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STATE OF NEW JERSEY  
DEPARTMENT OF HEALTH & PUBLIC HEALTH SERVICES  
RE: ST. FRANCIS MEDICAL CENTER  
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October 26, 2022  
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Oral sworn testimony in the  
above-captioned matter taken via remote  
videoconference before LISA F. PENROD, Certified  
Court Reporter (XI01753) and Registered Professional  
Reporter, on the above date, commencing at 6:10  
p.m., there being present:

1     A P P E A R A N C E S:

2     DEPARTMENT OF HEALTH

3       Ellsworth Havens  
4       Stefanie Mozgai  
5       Robin Ford  
6       Scott Owens

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      Jamie Hernandez, Organizer

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1 MS. HERNANDEZ: Good evening. We're  
2 going to be starting the hearing in a few moments.  
3 Did everybody sign in and check to see if you wanted  
4 to speak tonight?

5 MR. HAVENS: Good evening. My name is  
6 Ellsworth Havens. I go more the guy behind the  
7 curtain.

8 My name is Ellsworth Havens. I am a  
9 member of the State Health Planning Board.

10 Joining me tonight is Stefanie Mozgai,  
11 who is assistant commissioner.

12 Okay. This is a public hearing of the  
13 State Health Planning Board in relationship to two  
14 Certificate of Need applications.

15 The first Certificate of Need  
16 application is for change in membership of the St.  
17 Francis Medical Center nonprofit corporation to the  
18 Capital Health as the sole corporate member, and the  
19 relocation of services from St. Francis Medical  
20 Center to Capital Health Regional Medical Center.

21 And the second is the Certificate of  
22 Need application for the closure of the St. Francis  
23 Medical Center.

24 The department deemed the application  
25 complete and in accordance and requirements of law,

1 the State Health Planning Board is required to hold  
2 a public hearing on this application within 30 days  
3 of this action.

4 Adequate notice of this hearing has  
5 been published in accordance with the provisions of  
6 N.J.S.A. 26:2H-15.8. Notice was sent to the  
7 secretary of state who posted the notice in a public  
8 place.

9 Copies of the hospital's Certificate  
10 of Need application are available for review at the  
11 Trenton Free Public Library, the New Jersey State  
12 Library in Trenton and the Department of Health.

13 Information gathered at this hearing  
14 will be reviewed by the State Health Planning Board  
15 in addition to reviewing the application from  
16 Capital Health Systems, Inc., and the department's  
17 staff analysis and recommendations in a public  
18 meeting.

19 Although not all members of the State  
20 Health Planning Board are present tonight, the  
21 community public hearing is being transcribed, and  
22 the transcript, along with any written comments  
23 submitted tonight, will be made available to all  
24 board members, along with the transcript and written  
25 submissions prior to the meeting to review this

1 application.

2                   There will also be limited time  
3 available at the next public meeting of the State  
4 Health Planning Board to hear from members of the  
5 public. At that meeting, the applicant will present  
6 the application and answer questions the board may  
7 have.

8                   In the interest of making efficient  
9 use of time for tonight's hearing, each speaker will  
10 be limited to three minutes. If have you longer  
11 written comments with you, pleads provide a copy to  
12 the board and they will be added to our record.

13                   Anyone interested in speaking tonight  
14 should sign in on the speaker sheet to the entrance  
15 of the auditorium, and I suggest if you haven't  
16 already, please do that.

17                   Anyone who wants to submit written  
18 comments after tonight's hearing and before the  
19 board meeting is urged to do so. Such comments must  
20 be submitted no later wednesday, November 2nd, and  
21 should be addressed to the State Health Planning  
22 Board in care of the Department of Health.

23                   For those of you unfamiliar with the  
24 Certificate of Need process, the State Health  
25 Planning Board will vote on a recommendation as to

1 decision on this application, which will be  
2 submitted to the Commissioner of Health.

3 The State Health Plan Board's hearing  
4 is part of the Certificate of Need process, and your  
5 comments will be considered as we review issues  
6 related to health planning, hospital and related  
7 health care services and access to health care  
8 services.

9 Your comments are an important part of  
10 this process and will be considered along with all  
11 the other materials submitted by the applicant.

12 The board can recommend approval of  
13 this application, approval with conditions or denial  
14 of this application before it.

15 The commissioner will make the final  
16 decision on the application after the board makes  
17 its recommendations.

18 Thank you.

19 We'll begin now the process of people  
20 testifying. The first person is Robin Vaughn.  
21 Podium is to the right. Please state your name.

22 MS. VAUGHN: Yes. My name is Robin  
23 Vaughn. I'm here as a representative of the City of  
24 Trenton. I sit and serve on the Trenton City  
25 Council and I represent the west ward. Also, I'm a

1 tax payer and resident of the city as well.

2 I just wanted to make a comment  
3 regarding the transfer of services from St. Francis  
4 Hospital to Capital Health. It's a very complex  
5 transaction and it's not one that I'm against, but I  
6 am certainly for, in support of a very thorough and  
7 transparent capital expenditure plan or analysis.

8 I don't really fully understand what  
9 components or variables or criteria that is set  
10 forth in the Certificate of Need application, but I  
11 would definitely want for my city to see and to  
12 understand the cost of this transaction, and whether  
13 our government, government, state government,  
14 federal government can come up with the necessary  
15 funding that can support this type of transaction  
16 and make it successful and it ensure that whatever  
17 funding that's going to be provided, that it stays  
18 in the border of the city and it stays to help build  
19 out and redevelop the area and the hospital, even to  
20 perhaps to be a Level I trauma center and to assure  
21 that the business and the development of the area is  
22 also funded.

23 And those are -- that's primarily my  
24 comment, and I hope the capital expenditure plan is  
25 made available and that the board, the health, the

1 New Jersey Department of Health board considers that  
2 just as seriously as it considers providing the  
3 services, the medical services and the health  
4 services that a top tier hospital provides in a  
5 capital city with the socioeconomic demographic that  
6 is Trenton. Thank you.

7 MR. HAVENS: Thank you.

8 All right. The next speaker,  
9 Mr. Maghazehe. If you could please spell your name  
10 for the record and your position.

11 MR. MAGHAZEHE: Okay. Al, A-L,  
12 M-A-G-H-A-Z-E-H-E. I'm the presidency of Capital  
13 Health.

14 MR. HAVENS: Thank you.

15 MR. MAGHAZEHE: Good evening. I'm Al  
16 Maghazehe, president and CEO for Capital Health.  
17 Thank you for the opportunity to briefly speak this  
18 evening.

19 As you heard, St. Francis Medical  
20 Center and its current owner Trinity Health have  
21 determined that after several years of struggling,  
22 St. Francis cannot continue to operate.

23 Earlier this year, they signed an  
24 agreement with us for Capital Health to take over  
25 services from St. Francis Medical Center pending the

1 regulatory approval.

2 We signed this agreement because  
3 Capital Health share the community's very real  
4 concern that critical health care services remain in  
5 Trenton. We want to save services, jobs that will  
6 be lost to the city if St. Francis closes without  
7 the approvals needed for Capital Health to take over  
8 these services.

9 Because of the serious situation St.  
10 Francis is in, this is happening very quickly. So a  
11 couple of things I wanted to bring up.

12 Capital Health will continue to  
13 operate an emergency department in East Trenton.  
14 This was an issue that's been brought up in many of  
15 our community meetings that we've been attending,  
16 and I'm committing to you, it's a requirement by the  
17 state that we have a satellite emergency department  
18 where St. Francis is located, in that area, and  
19 that's a forever requirement. And I'm committing  
20 that we will make sure that that actually happens.

21 We're working to get the necessary  
22 approval to make sure services remain in Trenton,  
23 including behavioral health and cardiac surgery. So  
24 we already have a very significant behavioral health  
25 program at Capital Health in Trenton. We are going

1 to double the size of that to absorb was in St.  
2 Francis.

3 And that's another commitment as a  
4 cardiac surgeon, no question between the corridor  
5 between Camden and New Brunswick, there is no  
6 cardiac surgery program. As we are sitting right  
7 here, if you look at that corridor, from Camden to  
8 New Brunswick, there is no cardiac surgery program.

9 This is not just threatening Trenton.  
10 This is going beyond Trenton. This program  
11 absolutely has to stay in Trenton to save lives, as  
12 it is today, St. Francis is.

13 If approved, the emergency department  
14 and internal medicine clinic and other programs will  
15 be at St. Francis site for at least near term.

16 why do we say near term? Because we  
17 have, at least with Trinity, to stay in that  
18 location for 18 months post closure. So at least  
19 going to be for 18 months, hoping that during those  
20 18 months, something will happen there and there's a  
21 new development or something of that nature.

22 If that doesn't happen, we're still  
23 required to be in that location. We just have to  
24 find a place quickly. Hopefully that won't be  
25 necessary and we'll be able to stay there.

1                   So will the CARES program, which is an  
2                   important service for our youth in need of  
3                   behavioral health service. Long-term Capital Health  
4                   will develop near the emergency department an  
5                   outpatient site near the current St. Francis site.  
6                   We'll share more as we know more about Capital  
7                   Health in Trenton. We'll share with the community.

8                   Capital Health Regional Medical Center  
9                   also in Trenton will become the new location for  
10                  many other services currently provided at St.  
11                  Francis. This will include cardiac surgery, if  
12                  approved by the Department of Health. Having  
13                  trauma, neurosciences, cardiac surgery services in  
14                  the same location makes sense, and Regional Medical  
15                  Center is already home to Bristol Myers Squibb  
16                  Trauma Center and Capital Health's comprehensive  
17                  trauma stroke program.

18                  We also plan to add a Capital Health  
19                  ob/gyn and prenatal care office in the area of St.  
20                  Francis to meet this important need, and will  
21                  continue to operate the LIFE program currently run  
22                  by St. Francis.

23                  Finally, I want to know that Trinity  
24                  Health will continue to own the buildings and  
25                  property on Hamilton Avenue. Capital Health has

1 identified a developer who's interested in taking  
2 the current site from Trinity to redevelop the site  
3 after the old building comes down.

4 It's simply not feasible to try and  
5 upgrade the current facility. If redevelopment  
6 happens, Capital Health will make a significant  
7 commitment to remain on site as an anchor for  
8 emergency department and outpatient services in that  
9 location.

10 Our belief is that these services need  
11 to remain in Trenton and we're committed to doing  
12 all we can do to make sure that that happens.

13 We hope members of the community  
14 recognize the critical nature of making this happen  
15 and support our efforts because Trinity Health will  
16 close St. Francis Medical Center regardless.

17 We know St. Francis' long history in  
18 the Trenton community and that is something that we  
19 all respect and appreciate.

20 Now we must work together to make sure  
21 Trenton continues to have important services like  
22 cardiac surgery available to its residents, along  
23 with critical emergency care in Trenton. Thank you.

24 MR. HAVENS: Thank you.

25 Next speaker is Dan Moen. Once again,

1 if you could please spell your name for the record,  
2 your name and your position.

3 MR. MOEN: My name is Daniel Moen,  
4 D-A-N-E-I-L, last name M-O-E-N, and I am the  
5 president and CEO of St. Francis Medical Center.

6 So good evening, everyone. Thank you  
7 for the opportunity to make some opening comments in  
8 support of the proposed acquisition of St. Francis  
9 Medical Center by Capital Health System through a  
10 member substitution.

11 Again, I'm Daniel Moen, president and  
12 CEO of St. Francis, and it has been my honor to  
13 serve in this role for the past four-and-a-half  
14 years.

15 St. Francis was founded in 1874 by the  
16 sisters of St. Francis in Philadelphia and has been  
17 dedicated to being a healing presence in our  
18 community ever since.

19 Over the last several years, however,  
20 St. Francis has experienced a significant decline in  
21 volume, in financial performance that is not  
22 sustainable going forward.

23 Financial losses were made  
24 dramatically worse by the COVID-19 pandemic that  
25 adversely impacted all New Jersey hospitals.

1                   In addition, the St. Francis physical  
2 plant would need significant capital investment to  
3 upgrade or replace existing facilities, and this  
4 investment is not feasible.

5                   As a result, starting as far back as  
6 2015, our board of trustees and our board chair, Dr.  
7 Joe Youngblood is here tonight, the board and  
8 Trinity Health's been seeking a health care partner  
9 and has solicited proposals from numerous potential  
10 partners.

11                   A small number of organizations  
12 expressed interest and were evaluated against  
13 criteria that included compatibility with our  
14 mission and values, commitment to preserving as many  
15 jobs as possible, financial strength, commitment to  
16 meeting the needs of the local community and  
17 ensuring the retention of clinical services for our  
18 communities underserved.

19                   Set against this criteria, two  
20 organizations submitted proposals, but after due  
21 diligence dropped out.

22                   During this time we considered all  
23 options from partnering with other health systems,  
24 building the ambulatory care center or freestanding  
25 emergency department with observation beds and even

1 building a small heart hospital. None of those  
2 options were found to be financially viable or  
3 sustainable.

4 In 2020, Capital Health presented a  
5 proposal that meets our board's criteria and ensures  
6 that a broad range of health care services will  
7 remain in Trenton. The St. Francis board voted  
8 unanimously to proceed with this proposal by Capital  
9 Health, and intensive planning for the transition  
10 has continued since.

11 St. Francis has great confidence and  
12 faith to Capital Health's commitment to the  
13 communities we now serve together. Capital Health  
14 is well positioned to ensure that local residents  
15 have access to a comprehensive integrated clinical  
16 network that will combine its health services and  
17 ours.

18 Certain key health care services, such  
19 as cardiac surgery and other advanced cardiovascular  
20 services, will continue to be available in Trenton  
21 as part of Capital Health.

22 MR. HAVENS: Thirty seconds, please.

23 MR. MOEN: By linking these St.  
24 Francis programs within the larger capital network,  
25 we can ensure that our community members will

1 continue to have access to needed tertiary level  
2 services close to home.

3 Capital Health is also committed to  
4 continuing our school of nursing and our school of  
5 radiologic technology. Those are important programs  
6 for this community, and also our LIFE program, LIFE  
7 St. Francis.

8 Capital Health has also interviewed or  
9 will interview virtually every St. Francis employee  
10 who has requested an interview, and many of our  
11 employees have or will receive job offers.

12 Most St. Francis employees who are not  
13 hired by Capital Health will be eligible for the  
14 current St. Francis severance plan.

15 In conclusion, I want to highlight  
16 that throughout our history, St. Francis has adapted  
17 to preserve our mission. It took many years to  
18 arrive at this decision, the one that we feel is  
19 right for our community.

20 The proposed acquisition of St.  
21 Francis by Capital Health is the best and only  
22 option that we have. I respectfully ask for the St.  
23 Francis, Capital Health acquisition be approved to  
24 move forward so the health care services for our  
25 community can be strengthened and preserved.

1                   And on a personal note, three years  
2 ago I was diagnosed with atrial fibrillation, a  
3 potentially serious issue. I could have gone  
4 anywhere for my care, and I needed a complex cardiac  
5 ablation. I chose St. Francis. I knew that I would  
6 be treated by a top-notch team of cardiologists,  
7 nurses and technologists and that a highly skilled  
8 cardiac surgery team would be there to provide care  
9 in the event of a complication.

10                   My outcome was excellent, and that is  
11 the level of care that we want to preserve and  
12 strengthen for our community. Thank you so much.

13                   MR. HAVENS: Thank you.

14                   Our next speaker. Once again, if you  
15 spell your name and title for the record, please.

16                   MS. MCBRIDE: M-C-B-R-I-D-E, Trenton  
17 City Council president.

18                   I wanted to speak tonight based on my  
19 experience as a lifelong Trentonian. I want to  
20 speak to Capital Health, and I would like to speak  
21 to the board.

22                   Two years ago, someone made the  
23 decision to say St. Francis Hospital was not  
24 equipped to stay in business and keep the cardiac  
25 care unit there or the patients. The sad thing

1 about that is they never involved the Trentonians.

2 From my experience with Capital Health  
3 Systems, when Mercer Hospital left the borders of  
4 Trenton, they had a satellite hospital, a satellite  
5 care station or whatever you want to call it, on  
6 Bellevue Avenue, which was a complete failure.

7 As a lifelong resident of the City of  
8 Trenton, you could see people in the streets that  
9 could not get the attention, the medical attention  
10 that they needed in order to prevent illnesses or to  
11 treat illnesses.

12 I also want to talk about the hundred  
13 million dollars that they are proposing to put into  
14 Trenton. I don't know where the hundred million  
15 dollars is coming from because they never included  
16 us in that conversation.

17 As a duly elected official, I  
18 represent 90,000 individuals. I was reading that  
19 there were 53 hospitals that received monies  
20 throughout the State of New Jersey, but Capital  
21 Health was not one of them. I believe Robert Wood  
22 Johnson received 9 million and Princeton Medical  
23 Center received 16 million.

24 So when you tell me that you're going  
25 to put 100 million dollars into this Brunswick

1 Avenue site, Helene Fuld, where's the hundred  
2 million dollars coming from? Because the governor  
3 have not given Trenton any monies.

4 So when you talk about a GYN facility,  
5 all of a sudden that's important to you, Capital  
6 Health System, when it wasn't important when you  
7 moved Mercer Hospital out to Hopewell and never,  
8 ever considered putting a bus route for the  
9 residents in the City of Trenton to get there.

10 My concern is for the residents in the  
11 City of Trenton that I represent, and I am telling  
12 you right now, for my residents, I am full of fear.  
13 I am full of false promises.

14 I am full of fear for the failed  
15 satellite system, and for only who knows where the  
16 hundred million dollars is coming from.

17 So if Capital Health is going to do  
18 what they said they were going to do standing here  
19 tonight, I will be the first one to help champion  
20 that cause, but I have seen the effects of Mercer  
21 Hospital leaving the borders of Trenton, and I'm  
22 telling you if you walk downtown in streets of  
23 Trenton, you will see the mental health cases,  
24 fatality and the birth rate in the city because  
25 Capital Health decided to leave Mercer.

1                   And I hope the board will consider,  
2                   where is that hundred million dollars coming from?  
3                   why wasn't there a bus route put on to go to  
4                   Hopewell when in our demographics they know most of  
5                   the people cannot afford a vehicle and have no way  
6                   to get to Hopewell. Thank you.

7                   MR. HAVENS: Thank you.

8                   Next speaker will be Sharnee Moore, I  
9                   believe it's Jervis. Sorry if I pronounce it wrong.

10                  MS. MOORE-JERVIS: Good evening,  
11                  everyone. I am Dr. Sharnee Moore-Jervis,  
12                  S-H-A-R-N-E-E, Moore, M-O-O-R-E hyphen J-E-R-V-I-S.

13                  I'm the dean of the school of nursing  
14                  at St. Francis Medical Center. It's a position that  
15                  I've held for about three and-a-half years, and I  
16                  thank you for giving me the opportunity to speak  
17                  about the state of support proposed transfer of St.  
18                  Francis Medical Center to Capital Health.

19                  Our faculty, staff and graduates of  
20                  St. Francis Medical Center have been committed to  
21                  excellence and patient care since 1905. When the  
22                  school was founded since then, there have been about  
23                  3,900 graduates that have contributed to various  
24                  aspects of nursing and health care in our  
25                  communities and throughout the United States.

1                   We are also proud when our graduates  
2 remain or return to St. Francis, including our  
3 current associate dean and also the chief nursing  
4 officer for the hospital.

5                   As you know, nursing demands the best  
6 of those who choose this life's work. It calls for  
7 a keen mind, physical fitness, initiatives, courage  
8 and compassion for others, and we saw this  
9 especially during the COVID-19 pandemic, while at  
10 the same time we recognize challenges our nurses  
11 faced at this time. As a result, many nurses left  
12 the field, either temporarily or permanently, and  
13 it's more important than ever that we support and  
14 continue programs like ours to ensure we have nurses  
15 here locally to care for the Trenton and surrounding  
16 communities.

17                   The St. Francis School of Nursing is a  
18 two-year nursing program where our students receive  
19 their diploma and they also receive an associate of  
20 science from the Mercer County Community College.  
21 That program offers an outstanding education in a  
22 caring and supporting environment. It also offers  
23 very, very affordable education for the community  
24 and the surrounding communities.

25                   we also offer several scholarship

1 opportunities, lots of mentoring and advisement. We  
2 like to think that we set our students up for  
3 success in a program in addition for them to be  
4 ready to start their nursing career immediately  
5 after graduation. We also lay a foundation to allow  
6 them to obtain their bachelor's degree.

7           Having our program and its instructors  
8 within the hospital has always been a benefit to the  
9 students, but even more so during the pandemic.

10           Many nursing students experience  
11 online learning. While our students, for only a  
12 short time, experienced online learning and then  
13 they were able to return right back to the bedside  
14 because we were a diploma program.

15           Transitioning our program to Capital  
16 Health will continue this tradition. Additionally,  
17 if the program is approved, all of our instructors  
18 who are currently at St. Francis employees plan to  
19 transition to Capital Health.

20           In conclusion, St. Francis School of  
21 Nursing is a key part of our community's health care  
22 education system and we are committed to continuing  
23 our values and outstanding program at Capital  
24 Health.

25           with your approval of the transition

1 to Capital Health, we can ensure this program would  
2 continue and recommit ourselves to the education and  
3 training of the nurses now and in the future.

4 Thank you for your time.

5 MR. HAVENS: Thank you.

6 Okay. Susan Laughary.

7 MS. LAUGHARY: Thank you and good  
8 evening, everyone. My name is Susan Laughary. It's  
9 spelled S-U-S-A-N, L-A-U-G-H-A-R-Y, and I'm the  
10 associate director for Catholic Charities Diocese of  
11 Trenton.

12 I'm here this evening in support of  
13 ensuring that all in our Trenton community have  
14 access to quality health services. As many of us  
15 know, financial challenges and staffing shortages  
16 for all health care in today's hospitals in  
17 particular are impacted by inflation factors  
18 pursuant to day-to-day operations and are in need to  
19 serve the community in broad ways to mitigate issues  
20 and improve social determinants of health.

21 Safety net systems, as we have in the  
22 City of Trenton, are particularly impacted as our  
23 community is underserved in many, many ways.

24 Of note is that Trenton is a  
25 designated medically underserved area and health

1 care provider shortage area. This means we need to  
2 do more with less resources, which is a challenge.

3 However, the health care community of  
4 Trenton is a unique environment with a provider  
5 culture of collaboration, innovation and dedication  
6 to improving outcomes.

7 Many of those initiatives are led by  
8 Capital Health taking into consideration the needs  
9 of those being served. The forward thinking  
10 leadership of Capital Health fosters partnerships  
11 and ensures that service lines are outcomes driven.

12 This acquisition will allow for  
13 sustainability for St. Francis Medical Center  
14 services, preserve jobs and provide continuity of  
15 care for those receiving services.

16 Furthermore, it will create the  
17 opportunity to create research and public health  
18 initiatives utilizing the strengths of both of these  
19 outstanding institutions.

20 Catholic Charities Diocese of Trenton  
21 looks forward to working with both St. Francis  
22 Medical Center and Capital Health on this  
23 transformation. Thank you.

24 MR. HAVENS: Thank you.

25 Merodie Hancock.

1 MS. HANCOCK: Thank you. Merodie  
2 Hancock, M-E-R-O-D-I-E, H-A-N-C-O-C-K, president of  
3 Thomas Edison State University.

4 Being the only higher ed institution  
5 headquartered in the City of Trenton, we are acutely  
6 aware of the responsibilities and services that an  
7 anchor institution provides for the city.

8 St. Francis has been a long-standing  
9 pillar in our community and the acquisition planned  
10 by Capital Health, another pillar in our community,  
11 is a key to ensuring the residents in Trenton and  
12 the surrounding neighborhoods continue to have  
13 access to comprehensive health care that meets their  
14 changing needs.

15 It's, therefore, critical that the  
16 complex cardiac services, behavioral health and  
17 other essential services offered at St. Francis  
18 remain in Trenton.

19 Approving Capital Health's request  
20 ensures these services continue to be available  
21 now as part of Capital Health's health established  
22 and financially strong care system, thus along for  
23 an integrated approach that will benefit our  
24 communities.

25 As we emerge from the COVID pandemic,

1 we continue to grapple with the health care  
2 inequities highlighted by this public health care  
3 crisis.

4           The work that Capital Health is  
5 currently engaged in and planning to expand and  
6 preserve with this acquisition will be very  
7 important to start bridging the gap in access to  
8 health care and wellness within the city.

9           Capital Health's commitment to provide  
10 a satellite emergency and a new outpatient facility  
11 to offer health and wellness service to residents,  
12 including primary and prenatal care, is one of the  
13 main reasons this merger is so necessary for our  
14 city.

15           In addition, maintaining the  
16 Certificate of Need for cardiac services within  
17 Trenton is extremely important. Without this  
18 acquisition, the local cardiac services currently  
19 provided by St. Francis would be lost, widening the  
20 gap for specializing critically needed care for  
21 Trenton's diverse population.

22           It is for these reasons, as well as  
23 their long-standing commitment in Trenton that I am  
24 in support of Capital Health's applications and  
25 their vision for care in Trenton. Thank you.

1 MR. HAVENS: Thank you.

2 Next speaker will be Lisa Zavorski.

3 MS. ZAVORSKI: Good evening. My name  
4 is Lisa Zavorski, L-I-S-A, Z-A-V-O-R-S-K-I. I am  
5 the assistive director of LIFE St. Francis located  
6 in Bordentown, New Jersey.

7 Thank you for the opportunity to speak  
8 today in support of the proposed transfer of St.  
9 Francis Medical Center to Capital Health.

10 I support the transfer of St. Francis  
11 and LIFE St. Francis to Capital Health because it  
12 will ensure our program can continue to serve the  
13 needs of elderly and vulnerable residents in Mercer  
14 County and parts of northern Burlington County.

15 LIFE St. Francis gives seniors 55 and  
16 older support to live safely in their own home or in  
17 the home of a family member for as long as possible.

18 Each participant receives all  
19 inclusive medical and social care based on a  
20 personalized care plan. This includes primary care,  
21 nutrition planning, social services, rehab and  
22 therapy when needed and spiritual care. It includes  
23 specialty services like dental, podiatry, optometry  
24 and audiology services.

25 We coordinate all of the scheduling of

1 the medical appointments and transportation. We  
2 provide support in the home when it's needed.

3 Of note, we took care of 353  
4 participants throughout the pandemic helping to keep  
5 them safe and surviving throughout that challenging  
6 time.

7 LIFE St. Francis services are free  
8 with no out-of-pocket medical costs to seniors who  
9 qualify. Prescription and over-the-counter  
10 medications and personal care products are provided  
11 at no cost, along with all durable medical equipment  
12 like walkers, canes and grab bars.

13 Services are provided by our  
14 interdisciplinary team of doctors, nurses and  
15 professionals specifically trained to care for  
16 seniors. The team includes physical and  
17 occupational therapists, dietitians, social workers,  
18 along with a network of specialists like  
19 cardiologists, urologists, oncologists and more.

20 This team works together to meet the  
21 needs of our participants in body, mind and spirit.  
22 LIFE St. Francis supports the participants'  
23 caregivers as well who wish to keep their loved one  
24 living at home for as long as possible, and it helps  
25 our participants gain valuable social connections

1 that are essential to mental health.

2 Participants have the opportunity to  
3 make new friends and to develop new hobbies through  
4 our programs and events. We celebrate holidays  
5 together and offer sewing and card clubs and game  
6 groups.

7 Our program is truly life changing for  
8 many of our participants and their caregivers. They  
9 describe LIFE St. Francis as a true team approach  
10 where no detail is overlooked.

11 Many families tell us that our  
12 services gave their loved one their life back.  
13 Families have told us our services are a relief and  
14 even a miracle.

15 It would be a terrible mistake not to  
16 ensure a future home for this program to support  
17 seniors in our community. I urge you to support the  
18 transfer of St. Francis and LIFE St. Francis to  
19 Capital Health so we can continue our mission and  
20 provide these essential services for the elderly in  
21 our community. Thank you.

22 MR. HAVENS: Thank you.

23 Next speaker is Paul Bethen,

24 B-E-T-H-E-N. Okay.

25 Jeannette Szymanski, I think it's the

1 name. Once again, I apologize if I had a problem  
2 with the name.

3 Good evening.

4 MS. SZYMANSKI: Good evening,  
5 everyone. I'm just a resident of the community.

6 MR. HAVENS: Could you just give us  
7 your name, please.

8 MS. SZYMANSKI: Jeannette,  
9 J-E-A-N-E-T-T-E, Szymanski, S-Z-Y-M-A-N-S-K-I.

10 MR. HAVENS: Thank you.

11 MS. SZYMANSKI: Okay. Good evening,  
12 everyone. My name is Jeanette Szymanski and I live  
13 on Morris Avenue, about seven minutes from the  
14 hospital.

15 when I first heard that St. Francis  
16 was going to close, I was shocked. How could this  
17 be? A pillar in our community. This is our  
18 community hospital.

19 I lived here for 30 years and this is  
20 my go-to hospital. This is my cardiac hospital  
21 where my heart surgeries have been done. I had to  
22 have angioplasty and I had Dr. Andrew Schwarb and  
23 Dr. Patel.

24 I can't count how many times I went to  
25 the emergency room and had to be treated by Dr. Ben.

1 I go so often that they know me by my first name.

2 To lose St. Francis would be heart  
3 break to me. To go across town is a real  
4 inconvenience, and I would not be as comfortable as  
5 my hospital, St. Francis.

6 Also, I got bit by a bulldog on Clyde  
7 Avenue this summer off Hamilton Avenue. I take a  
8 blood thinner and I was bleeding profusely. If I  
9 had to go across town, I would be in very bad shape,  
10 and if I had a heart attack, to go across town for a  
11 senior citizen is a matter of life and death.

12 I can only pray that St. Francis  
13 remains where it belongs, in our community. Simply  
14 put, Capital Health is just too far to go to. Thank  
15 you.

16 MR. HAVENS: Thank you.

17 David Fox.

18 MR. FOX: Hello. David Fox,  
19 D-A-V-I-D, F-O-X. I'm the executive director at Arm  
20 In Arm. We provide free basic essentials for people  
21 in Mercer County in need. We provide food, housing,  
22 support and also work experience.

23 I'm here in support of this initiative  
24 because of our experience with Capital Health in  
25 trying to help community partners in need.

1                   Currently, we partner with Capital  
2 Health to be able to provide food distribution for  
3 their patients, and we are looking at ways in which  
4 we can expand that help through their sites, and so  
5 we're very grateful that they've been welcoming of  
6 our food trucks and our staff and our volunteers to  
7 be able to come and to offer fresh food for people  
8 in need.

9                   We've seen an explosion of need these  
10 last three years, and in fact, things are more  
11 difficult for people now than at ever a time before.

12                   It's very difficult for housing  
13 stability and other services, and people often in  
14 the community don't know where they can go to get  
15 help. I know there are other community partners  
16 right here that we work with closely, and one of the  
17 things that we do is when people come for food, we  
18 also have conversations with them and we direct them  
19 to other essential services, not only with our  
20 organization but with other organizations.

21                   And I think really right now we've  
22 been talking with some key people at Capital Health  
23 about expanding this and deepening this investment  
24 and time, and what's really wonderful, it's  
25 preventative health care. We're trying to provide

1 better food for residents in a more holistic way,  
2 and we're trying to get to communities that are  
3 underserved, and so we are grateful for Capital  
4 Health's partnership and we look forward to trying  
5 to deepening that partnership. Thank you.

6 MR. HAVENS: Thank you.

7 Mr. Michael Kolber.

8 MR. KOLBER: My name is Michael  
9 Kolber. I'm a certified member of the American  
10 Institute of Certified Planners and a licensed  
11 professional planner in the State of New Jersey.

12 K-O-L-B, as in boy, E-R. I'm here  
13 today as a resident of the City of Trenton.

14 On January 28, 2021, the City of  
15 Trenton became the first municipality in the State  
16 of New Jersey to adopt a community health and  
17 wellness plan as an element of its master plan.

18 The plan does not anticipate the  
19 closure of our hospital as part of its strategy to  
20 improve access to quality health care.

21 what it does do in its first 40 pages  
22 is document the startling inequalities in health  
23 care that the residents can experience.

24 I don't have the time in my three  
25 minutes to address them all, but here's one simple

1 one.

2 The average life expectancy in ZIP  
3 code 08611, which is the ZIP code I live in, is 73  
4 years, 14 years shorter than for babies born a short  
5 drive away in ZIP code 08550 near Princeton  
6 Junction.

7 These inequalities need to be  
8 addressed by both Capital Health and by the state as  
9 they consider moving forward with the sale of St.  
10 Francis Hospital.

11 I will discuss just two, but there are  
12 many more.

13 First, there are no maternity services  
14 for women in Trenton. The City of Trenton is one of  
15 eight municipalities in the state identified as  
16 having particularly high levels of black infant  
17 mortality. Only 57.8 percent of Trenton women have  
18 what is considered to be adequate prenatal care.

19 From 2009 to 2017, the maternal  
20 mortality rate in the City of Trenton was 37.2  
21 deaths per 100,000 live births.

22 In 2017, there were 1,407 babies born  
23 at Hopewell to women who live in the City of  
24 Trenton.

25 Capital Health has stated they plan to

1 add an ob/gyn and prenatal care office in the area  
2 of St. Francis. This is good, but not sufficient.

3 The City of Trenton must have a full  
4 birthing center and maternity ward. No Trenton  
5 woman should have to go to Hopewell to give birth.

6 Second, the city lacks sufficient  
7 services for mental health care and substance abuse.

8 Just two weeks ago, Trenton health  
9 team led a community advisory board meeting with a  
10 discussion on behavioral health and intervention.

11 In that meeting, the speaker clearly  
12 stated that the city does not have enough beds to  
13 provide needed inpatient services for behavioral  
14 health.

15 It has been reported the existing beds  
16 at St. Francis are not fully utilized. Clearly,  
17 they are just not being put to good use.

18 30 percent of Trenton's population  
19 does not own a car. Public transportation is  
20 expensive, and accessing medical services outside of  
21 city boundaries poses a tremendous burden on our  
22 most vulnerable residents.

23 At the same time, the fact that  
24 Trentonians can live without cars is one of the  
25 primary assets of the city.

1                   The New Jersey state development and  
2 redevelopment plan specifically states that the  
3 priority for public investments in our state should  
4 be made in designated urban centers like Trenton to  
5 encourage population growth in the places that  
6 already have the infrastructure to sustain and  
7 support people and to ensure that we can maintain  
8 open grade spaces in other parts of the states.

9                   The new Capital Health Hospital in  
10 Hopewell replaced an existing piece of urban  
11 infrastructure with a greenfield development outside  
12 of any population center.

13                   Let me say very clearly, the diversion  
14 of health services from cities to suburbs are not  
15 acceptable. If a service is provided in the  
16 suburbs, that service must be provided in the city.

17                   The construction of the hospital in  
18 Hopewell should, by definition, be treated as a  
19 declaration that Capital Health has plenty of money  
20 to invest in Trenton. The state must hold Capital  
21 Health accountable for making those investments.  
22 Thank you.

23                   MR. HAVENS: Thank you.

24                   Darren Green.

25                   MR. GREEN: Good evening. Darren

1 Freedom Green. Darren, D-A-R-R-E-N, Freedom,  
2 F-R-E-E-D-O-M, Green, G-R-E-E-N.

3 My first point is to, we keep having  
4 these meetings, and again, one of the variables that  
5 keeps being consistently said is over -- after years  
6 of failing here in Trenton, you arrived at this  
7 decision.

8 So my question as a community advocate  
9 is, when you began to see the trend going in this  
10 direction, why wasn't the community outreach done  
11 then? Why wait till you come to a point now where  
12 it seems like decisions have already been made and  
13 the community now has to adjust and address to where  
14 we're going? And now we're kind of with our back  
15 against the wall.

16 I think twofold process could have  
17 occurred. One, you could have been more authentic  
18 and transparent reaching out to us earlier in the  
19 process, and if it's been years, then imagine how  
20 educated the public could have been on where we are  
21 now if you would have engaged us then.

22 Second, if you look at all the chairs  
23 here and you hear numbers thrown out, like 90,000  
24 people as institution and organizations here, you're  
25 not concerned that none of the people impacted by

1 the magnitude of this decision is sitting here?  
2 You're not concerned about the narrative that  
3 consistently keeps being written, that these people  
4 have no work, value or care?

5 Again, institutions are making  
6 decisions about people who live here, and the people  
7 who live here aren't even aware of what's going on.

8 My last piece is, when we keep hearing  
9 these words and these promises and these phrases,  
10 and you seem to see the disdain in our voices and  
11 our mannerisms is because we heard all of this  
12 before when Mercer was making its exodus out.

13 And I'm not comparing the two, but I'm  
14 saying in Trenton, the way we are treated is like  
15 we're some type of stepchild where we don't have a  
16 value or variable in the place where we live.

17 And again, we hear all these promises  
18 being made, and then when the final institution  
19 leaves, we sit and see Mercer Medical Center sitting  
20 there and it's been abandoned for over ten years.

21 So there's a deep concern about what  
22 we're doing, how we're going to get there, but  
23 there's also resentment, almost like doctors and  
24 elected officials have a sworn oath to serve and  
25 give to the people, but again, you treat us as if

1 not only we're invisible, but there's no place for  
2 us here. Thank you.

3 MR. HAVENS: Thank you.

4 Theresa Levitsky.

5 MS. LEVITSKY: Good evening. It's  
6 Theresa, T-H-E-R-E-S-A, Levitsky, L-E-V, as in  
7 Victor, I-T-S-K-Y.

8 Thank you for allowing me to provide  
9 testimony today in support of the transfer of St.  
10 Francis Medical Center to Capital Health.

11 My name is Theresa Levitsky, and I  
12 have served as the program director for the School  
13 of Radiologic Technology at St. Francis since 1990.  
14 I am also a proud 1982 graduate of the school.

15 Founded in 1948, we are a two-year  
16 hospital-based program that prepares students for  
17 careers as radiologic technologists, commonly known  
18 as x-ray technologists.

19 Many of our graduates work at St.  
20 Francis Medical Center and other Mercer County  
21 hospitals in a variety of roles, including  
22 leadership.

23 with an annual enrollment of 16, we  
24 are a small school with a strong legacy. Our  
25 program has ranked either first or second in the

1 State of New Jersey for the fast past three  
2 consecutive years.

3 We know our students individually and  
4 create great learning experiences for them, and  
5 they, in turn, serve our community well.

6 Just yesterday, one of our graduates  
7 from the class of 2022 texted me to say, in quotes,  
8 I worked with a patient today who said to me, you  
9 must have gone to a really good school. You really  
10 know your stuff, end quotes. This kind of patient  
11 encounter is exactly what we strive for.

12 We also partner with Mercer County  
13 Vocational Technical School and with Big Brothers  
14 and Big Sisters of Mercer County through our  
15 cooperative program with Trenton Central High  
16 School. These programs encourage students to  
17 consider careers in health care.

18 This is the type of valuable community  
19 connections that we have which have led several  
20 students from these programs to enroll in our  
21 schools.

22 Having been an employee at St. Francis  
23 and part of this program for 42 years, I understand  
24 and personally share the sadness that some in our  
25 community feel about the transfer of St. Francis to

1 Capital Health. Change like this is not easy, but  
2 it is a change I feel obligated to make.

3 I am part of the transition planning  
4 team to transfer our school, including clinical  
5 rotations, to Capital Health. I want to take the  
6 legacy of the St. Francis Medical Center School of  
7 Radiologic Technology, with all of our strengths,  
8 and take it to its next chapter, to its next home.

9 It is paramount that we continue to  
10 provide competent and compassionate radiology  
11 education and training for our community. To  
12 achieve that, I encourage you to approve the  
13 transfer of St. Francis to Capital Health. Thank  
14 you.

15 MR. HAVENS: Thank you.

16 Next speaker would be Gregory Paulson.

17 MR PAULSON: Good evening. My name is  
18 Gregory Paulson, G-R-E-G-O-R-Y, P-A-U-L-S-O-N.

19 I'm the executive director of Trenton  
20 Health Team. We are an independent community  
21 nonprofit focused on the health and well-being of  
22 the greater Trenton community.

23 We are founded almost 20 years ago in  
24 response to changes in the health care delivery  
25 system in Trenton at that time, namely the

1 announcement of the planned closing of Mercer  
2 Medical Center, and we have certainly learned a lot  
3 since then.

4                   We're governed by an independent board  
5 of trustees that is comprised of leaders of local  
6 health and social service organizations, as well as  
7 other community leaders and supporters, and I should  
8 note that representatives of Capital Health and St.  
9 Francis serve on our board, but in accordance with  
10 our conflict of interest policy, those board members  
11 have recused themselves from participating in any of  
12 our organization's decisions regarding our support  
13 for this matter.

14                   Our 45 staff work every day to support  
15 our community in accessing needed health care  
16 services, while also working to improve the overall  
17 community conditions that impact health and  
18 well-being, things like access to healthy food,  
19 quality housing and social supports.

20                   St. Francis has been providing  
21 excellent service, health care and education to our  
22 community for more than 140 years. They've served  
23 some of the most socially complex, medically  
24 underserved and vulnerable among us, and given that  
25 long history of compassionate service, the prospect

1 of St. Francis' closure is understandably deeply  
2 painful for Trenton, especially in our community  
3 that lacks sufficient access to health care  
4 resources.

5                   But having access to health care does  
6 not necessarily mean having a place to be admitted  
7 to the hospital as an inpatient. It's about access  
8 to emergency care, primary and specialty care,  
9 prenatal and maternity care and behavioral health  
10 and substance use disorder care. Those are the  
11 services that our data and our community members  
12 tell us are needed here.

13                   Over their long history and as a  
14 founding partner of Trenton Health Team, Capital  
15 Health has repeatedly demonstrated their commitment  
16 to Trenton, and we believe that Capital Health's  
17 proposal is firmly in the best interests of the  
18 health and well-being of the greater Trenton  
19 community and is the best possible outcome for the  
20 future of health care delivery in our community, and  
21 it, therefore, has Trenton Health Team's strong  
22 support.

23                   By consolidating the services of St.  
24 Francis Medical Center into their system, we hope  
25 that Capital Health is able to attract additional

1 investment and economic growth as an anchor  
2 institution.

3 We support their vision of expanding  
4 comprehensive health care services and medical  
5 education resources here in Trenton and to emulating  
6 successes that other academic health care systems  
7 have achieved in other New Jersey urban centers.

8 Our support is strongly based on  
9 several commitments that Capital Health has made to  
10 us and in many public forums on many occasions.

11 They are ensuring uninterrupted access  
12 to critical services currently provided by St.  
13 Francis, including cardiac surgery, behavioral  
14 health and other emergency care, to provide and  
15 maintain a satellite emergency department at or near  
16 the current St. Francis location, and to develop a  
17 new outpatient facility in the area of Trenton  
18 offering a variety of services, including primary  
19 care and prenatal care, among others, and to be  
20 transparent with stakeholders and community members  
21 and to actively engage in discussion and to share  
22 information and solicit feedback.

23 And that last point is an area in  
24 which we encourage everyone here tonight and who has  
25 participated throughout this process to continue to

1 stay involved.

2 Several executives from Capital Health  
3 came to our staff meeting last week and answered  
4 questions and heard concerns from our staff. It was  
5 an open and honest dialogue.

6 I hope that many other individuals and  
7 groups continue to take advantage of those  
8 opportunities, not just now, but continuing long  
9 after this transition, if approved, takes place.

10 The needs and perspectives of  
11 patients, neighbors and community members are  
12 critical to the development and success of all new  
13 health care services that will follow.

14 We will continue to provide our  
15 thoughts and input and we look forward to continuing  
16 to help bring community together to ensure the  
17 access to the highest quality health care services  
18 that our community needs and deserves. Thank you.

19 MR. HAVENS: Thank you.

20 Dr. Eisenberg.

21 DR. EISENBERG: Joshua Eisenberg,  
22 J-O-S-H-U-A, E-I-S-E-N-B-E-R-G.

23 Good evening, and thank you for  
24 allowing me to talk tonight. I'm Dr. Joshua  
25 Eisenberg, a trained vascular surgeon and director

1 of the Heart and Vascular Institute at Capital  
2 Health.

3 I came to Capital Health over ten  
4 years ago with a goal to build a comprehensive heart  
5 and vascular program. Through that time, I came to  
6 truly understand the value of an integrated and  
7 comprehensive cardiovascular program. I learned the  
8 limitations of having only some specialities  
9 available, and I'm excited for the opportunity to be  
10 part of a complete service line.

11 As Capital Health has shared in its  
12 application, we would like to retain the Certificate  
13 of Need for cardiac surgery and provide this care at  
14 our Trenton campus on Brunswick Avenue.

15 Already, Capital Health Regional  
16 Medical Center has been designated as an ACS  
17 accredited Level II trauma center and joint  
18 commission certified comprehensive stroke program.

19 Having seen firsthand the development  
20 of our neurosciences program and having worked  
21 alongside the physicians who lead our trauma  
22 program, Capital Health is uniquely poised to  
23 integrate cardiac surgery into our health care  
24 system, specifically in Trenton.

25 Bringing cardiac surgery and the other

1 related cardiac services to regional medical center  
2 will allow patients improved access to comprehensive  
3 integrated care. This presents a huge opportunity  
4 for patients in Trenton to receive tertiary and  
5 coronary care right in their neighborhood.

6 Patients who have heart attacks,  
7 strokes and traumatic injuries need a place they can  
8 go where the right physicians, equipment, staff and  
9 resources can be combined to help to care for them.

10 We have significantly experienced  
11 building complex service lines, and I know we will  
12 continue to develop and grow this critical cardiac  
13 service line for the benefit of Trentonians and the  
14 broader community.

15 Already, Capital Health has a  
16 significant number of elements of cardiac service  
17 line into place and additional cardiac surgery would  
18 round that out to provide comprehensive care and  
19 services for the patients in our area.

20 With the integration of cardiac  
21 surgery into the already established programs at  
22 Capital Health, the number of cardiovascular  
23 patients that can be treated in the City of Trenton  
24 will greatly expand.

25 with collaboration between

1 specialties, complex conditions like aortic  
2 dissections, complex aneurysm, minimally invasive  
3 cardiac procedures, robotic cardiac surgery, heart  
4 failure and other conditions can now be treated in  
5 Trenton.

6                   Even life-sustaining ECMO, a procedure  
7 to allow oxygenation to vital organs, can now be  
8 performed, which help further the outcomes of  
9 patients with respiratory failure from a variety of  
10 conditions, including COVID.

11                   We have nearly 60 cardiovascular  
12 disease physicians on our medical school staff and  
13 around ten who provide interventional cardiac  
14 services, and I suspect that number will continue to  
15 grow.

16                   Capital Health has developed plans for  
17 Regional Medical Center that will be implemented,  
18 with the Department of Health's approval, for two  
19 cardiac operating rooms, including one that can  
20 handle both endovascular and open cardiac  
21 procedures, and a cardiac catheterization lab  
22 capable of handling complex endovascular  
23 interventions and EP procedures.

24                   This will support vascular surgery,  
25 cardiac surgery, electrophysiology and cardiac

1 catheterizations.

2 We also have space that will serve as  
3 a cardiac ICU adding to our neuroscience ICU and  
4 trauma and medical ICUs.

5 If the cardiac surgery left Trenton  
6 with the closure of St. Francis, it would leave a  
7 significant gap for patients between Camden and New  
8 Brunswick without another full service hospital in  
9 our quarter offering cardiac surgery.

10 In an area where cardiac disease is a  
11 significant issue and where access is critical, this  
12 would be devastating.

13 As someone who has spent my entire  
14 career focused on patients, I cannot stress how  
15 important this is. Our trauma program, vascular  
16 program, neuroscience program and psychiatry program  
17 in Trenton are sources of significant priority for  
18 Capital Health and our employees, and with your  
19 approval, we look forward to the opportunity to add  
20 cardiac services to that as well.

21 Thank you for your time.

22 MR. HAVENS: Thank you.

23 Deborah Preston.

24 MS. PRESTON: Good evening. I'm

25 Deborah Preston, D-E-B-O-R-A-H, P-R-E-S-T-O-N, and I

1 am the president of Mercer County Community College.

2 I've been the president of Mercer  
3 County Community College for not quite four months,  
4 but in that time it has become abundantly clear that  
5 one of our most important partners in the City of  
6 Trenton is Capital Health and their associated  
7 Trenton neighborhood initiative.

8 It's important to recognize that those  
9 of us in education share a common mission with our  
10 colleagues in health care, a mission to improve the  
11 lives of individuals and communities.

12 Not everyone realizes that MCCC has a  
13 campus in Trenton. It's our James Kerney Campus on  
14 Broad Street.

15 More than one person has asked me why  
16 we feel it's important to maintain a presence here  
17 in the city. The answer is simple. We are  
18 absolutely committed to serve the students and the  
19 citizens of Trenton, and we will not advocate that  
20 responsibility, but we cannot do this alone.

21 We need partners, partners like  
22 Capital Health, partners who are as committed to  
23 Trenton as we are.

24 Capital Health attends not only to the  
25 medical health and well-being of the Trenton

1 community, they are also our partners in attending  
2 to the economic and educational well-being of this  
3 community, supporting our students from Trenton who  
4 want to pursue medical careers and welcoming us as  
5 collaborators in the Trenton neighborhood  
6 initiative.

7 St. Francis has been provided key  
8 medical services to this community for many years,  
9 and Mercer County Community College has been a proud  
10 partner in the accreditation and radiography  
11 programs.

12 Capital Health has both the resources  
13 and the resolve to ensure that these educational  
14 programs remain in East Trenton.

15 In addition, they will be able to  
16 continue critical services, including emergency room  
17 care, retain jobs and improve facilities. Clearly,  
18 this is an organization that is serious about  
19 serving Trenton, and Mercer County Community College  
20 supports this transfer of services and looks forward  
21 to partnering with Capital Health in our mutual  
22 mission to serve the Trenton community. Thank you.

23 MR. HAVENS: Thank you.

24 Harry Jackendoff. Thank you.

25 MR. JACKENDOFF: Thank you for letting

1 me speak today. I'm Harry Jackendoff,  
2 J-A-C-K-E-N-D-O-F-F, and I'm as an active member and  
3 leader of Villa Park neighborhood Civic Association  
4 and also as I operate the Twelve Steps and More  
5 mental health bookstore downtown at St. Michael's  
6 Episcopal Church.

7 I'm in favor of the sale of St.  
8 Francis Hospital and the demolition of the existing  
9 building. One, given all the assurances of a  
10 perspective buyer, Capital Health Systems, that  
11 they'll maintain 24/7 emergency unit on the present,  
12 in our neighborhood indefinitely. I add in the  
13 present, but I understand now. And that they will  
14 not move the cardiac unit outside of our city but to  
15 Helene Fuld Hospital on New Brunswick, on Brunswick  
16 Avenue, as well as for all the reasons leading up to  
17 the sale provided to the public by its present  
18 owners, Trinity Health.

19 And that also, I think, addresses the  
20 issues of transparency. I think the -- we, the  
21 public, sort of understand that the U.S. health care  
22 system has changed dramatically in the recent  
23 decades, and that the insurance industry is  
24 insisting that people don't stay in hospitals  
25 anymore, that people are put out of hospitals so

1 that the beds aren't used, and that's one of the  
2 issues.

3 In previous years, had they come to us  
4 and told us, well, the health care system is  
5 changing, we couldn't have done much as community  
6 members except bemoan the same things we all bemoan.

7 In any case, what I'm speaking about  
8 is not specifically the maintenance of the health  
9 care system 'cause our community, the ER unit, as  
10 far as I'm concerned, and that that's going to stay  
11 here, and the commitment to potentially build more,  
12 put ob/gyn in there and mental health definitely.

13 I just recently, because of the  
14 bookstore, I was looking at all the mental health  
15 and behavioral health providers in the city, went on  
16 a web -- went on the web page, did a Google check,  
17 and of about 16 that came up, only four still had  
18 telephone numbers that I could reach. I was amazed.

19 So that something, a centralized unit  
20 and not just the small NGO 501(c)(3)s that are all  
21 over our city, Capital Health has a lot of  
22 providers, and if we can get more behavioral and  
23 mental health people in a central supported unit as  
24 far as health care's concerned, that's my  
25 suggestion.

1                   However, I do have a proposal here  
2                   which I will make public and I've given to Capital  
3                   Health.

4                   what's most important to the  
5                   neighborhood is what is going to happen in the  
6                   remaining 80 percent of that 10-acre site? It's a  
7                   half mile walk around here. It's 164th of a square  
8                   mile. It's 10 acres.

9                   That's a lot of building for a  
10                  developer. That's a lot of ratable, but not only  
11                  that, it's in the most vibrant corner of our city.  
12                  This corner here, Hamilton Avenue and Chambers  
13                  Street with the new high school is potentially a new  
14                  downtown.

15                  So it can be -- and this, my  
16                  neighborhood is the whole Latino community, is  
17                  buying up and investing and rebuilding all the  
18                  houses around here. So that's going to --  
19                  investment and something potentially, a jewel that  
20                  could be here on those 10 acres. That's a lot of  
21                  mixed uses that could happen.

22                  So that when a major change in the  
23                  horizon, and it is a horizon, which is St. Francis,  
24                  it's a big building. It's zoned for that still. We  
25                  don't need -- you know, it could be anything.

1                    what I'm proposing is what I call -- I  
2                    have two minutes, one minute?

3                    MR. HAVENS: You have 30 seconds.

4                    MR. JACKENDOFF: 30 seconds.

5                    I call the Trenton 10 acres  
6                    educational experiment. I propose two competitions  
7                    be announced. The first for elementary school  
8                    classrooms. The second for individual students from  
9                    ninth to 12th grade to participate in.

10                   The goal of each is to propose new use  
11                   options for the integrated architecture and economic  
12                   development of the site. They will be judged by  
13                   three to four teams of college students, TCNJ,  
14                   Ryders, Rutgers, Mercer County, working for credit  
15                   to evaluate and choose the best proposals for each  
16                   of the competitions. The three proposal for  
17                   elementary school would win field trips for the  
18                   coming year, and the kids, the individuals would get  
19                   monetary prizes and scholarships.

20                   The real thing is that --

21                   MR. HAVENS: Excuse me, sir. Your  
22                   time.

23                   MR. JACKENDOFF: I'll finish, then.

24                   This whole town can be redeveloped.  
25                   I'm proposing we educate ourselves using this site

1 for how can cities be developed, how can people live  
2 together, and Trenton has a lot of wonderful corners  
3 to build. Thanks for letting me --

4 MR. HAVENS: Thanks very much.

5 Dr. Pasquale Luciano.

6 DR. LUCIANO: Good evening. My name  
7 is Pasquale Luciano, P-A-S-Q-U-A-L-E, L-U-C-I-A-N-O.

8 I'm a cardiac surgeon at St. Francis  
9 Medical Center. At St. Francis, we have been  
10 providing cardiac care and have been part of the  
11 community since 1998. Our motto is, we are the  
12 heart of the community.

13 Unfortunately, the people of Trenton  
14 are at a higher risk for heart disease than the  
15 neighboring communities, at almost twice the rate.

16 Health department data demonstrates  
17 that our community has significantly higher rates of  
18 high blood pressure, high cholesterol, obesity and  
19 coronary artery disease.

20 The CDC reports that African American  
21 residents of Mercer County have a heart disease  
22 death rate one and-a-half times the New Jersey  
23 average.

24 Knowing this illustrates the  
25 importance of maintaining a high quality, easily

1 accessible cardiac surgery program in the City of  
2 Trenton.

3 By joining with Capital Health's  
4 program of cardiac services and their greater  
5 resources, we have the opportunity to provide even  
6 better care to the community of Trenton.

7 By becoming part of an existing health  
8 care system that offers trauma surgery, neurosurgery  
9 and vascular surgery, we can take the cardiac  
10 surgery program to the next level.

11 We also look forward to providing  
12 advanced electrophysiology care, mechanical support  
13 technology, and eventually minimally invasive and  
14 robotic surgery within the City of Trenton.

15 In conclusion, I would like to  
16 emphasize, we are deeply committed to providing the  
17 highest level of care with the ease of access to the  
18 families of Trenton and the surrounding communities.

19 Thank you for your time.

20 MR. HAVENS: Thank you.

21 Next speaker, Darrell Livestrong. I'm  
22 sorry.

23 MR. ARMSTRONG: Good evening. My name  
24 is Darrell Armstrong, D-A-R-R-E-L-L, Armstrong,  
25 A-R-M-S-T-R-O-N-G.

1 I'm the pastor of the Shiloh Baptist  
2 Church and founder of the Shiloh Community  
3 Development Corporation.

4 Shiloh is Trenton's oldest black  
5 baptist congregation founded in 1880, six years  
6 after St. Francis Medical Center was founded in  
7 1874, seven years before the Trenton City Hospital  
8 was founded in 1887, and 15 years before the Mercer  
9 Hospital was founded in 1895.

10 As a pastor of this congregation, I am  
11 -- I have a define commitment to promote issues of  
12 justice, equity, diversity, inclusion and access in  
13 our capital city.

14 I am personally in support of the  
15 transfer of cardiac care services in general and the  
16 specific Certificate of Need for cardiac surgery and  
17 cardiac care to the Capital Health System.

18 In full disclosure, I'm a former board  
19 member of Capital Health Systems and a current  
20 member of the New Jersey Coalition of Religious  
21 Leaders where we have a deep commitment to ensuring  
22 that children and families have what they need to  
23 promote and the promotion of the social determinants  
24 of health.

25 I'm a member of the Greater Trenton

1 Board, or Advisory Board which is committed to the  
2 investment, economic investment of opportunities in  
3 our city, and I'm vice president of the national  
4 board of APSAC, the American Professional Society on  
5 the Abuse of Children, where we are concerned about  
6 trauma informed services and evidence-based,  
7 community-based services that promote family and  
8 child well-being.

9 As an ordained clergyman, I'm  
10 concerned about the whole person, the mind, and so  
11 therefore, I partner with educational institutions  
12 like Mercer County Community College -- welcome Dr.  
13 Preston to the Trenton area -- and Thomas Edison  
14 State University with Dr. Merodie Hancock.

15 Concerned about the body where I  
16 partner with medical institutions like CHS, RWJBH,  
17 as well as the Henry J. Austin fairly qualified  
18 health center.

19 I'm concerned about spiritual services  
20 and the mental health services where I partner with  
21 organizations like Children's Home Society of New  
22 Jersey, Prevent Child Abuse New Jersey, Children's  
23 Food for Mercer Street Friends, just to name a few,  
24 and deeply invested in partnering with religious  
25 bodies, like Concerned Pastors and Ministers of

1 Trenton and Vicinity, and UMIO, the United Mercer  
2 Interfaith Organization.

3 My bottom line is that we cannot  
4 afford to see another health establishment sit  
5 abandoned in our city.

6 My support for the transaction and the  
7 transition of services from St. Francis to Capital  
8 Health should not be mistaken for an advocacy of  
9 my prophetic role to hold institutions accountable.

10 If this goes forward, which I have  
11 every confidence that it will, we have to learn, Al  
12 and others at CHS, what are the lessons that we take  
13 from the transition of Mercer Hospital campus into  
14 the Hopewell suburban community.

15 We must continue to address the  
16 deserts that abide abundantly in our city, food  
17 deserts, mental health deserts, technology deserts,  
18 just to name a few, and we must be committed to  
19 providing economic employment opportunities and  
20 housing opportunities for the residents of the  
21 industry of Trenton.

22 I want to ensure that the City of  
23 Trenton is a great place for residents and children  
24 and families to live, work, play and pray, and so  
25 with all confidence of my spiritual community, we

1 support this, but we stand ready to work in  
2 partnership to provide opportunities for children  
3 and families in our city. Thank you.

4 MR. HAVENS: Thank you.

5 Richard Perilli.

6 MR. PERILLI: Thank you, Board. My  
7 name's Richard Perilli, R-I-C-H-A-R-D, Perilli,  
8 P-E-R-I-L-L-I.

9 I'm a commercial property owner in the  
10 City of Trenton, and I'm most definitely a tax  
11 payer.

12 My opinion on the transition is  
13 neutral, with an explanation, and I appreciate you  
14 allowing me to do that.

15 A number of weeks ago, I've had --  
16 I've been compelled to assemble an online petition  
17 to save St. Francis Hospital in an effort to keep  
18 the St. Francis facility in place or perhaps explore  
19 other avenues to ensure that there is adequate  
20 health care available in the southeast Trenton area.

21 I've been to two meetings and have had  
22 the pleasure of speaking with Mr. Moen, Mr. Miller  
23 and Mr. Maghazehe, along with Mayor Gusciora and  
24 Councilman Harrison, who have been instrumental in  
25 arranging these meetings for public input.

1                   I have spoken with Councilman Harrison  
2 at length about alternative possibilities to ensure  
3 the general health care needs in his ward are met.

4                   St. Francis is a wonderful facility,  
5 life saving as well as life giving. Along with many  
6 of us here tonight, I was born there, my first  
7 speech. However, they must be financially solvent  
8 in order to function, which is why we are at these  
9 crossroads tonight.

10                  It is understood that the St. Francis  
11 facility has many challenges, financial as well as  
12 the condition of the building structure which have  
13 been pushed beyond its capability to operate.

14                  with that said, I would like to defer  
15 my efforts of the petition onto the shoulders of the  
16 state and federal government. Perhaps not this  
17 board that is here tonight, but appropriate agencies  
18 and departments that can provide additional monies  
19 that, regardless of physical address or entity,  
20 would ensure that adequate health care remains in  
21 southeast Trenton.

22                  New Jersey, with its single payer  
23 health care model, together with an increasing  
24 migrant population, is why the state and federal  
25 government need to come to the table with

1 checkbooks, please.

2 Many people in southeast Trenton are  
3 here -- are at, I'm sorry, below the poverty level  
4 and do not have their own means of transportation  
5 that greatly impact their health care choices.

6 Every night of the week, police bring  
7 a number of people to the ER around 2 a.m., and I've  
8 been there to check up on that, to be held or cared  
9 for until they are able to start all over again the  
10 next day. And I am, by no means, I'm totally  
11 opposed to that type of behavior. I would make a  
12 good cop and bad politician. I would lock up a lot  
13 of intercity constituents.

14 There are also drug overdoses,  
15 stabbings, as well as shootings, which create havoc  
16 with the hospital's ability to serve the general  
17 public. These are situations that ideally should  
18 not exist. But nonetheless, these are the cards  
19 that Trenton is dealt with every night that  
20 unfortunately are here to stay.

21 So southeast Trenton needs a facility  
22 that is here to stay. Thank you.

23 MR. HAVENS: Thank you.

24 Dr. Sudhakar.

25 DR. SUDHAKAR: Good evening. My name

1 is Dr. Telechery Sudhakar, T-E-L-E-C-H-E-R-Y,  
2 S-U-D-H-A-K-A-R, and I'm retired kidney specialist.

3 I have been associated with health  
4 care in Trenton and the surrounding communities for  
5 the better part of 50 years. I came to Trenton in  
6 1974 as a member of the first ever group of internal  
7 medicine residents at Helene Fuld Medical Center and  
8 St. Francis Medical Center. It was a combined  
9 program then.

10 It was during that time that I met my  
11 wife at Helene Fuld Medical Center. After moving to  
12 D.C. for my nephrology fellowship and spending a few  
13 years outside New Jersey, my wife and I decided to  
14 go back home and we have lived in this area ever  
15 since. This was in 1982.

16 For nearly 35 years, I had the  
17 privilege of providing care for patients with kidney  
18 disease in Trenton. My office was in Trenton and I  
19 provided care in all the area hospitals, including  
20 St. Francis Medical Center.

21 In addition to private practice, I  
22 provided free care at nephrology clinics at all  
23 three hospitals in Trenton and also provided care  
24 for hospitalized inmates with kidney disease at St.  
25 Francis Medical Center.

1 I have cared for the insured, the  
2 underinsured, uninsured and the undocumented.

3 It is because of this long  
4 relationship to health care in Trenton that I have a  
5 keen understanding of this community's health care  
6 needs and feel a personal obligation to do  
7 everything I can to fulfill the needs.

8 This is the reason for my service on  
9 Capital Health board, Capital Health System's  
10 hospital board since Capital Health's inception. I  
11 have served as chair of the strategic planning  
12 committee of the hospital for most of these years.

13 In the years past, health care was  
14 primarily focused on hospitalized care with long  
15 hospital stays. Surgical procedures were, and there  
16 was limited access and emphasis -- access to and  
17 emphasis on preventive care.

18 Fortunately, health care has evolved  
19 nationally as well as locally for the better in the  
20 last couple of decades. There is more emphasis on  
21 preventive care and there have been significant  
22 advancements in technology and clinical practice  
23 standards.

24 This has resulted in more and more  
25 care being appropriately transitioned to ambulatory

1 and virtual settings.

2 with hospital care limited to truly  
3 intensive care and reduced length of stay,  
4 communities like Trenton can no longer support  
5 multiple acute care hospitals.

6 I have fond memories of practicing at  
7 all the Trenton hospitals over the years and fully  
8 understand the sense of loss and anxiety regarding  
9 the continuation of needed medical services once St.  
10 Francis closes.

11 Unfortunately, the reality is that  
12 closure of St. Francis Medical Center is not only  
13 inevitable but actually imminent.

14 Under these circumstances, I believe  
15 the most important obligation and responsibility of  
16 health care providers, community leaders and  
17 officials is to assure and ensure that the community  
18 does not suffer the loss of services provided by St.  
19 Francis Medical Center, including preventive care,  
20 primary care, mental health care and specialty care.

21 Capital Health is uniquely qualified  
22 and positioned to make exactly such a commitment.  
23 We have a track record in Trenton that I'm extremely  
24 proud of.

25 We have not only not abandoned

1 Trenton, we have enhanced health care in Trenton,  
2 invested significant improvement in infrastructure  
3 at Regional Medical Center and have developed  
4 tertiary level programs at Regional Medical Center.

5 We are committed to significantly  
6 increasing medical education programs and have  
7 rather ambitious plans for improving education and  
8 housing opportunities Trenton.

9 We will commit to continue to provide  
10 the services at Capital Health East Trenton with  
11 active engagement and dialogue with the community  
12 either through small group discussions or through  
13 more formal community advisory groups.

14 MR. HAVENS: I'm sorry, but you need  
15 to --

16 DR. SUDHAKAR: One sentence.

17 It's my firm belief that the plans  
18 being proposed today will save services that need to  
19 stay in Trenton and will also provide a  
20 state-of-the-art, high quality community health care  
21 model moving forward.

22 I thank you for your time.

23 MR. HAVENS: Thank you.

24 Joanne Gotay, St. Francis Medical  
25 Center.

1 MS. GOTAY: Thank you for hearing me  
2 today. I'm here because I'm a resident of Trenton.

3 It's Joanne, J-O-A-N-N-E, G-O-T-A-Y.

4 I was born and raised in Trenton. I  
5 worked at St. Francis. Trenton is bad. We cannot  
6 deal with just one hospital. It's not going to  
7 work. We have 93,000 residents. We cannot -- we  
8 have shootings every day. We have stabbings every  
9 day.

10 I worked in the emergency room in St.  
11 Francis. I've seen people sitting in rooms waiting.  
12 If we can't handle it, how can one hospital handle  
13 it? And it just worries me about that. That's a  
14 big problem with us.

15 And also, I'm sure that certificate  
16 will stay at Capital in Fuld because it makes it one  
17 step closer to it being a trauma one center. It's  
18 not because they're trying to help St. Francis.

19 If you're trying to help St. Francis,  
20 keep it in the area. We have people who walk, who  
21 can't take taxi cabs. They don't have the money for  
22 it.

23 We have patients who can barely pay  
24 their copays. They'll tell us, If I have to take a  
25 cab into the hospital, I can't make my copay.

1 That's heartbreaking. And it's -- thank you.

2 MR. HAVENS: Thank you.

3 Is there anyone on the Team's call  
4 that would like to speak?

5 MR. JORDON: Yes, I'd like to speak.

6 MR. HAVENS: What's speaking?

7 MS. JOHNSON: Theresa Johnson.

8 MS. HERNANDEZ: There was another one  
9 before? John Jordon?

10 MS. JOHNSON: Hello. Hello.

11 MS. HERNANDEZ: Hello, Theresa?

12 MS. JOHNSON: Yes.

13 MS. HERNANDEZ: Hello, Theresa.

14 MS. JOHNSON: Yes.

15 MS. HERNANDEZ: There was a John  
16 Jordon that raised his hand before you, it looks  
17 like.

18 MS. JOHNSON: That's fine.

19 MS. HERNANDEZ: Mr. Jordon.

20 MR. JORDON: Hi, good evening. Can  
21 you hear me?

22 MS. HERNANDEZ: Yes. State your name  
23 and spell it, please, and you have three minutes to  
24 speak.

25 MR. JORDON: Jonathan Jordon,

1 J-O-N-A-T-H-A-N, J-O-R-D-O-N.

2 I'm a former resident of Trenton. I  
3 work in resiliency and sustainability currently, and  
4 I'd like to point out that Executive Order 23 from  
5 the governor which states that every single state  
6 agency is required to look at every environmental  
7 justice community through a lens of resiliency.

8 All the regional hospitals that are  
9 surrounding Trenton are compromised in extreme  
10 weather events. If you were to remove a hospital in  
11 Trenton, you are, in a sense -- this whole process  
12 needs to go back to the board and start looking at  
13 it in the sense of what is going to happen in the  
14 future when storms occur more, heat waves are more  
15 damaging to our community?

16 There was a few medical professionals  
17 that mentioned that Trenton had serious heart  
18 disease issues. That's a major concern in heat  
19 events, and we need to be able to go back, look at a  
20 sense of resiliency and follow the Executive Order  
21 23. Otherwise, you're out of compliance.

22 Thank you so much.

23 MS. HERNANDEZ: Thank you.

24 Theresa Johnson.

25 MS. JOHNSON: Yes.

1 MS. HERNANDEZ: State your name and  
2 spell it.

3 MS. JOHNSON: My name is Theresa  
4 Johnson, T-H-E-R-E-S-A, J-O-H-N-S-O-N.

5 MS. HERNANDEZ: Thank you.

6 MS. JOHNSON: I just wanted to really  
7 touch on the situation with the heart center going  
8 to Helene Fuld.

9 I am a heart patient at St. Francis.  
10 Me and my father, we both have heart disease and  
11 diabetes.

12 Dr. Patel has put four stents in my  
13 heart. My father just had a slight heart attack on  
14 October 15th. He came home for one day and had to  
15 be rushed back to St. Francis. He has a weak heart.  
16 It is working at 35 percent. We almost lost him  
17 Sunday.

18 If St. Francis was not there, I don't  
19 know what would have happened because my father  
20 literally thought he was going to pass, and I think  
21 that the heart center needs to stay there.

22 I am not in support of it going to  
23 Capital Health because people that have heart  
24 conditions need that there in case they have to be  
25 rushed there by an ambulance.

1                   So that's all I wanted to say. Thank  
2                   you very much.

3                   MS. HERNANDEZ: Thank you.

4                   MS. JOHNSON: You're welcome.

5                   MS. HERNANDEZ: Iana.

6                   MS. DIKIDJIEVA: Good evening.

7                   Can you hear me?

8                   MS. HERNANDEZ: Yes.

9                   State your name and spell it.

10                  MS. DIKIDJIEVA: Thank you.

11                  My name is Iana, spelled I-A-N-A, D,  
12                  like Delta, I-K-I-D, like Delta, J-I-E-V-A.

13                  My remarks will be a little bit blunt  
14                  tonight because the public is being given only three  
15                  minutes to speak to a four-inch binder.

16                  Parenthetically, I do want to mention  
17                  to everybody that the wonderful things that Al  
18                  Maghazehe said earlier today are nowhere in this  
19                  four-inch binder. That is not part of the material  
20                  that was actually submitted to the public with very,  
21                  very short notice.

22                  So there is that little discrepancy  
23                  between what you are hearing from Capital Health  
24                  today and what is actually written for the state to  
25                  be considered and what was actually presented to the

1 public for review.

2 Basically, what I want to ask the  
3 state to do is the only alternatives that Capital  
4 Health has considered in this entire four-inch  
5 binder is simply the full-on closure of St. Francis.

6 Now, the community of Trenton  
7 understands that St. Francis cannot continue as is.  
8 We get it. We further get that, you know, we  
9 actually understand in great amounts of detail that  
10 when you take a community that has been this heavily  
11 red lined, and Trenton is more red lined now than it  
12 was at the time of actual red lining, when you have  
13 such a concentration of communities of color and  
14 poor residents into a community that the rest of the  
15 region does not really want to deal with, including  
16 you all sitting on this board, and in which the  
17 executives of all the institutions that you heard  
18 earlier today do not live in Trenton, would never  
19 let their children live in Trenton and just  
20 generally have been hemorrhaging investment from the  
21 city, while at the same time putting their real  
22 investment in the suburbs, in the Hopewell campus,  
23 and then everybody says, well, you know, Trenton has  
24 too many beds and the demand is declining.

25 well, yeah, because everybody knows

1 when they are being sent to the place that is the  
2 red lined asset, and everybody does everything that  
3 they can to go to the other place, the better place.

4           And so what I'm asking this board to  
5 do is actually, you know, approve the acquisition,  
6 fine, but don't approve the closure because --  
7 without asking Capital Health for an actual picture  
8 of their assets and how they are making investment  
9 regionally and not considering Trenton and the  
10 demand from Trenton as only the people with the  
11 worse conditions, but actually as creating, the  
12 potential to create an entity that can actually  
13 serve the region more broadly, and where we're not  
14 perpetuating the same sort of segregation philosophy  
15 that got us here already.

16           And finally, I want to say Capital  
17 Health in this four-inch binder talks about charity  
18 care. I have had the experience of actually being a  
19 poor uninsured Trenton resident seeking charity care  
20 at Capital Health.

21           what they have written in this binder,  
22 the pro forma things, I can't even call it a lie  
23 because that would imply that the people writing it  
24 had any relationship or understanding or knowledge  
25 of any sort of what they were actually speaking.

1                   It turned out as a plot point actually  
2                   that my point of privilege was not just that I was  
3                   -- that I'm white, educated and so on, it's that my  
4                   significant other is six foot, four and was able to  
5                   physically carry me out of a wheelchair into the  
6                   closet that Capital Health uses at their charity  
7                   care office.

8                   There will be more in my written  
9                   remarks. Thank you.

10                   MS. HERNANDEZ: Thank you.

11                   MR. HAVENS: Okay. Is there anyone --

12                   MS. CLARKE: Good evening. My name is  
13                   Caroline Clark and I am a resident of the city of  
14                   Trenton.

15                   MR. HAVENS: Spell your name, please.

16                   MS. CLARKE: C-L-A-R-K-E.

17                   So I expected to be part of a  
18                   community forum tonight. Instead, what I have been  
19                   attending is a Capital Health pep rally.

20                   I have listened to just about every  
21                   single organizational speaker supporting the closure  
22                   of St. Francis. Of all the organizations that exist  
23                   in Trenton, none of you support St. Francis staying  
24                   open for the benefit of Trentonians? Not one?

25                   I heard a lot of stories, but what is

1 fact is that we are a population of 90,000. We are  
2 low income. We are uninsured. We are underinsured.

3 why are you all so comfortable talking  
4 about contracting health services for our community  
5 instead of expanding them, especially after the  
6 recent pandemic?

7 we have a predominantly black  
8 population, and we all know that black maternal  
9 health care is a national as well as a local  
10 concern.

11 How can you all stand here and with a  
12 straight face tell Trentonians that it's better for  
13 us to have less health care than we currently have?  
14 Shame on all of you.

15 UNKNOWN: Excuse me, could I speak.

16 MS. HERNANDEZ: In a moment, please.

17 MS. WILLIAMS: My name's Jennifer  
18 Williams, J-E-F-F-I-F-E-R, Williams,  
19 W-I-L-L-I-A-M-S.

20 And the word community covers a lot of  
21 sins, doesn't it? Whose community are we talking  
22 about? 'Cause I can only tell you about two roads.  
23 One's called Olden Avenue. One's from Hamilton into  
24 Trenton into Ewing, and the other one's called South  
25 Broad Street, which turns into North Broad Street,

1 just as South Olden turns into North Olden, and that  
2 also 206 runs from Bordentown all the way up into  
3 Princeton. It runs through Trenton.

4 If you were to take either of these  
5 roads, you can see the differences, and they're not  
6 differences of what we made; it's differences of  
7 what the outside world made.

8 When you're from Trenton and as I am,  
9 I'm a lifelong resident, you learn to expect certain  
10 things, that if you're from the suburbs, you'll be  
11 treated differently by government, by our  
12 institutions, certainly as you're hearing tonight,  
13 from our hospitals.

14 Our lives do not seem to be as  
15 valuable as the ones in Hamilton and Lawrence and  
16 Princeton and other places. We live in a city that  
17 has a 27 percent poverty rate and only has a 39  
18 percent home ownership rate.

19 Now, I'm not an economist. I don't  
20 have the exact details of what I'm about to say, but  
21 if you don't own a home, how likely are you to have  
22 health insurance?

23 This decision should be looked at as  
24 you want to tear down a building which is no longer  
25 functional, which is no longer usable, some said it

1 may be dangerous.

2                   Personally, I just gave blood there a  
3 month ago, and as I walked in the door a young  
4 Latino woman came in, had to hop out of a cab to use  
5 crutches because she had a broken leg to go into the  
6 hospital. And I'm thinking, wonder how much it  
7 costs to take a cab just to go to the hospital to  
8 have a checkup maybe on a broke leg?

9                   You know already about the horrendous  
10 health disparities in urban communities,  
11 particularly Trenton. They are highlighted across  
12 the country, New York Times, Washington Post, etc.

13                   why don't you replace this hospital  
14 with a new facility with high level tech, all the  
15 medical care provided an avant-garde facility to do  
16 research, be on point of a spear into correcting  
17 health disparities in urban communities,  
18 particularly in communities like Trenton which are  
19 majority African American and the Latino?

20                   Because to me, if this is a decision  
21 about money in a market, that would create a market  
22 that would be taking financial advantage of trying  
23 to correct a national problem, making Trenton a  
24 model, St. Francis a model for what other smaller  
25 cities, midsize cities could be doing. Because we

1 shouldn't have to go to New York or Philadelphia or  
2 other places to get medical care and also have  
3 research being done at what's going on in Urban  
4 America.

5                   Having lived in New Orleans and  
6 Philadelphia, Thomas Jefferson had the similar  
7 issues a while ago with Center City facilities and a  
8 changing population. They found ways around it.  
9 Now, granted, they've become gargantuan since. New  
10 Orleans, the same thing with Touro Medical Center.

11                   I went to Tulane University, I saw  
12 that hospital and I saw what that hospital's able to  
13 do to Hurricane Andrew and then I know what they did  
14 after Hurricane Katrina when you have a population  
15 that cannot get out of town when a storm is coming,  
16 as someone mention earlier.

17                   But also, what happens if we have  
18 another act of terrorism, such as Trenton and Mercer  
19 County was the center of Anthrax after 9/11.

20                   Please consider this. Make this  
21 facility an avant-gard research facility for curing  
22 and solving the ills of Urban America, because if  
23 you know the cardiac care license will be a part of  
24 that, there are so many other things you can come,  
25 and we're not just a city of gunshot victims. There

1 are people who just need basic medical care. Most  
2 of the city is that.

3 So please, don't perpetuate this image  
4 that we're a violent city and every single darn  
5 corner that is filed with gunshots because we're  
6 not.

7 Thank you and have a pleasant evening.

8 MR. HAVENS: Thank you.

9 We have one more online.

10 MS. HERNANDEZ: Chad. Chad, go ahead.  
11 State your name and spell it.

12 MR. JOHNSON: Chad Johnson, C-H-A-D,  
13 J-O-H-N-S-O-N.

14 I'd like to speak on behalf of St.  
15 Francis Medical Center. I believe the hospital  
16 should stay open. It's close to us for people to  
17 get to in case of emergency situation, like my  
18 grandfather who had a heart attack. If he didn't  
19 get there on time, he could have died at home or in  
20 the ambulance, and he got open-heart surgery there  
21 seven years ago.

22 If Phil Murphy could give Cooper  
23 Hospital over 2 point billion dollars to fix their  
24 hospital, then he could give us the \$1 million to  
25 put into St. Francis Medical Center.

1                   That's all I have to say. Thank you.

2                   MS. HERNANDEZ: Thank you.

3                   MR. HAVENS: Do proximity first.

4                   Please.

5                   MS. CZECHOWSKI: Good evening. My  
6                   name is Michelle Czechowski, and I am the program  
7                   director for the CARES program at located at St.  
8                   Francis Medical Center.

9                   My name is spelled M-I-C-H-E-L-E,  
10                  C-Z-E-C-H-O-W-S-K-I.

11                  MS. HERNANDEZ: Did you already speak?

12                  MS. CZECHOWSKI: No, ma'am.

13                  MS. HERNANDEZ: Okay.

14                  MS. CZECHOWSKI: Okay. So as I  
15                  mentioned, my name is Michelle Czechowski, and I am  
16                  the program director for the CARES program at St.  
17                  Francis Medical Center. I've been with this program  
18                  since its inception in 2003, and I thank you for  
19                  allowing me to voice my support for the transfer of  
20                  St. Francis to Capital Health.

21                  The CARES program provides intensive  
22                  compassionate treatment to children ages three  
23                  through 21 who do not require inpatient care but who  
24                  have emotional behavioral difficulties impeding  
25                  their ability to succeed.

1                   We serve Medicaid eligible children  
2 and are the only program locally that cares for  
3 children with intense behavioral and high acuity  
4 needs.

5                   I already received numerous calls from  
6 various schools and surrounding boards of education  
7 asking if CARES will remain open, and I replied yes.  
8 Immediately, I heard a resounding thank God from  
9 all.

10                  The most important thing to understand  
11 is that CARES is a key component, if not the core,  
12 of pediatric behavioral health in Mercer County.

13                  The earlier we support and provide a  
14 better quality of life for the children and parents  
15 we serve, the more health and prosperity we provide  
16 to our entire community.

17                  Some of the children in our program  
18 present with highly aggressive, defiant or  
19 self-destructive behaviors resulting from abuse,  
20 violence, substance abuse, death, divorce or  
21 abandonment. They struggle with social or school  
22 phobia, obsessive-compulsive disorder, anxiety,  
23 depression, PTSD, mood disorders and/or bipolar are  
24 all represented. Some also have suicidal thoughts  
25 and self-injurious behavior.

1                   We treat every child as an individual  
2 and strongly believe that every person, no matter  
3 their age or life experience, deserves a chance to  
4 be heard, seen and to be treated with respect,  
5 kindness and dignity.

6                   We offer two levels of care. The  
7 first is full-day partial hospitalization where  
8 children attend our program during school hours and  
9 receive intensive therapy, along with one-to-one  
10 support from licensed teachers to complete their  
11 schoolwork.

12                   They participate in group therapy that  
13 covers the full gamut of topics for exploration.  
14 Each child is assigned a licensed clinician who  
15 provides individual and family therapy at least once  
16 a week. Meals are provided and in most cases  
17 door-to-door transportation.

18                   The second level of care is the  
19 outpatient program where children and their families  
20 meet weekly with a therapist for individual and/or  
21 family therapy to identify, resolve issues related  
22 to home, school and social situations. Medication  
23 management and psychiatric evaluation is also  
24 available.

25                   Our team of counsellors, clinicians,

1 teachers and an APN and psychiatry provide children  
2 and families with the tools to cope with and manage  
3 their challenges.

4 It is critical to our community that  
5 we maintain this program by transferring it to  
6 Capital Health. If the transaction is approved, all  
7 of the team members hope to continue in their roles  
8 as part of Capital Health.

9 Throughout the transition planning, we  
10 have had an open and transparent dialogue with  
11 Capital Health which is promoting a positive working  
12 synergy amongst the organizations. Please approve  
13 the transfer of St. Francis Medical Center to  
14 Capital Health to ensure the essential services  
15 remain for our children, families and larger  
16 community. Thank you.

17 MR. HAVENS: Thank you.

18 MS. LAURENTI: Good evening. My name  
19 is Yuki, Y-U-K-I, Moore, M-O-O-R-E, Laurenti,  
20 L-A-U-R-E-N-T-I.

21 We are late because we actually only  
22 got this notice yesterday in our mail and adjusted  
23 our calendars in order to be here.

24 I live at 464 Hamilton Avenue, and if  
25 anyone happens to be from this community, that is

1 two blocks away.

2 I wish to second the remarks of Joanne  
3 Gotay and Iana Dikidjieva.

4 I've been in this community for 40  
5 years. We live on the way for the ambulances going  
6 and coming from St. Francis. Our community, I don't  
7 know how many of you live in it, is a largely  
8 immigrant population. We say that it has a  
9 different Latinity from when we first moved to  
10 Chambersburg.

11 Many people in our community do not  
12 have cars, and I know that because we live there.  
13 We see the buses that they take. We see the vans  
14 that come and pick them up to take them to work.

15 We recognize the economics of  
16 hospitals, but we do, picking up the word of  
17 community, would hope that you will all think about  
18 those of our members who are in our community who do  
19 not have cars, who do travel by bus and the  
20 difficulty that it will take to get to the  
21 facilities that Capital Health has today.

22 I'm very fortunate that I have a car  
23 and I have a job and I'm able to get where I need to  
24 go. I've certainly walked down when I've had an  
25 emergency situation, as has my husband, to St.

1 Francis, but I think about those in my community who  
2 are not easily going to be able to get to a new  
3 facility, and I do hope, as others have talked  
4 about, that you will think about the community of  
5 members who live here and the difficulties that they  
6 will encounter and to keep some type of appropriate  
7 health care in this community, not in East Trenton,  
8 and not out in Hopewell. Thank you.

9 MR. HAVENS: Thank you.

10 Yes, sir.

11 MR. LAURENTI: Good evening. My name  
12 is Jeffrey Laurenti, L-A-U-R-E-N-T-I, also living at  
13 464 Hamilton Avenue, Trenton, two blocks from here,  
14 and I recall from the days of my youth the barge  
15 singing The words of the profits are written on the  
16 subway walls, and I had a sense that Iana Dikidjieva  
17 and Caroline Clarke, to us, represented the words of  
18 the profits in many ways, and that is, we have not  
19 had an opportunity, a public hearing at which to  
20 express the desire of our community to keep a  
21 hospital, to keep St. Francis open as a full-blown  
22 hospital.

23 I've had to go there for emergency  
24 services and have been reassured by there being  
25 other facilities there to which, if my condition

1 required it, I could immediately be referred.

2 The assurance that, and I quote now  
3 from the letter that we got yesterday, at least for  
4 the near term the emergency department will be  
5 allowed to continue there, and we are then told that  
6 long-term Capital Health will develop a new  
7 emergency department, and I should add, emphasize,  
8 outpatient site.

9 There is nothing in the discussion  
10 about what happens to the prison care that is  
11 currently made at St. Francis Hospital for inmates  
12 needing medical attention from New Jersey State  
13 Prison and other facilities of the Department of  
14 Corrections, and one doesn't know whether that's  
15 already been booked into another hospital wherever.  
16 It would be good to know that, what we can expect in  
17 that regard.

18 And my sense is that the community's  
19 voice needs to be heard in the deliberations of the  
20 state, not simply on whether to transfer the, what  
21 is the crown jewel of St. Francis, the cardiac unit,  
22 to the Capital facility, Capital Health facility,  
23 presumably the one on Brunswick Avenue, which is  
24 where I was born, which is where I was born  
25 incidentally, but instead, to keep open a facility,

1 because as Yuki said, this side of town has 50,000  
2 people and many of them are low income immigrants  
3 who don't have transportation choices, and that  
4 should be our priority.

5 We've gone through a whole national  
6 effort to try to expand health care opportunities,  
7 and closing this hospital in this city, in this  
8 neighborhood goes entirely contrary to that need.

9 So if Capital Health wants to make an  
10 investment in this hospital, let it make an  
11 investment in the hospital, not shut it down. That  
12 would be our hope.

13 MR. HAVENS: Sir, could I trouble you  
14 for your, the letter?

15 MR. LAURENTI: It's your letter -- not  
16 your letter. Capital Health's letter. I just have  
17 notes on it.

18 MR. HAVENS: Okay. Thank you.

19 Is there anyone else who would like to  
20 speak?

21 Hearing nothing else, on behalf of the  
22 board, we truly appreciate all your comments. The  
23 process will continue to go on. We hope that you'll  
24 continue to provide input in the process, both in  
25 writing, in reaching out to affected people, and you

1 can attend our board meeting when that is scheduled  
2 also. It will be posted to the website.

3 MS. CHOWDHURY: Do you know when it  
4 will be?

5 MR. HAVENS: Time-wise, it's during  
6 the day. It's a regular State Health Planning Board  
7 meeting, which normally begins at 9:15 -- 9:30.  
8 Sorry. 9:30.

9 MS. CHOWDHURY: Is there an option to  
10 call in?

11 MS. HERNANDEZ: If you're speaking  
12 online, please state your name.

13 If you are speaking online, please  
14 state your name.

15 MS. CHOWDHURY: Sure. My name is  
16 Aparna Chowdhury, and I was just asking questions  
17 about that other meeting because it seems like it's  
18 in the morning, and so I was asking for  
19 clarification on it. Thank you.

20 MS. HERNANDEZ: Can you spell your  
21 name for the court reporter, please.

22 MS. CHOWDHURY: Sure. A-P-A-R-N-A.  
23 My last name is C-H-O-W-D-H-U-R-Y.

24 I wanted to make comments but I  
25 couldn't unmute, but it's all right.

1 MS. HERNANDEZ: You have time if you  
2 want to make a comment.

3 MS. CHOWDHURY: I'll be really brief.  
4 I just wanted to second the comments  
5 from the Laurentis and the voice of the community.

6 This closure is going to have profound  
7 and long reaching effect in this area. It's part of  
8 a larger trend of hospitals leaving inner cities  
9 with detrimental effects of (indiscernible).

10 St. Francis didn't just deteriorate.  
11 It was permitted to reach its current state, which  
12 isn't necessarily where people in the neighborhood  
13 would like it to be. It does need improvement. But  
14 closing it down is going to increase health problems  
15 and health to ill effect.

16 I wanted to just basically second the  
17 idea that transportation's a major concern in the  
18 area, and this area has a concentration of  
19 population, thousands of people are affected by this  
20 in this matter in terms of health care.

21 I previously (indiscernible) to those  
22 who are affected. I think that although people are  
23 not able to be articulate in their defenses  
24 concerning maintaining St. Francis being open as a  
25 much-needed health care facility, it doesn't

1 undercut the importance.

2 (Indiscernible) it's going to be  
3 (indiscernible) and also in the business sense.  
4 (Indiscernible) on the area's going to be impacted.

5 I agree with Mr. Laurenti, the  
6 mandate. I understand the economic concern  
7 (indiscernible) and therefore improve them.

8 However, entire half of Trenton  
9 underserved. That means a very real  
10 (indiscernible). You know, (indiscernible) St.  
11 Francis is part of (indiscernible) an health sense  
12 more importantly there is besides the economic  
13 (indiscernible) there's a mandate (indiscernible)  
14 social which seems to being broken through this.  
15 It's important part of our health care.

16 Trenton's population is increasing and  
17 we need to have close (indiscernible) health.  
18 That's it. Thanks.

19 MS. HERNANDEZ: Okay. Thank you.

20 MS. HARRISON: Hello.

21 MS. HERNANDEZ: Hello.

22 MS. HARRISON: I'd like to speak.

23 MS. HERNANDEZ: State your name, spell  
24 it. State your name and spell it.

25 MS. HARRISON: Deloris Harrison,

1 H-A-R-R-I-S-O-N.

2 Hello.

3 MS. HERNANDEZ: Go ahead.

4 MS. HARRISON: I'd like to know why  
5 everybody came, they got letters about, but we're  
6 over here on Cove Street, we didn't get any letters  
7 about the hospital, nobody?

8 And I want to tell you, back in 1997,  
9 that hospital, St. Francis was one of the best  
10 hospitals and the best doctors around, because they  
11 did my back operation in 1997, St. Francis, and I  
12 never had a problem since.

13 So I just want to thank you and tell  
14 you people.

15 MS. HERNANDEZ: Okay. Thank you.

16 MR. HAVENS: Okay. Once again, thank  
17 you all for being here. Appreciate your input and  
18 look forward to your continuing input into this  
19 process. Thank you.

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C E R T I F I C A T E

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I, LISA PENROD, a Certified Court Reporter (XI01753), Registered Professional Reporter and Notary Public of the State of New Jersey, do hereby certify the foregoing to be a true and accurate transcript of my original stenographic notes taken at the time and place hereinbefore set forth.



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LISA PENROD, CCR#XI01753  
REGISTERED PROFESSIONAL REPORTER

Dated: November 11, 2022

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