

## LEGAL SERENITY PC

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Hearing on the Discontinuation of services, Javon Bea Hospital-Rockton Avenue  
Campus, Rockford, Illinois [#E-056-21]. January 26, 2022

### Written Witness Testimony

As a Westside Rockford resident, professional and an advocate for equitable distribution of community resources, I am outraged at the Mercy Health System's plan to abandon not only the West half of our community but 2/3rds of Winnebago County. As I am sure the Board is aware, Rockford on the West side of the Rock River, encompasses an underserved community in many demographics. The community includes large numbers of lower socioeconomic households, minority households (both race and ethnicity), very young and very elderly residents, and single women (with or without children). Additionally, If the Western half of Winnebago County is included you have in addition to an older demographic, a major rural population. Again, an underserved community.

This closure will continue the pattern of increased risk and diminishment of services to our community. The area served has been deeply impacted already by the closure of the level 1 trauma center. As a former public defender attorney, I can state from professional experience, the residents of this community have been deeply impacted and harmed by that move. Yes, UW has a trauma unit but for many gunshot victims, heart attack and stroke patients, asthma patients the extra 10 or 15 minutes are literally a difference of life and death. The capacity of the ER is not limitless and it was not built to be the ONLY level 1 center in 2 counties.

In addition to the ER issues (as that damage has been done) the impact of the proposed closure to the community is multifold. Transportation barriers due to age, economics, health etc. are real. There has been public transit for both patients and their families to this location. Those in the western and northern reaches of the county will now be forced in some cases out of state for services (Rockton and Pecatonica both will be closer to Wisconsin facilities). Those requiring frequent visits

such as for chemo, will now be required travel across the city (as much as a half hour away) as opposed to a few blocks. Making medical services more remote will also impact people accessing preventative services such as mammograms, diabetic education/monitoring, nutritional care and others. This is especially tragic when so much effort has been made to get underserved communities to engage with services.

The rationale the System is providing for closure seems to be; there are too many beds in Rockford, the hospital is losing money, we can not staff the facility, the facility itself, needs too much maintenance and is outdated.

In the years since the merger between Mercy Health and Rockford Health, Mr. Bae continued to state investments were and would continue to be made but the system closed an inpatient mental health unit, a level 1 trauma unit, refused to serve a segment of the Medicaid patients, reduced inpatient beds and failed to staff the facility appropriately. In other words, they were starving the patient and then complain it is not strong enough.

As to their financial complaints, if system can pay the CEO \$10,000,000 and has an endowment in excess of \$400,000,000, they can find the funds to support this campus. I would also remind the Board this is a Not-For-Profit organization.

Mercy Health Systems has consistently been at best disingenuous in its dealings with the Board. At the time of the merger between Rockford Health Systems and Mercy Health Systems they stated;

“By thoughtfully aligning our organizations, Mercy Health System and Rockford Health System will create a regional system that honors our existing legacies while strengthening both systems for the future, ...This dynamic partnership will provide our patients with outstanding, coordinated care that encompasses nearly every medical specialty and is delivered conveniently and close to home.” Javon Bea November of 2014

Mercy Health Systems in their request for licensure of the new Eastside campus (in 2018) stated that the Rockton campus would remain open and be actively supported by the organization. CEO Javon Bea stated that

“The North Rockton Avenue campus has quality facilities for a variety of services, and we will continue to provide a wide range of adult outpatient and inpatient care ... and commit to maintain a N. Rockton Avenue campus,

providing hospital-based and outpatient services to its patients and investing \$50 million in capital improvements over the next ten years.”

Further the stated purpose and need for the new facility was to provide a continuum of care and build upon the regional neonatal intensive care unit as a foundation for a children’s hospital. They pointed out the region did not have a children’s hospital. To obtain services families had to go out of state or into the Chicago area. Mr. Bae also stated that the community could support and in fact needed four hospitals. That new facility opened January 2019 as a full service hospital for both children and adults. In June of 2021 that much needed new children’s unit, quietly was closed.

It is time that this organization be held to their testimony, applications as well as assurances, and not be allowed to shirk their commitments. Closing this facility will perpetuate racial, class, age, rural/urban, and gender inequality of healthcare. It will make real the threat of a medical desert in our community. I urge this Board to stand up to Mr. Bae and his organization and say no, not this time!

Kathy A. McNeely-Johnson