



**Interventional  
Suite  
at Bayhealth  
Hospital, Sussex  
Campus**

Delaware Health  
Resources Board

August 28, 2025



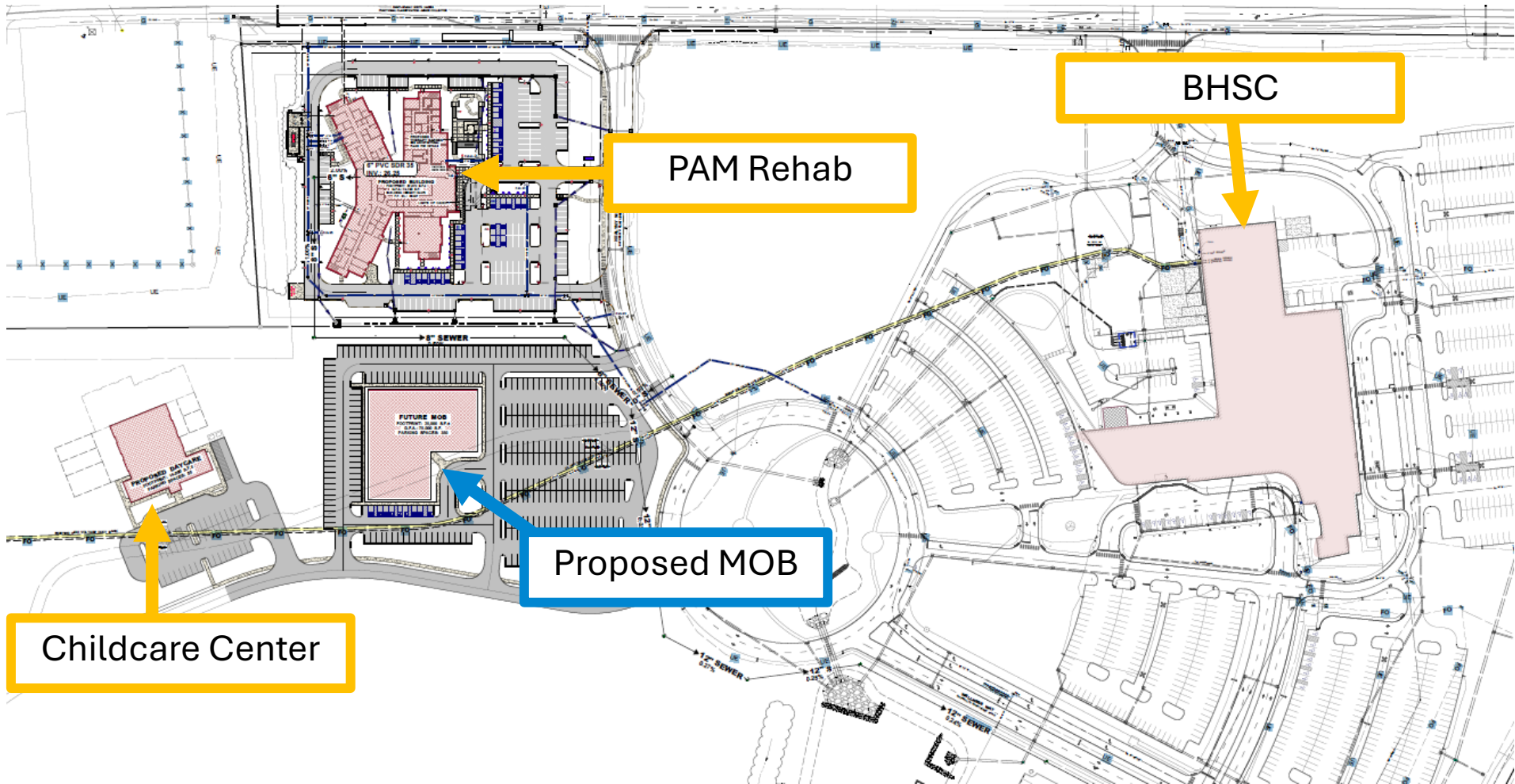
# What is an Interventional Suite?

- Operating Room (OR) – like setting but with dedicated imaging
- Minimally invasive vs. open surgery
  - Diagnose and treat organs, vascular system, tumors, and more
- Use x-ray technology to guide catheter to access an organ, vascular system, tumors and more
- Procedures usually preformed under sedation or local anesthesia
- Typically located separate from the OR

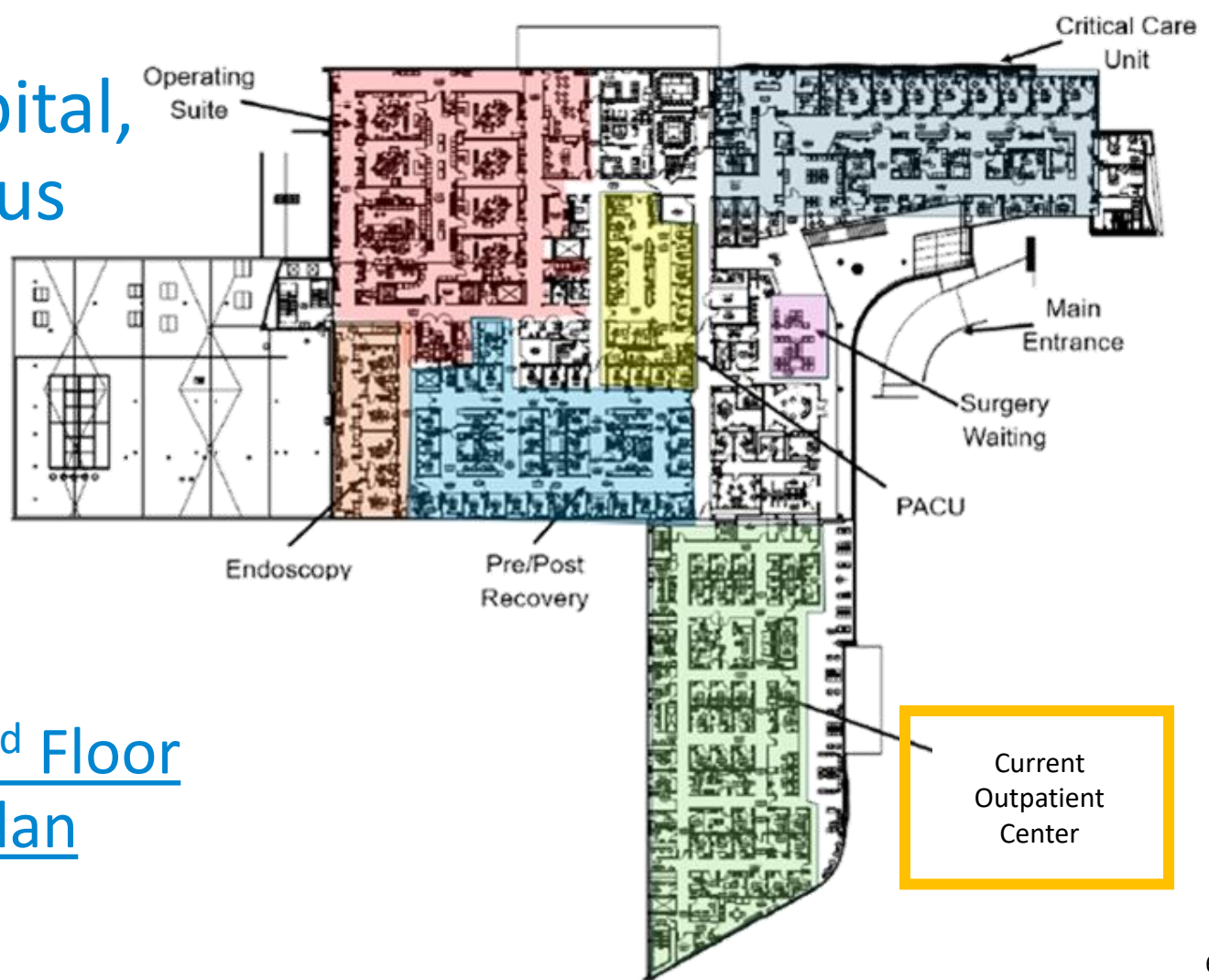


- Construct a dedicated interventional suite at Sussex Campus
  - Location: 2nd floor in the Outpatient Center
  - Create up to four interventional rooms
    - 1 Room: Interventional radiology
    - 2 Rooms: Interventional neurology / cardiology / EP
    - Shell 1 room for future expansion
  - Relocate specialty practices to a proposed new medical office building
    - General surgery
    - Orthopedics
    - Gastroenterology
    - Vascular surgery

# Proposed Medical Office Building (MOB) Site



# Bayhealth Hospital, Sussex Campus

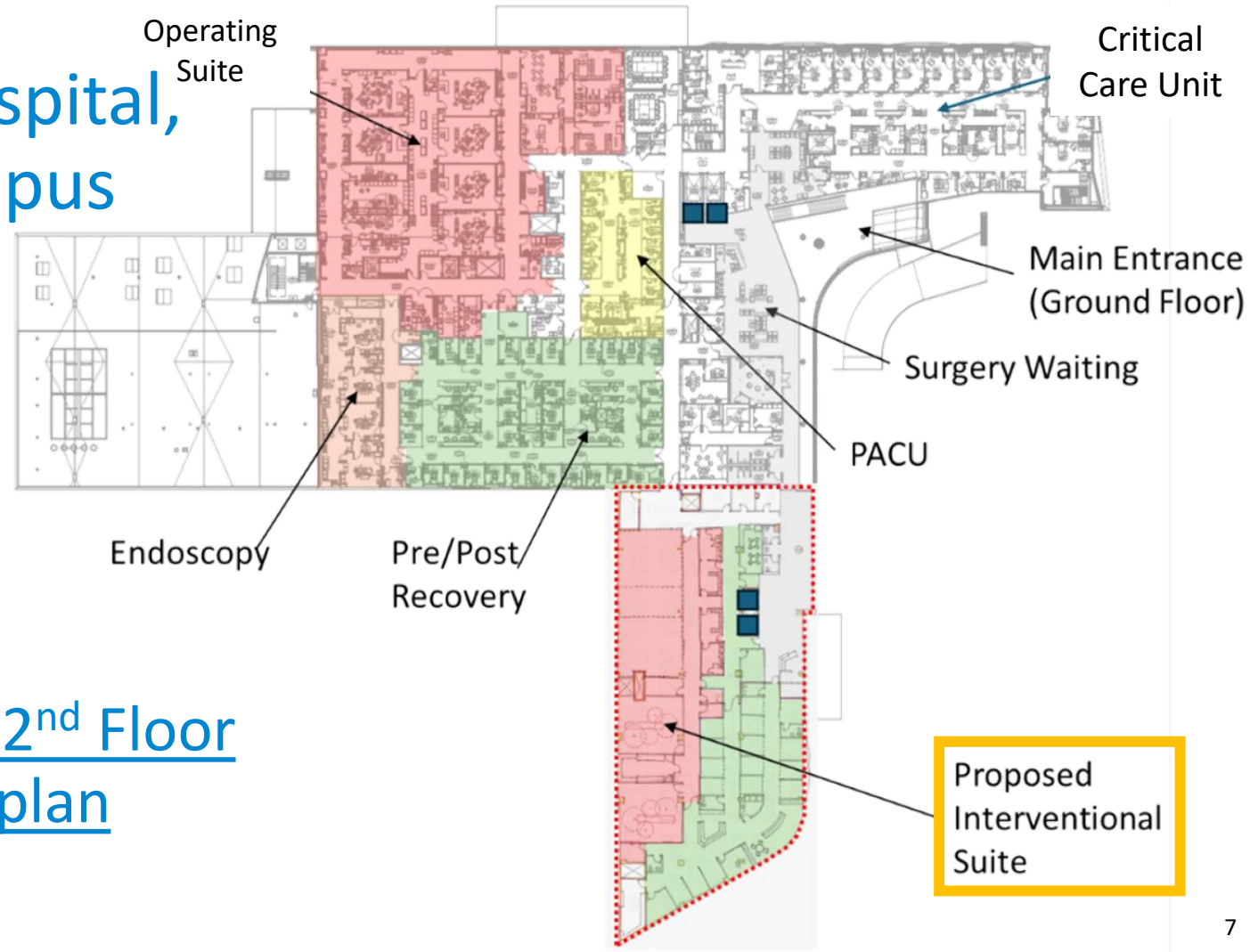


## Current 2<sup>nd</sup> Floor Floorplan



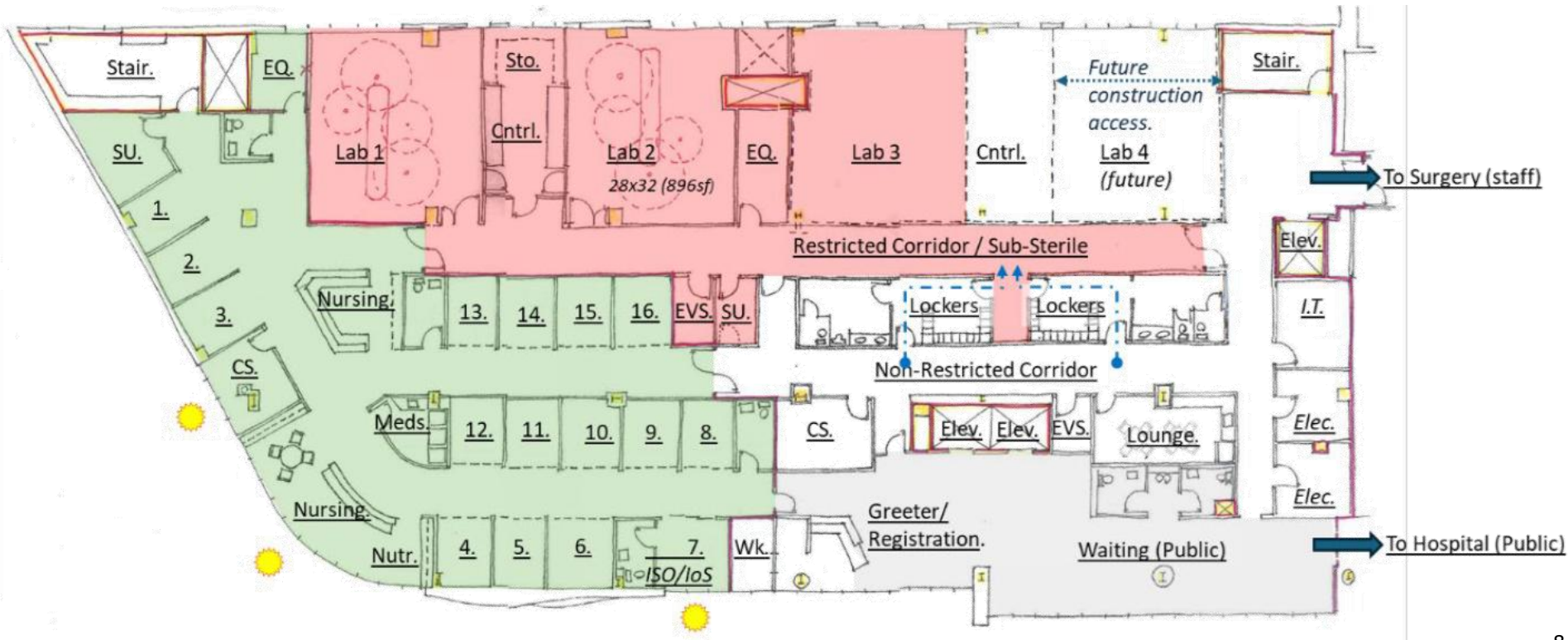
# Bayhealth Hospital, Sussex Campus

## Proposed 2<sup>nd</sup> Floor Floorplan



# Bayhealth Hospital, Sussex Campus

## Proposed Interventional Suite Floorplan





# Timeline

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Milestone	Completion Date
Design of MOB	January 2026
Design of Interventional Suite	June 2026
Construction of MOB	August 2027
Construction of Interventional Suite	September 2028

- Interventional Suite services
  - Interventional radiology
  - Cardiac catheterization
  - Electrophysiology
  - Interventional neurology

- Improved ability to recruit interventional physicians
  - No full-time interventional cardiologists/neurologists currently at Sussex Campus
- Improved capacity to ensure access and quality care for growing services
  - Service expansion is limited due to room capacity constraints
  - Sussex residents are transferred to Kent Campus or Beebe for these services
- Physicians will struggle to secure consistent block time leading to delays
  - 4 Services utilizing the same room

# Statutory Criteria Review: SC 1

## Relationship of the Proposed Project to the Health Resources Management Plan

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- Improved access
  - Patients have ready access to minimally invasive interventional procedures
    - Lower risk of bleeding infection, and pain
    - Lower length of stay, reducing risk and cost
  - Increased recruitment of interventional physicians to a service area that is increasing in both utilization of service and population growth/aging

# Statutory Criteria Review: SC 1

## Relationship of the Proposed Project to the Health Resources Management Plan

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- Improved quality of care
  - Prevention of transfers, and delays of care
  - Reduced need for open surgical procedures
- Cost of care impact
  - None: Prices and contracted rates will not change

# Statutory Criteria Review: SC 1

## Relationship of the Proposed Project to the Health Resources Management Plan

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- Continuity of care / care coordination
  - Participation in Accountable Care Organization
  - Introducing chronic care managers in Bayhealth practices
  - Dedicated diabetes and congestive heart failure clinics
  - Epic Electronic Health Record
- Participation in DHIN
- Bayhealth provided over \$92 million in free care in FY 24

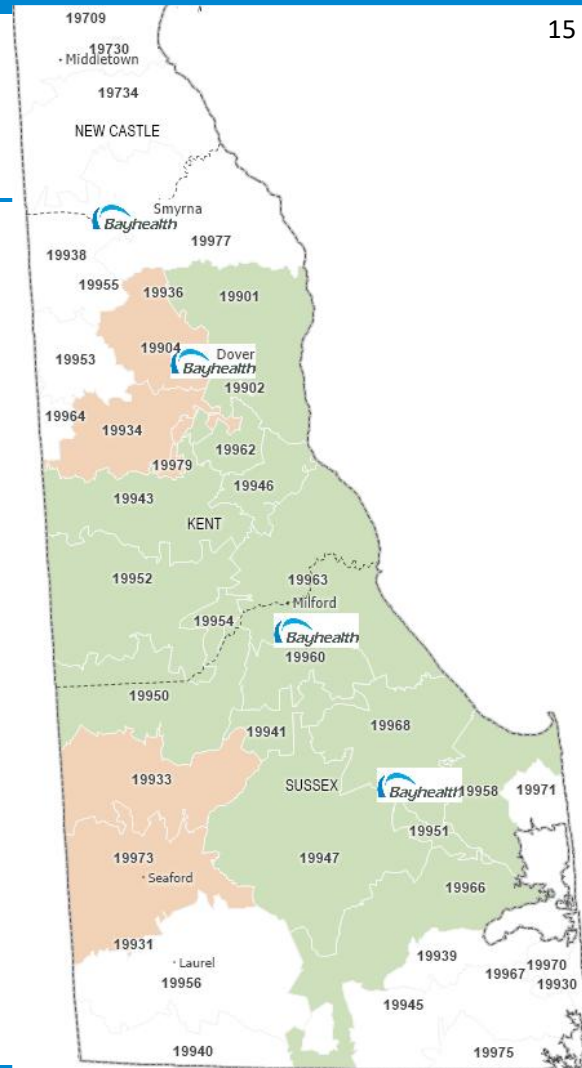


# Statutory Criteria Review: SC 2

## Need of the Population for the Proposed Project



Service Area Population				
	CY 2024	CY 2029	Population Inc./ (Dec.) 2024-2029	% Growth 2024-2029
Service Area Population: Total	326,015	348,181	22,166	6.8%
<b>Service Area Population: 65+</b>	<b>80,455</b>	<b>93,988</b>	<b>13,533</b>	<b>16.8%</b>
Source: Stratasan, ESRI Demographics, July 2024.				



# Statutory Criteria Review: SC 2

## Need of the Population for the Proposed Project

- BHSC Interventional Utilization

	FY 2021	FY 2022	FY 2023	FY 2024	FY2025
Total Cath and EP Cases	59	57	94	223	237
Total IR Cases	486	509	578	564	595
<b>Total Interventional Cases</b>	<b>545</b>	<b>566</b>	<b>672</b>	<b>787</b>	<b>832</b>

Source: Bayhealth Sussex internal data

- Transfers from BHSC to BHKC

	2022	2023	2024	2025 (annualized)
Total Transfers	62	69	88	108
Average Transfer Time (Hours)	1.97	2.73	2.68	2.45

Source: Bayhealth Sussex internal data

# Statutory Criteria Review: SC 2

## Need of the Population for the Proposed Project

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- Capacity constraints for current and future patients
  - Current transfer trend will only increase
  - No full-time interventional cardiologists/neurologists currently at Sussex Campus
  - Service expansion is limited due to room capacity constraints
    - Sussex residents are sent to Kent Campus or Beebe for these services
- Other factors:
  - Allows for current OR space to be utilized for other OR services

# Statutory Criteria Review: SC 3

## Availability of Less Costly / More Effective Alternatives

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- Continue utilizing OR 2 for interventional procedures and transfer cases to other hospitals
  - Pros:
    - Low cost associated with it
  - Cons:
    - It does not solve the current and future issues that the interventional services are experiencing
      - Block time scheduling issues for physicians
      - Growing transfers due to capacity and limited procedures
    - Unable to expand interventional services

# Statutory Criteria Review: SC 3

## Availability of Less Costly / More Effective Alternatives

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- Proposed approach
  - Addresses both current and future capacity constraints
  - Improves ability to recruit interventional physicians
  - Improves quality of care by reducing transfers and making minimally invasive procedures available to the population
  - Adds capacity to the Hospital's OR services

# Statutory Criteria Review: SC 4

## The Proposed Project Should Not Have an Adverse Impact on Other Health Care Providers

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- The Project serves to better accommodate patients primarily being served by Bayhealth
  - Bayhealth Hospital, Sussex Campus only Sussex County hospital without interventional suite
- Minimal impact on Beebe Healthcare; offset by population growth
- Bayhealth will continue to collaborate with other hospitals
- Patients will continue to be transferred to appropriate facilities for services unavailable at Bayhealth



# Statutory Criteria Review: SC 5

## Immediate and Long-Term Viability of Proposed Project

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- Capital Costs: \$21 Million
- Sufficient cash reserves to fund project
- Bayhealth bonds are rated AA-
- Strong financial position
- Project is financially feasible
- Bayhealth will continue efforts to retain and recruit staff to meet the growing patient demand

# Statutory Criteria Review: SC 6

## Effect of Project on Costs and Charges

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- Bayhealth will not increase charges to offset construction costs or increased operating expenses
- Quality and efficiency should improve
  - Infections/complications and related costs should be reduced

# Statutory Criteria Review: SC 7

## Effect on Quality of Health Care

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- Improved access
  - Attract full-time interventional physicians to Sussex Campus
  - Sussex residents can be treated at Sussex Campus
  - Patients will have timely access to interventional services

# Statutory Criteria Review: SC 7

## Effect on Quality of Health Care

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- Improved quality of care
  - Current and future capacity issue within the OR addressed
    - Physicians will be able to secure consistent block time eliminating delays in cases
    - Prevention of time-consuming transfers to Kent and Beebe
  - Shorter length of stay
  - Less stress on patients
  - Improved patient experience

*Thank You*