

8/22/18

Statement in opposition to the application to the MA DPH Determination of Need application by Medford Surgical Center, LLC. -Cathy Liu- [REDACTED]

I have been a neighbor (the hospital is behind my house and also 2 doors down on the same street as my house) for 54 years. I am here to provide a statement of opposition to the new construction and operation of an ambulatory surgical unit on the grounds of the Lawrence Memorial Hospital. This is largely in part to the lack of transparency and consideration of the community and abutters of the hospital, and, actually to high potential of risk to public safety in the area abutting the hospital. Per the hospital, these have not been researched and we have found no adequate response from the hospital to our concerns.

I am addressing Factor 1- "evidence of community engagement" - under consideration in the MSC application. I have attempted to ascertain what the term "community" is from the DoN. No one that I have spoken with at this point has been able to respond as to whether this is a term of art related to a federal or state health initiative, or if it is defined in the basic and common use of the word, which I will synopsise to be a body or group that shares a common responsibility or interest. There was a mention that perhaps it was to define the service population/communities of the hospital. I will mention address how the hospital has failed Medford and its abutters in both regards.

On page 21 of their Determination of Need Draft application submitted to the DoN, MSC, LLC submitted the following as sufficient. [read paragraph that starts: "Additionally, the joint venture partners sought to engage local resident and resident groups through a community forum (9 residents)..."] .

Just a word about engagement. There was no meaningful notice as we know of about this meeting of 9 residents which reportedly occurred on 4/30/18. The Mayor's office has indicated publicly that they had no advance knowledge of the meeting. I walked door to door in the heat and humidity and engaged neighbors to consider forming a TTP to gain standing to request a hearing on the DoN application. So, we as the community of abutters had to initiate and demand that they engage and communicate with us.

There was no sign of a follow up public hearing to the little known meeting of 4/30/18, until after the TTP requested their own hearing as part of the application determination process. LMH then put out notice of their own meeting, to be held a week before ours today.

To spread awareness of this evening's DoN hearing, I engaged the mayor's office to make a city-wide announcement robo call and email about this DPH hearing. There was brief mention and a tiny print slide at the LMH 8/15 meeting but there was and is **nothing** on the LMH website. Staff manning tables at the 8/15 meeting had no knowledge of our 8/22 hearing. Only after our second city-wide announcement was made last afternoon, did the hospital send out an email yesterday evening at 6:57pm. The email was sent to a partial group of those who

Public safety and nuisance concerns have not been adequately addressed. LMH presented generalities about future plans at an 8/15/18 presentation using slides that were difficult to read. There were no clear details made available by presenters when pressed by concerned residents of Medford. One presenter whose name I cannot remember, stated he did not want to share certain specific information regarding future plans. This has been historic with several administrations and iterations of the hospital. We as abutters are weary that this is more of the same rhetoric and disinterest of community and public safety concerns, over the hospital's the interest in revenue.

Finally and not insignificantly: if we are talking of community in terms of patient/service area, according to the hospital's application to the DoN, the City of Medford residents made up a mere 15% of its patients served. LMH states that it would like to raise its very poor hospital ranking, but we abutters do not want this to be solely at high cost to the neighborhood and community in which it is sited but only minimally services.