

In the Matter Of:

Boston DPH Hearing

CHILDREN'S MEDICAL CENTER HEARING

November 30, 2023



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MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

Public Meeting on the Determination of Need Application
#BCH-23082513-HE, filed on OCTOBER 13, 2023 by the CHILDREN'S
MEDICAL CENTER CORPORATION (Applicant), located at 300
Longwood Avenue, Boston, MA for a substantial capital
expenditure at FRANCISCAN HOSPITAL FOR CHILDREN located at 30
Warren Street, Brighton, MA.

Thursday, November 30, 2023

6:00 p.m. - 7:09 p.m.

Christine E. Borrelli, CSR, RPR, RMR

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1 (Meeting commenced at 6:00 p.m.)

2

3 OPERATOR: Welcome, and thank you for standing by.

4 At this time, all participants are on a listen-only mode until
5 the public comment portion of today's conference. To queue up
6 for public comment, please press star and the number 1 on your
7 phone, and record your name at the prompt. This cause is
8 being recorded. If you have any objections, please disconnect
9 at this time.

10 I will now turn the call over to Dennis Renaud.

11 Thank you. You may begin.

12 MR. RENAUD: Good evening. My name is Dennis
13 Renaud. I represent the Massachusetts Department of Public
14 Health, and I am the Director of the Determination of Need
15 Program.

16 For clarification, you will hear me refer to the
17 Determination of Need Program as the DoN program, and the
18 Department of Public Health as the Department.

19 Joining me today from DPH are my colleagues Fabiola
20 Catulle and Lynn Conover. On behalf of the DPH's Commissioner
21 Robert Goldstein and our Bureau Director Elizabeth Kelley, I
22 want to thank you for taking the time this evening to
23 participate in this hearing.

24 The Department is holding this hearing virtually by
25 conference call in order to promote public access. This

1 hearing has been called pursuant to an application submitted
2 by the Children's Medical Center Corporation. Upon receipt of
3 the application, DoN staff reviewed the application, and after
4 finding it to be in compliance with the DoN statute and
5 regulation for filing, assigned it a filing date of
6 October 13, 2023.

7 This DoN application is for the Children's Medical
8 Center Corporation for a proposed project at Franciscan
9 Hospital for Children. The enabling statute for the DoN
10 program requires that any person or government agency
11 intending to make a substantial capital expenditure as defined
12 in the DoN regulation, must apply for DoN approval before
13 engaging in such a project.

14 I will now provide a DoN project description. The
15 proposed project includes the construction fit-out and
16 equipment of approximately 278,000 gross square feet on the
17 Franciscan Hospital campus to include 116 licensed beds
18 comprised of 16 pediatric medical and rehabilitative beds, 12
19 net new beds, 48 pediatric mental health beds, 4 net new beds,
20 and 8 pediatric mental health beds for patients who have
21 intellectual disability disorders, resulting in 8 net new
22 beds. The total value of the proposed project based on the
23 maximum capital expenditure is \$481,371,000.

24 In accordance with the statute and regulations
25 governing the DoN process, the DoN program is analyzing the

1 Children's Medical Center Corporation application for
2 compliance with the set of standards and criteria including,
3 but not limited to, a justification of the need for the
4 project, its planning process, financial feasibility,
5 environmental impact, and the reasonableness of cost and
6 expenditures. These are the key factors which the DoN program
7 will apply in its analysis of this application.

8 This public hearing is an effort to gather
9 information and to hear the opinions of interested parties
10 about the proposed project. It is not intended to be a
11 question and answer session. No questions will be permitted.
12 The DoN program will take all relevant information into
13 account in preparing its recommendation to the Massachusetts
14 Public Health Council, whose decision on whether to approve
15 the DoN for the proposed project will be made at one of its
16 upcoming public meetings. We will accept written comments on
17 the application for 10 days following this hearing.

18 As this is a virtual hearing, the logistics are
19 different from in-person hearings. I will review our process
20 for today. We will work to resolve any problem we experience.
21 Our plan for today is as follows:

22 We are using a moderated conference, so a moderator
23 will manage the queue for speaking. This meeting is being
24 recorded and transcribed. Press Star 1 if you would like to
25 testify. This will put you in the queue. You would not be

1 told where you are in the queue nor will you get much notice
2 that you are about to testify. When it is your turn to
3 testify, you will be told you are now the speaker, and you
4 will experience a short silence and will then be the speaker.
5 If you have muted your phone, you may need to unmute. Please
6 begin by stating your name, affiliation or town of residence.
7 Please speak clearly so that our transcriber can record
8 everything accurately. Because we expect many speakers, we
9 limit speakers to every one to three minutes. I will be
10 timing people, and when you have 30 seconds left, you will
11 hear this sound. When your three minutes is through, I will
12 say "Time is up," and the moderator will mute you and give the
13 floor to the next speaker. We may experience a slight pause
14 between speakers.

15 If testimony is lengthy, we suggest you present a
16 three-minute summary of those remarks and submit a full text
17 of your comments in writing. If you have a written comment of
18 your remarks, regardless of length, please feel free to submit
19 it to the Department by email or via postal service by
20 December 11, 2023. Email us at DPH.don@state.ma.us. A mailed
21 response can be sent to Determination of Need, Massachusetts
22 Department of Public Health, 67 Forest Street, Suite 100,
23 Marlborough, Massachusetts 01752. Be assured that the
24 Department will consider all comments whether presented orally
25 or in writing. Whether you comment or not, please know that

1 the Department greatly values and appreciates your
2 participation in the DoN process.

3 Before we open the line to the general public, the
4 representative of the applicant will go first and will be
5 allotted four minutes to present information about the
6 proposed project. Following this presentation, we will
7 provide an opportunity for elected officials from the
8 community to comment and then begin calling on those
9 individuals who request to speak this evening. I will now ask
10 Dr. Joseph Mitchell, President and Chief Executive Officer of
11 Franciscan Hospital for Children, to make a brief statement on
12 the proposed changes. Dr. Mitchell, you may now start with
13 your comments.

14 DR. JOSEPH MITCHELL: Great. Thank you very much,
15 Dennis. Good evening. My name is Joe Mitchell, and I am the
16 President of Franciscan Children's, which is a specialty
17 hospital for children located in the Brighton neighbor of
18 Boston.

19 I would like to begin by thanking the Department of
20 Public Health for giving me the opportunity to speak about our
21 unique clinical services and mission. I will also provide
22 some context and rationale for our DoN application.

23 Founded in 1949, Franciscan Children's has become a
24 nationally recognized pediatric care provider. We care for
25 children with complex mental health, medical, and special

1 education needs. We are the only dedicated pediatric
2 rehabilitation hospital in New England, one of the largest
3 providers of pediatric inpatient, outpatient, and school-based
4 mental health services, and the market leader for providing
5 dental surgery to children. We are also a critical safety net
6 provider for the Commonwealth. Seventy percent of our
7 patients are MassHealth beneficiaries. Nearly one out of
8 three of our medical inpatients are involved with the
9 Department of Children and Families. We serve a culturally
10 diverse group of children and families. Nearly one in three
11 of our patients and families speak English as a second
12 language. We employ over 700 exceptional caregivers and staff
13 who are passionate about our mission to care for children with
14 complex needs.

15 While Franciscan has grown and evolved over the last
16 seven decades to meet the increasingly complex needs of
17 children and families, our campus in Brighton remained largely
18 unchanged. Four out of eight of our buildings on our campus
19 are original and date back to our founding over 75 years ago.
20 These buildings are severely outdated and expensive to
21 maintain. Our existing campus also significantly limits
22 patient access given our current bed configuration and lack of
23 private rooms.

24 We are pursuing this DoN with our sister hospital,
25 Boston Children's, to expand access for desperately needed

1 services and better meet the current and future needs of
2 patients and families. The goal is to build a world-class
3 state-of-the-art campus that matches our collective reputation
4 for providing distinctive clinical excellence.

5 The proposed facility has two primary goals. First,
6 we propose to significantly expand our mental health program
7 capacity to address the pediatric mental health crisis and
8 reduce the backlog of patients boarding in emergency rooms
9 across the state. In addition, the proposed facility will
10 house new inpatient and outpatient programs for specialty
11 populations, including children with intellectual and
12 developmental disabilities. Second, we propose to build a
13 signature rehabilitation facility designed to accommodate
14 children with complex chronic medical conditions, and those
15 who have suffered catastrophic illness or accident.

16 Today the City of Boston, despite its substantial
17 health resources and global leadership, lacks such a critical
18 facility for children. This facility will include
19 state-of-the-art rehabilitation spaces, including aquatic
20 therapy, therapeutic gymnasium, and private rooms for children
21 and families. It will also be environmentally sustainable.

22 Finally, our compass modernization plan calls for
23 the expansion of our ambulatory surgical suite by adding an
24 additional operating room. This fourth operating room will
25 allow us to meet the growing demand for pediatric dentistry

1 under anesthesia, which is required for children with complex
2 medical and mental health conditions.

3 In closing, our motto at Franciscan Children's is
4 "So every kid can." This means helping as many children as
5 possible receive the specialized care they need and allowing
6 them to live their lives to the fullest possible potential.
7 Unfortunately, given our current access constraints, many
8 children do not receive the care they need. The proposed
9 investment will help more kids, more families access
10 high-quality, safe, and compassionate care. Thank you for
11 your time and consideration and for your commitment to keeping
12 children safe and healthy.

13 MR. RENAUD: Thank you. We will now begin by taking
14 comments from invited elected officials. Our first speaker
15 will be State Representative Michael Moran.

16 MR. MORAN: Hello? Can you hear me?

17 MR. RENAUD: Yes, yes.

18 MR. MORAN: Thank you, Dennis. I appreciate you
19 taking me out of turn. As you said, my name is Representative
20 Michael Moran, and I have had the privilege of serving in the
21 Massachusetts House representing Allston-Brighton for the past
22 17 years. Currently in my capacity as a member of the House,
23 I serve as the majority leader of the House.

24 I don't think you will hear from anyone this evening
25 that has as long a history with Franciscan Children's Hospital

1 as I have. As a child and up until the age of 18 years old, I
2 received all of my medical care at the hospital. As an adult,
3 I and many of my friends volunteered two to three times a year
4 taking the kids from Franciscan's to cookouts, minor league
5 hockey games, and minor league baseball. For many years, I
6 served on Franciscan's Board of Visitors. And finally as a
7 state representative, over my career I have helped steer over
8 \$60 million in additional state revenue to Franciscan
9 Children's so they can provide more of the incredible services
10 that they do for these kids that are in need. Because of this
11 long association, believe me, I know firsthand that Franciscan
12 Children's Hospital campus needs to be modernized and updated
13 to meet the complex rehabilitation and behavioral challenges
14 of today's families.

15 Boston Children's Hospital provides world-class
16 healthcare to kids all over the world. And during the
17 acquisition of Franciscan Children's Hospital, they have
18 outlined a bold vision to create a world-class center of
19 excellence right here in Brighton on the Franciscan's campus.

20 This is an exciting time for Franciscan Children's
21 Hospital, however, I believe with these exciting times and
22 world-class aspirations comes an even greater responsibility
23 to the community it is in, and particularly the
24 Allston-Brighton community. This is why I am asking for your
25 help through the DPH DoN process to hold Boston Children's

1 accountable and not forget about our community.

2 So given what I have just said, I just want to be
3 clear and outline a few things that I would expect when it
4 comes to holding them accountable. First, I would hope that
5 the community engagement with the local community defined as
6 Allston-Brighton be robust. What I mean by that is that local
7 community organizations, parents, teachers, elected officials,
8 and all others be involved in and consulted in the
9 decision-making process when it comes to changes to Franciscan
10 Children's Hospital and the community investments as a result
11 of this project. I don't mean these groups being informed of
12 decisions that have already been made. I would rather like to
13 see them be part, a real part, of the decision-making
14 process.

15 And lastly, and the most important part of it --
16 thing, I would hope, is that in Franciscan's own most recent
17 community health needs assessment, it defined its "Community
18 served" as the Allston-Brighton neighborhood because
19 Franciscan's "Recognizes the importance of focusing efforts
20 directly in the neighborhood where the hospital is located and
21 addressing the health needs of the local community." To that
22 end, I hope they use -- that Children's Hospital, and through
23 this process, use those words and remember that the
24 \$24 million that is generated by the 5 percent of this project
25 that has to be committed through the community health needs

1 initiative be spent in Allston-Brighton consistent with the
2 needs assessment that was done by Franciscan Children's
3 Hospital. I would prefer that this be spent on -- in the area
4 of housing, but also we have a health center. We have an
5 addiction treatment center, and we have some projects in the
6 neighborhood like the Jewish Health Kitchen that is in
7 desperate need of funding.

8 This is an exciting time. It's an exciting time for
9 me because of my long history with Franciscan Children's
10 Hospital. I look forward to this process. I want to thank --
11 in particular, I would like to thank Dr. Churchwell for his
12 commitment to not forgetting about the mission of
13 Franciscan's, which is so unique, and we don't want to lose
14 that mission.

15 So, thank you again for taking me out of turn, and I
16 look forward to working with you as we move into the future.

17 MR. RENAUD: Thank you. I would now like to invite
18 Shelia Dillon from the Mayor's Housing Office to speak.

19 MS. DILLION: Can you hear me?

20 MR. RENAUD: Yes.

21 MS. DILLON: Okay, great. So, once again, yes,
22 thank you for taking me out of turn. I just want to very
23 quickly comment on the potential community benefits that would
24 be associated with this exciting project.

25 Like the good representative, we are very

1 comfortable with the resources, the community benefits,
2 staying and really benefiting the Allston-Brighton community.
3 I am excited to think that some of these resources, the
4 community benefit resources, could be used in the area of
5 housing. Allston-Brighton is a neighborhood where there is so
6 much pressure on the families and individuals that live there
7 as they are not able to afford rent and sales prices. Allston
8 and Brighton also have below the citywide average of
9 income-restricted housing. We all need to work collectively
10 to increase that. They also have 26 percent of the off-campus
11 students that every year want to live in the Allston-Brighton
12 neighborhood, putting additional pressure on the communities.

13 So, I would, you know, make my office available,
14 Mayor's Office of Housing, the Mayor's Office as well, and
15 really work with the community, work with Children's, work
16 with everyone that is very, very excited about this project to
17 really shape community benefits. But, once again, do feel
18 comfortable that the money -- the benefits stay to help the
19 residents most impacted. And I would, you know, agree that
20 housing is one of the greatest strains for the residents of
21 this neighborhood and, you know, causes significant
22 health-related issues. So I look forward to working with you
23 further, but I do want to go on the record with those
24 thoughts. Thank you.

25 MR. RENAUD: Thank you. As a reminder, if you would

1 like to testify, please press Star 1.

2 Operator, may we have our next speaker, please?

3 OPERATOR: The next speaker is Melanie McLaughlin.

4 Your line is open.

5 MS. McLAUGHLIN: Hello. My name is Melanie
6 McLaughlin, and I live in Medford, Massachusetts. I am here
7 in support of the Determination of Need application for a
8 substantial capital expenditure at Franciscan Hospital for
9 Children.

10 In 2007, our third child was born with Down syndrome
11 and a congenital heart defect requiring open heart surgery.
12 At just two months old, her heart decided to strawberry, and
13 was repaired at Boston Children's Hospital. Today Gracie is a
14 happy soon-to-be 16-year-old young woman. Over the years, she
15 has had a dozen subsequent surgeries all with BCH, and we
16 consider ourselves fortunate. We live only six or so miles
17 from the Longwood medical area. We met some families that
18 traveled from across the world to get the care we have in our
19 backyard. But now since the pandemic and with increasing need
20 for behavioral health support, the area can feel overwhelming,
21 especially for children with anxiety and social and emotional
22 needs like Gracie. Gracie is often afraid at dental
23 appointments and has had dental surgery historically with the
24 hospital. The calmer atmosphere of a more remote location
25 like Franciscan's will benefit children who are our most

1 vulnerable, children like my daughter.

2 Finally, as a project director at the Federation for
3 Children with Special Needs and a school committee member in
4 my community, I have witnessed the increased need for
5 behavioral health supports for children and youth. The
6 extension of pediatric behavioral health supports for children
7 with complex healthcare needs should be championed. That
8 expansion, a collaboration with an internationally renowned
9 provider like Boston Children's Hospital and a community-based
10 care organization with a history of relationship building like
11 Franciscan Children's Hospital, is both a need and a welcome
12 relief for the community of children and youth with complex
13 healthcare needs. Thank you.

14 MR. RENAUD: Thank you. Operator, may we have our
15 next speaker, please?

16 OPERATOR: The next caller is Kyra Mihalick. Your
17 line is open.

18 MS. MIHALICK: Good evening. My name is Kyra
19 Mihalick, and I'm the Senior Director of Rehabilitative
20 Therapy at Franciscan Children's and a physical therapist by
21 training. I am testifying to express my support for the
22 Children's Medical Center/Franciscan Children's Determination
23 of Need project.

24 I've had the opportunity to work in various
25 healthcare organizations throughout the country. In my

1 current position at Franciscan Children's, I oversee a
2 talented team of physical therapists, occupational therapists,
3 and speech pathologists who provide care to our patients. The
4 rehab patients we serve come to us with various conditions.
5 Our patients range from those with brain and spinal cord
6 injuries to those needing postoperative recovery to patients
7 needing to wean off of ventilators.

8 From my experience across the nation and in the
9 working with patients, families, and staff at Franciscan's
10 therapy department, I can enthusiastically say that a new
11 building will make a tremendous difference in the care that we
12 provide to our patients and families. Private rooms and
13 increased child and family spaces will improve the therapeutic
14 environment for our patients and families. Buildings designed
15 with improved patient flow, accessibility and technology will
16 improve work flows, collaboration and staff experience.
17 Larger treatment areas will allow us to utilize the
18 state-of-the-art equipment that families otherwise seek in
19 rehabilitation programs outside of New England.

20 The proposed investment will also enable Franciscan
21 to expand its rehab services to reach even more children and
22 families at such a critical time in healthcare. According to
23 the Children's Hospital Association, the population of
24 medically complex children is growing by 5 percent annually.
25 With that growth, the need for pediatric rehabilitative

1 therapies is increasing rapidly. The acuity of Franciscan
2 patients have grown steadily over the last several years. The
3 campus needs a state-of-the-art building that aligns with the
4 complexity of the children that we serve.

5 On behalf of our rehab patients and staff, I express
6 my extreme enthusiasm for this important and timely project.
7 Thank you for the opportunity to express my support for this
8 DoN application.

9 MR. RENAUD: Thank you. Operator, may we have the
10 next speaker, please?

11 OPERATOR: The next speaker is Sarah Spence. Your
12 line is open.

13 MS. SPENCE: Hi. My name is Sarah Spence. I'm a
14 child neurologist and the codirector of the Autism Spectrum
15 Center at Boston Children's Hospital, and I'm speaking in
16 strong support of the DoN for Franciscan.

17 I'm a provider dedicated to the care of patients
18 with neurodevelopmental disabilities, such as intellectual
19 disability and autism and related disorders. And I can't
20 emphasize strongly enough the need for further intensive
21 placements, behavioral health placements, for those patients
22 which this expansion at Franciscan's would provide.

23 I would like to make four major points. Number one,
24 there are just not enough appropriate inpatient programs in
25 the Commonwealth for individuals with neurodevelopmental

1 disabilities, and the proposed program will address this
2 directly. Previously we had to send patients out of state to
3 Bradley Hospital in Rhode Island and Hampstead in New
4 Hampshire, and those programs aren't even taking our patients
5 any longer because they won't take out-of-state Medicaid.
6 Number two, there is also a huge need for a range of services
7 beyond inpatient; things like partial hospitalization
8 programs, intensive outpatient programs, which really
9 currently don't exist for individuals with NVD, and these are
10 planned at the expansion at Franciscan. Three, sadly, the
11 current environment is that there is a critical shortage of
12 community-based therapeutic services creating the need for
13 these more intensive services. This population needs
14 continuous and consistent support or they end up in crisis.
15 And four, when they're in crisis, patients end up in the
16 emergency department. And I can't tell you enough that this
17 is the worst possible place for them. This is true even at a
18 place like Boston Children's where there's a robust autism
19 center. We have good ancillary staff. We have training
20 programs for providers. We work directly with the emergency
21 department staff, and still the situation creates a
22 significant safety issue for both patients and staff. I have
23 had many patients in my practice practically living in the ED
24 for weeks, if not more than a month. And there they just
25 don't get the care they need and, frankly, can become

1 traumatized. So I strongly support this expansion at
2 Franciscan, and I want to thank the DPH staff for the
3 opportunity to testify.

4 MR. RENAUD: Thank you. Operator, may we have our
5 next speaker.

6 OPERATOR: The next speaker is Elizabeth Brown.
7 Your line is open.

8 MS. BROWN: Good evening. My name is Elizabeth
9 Brown, and I am the CEO at Charles River Community Health. We
10 are a non-profit, federally qualified health center founded in
11 Allston-Brighton providing care to patients in need for 49
12 years. Our mission is to partner with individuals and
13 families so they can thrive and lead healthier lives by
14 delivering the comprehensive, integrated, and equitable
15 primary healthcare that matters most to them. Our board of
16 directors live or work in the community, and the majority of
17 our board members are patients of the health center.

18 In 2022, Charles River Community Health served
19 13,800 patients. Of those, a little over 25 percent, or about
20 3,600 were children. The families we serve are some of the
21 most vulnerable in our community. 80 percent of our patients
22 live below the poverty line earning no more than \$30,000 a
23 year for a family of four. 87 percent identify as being from
24 communities of color, and 73 percent need services in a
25 language other than English; the third highest rate for all

1 community health centers in the Commonwealth. It reflects the
2 rich diversity of the Allston-Brighton community. We provide
3 care to patients of all backgrounds, regardless of insurance
4 or immigration status or ability to pay. Our patient
5 population would face significant linguistic, financial, and
6 other barriers to care and health inequities if not for the
7 fantastic work of our staff and our board.

8 Charles River works closely with many clinical and
9 community partners if there are services a patient needs that
10 we don't provide, such as hospital or specialty care, and to
11 connect families with if their needs are more significant than
12 what we can meet as a primary care provider. We rely on
13 partners like Franciscan Children's to meet these needs. Like
14 Charles River, they have been in the Allston-Brighton
15 community for decades with a similar mission, providing care
16 to children of all backgrounds regardless of the ability to
17 pay.

18 Charles River also has a long-standing and valuable
19 clinical affiliation with Children's Hospital to ensure that
20 our pediatric patients receive the specialty and hospital care
21 that they need.

22 As you may know, the healthcare system overall is
23 really being stretched to the limit at this time and needs to
24 expand to meet the greatly increased demand for care coming
25 out of the pandemic. Many types of preventive and chronic

1 care were appropriately deferred during the pandemic. Places
2 like Charles River Community Health and Franciscan Children's
3 are now facing unprecedented demand for care.

4 Charles River Community Health fully supports
5 Franciscan Children's plan to renovate and expand its
6 facilities so that they can serve more patients. This is
7 especially critical for dental services for children with
8 special healthcare needs as the health center's dental clinic
9 is not equipped to serve this patient population.

10 In addition, it is absolutely critical for
11 Franciscan Children's to expand its pediatric behavioral
12 health capacity. We all read in the news every day about the
13 increased mental health needs among children coming out of the
14 pandemic. There are not enough providers to meet this need,
15 especially for children, and so it is vital that Franciscan
16 Children's have the facilities and capacity to meet the
17 healthcare needs of the community both now and in the future.

18 Finally, given Franciscan Children's has been in the
19 Allston-Brighton community for about 75 years, I also strongly
20 advocate for community benefits funding coming out of this
21 project to be allocated to projects in Allston-Brighton. I
22 share some concerns I have heard in the Allston-Brighton
23 community that because Franciscan Children's has now merged
24 with Children's Hospital that community benefits funds may
25 perhaps be allocated to Children's Hospital's wider service

1 area. We need to ensure funding and its impact are felt here
2 in Allston-Brighton so that continued investments are made to
3 meet the needs of this community. Thank you for the
4 opportunity to provide remarks this evening.

5 MR. RENAUD: Thank you. Operator, may we have our
6 next speaker?

7 OPERATOR: The next speaker is Danna Mauch. Your
8 line is open.

9 MS. MAUCH: Thank you, Commissioner, and staff of
10 the DPH Determination of Need Program. I appreciate the
11 opportunity to speak this evening.

12 I am the president and CEO of the Massachusetts
13 Association for Mental Health. We were founded over a century
14 ago in 1923 and have been dedicated to promoting mental health
15 and wellbeing while preventing behavioral health conditions
16 and associated disability for people across the Commonwealth.
17 Child mental health is our highest priority, and we are
18 committed to advancing prevention, early intervention,
19 effective treatment, and research for children and their
20 families.

21 I want to speak tonight in support of the Children's
22 Medical Center and Franciscan Children's Determination of Need
23 application to revitalize its facility in Brighton, Mass, and
24 to add some very critical services. This war, this plan, is
25 in direct response to the unmet needs for intensive behavioral

1 health treatment of children, particularly those with complex
2 conditions.

3 Franciscan serves children of complex medical mental
4 health and educational needs, and they have been doing so
5 skillfully for a long time, but lacking in a certain capacity
6 needed to respond to the full need. It's a crucial
7 institution to meet needs and unmet needs in the behavioral
8 healthcare system in the Commonwealth, and the challenge of
9 having too few beds, particularly specialty beds as earlier
10 described, is really poignant for the children and families
11 who are affected.

12 Child and adolescent mental health and wellbeing was
13 severely disrupted in the pandemic, and frankly, that was on
14 the heels of the pre-pandemic crisis of unmet need. Children
15 and families at risk from the wait are -- this has been going
16 on for many years. Children's Hospital is the top inpatient
17 boarding facility in the state. And if you look at the
18 Department of Mental Health data on expedited psychiatric
19 inpatient admission, those people who have been waiting for
20 several days or longer in the state, there are -- just in the
21 month of October, there were 127 patients who had been waiting
22 long periods of time. Nearly 15 percent of those were young
23 people, not only with mental health conditions, but autism
24 spectrum disorders, another several percent with intellectual
25 and developmental disabilities. For 20 percent of them, they

1 were waiting because there was simply no bed available.
2 Another 5 percent needed a specialty bed, and another
3 6 percent were so medically complex none of the beds in the
4 system could handle them. So, out of all of the people
5 waiting, about 30 percent of them were kids with co-occurring
6 conditions and need of specialty beds, the very kind that
7 Franciscan is critically planning to develop, and they are
8 uniquely qualified.

9 In closing, I just want to say that we applaud the
10 hospital for stepping up to commit a substantial effort and
11 resources and respond to unmet needs of children with
12 behavioral health conditions and complex conditions. Thank
13 you.

14 MR. RENAUD: Thank you. Operator, may we have our
15 next speaker.

16 OPERATOR: The next speaker is Grace Alden. Your
17 line is open.

18 MS. ALDEN: Hello. My name is Grace Alden, and I'm
19 a charge nurse on the medical unit at Franciscan Children's.
20 I'm here tonight because I wholly support the Children's
21 Medical Center/Franciscan Children's Determination of Need
22 application to revitalize our facility in Brighton.

23 I have had the pleasure of working at Franciscan
24 Children's for the past six years as a registered nurse, both
25 as a staff nurse at the bedside caring for children with

1 complex medical conditions, and in the leadership position as
2 a charge nurse on the inpatient medical unit.

3 Franciscan Children's is the only post-acute care
4 facility in the Northeast region serving medically complex
5 children and children needing rehabilitative services. We are
6 the only facility in the area that accepts babies on
7 ventilators. The work we do is life changing and I'm so proud
8 to be a part of it.

9 Every patient we serve at Franciscan Children's
10 requires expert individualized care and receives that care in
11 a compassionate environment from people who are passionate
12 about helping children and families in need. We also provide
13 extensive care and education so that parents can take their
14 medically complex child home. I have discharged many of these
15 patients to their homes and families following extended-length
16 admissions and lengthy caregiver training, and the
17 overwhelming feeling of joy and accomplishment I feel never
18 gets old. Because of the specialized care we provide here at
19 Franciscan Children's, every patient has a chance to live
20 their life to their fullest potential. Unfortunately, our
21 current waitlist exceeds the capacity of the existing
22 building, and there are so many children who could benefit
23 from our care.

24 Through the proposed projects, Franciscan Children's
25 will construct a state-of-the-art family-friendly facility to

1 meet both the existing and growing needs of children who
2 require our specialized rehabilitative care. These new
3 medical units will make a huge difference in the lives of our
4 patients and families. Private rooms and enhanced
5 patient/family spaces will make our environment of care more
6 comfortable for families and improve the staff experience. An
7 increase in patient beds will also allows us to care for more
8 patients needing complex intra-disciplinary care.

9 My love for Franciscan Children's is deep, and I am
10 passionate about continuing the hospital's mission and values.
11 This proposed investment clearly demonstrates Franciscan's
12 commitment to the health and wellbeing of children throughout
13 Massachusetts. I am confident Franciscan Children's
14 investment in children and families and communities will have
15 a long-lasting impact and benefit future generations of
16 children for many years to come. Thank you for your time and
17 consideration.

18 MR. RENAUD: Thank you. Operator, may we have our
19 next speaker?

20 OPERATOR: The next speaker is Timothy Burke. Your
21 line is open.

22 MR. BURKE: Hi. Good evening. Thank you,
23 Commissioner Renaud, for the opportunity to testify this
24 evening. My name is Timothy Burke, and I'm here representing
25 a 10-taxpayer group comprised of executive leaders, board

1 members, and supporters of the Addiction Treatment Center of
2 New England located at 77 Warren Street, which is directly
3 across the street from Franciscan Children's Hospital, and
4 also the Granada House, which is a residential recovery
5 program located in Allston. Both of these non-profits provide
6 essential services for Boston and the surrounding communities.
7 We have been providing these services in this community for
8 over 13 years. I am also a longtime Brighton resident. I'm
9 active in the community and participating in several Allston
10 and Brighton social services and political organizations, and
11 I can speak firsthand about the needs of our neighborhood and
12 city. Additionally, I'm licensed clinical social worker and
13 have spent the last 18 years as a CEO of the Addiction
14 Treatment Center before retiring in 2019, but I remain on the
15 board of directors for the Addiction Treatment Center, and I'm
16 also on the board of the Granada House. I'm passionate about
17 providing services to those afflicted by addictions.

18 Just two years ago, Franciscan Children's own
19 community needs health assessment defined Allston-Brighton
20 specifically as the hospital's primary service area and focus,
21 outlining many of the health disparities and impacts our
22 residents face. As we have seen across the city, substance
23 abuse and the opioid epidemic have ravaged our communities,
24 sparing no neighborhood, street, or family. This is why the
25 DPH's established behavioral health program is responding to

1 the opioid crisis as a health priority. Area institutions
2 like Boston Children's should seek to invest heavily within
3 Brighton and Allston as part of their community health
4 initiative and community benefits investing.

5 I'm here today to ask for your support through this
6 process to hold Boston Children's accountable for their
7 promise and to ensure that any community health initiative
8 dollars are invested right here in Boston for health
9 priorities like addressing the opioid crisis. Our center is
10 directly across the street and has very real needs, and the
11 Granada House is less than a mile away. I am happy to meet
12 with anyone from the Boston Children's Hospital at any time to
13 discuss this issue.

14 As an integral part of the Allston-Brighton
15 community, we expect Boston Children's to meaningfully step up
16 to the plate in Brighton and make material investments with
17 our neighborhood and Boston. Please help our residents in
18 advocating for the very real investments and dedication to our
19 communities from this project. I thank you for your time, and
20 I look forward to working closely with you on these important
21 issues.

22 MR. RENAUD: Thank you. Operator, may we have our
23 next speaker?

24 OPERATOR: The next speaker is Dr. Siobhian Sprott.
25 Your line is open.

1 MS. SPOTT: Thank you. Hello, my name is
2 Dr. Siobhian Spott. I am a board-certified pediatric dentist
3 through the American Board of Pediatric Dentistry and the vice
4 president of dental services at Franciscan Children's. Thank
5 you for the opportunity to speak in support of the Children's
6 Medical Center/Franciscan Children's Determination of Need
7 application to revitalize our facility in Brighton.

8 I have been a practicing dentist for over 15 years,
9 and I'm very passionate about the need for all children to
10 have access to quality dental care regardless of physical,
11 intellectual, or emotional disability. At Franciscan
12 Children's, dental surgery is a critical part of our mission.
13 We serve children with extensive dental needs, developmental
14 disabilities, complex medical conditions, and situational
15 anxiety.

16 As an example, imagine having a child with a
17 diagnosis of autism spectrum disorder in need of multiple
18 fillings but who is unable to sit still or follow simple
19 commands in the traditional dental setting like you or I may
20 be able to, but yet still receiving the care that they need.
21 Sounds impossible, but we do the impossible for these kids.

22 Franciscan Children's is a market leader in
23 pediatric dental surgery providing nearly 70 percent of dental
24 surgery for children with complex needs in Massachusetts. We
25 are the only pediatric hospital in New England whose operating

1 rooms are dedicated solely to dental surgeries. Our three
2 dental ORs handled nearly 3,000 surgeries last year. As a
3 part of the proposed plan to revitalize our campus, we would
4 add a fourth dental OR. We already have more than 100
5 credentialed pediatric dentists from across the state
6 currently utilizing our ORs for their patients. By adding an
7 additional OR, we would be able to increase access to care by
8 accommodating more dentists, and most importantly, be able to
9 help more kids in need of our unique services.

10 On average, across the United States, the wait for a
11 pediatric dental patient with special needs to get an OR
12 appointment is 18 months, 18 months for a child with severe
13 dental needs who may also be in pain to get access to the
14 services they need. The addition of this fourth OR would
15 enable us to better meet the demands of our dentists and to
16 decrease wait times here in Massachusetts.

17 As a pediatric dental professional, I believe the
18 need to extend our operating room capacity through this
19 investment is paramount so we can continue to meet the rising
20 needs of children who require our services from across the
21 Commonwealth. I thank you for your time and consideration.

22 MR. RENAUD: Thank you. Operator, may we have our
23 next speaker.

24 OPERATOR: The next speaker is Casey Atkins. Your
25 line is open.

1 MS. ATKINS: Thank you so much. Thank you to the
2 Commission and to the Department of Public Health for this. I
3 am here today in support of the Children's Hospital and
4 Franciscan Determination of Need.

5 My name is Casey Atkins, and I have a 10-year-old
6 child who is on the autism spectrum. He has ADHD, anxiety,
7 and depression. Over the past few years, he has struggled
8 with his mental health coming out of the COVID-19 pandemic.

9 In the fall of 2022, he was in crisis, and I had to
10 make the agonizing decision to bring him to the emergency room
11 at Boston Children's Hospital in order to get an inpatient
12 placement for him at a mental health facility. Every single
13 one of his providers expressed concern for what the experience
14 in the emergency room would be like for him. But I had no
15 choice. I could no longer keep him safe at home. We chose to
16 go to Boston Children's Hospital because they are, frankly,
17 the only place that I would trust with my child and his
18 complex profile.

19 We arrived in the ER, and we were coordinated in
20 through our practitioners in the autism program at Boston
21 Children's. The ER is a terrible place in general, and it is
22 doubly terrible for children who are on the autism spectrum.
23 It's scary, it's loud, and it is absolutely chaotic,
24 especially for children with complex sensory needs. We spent
25 two weeks waiting desperately for a placement for him. And it

1 became abundantly clear that the combination of his age and
2 his neurodivergent profile would make it very hard to find the
3 right fit for him or, frankly, any fit at all.

4 After our 14th night in the hospital, it was time to
5 make another agonizing decision to leave without getting an
6 inpatient placement and going back home to determine how to
7 support him from there. The hospital was able to coordinate
8 wraparound services for us for the Children's Behavioral
9 Health Initiative, a set of services that we have, frankly,
10 tried to receive a year prior but were unable to. It took
11 being hospitalized for him to gain access to those services.

12 There is a critical need right now for dedicated
13 mental health services for children like mine who are on the
14 spectrum, or who have our developmental and neurological
15 unique profiles. I am an ardent supporter of this project as
16 it will fill a critical need for these children and for other
17 families who need to know that there is a place for their
18 children to receive services and that they are not left to
19 weather this alone. Thank you.

20 MR. RENAUD: Thank you. Operator, may we have our
21 next speaker?

22 OPERATOR: The next speaker is Dr. Kevin Churchwell.
23 Your line is open.

24 MR. CHURCHWELL: Good evening. My name is Dr. Kevin
25 Churchwell. I'm privileged to serve as president and CEO of

1 Children's Medical Center Corporation, the parent company of
2 Franciscan Hospital for Children and Boston Children's
3 Hospital.

4 Boston Children's is the only freestanding
5 comprehensive pediatric care system in Massachusetts. We have
6 a long history of serving children from across the state, many
7 with complex medical and mental health needs regardless of
8 their race, ethnicity, where they live, or who pays for their
9 care.

10 I would like to begin my remarks by thanking the
11 Department of Public Health for the work you do to promote the
12 health and wellbeing of the people of Massachusetts. In
13 particular, I would like to thank you for your commitment to
14 give children a healthy start. Every day everyone from every
15 corner of the Boston Children's organization works to honor
16 and uphold that same commitment. I would also like to thank
17 the Allston-Brighton community which has been so engaged and
18 welcoming as we work together to get this proposal right. And
19 I also would like to thank Mayor Wu's office and
20 Representatives Honan and Moran of their endorsement and
21 leadership. Big, great things only happen when there is
22 support, enthusiasm, and leadership. Thank you.

23 Our creation of Franciscan Children's will allow us
24 to align our respective strengths to develop a more
25 coordinated and connected continuum of care for specialized

1 pediatric mental health services, plus acute rehabilitative
2 care for medically complex children and dental care that will
3 improve the lives of children and families in Massachusetts
4 and throughout New England. Together we will modernize the
5 Franciscan Children's campus and enhance critical programs and
6 services offered there.

7 Our campus modernization plan is targeted to
8 increase access to a full continuum of high-quality mental
9 health, post-acute medical and rehabilitation care, and
10 specialized inpatient beds, including those providing care to
11 pediatric patients with autism and neurodevelopmental
12 disorders.

13 Our plan is anchored by the creation of a more
14 diverse workforce, expanded community and school-based
15 prevention programs and an increase in research. This project
16 provides us the facilities to continue to promote health
17 equity and will not restrict the accessibility of services
18 from vulnerable and/or Medicaid-eligible individuals.

19 Franciscan Children's serves a vulnerable and
20 underserved population with the majority of their patients
21 covered by the Medicaid program. In addition, the medical and
22 mental health complexities and social challenges of the
23 patient population frequently requires the ongoing
24 coordination of care with one or more state agencies and local
25 school systems.

1 Our new system will focus on improved prevention,
2 identification and treatment, and provide children the care
3 they need where and when they need it all with one point of
4 contact per family.

5 Thank you for the opportunity to share our plan for
6 creating a new system that will better serve the growing needs
7 of our children, families, and community. The modernization
8 of Franciscan campus is an essential component of that plan,
9 and I ask that you approve our application. Thank you.

10 MR. RENAUD: Thank you. Operator, may we have our
11 next speaker?

12 OPERATOR: There are no speakers in queue. It is
13 Star 1 to queue up for public comment.

14 MR. RENAUD: At this point, we will wait to see if
15 additional speakers present, and I will be back on in a few
16 minutes. Thank you.

17 OPERATOR: We do have Richard Rouse in queue.
18 Richard, your line is open.

19 MR. ROUSE: Thank you very much. Can you hear me?

20 MR. RENAUD: Yes, we can.

21 MR. ROUSE: Yes. Thank you, Dennis. My -- as I
22 said, my name is Richard Rouse. I am a 70-year resident of
23 the city of Boston, and I currently serve as the Chairman of
24 the Board of Directors of the Addiction Treatment Center of
25 New England, a non-profit across the street at Warren Street.

1 I agree with everything that has been said by all of
2 the testifiers. There is certainly a critical need for all of
3 the services provided. I joined with Representative Moran and
4 Housing Czar, Sheila Dillon, and Tim Burke, Elizabeth Brown,
5 to be among those people who are concerned that the
6 Allston-Brighton community be served as well by the community
7 benefits process. So I wish to make sure that that focus is
8 intensively followed for Allston-Brighton. And with that, I
9 hope that the board gives this a very positive approval for a
10 much-needed project and look forward to working with you
11 through the community. Congratulations, and thank you for
12 your work at the Department of Need process at DPH. Thank
13 you.

14 MR. RENAUD: Thank you. Operator, may we have our
15 next speaker?

16 OPERATOR: There is no one in queue currently. It
17 is Star 1 to queue up for public comment. Again, Star 1 from
18 your phone to queue up for public comment.

19 MR. RENAUD: At this point, we will wait a period of
20 time to see if we have any additional speakers.

21 OPERATOR: We do have comment from Stacy Drury.
22 Your line is open.

23 MS. DRURY: Good evening. Can you hear me?

24 MR. RENAUD: Yes, we can.

25 MS. DRURY: Great. My name is Dr. Stacy Drury, and

1 I am the Chief of Psychiatry and Behavioral Sciences at Boston
2 Children's Hospital. I am here to speak in strong support of
3 the Determination of Need application for substantial capital
4 expenditure at Franciscan Hospital for Children.

5 Franciscan Children's is a critical institution to
6 the healthcare and educational landscape, serving children
7 with complex medical, mental health, and educational needs
8 from neighborhoods across Boston, the state, and the New
9 England region. Through the proposed project, Franciscan
10 Children's will construct the state-of-the-art, family
11 friendly, community facing facility to meet both the existing
12 and growing needs of children requiring behavioral health and
13 rehabilitative care, locating the entire continuum of care in
14 one location.

15 In addition, Franciscan Children's will enhance
16 services to children who require dental surgery through the
17 expansion of its existing operating room capacity. We
18 envision this campus as a state-of-the-art training
19 environment for the existing workforce providing services to
20 children with mental and behavioral health needs and the next
21 generation of providers.

22 As the new Psychiatrist in Chief at Boston
23 Children's Hospital, it is clear that the current mental
24 healthcare crisis needs both short and long-term solutions.
25 Often behavioral and mental health treatment centers are

1 located in places other specialties have vacated for more
2 updated facilities, leaving child mental and behavioral
3 healthcare as an afterthought, perpetuating the persistent
4 stigmatization around child mental illness.

5 In addition, despite significant investment from the
6 state, Boston Children's Hospital and Franciscan Children's
7 Hospital and our other academic partners, there are
8 substantial gaps in services, inadequate connection between
9 different providers and levels of care, and rates of boarding
10 patients continue to be high in Massachusetts. More than one
11 third of youth in Massachusetts struggle with significant
12 symptoms of mental and behavioral illness and rates of
13 suicidal ideations, suicide attempts, and suicide continue to
14 increase.

15 The planned campus at Franciscan Children's will
16 signal to the community, state, and country our commitment to
17 ensuring all children thrive and our recognition that without
18 child mental health, there is no physical health. The campus
19 will include areas for training, education, and outreach
20 programs that will be designed as a place of healing,
21 recovery, and health social-emotional growth.

22 In addition to being home to state-of-the-art
23 clinical programs, the proposed plans include creating space
24 for training of mental health providers at all levels and will
25 integrate the strengths of Boston Children's research and

1 innovation portfolio, laying the ground work for
2 transformative research and early identification, prevention,
3 treatment, and some day, cure.

4 Bringing together Franciscan Children's and Boston
5 Children's on this new campus will synergistically enhance
6 both systems' school-based mental health services. Together
7 these programs currently serve 23 different schools, and
8 within this new campus, we will offer a learning
9 collaboratives for school-based clinicians as well as
10 educational and outreach activities for teachers, principals
11 and parents.

12 I envision significant strengthening of our
13 partnerships with community programs including the Italian
14 Home, Youth Villages Central, Centro Presente, and many
15 others.

16 The proposed investment will help Franciscan
17 Children's increase its impact and reach even more families
18 and more patients, clearly demonstrating the hospital's
19 commitment to the health and wellbeing of children throughout
20 Massachusetts. The project will ensure that patients and
21 families have access to the full range of high-quality,
22 integrated pediatric care services.

23 Finally, this project will address a substantial gap
24 in the care continuum for children with autism and
25 neurodevelopmental disorders through the creation of new

1 inpatient, partial-day programs, and intensive outpatient
2 programs for this vulnerable population.

3 An example of the importance of this proposed campus
4 transformation for workplace recruitments, Boston Children's
5 Hospital recently hired Dr. Matthew Siegel to be the Chief of
6 Clinical Enterprises at Boston Children's and the Chief
7 Behavioral Health Officer at Franciscan Children's.
8 Dr. Siegel is the founder and principal investigator of the
9 autism and development disorders inpatient research
10 collaborative and the founder of the first learning health
11 network on inpatient units serving people with developmental
12 disabilities and his recruitment is the first of many thought
13 leaders that we expect to join us in this important project.

14 I am confident Franciscan Children's investment in
15 children, families, and communities will have a long-lasting
16 impact and benefit future generations of children. This is an
17 unprecedented opportunity to say to children, families,
18 communities and the nation that we are committed to ensuring
19 every child from every background, culture, and race have the
20 tools and skills they need to thrive in an ever changing and
21 challenging world.

22 I ask DPH to approve the Children's Medical
23 Center/Franciscan Children's Determination of Need application
24 to revitalize this facility in Brighton. I would like to
25 thank the staff for the opportunity to testify tonight.

1 MR. RENAUD: Thank you. Operator, may we have our
2 next speaker.

3 OPERATOR: The next speaker is Anabela Gomes. Your
4 line is open.

5 MS. GOMES: Can you hear me?

6 OPERATOR: We can hear you.

7 MS. GOMES: Thank you for the opportunity to
8 testify. My name is Anabela Gomes, resident of Brighton. I
9 am here representing a group comprised of Brighton residents.
10 I also serve as zoning chair of the Brighton Allston
11 Improvement Association, a neighborhood association which
12 serves the community, an organization reviewing development,
13 zoning variances, quality of life and testifies on behalf of
14 the BIA at the City of Boston Zoning Board of Appeals.

15 Franciscan Children's Hospital and its campus have
16 served as the pillar of our neighborhood since its inception.
17 Families from across the neighborhood and Boston have come to
18 rely on the clinical team and community-based school. To echo
19 Michael Moran's words, we all know and agree the Franciscan
20 campus needs to be modernized and updated to meet today's
21 patient needs. We wholeheartedly support the response to that
22 need, and have -- and to have a world-class institution like
23 Boston Children's Hospital come to Brighton and recognize both
24 the needs and opportunities that exist within our committee is
25 exciting. However, with Boston Children's world-class

1 operation, we ask for your support through this process to
2 hold Boston Children's accountable for their promises and to
3 ensure that any community health initiative dollars are
4 invested right here in this neighborhood of Boston.

5 Just two years ago, Franciscan Children's own
6 community health needs assessment defined Allston-Brighton
7 specifically as the hospital's primary service area and focus.
8 This assessment clearly shows that Allston-Brighton community
9 and social detriments of health that affects its residents
10 should be central to any Boston Children's project and CHA
11 investment, which, by the way, DPH requirements establish the
12 CHA as a 5 percent of its project's total value as a minimum
13 expectation. Nothing precludes a DoN applicant, and certainly
14 Boston Children's, from dedicating a higher percentage of its
15 project costs to local CHA investments within its home
16 community. As an integral part of the Allston-Brighton
17 community, we expect Boston Children's to meaningfully step up
18 to the plate in Brighton and make material investment within
19 the neighborhood and Boston. Please help our residents in
20 advocating for a very real investment and dedication to our
21 community this project institution demands. Thank you for
22 your time, and I look forward to working closely with you on
23 this project important issue. Thank you.

24 MR. RENAUD: Thank you. Operator, may we have our
25 next speaker?

1 OPERATOR: There is no one in queue currently. It
2 is Star 1 if you would like to make public comment. Again,
3 please press Star and the number 1 on your phone to queue up
4 for public comment.

5 MR. RENAUD: We will wait a period of time to see if
6 we have another presenter.

7 OPERATOR: As a reminder, it is star and the
8 number 1 one to queue up for public comment. Please press
9 Star 1 if you like to make public comment. There are no
10 callers in queue at this time.

11

12 (Brief pause)

13

14 OPERATOR: There are no callers in queue at this
15 time. It is Star 1 to make a public comment.

16 MR. RENAUD: A period of five minutes has now passed
17 since we had a speaker in the queue, so this will now end our
18 public hearing.

19 As a reminder, written comments will be accepted
20 through December 11, 2023. And I want to thank you for
21 participating in this public hearing and have a good evening.

22 OPERATOR: That does conclude today's call. Thank
23 you for participating. You may disconnect at this time.

24

25 (Meeting concluded at 7:09 p.m.)

CERTIFICATE OF COURT REPORTER

I, Christine E. Borrelli, Registered Merit Reporter and Certified Court Reporter, a Notary Public, in and for the Commonwealth of Massachusetts, do certify that the public hearing regarding the Determination of Need Application #BCH-23082514-HE held on Thursday, November 30, 2023, was stenographically reported by me; that the transcript produced by me is a true and accurate record of the proceedings; that I am neither counsel for, related to, nor employed by any of the parties to the above action; and further that I am not a relative or employee of any attorney or counsel employed by the parties thereto, nor financially or otherwise interested in the outcome of the action.



Christine E. Borrelli
Notary Public
MA CSR No. 102893

My Commission Expires:
December 28, 2023

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