



1 Meetings Act are not practical or prudent because of the current pandemic disaster. Accordingly,  
2 meetings may still be conducted by audio or video conference without the physical presence of a  
3 quorum of the Planning and Zoning Commission.  
4

5 The Governor's new law relating to the Open Meetings Act under the emergency law, requires  
6 someone to be physically present at the Village Hall Board Room during the meeting. And every  
7 vote, even the most routine of votes, has to be by roll call rather than in favor of.  
8

9 Chairman Blackwell stated that John McDonnell, the Village's Building Commissioner, is  
10 physically present in the Board Room at Village Hall for tonight's meeting. And tonight's  
11 meeting is being recorded verbatim.  
12

13 Chairman Blackwell stated as a housekeeping measure, he would ask that if you are not speaking  
14 to leave your mics on mute for echoes and reverberations, and, of course, taking it off prior to  
15 you talking. We will let you know that you are muted and can't hear you.  
16

17 Mr. McDonnell inquired of Mr. Hoffman whether or not he was recording. Mr. McDonnell  
18 stated sorry, Victor. Chairman Blackwell stated oh, that's fine.  
19

20 **OVERVIEW OF TONIGHT'S MEETING:**  
21

22 Chairman Blackwell stated that tonight's meeting November 10<sup>th</sup>, 2020, is a continuation of the  
23 Public Hearing held on October 20<sup>th</sup>, 2020. A Public Hearing discussion is to consider an  
24 application filed by Recovery & Rehabilitation, LLC, a Delaware limited liability company  
25 authorized to transact business in Illinois as RoseHeart Renewal Center and All Nations  
26 Assembly Church, Inc. The request is for a zoning map amendment from R-1 One Family  
27 Residence to MD-1 Medical District and a Special Use to operate a 120-bed alcoholism and  
28 substance abuse treatment facility in accordance with Section 22-333 of the Zoning Ordinance.  
29 The property is located at the southwest corner of 203<sup>rd</sup> Street and Governors Highway. It is  
30 currently owned and operated by All Nations Assembly Church and has previously been known  
31 as the "Tolentine Center." The property contains approximately 22 acres. The property address is  
32 20300 Governors Highway, PIN #31-14-301-005-0000.  
33

34 **READING AND APPROVAL OF MINUTES FROM JUNE 9<sup>th</sup>, 2020:**  
35

36 Chairman Blackwell stated that he is going to jump back a little bit to the Minutes. So, as you  
37 recall, the Minutes from the meeting of the Planning & Zoning Commission of June 9<sup>th</sup>, 2020,  
38 was outstanding. It has since been presented to us in our packets for review and approval.  
39

40 Chairman Blackwell stated and the Minutes from September 29<sup>th</sup>, 2020, were as well brought to  
41 our attention in this latest packet for our review and approval.  
42

43 Chairman Blackwell stated that he would like to first off, take a look at the June 9<sup>th</sup>, 2020,  
44 Minutes, and will give you a minute or so for the Commissioners to go over it for any changes,  
45 editing, corrections, et cetera. Okay. Are there any changes, or additions, deletions, that the  
46 Commissioners recommend for the Minutes of June 9<sup>th</sup>, 2020? If not, is there a Motion to  
47 Approve the Minutes from June 9<sup>th</sup>, 2020.

1 **Motion by Commissioner Miller, Second by Commissioner Betts to Approve the Minutes**  
2 **from the Planning Commission Meeting held on June 9<sup>th</sup>, 2020, as Presented.**

3  
4 Chairman Blackwell asked Commissioner Jones to do a Roll Call Voice Vote.

5  
6 **Commissioner Jones stated that this is a Roll Call for the Acceptance of the June 9<sup>th</sup>,**  
7 **Minutes:**

8  
9 **Commissioner Betts: Approved.**

10 **Commissioner Bradshaw: Approved.**

11 **Commissioner Miller: Approved.**

12 **Chairman Blackwell: Yes.**

13 **Commissioner Jones: Yes.**

**Motion Carried.**

14  
15 Commissioner Blackwell stated that the Minutes from the June 9<sup>th</sup>, 2020, meeting are hereby  
16 approved.

17  
18 **READING AND APPROVAL OF MINUTES FROM SEPTEMBER 29<sup>th</sup>, 2020:**

19  
20 Chairman Blackwell stated now, if we will turn our attention to the Minutes from September  
21 29<sup>th</sup>, 2020, take a look through those. Is there a Motion to approve those Minutes from  
22 September 29<sup>th</sup>?

23  
24 **Motion by Commissioner Miller, Second by Commissioner Jones to Approve the Minutes**  
25 **from the September 29<sup>th</sup>, 2020, Planning & Zoning Commission Meeting as Presented.**

26  
27 Chairman Blackwell asked Commissioner Jones to do a Roll Call Voice Vote.

28  
29 **Commissioner Jones stated that this is a Motion to Accept the Minutes of September 29<sup>th</sup>.**

30  
31 **Commissioner Betts: Approved.**

32 **Commissioner Bradshaw: Approved.**

33 **Commissioner Miller: Approved.**

34 **Chairman Blackwell: Approved.**

35 **Commissioner Jones: Approved.**

**Motion Carried.**

36  
37 Chairman Blackwell stated that the Minutes from September 29<sup>th</sup>, 2020, are hereby approved.

38  
39 Chairman Blackwell stated that we shall proceed with tonight's course of business. One of the  
40 things that he wanted to bring up was during tonight's meeting, we will hear the Petitioner give a  
41 synopsis of the Petition and the application. The Petitioners have talked about their presentation,  
42 and have gone to quite a herculean effort to present their Petition and answer many questions.  
43 We do thank them for being able to respond to the questions, and giving their presentation. We  
44 might get back to some synopsis in the event that the Petitioner feels they need to do that.

45  
46 Chairman Blackwell stated that during the course of the last meetings, we've asked the public,  
47 and encouraged the public to submit questions or comments via the chat feature and through the

1 Zoom link. The Village has received questions via email and through the Zoom chat during the  
2 September and the October meetings actually. All questions received will be read into the record,  
3 and questions will be answered by the Petitioner.  
4

5 Chairman Blackwell stated that we are making a specific effort to address all of the questions  
6 that have been presented to the Village regarding this matter. Particularly, in view of the  
7 COVID-19 Pandemic, and what could be considered or viewed as the public's limitation on  
8 coming out to an in-person, open meeting at Village Hall to address these issues. It is incumbent  
9 upon this Commission and the Village Administrators to make sure, and certain, that all of the  
10 public's questions have, at minimum, been read into the record and duly responded to by the  
11 Petitioner based on the information at hand.  
12

13 Chairman Blackwell stated now, many questions were read at the previous meeting, additional  
14 questions have come in. We are looking to avoid repeating the same questions over with the  
15 same answers. In some instances, we've had some duplicate types of questions that have  
16 emanated from the public's inquiry regarding this Petition and this project and we will look to  
17 avoid those. On the other hand, he thinks it is important that if there is any distinction in the  
18 question that a second resident would submit with any variation from the previous question, we  
19 would look to read that into the record, giving the public and the residents the full opportunity to  
20 weigh-in and have their questions presented and addressed by the Petitioner.  
21

22 Chairman Blackwell stated so with that said, we will proceed. He asked Commissioner Betts to  
23 read in the questions. We are going through as we see fit, to screen those questions to limit the  
24 repeated questions. However, prior to her starting that with the sequence of questions that we  
25 recently received, from the previous meeting he had two letters that the Village received. He  
26 thinks it is incumbent upon him to read those letters into the record. These are from residents in  
27 the Village. And we stopped there. He will read these two letters into the record. He is not  
28 expecting any specific comments or responses from the Petitioner, because he doesn't think that  
29 they sufficiently pose a question for them to answer. He will start with the first letter.  
30

31 Chairman Blackwell stated that he will also ask, that if you are not speaking please mute your  
32 background to prevent echo, and reverberation, and that sort of thing. This letter is dated October  
33 19<sup>th</sup>, 2020. It's from Mr. Edward Pryor. Chairman Blackwell stated that he hears some classical  
34 music in the background.  
35

36 Commissioner Miller stated here, that's him. He didn't know that you could hear it. Chairman  
37 Blackwell stated as much as he loves classical music, he can wait until after the meeting to turn  
38 on his Bach and Beethoven. He does love his classical music. It doesn't sound bad. It's not as  
39 bad as the dogs barking in the background, he hears that all the time. He hears kids and babies  
40 screaming over here too. Commissioner Miller stated that he is all clear now. Chairman  
41 Blackwell stated you are good. Okay, go on mute until you get ready to speak. Just put your  
42 speaker on mute until you get ready to talk.  
43

44 Chairman Blackwell stated Mr. Pryor wrote: "To Whom It May Concern:

45  
46 My name is Edward Pryor III.  
47

1 I've lived in the Village for 20 years. My neighbors and I are very concerned regarding the  
2 Substance Abuse/Rehab Center coming to Olympia Fields. We truly do not want this in our  
3 neighborhood. It will raise crime (theft, robberies, etc.) and Lord knows what kind of other  
4 things could occur. We have children that play in the backyard right off Governors Highway and  
5 throughout the neighborhood. If you change the Zoning ordinance and they decide they have too  
6 much land - and decide to sell some off, who's to say what would be coming in after that. Mr.  
7 Village president and Village board members - please do not allow this to happen. We do not  
8 want this in our neighborhood. If this happens, I'm sure we are going to lose many good people,  
9 throughout the Village. Just the other night we received the alert that an 89 year old Village  
10 resident was missing. Right away neighbors went outside with flashlights, looking through their  
11 yards & throughout the neighborhood trying to help - luckily, they found him, and he was able to  
12 go back to his home and family. Safe and unharmed. What if this place was there and someone  
13 was going there ... deciding to drink or take some drugs for their last hurrah before they  
14 admitted themselves and going down the highway - they could have hit this person, or some  
15 other innocent bystander.

16 Please do not bring this into our Village.  
17 Thank you. Sincerely, Edward Pryor III.”

18  
19 Chairman Blackwell stated that the next letter is from Mr. James Swartwout of Olympia Fields.

20  
21 He addressed this to our Building Commissioner, John McDonnell. “Dear Mr. McDonnell:

22  
23 I received a certified letter on Saturday afternoon, October 17<sup>th</sup>, regarding a Tuesday, October  
24 20<sup>th</sup>, public hearing to rezone property for the purpose of establishing a drug treatment center in  
25 Olympia Fields. Given the notice, I respectfully request that this letter be shared with the Village  
26 leadership and be read into the record at the October 20<sup>th</sup>, hearing.

27  
28 My name is James Swartwout. I have been a resident of Olympia Fields for more than 32-years. I  
29 am recently retired. I live in the Arcadia area. I am blessed to have great neighbors whom many  
30 of you know, including Lola Proulx who lives next to me and Eddie and Dana Pryor who live  
31 across the street. My backyard is across Governors Highway from the proposed drug facility.

32  
33 My reason for writing is to voice my strong opposition to the proposed substance abuse facility  
34 at the corner of 203<sup>rd</sup> Street and Governors Highway.

35  
36 Rutgers University's Center of Alcohol Studies published a study on crime associated with drug  
37 treatment facilities in the 2016 Journal of Studies on Alcohol and Drugs. The study statistically  
38 demonstrates that increased VIOLENT CRIME is associated with drug treatment centers and  
39 concludes that the crime is similar to the crime around a liquor store. Violent crime includes  
40 robbery, aggravated assault, rape, manslaughter and homicide. The study also found “there was a  
41 high likelihood of violence occurring closer to each venue, and violence decreased as you moved  
42 away from the venue.” He cited Page 15 of the Study. In short, my backyard would more likely  
43 have a violent crime event than a backyard further away. Since violent crime in the Village will  
44 increase by allowing this drug facility, let me focus on some of the consequences.

45  
46 With the introduction of a drug facility, those residents in the Arcadia area will likely become  
47 less friendly and more cautious around each other. I moved into the Village because of its family

1 values. Thirty years ago, residents in the Arcadia area would walk up and down the street after  
2 dinner and chat with one another. While this no longer occurs, the Village is still known as a  
3 family residence and neighbors still walk up and down the street throughout the day. In other  
4 words, Olympia Fields is known for its nice houses, friendly families, and safety. It is not known  
5 for violent crimes. It is not known for heavy industry. It is affectionately known as a bedroom  
6 community. Even the property in question for the drug facility is currently zoned as R-1, One  
7 Family Residence. All of this changes if the property is rezoned to allow a drug facility. Being  
8 family friendly is part of the character of Olympia Fields. Having a drug facility is not part of the  
9 longstanding implicit contract between the Village and its residents.

10

11 I also have grave concerns about the safety of all the children in the Village. We have two parks  
12 close to the property in question. Lots of children play at these facilities. Would you let your  
13 child play at the park if you thought there could be a drug abuser in the area? I would not.

14

15 What about general safety around the Village? It seems like our police force spends a significant  
16 amount of resources at the Walmart Store. Would we have the police resources for the Walmart  
17 on one side of town and a drug facility on the other side of town?

18

19 So what is likely to happen to me if the drug facility is allowed? First, I will likely stop  
20 exercising outside. I exercise by running on the Governors Highway sidewalk. I run from my  
21 home up to Bizios and back. If a drug facility is allowed, I will likely stop running as I would  
22 feel unsafe.

23

24 You might respond by saying that my route is the safest place to run since the police station is  
25 right there. Wrong. Police only get involved during or after a crime is committed. I would likely  
26 be assaulted before the police could intervene.

27

28 The second consequence involves my wife and daughter who live with me. For safety sake, I  
29 would likely ask them to take the “conceal and carry” class so they could carry weapons with  
30 them. I might do the same.

31

32 Third, I would be less likely to assist other Village residents. For instance, early in the morning  
33 this past Saturday, the Police Chief called Village residents to announce a Code Red emergency.  
34 Village residents were asked to immediately check their property for a missing Mr. Stafford. In  
35 the early morning darkness with flashlight in hand, I did so without hesitation. Do you think I  
36 would have done so if I were fearful for having a drug addict in my backyard? Of course not.

37

38 I am also concerned about property values. While my property value might take a larger hit than  
39 property further away, reduced property values would likely pervade the entire Village once the  
40 crime statistics started to be reported.

41

42 I conclude that changing the zoning to allow a drug treatment facility will have a large negative  
43 effect on the Village, its residents, and the surrounding community. I urge you to disapprove the  
44 zoning request. Sincerely, James Swartwout.”

45

46 Chairman Blackwell stated so, with those two letters read into the record, Commissioner Betts he  
47 will turn to you to start on those questions that we received on Page 1.

1 Commissioner Betts stated that she will pick out the questions that have not been answered  
2 before in prior meetings. The first question is: “This property also is near a playground/splash  
3 pad. What happens if one of these patient’s wander off and our children are playing?”  
4

5 Ms. Kelly Mottl stated well, we don’t anticipate patients “wandering off” from the facility. And  
6 we have made it clear that patients will be accompanied by staff members anytime that they are  
7 outside the facility. They would be outside at limited times. They have a structured schedule. We  
8 don’t anticipate anybody wandering off. So, we don’t think that this is going to be an issue.  
9

10 Commissioner Betts stated the second question is: “The workers will be background checked,  
11 but will the patients have criminal records?”  
12

13 Ms. Mottl inquired a criminal record check, or criminal records? Those are very different things.  
14

15 Commissioner Betts stated that she thinks this refers to criminal record checks, or will you also  
16 accept patients with criminal records?  
17

18 Ms. Mottl stated well, there will be background checks on the patients and Mr. Vrba addressed  
19 this at length in previous hearings. So, there will be checks according to the Illinois Code on the  
20 patients, yes. She can’t speak to whether or not patients will or will not have criminal records.  
21

22 Commissioner Betts stated that the next question comes from Steve and Kristal Stevenson. “Just  
23 in March 2019, 16 women were sexually abused by a counselor at a women’s rehab center in  
24 Timberline Knolls in Lemont. How will they work to prevent the rise in crime that is highly  
25 associated with facilities and type of patients they will be serving? Referencing article in the  
26 Chicago Tribune found online March 7<sup>th</sup>, 2019.” So, the question is about sexual abuse at a  
27 different facility, and how will you prevent this type of incident to occur should this move  
28 forward?  
29

30 Mr. Andrew Kolb stated “Hi, Andrew Kolb here.” He can take that question. So, the Illinois  
31 Administrative Code Section 217(f) provides that: The department will investigate the  
32 background of staff members if it deems necessary, and vet the staff members in terms of  
33 competence for emotional, psychological, and physical impairment. Determine the  
34 appropriateness of staff members to work at the facility. Can you prevent every crime in  
35 advance? He thinks that is impossible. But he thinks that we have a screening process that we’re  
36 going to put in place for patients to make sure that they’re not going to be unsafe to themselves  
37 or others. And a screening process with respect to staff members, to confirm that we provided the  
38 department with evidence regarding the physical, psychological, and professional capability and  
39 integrity of each staff member and management, so that they can provide the services with  
40 reasonable judgment, skill, and safety. That’s what the code requires. Timberline apparently  
41 didn’t do a very good job of adhering to that code, and we can’t speak on the specifics of that  
42 specific facility or who was involved. We are going to do what the law requires in terms of  
43 interviews and in terms of screening both patients and the staff, and can you prevent things from  
44 happening every time? He thinks it would be impossible or impractical to think that in any  
45 business you can predict pre-crime. From our standpoint, we are going to adhere to the code and  
46 do what we can as required under Section 217 and other Code Sections.  
47

1 Commissioner Betts stated that the next question is: “Will sex offenders be allowed as patients?”  
2  
3 Mr. Kolb stated we haven’t really developed the exact criteria. We are going to have it  
4 developed. We know that in terms of testing, -- To Kelly’s point, are we going to look at the  
5 criminal backgrounds. We certainly don’t want to discriminate against somebody who has done  
6 wrong in their past and who is in need of care. A lot would have to go with the nature of the  
7 crime. Whether the record is a misdemeanor for speeding, or whether it’s something more  
8 severe. But no, if you are a Registered Sex Offender, we have no interest in having you in the  
9 facility. The State of Illinois keeps registries that are quite available for that.  
10  
11 Mr. Kolb stated of course, we have to be careful. We can’t discriminate against any subset of  
12 class or persons at the same time. We’ve got to adopt policies that are nondiscriminatory, but at  
13 the same time adhere to safety. So, a blanket statement is difficult for us to say. But we’re going  
14 to bring it to the level of nondiscrimination, but protect the safety as best we can.  
15  
16 Commissioner Betts stated moving on: “If staffing ratio will be 1 to 25, how will you have the  
17 ability to accompany patients outside on the trails?”  
18  
19 Ms. Mottl stated well, patients will be allowed outside activity and recreational activity in  
20 accordance with the Illinois Code. They are allowed recreational activities. If, within the  
21 treatment plan, they’re identified as needed, and if they are conducted under the supervision of  
22 staff. The code states that: “The recreational activities shall not average more than one-fourth of  
23 the treatment services received for any patient in any level of care.” So, we will be able to do that  
24 math with the number of staff and the amount of time that the patients are allowed recreational  
25 activities, keeping in mind that these patients are there for treatment that occurs indoors. There’s  
26 not going to be a lot of wandering around outside even supervised. She doesn’t think that will be  
27 difficult to meet that ratio to allow them outdoor activities but still maintain the ratio of staff to  
28 patients.  
29  
30 Mr. Kolb stated that he will just add real quick, back to the previous question, Section 313 of the  
31 Illinois Administrative Code provides that: “Professional staff be 18 years of age, and cannot  
32 have been convicted of a felony, or had subsequent incarceration for at least two years prior to  
33 the date of employment.” So, there is at least some basic requirements that are codified regarding  
34 professional requirements and procedures for staff. That’s in the code.  
35  
36 Commissioner Betts stated that she is moving on to some of the questions that are more under  
37 the heading of “Medical.” “Are facilities accredited by Joint Commission?”  
38  
39 Ms. Mottl stated the answer is yes. Commissioner Betts stated that the next question, again  
40 coming from Steve and Kristal Stevenson is: “Will their facility cater to more youth or adults? Is  
41 the youth facility relevant?” Commissioner Betts stated that she is not sure what that means.  
42  
43 Ms. Mottl stated typically, it would be more adults. We have an age limit. Andrew, is it 16 for  
44 Eating Disorders? Are we at 16? Mr. Kolb stated that he believes that’s correct. Ms. Mottl stated  
45 typically, these would be catered more towards adults.  
46



1 Commissioner Betts stated that the next question comes from Misty Andrews. “Will this facility  
2 have out-patient services and will it provide drugs such as Methadone?”

3  
4 Ms. Mottl stated no, it will not. Mr. Kolb stated well, we are going to have some outpatient  
5 services in terms of like AA Meetings. We might have some speakers come in to speak, and  
6 people could attend those on an outpatient basis. But no, we are not going to provide outpatient  
7 medical care if that’s what the question means. We might have some limited services that are  
8 there. In fact, we talked a little bit at the last hearing about youth outreach programs. If you look  
9 at the Site Plan, there’s clearly some space for us to have some people come and speak,  
10 hopefully, once COVID is all over. Those outreach programs can be of tremendous value to the  
11 community. Yeah, limited outreach, but not medical care on an outpatient basis, nor will we  
12 administer Methadone. We are not treating outpatient care in that regard.

13  
14 Ms. Mottl stated that we want to make sure that we are making that really clear, because we have  
15 gone over this a couple of times trying to differentiate the difference between outpatient care and  
16 outpatient medical treatment. So, she thinks that is an important differentiation that needs to be  
17 understood.

18  
19 Chairman Blackwell stated Andrew and Kelly, he just has a question about the Methadone,  
20 therapeutic Methadone. His understanding from your presentation is that you intend to have  
21 opioid addicted patients. Is that correct? Amongst other types of patients. Is that correct?

22  
23 Mr. Kolb stated right. It would fall under the umbrella of anyone suffering from alcoholism or  
24 substance abuse. Certainly, opioid is the big epidemic we are facing now.

25  
26 Chairman Blackwell stated that he recalls in your initial presentation, probably more by Mr.  
27 Vrba, as he emphasized the outstanding number of opioid addicted individuals in America and  
28 how it has exponentially grown. So, you would be, in fact, treating some patients at least, with  
29 opioid addiction. Right?

30  
31 Mr. Kolb stated that’s correct. Chairman Blackwell stated so, in view of that, and in view of the  
32 fact that his understanding at least, limited not being a doctor or a medical person per se, is that  
33 there is usually a weaning process that takes place when you bring a fully addicted opioid patient  
34 into a residential facility. And, of course, it would depend on what stage you would bring that  
35 person to your facility. But at one point there is a chemical dependence that is inherent in opioid  
36 addiction. And he guesses his long way of saying this is, how are you intending to wean opioid  
37 addicted individuals from that particular drug? And what drugs are in place that you intend to  
38 use, and your prescription drugs to manage that if you’re not using Methadone?

39  
40 Mr. Kolb stated that he can’t commit to not using Methadone. He can commit to not using  
41 Methadone on an outpatient basis. There is a big difference, you know. A lot of the resistance to  
42 substance abuse treatment facilities comes when people come to a facility or a clinic, they get  
43 their Methadone and they leave. And they are sort of in the general vicinity of the area. You  
44 know, we’re a residential Alcoholism and Substance Abuse Treatment Facility. You basically  
45 come and you stay, and you receive treatment. And when you’re medically cleared and  
46 discharged, you leave. If you want to leave early you can on a voluntary basis, if you want to  
47 check out. We will have an exit plan put in place so that you can be brought where the parties

1 have predesignated. He stated John is not with us tonight, unfortunately. He's traveling. He  
2 would be probably best to answer that question. He doesn't know the specific treatment  
3 protocols for which drugs. He thinks it's premature in zoning to get into that. We certainly will  
4 have to show that we have all of the treatment options available when we apply for licensure. But  
5 yeah, he doesn't want to commit to no Methadone. He thinks it might be available internally, but  
6 he is not sure. We can get back to you on that. That's really in the weeds as far as the facility  
7 goes on zoning analysis.

8  
9 Ms. Mottl stated that's something that would be handled under the Medically Managed  
10 Detoxification, in the Detoxification Wing, if someone is with opioid addiction. That, of course,  
11 is covered by the code as well with strict requirements. She stated that John can speak to that  
12 later, but certainly, if there are medications that are being used for patients during the  
13 detoxification process, it would happen in the Detoxification Wing.

14  
15 She stated that it is not a situation where people are coming to get the Methadone and then  
16 turning around and going home. And that's something that we need to make very clear.

17  
18 Chairman Blackwell stated go ahead, Commissioner Betts. You may proceed. Commissioner  
19 Betts stated sure. The next question again, coming from Mrs. Andrews is: "Will this be funded  
20 by the State of Illinois by any grants or loans of the Federal Government? And, if so will this  
21 facility have to have State or Federal Asset Managers providing oversight? Or is this totally  
22 private funds?"

23  
24 Mr. Kolb stated that he can take that. Yeah, our business model is private pay. And private pay  
25 has two components: Those covered by health insurance in a group health insurance plan that  
26 would provide a fixed amount of reimbursement pursuant to a Group Health Agreement, or those  
27 that just want to pay cash. Maybe don't have insurance, or maybe the insurance doesn't cover  
28 this facility because it is out of network, or maybe there's no participation agreement where the  
29 facility has entered their particular Group Health Plan, but they still like the facility.

30  
31 He stated as far as accepting State Aid, or Medicaid, or anything like that, that's not our business  
32 model, given the costs and expense to remodel this facility and build it. Ideally, from a business  
33 perspective, we are looking for 120 private pay, patients. That would be best for operations. That  
34 being said, we can't discriminate. And there are often times where people lose their insurance  
35 during treatment, and there are all sorts of involuntary discharge law on that. So, we have to be  
36 careful we don't discriminate against any particular subset of patients. But as far as grants go, he  
37 thinks your question was with respect to State or Federal Grants. If they are out there, we are  
38 going to be applying for them. We have not investigated what Grants are available to us.

39  
40 Mr. Kolb stated that what we are trying to do here is rezone the property to the Medical District,  
41 and then apply for a Special Use for a Drug and Alcohol Treatment Facility. He thinks from that  
42 standpoint, we do have some questions we would like to get to. We would like to clarify, at least,  
43 sometime during this proceeding what it means, the affiliation requirement. He is not sure if we  
44 can spend some time on that, or if that's something that you guys want to get into tonight. But  
45 we would like to drill down on that so we can fully understand what it means to be associated  
46 primarily with the primary medical facility. And does that association require just, you know,  
47 something as simple as a carriage agreement with respect to ambulance care, or does

1 “association” mean that we’ve got to enter into some sort of, you know, without violating Stark  
2 Laws, Joint Venture Agreement, or actually become a subsidiary, or wholly owned subsidiary of  
3 the primary medical facility? We want to know who the primary medical facility is too? Is it  
4 limited to Franciscan Hospital, or is any medical facility that provides comprehensive care a  
5 primary? Can it be another detox facility, or another Alcoholism and Substance Abuse Treatment  
6 Facility? Can Timberline Knolls be a primary medical facility?  
7

8 Mr. Kolb stated that we’d like to know what Section 22.333 means of your code. We brought it  
9 up early in the process. You guys, he doesn’t know if you have some time to be able to clarify  
10 that for us. But since we’re asking for the Special Use, we would like to just go on record having  
11 asked for that requirement to be explained again.  
12

13 Chairman Blackwell inquired what Section was that? You said 22 -- Mr. Kolb stated .333 of your  
14 code. Yeah, we’re applying for a Special Use. The code says, “Detoxification Centers and  
15 Substance Abuse Centers.” And your code uses the term, “Associated primarily with the primary  
16 medical facility.” Breaking those words down, what does it mean to “associate?” What does it  
17 mean to “associate primarily?” And what is a “primary medical facility?” Since this is a  
18 requirement that’s on us, we’re all a bit in the dark as to what we need to do, and the scope, and  
19 with whom we need to do it.  
20

21 Chairman Blackwell stated that’s a good point. That’s a good point, Andrew. He stated rather  
22 than him trying to take a stab at answering that, he thinks it is important for us to talk to our  
23 attorney and get a clear interpretation. We also have Teska Associates through Mike Hoffman  
24 who can give us a better understanding of that, and then we can get back with you. Chairman  
25 Blackwell stated that he thinks what you are saying, it sounds a little bit ambiguous and you kind  
26 of want to narrow it down and see exactly what interpretations have come out of that. That’s a  
27 good point. He made a note of that. We would look to give you a little bit better clarification on  
28 that as well too. That’s an excellent point. Commissioner Betts.  
29

30 Commissioner Betts stated sure, she will continue with the questions that were submitted. This  
31 one comes from Miss Deborah Lacy-Lane. “Will the center be able to change from a private pay  
32 and private insurance to Medicaid?”  
33

34 Mr. Kolb stated well, sure. Ms. Mottl stated that she thinks that Andrew just covered that. That  
35 the primary business model is to take private pay, but we certainly can’t sit here and tell you that  
36 we’re going to rule out all options.  
37

38 Commissioner Betts stated that she thinks the other one has been already answered. She is sorry.  
39 She is just reading through the questions again, and several of them have already answers to  
40 them. A question here is from Miss Kimberly Jackson. “What other Villages did they attempt to  
41 set up in?” Meaning, what other Villages have you petitioned for this, or are there other Villages  
42 that you’re working with?”  
43

44 Ms. Mottl stated no. There’s no other Villages that we’re working with. She thinks that we  
45 described in the first Public Hearing that this is primarily related to the building and the  
46 premises. That it is perfectly suited for this use, and that’s really what sort of drives this. The

1 building, the location, all of it are perfect. So, we don't have other applications in other Villages  
2 at this moment, and we have not proposed this use in other Villages. The premise is here.  
3  
4 Commissioner Betts stated the next question is around the same thing. "Why this suburb? Why  
5 not Barrington, or Wilmette? Why not Park Ridge? Why not Lincoln Park? Why not Naperville?  
6 Not Lincoln Park because they would not have it." Commissioner Betts stated that she does not  
7 know about that. She wants to say for the record, she thinks Lincoln Park actually has a Hazelton  
8 Facility right there on North Dearborn in the Gold Coast. So, that one she does know. She  
9 doesn't know about the other suburbs. She knows that there are several facilities in several  
10 suburbs such as Libertyville, Crystal Lake, and so on.  
11  
12 Commissioner Betts stated that she is not sure where this question is going. "Do any of the  
13 members of the applicant's team live in Illinois?"  
14  
15 Ms. Mottl stated we all live in Illinois. Well, I actually don't live in Illinois. I work in Illinois.  
16 My business is located in Illinois, but I'm just over the border in Missouri, full disclosure.  
17  
18 Commissioner Betts stated again, similar question. "How many other suburbs have you  
19 presented to and what was their response?"  
20  
21 Ms. Mottl stated no other suburbs. Commissioner Betts stated "How many of these types of  
22 facilities are in the Chicago suburbs, and where are they?" Commissioner Betts stated that she  
23 doesn't know. She knows that there are several in the Chicagoland area. She doesn't know of the  
24 same size or kind of thing. Commissioner Betts stated that she is sure that you have done a  
25 market scan on this one so you can probably answer that better than she can.  
26  
27 Ms. Mottl stated we have. She thinks we gave a list of the local facilities at the last Hearing. She  
28 inquired of Andrew if he has that list. Mr. Kolb stated right. He is looking for it now. We did  
29 answer that question. We did a study. We can table that one and come back to it if you want. He  
30 is going to try to find that list.  
31  
32 Commissioner Betts stated that she thinks that also a lot of these questions go to your Market  
33 Analysis on property values. She knows there is one in Naperville. Linden Oaks, is an outpatient  
34 center in Naperville. Silver Oaks is in New Lenox. That's an inpatient. Rosecrance is in  
35 Frankfort, which is around here. It's an outpatient. Of course, she already mentioned Hazelton in  
36 Lincoln Park. There is Serenity House with several locations in Addison and Libertyville. She  
37 doesn't know if you looked at them for comparison. And then, of course, Timberline Knolls was  
38 mentioned earlier already.  
39  
40 Commissioner Jones inquired what was the question. Commissioner Betts stated well, the  
41 question was around how many other facilities. How many other suburbs have similar facilities,  
42 and where are they? That is why she was reading off the list here where the facilities are, similar  
43 facilities and where they are.  
44  
45 Commissioner Betts stated question from Mrs. Doris Davis. "How is it legal in front of a high  
46 school?"  
47

1 Mr. Kolb inquired would you like us to answer that? Commissioner Betts stated yeah, that was a  
2 question that was asked. "How is it legal in front of a high school?"

3  
4 Mr. Kolb stated right. The long-term Comprehensive Plan of the Village has this property  
5 designated as "Medical." This is a Special Use that's authorized under your code in the Medical  
6 District, a Special or a Conditional Use. He stated when you apply for a Special or a Conditional  
7 Use, it's a use that the Village has determined is appropriate subject to what reasonable  
8 conditions the Village would like to impose. So, that's kind of a legal question. The Village  
9 could have its attorney respond to that.

10  
11 Mr. Kolb stated but from our standpoint, once the property is rezoned to Medical, we are on the  
12 record, -- The Village is on the record as saying that that's an appropriate use for the property,  
13 then a Special Use is authorized. It's enumerated in your code as authorized, subject only to the  
14 requirement that it be the requirement that it be subject to conditions as may be recommended by  
15 this Commission. So, the Commission has the ability to impose conditions on the use. And, it is  
16 obviously subject to this codified condition that we affiliate with the underlying medical facility.  
17 The exact words were: "We must associate primarily with the primary medical facility."  
18 Assuming we adhere to that requirement, and adhere to other requirements, and assuming we can  
19 put forth evidence to satisfy the elements of the Special Use, then the Special Use could be  
20 granted subject to conditions that the Commission would determine is appropriate. And, you  
21 know, Mr. Blackwell would have to determine with the other Commissioners what conditions  
22 he'd recommend to the Village. And then the Village Board would either adopt those conditions  
23 as part of their approval, or maybe they would deny the project. Maybe they would adopt it with  
24 additional conditions and not follow the recommendations exactly. But to answer the question,  
25 there is a detailed process that's in your code that makes this a possibility.

26  
27 Commissioner Betts stated that the next question goes to marketing of the facility and the  
28 services. "How will it be marketed? What kind of reach? And will it be marketed within the  
29 community?"

30  
31 Mr. Kolb stated yeah, there will be a large marketing effort within the community and outside  
32 the community within our market territory.

33  
34 Commissioner Betts inquired what is your market territory? She thinks that is where this  
35 question is really going to.

36  
37 Mr. Kolb stated yeah, he thinks Kelly, we thought maybe it was an hour or two. We are going to  
38 have to bring in some marketing specialists to do an analysis of how far people are willing to  
39 drive. He stated from what we can see, there's a push to go more local with care to be able to  
40 visit loved ones in these facilities, in these residential settings, and not have to jump on a plane  
41 and go to Arizona or California, or New Mexico, or wherever you see a lot of the private pay  
42 facilities popping up. If we could build a nice facility and it really could attract patients, he  
43 thinks we could tap anywhere in the Midwest really if it got a Mayo Clinic type seal of approval.  
44 Initially, our market is maybe within an hour or two drive in all directions.

45  
46 Commissioner Betts stated that she thinks another sub-question was: "Will kids be targeted?"

47

1 Ms. Mottl inquired targeted how? Commissioner Betts stated for this service. Ms. Mottl stated  
2 she's not sure. She is still unclear on what that means. Commissioner Betts stated that she thinks  
3 it's in regard to the marketing, about marketing the services. And the question is, she will now  
4 read it verbatim: "Will our kids be targeted since he believes their facility will be positive for our  
5 kids?"

6  
7 Ms. Mottl stated well, the facility won't be treating children. So, she thinks the answer to that  
8 would be "No." She is interpreting that as a marketing question, no.

9  
10 Commissioner Betts stated that she is continuing on to Page 4. Do you want me to continue, Mr.  
11 Blackwell? Chairman Blackwell stated yes, please do.

12  
13 Commissioner Betts stated so, again, lots of them are comments that have already been  
14 previously made. So, if you bear with me, she will look for the questions in here. Comments  
15 about the Strategic Plan of the Economic Development Commission, the strategies for the  
16 Village, and how this is in alignment too. So, this is a question to be answered by the Village.

17  
18 Commissioner Betts stated here is a question from Miss Kimberly Jackson. "What economic  
19 value does this organization bring to the Village? We need sales tax generating businesses." So,  
20 about the economic value that this facility will bring to the Village.

21  
22 Mr. Kolb inquired of Mike if he wanted to take that as far as sales tax revenue, and what kind of  
23 economic value it will generate, Mike MaRous.

24  
25 Mr. MaRous stated good evening. My name is Michael MaRous. I testified at the last Hearing,  
26 President of MaRous & Company. Real estate taxes and sales taxes obviously, are sources of  
27 revenue. Sales tax he thinks will be fairly limited. But this is not a retail location in his opinion.  
28 In fact, if any segment of the market has been negatively affected by the pandemic, e-commerce,  
29 it's retail. And retail he thinks is better suited for your strong retail location such as Route 30.  
30 But to encourage retail in a location that's secondary, when the primary locations are not  
31 functioning would be a negative, and could create vacancy and really be a blight to the  
32 neighborhood. Sales tax in his opinion would be nominal, if any for this site for that type of  
33 development. Real estate taxes, unfortunately, South Cook County and Olympia Fields has a  
34 very high tax rate, has a very high equalization factor. The effective tax rate is almost 13%. The  
35 assessor, Fritz Kaegi, has been incredibly inconsistent with the assessment of property. He stated  
36 what this property will be assessed at is going to be very difficult to ascertain because some of  
37 the items we call the "FF&E," which is "furniture, fixture & equipment," and the operational  
38 costs, part of their whole development costs are not part of the real estate so they wouldn't be  
39 assessed, but as a hypothetical number a \$10,000,000.00 value at the effective rate could be real  
40 estate taxes of about \$1.3 a year with absolutely no burden on the schools.

41  
42 Mr. MaRous stated that other alternatives would be residential development, which appears does  
43 not make economic sense. The cost of the land, and the cost of development, you can't sell a  
44 house that's high enough, and if you didn't you are going to have a significant burden on the  
45 schools. Any of the residential development is probably going to have a negative economic  
46 impact. This type use has a very high positive impact from real estate taxes.

47

1 Commissioner Betts stated moving on to the next question. Again, from Mr. Steve and Kristal  
2 Stevenson. “Olympia Fields and its surrounding suburban partners are predominantly African-  
3 American. What percentage of African-American owned contractors will be used in the building  
4 of their facility?”

5  
6 Ms. Mottl stated that she thinks it is premature to answer that at this juncture. We don’t know.  
7

8 Mr. Kolb stated that we don’t have an objection if that’s a condition, if you’d like us to use  
9 certain contractors. The only contractor we’ve really hired so far is Solstice Design &  
10 Construction which is Bryce Solstice. He is located in the western suburbs of Chicago, to put  
11 together a construction budget. We’ve submitted that construction budget he believes, or at least  
12 referenced it. But we have not bid out GC work, or any of the subcontractors, or any of that stuff.  
13 We’re open to diversity, or community contractors, if that’s something you guys would like to  
14 see.  
15

16 Commissioner Betts stated: “Since this is the first facility for you, do you know the burden on  
17 our public service department? And also, do you have information from other similar facilities?”  
18 So, what would this facility mean as far as a burden to our public service department? And how  
19 does that information compare to other facilities?  
20

21 Mr. Kolb stated right. He stated from an EMS standpoint the ambulance visits are paid for by the  
22 patient. And yeah, he thinks that we have represented we have agreed to guarantee those  
23 payments if, for some reason, our patient couldn’t pay the EMS visit if there is an ambulance.  
24

25 Mr. Kolb stated with respect to police, honestly, we don’t believe our residents in this residential  
26 community will pose any greater likelihood of crime as any other residential community would.  
27 So, we don’t think there will be a disparate impact on a residential alcoholism and substance  
28 abuse treatment facility that does inpatient services only of this nature. We don’t believe that the  
29 evidence -- And Mr. Curtiss’s letter was submitted with our application as an exhibit. We don’t  
30 believe that this will cause heightened costs with respect to police or EMS. So, the EMS is  
31 obviously private paid for and guaranteed by the facility. We just don’t think the incidents of  
32 police will be any higher in this community than any other.  
33

34 Mr. McDonnell stated Mr. Kolb, he knows that you offered in the first meeting to have a plan put  
35 forward or submitted for security at the facility so that it can be reviewed by our police  
36 department. So, they can maybe come up with some questions for the project themselves. Is this  
37 something that your team can work on, or is working on, or has worked on in the past?  
38

39 Mr. Kolb stated well, he thinks it makes most sense to bring the medical director involved into  
40 that process. He will refer you to Section 327 of the code, 2060.327. It says, “A written plan  
41 shall be submitted at the time of application for licensure which specifies the manner in which  
42 emergency patient care is provided, either by the organization, or through a linkage agreement,  
43 or other facility, or both, in the event of unforeseen interruption,” and things like that.  
44

45 Mr. Kolb stated that what we’re trying to do is get zoning approval at this point. We’re trying to  
46 satisfy the elements of the Special Use and demonstrate that the property should be zoned  
47 consistent with your Comp Plan to Medical. We contemplated hiring a security expert and

1 spending the money to develop a specific plan. We haven't even staffed the facility to bring  
2 those involved into that. That's an organic process. If there's something you'd like to see, we can  
3 certainly try to put it together. He thinks it is premature at this point to talk about where are your  
4 motion detectors going to be, and how many staff are you going to have, and where are they  
5 going to be positioned, and what restraining devices are they going to have. He thinks that's a  
6 question that is well upstream of licensure with the State than at this point. Yeah, we can commit  
7 to work with the police department to develop that plan if our zoning is actually granted.

8  
9 Chairman Blackwell stated that he tends to disagree with your analysis on the security issue.  
10 First of all, so far as our Ordinance is concerned for the Standards for the Special Use, if you turn  
11 to Section 22-93 for Planning Commission Standards, one of the first things it talks about is the  
12 public, health, and safety. And your security plan is directly tied into public safety and the health  
13 of our residents. That's in item number one as you can see. He is sure that you've read this quite  
14 extensively, Attorney Kolb. Nevertheless, he thinks it's very pertinent. And you had even said,  
15 or one of your staffers had even said, that they would be willing to give us some sort of security  
16 layout. He stated not that we're asking for how many guards you are going to have at the door, or  
17 how many motion detectors you are going to have. But nevertheless, he thinks that to understand  
18 how you intend to run this facility in terms of the security, when questions have been asked  
19 about what if a person becomes irate and walks out, the alarm goes off or whatever. This is  
20 beyond the police dealing with this and you guys having to call 911. Obviously so, that would be  
21 the correct thing to do. But besides the cost that's involved with potentially dealing with that,  
22 there's another issue as to whether this is going to be a safe environment for not just our  
23 residents, but for your people as well.

24  
25 Chairman Blackwell stated now, we've had other groups come before us with presentations  
26 relative to similar types of businesses with the substance abuse, and care, and so forth, and  
27 they've given detailed explanations and information about security. It sounds to him that you  
28 haven't gone deep enough into that and it's a little bit back and forth. But again, it's highly  
29 relevant to this Plan Commission's understanding and their judgment on whether you have  
30 presented adequate information to support a secure location when you're bringing in 120-people  
31 of a mixed group with certain types of issues on a permanent, live-in basis, he thinks security is  
32 relevant. And we would like to see, at least, an overview of what your expectations, or John's  
33 because you're not the medical, he understands that, would anticipate for security purposes to  
34 make our residents, at least, in the event this goes through and we have some intention on  
35 moving forward with this, we would have some understanding and some security that you have  
36 an adequate system in place to manage the level of security for 120-people in a residence where  
37 they would spend 30 to 60-days, and be subject to walk out in Olympia Fields because that's  
38 where they're living in our community.

39  
40 Chairman Blackwell stated that he would appreciate, at least, a minimal overview of security. He  
41 stated not with specific motion detectors and how many doors you have tacked up the alarm goes  
42 off. But nevertheless, our police department will be interested in that, as well as the residents. So,  
43 it is a part of the zoning process. He stated that he has done this enough years and times to know  
44 that it is always a relevant question for residents' level of security, as it is in our Ordinance. Go  
45 ahead, Commissioner Betts.

46



1 Commissioner Betts stated the next question, again, this is more around the marketing and the  
2 revenue generation. She thinks it is a question to be answered by the Village, but she will read it  
3 into the record. It comes from Misty Andrews. "Will the facility be offered any kind of tax TIFs  
4 or breaks that would affect the real estate tax income to the area? Short-term and long-term?"  
5 She thinks it's a question for somebody in the Village to answer that.

6  
7 Mr. Hoffman stated this is Mike Hoffman, Planner for the Village. The property is not in a Tax  
8 Increment Financing District, so it's not eligible for TIF. He doesn't think the Village has any  
9 intent of creating one for this site. So, that's not an option. He supposes they could seek some  
10 type of a Class 8 or something from Cook County, but he doesn't know that the Village would  
11 necessarily be supportive of that either. But that would be possible.

12  
13 Commissioner Betts stated moving on to the next question from Steve and Kristal Stevenson. "If  
14 you're building a \$15,000,000.00 facility it would make sense that a breakeven analysis would  
15 have been done already, along with the marketing plan. If you knew your target market, services  
16 you'd be focusing on, you should be able to answer this question." So, this speaks to the business  
17 plan, the financial plan, the marketing plan, which she doesn't think we have seen yet.

18  
19 Mr. Kolb stated right, our marketing plan and finance plans are proprietary. We know the  
20 average per diem rate, reimbursement rate that private care pays. You have to really strike up,  
21 you know, insurance agreements with the big four carriers, Cigna, Aetna, Blue Cross/Blue Shield  
22 of Illinois, et cetera, and you'd have to determine what your per diem rate is, not only for just  
23 being in the facility generally seeking addiction treatment, or whether you're in a detoxification,  
24 medically monitored detoxification Level 3, Level 4, you know, all the different group treatment  
25 options. You have to determine what the reimbursement rates are. If you take a detoxification  
26 rate of, you know, \$500.00 or \$600.00, or maybe \$700.00 and multiply that out times 120-beds,  
27 assuming you can cover your marketing costs and fill the facility, there's potentially great  
28 revenue with a facility like this. And we've got internal financials to support it. But he doesn't  
29 think submission of those types of financials now, they're a work in progress and they certainly  
30 aren't something that, you know, they are proprietary.

31  
32 Commissioner Betts stated that this is a question for herself. Given that you will be seeking  
33 financing to upgrade the facility, to build-out the facility from investors as well as then further  
34 on, you know, how to run the facility, you need to have at least -- She understands that your  
35 detailed financial plans are proprietary. But there has to be some assurance to the Village that  
36 you will be able to operate this as a profitable facility as you have indicated given the size of the  
37 facility, so again, she also will be looking for something along those lines. And your investors  
38 will be looking for it too. They are all looking for ROIs or ROEs on this kind of thing. They're  
39 not just going based on what you do in a PowerPoint Presentation. They need to be able to drill  
40 down. And so, while we don't want to be in a position of having to drill down all your financials,  
41 we would need an overview in order to have something that we can base our decisions on that  
42 you are indeed going to be able to run this as a profitable facility as you have indicated. She  
43 stated because right now, there is no indication, at least, from where she is sitting on how you  
44 will make this to be a profitable facility based on how you have described it. So, you may want  
45 to get back to us on that.

46

1 Chairman Blackwell stated that he thinks that's a relevant point, not that we're trying to ascertain  
2 all of the details of your particular financing package. You, at this point, have indicated you  
3 clearly have not put that together because it's probably a little bit premature for you to have done  
4 so. He is quite certain that you and your group have some definite resources that you would  
5 intend to use for your financing. He thinks it is relevant to the extent that, you know, with the  
6 presumption that this is all good and fine, and went through, what is your turnaround time? He  
7 has heard that it would take you within less than two years to put this together. If you don't have  
8 adequate financing, is this something that's going to sit for five years as we wait? He is a little  
9 concerned with that, not so much in terms of where you're getting your money from and that sort  
10 of thing, but there's a piece of property. And that piece of property, if it's conferred upon you to  
11 proceed with what your plans are, there are some reasonable expectations as to when that would  
12 occur. And that is certainly going to be a condition, chief among those conditions would be the  
13 timeframe for you to acquire specific financing to move forward. We haven't heard much, if any,  
14 about how you intend to do that. He agrees with Commissioner Betts that is a concern to that  
15 extent, so far as whether you use Bank of America or Harris Bank, we aren't concerned with  
16 that. We haven't heard a lot about how you intend to finance a structure of this magnitude.  
17 We've heard a lot of numbers thrown at us, \$15,000,000.00. We've heard revenue numbers of  
18 \$584,000.00, et cetera. Most of that money, of course, will be going back to the County, and  
19 quite a bit to the schools. And Mr. MaRous has talked about some of the positive income streams  
20 from that tax base. We haven't heard anything about the upfront part about the acquisition, and  
21 your timeframes for acquisition and financing to move forward, and what your turnaround time  
22 is.

23

24 Chairman Blackwell stated the other concern, and he thinks he recalls that Attorney Kolb, you  
25 and Ms. Mottl have worked together before doing projects. But he is hearing -- He guesses he is  
26 just trying to understand. We were told at the previous meeting, our last meeting, that this was  
27 your first time out. Maybe he is just not understanding who is grouped with whom, so far as  
28 moving forward with this project. Maybe he is not understanding specifically what role. He  
29 understands that your law firm is, of course, representing the Petitioner and so forth, et cetera. He  
30 has also heard that this is your first time doing this. But you had indicated earlier in our first  
31 meeting that you and Kelly have worked together before doing these types of things. So, what  
32 other projects have you done? But on the other hand, you haven't done anymore projects, but  
33 you've worked together doing similar projects. What exactly is the relationship between --  
34 You're representing RoseHeart, right? You are representing them. And this is the first time that  
35 you have represented this particular client, or what is the deal with that?

36

37 Mr. Kolb stated yeah, we are principals in this particular venture. This is our first facility of this  
38 nature developing it together. We actually worked as Zoning Counsel for another applicant out in  
39 Campton Hills, Illinois. And spent quite a while getting zoning entitlements for that client. And  
40 in the process of that three-and-a-half-year education, we learned some really interesting  
41 information. We learned that there is a tremendous need for this in the community. This is a  
42 growing problem in society. And we also learned that big insurance companies are now looking  
43 at this more generally as a covered condition. And so, there's a source of revenue for these  
44 patients who need help. We looked at it like a tremendous business opportunity. He stated that he  
45 and Kelly have worked together, as we've worked with Ted Meyers as well for 10 years,  
46 working different development projects for different medical developers all over Illinois and all  
47 over the country for that matter. He stated that he and Kelly for a while there, we were the

1 exclusive zoning counsel for CVS Caremark and developed he doesn't know how many  
2 pharmacies and MinuteClinic's throughout Illinois and Wisconsin. So, we have a tremendous  
3 background when it comes to developing property. We saw that there was a tremendous need for  
4 this type of facility, both to operate it, if we were going to operate it, or to get it up and running  
5 and find a different operator if that was our business model. So, yeah, we've conducted some  
6 back of the napkin breakeven analysis.

7  
8 Mr. Kolb stated that the process that typically would go forward, Victor, would be that assuming  
9 we can get our zoning approval, we would need to build some equity in order to qualify for  
10 financing. So, we would have to build-out a PPM offering memorandum and bring it to potential  
11 investors, and negotiate with those investors some sort of return on that investment, and raise,  
12 you know, maybe 10, maybe 20, maybe 30% of the total cost needed to build the facility out and  
13 carry the facility until it's stabilized and broke even. That could take three years to stabilize. It  
14 could take two years, who knows. We have to cover our marketing costs internally. If you raise  
15 30% of that in private equity, then you've got to go to different banks, and you've got to show  
16 them your Construction Budget once you negotiate that with a general contractor. And you've  
17 got to be able to say, "This is the cost to build the facility." We have a back of the napkin  
18 estimate now. We are not going to go and bid out the job before we even have zoning.

19  
20 Chairman Blackwell stated right, right. Mr. Kolb stated but we have to be able to show to a  
21 Midland States Bank, or an American Community Bank, or a Chase Bank, or a BMO, that hey,  
22 we've got three or four million dollars in committed Class A investments. These are our  
23 accredited investors who are going to invest in the deal, and now we're going to take this to  
24 different lenders and see what we can get in terms of a credit facility. We need a construction  
25 line of credit. And we would need an operating line of credit to operate so we have enough  
26 revenue to support staff. So, we would deficit spend this for probably the first 12 or 24-months  
27 of operations until the breakeven point. Once it's stabilized and it's running, you know, you've  
28 got a successful business. There is a lot of practical -- SBA loan, 504, if you go conventional  
29 lending, you've got -- We have not sat with banks to exhaust our -- We know we have the access  
30 to the capital. The private equity he is not concerned about. We've got plenty of private equity  
31 resources to be able to put these deals together. And what's available from the private market.  
32 There have been some preliminary talks. He knows what was available for prior clients and he  
33 was excited by those notions. Banks are not hesitant to finance this type of an operation and they  
34 see the revenue stream as strong. And the initial reaction to Olympia Fields is strong. It's a  
35 wonderful community. Do we have a breakeven analysis ready to share for all of you? He  
36 doesn't think it is relevant to a Special Use, the elements. But we can certainly try to give you  
37 some figures if that's what you're requiring as a condition of Special Use or rezoning.

38  
39 Chairman Blackwell stated that he is not trying to impose additional requirements. He wanted to  
40 understand what you just explained. He just wasn't aware of how that worked, and what your  
41 processes were, and where you guys really were looking to move forward.

42  
43 Mr. Kolb stated that you first need to find a half dozen or a dozen people willing to make  
44 \$250,000.00 investments in terms of equity. And they join the group and then you basically take  
45 it to the lending market and you see if you can -- Chairman Blackwell stated okay. Mr. Kolb  
46 stated that can be subordinated debt. It doesn't have to be equity. Chairman Blackwell stated  
47 yeah. Mr. Kolb stated that it has to be behind a bank loan, and you take it to a bank, and you say,

1 “Hey, what can we get in terms of a credit facility to build it and float it until its broken even?”  
2 Chairman Blackwell stated I see. Mr. Kolb stated that he, along with Kelly, and Ted, and John,  
3 and everybody else involved will have to sign guarantees on that loan. And we will stay up at  
4 night until we get the best personnel in there, and get the right marketing people to bring the  
5 patients in because we will all get wiped out if we can’t make it work. It’s certainly not going to  
6 work on Medicaid. It’s not going to work on Medicaid reimbursements.

7  
8 Chairman Blackwell stated yeah. He stated that he appreciates that because he wasn’t clear on  
9 the process, you know, generally about how that works. Mr. Kolb stated yeah. Chairman  
10 Blackwell stated and Andrew, when you said you guys are “principals,” that means you guys are  
11 kind of like owners actually, right?

12  
13 Mr. Kolb stated that we are members of the LLC and principals. We happen to be in the legal  
14 profession, but that is not -- Chairman Blackwell stated but rolled into your ownership is a  
15 separate deal from your legal. Mr. Kolb stated right. We are wearing two hats. Obviously, we’re  
16 providing the legal services as part of our contribution to the entity.

17  
18 Chairman Blackwell stated okay. He was just trying to clear that up in his own head because he  
19 was a little confused about it.

20  
21 Commissioner Betts stated Victor, she still has a follow-up question around that one, again from  
22 the financial perspective. “Given that this is your first facility of this type that you are going to  
23 be running, and not to put the cart before the horse, but what assurances can you give us that you  
24 will be able to make this a profitable business model based on the information that you have  
25 provided? You’re going to have pressures from investors to show returns sooner, rather than  
26 later. And given that pressure, banks will put that same kind of pressure on you. They want to  
27 see all the return on equity, return on investment, breakeven points, and so on in great details  
28 which we don’t need to see. But we need to have a framework around the financials and your  
29 marketing plan that indeed, what you’re telling us, your finances can support. Because what that  
30 means, if you are running very thin margins, you may have to resort to a different business  
31 model. So, given that you are right now saying it’s a private pay facility and we are not  
32 marketing, and you’re not taking in government mandated cases, any of those cases, your  
33 finances will have to be able to support that. And right now, she has not seen anything at all that  
34 substantiates your business plan from a financial perspective. So, again, you may want to think  
35 about what information you can provide us along that front.

36  
37 Commissioner Betts stated that she wants to go back to some of the other questions that she still  
38 has to read. But again, it goes around, a lot of the questions, around your business model, your  
39 breakeven, your ROI and ROE.

40  
41 Commissioner Betts stated here is another question around traffic. “The traffic doesn’t speak to  
42 foot traffic if public transportation is used, like Metra.”

43  
44 Mr. Kolb stated that he’ll just say, first off, the business plan is private pay. We cannot  
45 discriminate against public patients, nor can we discharge a patient who runs out of private pay  
46 resources. There are laws in effect regarding that. So, we’ve got to be very clear that you just  
47 kind of characterized us as saying, “We’re not taking those patients.” He doesn’t think that we

1 can have that as a general policy. That being said, we have a private pay business model.  
2 Obviously, that's the most valuable business model to have.  
3  
4 Mr. Kolb stated so, back to your question. You're asking about Metra? Commissioner Betts  
5 stated that this was around traffic again for foot traffic, if public transportation is used. She  
6 thinks it again speaks to security. So, will people be coming in on the Metra and then walking to  
7 the facility, walking through the neighborhood? Again, the concern is around security and safety.  
8  
9 Mr. Kolb stated that patients won't come in and out on the Metra. It's a residential treatment  
10 facility.  
11  
12 Commissioner Betts inquired so then nobody will ever be taking the train from downtown to the  
13 Olympia Fields Metra Station, and get from there to the facility. Mr. Kolb stated say that again.  
14 Commissioner Betts so, you're saying that you will not have any patients that will take Metra  
15 from downtown, or Metra from even other suburbs, because you can take Metra from other  
16 suburbs to downtown that connect, or even from O'Hare Airport for that matter, or Midway  
17 Airport you can go downtown and come out to Olympia Fields via Metra. So, you are not  
18 anticipating any patients coming that way is what you're saying.  
19  
20 Ms. Mottle stated well, certainly they might be, but if they do, they won't be walking to the  
21 facility from the Metra Station. We will have someone pick them up, or drop them off at the  
22 Metra. We certainly can't control how people arrive at the facility or to the Metra Station. But  
23 they won't be walking to the facility from there.  
24  
25 Commissioner Betts stated that the next question again, is from Steve and Kristal Stevenson. It  
26 says, "We are still unclear as to how the facility will BENEFIT our kids at the high school. How  
27 has the prior facilities they've researched in other areas help the youth in the community besides  
28 being a facility that appears to take advantage of our kids?"  
29  
30 Ms. Mottl stated that she doesn't necessarily agree with the statement that the facility takes  
31 advantage of children. She is not going to remark on that any further. She thinks that John Vrba  
32 covered what he thought that this facility could do to benefit children as far as education  
33 regarding substance abuse. And certainly, he can speak to that later on if he joins. But she thinks  
34 that he covered that in the last Hearing.  
35  
36 Commissioner Betts stated that the next question she thinks, is more of a question for the Village  
37 to answer. "Are there Illinois businesses that could purchase the property for local usage?"  
38 Commissioner Betts stated Mike, she doesn't know if you want to speak to that.  
39  
40 Mr. Hoffman stated well, the owner of the property was free to sell it to whoever he proposed to  
41 do it, and he is choosing to sell it to these folks. He doesn't know that that question honestly is  
42 that relevant. We've got an application before us for this particular use and we need to make a  
43 decision on it, whether it's appropriate for the Village or not, and whether the owner looked to  
44 sell to somebody else or not it's not particularly relevant.  
45  
46 Commissioner Betts stated let me just spend a moment to go over these questions again. Lots of  
47 them are statements that have been previously made and answered.

1 Commissioner Jones stated Commissioner Betts, this is Art Jones, how does RoseHeart benefit  
2 Olympia Fields? How do you become an asset to us? Commissioner Betts inquired are you  
3 asking me. Commissioner Jones stated no. He is asking the Petitioner. Commissioner Betts stated  
4 oh, okay, okay.

5  
6 Ms. Mottl stated right now you have a property that is not generating any tax revenue. It's a  
7 property that is a blight on the area. It is unsafe. It's filled with asbestos. And it frankly, is a little  
8 bit of a danger to the community in its current state. We are offering to come in and invest a  
9 significant amount of money to redevelop that site into something that is visually appealing and  
10 will help the general public, and will generate a tax base for the community.

11  
12 Commissioner Jones stated okay, he's sorry Mrs. Betts. Commissioner Betts stated that she will  
13 continue reading the questions. Here are some additional questions that have come in. Again, she  
14 wants to be sure that she is not redundant, but read all questions that have been sent to us.

15  
16 Commissioner Betts stated that she thinks the question about will they have a full-time State  
17 licensed medical doctor or nurse on staff 24-hours per day has been answered before. She stated  
18 Kelly or Andrew, she doesn't know if you want to reaffirm that.

19  
20 Ms. Mottl stated that yes, we will follow all the codes required as far as staffing the facility.

21  
22 Commissioner Betts stated that the next question is: "Will they be denied expansion of this  
23 facility to include even larger patient care?"

24  
25 Mr. Kolb stated that we are applying for 120-beds. All of our modeling is based on 120-beds. If  
26 we were to expand the number of beds or the nature of care, and if it was considered to be a  
27 major amendment to the Special Use, we would have to reapply and get your consent.

28  
29 Commissioner Betts stated that the next question again, goes around that. "What are the plans  
30 and restrictions for the use of the additional acreage?"

31  
32 Mr. Kolb stated that we've been looking at that. He thinks that we mentioned this early on. We  
33 looked at the possibility of an assisted living facility or skilled nursing facility. He stated that  
34 John Vrba runs and owns a skilled nursing facility that got a lot of accolades and awards. He has  
35 detailed those for you guys in prior Hearings. We looked at that possibility. We even looked at  
36 that possibility for our site. We looked at the possibility, like the Mayor was interested in a hotel.  
37 And we've looked at the possibility of an animal clinic as part of the therapy for our patients.  
38 Maybe a shelter too, an animal shelter. There's acreage to do some interesting things if the  
39 property is zoned Medical. But again, you know, it's impossible for us really to move forward  
40 until we can get an indication that the zoning change is appropriate.

41  
42 Mr. Kolb stated that he would just say to the Commission, if we were applying for a Special Use  
43 for a drive-thru facility for a fast-food restaurant for instance, would you be asking us if we could  
44 show profitability with respect to our restaurant? Wouldn't it be seemingly premature? It just  
45 seems like this particular Special Use merits diving way deeper than you would with any other  
46 Special Use, because everyone is worried that, you know, the patients will become Medicaid,  
47 State supported and the quality of the facility will degrade. He doesn't think it's appropriate for

1 anyone trying to get zoning for a Special Use to have to show what their breakeven point is, and  
2 what their staffing costs, and how much money they anticipate paying their medical director as  
3 part of their staffing plan in order to build-out their income statement. He thinks that is putting  
4 the cart well before the horse.

5  
6 Mr. Kolb stated that what we are trying to do is even see if this project is viable. We don't own  
7 the property. We're under a contract to acquire the property. If we can get it under contract, keep  
8 it under contract long enough to get through zoning, which is becoming an increasing question,  
9 we perhaps could close on it. But before we can close, we've got to raise a lot of capital and drill  
10 down on all these financials and that is expensive. We've got hundreds of thousands of dollars  
11 into the Construction Budget and all of the plans, and drawings, and renderings, and internal Site  
12 Plan. Every one of those little boxes on that Site Plan was thought through by Jeff and Mark very  
13 carefully in terms of where the staffing is going to sit. We are trying to put the project in front of  
14 you in the best light we can. And every tree was thought out. You know, the location of  
15 everything. Do we have an operational business plan to a tee at this point? No, we're trying to  
16 get a Special Use through. He doesn't think it is part of the health, welfare, and safety of the  
17 community that we show that we are going to be able to make a profit by a certain date. He  
18 thinks that's well in advance of the elements.

19  
20 Mr. Kolb stated that he just wanted to put that out there because the perspective is that we are  
21 somehow irresponsible. He can tell you, look at the amount of work that we have submitted  
22 already from Traffic Study, engineering, and Stormwater Detention Plans, and Photometric  
23 Plans, and Utility Plans, and Grading Plans, Interior Build-out Plans, elevations, just to figure out  
24 how to design a Detox Wing. He doesn't know if you guys know what goes into that as far as  
25 what the size of the room has to be under the Illinois Administrative Code. Where the bathrooms  
26 are situated. How big the showers will be. This is all legislative. The people that are putting this  
27 project in front of you, we'll figure out how to make it profitable. He is confident with the  
28 reimbursement rates, and our modeling, and our prior clients modeling as well, that there is a  
29 profit to be made in these facilities. But right now, we are trying to get through zoning and see if  
30 your community is interested in this, and if we've satisfied the elements to the rezoning and the  
31 Special Use. He just wanted to put that out there, because he is not sure that a lot of the public  
32 comments that he is reading have really considered -- Have they taken a look at the application  
33 to see the amount of work that we've put in?

34  
35 Mr. Kolb stated when you compare our application to the prior applicants who may have given  
36 you a security plan, did they come anywhere near the engineering and architectural design that  
37 we have, and the budgeting of that? He would think not. So, you know, he just wanted to make  
38 that clear before we go forward. And frankly, he doesn't think that any of the breakeven analysis  
39 is even relevant to a Special Use at this point from a legal perspective, but he will leave it up to  
40 the Commission and we'll try to put something together for you.

41  
42 Chairman Blackwell stated okay, thank you, Attorney Kolb. Commissioner Betts stated that she  
43 has a couple more questions to make sure we get them on the record. "Will 24-hour security be  
44 provided for both the interior and exterior of this facility?"

45

1 Mr. Kolb stated yes. Commissioner Betts stated and the last question from this group: “Will this  
2 be detrimental to the planned future expansion of St. James Hospital on the west border?” She  
3 stated that she thinks that’s a question for the Village to answer.  
4

5 Mr. McDonnell stated that currently, there is no project for St. James Hospital to expand on the  
6 property on the south side of 203<sup>rd</sup> Street west of the old Tolentine Monastery site.  
7

8 Commissioner Betts stated all right. These questions were provided by the Sharp Watch Group  
9 of Olympia Fields. “If this Rehab Center is approved, could a “Performance Clause” requiring a  
10 set minimum annual revenue to the Village, be written into the contract? If they breach the  
11 contract, they would have to pay a hefty fine and/or face immediate shut down.”  
12

13 Mr. McDonnell stated that he doesn’t even know if that’s a legal, legitimate question.  
14 Commissioner Betts stated yeah, yeah. Mr. Hoffman stated that we can ask the Village Attorney,  
15 but he is guessing that we probably can’t do that. Commissioner Betts stated yeah.  
16

17 Commissioner Betts stated that the second question from this group is: “Also, any aesthetic  
18 architectural or landscape improvements should be approved by the Village to maintain the  
19 historic character of Olympia Fields.” She stated Mike, that’s a question that you may want to  
20 take.  
21

22 Mr. Hoffman stated yeah, they submitted a very detailed, at least, conceptual level landscape  
23 plan that he feels is consistent with the character of the community. And the Commission has  
24 seen their architectural renderings. The person asking the question may not have seen those  
25 things. This is a question for the Village actually. Did you guys put all their application up on  
26 your website? Because maybe we should if we didn’t, because some of these questions might be  
27 answered by seeing that.  
28

29 Mr. McDonnell stated that we did, Mike. There’s a link on our website for all of those  
30 documents that they provided. Mr. Hoffman stated that he guesses he would ask that the  
31 questioner take a look at those. And if you have additional concerns in something specific, then  
32 that would be great. But in general, he thinks that they were generally consistent with the  
33 character of the Village.  
34

35 Commissioner Betts stated that these questions came from the Sharp Group of Olympia Fields,  
36 and these are, she believes, all the questions that have been submitted, the ones that she had  
37 printed out. So, Victor, back to you.  
38

39 Chairman Blackwell stated okay, thank you, Commissioner Betts. At this time, with all of the  
40 questions being read into the record, asked and answered by the Petitioner, he thinks it is  
41 appropriate for us to consider closing the Public Hearing portion of our meeting and going to the  
42 specific Commissioners for questions.  
43

44 Chairman Blackwell stated just a couple of things. He thinks that we’re getting close to having  
45 all the information sort of wrapped up. He knows Andrew, you had brought up a couple of  
46 things, particularly regarding that Ordinance, and we need to get back with you on that and get  
47 some clarification there.



1 Chairman Blackwell stated that there are also a few medical questions that were on a list. And he  
2 thinks these were some things that he really didn't feel like it was appropriate to ask you guys  
3 because John handled a lot of this. Some of these questions have, in fact, been answered already,  
4 about how long the treatment time was. One of the questions was: "What will be the primary  
5 treatment modalities used?" These are kind of like medical questions. He knows that we had  
6 talked a little bit about the Methadone and that type of thing. But there are other types of  
7 therapeutic things. But some of our medical people in the Village had asked and sent in some  
8 questions.

9  
10 Mr. Kolb stated that if you wouldn't mind sending those over, we can get those to John.  
11 Chairman Blackwell stated yeah. He has like four questions. He thinks John had even talked a  
12 little bit about some of these things. But he knows that he is kind of the expert amongst you guys  
13 on that. "Will the director be on site? And will he or she be an MD?" He knows that was talked  
14 about. He can't recall if that was specifically answered. He knows John kind of had a handle on  
15 all those types of things. He is sorry he couldn't be with us tonight. They asked about the ratio of  
16 staffing to clients over the three shifts. Those kinds of questions are like medical, you know,  
17 operational questions. Chairman Blackwell stated that maybe it would be best John, he and Mike  
18 could put those together and get them out to them, so we could kind of conclude all of the  
19 medical issues. He thinks that they've been very informative and thorough on relatively all of the  
20 zoning issues and et cetera, that deal with those particular two elements.

21  
22 Chairman Blackwell stated that the other concern, and we had already had this raised by  
23 Andrew, was the clarification on the affiliation with the major medical facility, or primary  
24 medical group, and what that means. Chairman Blackwell stated that he doesn't know what that  
25 means. We have to look at that and then check with our attorney to figure out exactly what that  
26 condition imposes on a Petitioner. He doesn't think that's something that we are going to answer  
27 tonight.

28  
29 Mr. Kolb stated that's a big question. If we have to affiliate, or become a subsidiary, it could  
30 change the entire business model, you know. Chairman Blackwell stated yeah. Mr. Kolb stated  
31 you have a not-for-profit hospital, and we're a for-profit venture. They could tell us we can't  
32 affiliate with you under 501c3 because you're for-profit.

33  
34 Chairman Blackwell stated that he is glad that you pointed that out. He thinks that is a major  
35 point for you guys as well as for us to have a better understanding, but for you as the principals  
36 and the Petitioner to really know what that means. Chairman Blackwell stated that he couldn't  
37 answer that for you, Andrew. We are going to have to get back with you on exactly what that  
38 means because that may determine, you know, where you're going, what you're doing, and how  
39 you're doing it. So, we've got a note on that, John. He made a note for that.

40  
41 Chairman Blackwell stated that he has like four questions he would like to give to them as well  
42 for our next meeting. And hopefully, John Vrba will be here to address those because he is really  
43 good at that. Mr. Kolb stated yeah. Chairman Blackwell stated that he doesn't want to ask the  
44 questions to you guys. He's going to have a very clear understanding of that practice. And in  
45 fairness to you guys, he thinks that would be best.

46

1 Chairman Blackwell stated that there were a couple of other things. Where do we land on  
2 security, Andrew? You really don't have anything put together. He knows that you are saying it  
3 is kind of premature at this point. He understands that. Is there an outline or an overview that  
4 you've used in other types of areas that you could present, just so we could have some kind of a  
5 basis of understanding of what your expectations are for security? We're not asking for 50 pages,  
6 but just an outline that we could show to our police department, for instance. Chairman  
7 Blackwell stated he knows; we can't make you do it. But it would be helpful for your Petition to  
8 move forward with something of that sort to have some comfort for people to understand.

9  
10 Mr. Kolb stated right. We can reach out to an expert that we've worked with in the past, a  
11 security expert, and try to develop something based on the 120-patient threshold. You know, just  
12 keep in mind that that's going to be another significant cost, because they are going to have to  
13 analyze the Site Plan, the traffic flow, and the foot traffic flow. We can do that. If we do submit a  
14 plan, and you make it a condition of the approvals that we adhere to the plan, we need to have  
15 some flexibility to alter the plan to the extent required by the State as a condition of our  
16 licensure. Chairman Blackwell stated sure. Mr. Kolb stated that's why it's a little risky to throw a  
17 staffing plan in front of the Commission at this point and commit to a certain number of  
18 personnel in a given role without knowing: A. If it is going to ultimately determine on a case-by-  
19 case basis.

20  
21 Mr. Kolb stated but if you are asking for just a high level 50,000-foot view, we will spend some  
22 money and put that together if that's what you would like to see. Maybe we can even get  
23 our expert if we can even retain him and see if we can get some more specifics for you.

24  
25 Chairman Blackwell stated that he appreciates that. He thinks that would resolve some of the  
26 questions about the security issues that are kind of up in the air.

27  
28 Ms. Mottl inquired is there something specific that the Village would like to see as part of that  
29 plan? She stated that she sort of gets the impression that you guys have an idea of something you  
30 would like to see, but she doesn't know what that is.

31  
32 Chairman Blackwell stated, John. Mr. McDonnell stated that he doesn't think we know what we  
33 want to see because nobody has really given us a security plan. The last Petitioners that came  
34 before us before, they didn't have the same comments or view, but they couldn't answer the  
35 questions that he thinks are still out there, you know. Is there 24-hour security? Is there a security  
36 guard outside 24-hours a day? Is there only a security guard inside 24-hours a day? You know,  
37 there's the park behind the facility, so that's why these questions are coming up. The residents  
38 that are right across from the park itself, basically adjacent to your property. So, he thinks it's  
39 understandable for them to ask the question of where is the security, you know. How much  
40 security is there? Is that your answer, if somebody leaves out the front door you call 911? If  
41 that's your answer, then fine. But if there's a different answer, then we'd like to know the  
42 different answer. He knows our police department is basically going to go out there and probably  
43 get some data from other facilities from other police departments. He stated how many calls per  
44 month they get and how many calls per year they get. He is assuming they are going to give us  
45 that information soon. He thinks the Zoning Commission members want to know that  
46 information as well. He knows we have to base it on your facility as being a 120-bed facility.

1 Some other facilities are much larger than that that we've already looked into. He thinks  
2 something is better than nothing.

3  
4 Chairman Blackwell stated and it's what they feel comfortable presenting, you know, to the  
5 extent without tying themselves into something as well too, with too much detail that we might  
6 hold them to.

7  
8 Chairman Blackwell stated that he thinks that there were also some questions or some concerns  
9 about just the 120-people. So, you've got 120-people who don't really know each other. They're  
10 in a treatment facility. And how many times will our police department be called for internal  
11 stuff between the 120, you know, bed patient level? That reflects back on how many people the  
12 facility has to manage those people. Do they have not necessarily a police officer, but do they  
13 have a security guard? Do they have a nurse trained in restraint and security for people? How  
14 many folks are going to be watching these folks in the evening? Are the doors going to be locked  
15 at night where they can't get out after 10 o'clock? He stated that Kelly had indicated you know,  
16 of course, they are going to have some flexibility to go outside and move around. We would  
17 expect that. How is that going to work? Will they be particularly accompanied by someone? Is  
18 there a timeline when they should get back?

19  
20 Chairman Blackwell stated that the security issue is, in fact, relevant as he has said before. He  
21 thinks he has made that clear that it's in our Ordinance. And above and even beyond that, it is  
22 one of the most persistent questions that we have gathered from our residents as a whole. So, of  
23 all the questions, the majority of the questions really go to the security issues and peoples  
24 concerns, fears, anxieties, or whatever about a facility of 120-people plus staffers next to their  
25 residence. And that's what this is really about for us to take a look at because, you know, we're  
26 not going to necessarily make everybody happy. We have to be reasonable. But at the same time,  
27 some very relevant questions have been asked. He thinks drilling down you get a little bit more  
28 detail that might relieve some anxiety that certain people would have based on not knowing  
29 exactly what the plan is from the Petitioner. Chairman Blackwell stated John, he thinks you are  
30 on point with that. He stated that he thinks it is important for us to know, and for them to present  
31 something of that nature to us. And whatever they present is fine. We are not mandating that you  
32 give us a 50-page security program with an expert behind it. That would be nice if you've got it,  
33 but if you don't, just tell us what you've got.

34  
35 Mr. Kolb stated what we have is the State of Illinois Code that sets forth Section 309 the  
36 Professional Staff Qualifications. Section 311 the Staff Training Requirements. Section 313 the  
37 Personnel Requirements and Procedures. If you go through, honestly, there are 50-pages of  
38 requirements operationally, personnel wise, staff. He stated with respect to medically monitored  
39 detoxification, there is a requirement that there be two staff members at all times with 24-hour  
40 observation of the patient. That's codified. We can get into this. He just wants to make the point  
41 that it's really not up to us as to what we are going to provide. What we are going to provide has  
42 been codified by the Illinois Legislature in detail. We've committed to meeting and exceeding  
43 what's in the code. When we present this security plan, the first thing he has to do is give the  
44 security expert this entire code section and say, "You've got to work within these parameters to  
45 design something for us." A security plan based on our layout, which it's a tall task. He thinks it  
46 is premature to require that. But he understands what you are asking for.

47

1 Mr. Kolb stated that he hates to stand here and read this code at these Public Hearings over and  
2 over again. Nobody wants to hear it.

3

4 Chairman Blackwell stated that he was looking at the code now, because he was looking at that  
5 particular section. You had pointed out 2060.309(c), which that's: "In any medically managed or  
6 monitored detoxification service at least one staff, 24 hours a day shall be, ..." And then they  
7 itemize: "1. A registered nurse; and 2. A licensed practical nurse;" And they give specific  
8 information about that. "3. Be a certified emergency medical technician. Any other staff who  
9 provide direct patient care that is not defined as a clinical service shall be supervised by an  
10 individual who meets the requirements for professional staff in subsection (a), (b), or (c)..." So,  
11 you are right. A lot of it is codified. Maybe that's what you need to just say, "Hey, this is what  
12 we are going to do. We are going to follow this." And pull out some of these sections in here,  
13 and maybe add to it a little bit.

14

15 Chairman Blackwell stated that he thinks the question about whether a medical doctor is going to  
16 be present, it might not even be necessary in this code. But if John, and you guys were intending  
17 to do that, it would be nice to know that, "Yeah, there will be a medical person there." But at any  
18 rate, yeah, we'll move forward with that as well. We will pull up the requirements or the  
19 interpretation for the symmetry with a primary hospital. And then we will pull up those questions  
20 for John so he can address those too in the Petition and to the public as we reopen the Public  
21 Hearing, or at least let John speak to cover those areas. Chairman Blackwell inquired of Mr.  
22 Hoffman whether or not he is forgetting anything.

23

24 Mr. Hoffman stated no. He thinks that you are on track. Chairman Blackwell inquired of Mr.  
25 McDonnell what are the next available dates for us to get close to wrapping this up? And  
26 consider too, that he does want to give the Commissioners an opportunity to ask specific  
27 questions other than what has been already asked. Quite a few things have, but he thinks that all  
28 the Commissioners should weigh-in with any questions that they have as well too.

29

30 Commissioner Jones stated Victor, there's one concern that seems to be in the community, and  
31 that is the effects of RoseHeart on home values. He doesn't know if it was Mr. MaRous in the  
32 last meeting that indicated that this facility would be something positive as far as our home  
33 values. He just wanted to find out, a concern of his is, we have a facility that is \$10,000,000.00  
34 to \$15,000,000.00 versus the hospital expansion program just directly across the street that was  
35 like \$140,000,000.00. And as a longtime resident, it did not change his values at all. A lot of  
36 people in Olympia Fields are under water. So, that's another concern in addition to the security.

37

38 Chairman Blackwell stated Mr. MaRous he didn't know whether you would want to take that  
39 now. If you want to respond to that now you can and then follow-up at our next meeting with any  
40 other conclusions that you could draw from that. Because we are going to go to another meeting  
41 and it is starting to get late, but go ahead. Chairman Blackwell stated that was an excellent  
42 question, Commissioner Jones.

43

44 Mr. MaRous stated yes, Commissioner, that was an excellent question. The first point is, he  
45 believes the hospital expansion, he believes is non-taxable. So, there is not the generation of the  
46 real estate taxes that will come from the subject facility. So, it's really a whole different type of  
47 use, and it's a support of an existing facility, as compared to the proposed development that

1 generally is teetering on a blight number one. Number 2, is not providing any economic benefit  
2 at all with real estate taxes. And Number 3, will provide economic benefits to the community.

3

4 Mr. MaRous stated that the other issue when you mention upside down, the key is observing and  
5 studying Olympia Fields is to have more positive economic input. He would assume there's  
6 going to be some negativity from sales tax just because of the pandemic and e-commerce. So,  
7 whatever you can do to stimulate positive development, and clearly a \$15,000,000.00  
8 development could add significant real estate taxes and does not cause a negative impact to your  
9 taxing bodies. It's a positive. Will it change the community? Will it solve all the problems? No,  
10 but it's a start.

11

12 Commissioner Jones stated so this has been a 20-year problem. So, are we going to have to deal  
13 with this another 20-years you think? He means as far as our values. He has been a long-time  
14 resident of Olympia Fields. And he has seen a steady decline in our property values. That's a 20-  
15 year period of time.

16

17 Mr. MaRous stated okay, so that's a bigger question than this development and the reality of it  
18 has to do with the high tax rates in southern and southeast Cook County. It has to do with the  
19 residential explosion in Northwest Indiana with significantly lower real estate taxes. It has to do  
20 with some of the flight of Olympia Fields residents as they retire to downtown, or to the near  
21 western suburbs, whether it be Western Springs and Hinsdale. A lot of it has to do with the job  
22 opportunity and economics. Then you've got the other competition of Will County with a much  
23 lower tax rate. And again, there was some comment about Silver Glen, but when you go into  
24 Will County, those tax rates are a lot lower. All this is doing is helping provide stability and  
25 providing a positive. But still, it's going to be tough. He doesn't see it going any better. But this  
26 is something that will help. And it will be a positive. Commissioner Jones stated okay. Thank  
27 you.

28

29 Chairman Blackwell stated okay, John, what's our next available date where we can meet to sort  
30 of get close to wrapping this up?

31

32 Mr. McDonnell stated that he thinks it is December 8<sup>th</sup>. Chairman Blackwell stated to let him  
33 check his calendar on that. Chairman Blackwell stated Mike Hoffman, would you check to make  
34 sure you are available as well? Mr. Hoffman stated yes. Chairman Blackwell stated that we will  
35 need your summation too on that date to summarize everything.

36

37 Mr. McDonnell stated that he only says that because well, we've got another variance application  
38 that has come in just for a small residential project that has to go before the Planning & Zoning  
39 Commission. He doesn't think it would take too long if we did it at the same meeting. He has  
40 tried to keep everything just on this subject at one meeting. But we have to do regular business.  
41 Well, we have to try to do regular business as much as we possibly can during this whole  
42 COVID situation. He knows that it makes it difficult for all of us to do these Zoom meetings in  
43 an atmosphere like this Zoom meeting. He thinks our next date is December 8<sup>th</sup>.

44

45 Chairman Blackwell stated that he is fine with that date. Chairman Blackwell stated Mike are  
46 you okay? Mr. Hoffman stated yeah, that's fine with me. Yeah, that's fine. Chairman Blackwell  
47 stated John, he knows you will be around. It's before the big holidays roll in or start --

1 Mr. McDonnell stated and possibly between then, possibly he can get maybe some further  
2 questions from our police department as it pertains to security. Chairman Blackwell stated good.  
3 Mr. McDonnell stated and maybe they can get some specific answers to some of their questions.  
4

5 Chairman Blackwell stated okay, and then meanwhile, he and Mike will work to get -- He has  
6 some questions he wants to send to John Vrba, to the Petitioners, so he can address those. And  
7 then we can have our attorney take a look at that Ordinance. And Andrew had mentioned 22-333.  
8 So, we'll have a better explanation or some clearer direction for him about what that actually  
9 means. If Andrew and those guys want to give us just like a basic outline of a security plan, they  
10 could tender that prior to that meeting for our December 8<sup>th</sup> meeting, and we could get a  
11 summation from Teska Associates about everything and see where we are. We should be getting  
12 close to bringing this to an end.  
13

14 Chairman Blackwell stated so, with that said, the other thing too, he stated that he does apologize  
15 to Commissioner Bradshaw, Commissioner Miller, Commissioner Jones, specifically, as well as  
16 to Commissioner Betts as well, because you guys haven't gotten a chance to really ask your own  
17 specific questions. He does apologize for that. But because of us being inundated with questions  
18 from the residents, which rightfully so, they have a right to ask those questions, but "we" as a  
19 Commission, have a clear obligation to have those questions presented in our meeting to make  
20 sure that the public is seeing us as fully transparent, and that their questions are actually being  
21 asked of the Petitioner. He stated because there are a lot of good questions. And that's where we  
22 get our information, and that's who we really work for.  
23

24 Chairman Blackwell stated that he will get back with the Commissioners for December 8<sup>th</sup>.  
25 Prepare your questions and be ready to move forward with those.  
26

27 Chairman Blackwell stated that he thinks we need to do two things. He is a little bit hesitant to  
28 close the Public Hearing aspect of the meeting. We are going to have to clean up the last batch of  
29 the questions that come in for our next meeting.  
30

31 **ADJOURNMENT:**  
32

33 So, at this point, he will entertain a Motion to adjourn the meeting.  
34

35 **Motion by Commissioner Jones, Second by Commissioner Betts to Adjourn the Meeting at**  
36 **9:12 P.M.**  
37

38 Chairman Blackwell asked Commissioner Jones to do a Roll Call Voice Vote.  
39

40 Commissioner Jones stated voice vote to end this meeting.  
41  
42  
43  
44  
45  
46  
47

1 **Commissioner Betts: Yes.**  
2 **Commissioner Bradshaw: Aye.**  
3 **Chairman Blackwell: Yes.**  
4 **Commissioner Jones: Yes.**  
5 **Commissioner Miller: Aye.**

**Motion Carried.**

6  
7 Chairman Blackwell stated that we are hereby adjourned. We will carry over the Public Hearing  
8 aspect of our meeting on December 8<sup>th</sup> at 7 o'clock. Thank you all for your time, and have a  
9 good night. Good night, everyone.  
10  
11 Respectfully submitted by Faith Stine.