

August 10, 2022

Sandra Greene, DrPH, Chair

State Health Coordinating Council

North Carolina Division of Health Service Regulation

Healthcare Planning and Certificate of Need Section

2704 Mail Service Center

Raleigh, NC 27699-2704

Re: Support for WakeMed's Petition for an Adjusted Need Determination for one Additional Linear Accelerator in Service Area 20

Dear Dr. Greene and Members of the State Health Coordinating Council:

When our group of 6 African-American female physicians joined together to “do something” about the COVID pandemic which disproportionately was taking the lives of black and brown people, we had no idea that our small grassroots efforts would grow and lead to 14,000 “shots in arms” and the vaccination of thousands of people. We also did not know that the initial benefits of getting people vaccinated would continue years later where it has been shown in 2022 that the vaccination equity gap in North Carolina has almost been eliminated amongst African Americans and has been eliminated amongst the Latinx community. Our model was simple and effective. We found that by collaborating with trusted community partners in getting the word out about COVID vaccination efforts, being available for questions, and going directly into the community to provide the vaccinations was a highly effective model. This model has been repeatedly discussed as to lending to why NC has been a leader in vaccine equity compared with other states and has been touted as a national model. We proved that breaking down health inequities can work but it requires strategic, well-placed resources in the hands of trusted community messengers and placed in the heart of the communities we wish to see the change.

Cancer remains the leading cause of death in Wake County. Even though the cancer rates have fallen across racial groups, there continues to be a consistent and significant disparity amongst African Americans, particularly African American males. According to the American Society of Clinical Oncology (ASCO), “Racial and ethnic minorities face poorer outcomes, are less frequently enrolled in clinical trials and are less likely to be offered palliative care, genetic testing and other critical care. Specifically, African Americans have the highest death rate and shortest length of survival of any racial/ethnic group for most cancers.” By having comprehensive cancer treatment at WakeMed, we hope that longstanding cancer inequities will finally close.

WakeMed is located in the heart of the 27610 zip-code, an area whose residents are largely African American at 66% of the population. WakeMed is also a trusted community provider. Having comprehensive cancer resources within this community and from this trusted healthcare organization, will eliminate many barriers to cancer treatment such as access to transportation and patient to provider trust.

We believe that this model will be effective with reducing the health inequities with many health conditions including cancer. And for this reason, we are in full support of having a comprehensive cancer program with radiation oncology services including a Linear Accelerator in service area 20 as requested by WakeMed Cancer Care.

Respectfully submitted,

Sister Circle of Wake County

Rasheeda Monroe

Michele Benoit-Wilson

Netasha McLawhorn

Jacqueline Hicks

Tiffany Lowe-Clayton

Nerissa Price