February 12, 2016

To the Department of Public Health:

We write today in support of Boston Children’s Hospital’s Determination of Need Application for the Boston Children’s Clinical Building (BCCB) and an ambulatory clinical building in Brookline. As the clinical Chiefs of a wide range of clinical departments at Boston Children’s, we can assure you that the need for updated clinical facilities is urgent and that our ability to continue providing the most compassionate, high quality medical services to our patients is deeply dependent on these projects moving forward.

The Need:

While the overall number of inpatients at Boston Children’s has been relatively stable during the past several years, the acuity of our patients continues to rise. We can attribute the increased acuity to both advances in medical care assuring that young patients with complex health issues live longer and our position as the regional leader in providing complex pediatric care. As a result, we face wait times for children with complex conditions and frequently delay or defer procedures due to the lack of space.

In tandem with the general lack of space, the facilities we do have are sub-optimal for providing care today and into the future. While our clinical teams do an outstanding job of offering high quality care in a building that was opened in 1988—before many of today’s routine technologies existed—there is a clear need for upgraded space. The buildings being replaced house 226 of our 404 current beds, the 24 bed neonatal intensive care unit and 10 of our 22 operating rooms.

The challenges with these spaces are many:

- There are a substantial number of double bedded rooms, which is less than ideal from a patient safety/quality perspective (impacting infection control, recovery time, privacy protection); in addition, the setting is less family friendly
- The spaces are not adequate for current technology
- It can be difficult to efficiently deliver multi-disciplinary care

Two specific examples are particularly compelling:

- Our NICU—where the smallest, most vulnerable new lives first enter Boston Children’s—operates in open bays. As a result, it is difficult to provide bedside procedures, optimally monitor neurologic and physiologic progress and maximize infection control efforts. In addition, this environment is a heartbreaking difficult one for families, who have limited options for privacy with their new child during often lengthy stays.
- Our cardiovascular services are currently located in a variety of locations across campus—inpatient, OR, outpatient space, etc. Today’s best practices are clear that consolidating such services into a single space offers a more effective, efficient and patient-friendly experience.
Though the inpatient experience is in dramatic need of improvement, our outpatient needs are also great. The Longwood campus had more than 345,000 ambulatory visits in 2014. This is despite continued investments in and support of satellite facilities to address this pressure. With a nearly 50 year old building the site of our primary ambulatory programs, neither the volume of patients or their needs will be effectively addressed in the future without significant changes.

**The solution:**

We are confident that the process undertaken by Boston Children’s to plan for the current and future needs of our patients has been thoughtful, comprehensive and highly focused on maximizing our ability to provide outstanding, high-quality, cost-effective care.

The program provides critical upgrades, including:

- an expanded state-of-the-art NICU featuring single rooms
- a streamlined, interdisciplinary Heart Center with increased intensive care capacity
- increased critical care beds to serve our high-acuity population
- elimination of all double-rooms, ensuring that all families have privacy, improving the patient/family experience and reducing infections
- hi-tech information hubs enabling better collaboration across teams
- Replace outdated ORs with spaces that are appropriately sized and located
- expanded high-tech environments, including new hybrid ORs and an Interventional Radiology suite

As clinician leaders of this hospital, we can tell you that these improvements will make all the difference in both the provider and patient experience. More than 300 clinicians and support staff have been intimately involved in the planning and design for these spaces. From being able to fit the full clinical team in the patient room to conduct examinations and assuring that it is easy for a parent to spend the night to effectively integrate current technology and support innovative best practices, we are confident that the improved clinical facilities will allow us to better support our patients and their families.

**Green space:**

Prouty Garden is certainly a special place and we share the sense of loss that has been voiced by members of the staff, families and community. From the outset, the Boston Children’s team made every effort to find an alternative location for this new building – exploring more than 15 potential alternatives. When it became clear that the site that best met the clinical needs of the hospital would impact Prouty Garden, the team thought carefully about how to address the ongoing need for green space and respite space for our community.

With input from both the Prouty Foundation and Greenspace Committee, Boston Children’s has developed a plan that offers different, but no less vital green and respite space opportunities for our community. Ultimately, the Longwood campus will have approximately 25% more green
space than it does today, including locations throughout the campus that support healing year round. For the first time, we will be able to offer the peace, serenity and respite of open and green space to patients and families who cannot go outside—or even leave their units.

We thank you for this opportunity to voice our support for these critical upgrades.

Sincerely,

Michael Cunningham, MD
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Pedro Del Nido, MD
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