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Before the Committee on Health, Hospitals & Human Services

The Honorable Ray Fonseca, Chairman

36th Legislature of the United States Virgin Islands

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**Status of the Charlotte Kimelman Cancer Institute (CKCI) and
Breast Imaging Services at Schneider Regional Medical Center**

Good morning, Honorable Senator Ray Fonseca, Chairman of the Committee on Health, Hospitals and Human Services; Senators of the 36th Legislature of the U.S. Virgin Islands present; and all listening and viewing. I am Darlene Baptiste, Chief Executive Officer for the Governor Juan F. Luis Hospital and Medical Center (JFL) and Schneider Regional Medical Center (SRMC). I am joined today by:

- Dr. Jacquelyn B. Dunmore-Griffith, Radiation Oncologist;
- Mr. Darryl Smalls, Executive Director of the Territorial Hospital Redevelopment Team (THRT); and
- Ms. Angela Warner, Administrator of the Charlotte Kimelman Cancer Institute (CKCI).

They are here to support this presentation and assist with any questions.

Thank you for the opportunity to update the Committee on the status of the Charlotte Kimelman Cancer Institute (CKCI) and breast imaging services at Schneider Regional Medical Center (SRMC).

Today, I will provide an overview of CKCI's transition from construction to operational readiness. The Territorial Hospital Redevelopment Team (THRT) will address construction progress and project completion. My testimony will focus on SRMC's operational preparedness, including workforce readiness, patient service planning, financial sustainability, and steps to ensure safe and responsible opening.

Additionally, I will update you on breast imaging services at SRMC, including the status of our mammography program and plans to maintain access to breast cancer screening.

Charlotte Kimelman Cancer Institute

The Charlotte Kimelman Cancer Institute is one of the Territory's most significant healthcare investments. While substantial progress has been made, our priority is not just opening a facility; it is ensuring that clinical, operational, and regulatory requirements are completed so that patients receive safe, high-quality care.

Construction Status and Facility Readiness

I am pleased to report that construction of the Charlotte Kimelman Cancer Institute is 95% complete. The facility has achieved substantial completion, with all major building systems, including HVAC, electrical, emergency power, fire protection, water storage, and building automation, installed and operational. The project has also met the required redundancy for critical infrastructure, ensuring reliability and resilience.

The CT Simulator and Linear Accelerator have been installed and are now undergoing commissioning, calibration, acceptance testing, and radiation safety verification prior to clinical use. Remaining work is limited to owner-directed punch-list items and final finish work, which are expected to be completed soon.

For further details on the construction status of CKCI, please refer to the testimony of Executive Director Smalls.

Operational Readiness

While the facility is nearly complete, we are now focused on operational readiness.

Operational readiness includes the clinical, operational, administrative, and regulatory steps required to ensure the Institute is fully prepared to begin patient care safely. These efforts are underway in parallel and involve establishing clinical governance, workforce readiness, operational systems, quality assurance, regulatory compliance, and patient care processes. Current operational activities include:

- Commissioning and validation of the Linear Accelerator (LINAC) and CT Simulator;
- Integration of the Radiation Oncology electronic medical record;
- Completion of required regulatory and radiation safety requirements;
- Final procurement and installation of operational equipment, information technology, and medical supplies;
- Recruitment, onboarding, and training of essential personnel; and
- Final validation of clinical workflows, policies, and quality assurance processes.

We have also made progress in establishing the clinical infrastructure needed to reopen CKCI safely. This includes recruiting and onboarding Radiation Oncologist, Dr. Jacquelyn Dunmore-Griffith, and CKCI Administrator, Angela Warner. Their leadership, along with collaboration from our consulting Medical Physicist and Dosimetrist, has been essential in developing the Radiation Oncology program framework and advancing the staffing plan, policies, clinical protocols, and quality assurance processes required to begin patient care safely.

Workforce

Recruitment continues for the specialized clinical and operational positions needed to support the Institute's multidisciplinary model of care. These roles include radiation therapy professionals, medical physicists, oncology nursing support, patient navigators, pharmacy personnel, and the administrative and technical staff for daily operations.

Our staffing strategy aligns with the Institute's implementation schedule. As we reach operational readiness, we recruit, onboard, and train personnel to ensure they are fully prepared before patient services begin. This phased approach supports operational readiness and responsible stewardship of SRMC's financial resources.

Patient Care Planning

At launch, CKCI will offer radiation oncology services supported by a multidisciplinary team including diagnostic imaging, laboratory, pharmacy, nursing, patient navigation, and other hospital-based support services. This integrated model promotes continuity of care, enhances provider coordination, and supports patients throughout treatment.

Because cancer care often requires multiple specialties, SRMC is building collaborative relationships to support timely referrals for services not yet available at CKCI, while expanding local capabilities as the program develops.

To support this long-term vision, funding for a Positron Emission Tomography/Computed Tomography (PET/CT) scanner at CKCI was approved through Community Project Funding by the U.S. House of Representatives. Once operational, PET/CT imaging will enhance the Territory's cancer diagnostics by improving disease staging, treatment planning, and post-treatment surveillance, while reducing the need for patients to travel off-island.

Current collaborative efforts involve the American Cancer Society, Cancer Support Virgin Islands, the Virgin Islands Department of Health, the Yvonne A. Galiber Foundation, and various community organizations dedicated to patient navigation and education.

These partnerships focus on improving patient and financial navigation, delivering community education, supporting survivorship programs, facilitating support groups, providing travel assistance, and coordinating resources efficiently.

Our goal is to offer patients a seamless experience from diagnosis and treatment through follow-up care, while minimizing off-island travel whenever clinically appropriate.

Financial Sustainability

Executive Leadership has developed FY 2027 operating budget to support the Charlotte Kimelman Cancer Institute's first full year of operations. The budget allocates approximately \$4.9 million for personnel, medical supplies, pharmaceuticals, technology, utilities, maintenance, and other resources essential for safe radiation oncology services. Funding will come from projected patient service revenue, Government of the Virgin Islands appropriations, and other operating sources. As the Institute begins operations, Executive Leadership will closely monitor financial performance to ensure sustainability and maintain high-quality cancer care.

Breast Imaging Services at Schneider Regional Medical Center

In December 2023, the mammography system experienced a software issue that temporarily affected breast cancer screening services. SRMC worked closely with the manufacturer to implement the necessary software updates, and services were subsequently restored.

In April 2024, the manufacturer informed SRMC that the mammography platform had reached the end of its product life cycle and that support, including replacement parts and technical service, would end after December 31, 2024. This decision affects all healthcare organizations nationwide using this equipment, not just SRMC.

Currently, the mammography unit is not operational. The end of manufacturer support has severely limited our ability to maintain the equipment and underscores the need to replace the system to restore reliable breast imaging services.

Despite these challenges, our priority has been to maintain access to breast imaging services and minimize delays in patient care. When service limitations have occurred, our Radiology team has communicated with patients, coordinated appointments, and arranged alternatives as needed to reduce delays in screening and diagnostic care.

Executive Leadership and the Radiology Department are evaluating long-term replacement options to ensure reliable and uninterrupted mammography services.

We are currently evaluating replacement technology and seeking funding to procure a new mammography system and ensure the long-term sustainability of breast imaging services at SRMC.

Until replacement equipment is installed, SRMC will continue to communicate proactively with patients about service availability, coordinate alternative arrangements as needed, and expedite procurement to restore reliable breast imaging services as soon as possible.

We also appreciate the continued interest and support of this Committee and the 36th Legislature for advancing efforts to assist in acquiring replacement mammography equipment.

Conclusion

Thank you for the opportunity to update you on the Charlotte Kimelman Cancer Institute and breast imaging services at Schneider Regional Medical Center.

As we prepare to reopen the Charlotte Kimelman Cancer Institute, our priority is to meet all operational, clinical, and regulatory requirements to ensure safe, high-quality cancer care from day one. While work remains, we are confident in our progress.

We are also committed to restoring reliable breast imaging services and expanding cancer screening for women in the Virgin Islands. Executive Leadership will continue working with partners to enhance local access to quality cancer care and improve health outcomes in our community.

On behalf of the Governing Board, Executive Leadership Team, physicians, nurses, employees, and community partners of Schneider Regional Medical Center, I thank the Committee for its

continued support of healthcare in the Virgin Islands and for the opportunity to provide this update.

We remain committed to working with the Legislature as we complete the final steps necessary to reopen the Charlotte Kimelman Cancer Institute and continue strengthening access to quality healthcare throughout our Territory.

Mr. Chairman, this concludes my testimony. I would be pleased to answer any questions the Committee may have.