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3 COMMONWEALTH OF MASSACHUSETTS

4 DEPARTMENT OF PUBLIC HEALTH

5

Volume: I Pages: 1-42

6 PUBLIC HEARING VIA CONFERENCE CALL )

7 )

1. **RE: STEWARD HEALTH CARE SYSTEM/GOOD SAMARITAN )**
2. **MEDICAL CENTER - DETERMINATION OF NEED PUBLIC )**
3. **HEARING MA DEPARTMENT OF PUBLIC HEALTH )**

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12

13 BEFORE: Dennis Renaud, Director of the Determination

14 of Need Program 15

16 Fabiola Catulle, Department of Public Health 17

18 Lucy Clark, Department of Public Health 19

20 (All participants appeared by conference call.) 21

22 6:00 p.m.

23 Wednesday, September 20, 2023

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| **1** |  | **I** | **N** | **D E** | **X** |  |
| **2** | **SPEAKER:** |  |  |  |  | **PAGE** |
| **3** | **Matthew Hesketh** |  |  |  |  | **9** |
| **4** | **Michael Brady** |  |  |  |  | **14** |
| **5** | **Gerard Cassidy** |  |  |  |  | **16** |
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| **8** | **George Sigel** |  |  |  |  | **21** |
| **9** | **Lynette Sigel** |  |  |  |  | **24** |
| **10** | **Neil Patterson** |  |  |  |  | **25** |
| **11** | **Michael Donovan** |  |  |  |  | **27** |
| **12** | **Ray Breton** |  |  |  |  | **28** |
| **13** | **Jill Mazzola** |  |  |  |  | **31** |
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| **18** |  |  |  | **\* \* \*** |  |  |
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1. **P R O C E E D I N G S**
2. **THE OPERATOR: Good afternoon, and**
3. **thank you all for holding. Your lines will**
4. **remain on a listen-only mode until we open**
5. **for public comments.**
6. **I would like to remind all parties the**
7. **call is now being recorded. If you have any**
8. **objections, please disconnect at this time.**
9. **And I would now like to turn the call**
10. **over to Dennis Renaud. Thank you, sir, you**

11 may begin.

1. **MR. RENAUD: Thank you. Good evening.**
2. **My name is Dennis Renaud. I represent the**
3. **Massachusetts Department of Public Health,**
4. **and I'm the Director of the Determination of**
5. **Need Program. For clarification, you will**
6. **hear me refer to the Determination of Need**
7. **Program as the DoN program and the**
8. **Department of Public Health as the DPH.**
9. **Joining me today from the department**
10. **are my colleagues Fabiola Catulle and Lucy**
11. **Clarke.**
12. **On behalf of the department's**
13. **commissioner, Dr. Robert Goldstein, and our**
14. **bureau director, Elizabeth Kelley, I want to**
15. **thank you for taking the time this evening**
16. **to participate in this hearing.**
17. **The department is holding this hearing**
18. **virtually by conference call in order to**
19. **promote public access. This hearing has**
20. **been called pursuant to an application**
21. **submitted by Steward Health Care System,**
22. **LLC. Upon receipt of the application, DoN**
23. **staff reviewed the application and after**
24. **finding it to being in compliance with the**
25. **DoN statute and regulation filing assigned**
26. **it a filing date of August 9, 2023.**
27. **The enabling statute for the DoN**
28. **program requires that any person or**
29. **government agency intending to make a**
30. **substantial capital expenditure as defined**
31. **in the DoN regulation must apply for DoN**
32. **approval before engaging in such a project.**
33. **I will now provide a DoN project**
34. **description.**
35. **The proposed project includes the**
36. **expansion of psychiatric services at Good**
37. **Samaritan Medical Center located in**
38. **Brockton, Mass., through the construction of**
39. **a 77-bed facility that will include 16 beds**
40. **relocated from the existing Good Samaritan**
41. **campus and 61 new inpatient psychiatric**
42. **beds. The total value of the proposed**
43. **project based on the maximum capital**
44. **expenditure is $76,865,511.**
45. **In accordance with the statute and**
46. **regulations governing the DoN process, the**
47. **DoN program is analyzing Steward Health Care**
48. **System, LLC's application for compliance**
49. **with a set of standards and criteria**
50. **including, but not limited to, a**
51. **justification of the need for the project,**
52. **its planning process, financial feasibility,**
53. **environmental impact, and the reasonableness**
54. **of its costs and expenditures. These are**
55. **the key criteria which the DoN program will**
56. **apply in its analysis of the application.**
57. **This public hearing is in an effort to**
58. **gather information and to hear the opinions**
59. **of interested parties about the proposed**
60. **project. It is not intended to be a**
61. **question and answer session. No questions**
62. **will be permitted.**
63. **The DoN program will take all relevant**
64. **information into account in preparing its**
65. **recommendation to the Massachusetts Public**
66. **Health Council, whose decision on whether to**
67. **improve the DoN for the proposed project**
68. **will be made at one of its upcoming monthly**
69. **meetings. We will accept written comments**
70. **on this application for 10 days following**
71. **this hearing.**
72. **As this is a virtual hearing, the**
73. **logistics are different from in-person**
74. **hearings. I will review our process for**
75. **this evening. We are learning the logistics**
76. **of the system as we go, so we ask for your**
77. **patience if and when we encounter**
78. **difficulty. We will work to resolve any**
79. **problems we experience.**
80. **Our plan for tonight is as follows: We**
81. **are using a moderated conference call line,**
82. **so a moderator will manage the queue for**
83. **speaking. This meeting is being recorded**
84. **and transcribed. Press Star 1 if you would**
85. **like to testify. This will put you in the**
86. **queue. You will not be told where you are**
87. **in the queue nor will you get much notice**
88. **that you are about to testify.**
89. **When it is your turn to testify, you**
90. **will be told you are now the speaker, and**
91. **you will experience of short silence and**
92. **will then be the speaker. If you have muted**
93. **your phone, you may need to unmute. Please**
94. **begin by stating and spelling your name,**
95. **affiliation or town of residence. Please**
96. **speak clearly so our transcriber can record**
97. **everything accurately.**
98. **Because we expect many speakers, we**
99. **will limit every one to three minutes. I**
100. **will be timing people, and when you have 30**
101. **seconds left, you will hear this sound**
102. **(sound played). When your three minutes is**
103. **through, I will say "Time's up," and the**
104. **speaker -- moderator will mute you and give**
105. **the floor to the next speaker. We may**
106. **experience a slight pause between speakers.**
107. **If testimony is lengthy, we suggest you**
108. **present a three-minute summary of those**
109. **remarks and submit a full text of your**
110. **comments in writing. If you have a written**
111. **comment of your remarks, regardless of**
112. **length, please feel free to submit it to the**
113. **department by Monday, October 2, by email or**
114. **via postal service. Email us at**
115. **dph.don@state.ma.us.**
116. **All mail will get -- email will get to**
117. **us quickly if it is sent to -- mail will get**
118. **to us quickly if it is sent to the following**
119. **address: Determination of Need,**
120. **Massachusetts Department of Public Health,**
121. **67 Forest Street, Forest spelled F-O-R-E-S-**
122. **T, Marlborough, Massachusetts 01752.**
123. **Be assured that the department will**
124. **consider all comments whether presented**
125. **orally or in writing. Whether you comment**
126. **or not, please note that the department**
127. **greatly values and appreciates your**
128. **participation in the DoN process.**
129. **Before we open the line to the general**
130. **public, the applicant will go first and will**
131. **be allotted four minutes to present**
132. **information about the proposed project.**
133. **Following this presentation, we will provide**
134. **an opportunity for elected officials from**
135. **the community to comment and then be calling**
136. **on those individuals who request to speak**
137. **this evening.**
138. **I will now ask Matt Hesketh, president**
139. **of Good Samaritan Medical Center to make a**
140. **brief statement on the proposed changes.**
141. **MR. HESKETH: Good evening. My name is**
142. **Matthew Hasketh, and I have served as the**
143. **president of Good Samaritan Medical Center**
144. **in Brockton, Massachusetts, since 2021.**
145. **I've been with Steward Health Care System**
146. **since 2009, holding roles at Carney**
147. **Hospital, Morton Hospital and Steward's**
148. **corporate offices.**
149. **I joined the Good Samaritan Medical**
150. **Center in 2014 first serving as the director**
151. **of quality and patient safety, then moving**
152. **into a vice president of operations role**
153. **before becoming chief operating officer.**
154. **I appreciate the opportunity to speak**
155. **on behalf of Steward Health Care and Good**
156. **Samaritan Medical Center in our request to**
157. **build a new behavioral health facility on**
158. **the hospital's main campus located in**
159. **Brockton.**
160. **The building will accommodate 16**
161. **inpatient psychiatric beds moving from our**
162. **main campus as well as 61 inpatient**
163. **psychiatric beds previously operated at**
164. **Norwood Hospital before its closure due to a**
165. **catastrophic flood in 2020. The project is**
166. **proposed in response to DPH's request that**
167. **the beds previously operated in Norwood be**
168. **replaced by Steward Health Care.**
169. **The building will also provide robust**
170. **outpatient behavioral health services**
171. **including, but not limited to, transmagnetic**
172. **stimulation, or TMS, electroconvulsive**
173. **therapy, or ECT, a partial hospitalization**
174. **program, as well as activity therapy.**
175. **With respect to the needs of the**
176. **project, Massachusetts continues to**
177. **experience an increased prevalence of**
178. **behavioral health conditions further**
179. **exacerbated by the COVID-19 pandemic. As of**

23 September 11, 2023, there were 531 patients

24 waiting for a behavioral health bed across

1. **the Commonwealth. The need for psychiatric**
2. **beds is a statewide need.**
3. **Within the Steward Health Care**
4. **Hospitals as of this past Monday, September**
5. **18, there were 113 patients boarding**
6. **awaiting admission to a psychiatric bed.**
7. **Seventy-seven were patients in our**
8. **southeastern corridor hospitals of Good**
9. **Samaritan, Morton Hospital in Taunton, and**
10. **St. Anne's Hospital in Fall River. Thirty-**
11. **eight of those patients were in the**
12. **emergency department at Good Samaritan**
13. **Medical Center.**
14. **Through this project, Good Samaritan**
15. **will have capacity to expand its behavioral**
16. **health services and serve more patients in**
17. **southeastern Massachusetts and beyond.**
18. **Because of Good Samaritan's central location**
19. **in southeastern Massachusetts, specifically**
20. **its location just two miles off of Route 24,**
21. **patients seeking care across the region will**
22. **have an accessible site for behavioral**
23. **health care.**
24. **Additionally, as is currently the case**
	1. **with behavioral health patient load**
	2. **balancing, the proposed facility will serve**
	3. **the needs of behavioral health patients**
	4. **across the Commonwealth. The proposed**
	5. **project will not only create desperately**
	6. **needed access to inpatient psychiatric care,**
	7. **but the building will provide the space for**
	8. **the hospital to provide the full spectrum of**
	9. **behavioral health care services.**
	10. **In choosing the Good Samaritan campus,**
	11. **Steward Health Care reviewed alternative**
	12. **locations for the new facility. However,**
	13. **the Good Samaritan location had the most**
	14. **synergies for enabling us to develop a new**
	15. **facility with an improved model of care that**
	16. **is typically found only in a freestanding**
	17. **psychiatric hospital.**
	18. **The new building will be dedicated to**
	19. **providing behavioral health services in a**
	20. **freestanding like setting. The environment**
	21. **of care afforded by a separate behavioral**
	22. **health facility is more appropriate than a**
	23. **hospital setting offering a more therapeutic**
	24. **environment for patients to heal.**
		1. **The site also has good separation from**
		2. **neighboring commercial and residential areas**
		3. **and allows a generous secure outdoor area**
		4. **for patient activities and staff respite.**
		5. **While the site is separated from the main**
		6. **hospital building, it will still be easily**
		7. **supported by the hospital's existing**
		8. **infrastructure.**
		9. **Steward and Good Samaritan are**
		10. **committed to providing timely access to**
		11. **psychiatric care in the most appropriate**
		12. **setting. We believe that this project will**
		13. **best meet the needs of our patient panel and**
		14. **the communities in which we serve.**
		15. **I want to thank the Department of**
		16. **Public Health, our moderator, Dennis Renaud,**
		17. **and the public for their time today and look**
		18. **forward to bringing this important project**
		19. **to our patients in the Commonwealth. Thank**
		20. **you.**
		21. **MR. RENAUD: Thank you. We will now be**
		22. **taking comments from invited elected**
		23. **officials. Our first speaker will be**
		24. **Senator, State Senator, Michael Bradley.**
			1. **MR. BRADY: Thank you. For the record,**
			2. **my name is State Senator Michael Brady,**
			3. **spelled B-R-A-D-Y. I represent the Second**
			4. **Plymouth Norfolk District in the**
			5. **Commonwealth of Massachusetts, including the**
			6. **city of Brockton and several towns in**
			7. **southeastern Massachusetts.**
			8. **I strongly support Good Samaritan**
			9. **Medical Center's efforts to expand the**
			10. **mental health care facility in the city of**
			11. **Brockton to provide urgently needed services**
			12. **to the people of our cities and towns in the**
			13. **southeast region. This proposed facility**
			14. **will allow our citizens to receive the**
			15. **mental health care they need in a healing**
			16. **environment in their own community. Its**
			17. **construction will have no impact on existing**
			18. **neighborhoods, and it will be built on a**
			19. **current hospital campus, as was mentioned.**
			20. **The numbers will tell a clear and**
			21. **compelling story of the standing pressures**
			22. **placed on Good Samaritan and the urgent need**
			23. **for our citizens to have adequate mental**
			24. **health care. From July of last year to**

1 August of this year, there has been a 70

1. **percent increase in the number of mental**
2. **health care patients presented at the**
3. **hospital's emergency rooms every day.**
4. **Behavioral health boarding patients on**
5. **an average wait in the emergency departments**
6. **of up to 46 hours plus and to be placed in**
7. **an inpatient psychiatric facility. This has**
8. **been a major impact on health care**
9. **facilities in southeastern Massachusetts,**
10. **including the Good Samaritan campus, so I**
11. **strongly support this expansion, and I ask**
12. **that the Department of Mental Health**
13. **supports this moving forward.**
14. **There is a desperate need across our**
15. **Commonwealth, including the area of**
16. **southeastern Massachusetts, which I**
17. **represent, for expanded mental health care**
18. **in our district, and I ask the Department of**
19. **Mental Health to move this forward and**
20. **support this strongly, and I thank you all**
21. **for your time tonight.**
22. **MR. RENAUD: Thank you. Our next**
23. **speaker will be State Representative Gerard**
24. **Cassidy.**
25. **MR. CASSIDY: Thank you. Thank you**
26. **very much. I'm Gerry Cassidy. I'm a state**
27. **rep from the Ninth Plymouth District, which**
28. **represents Brockton, Easton, West**
29. **Bridgewater and East Bridgewater.**
30. **Just to be perfectly clear, I'm in full**
31. **support of Steward Good Sam Hospital to its**
32. **expanded mental health in Brockton. This**
33. **facility will provide urgent mental health**
34. **care to the most vulnerable residents of our**
35. **region. Senator Brady was definitely right**
36. **about the 70 percent increase on mental**
37. **health patients in our ER, 47 hours to be**
38. **placed from the ER. I've spoken to many of**
39. **the nurses there. Staff is gravely, gravely**
40. **impacted by this.**
41. **We in the House of Representatives**
42. **recognize this crisis, and as you can see**
43. **from our budgets and amendments, addressing**
44. **this is a top priority, and we will continue**
45. **to increase funding.**
46. **DPH, I just want to say thank you very**
47. **much. You've always been a fantastic**
48. **partner in government over my 37 years and**
49. **always so responsive because in the end, we**
50. **both realize that our goal is to help those**
51. **that are in need. Thank you very much for**
52. **everything you do, and Good Sam Medical**
53. **Center is a valued resource in our region.**
54. **Mental health is not going to decline**
55. **anytime soon. I stand with Good Sam's**
56. **willingness to expand its beds and resources**
57. **to our Brockton region. Thank you.**
58. **MR. RENAUD: Thank you. Our next**
59. **speaker will be Brockton mayor, Robert**
60. **Sullivan.**
61. **MR. SULLIVAN: Good evening, Dennis. I**
62. **want to thank Representative Cassidy and**
63. **State Senator Michael Brady. My name is**
64. **Robert Sullivan. I'm mayor of the city of**
65. **Brockton.**
66. **I want to just go on record as saying I**
67. **support this 1,000 percent. Full**
68. **disclosure, before I became mayor, I was a**
69. **volunteer board member, non-compensated**
70. **board member, at Good Sam. My three**
71. **children were born at Good Sam. They do**
72. **yeoman's work and that was proven by COVID.**
73. **It was definitely proven with the Brockton**
74. **Hospital fire.**
75. **So, you know, in terms of Brockton**
76. **being the only city in Plymouth County, the**
77. **latest census numbers say 106,000 residents.**
78. **It's located physically in the City of**
79. **Champions, Brockton, Mass., but it really is**
80. **a regional facility. And we know without**
81. **question there is a dire need. Good Sam is**
82. **truly a valued resource in our community,**
83. **and I truly believe that action must be**
84. **taken to give it the resources it needs to**
85. **continue to provide quality care.**
86. **I took the time to walk the site of the**
87. **proposed location. Again, it does not**
88. **impact any neighboring communities**
89. **whatsoever. It is literally on the hospital**
90. **campus in the woods. It's a beautiful**
91. **setting.**
92. **The need for mental health services to**
93. **care for people in our community and our**
94. **Commonwealth is not expected to decline at**
95. **any time soon. And we know this because**
96. **Blue Cross Blue Shield of Massachusetts**
97. **recently did a survey, and they deemed the**
98. **issue as a crisis within our Commonwealth.**
99. **About 26 percent of the people who need the**
100. **care cannot get the care.**
101. **So I want to go on record saying this**
102. **is, in my humble opinion, a no-brainer. We**
103. **need it in the city of Brockton. We need it**
104. **in surrounding towns and throughout the**
105. **Commonwealth. To expand the beds and the**
106. **resources to meet this need is really a duty**
107. **that we owe, and as the mayor of Brockton, I**
108. **just want to go on record as saying I hope**
109. **DPH will support this endeavor because we**
110. **know that it will help people not just in**
111. **our city, not just in Plymouth County, but**
112. **without a fact, it will be throughout the**
113. **Commonwealth of Massachusetts.**
114. **Mental health, behavioral health issues**
115. **are real, and I just, again, want to thank**
116. **you for your time, and I support this**
117. **wholeheartedly. Thank you.**
118. **MR. RENAUD: Thank you. We will now**
119. **begin taking comments from the public. If**
120. **you wish to speak at this time, please hit**
121. **Star 1 and follow the instructions of the**
122. **operator.**
123. **Operator, may we have our first speaker**
124. **now, please.**
125. **THE OPERATOR: Tricia Monahan, your**
126. **line is open.**
127. **MS. MONAHAN: Thank you very much. My**
128. **name is Tricia Monahan, and I live in**
129. **Norwood. I'm calling to oppose this**
130. **building. To me, they're not really**
131. **expanding services. What Steward is doing**
132. **is taking the same number of beds that they**
133. **had in Brockton and combining them with the**
134. **number of beds that they had in Norwood but**
135. **removing the beds from Norwood and putting**
136. **them in Brockton.**
137. **So yes, the services definitely are**
138. **being expanded in Brockton, but really,**
139. **there's nobody that's going to deny the fact**
140. **that mental health issues are getting bigger**
141. **and bigger and bigger every year, so why**
142. **don't we have psych beds in every single**
143. **hospital? We're leaving Norwood in a lurch.**
144. **We've already lost the hospital because the**
145. **roof leaks flooded the building, and now we**
146. **don't have the hospital, we don't have the**
147. **psych services, and they're not expanding.**
148. **They're moving down to there.**
149. **There are psych beds available in**
150. **Brockton. Let's see, Signature Hospital has**
151. **the Brockton -- there's a DoN in for**
152. **Brockton Hospital to replace their beds, but**
153. **they're not replacing the beds here, and to**
154. **me, that's -- you're not serving the**
155. **residents of Norwood or the people that**
156. **Norwood Hospital served. Thank you.**
157. **MR. RENAUD: Thank you. Again, as a**
158. **reminder, just please press Star 1 to**
159. **testify. Operator, could we please have the**
160. **next speaker.**
161. **THE OPERATOR: Our next speaker is**
162. **George Sigel. Your line is open.**
163. **MR. SIGEL: Yeah, hi. I do agree with**
164. **the previous speaker. We are a group that**
165. **have tried desperately to have some of the**
166. **problems that you all cite addressed by**
167. **Steward in Norwood as they proceed in**
168. **building a smaller hospital and a hospital**
169. **that, in fact, will not offer psychiatric**
170. **services.**
171. **Further, I object to the fact that the**
172. **interest and need of Brockton and perhaps**
173. **Steward in the Brockton area is being used**
174. **to keep at a great distance the reality of**
175. **what they are not doing in Norwood, and I**
176. **think that that needs to be addressed for**
177. **all of the reasons so stated by the town and**
178. **state officials.**
179. **It does surprise me the Department of**
180. **Public Health has not paid more attention to**
181. **the two DoNs that Steward had submitted.**
182. **One is approved, and it's the hospital being**
183. **built. I'm surprised the governor has not**
184. **expressed more concern. I'm surprised that**
185. **the Brockton proposal is really being**
186. **misused.**
187. **A good idea, though, it is, and I**
188. **probably do support it, but I don't support**
189. **it being used to hide what Steward, in fact,**
190. **is not doing in Norwood. And in Norwood,**
191. **they are taking away about the equivalent**
192. **number of beds and services without any, any**
193. **mental health presence in the programming**
194. **within Norwood.**
195. **I think that both proposals deserve the**
196. **support, but more attention needs to be paid**
197. **to the simple fact that Brockton's proposal**
198. **is not a proposal that responds to the needs**
199. **that we have on multiple occasions asked**
200. **Steward about that exists in the 20 towns**
201. **served in and around Norwood. It's an**
202. **entirely different community.**
203. **Yes, there's a statewide and a**
204. **nationwide need for psychiatric beds. This**
205. **is hardly a time for Steward to pretend that**
206. **a good proposal in Brockton is sufficient to**
207. **cover the mental health needs that they are**
208. **deleting from their Norwood expansion.**
209. **I wish I (Zoom inaudible) -- but I also**
210. **want to object to this being considered a**
211. **public hearing. It's hardly a public**
212. **hearing. I don't know to whom I'm talking,**
213. **and I don't see people, and there was no**
214. **such hearing for Norwood, and I don't**
215. **consider this a public hearing.**
	1. **MR. RENAUD: Okay, thank you. One**
	2. **other just reminder again is to hit --**
	3. **please hit Star 1 if you'd like to speak.**
	4. **And, Operator, please have the next speaker**
	5. **into the forum.**
	6. **THE OPERATOR: Our next speaker is**
	7. **Lynette Sigel. Your line is open.**
	8. **MS. SIGEL: Hi. My name is Lynette**
	9. **Sigel, spelled S-I-G-E-L. I am the**
	10. **administrative director of a group practice**
	11. **for mental health counseling based in**
	12. **Norwood.**
	13. **I see a great need for easily**
	14. **accessible hospital-based services. To many**
	15. **that are in need, Brockton is not a solution**
	16. **to the problem created by the absence of**
	17. **psych beds in Norwood. Therefore, from that**
	18. **perspective, I can't support this as a**
	19. **substitute for the lack of psychiatric**
	20. **programs at Norwood.**
	21. **In and of itself, great program at**
	22. **Brockton, but just it does not help us in**
	23. **Norwood. Thank you very much.**
	24. **MR. RENAUD: Thank you. Operator,**
		1. **could you please let the next speaker in.**
		2. **THE OPERATOR: Our next speaker is Neil**
		3. **Patterson. Your line is open.**
		4. **MR. PATTERSON: Hi. Oh, yeah. My name**
		5. **is Neil. I've had mental health challenges**
		6. **for many years. I've had lots of therapy**
		7. **and many, many hospitalizations. Thanks to**
		8. **the experts in the mental health field, I'm**
		9. **basically symptom free.**
		10. **Steward Health Care are constructing**
		11. **the new Norwood Hospital, and their plans**
		12. **there are omitting psych wards. Steward's**
		13. **motto is new hospital, same commitment, but**
		14. **that's not true, because the old hospital**
		15. **has various helpful psych wards to serve**
		16. **people in many surrounding towns. As for**
		17. **myself, psych wards in the old hospital**
		18. **helped save my life.**
		19. **In this day and age because of the**
		20. **pandemic and concerns about our planet and**
		21. **gun violence, we desperately need psych**
		22. **wards. Together we need to pressure Steward**
		23. **Health Care to have psych wards in the new**
		24. **hospital for people of all ages.**
			1. **I have more to say. Do you want to**
			2. **hear it?**
			3. **MR. RENAUD: You have additional time.**
			4. **MR. PATTERSON: My grandfather, Moopa**
			5. **(phonetic), my grandfather, my mother's**
			6. **father, was full of love. He was positive,**
			7. **gentle and kind. My mother called him a**
			8. **saint on earth. He was a man of few words,**
			9. **but if he saw injustice, he got angry and**
			10. **spoke his mind.**
			11. **When Putin insanely attacked Ukraine, I**
			12. **was in a geri-psych ward. My anger**
			13. **skyrocketed. I use strong Navajo language**
			14. **to express my anger against Putin's**
			15. **injustice. My mother and I are like Moopa.**
			16. **We use the power of the pen to express our**
			17. **anger against injustice.**
			18. **Steward Health Care are constructing**
			19. **the new Norwood Hospital. They are omitting**
			20. **psych wards. My friends and I are angry at**
			21. **Steward for this selfish travesty of**
			22. **justice. Let's peacefully fight Steward for**
			23. **their unjust plans for the hospital.**
			24. **(Mr. Patterson singing.)**
216. **MR. PATTERSON: That's about as good as**
217. **I can do. Now, I can tell you, if they**
218. **don't comply, we are going to demonstrate.**
219. **MR. RENAUD: Thank you for your**
220. **testimony. Operator, please allow the next**
221. **speaker in.**
222. **THE OPERATOR: Our next speaker is**
223. **Michael Donovan. Your line is open.**
224. **MR. DONOVAN: Good evening, all. My**
225. **name is Michael Donovan. I'm a resident in**
226. **Norwood, Mass., and I too would like to**
227. **express my disapproval of this proposed**
228. **expansion in Brockton. Brockton, all be --**
229. **Good Samaritan, great hospital, had some**
230. **experience there.**
231. **It is -- it is this project that will**
232. **bring Norwood to a crisis point, and we**
233. **cannot afford to lose over 60 beds**
234. **desperately needed not only in Norwood, but**
235. **every town. Norwood, primary service area,**
236. **has serviced over 10 communities for nearly**
237. **100 years, and to lose those beds at this**
238. **time when we all know COVID has thrown us**
239. **all for a loop, young and old, and we need**
240. **to address all communities and how best to**
241. **serve all communities, not just Brockton.**
242. **Great town, great city, however, this**
243. **project will bring to -- will bring Norwood**
244. **to a desperate situation.**
245. **The hospital is now being built, but we**
246. **have grave concerns, and we hope to have**
247. **more discussion on this in the future,**
248. **perhaps find a better solution than the one**
249. **currently proposed. Thank you.**
250. **MR. RENAUD: Thank you. Operator,**
251. **could you please let the next speaker in?**
252. **THE OPERATOR: Thank you. Our next**
253. **speaker is Ray Breton. Your line is open.**
254. **MR. BRETON: Thank you. I'm Ray**
255. **Breton. I also the president of the South**
256. **Norwood Alliance for the Mentally Ill.**
257. **We've been dealing with this kind of problem**
258. **for many years.**
259. **I have closely reviewed the DoN for**
260. **Good Samaritan. I think it's a good one,**
261. **but I think that the applicant is a little**
262. **bit misguided. He has proposed -- he has**
263. **assumed that what he is doing is making a**
264. **regional contribution, but when actually if**
265. **you read the DoN carefully, you see that he**
266. **is making a local contribution. It's going**
267. **to be great for Brockton, but it completely**
268. **leaves Norwood in the lurch. As a matter of**
269. **fact, as I showed in my written testimony**
270. **that you already have, it is very much**
271. **likely to make the boarding town -- boarding**
272. **times in the Norwood ER skyrocket, just go**
273. **fantastically.**
274. **The problem is that there were 61 beds**
275. **that were being serviced in Norwood by the**
276. **old hospital. That is pre -- the pre-**
277. **catastrophic hospital. Those 61 beds are**
278. **still going to be needed, but the beds in**
279. **Brockton Good Samaritan are going to be**
280. **taken by those other 22 towns around Norwood**
281. **-- around Brockton, I'm sorry. And so they**
282. **will not be able by and large to be**
283. **accessed.**
284. **So I am suggesting this, that you**
285. **approve that the -- you approve the Good**
286. **Samaritan DoN with a provision that is**
287. **conditionally, conditionally that the**
288. **applicant also -- the condition would be**
289. **that the applicant construct at least a 20-**
290. **bed inpatient unit on the Norwood campus,**
291. **and there's some provision of that in the**
292. **Norwood DoN. So I think that's what needs**
293. **to be done, and I certainly hope that it is**
294. **going to be done.**
295. **I have a further question, however.**
296. **Someone told me that the build out at Good**
297. **Samaritan is going to extend until 2030.**
298. **Now, the Norwood Hospital is scheduled to**
299. **become operational in 2024. If that's true,**
300. **then there's a whole six years in which**
301. **there is no -- nothing to replace in either**
302. **Brockton or in Norwood, so I think that**
303. **needs to be cleared up. If that's the case,**
304. **then it accelerates the need to do a present**
305. **build out in the Norwood Hospital. Thank**
306. **you for your attention.**
307. **MR. RENAUD: Thank you for your**
308. **testimony. Operator, could you please let**
309. **the next speaker in.**
310. **THE OPERATOR: We are showing no**
311. **further in the queue. Once again, Star 1**
312. **and please unmute your phone and record your**
313. **name. Star 1 for any comments.**
314. **MR. RENAUD: Okay, since we do not have**
315. **any speakers in the queue right now, we will**
316. **wait 10 minutes, and if no one joins the**
317. **queue, I will provide some closing comments.**
318. **(Pause)**
319. **THE OPERATOR: Our next speaker I**
320. **believe is Jill. Please state and spell**
321. **your name clearly when prompted. Jill, go**
322. **ahead, your line is open.**
323. **MS. MAZZOLA: Hi, my name is Jill**
324. **Mazzola, M-A-Z-Z-O-L-A. I'm a resident of**
325. **Norwood, and I oppose this project on the**
326. **grounds of suitability, I'll call it,**
327. **because Steward has closed a couple of**
328. **units. This past year in '22, the unit on**
329. **-- at Good Samaritan was closed because lack**
330. **of staffing. They've also closed some of**
331. **their substance abuse units, and they moved**
332. **them from one unit to another unit to**
333. **another unit.**
334. **So I think, number one, I think they**
335. **will have a lot of difficulty staffing a 70-**
336. **bed hospital with all mental health**
337. **patients. I don't know where they foresee**
338. **getting their staffing from, but I agree**
339. **with the last caller that some of these beds**
340. **should remain at Norwood Hospital.**
341. **There's a great need, and the service**
342. **area does not include much of what Norwood**
343. **Hospital included and the closest one**
344. **probably would be downtown Boston or**
345. **Bournewood in West Roxbury which is a**
346. **private psych facility. So thank you very**
347. **much for your cooperation and listening to**
348. **me. Thank you.**
349. **MR. RENAUD: Thank you. Operator,**
350. **could you please let the next speaker in?**
351. **THE OPERATOR: George Sigel, your line**
352. **is open.**
353. **MR. SIGEL: Oh, thank you. I just**
354. **thought maybe there was a possibility of**
355. **using some of the unused time. I kind of**
356. **agree with everybody, and that's the**
357. **problem, that there's a need for a solid**
358. **program in the Brockton area and the 20**
359. **communities that surround the Brockton area.**
360. **However, that should not come at the expense**
361. **of programming that is needed in the Norwood**
362. **area.**
363. **Further, I am very surprised that the**
364. **State in its responsibility to oversee the**
365. **ebb and flow of services as provided by**
366. **these large corporations have not paid**
367. **attention to the deficits that are being**
368. **created in Norwood. Not that it's at the**
369. **expense of services that are needed in the**
370. **Brockton area, but it's being -- the**
371. **Brockton proposal really is being used to**
372. **totally obfuscate the reality that no**
373. **services for substance abuse or mental**
374. **illness are being developed in the Norwood**
375. **area, which has nothing to do with services**
376. **that are needed in the -- in the Brockton**
377. **area.**
378. **And it's very interesting to me that**
379. **the town officials represented at this**
380. **meeting are town officials that obviously**
381. **have close ties to the Brockton community,**
382. **and good luck to us all. However, you will**
383. **note that the town officials from Norwood**
384. **are absent from this so-called hearing,**
385. **when, in fact, I think they would have a lot**
386. **to say about the needs that are not going to**
387. **be met in the Norwood and surrounding areas**
388. **through this proposal.**
389. **I personally don't oppose the proposal**
390. **for Good Samaritan. But I am surprised, as**
391. **I said earlier, shocked, that the State in**
392. **its wisdom has kind of overlooked the**
393. **reality of the earlier proposal to build a**
394. **smaller hospital in Norwood that totally**
395. **excluded any services inpatient for the**
396. **Norwood proposal that is fast being built as**
397. **we speak.**
398. **There are needs everywhere. Why the**
399. **State in its wisdom would overlook the**
400. **proposal submitted in Norwood and then allow**
401. **as an explanation, it's all on tape, that**
402. **the proposal in Brockton would be even**
403. **better than any proposal allowed in Norwood,**
404. **that's just totally absurd, and I think it**
405. **is being used by the Steward officials to**
406. **basically cloud the fact that Brockton's**
407. **gain, in fact, is Norwood's loss.**
	1. **And Brockton either using flexible --**
	2. **flexible build-out space or just repurposing**
	3. **the smaller facility that's being built, all**
	4. **that is still possible, and I'm hoping the**
	5. **State wakes up to the fact this is an**
	6. **opportunity that was dropped by the State**
	7. **from the mayor down through the Department**
	8. **of Health to the DoN process, et cetera, et**
	9. **cetera.**
	10. **And Brockton sounds to me like a good**
	11. **proposal. I've read the DoN carefully.**
	12. **However, it is now coming out of the hide of**
	13. **the program that Steward is proposing for**
	14. **the Norwood area. Thank you.**
	15. **MR. RENAUD: Thank you. Operator,**
	16. **please let the next speaker in.**
	17. **THE OPERATOR: I'm showing no further**
	18. **speakers. Once again, Star 1 if you would**
	19. **like to speak.**
	20. **MR. RENAUD: Okay, at this point, we**
	21. **will wait 10 minutes. If there are no**
	22. **additional speakers, I will have some**
	23. **closing comments.**
	24. **THE OPERATOR: Kathleen Rooney, your**
		1. **line is open.**
		2. **MS. ROONEY: Thank you. Can you hear**
		3. **me?**
		4. **MR. RENAUD: Yes.**
		5. **MS. ROONEY: Okay, sorry. Thank you.**
		6. **My name is Kathleen Rooney, R-O-O-N-E-Y. I**
		7. **am a Norwood resident and former Steward**
		8. **employee. And while I on one hand support**
		9. **the fact that there will be a new facility**
		10. **in Brockton, it's really only replacing the**
		11. **beds that were in Norwood Hospital and the**
		12. **beds that they closed at Good Samaritan, and**
		13. **the fact that it's not -- hasn't started**
		14. **being built yet means that all of those beds**
		15. **are now out of the system.**
		16. **And I'm going to follow up on what Jill**
		17. **said that Steward has many -- had some units**
		18. **closed, some psychiatric units closed, in**
		19. **their other hospitals, and the units that**
		20. **are open are not filled to capacity, and**
		21. **they won't go to capacity. I assume it's**
		22. **because of staffing.**
		23. **But I just want to be on record for the**
		24. **Department of Public Health to know that**
408. **including Norwood and Good Samaritan, there**
409. **are probably close to 140 beds that are now**
410. **out of commission in the mental health field**
411. **in the state because they are not able to**
412. **staff these units, or for whatever reason,**
413. **they are not filling these units to**
414. **capacity.**
415. **So that is a big problem obviously, and**
416. **the wait times in the ERs are bad and that**
417. **the wait times in the ER in Norwood are**
418. **going to increase because there's nowhere**
419. **for them to go. Like someone said earlier,**
420. **normally the hospitals that have units**
421. **absorb their people from their emergency**
422. **rooms.**
423. **So I just want to, like I said, be on**
424. **record. I just want the Department of**
425. **Public Health to know that Steward has many**
426. **psych beds that they are not utilizing right**
427. **now. Thank you for your time.**
428. **MR. RENAUD: Thank you. Operator,**
429. **could you please let the next speaker in.**
430. **THE OPERATOR: I'm showing no further**
431. **speakers. Once again, Star 1 if you would**
432. **like to speak.**
433. **MR. RENAUD: We will give another 10**
434. **minutes. If there are no further speakers,**
435. **I will have some closing comments.**
436. **(Pause)**
437. **THE OPERATOR: We do have one coming**
438. **through. Neil Patterson, your line is open.**
439. **MR. RENAUD: Okay.**
440. **MR. PATTERSON: Well, I'm optimistic.**
441. **I think the future generation, younger**
442. **people, are going to be in tune with what's**
443. **going on in the world, and they want to -- I**
444. **believe they want to help save the world.**
445. **We all have things to be grateful for and**
446. **our children so important. They are having**
447. **a lot of health problems too.**
448. **It's serious, but I believe that there**
449. **will be quality employees for different**
450. **hospitals and stuff. I really believe that.**
451. **MR. RENAUD: Thank you for your**
452. **testimony. Operator, could you please let**
453. **the next speaker in.**
454. **THE OPERATOR: Once again, Star 1 if**
455. **you would like to speak.**
	1. **MR. RENAUD: Okay, right now we do not**
	2. **have anyone in the queue. So we will wait**
	3. **10 minutes, and if we don't have a speaker,**
	4. **I will make some closing comments.**
	5. **(Pause)**
	6. **THE OPERATOR: George Sigel, your line**
	7. **is open.**
	8. **MR. SIGEL: Thank you again. I'll be**
	9. **very brief. I really want the record to**
	10. **show that this is hardly an open forum, an**
	11. **open meeting. It is an opportunity to vent,**
	12. **and I'm glad that I've had this opportunity.**
	13. **However, it totally neglects the problem**
	14. **that is of concern to those of us who have**
	15. **formed an advocacy group on behalf of**
	16. **behavioral health beds to be incorporated**
	17. **maybe to flexible space that's incorporated**
	18. **in the Norwood proposal.**
	19. **But this has nothing to do really with**
	20. **the Brockton proposal. In my opinion the**
	21. **State in its -- with its responsibility for**
	22. **oversight has really dropped the ball and**
	23. **created a further problem with which I think**
	24. **is being neglected. Thank you.**
		1. **MR. RENAUD: Thank you. Operator,**
		2. **could you please let the next speaker in.**
		3. **THE OPERATOR: Once again, Star 1 if**
		4. **you would like to speak.**
		5. **MR. RENAUD: Okay, with no one in the**
		6. **queue, we will wait.**
		7. **(Pause)**
		8. **THE OPERATOR: Showing no comments at**
		9. **this time.**
		10. **MR. RENAUD: Okay, thank you.**
		11. **(Pause)**
		12. **THE OPERATOR: No further comments at**
		13. **this time, sir.**
		14. **MR. RENAUD: Thank you for the update.**
		15. **We will wait a few more minutes.**
		16. **(Pause)**
		17. **MR. RENAUD: Since there are no**
		18. **additional speakers in the queue, we will**
		19. **now end the public hearing.**
		20. **As a reminder, written comments will be**
		21. **accepted through Monday, October 2, 2023.**
		22. **Thank you for your testimony.**
		23. **THE OPERATOR: And this does conclude**
		24. **today's conference. You may disconnect at**

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| --- | --- | --- | --- |
| **1** | **this**  | **time.**  |  |
| **2** |  | **(Whereupon, public hearing**  | **was**  |
| **3** |  | **concluded at 6:47 p.m.)**  |  |
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* + - 1. **C E R T I F I C A T E**
			2. **COMMONWEALTH OF MASSACHUSETTS**
			3. **NORFOLK, SS.**

**4**

1. **I, Amy Marascio, a Professional Court Reporter**
2. **and Notary Public in and for the Commonwealth of**
3. **Massachusetts, do hereby certify that the foregoing**
4. **telephonic public hearing was taken before me on**

**9 September 20, 2023.**

1. **The said telephonic public hearing was taken**
2. **audiographically by myself and then transcribed under**
3. **my direction. To the best of my knowledge, the within**
4. **transcript is a complete, true and accurate record of**
5. **said telephonic public hearing.**
6. **I am not connected by blood or marriage with any**
7. **of the said parties, nor interested directly or**
8. **indirectly in the matter in controversy.**
9. **In witness whereof, I have hereunto set my hand**
10. **this 22nd day of September 2023. 20**

**<%28366,Signature%>**

**21**

**22 Amy Marascio, Notary Public**

**23 My Commission Expires:**

**24 May 31, 2030**

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