

The applicant states that only one of the four ORs is available for minimally invasive hip replacement surgery because the other ORs cannot accommodate a special type of OR table (Hana Table) that is needed to perform the procedure. This can result in delays in cases and increased costs (pg.6).

Questions: How does this result in increased costs?

It can potentially result in increased costs if the room is being used and an urgent/emergent surgery is needed for another patient. In that case, the urgent/emergent case might need to be transferred to a tertiary facility (therefore adding transportation costs, plus the costs of care in the tertiary center are higher than in our community hospital).

What impact will the Proposed Project have on access to surgical care/procedural care for Athol Hospital patients?

Under the Proposed Project the procedural care performed at Athol Hospital (which is currently limited to endoscopic and minor surgical procedures) will not change. Athol Hospital patients who require anything other than endoscopic and/or minor surgical procedures will still need to receive that care outside of Athol. Surgeons from the Heywood Medical Group have a presence in Athol and provide 24hr call coverage there. Patients who require surgery that cannot be performed at Athol are transferred to Heywood. By expanding the surgical capabilities of the Heywood Hospital campus the Proposed Project will increase the likelihood that Athol Hospital patients who require surgery will be able to have that surgery performed within the Heywood Healthcare system in a timely fashion.

How many of the existing ORs are equipped for/can accommodate minimally invasive procedures? The Application states: *Unfortunately, because ERCPs necessitate a wide array of highly specialized equipment, they too can only be performed in two of Heywood Hospital's four ORs. Unsurprisingly, these two ORs are the same two that can accommodate the Hana table used for minimally-invasive hip replacement surgery. For example, only one of the four operating rooms is large enough to accommodate the special table needed to perform minimally-invasive hip replacement surgery.*

ERCP can be performed in two rooms, although one of them (the one that is under 350sf) is very tight. Similarly, while we have used the Hana table in the two largest rooms, the smaller one was very suboptimal. We try to avoid doing that.

The Application states: *As a result, patients seeking robotic surgery forgo that option or pursue the robotic option in a higher cost tertiary care setting.* If a patient forgoes that option, does that mean they have traditional surgery or no surgery at all?

Due to the limited resources (such as blood products) we do not perform open prostatectomies at Heywood. Therefore, these patients have to see care in tertiary centers.

Community Engagement - Is the Community Based Advisory Committee different from the Community Benefits Advisory Committee (CBAC)?

It is the same board. The naming was changed in 2018.