up the lines to speakers.  
18 Thank you.

19 DEXTER: Thank you. If you'd like to  
20 make a public comment, please press Star 1, unmute  
21 your phone and clearly state your name for public  
22 comment introduction. Our first public comment  
23 comes from Lisa Burgess. Lisa, your line is open.

24 LISA BURGESS: Hi, my name is Lisa

1 Burgess and I live in Norton, Mass.. I am a  
2 parent and a sibling of several Boston Children's  
3 Hospital patients, a long time family advisory  
4 council member and a member of the Pentac  
5 [phonetic] Fair Group.

6 I am speaking in support of Boston  
7 Children's Hospital proposal to modernize their  
8 Weymouth and Waltham campuses, and create an  
9 ambulatory surgical center in Needham providing  
10 locally based life changing care. Healthier  
11 communities for our children enable a brighter  
12 future for our Commonwealth.

13 The proposal before you would allow  
14 more families greater and more timely access to  
15 comprehensive life saving pediatric care.

16 I have personally witnessed countless  
17 incredible stories over the years at Boston  
18 Children's Hospital. I can unequivocally say that  
19 there is a public health need for this proposal to  
20 go forward. Ensuring that patients can access  
21 high quality pediatric care in their communities  
22 positively impact patient and family lives in  
23 numerous ways.

24 The barriers to high quality care are

1 reduced, and underserved children have their needs  
2 better met when care is accessed in their local  
3 community. I receive calls every week from  
4 families asking questions and seeking care at  
5 Boston Children's Hospital. They often ask  
6 questions about more convenient locations outside  
7 of Boston.

8 Expanding the services in the  
9 proposal additionally means less waiting for  
10 children in urgent need of appointments, consult  
11 and surgical procedures. Travel time to and from  
12 appointments would be reduced. This equates to  
13 children spending less time out of school and  
14 parents missing less work.

15 For many families with children  
16 diagnosed on the autism spectrum, just the long  
17 car ride to Longwood can be extremely trying.

18 I know this firsthand as I am the  
19 mother of now three young men who have all  
20 received care at Boston Children's Hospital. My  
21 oldest son accessed primary care and ophthalmology  
22 services. My middle son, an extremely medically  
23 complex patient sees over 20 specialists and has  
24 had over 500 admissions to date. He is alive

1           today because of the enduring commitment and  
2           expertise of the clinicians found at Boston  
3           Children's. My youngest son was diagnosed with  
4           autism spectrum disorder at three years old and  
5           later generalized anxiety disorder.

6                       Having services available closer to  
7           home and more options for access is crucial to the  
8           common goal of making health care more equitable  
9           and ensures better outcome to all children.

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

17                      This proposal before you is much more  
18           than brick and mortar. This proposal is an  
19           investment in our children's lives and their  
20           children's lives for generations. This proposal  
21           is a commitment to the future of our children.  
22           Thank you for the opportunity to speak tonight on  
23           behalf of our children and families.

24                      LARA SZENT-GYORGYI: Thank you.

1                   DEXTER: Our next public comment comes  
2                   from Dr. Shari Nethersole. Dr. Shari, your line  
3                   is open.

4                   SHARI NETHERSOLE: Hi everyone, my name  
5                   is Dr. Shari Nethersole. I'm a resident of  
6                   Roslindale, Massachusetts. I'm a pediatrician and  
7                   the executive director for community health at  
8                   Boston Children's Hospital and express my support  
9                   for the Hospital's proposed project in Needham,  
10                  Waltham and Weymouth.

11                  I oversee the Hospital's community  
12                  mission improving the health and well-being of  
13                  children and families in our local community with  
14                  a particular emphasis on investing disparities and  
15                  promoting health equity. I also serve on the  
16                  Board of the Boston Children's Hospital  
17                  Accountable Care Organization and have done so  
18                  since its launch in 2018.

19                  The proposed project would create an  
20                  opportunity for Boston Children's to bring our  
21                  evidence based approach to community health  
22                  initiatives to a wider range communities in the  
23                  greater Boston area.

24                  I take great pride in the fact that

1 our approach to community health is informed by  
2 research and best practices, as well as by  
3 in-depth community engagement and the ongoing  
4 advice of community partners, as well as a very  
5 active and engaged community advisory board and  
6 board of trustees subcommittee.

7 Our goal as we carry out our  
8 community mission is to implement programs that  
9 have potential to result in long-term systemic  
10 change which ultimately improves the health  
11 outcome for our children.

12 Our community asthma initiative which  
13 was established 15 years ago and has resulted and  
14 improved as a management for many patient and  
15 families, as well as changes in the way insurers  
16 cover asthma is a powerful example of how  
17 successful these programs can be at affecting  
18 systemic change.

19 Boston Children's have brought this  
20 thoughtful, data driven and community informed  
21 approach to their community health initiative that  
22 was made possible by our previous determination of  
23 need community health initiative funding from our  
24 Hale Clinic building project and Brookline Place



1 expansion.

2 Our collaboration for community  
3 health has brought together a wide range of child  
4 serving health social and service organizations to  
5 identify ways to enhance their collective impact  
6 through individual support and increased  
7 collaboration.

8 While our historic focus has been on  
9 communities in the City of Boston, it has become  
10 very clear over the last five years that many of  
11 the low and moderate income families that we  
12 previously served in Boston have now moved out of  
13 the City. This relocation is in large part the  
14 result of increased cost of housing. These  
15 families can no longer afford to remain in the  
16 City.

17 As the cost of living has continued  
18 to rise dramatically in recent years, low and  
19 moderate income families moved out along Route 9  
20 towards Framingham, down Route 24 to Randolph and  
21 Brockton, or south to Quincy.

22 Modernizing our existing facilities  
23 in Waltham and Weymouth, as well as providing  
24 expanded access to pediatric ambulatory care in

1           Needham will directly impact these populations.  
2           Allowing easier access to health care services are  
3           also providing an important opportunity to expand  
4           our community health work.

5                       We have proposed the CHI process that  
6           engages these suburban yet still underserved  
7           communities and look forward to building new and  
8           robust partnerships with community organizations  
9           similar to those in Boston.

10                      Given the scope of this project, the  
11           community health resources that we generate  
12           present an opportunity to have a significant  
13           impact on the health and well-being of some of the  
14           most vulnerable children and families in the  
15           greater Boston area.

16                      I strongly urge the Department of  
17           Public Health to approve Boston Children's  
18           Determine of Need application. Thank you very  
19           much.

20                      LARA SZENT-GYORGYI: Thank you. Dexter,  
21           can you ask the next person.

22                      DEXTER: Our next public comment comes  
23           from Mary McGeown. Your line is open.

24                      MARY MCGEOWN: Thank you. Good evening.

1 My name is Mary McGeown and I'm the executive  
2 director of MSPCC, the Massachusetts Society For  
3 the Protection of Cruelty to Children; and I'm the  
4 vice chair of Boston Children's Hospital Board  
5 Committee for Community Health. I live in  
6 Dartmouth, Massachusetts.

7 MSPCC provides home visiting services  
8 to young parents and clinical mental health  
9 services to children through our offices in  
10 Holyoke, Worcester, Lowell, Lawrence and Boston.  
11 We also provide training and support to foster  
12 parents statewide to help them care for children  
13 who are victims of abuse and negligent.

14 Tonight I am here to support Boston  
15 Children's Hospital's proposed project in Waltham,  
16 Weymouth and Needham. I am confident this project  
17 will greatly benefit children, families and  
18 communities across our State, and improve access  
19 for patients seeking life saving or life changing  
20 care.

21 Boston Children's is committed to  
22 responding to the needs of our communities.  
23 Throughout the planning for this project, Boston  
24 Children's engaged in a thoughtful and a

1 deliberate process to understand the greatest  
2 health needs and concerns for families in our  
3 community.

4 The proposed project reflects what  
5 they heard and learned, and identifying the best  
6 way for the hospital to address these issues in a  
7 manner that tackles health disparities, improves  
8 health outcomes and promotes health equity.

9 At a time when the demand for  
10 pediatric mental health care overwhelms supply,  
11 this project serves to advance Boston Children's  
12 well earned reputation as a leader in developing  
13 innovative models to ensure that children and  
14 families have access to high quality integrated  
15 pediatric behavioral health care services in a  
16 convenient setting.

17 In my time of partnering with Boston  
18 Children's Hospital, I have also come to  
19 understand they have a deep commitment to serving  
20 children covered by the Medicaid program. They  
21 have a special role in meeting the needs of  
22 children with medical complexity and are a  
23 backbone health provider for children in the  
24 custody of the Department of Children and

1 Families.

2 Children and adolescents in foster  
3 care have special health care needs. Boston  
4 Children's play a critical role in ensuring the  
5 well-being of children in out-of-home placement  
6 through their exceptional pediatric services and  
7 advocacy on their behalf.

8 The proposed project and investment  
9 will help Boston Children's grow its impact and  
10 reach even more patients and families. And in  
11 addition, they will meet the needs of surrounding  
12 underserved communities.

13 Thank you for the opportunity to  
14 speak this evening and I urge DPH to support this  
15 project.

16 LARA SZENT-GYORGYI: Thank you.

17 DEXTER: Our next public comment comes  
18 from Richard Robertson. Your line is open.

19 RICHARD ROBERTSON: Thank you. My name  
20 is Dr. Richard Robertson, I live in Wellesley,  
21 Massachusetts. I'm a pediatric neuroradiologist,  
22 radiologist and Chief of (inaudible), and  
23 currently the Associate Chief Medical Officer for  
24 Boston Children's Hospital ambulatory and

1           satellite operations.

2                       I wish to speak tonight in support of  
3           the BCH proposed project, specifically addressing  
4           the MRI resources that are to be developed as part  
5           of this DoN application.

6                       Boston Children's Hospital radiology  
7           provides unique MR resources that are not  
8           available in other MR facilities or other local or  
9           even national radiology practices.

10                      Our approach is based on real-time  
11           monitoring of complex exams by subspecialty  
12           radiologists and centralized interpretation of MRI  
13           studies by subspecialists such as pediatric  
14           muscular skeletal or pediatric neuroradiologist.

15                      While most of our facilities have  
16           imaging managed and interpreted by the on-site  
17           radiologist regardless of the specialty expertise  
18           of that individual, our exams are managed by the  
19           most appropriate subspecialist even though that  
20           subspecialist may not be the radiologist on site.

21                      That approach facilitates alignment  
22           between what the pediatric clinical specialists  
23           are looking for and the information that the  
24           imaging provides. This means that to repeat or

1 follow-up exams need to be performed due to  
2 clinical questions that weren't addressed the  
3 first time.

4 It also decreases the need for  
5 redundant imaging allowing for more children to be  
6 imaged without the need for sedation which might  
7 otherwise be required when the child is unable to  
8 remain motionless for more prolonged exam.

9 We also have a robust, what we term,  
10 trial-it-out program that sets aside certain exam  
11 times for children to attempt an MR without  
12 sedation. As a result, we have the lowest  
13 requirement for sedation for MRI of any major  
14 pediatric hospital nationally.

15 Avoiding sedation not only decreases  
16 the cost of the MRI by about two-thirds compared  
17 to a study that requires sedation, but it also  
18 improves the safety of the exam and allows us to  
19 image more patients in the community without their  
20 having to travel into Boston for their studies,  
21 and this improves access.

22 Lastly, most of our MR referrals  
23 comes from Boston Children's Hospital clinical  
24 specialists and primary care providers. This

1 means that the patient's medical records and prior  
2 imaging studies are readily available to us when  
3 we're performing or interpreting MRIs.

4 The availability of this information  
5 is absolutely critical to optimal performance and  
6 accurate interpretation of the MRI, especially in  
7 complex patients. This vital information is often  
8 not available when patients are referred for  
9 imaging outside of the BCH system.

10 In summary, the BCH proposal for  
11 additional MR capabilities provides an important  
12 opportunity to improve the access and the overall  
13 quality of pediatric MRI services in the  
14 community. Thank you for your time in allowing me  
15 to speak with you this evening.

16 LARA SZENT-GYORGYI: Thank you.

17 DEXTER: Our next public comment comes  
18 from William Lorenzen. William, your line is  
19 open.

20 WILLIAM LORENZEN: Hello, my name is  
21 William Lorenzen, I live in Waltham. I have two  
22 sons, one of which lives in Waltham and one lives  
23 in Norwood, and five grandchildren.

24 I work at Boston Children's Hospital



1 in radiation and health services. I work both in  
2 the clinical and research application of radiation  
3 and use for research diagnosis and treatment of a  
4 variety of illnesses and conditions. I've worked  
5 at Boston Children's Hospital for over 30 years.

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

10 Let me start off by sharing some  
11 personal experiences. While I, nor my two  
12 children ever needed exceptional care Boston  
13 Children's Hospital provides, two of my five  
14 grandchildren have. While neither had life  
15 threatening conditions, both did require specialty  
16 care that can only be found at Boston Children's  
17 Hospital. We were lucky that in our case the  
18 conditions were easily treatable, not everyone's  
19 so lucky.

20 We are so thankful to have such  
21 skilled professionals help our family through  
22 these issues. I'm happy to say that both are  
23 doing well and actively engaged in typical kid  
24 stuff, including sports of all types.

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

7                   As for my experience as a  
8                   professional working at Boston Children's  
9                   Hospital, let me just say it has been a very  
10                  remarkable and rewarding journey. I often get  
11                  asked how I can work around sick kids all day, it  
12                  must get depressing. My simple answer is, no. I  
13                  look at all the kids that we have cared for and  
14                  watched them walk out the door knowing that if it  
15                  were not for what we do at Boston Children's  
16                  Hospital, the outcome might have been different.

17                  We need Boston Children's Hospital  
18                  and the expansion. Recent studies have shown that  
19                  hospital beds for children have declined in the  
20                  last ten years. The percentage of U.S. hospitals  
21                  with inpatient units of pediatric care has  
22                  decreased, as did the number of beds in the units  
23                  that remained opened.

24                  One study reported that an average

1 of, approximately, 34 pediatric patients --  
2 pediatric units are closed and 300 beds are  
3 removed each year.

4 You see, we are so lucky to have a  
5 hospital like Children's in our backyard. It has  
6 continued to recognize the needs of pediatric  
7 care, to expand it and to make pediatric care more  
8 widely available and accessible.

9 So what can I say about the level of  
10 care at Children's. Well, U.S. World News and  
11 World Report public ranked it childrens best  
12 hospital each year, and Boston Children's topped  
13 the list for eight years in a row. I think it  
14 says it all.

15 So, yes, I am in support of Boston  
16 Children's Hospital's proposed project as are the  
17 countless children, families that have  
18 transformed. There's not enough time to share so  
19 many (inaudible) accolades.

20 Thank you so much for the opportunity  
21 to speak. Thank you to Boston Children's Hospital  
22 for all you've done for me, my family and our  
23 community.

24 LARA SZENT-GYORGYI: Thank you.

1                   DEXTER: Our next public comment comes  
2                   from Elaine Pinhiero. Elaine, your line is open.

3                   ELAINE PINHIERO: Hi, my name is Elaine  
4                   Pinhiero. I live in Needham, Massachusetts with  
5                   my husband Joe Regano and our three-year old twins  
6                   Julia and James Regano.

7                   Julia has been receiving care from  
8                   the growth and nutrition team at Children's  
9                   Hospital since she was an infant, and I'm speaking  
10                  today in support of Boston Children's Hospital's  
11                  proposed project.

12                  Our daughter, Julia, was only three  
13                  pounds, four ounces at birth. She was required to  
14                  stay in the NICU until she gained enough weight to  
15                  be discharged, and was enrolled shortly afterwards  
16                  in a coordinated program of monitoring and  
17                  consultation by the growth and nutrition team.

18                  She was briefly readmitted to the  
19                  hospital due to a failure to thrive, which was  
20                  remedied by tests that revealed she was having  
21                  difficulty with the viscosity of her fluids.

22                  We're happy to say that through the  
23                  excellent work of Dr. Fleet and her team, Julia is  
24                  a happy and healthy toddler. We believe that

1 Children's Hospital sets the standard for infant  
2 medical care, but even world class health care is  
3 worthless unless the patient has ready access.

4           Needham and the surrounding  
5 neighborhood communities are undergoing a  
6 generational transition from older, established  
7 families who's grown children, to young parents  
8 with their first or second child, and it is common  
9 for those parents to be working professionals  
10 making it extremely difficult to get a child to  
11 appointments in the City.

12           An office in Needham would allow the  
13 doctors to be as close as possible to a growing  
14 group of their patients, some of whom would have  
15 great difficulty traveling to Boston. Thank you  
16 for the opportunity to speak tonight.

17           LARA SZENT-GYORGYI: Thank you.

18           DEXTER: And one moment while we pull up  
19 our next public speaker.

20           (Pause)

21           LARA SZENT-GYORGYI: I'll just take  
22 this moment to just remind people that if you are  
23 interested in making a public comment, to hit Star  
24 1. Thank you.

1                   DEXTER:   And our next public comment  
2                   comes from Steve Fishman.   Steve, your line is  
3                   open.

4                   Thank you.   My name is Steven Fishman, I  
5                   live in Weston, Massachusetts.   I am a surgeon and  
6                   Chief of Boston Children's Hospital and I am  
7                   speaking today in support of Boston Children's  
8                   proposed project.

9                   Born, raised and educated in Chicago,  
10                  and trained in surgery in Philadelphia, I came to  
11                  Boston in 1992 for the opportunity to get the best  
12                  training in the world for the surgical care of  
13                  children.   Despite many opportunities to lead  
14                  elsewhere, I have remained at Boston Children's  
15                  for three decades because of its unique status.

16                  Every major city is proud of and  
17                  supports the Children's Hospital, but Boston  
18                  Children's is the finest health institution in the  
19                  world, both in care, quality and training.   Thus,  
20                  we have the opportunity to innovate and advance  
21                  our many pediatric fields of specialty benefiting  
22                  children around the world while at the same time  
23                  making the best possible care available to our own  
24                  families here in Boston and the region.

1                   I take great pride in the fact that  
2                   we care for patients from around the globe  
3                   interspersed with the children of our neighbors.  
4                   Boston Children's is a destination hospital for  
5                   those patients from around the nation and the  
6                   world in the most challenging of conditions. We  
7                   provide hope and solutions when others cannot.

8                   I often relate to local friends and  
9                   patient families how fortunate we are to have  
10                  access in our own backyard to the world class  
11                  specialists and expertise that others can only  
12                  access with an airplane.

13                  Our facilities in the Longwood  
14                  medical area is (inaudible) intense, landlocked  
15                  and difficult for many to access. Traffic and  
16                  parking alone are a significant dissatisfier and  
17                  barrier to many families. More broadly are the  
18                  challenges and coming to Longwood Avenue when the  
19                  child is seriously ill and require complex  
20                  procedures or critical care. For less complex or  
21                  repeated services, it is a significant burden for  
22                  families to come to Longwood.

23                  Furthermore, there are costs and  
24                  operational inefficiencies inherent with

1 intermittent complex and much resource intense  
2 care. We can best serve our local families by  
3 providing efficient, family friendly, easy  
4 accessible care near the communities in which they  
5 live.

6 It is preferable for us to provide  
7 interventions for low-risk and the more complexity  
8 patients needing critical care in satellite  
9 facilities specifically designed for and run for  
10 this purpose. This would optimize our ability to  
11 perform the more challenging high-risk and less  
12 predictable procedures in our main hospital  
13 facility.

14 The proposed project and investment  
15 will help Boston Children's grow this impact and  
16 reach even more families and more patients  
17 (inaudible) community to their health and  
18 well-being of children throughout Massachusetts.

19 This project will ensure that  
20 patients and families have access to a full range  
21 of high quality integrated pediatric care services  
22 and convenient lower cost settings. Thank you for  
23 the opportunity to speak tonight.

24 LARA SZENT-GYORGYI: Thank you.



1                   DEXTER: Our next public comment comes  
2                   from Sarah Fleet. Sarah, your line is open.

3                   SARAH FLEET: Good evening. My name is  
4                   Dr. Sarah Fleet and I'm a pediatric  
5                   gastroenterologist at Boston Children's Hospital,  
6                   and a director of the growth and nutrition  
7                   program. I reside with my family in Needham, and  
8                   I'm speaking tonight with unwavering and  
9                   enthusiastic support of the Boston Children's  
10                  Needham project.

11                  Our growth and nutrition program was  
12                  established in 1984 with support from the Bureau  
13                  of Family Health and Nutrition at the Department  
14                  of Public Health. The same branch that steward  
15                  the special supplemental nutrition program of  
16                  women and children, or the WIC program.

17                  We care for children with  
18                  malnutrition, poor growth and feeding  
19                  difficulties, and are currently comprised of five  
20                  gastroenterologists, two nurse practitioners, five  
21                  dietitians, four feeding therapists, a visiting  
22                  nurse, a social worker, and two feeding  
23                  psychologists.

24                  We use a biopsychosocial model to

1 promote improved feeding and swallowing, reduction  
2 of oral aversion, restoration of nutrition, relief  
3 of anxiety, and appropriate family functioning  
4 around feeding and meal time.

5 While we are very successful in  
6 treating our patients, our wait list continues to  
7 grow and is now upwards of four to six months.  
8 For an infant or toddler with malnutrition or poor  
9 weight gain, this lengthy wait can have a  
10 significant impact on their future potential.

11 It has been well documented that poor  
12 nutrition in the first thousand days of life, from  
13 conception to age two can cause irreversible  
14 damage to a child's developing brain affecting her  
15 ability to perform well in school and her future  
16 earning potential, thus making it harder for a  
17 child and family unit to rise out of poverty. It  
18 can also predispose these children to poor health  
19 outcomes including obesity, diabetes and other  
20 chronic disease.

21 Our program takes particular pride in  
22 our psychology and social work services, that when  
23 paired with excellent medical care help to provide  
24 social supports and framework to families in need.

1 This combination of services when accessed in a  
2 timely manner can avoid hospitalization and  
3 feeding tube placement for a child.

4 The Needham satellite is proposed to  
5 be a new state of the art home for the growth and  
6 nutrition program allowing us to provide even  
7 better and more accessible care related to feeding  
8 and nutrition upon its opening.

9 It will allow us to care for more  
10 patients, reduce our wait list times and reach a  
11 geographic area we have so far been less able to  
12 serve.

13 The new clinic will be built with our  
14 population in mind and help us to further  
15 revolutionize the care of children with  
16 malnutrition. I appreciate the opportunity and  
17 for all of your time. Thank you.

18 LARA SZENT-GYORGYI: Thank you.

19 DEXTER: Our next public comment comes  
20 from Magali Garcia-Pletsch. Your line is open.

21 MAGALI GARCIA-PLETSCH: My name is Magali  
22 Garcia-Pletsch and I live in Boston, but work in  
23 Waltham as an operations director with Waltham  
24 Partnership For Youth.

1           Boston Children's Hospital has been a  
2           key partner since our inception over 30 years ago.  
3           On behalf of Waltham Partnership for Youth, I am  
4           speaking today in support of Boston Children's  
5           Hospital proposed project.

6           Waltham Partnership for Youth serves  
7           children and families throughout Waltham with a  
8           particular focus on high school aged youth of  
9           color, immigrant youth and youth from low-income  
10          household. As you are aware, the need for  
11          childrens access to integrated pediatric care,  
12          especially when mental and behavioral health care  
13          is great.

14          Our partnership with Boston  
15          Children's Hospital has taken many shapes over the  
16          last three decades. We have received financial  
17          support for mental health programs and services.  
18          We have had DCH clinicians provide pro bono  
19          services in the form of serving on panels and  
20          providing emotional support at events, and we have  
21          long benefited from having thoughtful and  
22          dedicated DCH representatives serve on our board  
23          of directors.

24          Through this work together we have

1           been able to ensure that more Waltham youth,  
2           especially youth of color and low-income youth  
3           have greater access to services and information  
4           regarding their health and well-being.

5                       That said, we have also witnessed the  
6           expedient growth in the mental health needs of  
7           the youth we serve, and there is perhaps no more  
8           urgent and important steps we can take as a  
9           community than expanding the behavioral health  
10          supports available to our young people.

11                      Additionally, as demonstrated through  
12          our own 2019 transportation studies, Waltham Rides  
13          Together, lack of transportation is a significant  
14          barrier facing the families that we serve, so we  
15          are especially pleased that families will have  
16          greater access to outpatient services in much more  
17          convenient locations.

18                      We applaud the fact that the Boston  
19          Children's is prioritizing the expansion of  
20          behavioral health services, and that they are  
21          undertaking these plans in a way that are  
22          addressing the needs of underserved children and  
23          families with a focus on increasing access.

24                      I am confident Boston Children's

1 investment in children, families and communities  
2 will have a long-lasting impact that will benefit  
3 our community for many years to come.

4 We strongly recommend that the  
5 Department of Public Health act favorably on the  
6 proposed project. Thank you for the opportunity  
7 to speak tonight.

8 LARA SZENT-GYORGYI: Thank you.

9 DEXTER: Our next public comment comes  
10 from Nina Liang. Your line is open.

11 NINA LIANG: Thank you so much. My name  
12 is Nina Liang and I'm currently serving as a City  
13 Council President in Quincy. And although this  
14 expansion is not taking place in my city, Weymouth  
15 is my neighboring city and I just want to share  
16 with you personally why this is so important to  
17 me.

18 Twenty eight years ago my youngest  
19 sister, the last of four, was born with severe  
20 development disabilities. And, unfortunately, to  
21 this day she's still unable to verbalize anything  
22 or care for herself.

23 Although I count my blessings that  
24 I'm lucky enough now to be able to help my parents

1 and the burden of caring for her, that wasn't  
2 always the case.

3 I was five years old when she was  
4 born, and, again, I was one of four kids. My mom  
5 was, you know, responsible for taking care of all  
6 of us. My dad worked every day but Thanksgiving  
7 to make sure that we had a roof over our heads and  
8 food on the table.

9 But, that meant that my mom, a young  
10 mom of four in a country where, you know, she did  
11 not grow up, and she was an immigrant, English was  
12 her second language, she was tasked with making  
13 sure that we were all healthy and that my younger  
14 sister got the care that she needed.

15 And Boston Children's Hospital 28  
16 years ago made this easier for my mom. They  
17 treated my family with compassion and grace. They  
18 navigated the language barriers with her with  
19 respect and never treated her less than just  
20 because her English was not 100 percent.

21 They always made sure that someone in  
22 the emergency room, whether it was at 2:00 in the  
23 afternoon, or 2:00 in the morning was always going  
24 to be there to help my mom navigate what was going

1 on and to ensure that she got the care that she  
2 needed.

3 When my sister turned 18, however,  
4 insurance companies called left and right and let  
5 us know that my sister was now aging out of  
6 Children's Hospital's care and needed to have a  
7 transition plan to find doctors elsewhere. Of  
8 course, after 18 years of getting the exemplary  
9 care she was getting at Children's, we were very  
10 concerned about where we were going to go next  
11 with her.

12 Children's Hospital did not skip a  
13 beat. They reached out, they took it upon  
14 themselves to help us advocate for her, and to  
15 this day, she's still able to continue on with the  
16 specialists that she needs to ensure a healthy and  
17 safe and happy life every single day.

18 My sister, like I said, is healthy.  
19 She lives with a (inaudible). We happily drive  
20 her every morning, pick her up every single  
21 afternoon, and what makes that easier is that now  
22 when she has an appointment, she can go to the  
23 location in Weymouth, but that's not always the  
24 case with every appointment.



1                   There is some times because we are  
2                   still frequent fliers with Children's, we do have  
3                   to make the trip into Boston which requires one of  
4                   my three siblings or myself to take some time off  
5                   of work and help my parents take Lily into Boston  
6                   Children's Hospital. If that were the only  
7                   option, I don't know that we would be able to make  
8                   it, but because we have the alternative option, it  
9                   makes it certainly a lot easier.

10                   The commute continues to be long,  
11                   parking is not always easy, but though my sister  
12                   is able to walk, it's very difficult for her  
13                   sometimes to be able to get around. When we go to  
14                   Weymouth, it's all that much easier.

15                   I know that this is in the not so  
16                   distant future a responsibility that will be mine,  
17                   not only to take care of her, but my parents as  
18                   well. Despite that, seeing something that's very  
19                   overwhelming for me, I know that the 2 a.m.  
20                   emergencies will happen, and when they do, if I  
21                   continue to be able to have access to her team at  
22                   Children's, I'll never have to face this burden  
23                   alone.

24                   Thank you so much for allowing me the

1 opportunity to share my personal story. I hope  
2 that you will consider that mine is not the only  
3 one that is like this, and the immense positive  
4 impact this will have on families like mine.  
5 Thank you.

6 DEXTER: Our next -- well, if we have a  
7 State Representative Thomas Stanley out there with  
8 us listening in, can I get you to do a Star 0 -- a  
9 Star 0 so I can get you next in line.

10 Representative Thomas Stanley, can I  
11 get you to do a Star 0 if you're listening to get  
12 you next in line. Thank you.

13 (Pause)

14 REPRESENTATIVE THOMAS STANLEY: Good  
15 evening. My name is Tom Stanley. I am a life  
16 long Waltham resident, and both a member of the  
17 Waltham City Council and Massachusetts House of  
18 Representatives for more than the last 20 years.

19 Thank you for the opportunity to  
20 provide my enthusiastic support of Boston  
21 Children's Hospital, hospital's proposal to build  
22 new beds at its satellite location in Waltham as  
23 part of the department's determination of need  
24 process.

1                   For the past 13 years, Boston  
2                   Children's Hospital at Waltham has been a strong  
3                   partner and good neighbor to our community. Many  
4                   of my constituents have brought their children to  
5                   this facility and to seek outstanding care and  
6                   service.

7                   I am proud to support Boston  
8                   Children's plan to renew and update their existing  
9                   services and support the expansion of services  
10                  which will bring care closer to home.

11                  I am especially heartened to hear  
12                  that Waltham will be home to new comprehensive  
13                  behavioral health treatment beds as there is a  
14                  behavioral health backlog that children are  
15                  experiencing throughout the State.

16                  It is critically important that we  
17                  continue to address the need for psychiatric  
18                  options for children that are (inaudible) in the  
19                  State.

20                  Thank you once more for the  
21                  opportunity to provide my support of Boston  
22                  Children's Hospital's Determination of Need  
23                  application. As always, I greatly appreciate your  
24                  time and respectfully request your approval of

1           this project plan. Thank you.

2                   LARA SZENT-GYORGYI: Thank you.

3                   DEXTER: Our next public comment comes  
4           from Joe Cravero. Your line is open.

5                   JOE CRAVERO: Thank you. My name is Dr.  
6           Joe Cravero and I currently serve as the Chair of  
7           the Department of Anesthesiology Critical Care  
8           Pain Medicine at Boston Children's Hospital.

9                   I've worked at Boston Children's for  
10          ten years focusing on outcomes analysis and the  
11          care we provide in the perioperative venue and  
12          optimizing safety, quality of care at all our  
13          sites.

14                   I'm speaking to support Boston  
15          Children's Hospital proposal to modernize the  
16          existing facilities in Waltham and Weymouth, and  
17          to build an ambulatory surgical center in Needham.

18                   I believe this project will greatly  
19          benefit children, families and communities across  
20          our State, and improve access for patients seeking  
21          life saving or life changing care.

22                   The provision of care by trained  
23          pediatric anesthesiologists have been shown to  
24          improve overall safety and quality of care when

1 infants and young children are involved.

2 Provision of our care in the  
3 ambulatory setting in Needham and Waltham allow us  
4 to bring world leading pediatric anesthesia care  
5 to the ambulatory setting, and to improve access  
6 in this level of anesthesia care to children in  
7 our region.

8 The advanced care we provide includes  
9 a number of things, including the provision of  
10 home-based regional anesthesia, utilizing renal  
11 anesthesia catheters for patients undergoing  
12 various procedures. They accomplish surgeries in  
13 an outpatient setting that would otherwise need to  
14 be done in association with a one or two-day  
15 inpatient stay. This increases convenience,  
16 contributes to cost containment and reduces the  
17 use of perioperative opioids.

18 Our pediatric anesthesia services are  
19 unique in that they include an integrated care for  
20 psychological and emotional needs of pediatric  
21 surgical patients and their families. Our  
22 outpatient anesthesia teams work closely with the  
23 hospital child life specialists to minimize stress  
24 and anxiety.

1           The improvements we provide in  
2           pediatric wellness have been shown to translate  
3           into better behavioral and functional outcomes  
4           after surgery.

5           In addition, we've developed  
6           technologies for interacting remotely with  
7           patients in the postoperative time frame. They  
8           have the availability to evaluate patients via  
9           text messaging, and surveys in the days, weeks  
10          after surgery. The result of this system that  
11          provides the right amount of follow-up and  
12          interaction that a patient or family desire and  
13          urgent interventions when they're needed.

14          The proposed project and investment  
15          will help us extend Boston Children's  
16          anesthesiology care techniques to families and  
17          patients throughout the State and region. It will  
18          ensure that patients and families have access to a  
19          full range of high quality care and convenient and  
20          lower cost settings.

21                 I want to thank you for the  
22                 opportunity to speak in support of this proposal.

23                         LARA SZENT-GYORGYI: Thank you.

24                         DEXTER: Our next public comment comes

1 from Lisa Hogarty. Your line is open.

2 LISA HOGARTY: Good evening. My name is  
3 Lisa Hogarty, I live in Cambridge, Massachusetts,  
4 and I lead the Real Estate and Facilities team at  
5 Boston Children's. And I'm speaking today in  
6 support of this proposed project.

7 My team and I are involved with all  
8 aspects of developing Children's ambulatory  
9 strategy from site selection to construction. We  
10 have the responsibility of ensuring all of our  
11 facilities are designed to meet the diverse needs  
12 of our patients and families from across  
13 Massachusetts.

14 With accessibility as a forefront to  
15 our review, we looked at locations that could  
16 reach children and families in surrounding  
17 communities, especially in the underserved areas  
18 with lower income.

19 Patient and families need to have an  
20 experience with the physical facility that matches  
21 the world class care they receive from us. Every  
22 families travel path to our facilities need to be  
23 short and easy to navigate.

24 Since most of our patients arrive

1 with multiple rolling support such as wheelchairs  
2 and strollers, having a long walk to and from our  
3 entrances is simply not tenable.

4 Another key priority in our  
5 ambulatory planning was the need for additional  
6 operating rooms for our surgical subspecialty  
7 departments.

8 We assessed sites in Framingham,  
9 Natick and Needham as part of our due diligence  
10 process. Ultimately, we selected the locations at  
11 380 First Avenue in Needham for our new ambulatory  
12 surgical center, and the primary reason was based  
13 on its ease of access to and from Route 128 and  
14 other major highways, as well as having convenient  
15 parking adjacent to that site.

16 Since 2011, Boston Children's  
17 affiliated physician practices have been providing  
18 our patients the highest quality of care in the  
19 Stetson Medical Office Building in Weymouth.  
20 Knowing our lease at Stetson expires in June of  
21 2024, we looked at other medical office options in  
22 Braintree, Quincy and Weymouth. We ultimately  
23 chose the site on Libbey Parkway in Weymouth which  
24 is less than a mile from our Stetson building.



1                   This new location will provide  
2                   medical office space for our physician practices,  
3                   and allow us to add hospital support services such  
4                   as laboratory, radiology, physical and  
5                   occupational therapy.

6                   In Waltham where we've been serving  
7                   patients since 2006 and already provide convenient  
8                   parking. We engaged with town officials and  
9                   neighbors over the course of the past several  
10                  years, and based on their feedback, we determined  
11                  the best way forward for that location was to  
12                  renovate and modernize our existing facilities.

13                  Lastly, Boston Children's is  
14                  conscious of other societal (inaudible) such as  
15                  sustainable energy efficient building design and  
16                  the diversity of workforce, especially as it  
17                  relates to well paying union jobs.

18                  We'd like to thank you for your time  
19                  tonight and your support for this very important  
20                  project. Thank you.

21                  LARA SZENT-GYORGYI: Thank you.

22                  DEXTER: Our next public comment comes  
23                  from Vanessa Weisbrod. Your line is open.

24                  VANESSA WEISBROD: Good evening. I'm

1 Vanessa Weisbrod and I live in Needham. My  
2 husband and I have two children ages five and  
3 eight, both of whom are patients of Boston  
4 Children's Hospital where they have received the  
5 highest quality medical care from the most kind,  
6 caring and thoughtful providers.

7 Additionally, I am the director of  
8 the Celiac disease program at Boston Children's  
9 Hospital where I am so proud of the care we  
10 provided to patients, families every single day.

11 I am speaking today in enthusiastic  
12 support of Boston Children's Hospital's proposed  
13 projects in Needham, Waltham and Weymouth.

14 As a Needham resident, I'm going to  
15 speak specifically about our facility. This new  
16 building is going to open so many opportunities  
17 for our communities.

18 One thing I'm particularly excited  
19 about is that the Needham facility will have a  
20 teaching kitchen on the ground floor where we will  
21 be able to offer nutrition education classes for  
22 patients, their families and the surrounding  
23 communities.

24 Patients in my program are treated by

1           one medication, it's not a pill and it's not  
2           injected, it's the food that they eat. Currently,  
3           the only treatment for Celiac disease is a life  
4           long gluten-free diet. This means that every bite  
5           of food that goes into our patient's mouth matter.  
6           That's why a teaching kitchen in Needham is so  
7           exciting for our patient population.

8                         Paired with state of the art GI  
9           clinic that will be in the building with our  
10          expert gastroenterologists, dieticians and social  
11          workers, this will be the most comprehensive  
12          Celiac center in the Country.

13                        Living with a chronic disease is not  
14          easy. It's challenging everywhere; at home, at  
15          school, when traveling, at grandma and grandpa's  
16          house. It takes a community to support these  
17          families and Boston Children's is committed to  
18          providing the necessary tools these families need  
19          to thrive.

20                        A new community space in the Needham  
21          building will offer a space for patient and family  
22          support groups to gather, to learn from one  
23          another and to support each other through the  
24          unique challenges of living with a chronic disease

1 in every day life.

2 The new facility in Needham will  
3 continue to expand access to care, making it  
4 easier for kids and family to receive the  
5 excellent treatments offered by Boston Children's  
6 Hospital providers.

7 I am excited for the new facility as  
8 a parent, as a community member and as a hospital  
9 employee. Thank you so much for the opportunity  
10 to speak tonight.

11 LARA SZENT-GYORGYI: Thank you.

12 DEXTER: Our next public comment comes  
13 from Dr. David Hunter. Dr. Hunter, your line is  
14 open.

15 DAVID HUNTER: Hello, I am Dr. David  
16 Hunter and I'm the Chief of Ophthalmology at  
17 Boston Children's Hospital, and a resident of  
18 Belmont, Massachusetts.

19 I am excited to support this proposal  
20 to modernize the existing facilities at Boston  
21 Children's.

22 Our ophthalmology department has more  
23 than 40 clinicians and it's one of the busiest  
24 departments at Children's Hospital. We are

1           continually adding subspecialty doctors to provide  
2           families access to more than leading experts in  
3           extremely rare and optom vision threatening, or  
4           even life threatening eye conditions; including  
5           pediatric glaucoma, childhood cataract, pediatric  
6           retinal surgery and childhood eye tumors.

7                         We evaluate our patients with the  
8           latest in a growing number of sophisticated  
9           ophthalmic devices and tests. This depth and  
10          breadth of experience attracts the most medically  
11          complex patients not only locally, but also  
12          nationally and internationally.

13                        At the same time, our departments are  
14          severely constrained by a lack of clinical space.  
15          We juggle increasing staff and patients as  
16          effectively as we can within those constraints,  
17          but still, families have to wait for as long as  
18          eight months to get appointments for certain  
19          conditions.

20                        When we move our delicate equipment  
21          around in crowded spaces from room to room like  
22          puzzle pieces just to be able to perform these  
23          necessary tests. There would be tremendous  
24          advantages to having more opportunity for

1           satellite sites and more space at these sites to  
2           offer our families. With more space with each  
3           specialist per session, our visits can be more  
4           efficient and further improve access.

5                         With additional clinical sites,  
6           patient and family travel time would be reduced  
7           and a lot less demands and stress on patients.  
8           They sometimes have to actually return for weekly  
9           examinations over extended periods of time that  
10          their child has a vision threatening condition.

11                        Now, as part of this project our  
12          ophthalmology department hopes to expand in  
13          Weymouth, to create a large clinical satellite in  
14          Needham. If the Needham moves forward, we would  
15          be able to maintain our access for our Waltham  
16          patients, but in a reduced footprint.

17                        So this proposed project will help  
18          our patients in multiple ways. First, it will  
19          increase our space and capacity to keep up with  
20          both patient care, and also in advances in  
21          diagnostic equipment.

22                        Second, it will give broader access  
23          to suburban patients and families. Third, it will  
24          decrease wait times for appointments and the time

1 spent at appointments. Fourth, by allowing  
2 suburban patients to remain closer to their homes,  
3 it will increase our access for our local patients,  
4 as well as those traveling nationally or  
5 internationally for care.

6 Fifth, it will give access to  
7 underserved cities and towns outside of Boston.  
8 And, finally, it will increase our ability to  
9 treat the kind of complex patients that Boston  
10 Children's is known to attract.

11 So, in conclusion, I support this  
12 proposed project that will allow us to provide  
13 appropriate patient access to our services and  
14 enhance the patient experience overall. Thank you  
15 very much.

16 LARA SZENT-GYORGYI: Thank you.

17 DEXTER: Our next public comment comes  
18 from Athos Bousvaros. Your line is open.

19 ATHOS BOUSVAROS: Thank you very much.  
20 My name is Athos Bousvaros, I am the Vice Chair  
21 for Clinical Affairs in the Department in  
22 Pediatrics at Boston Children's Hospital, and I'm  
23 a resident of Lexington, Massachusetts.

24 I'm here to also add my support to

1 the new Boston Children's Hospital initiative, and  
2 I'm going to focus on gastric care.

3 The gastroenterology division at  
4 Boston Children's Hospital has over 50,000 patient  
5 visits per year. They care for children with  
6 complex medical conditions including Crohn's  
7 disease, ulcerative colitis, abdominal pain,  
8 pancreatic disease, liver disease, Celiac disease  
9 and allergic disorders of the GI tract.

10 The hospital's ambulatory clinic in  
11 Boston was established in the 1970's, but this  
12 space is inadequate for us to adequately serve the  
13 needs of our patients. We are, therefore, working  
14 to expand our patient appointments and services at  
15 our clinics outside of Boston, but the space  
16 limits our ability for physicians to see patients.

17 Patients can't always be seen in a  
18 timely manner, which can translate into  
19 potentially preventable hospitalization.

20 The new expansion, which is overdue,  
21 will enable us to provide health care to an ever  
22 increasing patient population comprised solely of  
23 children whose families are in search of timely  
24 and specialized care.



1                   This includes the growth and  
2                   nutrition program that was previously discussed by  
3                   Dr. Fleet, which will focus on caring for children  
4                   who lack financial resources to obtain food, have  
5                   developmental disorders such as autism, are unable  
6                   to take adequate nutrition by mouth, or have  
7                   complex medical needs.

8                   In summary, the health care of  
9                   patients are becoming more complex, both physical  
10                  and behavioral. Focus has increasingly shifted to  
11                  multidisciplinary care in clinics where many  
12                  providers can care for patients so that they don't  
13                  have to make five visits, but rather they can come  
14                  and see five doctors or five providers all at the  
15                  same time, including psychology, social work, pain  
16                  management and other groups.

17                  This proposed increase in services  
18                  will help the Commonwealth in many ways,  
19                  specifically by allowing access in western Mass.,  
20                  to people who don't need to drive into Boston, and  
21                  also freeing up facilities in Boston so that  
22                  people who need Boston can come and be cared for  
23                  there.

24                  Thank you very much for allowing me

1 speak in support of this project.

2 LARA SZENT-GYORGYI: Thank you.

3 DEXTER: Our next public comment will  
4 come from Vincent Coyle. Vincent, your line is  
5 open.

6 VINCENT COYLE: Hi, my name is Vincent  
7 Coyle. I'm a resident of Pembroke, Massachusetts.  
8 I represent the men and women of the Ironworkers  
9 at Local 7 as their business agent. I am also a  
10 trustee of the Quincy and South Shore Building  
11 Trades. I'm here to speak on behalf of the trades  
12 as well.

13 Since Quincy City Hospital has  
14 closed, we wholeheartedly are in favor of the  
15 Boston Children's Hospital coming to Weymouth,  
16 also to our neighbors up north in Waltham and  
17 Needham.

18 Being a parent and making that trip  
19 into Longwood Ave., being stuck in traffic. Now  
20 that my kids are older, this will help families  
21 with the burden of being in traffic, being able to  
22 get that necessary attention that is needed for  
23 the children and their families.

24 So once again, I am in support of

1           these projects. Thank you.

2                   LARA SZENT-GYORGYI: Thank you.

3                   DEXTER: Our next comment will come from  
4 Dr. Richard Garber. And as a reminder, if you'd  
5 like to comment, please press Star 0 to enter the  
6 queue. Dr. Garber, your line is open, sir.

7                   RICHARD GARBER: Thanks. Hi, my name is  
8 Dr. Richard Garber. I live in Wellesley, and I  
9 have been a private pediatric practice in  
10 Framingham for 33 years.

11                   I founded Framingham Pediatrics 28  
12 years ago, and we are now a group of seven  
13 pediatricians and a pediatric nurse practitioner,  
14 and we are proud to be a member of the Boston  
15 Children's Primary Care Alliance.

16                   I am speaking tonight in support of  
17 Boston Children's Hospital's proposed project in  
18 Waltham, Needham and Weymouth.

19                   Bringing the expertise of Boston  
20 Children's and its specialists to the western  
21 suburbs and Needham, and expanding the services  
22 already provided in Waltham will be a tremendous  
23 benefit to the patients and families in the  
24 MetroWest area and beyond.

1           Our relationship with the hospital  
2           and the specialists has allowed us to expand and  
3           improve the services we can offer to patients in  
4           our own office, a concept we refer to as advanced  
5           primary care.

6           But when our patients need pediatric  
7           medical and surgical care beyond what we can offer  
8           to them, they want to be seen by Boston Children's  
9           specialist. We're happy to be able to help  
10          arrange that for them, but they don't want to  
11          drive to and park in Boston if they can avoid it.

12          Seeing specialists outside of Boston  
13          allows patients to save hours of travel time and  
14          aggravation, and often makes a difference between  
15          missing a full day of work and school or not.

16          Although many of our patients live in  
17          Framingham or further west, a trip to here in  
18          Waltham would be far preferable for almost all of  
19          them.

20          Many of our patients have observed  
21          services such as imaging and even doctor visits at  
22          suburban sites that results in lower costs for  
23          them than it is in Boston.

24          Our team is known to coordinate care

1 with specialists because of our shared electronic  
2 health record. A lot can often save costs by  
3 avoiding repetition of medical services that can  
4 occur when prior records are not available through  
5 a specialist.

6 We're very excited about the  
7 opportunity to expand behavioral health services  
8 in Waltham and hopefully come to Needham as well.  
9 These would be huge benefits to our patients and  
10 the patients who live in the western suburbs, and,  
11 frankly, be a very important part, to me, why this  
12 proposal must move forward.

13 Thank you for the opportunity to  
14 speak in support of this proposal tonight.

15 LARA SZENT-GYORGYI: Thank you.

16 DEXTER: Our next commenter will be Mike  
17 Doucette. Mike, your line is open, sir.

18 MIKE DOUCETTE: Yes, good evening. My  
19 name is Mike Doucette, I'm a retired union  
20 ironworker based out of South Boston,  
21 Massachusetts. I'm also a long time resident of  
22 Wilmington, Mass..

23 Having two children, a daughter age  
24 twelve and a son age nine. My son being born with

1 a cleft lip, both cleft and incomplete palate put  
2 quite the burden on us traveling back and forth to  
3 Longwood Avenue. (Inaudible) at the time, three  
4 surgeries before he was one, three additional  
5 surgeries by the age five, and now multiple visits  
6 into the dental facility.

7 We want the best for our family, and  
8 I think the overcrowded facility is time for  
9 expansion. Waltham, Weymouth, Needham are all  
10 readily needed.

11 As a member of the Framingham Union  
12 Ironworks trade, we are in strong support of this  
13 project. I think it's much overdue.

14 On the Covid end, the behavioral  
15 issues and psyche issues, opening up these new  
16 campuses will be a much needed for the State of  
17 Massachusetts.

18 My family strongly supports these  
19 projects. I want to thank all parties involved in  
20 putting this hearing together, and a special  
21 thanks for the opportunity to speak. Thank you  
22 and have a good night.

23 LARA SZENT-GYORGYI: Thank you.

24 DEXTER: Our next comment will come from

1 Matt Selig. Matt, your line is open.

2 MATT SELIG: My name is Matt Selig, I  
3 live in the City of Newton, and I work as the  
4 Executive Director of Health Law Advocate, or HLA.

5 Thank you very much for the chance of  
6 testifying this evening. I'd like to offer my  
7 comments in strong support of Boston Children's  
8 Hospital's proposal.

9 I've worked at HLA since 2005 and  
10 I've been the executive director since 2009. HLA  
11 is a nonprofit public interest law firm that  
12 provides free legal assistance to income eligible  
13 Massachusetts residents to help them overcome  
14 barriers to health care.

15 HLA works extensively with Boston  
16 Children's Hospital, including working together to  
17 help many individual families in low-income  
18 situations access mental health services for  
19 children; and working to advance public policy  
20 reform as members of the Children's Mental Health  
21 Campaign to improve access to mental health  
22 services.

23 HLA's largest program is our mental  
24 health advocacy program for kids or MHAP for kids.

1 MHAP for kids have twelve lawyers based in family  
2 resource centers around the State who help  
3 families in low-income situations overcome  
4 barriers to mental health services for children.

5 Our program receives funding from the  
6 State in the State budget. Our lawyers receive --  
7 our lawyers represent several hundred families  
8 each year. More than half of the children we  
9 assist identify as a person of color.

10 Our lawyers are seeing more and more  
11 children with acute mental illness facing steeper  
12 barriers to the services they need. In our  
13 attorneys' experience working with our clients,  
14 they also see all types of barriers in mental  
15 health services, but the unavailability and  
16 nonexistence of mental health services for kids  
17 rank at the top for families struggling with our  
18 childrens mental health system.

19 According to data collected from the  
20 families we serve and analyzed by the Boston  
21 University School of Public Health, 72 percent of  
22 the families we serve rate bureaucratic delay,  
23 including waiting list as one of their most  
24 significant barriers in mental health care for



1 children. 50 percent of our families reported  
2 that the complete nonexistence of services is one  
3 of their most significant barriers in care.

4 Our experience working directly with  
5 families and the data we have collected from them  
6 tell us there is a very significant lack of  
7 capacity of mental health services for children at  
8 all levels of service.

9 This is why we so strongly support  
10 Boston Children's Hospital's proposal,  
11 particularly a plan to open a new med site partial  
12 hospitalization program in Waltham where they  
13 recently opened new vitally important inpatient  
14 mental health beds.

15 These services are surely needed,  
16 especially now that childrens' mental health needs  
17 are rising so quickly as a result of this  
18 pandemic, racial inequality and other factors.

19 Thank you again so much for the  
20 chance to testify and I hope you will approve  
21 Boston Children's proposal. Thank you.

22 DEXTER: Again, as a reminder, if you'd  
23 like to testify, please press Star 1 to enter the  
24 queue. Our next comment will come from Julee

1 Bolg. Julee, your line is open.

2 JULIE BOLG: Good evening. My name is  
3 Julee Bolg and I reside in Northborough with my  
4 husband.

5 I'm a nurse and the Executive  
6 Director of Satellite Clinical Operations at  
7 Boston Children's Hospital. In this role I have  
8 worked at Boston Children's for over 15 years, and  
9 in our satellites I've witnessed the extraordinary  
10 care our patients and families receive on a daily  
11 basis.

12 The resulting positive experiences  
13 and outcomes with greater than 40 years of  
14 experience working in pediatric hospitals and  
15 health care systems across the country, I can  
16 confidently say that Boston Children's is among  
17 the leaders in providing pediatric care in the  
18 community.

19 Boston Children's has responded to  
20 the needs of our patients and communities for more  
21 than 25 years by bringing specialty ambulatory  
22 care to the community in order to improve access  
23 and convenience, and I think it's really an  
24 understatement to say that we have created

1 something very special.

2 Running my business and nursing  
3 experience and skills, I have a unique perspective  
4 with the amazing things that are taking place in  
5 nursing location and patient care. I am able to  
6 use those insights to collaborate with other  
7 hospital leaders on business strategies that make  
8 our satellites operate as safely and efficiently  
9 as possible.

10 From parking to passing through the  
11 lobby, to arriving at appointments, there's just a  
12 different feel to our satellite facilities. The  
13 satellites are not as crowded as you may find on  
14 our Boston campus so they are easier to navigate,  
15 easier to access, and they enable the child to  
16 stay within a familiar environment closer to home.

17 We have found that this really  
18 resonates with our children and families and helps  
19 them to stay calm when they arrive at our  
20 satellite facilities for visits.

21 Our satellite locations allow us to  
22 provide greater access to the same high quality  
23 care and providers available at our Boston campus,  
24 but to minimize delays in scheduling appointments

1           since we can offer more availability across our  
2           different locations.

3                       Providing ambulatory services in our  
4           community relieves the stress of having to choose  
5           an inconvenient or difficult to get to location.

6                       Our community locations have allowed  
7           us to reach groups of patients we haven't been  
8           able to reach before. For instance, our location  
9           in North Dartmouth was carefully selected as it  
10          enabled families with transportation challenges to  
11          see our Boston Children's providers in a community  
12          closer to home without having to make the ride  
13          into Boston.

14                      The patient experience in our  
15          satellite is high quality and family centered  
16          which is consistent across all of Boston  
17          Children's locations.

18                      And beyond the clinical aspect of  
19          care, providing culturally competent support and  
20          services is a key part of our positive patient  
21          experience.

22                      The depth and breadth of what Boston  
23          Children's does in its facilities and the  
24          communities in which they are located will only be

1 strengthened by the proposed project in Waltham,  
2 Weymouth and Needham. I fully support this  
3 project and look forward to the greater  
4 opportunities they will create. Thank you very  
5 much for this opportunity.

6 LARA SZENT-GYORGYI: Thank you.

7 DEXTER: Again, as a reminder, if you'd  
8 like to enter the queue to testify, please press  
9 Star 1. Our next commenter will come from Monica  
10 Lombardo. Monica, your line is open.

11 MONICA LOMBARDO: Hello, my name is  
12 Monica Lombardo and I'm the Vice President  
13 (inaudible) Center for Boys & Girls Clubs of Metro  
14 South.

15 Through a combination of before and  
16 after school, weekend and summer camp enrichment  
17 programs offered at our clubhouses in Brockton and  
18 Taunton, and at several community based extension  
19 sites, we serve nearly 2,500 youths from over 41  
20 southeastern Massachusetts cities and towns each  
21 year.

22 I'm grateful for the opportunity  
23 tonight to express my enthusiastic support for  
24 Boston Children's Hospital plans to modernize its

1           Waltham and Weymouth facilities, and to build a  
2           new ambulatory surgical center in Needham.

3                   As you are aware, the need for  
4           childrens access to integrated pediatric care,  
5           especially mental and behavioral health care is  
6           great.

7                   We applaud the fact that Boston  
8           Children's is undertaking these plans in a way  
9           that demonstrates its commitment not only to the  
10          health and well-being as children in those  
11          communities, but to addressing the needs of  
12          children and families in surrounding undeserved  
13          communities as well.

14                   This will ensure that families  
15          throughout Massachusetts has access to a full  
16          range of high quality integrated pediatric care  
17          services where and when they need it.

18                   A lack of transportation is one of  
19          the most serious problems facing the families that  
20          we serve in Brockton and Taunton, so we are  
21          especially pleased that families will have greater  
22          access to outpatient services in a much more  
23          convenient location.

24                   Boston Children's presence in our

1 community also provides an important opportunity  
2 to complement and expand upon the services that  
3 Boys & Girls Club of Metro South currently offer.

4 We look forward to collaborating on  
5 ways to better serve club use, their families and  
6 the broader community.

7 I'm confident that Boston Children's  
8 investment in children, families and communities  
9 will have a long lasting impact that will benefit  
10 our community for many years to come.

11 Having benefited greatly personally  
12 from the expertise in the medical teams at Boston  
13 Children's myself over the years having been  
14 diagnosed with juvenile idiopathic arthritis at  
15 the age of two, I knew all too well just how  
16 critical access to high quality care is for  
17 children and their families.

18 I'm honored to have the occasion to  
19 lend my support for Boston Children's now as a  
20 small token of my repayment for all that the  
21 hospital has done for me and my family through the  
22 years.

23 Boys & Girls Clubs of Metro South  
24 appreciate the opportunity to lend our voice in

1 support of Boston Children's proposed project. We  
2 strongly urge the Department of Public Health to  
3 act favorably on the proposed project. Thank you.

4 LARA SZENT-GYORGYI: Thank you.

5 DEXTER: Again, as a reminder, if you'd  
6 like to testify and enter the queue, please press  
7 Star 1. Our next comment is going to come from  
8 Peggy Montlouis. Peggy, your line is open,  
9 please.

10 PEGGY MONTLOUIS: Good evening. My name  
11 is Peggy Montlouis, I live and work as the  
12 community health educator for the Randolph Public  
13 Health Department.

14 I'm speaking this evening to express  
15 my strong support for Boston Children's Hospital's  
16 plan to modernize its Waltham and Weymouth  
17 facilities, and to build a new ambulatory surgical  
18 center in Needham.

19 As you are aware, the needs for  
20 childrens access to integrated pediatric care,  
21 especially mental and behavioral health care is  
22 great.

23 A lack of transportation is one of  
24 the most serious problems facing the families here



1 in Randolph, so we are especially pleased that  
2 families will have greater access to outpatient  
3 services in much more convenient locations.

4 We look forward to collaborating in  
5 ways that better serve our youth, family, clients  
6 and the broader community. I am confident Boston  
7 Children's investment in children, families and  
8 communities will have a long lasting impact that  
9 will benefit our community for many years to come.

10 On behalf of the Town of Randolph  
11 Public Health Department, we appreciate the  
12 opportunity to provide this support to the Boston  
13 Children's proposed project.

14 We strongly urge the Department of  
15 Public Health to act in favor of this proposed  
16 project. Thank you for the opportunity to speak  
17 tonight.

18 LARA SZENT-GYORGYI: Thank you.

19 (Pause)

20 LARA SZENT-GYORGYI: This is Lara  
21 Szent-Gyorgi again. While we're waiting for the  
22 next speaker, just a reminder that we are  
23 accepting written comments through December 19th.  
24 If you would like to submit a written comment, you

1           can do so through e-mail at DPH.DON@state.ma.us;  
2           or you can send that through U.S. Postal Service  
3           at the Determination of Need at Massachusetts  
4           Department of Public Health, 67 Forest Street,  
5           Marlboro, Massachusetts 01752. Thank you.

6                           (Pause)

7                   DEXTER: Our next comment will come from  
8           Matt Borrelli. Matt, your line is open, sir.

9                   MATT BORRELLI: Great, thank you. Good  
10          evening and thank you for the opportunity to speak  
11          tonight. I'm Matt Borrelli, Chair of the Needham  
12          Select Board. I'm speaking on behalf of the Board  
13          and the Town of Needham in strong support of  
14          Boston Children's Hospital's proposed project.

15                       This facility will provide world  
16          class pediatric care in Needham, greatly improving  
17          access to citizens for our residents and for  
18          families in surrounding communities.

19                       This project will also bring job  
20          opportunities and new development, coming to  
21          realize the Town's vision for Needham Crossing as  
22          a premier location for innovative businesses and a  
23          skilled workforce.

24                       Boston Children's Hospital will

1 provide a stable and valuable presence along with  
2 significant economic benefits to Needham and to  
3 the State. We anticipate project construction  
4 will generate 435 million dollars in economic  
5 activity; 2,500 jobs statewide; and 14.25 million  
6 dollars in State and local taxes.

7 Once the site is operational, we  
8 estimate that Needham alone will see a 52 million  
9 dollar increase in economic activity, and 455 new  
10 jobs sustained locally each year. The statewide  
11 annual benefits from this proposal are roughly  
12 four times greater.

13 Lastly, the Town of Needham supports  
14 this project because Boston Children's Hospital is  
15 a strong community partner. Children's has worked  
16 proactively and collaboratively with the Town  
17 leadership to negotiate host community and pilot  
18 agreements under which the hospital will  
19 effectively pay full property taxes on its  
20 buildings and land even though it is a charitable  
21 entity.

22 These agreements will also support  
23 valuable partnerships within the Needham Public  
24 Schools, and new services provided by the Town and

1 our community based organizations.

2 Our 2020 annual town meeting  
3 overwhelmingly approved a zoning change for the  
4 hospital's proposed site clearly signaling the  
5 support in the Needham community and for this  
6 project.

7 I respectfully request that the  
8 Department of Public Health approve Boston  
9 Children's Hospital Determination of Need  
10 Application. And, again, I want to thank you for  
11 the opportunity to speak tonight.

12 LARA SZENT-GYORGYI: Thank you.

13 DEXTER: Again, as a reminder, if you'd  
14 like to enter your testimony or comment, please  
15 press Star 1 to enter the queue. Our next  
16 commenter will be Jonathan Greenwood. Jonathan,  
17 your line is open, sir.

18 JONATHAN GREENWOOD: Thank you. My name  
19 is Jonathan Greenwood and I currently serve as the  
20 senior director of physical therapy, occupational  
21 therapy and rehabilitation services at Boston  
22 Children's Hospital and our pediatric physical  
23 therapists.

24 I'm excited to express my full

1 support for Boston Children's Hospital to develop  
2 satellite services in Needham and Weymouth, and  
3 expand mental health supports and update the  
4 Waltham location, and to implement outpatient  
5 physical therapy and occupational therapy programs  
6 into the surrounding communities in Massachusetts.

7 I'd like to speak to the role of  
8 physical therapy and occupational therapy at  
9 Boston Children's Hospital and how we support  
10 patients and families after -- who often require  
11 increased numbers of visits per week to come see  
12 us.

13 Physical therapy and occupational  
14 therapy is an essential part of surgical recovery,  
15 and our subspecialty in pediatrics offers patients  
16 and families a unique role in their recovery.

17 Physical therapy and occupational  
18 therapy services work with patients from birth  
19 through young adulthood to improve their ability  
20 to function and participate in age appropriate  
21 activities.

22 Visits may involve care delivered on  
23 the same day a child arrives to see another  
24 specialty provider. In these instances, those

1 specialty providers may determine it unsafe for  
2 that child to go home prior to seeing PT or OT for  
3 the following; possibly evaluations and treatments  
4 for the safe use of crutches; receiving a  
5 customized fabricated splint from occupational  
6 therapy for protection; education and training on  
7 safe caregiver transfers; or support for the  
8 family as they bring their injured child home.

9 We appreciate the complexity of care  
10 needed for our patients and families, and we  
11 strive to coordinate that care alongside our  
12 partners in health care in the local communities.

13 The proposed expansion of PT and OT  
14 services in our satellites will provide physical  
15 therapy services for ambulatory patients,  
16 including the evaluation and treatment of children  
17 who've experienced disability, disabling diseases,  
18 congenital conditions, traumatic injuries, and a  
19 host of other conditions that affect the child's  
20 ability to complete their daily tasks.

21 The physical therapy team works  
22 closely with physicians, nurses, patient care  
23 coordinators and others within and outside Boston  
24 Children's Hospital to achieve this goal.

1           Our occupational therapy services are  
2           aimed to help provide patients and their families  
3           the ability to regain and develop the skills  
4           necessary to function and as independent as  
5           possible.

6           I believe locating specialty PT and  
7           OT services close to the family's neighborhood  
8           where we can decrease the burden as well as  
9           increase the access to care.

10           One example is bringing a specialty  
11           equipment clinic to the south shore so that  
12           families do not need to drive their child with  
13           special needs and all of their equipment, for  
14           example, wheelchairs, into Boston from the south  
15           shore, from the Cape, from the south coast.

16           Improving access to services within  
17           the community improves the overall health and  
18           well-being of the community inclusive of PT and OT  
19           services.

20           Thank you for the opportunity to  
21           speak this evening, And I'm in full support of  
22           Boston Children's Hospital proposal.

23           LARA SZENT-GYORGYI: Thank you.

24           DEXTER: Our next commenter will be

1 Andrew Sharpe. Andrew, your line is open.

2 ANDREW SHARPE: Thank you so much. I'm  
3 so happy to be testifying for Boston Children's  
4 Hospital project because our community need this  
5 project, and how it is important for the Cuban  
6 American community, a community that has been  
7 displaced and marginalized.

8 I support this project as Cuban  
9 American folks, over 200,000 of us living in the  
10 State of Massachusetts. We do need access to  
11 health care and a facility for our kids,  
12 especially for persons with disability.

13 I support and I say, yes, to this  
14 project. We need it. Thank you so much for  
15 allowing me to testify, and thank you again. And  
16 I want to thank you Boston Children's Hospital for  
17 your effort. Thank you.

18 LARA SZENT-GYORGYI: Thank you.

19 DEXTER: Again, as a reminder, if you'd  
20 like to enter the queue to comment or testify,  
21 please press Star 1. Again, to enter the queue,  
22 press Star 1.

23 Our next commenter will be Rita  
24 Mendes. Ms. Mendes, your line is now open.



1                   RITA MENDES: Yes, thank you so much. So  
2 my name is Rita Mendes and I am Brockton Counselor  
3 At Large. As elected official in Brockton, I'm  
4 here to speak on behalf of our residents in  
5 Brockton.

6                   The proposed Weymouth facility is an  
7 absolutely critical resource for the children and  
8 families that I represent. It provides access to  
9 the highest quality care, and a broad range of  
10 specialized services without the challenges of a  
11 Boston location.

12                   Brockton is a community that is  
13 already medically underserved, that is very  
14 diverse and faces a poverty great, significantly  
15 higher than the State average. Access to the care  
16 that Boston Children's provides is essential to  
17 our residents. Brockton residents can leave the  
18 port, take the time off from work to navigate the  
19 complicated public transit and to pay for  
20 expensive parking.

21                   So I am in full support of this  
22 project, and I thank you for the opportunity to  
23 speak. Thank you.

24                   LARA SZENT-GYORGYI: Thank you.

1                   DEXTER: Our next commenter will be Kira  
2 Rosa. Ms. Rosa, your line is open.

3                   KIRA ROSA: Good evening. First, I would  
4 like to take this opportunity to thank Children's  
5 Hospital for including Brockton Neighborhood  
6 Health Center in Planning for their community  
7 benefits, expenditures under this determination of  
8 need.

9                   We are so excited about what this  
10 means to the families of Massachusetts, and  
11 specifically, the families that we serve in the  
12 Brockton area.

13                   My name is Kira Rosa and I am a  
14 licensed independent social worker and a project  
15 manager for the TEAM UP grant at Brockton  
16 Neighborhood Health Center.

17                   As a behavioral health clinician, the  
18 plans from Children's Hospital to expand their  
19 services to include a med psyche unit in Waltham  
20 is a much needed answer to a growing need among  
21 children in our area.

22                   As the pandemic has progressed, it  
23 seems that every day brings new change and new  
24 challenges, we sometimes forget about how our

1 children are affected. However, in my day-to-day  
2 work, the hard truth is that these last couple of  
3 years have been more than difficult for them.

4 We have seen an increase in anxiety  
5 and depression symptoms, including suicidal  
6 ideation, especially in our teenage population and  
7 even our adolescent. This has led to many hard  
8 decisions on whether or not to send these children  
9 to hospital level of care.

10 Although we do not make the final  
11 determination of their admittance in such  
12 programs, we are aware that there's a historical  
13 lack of programs in the area to serve them should  
14 be deemed -- should they be deemed in need.

15 The development of this med psyche unit  
16 would go a long way in alleviating some of this  
17 worry. More and more we are seeing our patients  
18 having long stays in ER beds awaiting admittance  
19 to a program capable of providing the help they  
20 need in the moment and this is often  
21 disheartening.

22 During a crisis, a wait list is the  
23 last thing worried parents and their sick children  
24 should have to think about. We are more than

1 grateful that Children's Hospital has recognized  
2 this need and has stepped up with plans to help.

3 To this end, we are so happy to hear  
4 that our community in the Brockton area has been  
5 included in the community benefits priorities of  
6 this determination of need.

7 As I mentioned before, the increase  
8 in mental health needs among our younger community  
9 members has been difficult to watch and to stay on  
10 top of. We do our best to be sure that no child  
11 suffers without help and this grant would go a  
12 long way in helping us maintain this goal.

13 With that being said, we are planning  
14 for our next expansion to meet the growing demand  
15 for the care we provide to the most vulnerable  
16 children in our community. We are excited about  
17 the prospect of coordinating our vision with  
18 Children's Hospital's exciting project in Waltham.

19 I would like to close by once again  
20 thanking Children's Hospital for this opportunity  
21 in giving support to the wonderful and much needed  
22 plans to expand services to our vulnerable  
23 population and especially our children. Thank  
24 you.

1                   LARA SZENT-GYORGYI: Thank you.

2                   DEXTER: Our next commenter will be David  
3 DeMaso. David, your line is now open, sir.

4                   DAVID DEMASO: Thank you. Good evening,  
5 my name is David DeMaso from Boston,  
6 Massachusetts.

7                   As Chief of Psychiatry at Boston  
8 Children's for nearly 20 years and a practicing  
9 child and adolescent psychiatrist in Massachusetts  
10 for over 40 years, I support Boston Children's  
11 proposal to modernize its facilities in Waltham  
12 and Weymouth, and build an ambulatory surgical  
13 center in Needham.

14                   This project will greatly benefit  
15 children, families and communities across our  
16 State, and improve access for patients seeking  
17 life changing medical and behavioral health care.

18                   Boston Children's currently has 49  
19 children boarding at the hospital on a medical  
20 floor or in the emergency room waiting for  
21 placement in an intensive psychiatric treatment  
22 setting. Last winter this number reached into the  
23 sixties. I suspect these numbers to be similar  
24 this winter.

1           We are in the midst of a behavioral  
2 health crisis where children are not receiving  
3 early intervention or affective treatment.

4           In response, Boston Children's is  
5 focused on implementing a responsive psychiatric  
6 care continuum that provide children and families  
7 with the right services, in the right setting, at  
8 the right time.

9           We've opened a twelve bed inpatient  
10 psychiatry unit in Waltham this fall with plans to  
11 build a partial hospitalization unit with space  
12 for eight to ten patients.

13           We're also expanding behavioral  
14 clinical staffing to ensure that patients who are  
15 boarding receive timely evidence based  
16 interventions that allow them to return home  
17 safely.

18           We have greatly expanded access  
19 throughout patient psychiatry services both in  
20 Boston and in Waltham, along with plans to do so  
21 in Weymouth to fulfill our waiting list continuum.

22           Boston Children's understands that an  
23 affective care continuum requires successful  
24 partnerships with primary care pediatric

1 providers, school professionals and community  
2 mental health providers.

3 Our Boston neighborhood partnership  
4 programs provides elementary schools with the  
5 critically needed access to our teams helping  
6 educators, parents and child health professionals  
7 identify psychological stress and behavioral  
8 issues early in a child's life.

9 Our primary care collaborative  
10 program is training primary care providers  
11 statewide and nationally to alleviate some  
12 behavioral services filling critical gaps in the  
13 psychiatric workforce.

14 I've seen Boston Children's  
15 investments in the behavioral health of children,  
16 families and communities make a difference. I'm  
17 fully confident that this proposed project will  
18 provide greater access to a full range of  
19 pediatric behavioral health care services and have  
20 a long lasting impact and benefit future  
21 generations of children and their families. Thank  
22 you for the opportunity to speak tonight.

23 LARA SZENT-GYORGYI: Thank you.

24 DEXTER: Our next comment is going to

1           come from Man Waii Ng. Man Waii, your line is  
2           open.

3                         MAN WAII NG: Thank you so much. Good  
4           evening. My name is Man Waii Ng, I am Chief of  
5           the Department of Dentistry at Boston Children's  
6           Hospital.

7                         I fully support Boston Children's  
8           Hospital's proposal to modernize the existing  
9           facilities in Waltham and Weymouth, and to build  
10          an ambulatory surgical center in Needham.

11                        I believe this project will greatly  
12          benefit children, families and communities across  
13          Massachusetts, and improve access for patients  
14          seeking life saving or life changing care.

15                        The dental department at Boston  
16          Children's Hospital is a safety net for children  
17          living in the Commonwealth of Massachusetts.

18                        Our patient population is very  
19          diverse in terms of race, ethnicity and  
20          socioeconomic status, and also medical complexity.  
21          Seventy percent of our dental patients are covered  
22          by MassHealth Insurance. More than fifty percent  
23          of our patients have medically complex conditions  
24          and/or developmental disabilities and receive



1 their medical care at Boston Children's Hospital.

2 In 2019, pre-pandemic, our department  
3 saw 28,500 outpatient visits, and provided dental  
4 treatment to over 1,000 patients in the operating  
5 room under general anesthesia. Half of the  
6 operating room procedures were completed at the  
7 Lexington outpatient surgical facilities. Seventy  
8 to eighty percent of our patients who receive  
9 operating room treatment live outside of the  
10 Boston urban core area.

11 Over the years, many families have  
12 shared with me their deep appreciation for the  
13 care they receive at Boston Children's. Many  
14 patients are only able to receive their medical  
15 and dental care at Boston Children's.

16 At the same time, many families  
17 living outside of Boston have asked about possible  
18 access to Boston Children's Hospital closer to  
19 their home instead of having to travel into Boston  
20 and the Longwood medical area.

21 I strongly believe that the proposed  
22 project and investment will help to provide access  
23 to more families and more patients, clearly  
24 demonstrating the Hospital's commitment to the

1 health and well-being of children throughout  
2 Massachusetts.

3 The project will ensure that patients  
4 and families have access to a full range of high  
5 quality, integrated pediatric care services in  
6 convenient lower cost settings. In addition, it  
7 will meet the needs of surrounding underserved  
8 communities.

9 I'm competent Boston Children's  
10 growing investment in childrens, families and  
11 communities will have long lasting impact and  
12 benefit future generations of children for many  
13 years to come. I thank you for the opportunity to  
14 speak tonight.

15 LARA SZENT-GYORGYI: Thank you.

16 DEXTER: Again, as a reminder, if you'd  
17 like to testify or comment, please dial Star 1 to  
18 enter the queue. Again, to testify or comment,  
19 please dial Star 1.

20 (Pause)

21 LARA SZENT-GYORGYI: This is Lara  
22 Szent-Gyorgi, we're just going to hold on for just  
23 a few more minutes to see if anybody else would  
24 like to testify.

1 (Pause)

2 DEXTER: Again, as a reminder, if you'd  
3 like to testify or comment, please dial Star 1 to  
4 enter the queue. Dial Star 1 to testify or  
5 comment, please.

6 (Pause)

7 DEXTER: We do have Nicole Oliva on the  
8 line. Nicole, your line is open, please.

9 NICOLE OLIVA: Hi, my name is Nicole. My  
10 son, Parker, has been seen by Dr. Fleet and her  
11 team in the growth and nutrition clinic for about  
12 15 months now.

13 I am an advocate for the placement of  
14 the new growth and nutrition clinic being in  
15 Needham, Massachusetts. I am a resident of  
16 Lexington. We have had to many times go into the  
17 city.

18 My son was born premature. He is a  
19 twin and he was born premature at 33 weeks and had  
20 severe growth nutrition. He was born at three  
21 pounds, six ounces. He was not growing  
22 appropriately after leaving the NICU, and he was  
23 seen and recommended to be seen by Dr. Fleet and  
24 her team in the growth and nutrition clinic at

1 Boston Children's.

2 They made amazing progress with my  
3 son, but after a few months seeing him, we had  
4 agreed for him to be placed on a feeding tube.  
5 During that time, he was admitted to the hospital  
6 for five days at the main Boston Children's  
7 location.

8 We had another newborn at the time  
9 and my husband and I we were trying to juggle  
10 bringing in a child to swap out going back and  
11 forth when he was admitted to the hospital for  
12 observation, and then he was subsequently placed  
13 on a NG feeding tube, so a nasal feeding tube.

14 The nature of a feeding tube with  
15 being an infant, it often comes out and we had to  
16 make many trips, until I was finally trained, back  
17 and forth into the city to get the tube replaced.  
18 It was very difficult.

19 As we know traffic -- as all of us  
20 know, the traffic into Boston and getting into the  
21 City from sounding 128 corridor is often a  
22 nightmare. An hour and a half to get in, and  
23 having another child at home is not ideal.

24 I think this would be a convenient

1 location given that it is placed on the 128  
2 corridor. It reaches a lot of highly trafficked  
3 towns, and I think that the placement of it being  
4 in Needham would be very convenient for people  
5 living in Metro West, north of Boston and south of  
6 the City. I am finished. Thank you.

7 LARA SZENT-GYORGYI: Thank you.

8 DEXTER: Again, as a reminder, if you'd  
9 like to testify or comment, please press Star 1 to  
10 enter the queue. Again, if you'd like to enter  
11 the queue, please press Star 1.

12 (Pause)

13 LARA SZENT-GYORGYI: I think we have  
14 somebody who is trying to get into the queue, so  
15 we're going to give them a few minutes.

16 (Pause)

17 DEXTER: Again, if you'd like to comment,  
18 please press Star 1 to enter the queue. Again,  
19 please press Star 1 to enter the queue and  
20 comment.

21 (Pause)

22 DEXTER: We have Laura Wood. Ms. Wood,  
23 your line is open.

24 LAURA WOOD: Thank you very much. Hello,

1 my name is Laura Wood and I'm a resident of  
2 Belmont, Massachusetts. I serve as the Chief  
3 Nursing Officer at Boston Children's Hospital.

4 I'm speaking in strong support of  
5 Boston Children's proposed project in Waltham,  
6 Weymouth and Needham, and it's clear to me that  
7 the pediatric patients accessing these locations  
8 will truly benefit from the specialized services  
9 delivered by our physicians, clinicians and other  
10 team members.

11 Throughout my tenure at Boston  
12 Children's, I've been fortunate to work with  
13 exceptional nurses and professionals who are  
14 always striving to advance our ability to meet the  
15 complex physical and emotional needs of children  
16 and adolescent.

17 I'd like to address what it means to  
18 offer child and family center of care, the  
19 foundation of the project.

20 Access to child and adolescent  
21 specialty care matters greatly for a wide spectrum  
22 of pediatric conditions. Timely and adequate  
23 diagnostic services not only provide life saving  
24 interventions, but provide true value for the

1 Commonwealth of Massachusetts and their residents  
2 by mitigating the potential for costly and  
3 sometimes tragic consequences associated with  
4 delays or misdiagnoses.

5 Procedures considered standard for  
6 adults often require very different processes for  
7 children. Many details must be integrated to  
8 tailor developmentally focused family eccentric  
9 and equitable child health services. Age  
10 developmental level, past health history, family  
11 context and social determinants of health must all  
12 be considered.

13 The care we deliver and the specialty  
14 services we provide helps to set a child on a  
15 positive trajectory as they manage their own  
16 health care over a lifetime.

17 Boston Children's care delivery model  
18 is intentionally inclusive. Our care processes  
19 are co-created with families. Parents are  
20 encouraged to contribute as active collaborators  
21 with Boston Children's Health Care team members.

22 Boston Children's also formally  
23 engages families via well-established patient  
24 family advisory councils. Child adolescent and

1 family voices change and strengthen what we do.

2 A crucial piece of family centered  
3 care is ensuring that all (inaudible) families  
4 receiving health care and have access to  
5 culturally competent care.

6 Boston Children's is steadfast in our  
7 commitment to further strengthen health equity and  
8 to reduce existing barriers to access.

9 As our proposed project in Waltham  
10 and Needham will provide surgical services, we  
11 will also be able to care for patients closer to  
12 home providing increased access in more convenient  
13 locations.

14 We'll also be able to continue our  
15 pioneering work in performing procedures such as  
16 imaging studies without the use of general  
17 anesthesia. A true innovation of pediatric care  
18 made possible through the work of physicians,  
19 nurses, child life therapists and radiology  
20 technicians who skillfully engage children during  
21 radiologic procedures and enable these exams to be  
22 performed without anesthesia.

23 Furthermore, we excel at pediatric  
24 phlebotomy, something a service will be located in



1 all three sites. Thank you again for the  
2 opportunity to speak tonight.

3 LARA SZENT-GYORGYI: Thank you.

4 DEXTER: If you'd like to testify, please  
5 press Star 1, unmute your phone and clearly state  
6 your name for testifying. Thank you. One moment.

7 (Pause)

8 DEXTER: I currently have no one queued  
9 up.

10 LARA SZENT-GYORGYI: Okay. Thank you.  
11 This is Lara Szent-Gyorgi again. I think we will  
12 wait just a couple of more minutes and see if  
13 anybody would like to testify, and if not, then we  
14 may bring this to a close. But as I said, we'll  
15 wait another couple of minutes.

16 (Pause)

17 LARA SZENT-GYORGYI: Okay. It looks like  
18 I think we've come to a close. It doesn't seem  
19 that there is anybody else who would like to  
20 testify tonight.

21 Once again, we appreciate everybody  
22 taking the time to participate in the hearing.  
23 And as a reminder, all written comments will be  
24 accepted through December 19th. Thank you very

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much. Good evening.  
(Whereupon the public hearing was  
concluded at 7:50 p.m.)