By Electronic Submittal

Victoria Veltri, JD, LLM
Executive Director
Office of Health Strategy
Health Systems Planning Unit
450 Capitol Avenue
MS#51OHS P.O. Box 340308
Hartford, CT 06134-0308

Re: Comments concerning Certificate of Need Application Docket Number: 20-32394-CON
Termination of Obstetrics Services at Windham Hospital

Dear Ms. Veltri:

I appreciate the opportunity to comment on the proposed closure of labor and delivery services at Windham Hospital.

I understand that the applicant has provided a number of reasons for closing the obstetrics unit. These include the choice of patients to have their babies in larger hospitals and the concern that a low volume of births will put patient safety at risk, and other local and national workforce challenges. But the fact remains that permanently closing the birthing unit will leave vulnerable families in the region—those who do not have the choice of driving to Norwich, Manchester or Hartford in order to give birth—without an essential healthcare service.

Earlier this year, the state Department of Economic and Community Development ranked Windham as Connecticut's most fiscally and economically distressed municipality based on population, unemployment, poverty, educational attainment and property value. Windham has been one of the top 25 most distressed municipalities in the state for over ten years.

The Office of Health Strategy and its predecessor agency have only granted the requests of two hospitals to close their obstetrics units since a CON became required in 2011. These obstetrics units were at the former New Milford and Milford Hospitals, neither of which were located in a distressed municipality.

I am concerned that Windham Hospital suspended obstetric services in 2020, without seeking a certificate of need as required by CGS 19a-638 and without a public hearing prior to the closure. Although the hospital has made efforts to communicate this change to expectant parents and
accommodate patients who need transportation assistance, this does not erase the fact that the impacted families are among the most underserved individuals in the state. According to Windham Hospital’s 2021 Community Health Needs Assessment, the towns that comprise the hospital’s service area are Windham, Chaplin (a distressed municipality), Columbia, Coventry, Hampton, Lebanon, Mansfield, and Scotland.

I am particularly concerned that the assessment reports that residents of these towns already face obstacles to health, including “racial and ethnic health and economic disparities associated with systemic racism and language barriers,” poverty, lack of access to health insurance and routine healthcare, unemployment, food and housing insecurity, and lack of transportation. These factors already result in worse health outcomes in the region than the state overall when it comes to life expectancy, mental health and substance use, late or no prenatal care, low birthweight babies and maternal mortality among Black mothers. These are poor outcomes our health system must strive to rectify by adding services, not taking them away.

Further, asking these parents to travel an additional 25-45 minutes in order to undergo a major medical procedure at another hospital is not a mere inconvenience; it creates additional burden and risk for an already vulnerable mother and baby.

To that end, I strongly urge your office to closely examine this application and balance the benefits of ending obstetric services at Windham Hospital with the consequences of doing so and consider what steps might be taken to bolster community-based prenatal and postpartum services for this high need population.

Finally, the statutes charge my office with ensuring that charitable gifts are used for purposes consistent with donative intent. Should OHS ultimately approve this application, we will ensure any charitable funds intended to support obstetric services at Windham Hospital continue to serve the Windham service area in a similar capacity.

Thank you for the opportunity to comment on this important matter.

Very truly yours,

WILLIAM TONG