

**WRITTEN TESTIMONY FOR FINANCE COMMITTEE BUDGET HEARINGS**  
**20-4595 - FY 2021 EXECUTIVE BUDGET RECOMMENDATION**

	Witness Name:	Organization (if any):	City/Town:
69.	Stephanie Altman	Shriver Center on Poverty Law	Chicago
70.	Joel Hatch	Concerned Citizen	Chicago
71.	Geraldine Gorman	University of Illinois at Chicago	Chicago
72.	Emily Anderson	Concerned Citizen	Chicago
73.	Irakere Picon	Defenders for All Coalition	Chicago
74.	Shirley Bomar Cole	Concerned Citizen	Chicago
75.	Jennifer Rojas	Alivio Medical Center	Chicago
76.	Larry James	Vision of Restoration	Maywood
77.	Dr. Claudia Fegan	Woodlawn Clinic	Chicago
78.	Adamari Diaz	Morton East High School	Maywood

#69

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Wednesday, October 28, 2020 6:10:08 PM  
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**Time Spent:** 00:09:32  
**IP Address:** 24.14.32.214

Page 1

## Q1

Please provide some basic information

**Witness Name:** Stephanie Altman  
**Organization (if any):** Shriver Center on Poverty Law  
**City/Town:** Chicago  
**State:** IL  
**ZIP:** 60603

## Q2

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

My name is Stephanie Altman. I am the Director of Healthcare Justice and the Senior Director of Policy at the Shriver Center on Poverty Law. We represent low-income, racially and ethnically diverse populations in Cook County. Many of our clients are uninsured and underinsured and rely on Cook County Hospital and Health Services for preventative care, specialty care and, critically now, for testing and treatment for COVID-19. In particular, many of our clients are immigrants who are not eligible for public health insurance coverage under Medicaid or the ACA Marketplace. Cook County health systems care for our clients regardless of their lack of health coverage, ability to pay or immigration status. This care is critical to the populations we serve who often would have no other place to go if Cook County health systems were not available to them. CCH is integral to the healthcare ecosystem in Cook County as a whole. When other institutions close, CCH cannot be expected to step in and absorb their patients without increased financial support. We believe that everyone has to help – the cost of charity care in Cook County cannot continue to be disproportionately carried by CCH. CCH has a limited budget and seeks to maximize services based on the resources that they have available through coordination with other health systems.

Shriver Center considers Cook County health systems as not just as a health provider but as a community partner, welcoming center, community employer and economic engine. CCH is also an active part of our Protect Our Care Illinois and Protecting Immigrant Families Illinois Coalitions to save the Affordable Care Act and respond to the federal attacks on health care coverage and immigrants. As the ACA is now again in jeopardy, Cook County health systems has shown leadership as one of the first counties in the nation to cover ACA Adults in the 2013 CountyCare 1115 Waiver and again now in the crucial fight to save the ACA amidst an unprecedented global pandemic. We strongly support the passage of an adequately funded budget for the health system.

**Q3**

Acknowledgement of submitting written testimony only

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#70

COMPLETE

**Collector:** Web Link 1 (Web Link)  
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**IP Address:** 65.79.129.135

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Page 1

## Q1

Please provide some basic information

Witness Name:	Joel Hatch
City/Town:	chicago
State:	IL
ZIP:	60626

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## Q2

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

Last year I found a third roommate to take up a vacant room in my rented apartment. The roommate was getting along well until abruptly, it seems, she started to completely disassociate. She stopped going to work, she stopped socializing. In fact she stopped leaving her room entirely. She also began to have loud arguments with her self all through the night. Things reached a pinnacle when she started threatening me and my other roommate with violence. One particular night her behavior became so disturbing that I decided to call the police. Not because I thought she should be locked away but because in such situations no alternative is available. When the police arrived, and after I had debriefed them on the situation, one officer turned to me and said "I can't do this any more. This is the third mental health call I have gotten today! I am not trained for this! What about my mental health?!"

As a masters student in public health, who has conducted research on gaps in mental health services, I can verify with full confidence that my experience is not anecdotal. we are currently in a mental health epidemic. Mental health crisis' are one of the main drivers in avoidable hospitalizations in this state. This is why we need to adopt the budget for black lives. Not only will it address situations like the one I had with my old roommate, but also because it will likely save the state money by reducing avoidable mental health related hospitalizations.

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**Q3**

Acknowledgement of submitting written testimony only

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#71

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Page 1

Q1

Please provide some basic information

Witness Name:	Geraldine Gorman
Organization (if any):	University of Illiinois at Chicago
City/Town:	Chicago
State:	IL
ZIP:	60612

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## Q2

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Finance Committee

Cook County Board of Commissioners

October 28

In the academic year of 2016-17, the College of Nursing at the University of Illinois Chicago began a collaboration with the Cook County Sheriff's Office. Under the auspices of Dr. Jane Gubser, Executive Director for DOC Programs, we began bringing in graduate students to provide health education to men and women on selected tiers. Specifically, we worked with the detained population on the women's substance treatment tier (THRIVE), with the young men involved in the GED program, with women on a medium/maximum tier and with the population on the Veteran's tier. This proved to be a rich experience for all involved. With the support of the Sheriff's staff, we presented weekly programs ranging in duration from 60-90 minutes and covering topics from simple self-care measures, to post-partum depression and related issues to addiction and the brain. During breaks in the academic calendar, I filled in the gaps. Independently I also facilitated a book group in the women's division.

In addition to enhancing our students' learning, we feel this collaboration provided depth and breadth to what the CCODOC staff was able to provide the detained population. We deeply valued our time there, appreciate the continued collaboration, and look forward to returning when the current restrictions are lifted. The staff of the Sheriff's Office were always accommodating, encouraging and welcoming. It is a partnership in which UIC's College of Nursing takes great pride.

If I can provide any further testimony, please do not hesitate to contact me.

Sincerely,

Geraldine Gorman, PhD, RN  
Clinical Professor  
College of Nursing  
University of Illinois at Chicago

## Q3

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#72

COMPLETE

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Page 1

**Q1**

Please provide some basic information

**Witness Name:** Emily Anderson  
**City/Town:** Chicago  
**State:** IL

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**Q2**

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As a former volunteer at Cook County Dept of Corrections mental health and behavioral health programs I am writing in support of the programs in the women's jail. For two years during my monthly volunteer sessions, I saw the value to our women in CCDOC by providing programs. I hope you will find money in the budget to continue these programs.

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**Q3**

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#73

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**Last Modified:** Thursday, October 29, 2020 12:34:49 AM  
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Page 1

Q1

Please provide some basic information

Witness Name:	Irakere Picon
Organization (if any):	Defenders for All Coalition
City/Town:	Chicago
State:	IL
ZIP:	60608

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## Q2

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

The Defenders for All Coalition (D4A) represents over 40 immigrant advocacy organizations, criminal justice reform advocates, and faith leaders in support of creating and funding Cook County's immigration unit in the Public Defenders Office. Over the last 10 months we have gained the support from 11 Cook County Commissioners, as well as endorsements from Congresswoman Schakowsky, Congressman Garcia, Congressman Schneider, Congressman Quigley, and Congresswoman Kelly, and over 10 Illinois General Assembly members. D4A is proud to add President Preckwinkle to the list of endorsing elected officials and the coalition praises her for including funding for a dedicated immigration unit within the Cook County Public Defender's Office in her proposed budget.

Under the U.S. Supreme Court's 2010 Padilla v. Kentucky ruling, Public Defender offices across the country are mandated to provide adequate representation and inform their clients whether a criminal plea carries any risk to their immigration status. Furthermore, by investing in a dedicated immigration unit, the Public Defender can play a pivotal role in protecting immigrants' right to due process in Chicago Immigration Court, where in FY 2019 alone, approximately 1,500 immigrants were tried without representation in their immigration bond hearings. Data shows that immigrants are 10.5 times more likely to win their case if they have legal representation.

This lack of representation disproportionately affects people of color, especially the Black immigrant community. 76% of Black immigrants' deportation hearings are based on criminal grounds but for the immigrant community as a whole, that number is only 45%. Furthermore, Black immigrants make up 7.2% of the immigrant population, yet account for 20% of criminal based immigration proceedings. This disparity is unacceptable. The creation of a dedicated immigration unit within the Cook County Public Defender's Office is a step in the right direction towards real justice.

With private philanthropic organizations already agreeing to commit \$250,000 to fund the D4A initiative, creating an immigration-specific unit within the Office of the Public Defender would cost the county only \$250,000, roughly .03% of the Public Defender's current budget. If implemented, Cook County would become the largest jurisdiction in the nation to have a Public Defender immigration unit and continue to lead the country in protecting immigrant communities.

Thank you President Preckwinkle for your leadership and support of the entire immigrant community.

## Q3

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#74

COMPLETE

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Page 1

**Q1**

Please provide some basic information

Witness Name:	Shirley Bomar Cole
City/Town:	Chicago
State:	IL
ZIP:	60615

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## Q2

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

Dear Cook County Board of Commissioners,

As a former chief operating officer of Provident Hospital, I am writing to provide my support of Cook County Health's plan to "Reimagine Provident Hospital". Consistent with the mission to deliver integrated health services in partnership with other health providers and communities this plan will enhance the health of our Black and Brown communities by addressing healthcare disparities.

I know firsthand the challenges of running a hospital when the overwhelming majority of patients are uninsured or covered by a government program. The financial pressure was enormous before COVID. I can only imagine the new financial pressures in a COVID environment. I think we are seeing this play out with the closure of Mercy Hospital.

What I don't understand is why the world expects that every time a private hospital closes, Cook County Health can step in and fill the gap. Cook County Health already provides the majority of charity care in Cook County. It is time for other hospitals to do more. I don't have the solution for how that works but I can tell you it has been a problem for decades.

If a private hospital with a big corporation behind it – as is the case with Mercy – can't make the finances work, then how would taxpayers make it work without a huge influx of funding.

I want the County Board to know that I support the proposed changes to Provident. The addition of ophthalmology, mammography, dialysis and lifestyle education for chronically ill patients is a fabulous start. The commitment to build a whole new facility is really exciting and I believe will attract more insured patients to a state-of-the-art facility.

I know that change is difficult for many but as a former administrator, I can tell you this change is the right change at the right time. Many thanks for keeping the rich history of Provident Hospital alive and making sure that its legacy continues through proper planning and enhancement of services that directly impact health disparities.

Sincerely,

Shirley Bomar-Cole, RN, BSN, MHA

## Q3

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#75

COMPLETE

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**Time Spent:** 00:00:52  
**IP Address:** 162.217.184.230

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Page 1

**Q1**

Please provide some basic information

Witness Name:	Jennifer Rojas
Organization (if any):	Alivio Medical Center
City/Town:	Chicago
State:	IL
ZIP:	60608

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## Q2

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

Hello, my name is Jennifer Rojas and I am a Licensed Social Worker and the Lead Care Manager for the CountyCare program at Alivio Medical Center. I am writing to voice Alivio Medical Center's support for Cook County Health and the CountyCare Medicaid program—both of which have been an anchor partner and a vital lifeline to us and to the communities we serve.

Alivio Medical Center is a federally qualified health center with 7 locations in Chicago's Little Village, Pilsen, and West Side neighborhoods. We work with CountyCare patients through the Medical Home Network ACO (MHN ACO), serving approximately 6,500 CountyCare patients each year and providing practice level care management. Through the MHN ACO arrangement, Alivio takes on delegated care management responsibilities for the health plan, hiring the staff and implementing a truly unique practice level care management program that includes innovative care management technology used by our team.

Alivio's care managers practice whole person care and help patients who need extra support and guidance to get their healthcare on track with a primary care provider. Today, our MHN ACO CountyCare patients are receiving higher quality care—and getting care in the right place at the right time, because of the integrated care management model, technology, and resources on the ground. As a result, our patients have a health plan to follow, a greater understanding of how they can take control of their health and ultimately avoid the emergency department and even have fewer hospitalizations.

This forward thinking MHN ACO-CountyCare arrangement also acts as an economic engine for our clinic and our communities, allowing us to invest care management staffing dollars to create community jobs and reinvest shared savings into enhanced clinical programming—making Alivio, and our communities, stronger. In practice, this includes investments in initiatives like our diabetic retinopathy screening program where non-mydratiatic retinal cameras allow us to perform diabetic retinopathy screenings in the primary care setting, and connecting digitally through eConsult system with CCH to have the images read, and coordinate an in-person visit at CCH only if necessary. Through this program, we've dramatically increased our quality rating for diabetic care, it makes a world of difference to patients to know that Alivio can be a one-stop shop for care while also connecting individuals back to

I would like to share a story about one of our MHN ACO CountyCare patients at Alivio who is improving his health thanks to the care management resources available through CountyCare and MHN ACO:

We encountered our patient, 56 year old "Jose" who was identified through the online ADT portal as a patient who was hospitalized at CCH John Stroger, Jr. Hospital back in late August 2020.

Our Care Managers began reaching out to the patient during his hospitalization to begin Transitions of Care services. From their outreach the care management team learned that the patient was hospitalized due to badly breaking his leg while walking on the sidewalk. He was hospitalized at Stroger for 4 days.

The Care Manager coordinated services during his hospitalization to re-connect with his primary care physician as well as with specialty care at Stroger post discharge. Once discharged, the Care Manager was able to schedule not only an appointment with primary care, but also with specialty care at Cook County. Tracking in the Care Management technology tool, the CM also updated discharge medications and completed weekly outreaches with the patient to assist with any additional needs.

We were able to provide continual transitions of care services during and post the patient's hospitalization, coordinated services with appropriate health care providers, assisted with reducing any possible readmission or ER utilization, and provided continual support throughout his health care recovery.

In closing, thank you to the CCH Board for supporting CountyCare and MHN ACO, these programs have changed the way we are able to connect with and serve our patients—with live-changing results.

Sincerely,

Jennifer Rojas, LCSW

Lead Care Manager

Alivio Medical Center

**Q3**

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#76

COMPLETE

**Collector:** Web Link 1 (Web Link)  
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**Last Modified:** Thursday, October 29, 2020 8:54:49 AM  
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**IP Address:** 108.93.32.164

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Page 1

**Q1**

Please provide some basic information

Witness Name:	Larry James
Organization (if any):	Vision of Restoration
City/Town:	Maywood
State:	IL
ZIP:	60153

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## Q2

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

Thank you for the opportunity to address the Cook County Board of Commissioners. My name is Larry James, I am the Executive Director of Vision of Restoration in Maywood IL. We provide job training, employment, youth services, and supportive service programs to families in the Western Suburbs and westside of Chicago.

The impact of COVID-19 has hit our communities hard. Unfortunately struggling and having limited resources is not new to many of our families. Maywood and surrounding communities have been disproportionately impacted by almost every national disaster or Great Depression. We have never received equitable resources for health, education, work opportunities, or economic development. Our justice system disproportionately targets men of color and is the catalyst for the demise of the Black family.

Black and Brown communities are nonetheless resilient. However, we do need support and we need leadership in government who will stand up and speak out and right the historical wrongs that are the foundation of our society. The Cook County Justice Advisory Council has provided much needed grants to our agency that have allowed us to provide workforce programs, mental health and youth violence prevention services. Under President Preckwinkle leadership the county continues to invest in communities to address the needs of returning residents , justice involved youth, and those less fortunate.

The President's proposed FY21 Budget and specifically it's Equity Fund is exactly what is needed at this time. A time when COVID 19 has increased unemployment to record numbers. A time where we are facing the truths about racism and systemic racist policies that have created huge wealth gaps, health gaps, and robbed Black and Brown families of opportunities and resources afforded their counterparts for decades. The Equity Fund will prioritize community need, allow for resources to address violence, housing, health equity and bring job programs to under resourced communities.

I hope that this budget will pass and that the Cook County Board of Commissioners will stand on the right side of history at a time we are all being tested. It is imperative that the County continues to fund services that reduce recidivism, promote restorative justice and address the inequities in our communities.

Thank you!

## Q3

Acknowledgement of submitting written testimony only

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#77

COMPLETE

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**Last Modified:** Thursday, October 29, 2020 9:31:37 AM  
**Time Spent:** 00:02:55  
**IP Address:** 162.217.186.240

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Page 1

**Q1**

Please provide some basic information

Witness Name:	<b>Dr. Claudia Fegan</b>
Organization (if any):	<b>Woodlawn Clinc</b>
City/Town:	<b>Chicago</b>
State:	<b>IL</b>

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**Q2**

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyil.gov](mailto:cookcounty.board@cookcountyil.gov)

Submitted written testimony through Caryn Stancik

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**Q3**

Acknowledgement of submitting written testimony only

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Good evening,

I am Dr. Claudia Fegan. As the Chief Medical Officer for Cook County Health, it is my responsibility to make sure that we are providing the highest quality of care possible and to allocate resources based on the needs of the communities and patients we serve.

Many of you will recall that the closure of the general pediatric inpatient unit has been something we have been contemplating for the past five years. The reasons have not changed and dozens of pediatric inpatient beds have been eliminated in the state since that time. This is a national trend that results from the medical community's ability to treat common pediatric diseases that once led to hospitalizations like asthma and diarrhea in an outpatient setting.

This is good news and should be celebrated and frankly we are behind the trend. In just the past several years, we have seen at least 8 pediatric units close in Illinois while pediatric specialty hospitals have expanded.

Most pediatric hospitalizations stem from complex illnesses like cancer and are best treated in highly specialized children's hospitals. Things like pediatric cancer require a team of highly specialized physicians. And each pediatric cancer is different requiring a different set of specialists. At Cook County Health, we diagnosis less than 10 pediatric cases each year. It is simply unrealistic and financially irresponsible to have the level of specialists on staff to treat a very small number of cases.

As you know the more you treat, the better you become at treating. When a family member becomes ill with a complex disease, don't we seek out the physician with the most experience? With an average daily census of less than 2 for the past year, there both isn't the need nor the experience. This is the right decision for us at this time but it does not impact our pediatric trauma status, our pediatric intensive care unit or our neonatal intensive care unit. We are expanding our outpatient pediatric services across the system and remain committed to our youngest patients and their families. Rather the right decision at this time is to refer the very few patients we do have to other facilities that have more experience. We will revisit this decision next year.

I also want to tell you that as a physician who sees patients at our Woodlawn clinic that my patients will receive an enhanced level of care at Sengstacke where they will have access to all the laboratory, diagnostic and specialty services on the Provident campus. This move, along with the consolidation of Near South into Sengstacke is something that was planned to occur once the new Provident is constructed. We are simply doing it sooner and we are certain it will improve the patient experience.

I appreciate that change is difficult but the changes we are making are happening across the healthcare industry. We are continuing to provide the care that the community needs and these changes allow us to do it in a more fiscally and operationally efficient manner.

Thank you.

#78

COMPLETE

**Collector:** Web Link 1 (Web Link)  
**Started:** Thursday, October 29, 2020 9:35:22 AM  
**Last Modified:** Thursday, October 29, 2020 9:36:02 AM  
**Time Spent:** 00:00:40  
**IP Address:** 73.22.159.125

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Page 1

**Q1**

Please provide some basic information

Witness Name: **Adamari Diaz**

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**Q2**

Written Statement? You can type or copy/paste any written statement you want included in the meeting record here. If this is not enough space, or you have other attachments for distribution, please email them to [cookcounty.board@cookcountyl.gov](mailto:cookcounty.board@cookcountyl.gov)

Hello, my name is Adamari Diaz, and I am senior at Morton East High School. I started attending the school-based health center last year when my teacher referred me to the social worker there. I have been meeting with the social worker about my depression, and I like going there because it helps me. It also helps other people, like other students that cannot count on their parents to get health care or who may be pregnant. Me and the other students can always count on the school-based health center.

If the Cook County Health and Hospital staff were no longer there, things would get worse for me and other students because there would be no place to go for help. I'm really not sure what people would do. It would also be a huge loss because the people in the clinic are very positive, polite, and work well with the students. I ask that Cook County Health and Hospital system keeps providing services at the clinic.

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**Q3**

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