The word “legend,” conjures many images. A past superstar like Humphrey Bogart, an intellect like Einstein, a phenomenon like low-carb dieting, a wonder like the Lighthouse at Alexandria, a marvel like Superman. Justifiably, the North Florida medical community has its own legend, one that surpasses all of the aforementioned: Dr. J. Brooks Brown, founder and Chairman of Brooks Health System. The history of the institution named for him, the intriguing story behind its inception, and the portrait of the man responsible for its continued success is legendary nonfiction at its best.
Once Upon a Time...

The year was 1963, and forty-three-year-old Dr. J. Brooks Brown was standing in a Baptist Hospital operating room alongside Dr. Louis Costanza. The two were having a doctors’ typical conversation while performing thoracic surgery:

“How’s the wife?”
“Fine, fine.”
“The kids?”
“Doing well, thanks.”
“Done any hunting lately?”
“I mean to... soon.”

Then came the discourse that would change everything for Brown—his passion, his direction, his life. In fact, that one moment catapulted Brown toward legendary status without his realization:

“Dr. Brown, I was at Mobile over the weekend, and I met Dr. Tucker. He’s built a hospital...”

What Brown did instantly realize was the impact that a meeting with Dr. Tucker may create and what solutions the summit may uncover. Brown recalls, “We had a problem—the problem that all hospitals in town had a ninety percent occupancy. It took thirty days to be admitted, and patients were plugged into the outlets and lined up in the halls with screens around them.” Brown explains that the overcrowding was produced by the rapid growth in the community. A new facility suddenly became one answer to helping reduce the congestion of hospitals.

Another reality for Brown was that The University of Florida had come online in 1956, attracting patients from historical referral areas such as Stark and Gainesville. With a new 350 bed facility in Gainesville, and the Jacksonville facilities full, specialists suddenly were unable to treat their patients. “We had to do something,” Brown says.

Brown clarifies that his movement into rehabilitation was not planned. He’d been doing big traumatic surgery for over thirty years and fell upon the idea that rehab would have helped his patients recover quicker and better. He grins admitting, “I can’t say I ‘thunk’ that up; it just started to occur along the way and became very obvious to me as a surgeon that all surgical procedures need post-op rehabilitation. Patients may be left with a residual that they have to live with forever. Surgery is a traumatic procedure. When you take apart a piece of someone and put him or her back together, you have to get them cranked up. Everything that experiences trauma needs to be rehabilitated.”

He insists that the focus of rehabilitation is on team and integrated care. “It takes everybody to treat the patient and help the family,” says Brown, and he adds that this is not as well known as it should be. He insists rehabilitation involves the “laying on of hands, a circumstance in which a loving relationship occurs between the patient and loved ones.” Believing that there is a vast difference between the days spent in an acute care center and a rehab facility, Brown states there are from fifteen to thirty people who “strike up a bond (with the patient, but that bond,) develops because of the relationships between the care givers and the patients.”

Rising Action...

Ultimately, Brown made that important trip to Mobile, and after speaking with Dr. Tucker, returned, inspired to repeat what Tucker had done. “We put together an organization composed of lay people, bankers, legal folks and other business groups to help guide us through rough waters,” he says.

Eventually, Brown and his constituents made a presentation to obtain government approval for a new hospital, but the project was unfortunately turned down at a local meeting of the governmental council. Nonetheless, the staging created a firestorm in the community. Brown and his partners developed a non-profit corporation and then developed a group of physicians who wanted to buy land. An airplane trip over Longwood Road (now Beach and University Boulevards) stirred them to put together an economic package, which consisted of getting funds through the state government, securing other resources with a consortium of banks, and selling one million dollars of penchant funds. Five months later with commitment from one hundred doctors, the group was able to have their governmental hearing moved to a neutral location in Tallahassee. There, their plans to build a new hospital were approved.

Brown even obtained Hill Burton funds. While the challenges didn’t disappear (“All of us were practicing medicine full time,” states Brown), they were countered by the outpouring of contributing teamwork. Dr. Brown continued to recruit planners, architects, and other experts to plan the hospital. He humbly adds, “Without great people working along with the idea, none of this would have happened. Sure, the leader produces the idea and gathered the people, but it always is a collaborative effort that produces anything I’ve ever done.”

The Climax...

The facility that was the forerunner to Brooks Rehabilitation Hospital was opened in the spring of 1969. The acute hospital eventually grew to become two hospitals: Memorial Hospital and Brooks Rehabilitation Hospital. The two hundred bed hospital opened with fifty beds and minimal costs. “It was a very determined and passionate period where everyone worked for free,” recalls Brown.

Within sixty days the original fifty beds were full. Brown surmised that two hundred beds wouldn’t be
enough. He approached the Florida Development Commission in Tallahassee who divvied out government funds and discovered that a $750,000 matching grant was available for additional beds. Brown applied and obtained $1.5 million to build another one hundred beds, part of a three story building that is now part of Memorial Hospital.

By 1994, Brooks Rehabilitation became a freestanding hospital and an independent system. Betsy Fallon, Vice President of Marketing and Planning for Brooks Health System, recalls, “Each evolution required a name change until we solidified our vision as Brooks Health System. The Brooks name was selected as both a tribute to its founder, J. Brooks Brown, and as an opportunity to create an identity that we hope will prove to be as unique as the people who come to us for care.”

Today, in addition to owning and operating one of the largest rehabilitation hospitals in the country, Brooks Health System includes a network of outpatient therapy clinics, the Brooks Health Foundation, and a partnership with the University of Florida through which leading-edge rehabilitation research is conducted, at the Brooks Center for Rehabilitation Studies. This Center was started with a $2.5 million grant from Brooks Rehabilitation, which was matched with state funding. Brown says, “It’s our intent that Brooks should be a top grade institution offering world-class rehab services to help people with disabling illnesses or injuries return to their maximal functioning level. Brooks will continue to develop its academic relationship, and increase its commitment to basic bench and clinical research in Jacksonville.” Brooks continues to be involved in grant making to University of North Florida and Jacksonville University. Recognizing both his personal philanthropy and the contributions of the Brooks organization, JU has named its beautiful new teaching facility within the clinical school of nursing after Brown, and UNF’s Health Sciences Building bears his name.

Retaining the rehabilitation facility as a separate not-for-profit institution was “brilliant forethought,” commands Brown. The mission emphasizes a focus on community service and partnership, including those in academic health research. Brown insists, “We want to move beyond the initial piece of rehabilitation. We want to contribute to knowledge as we move through the future.” Understandably, the institution is on its way to becoming a nationally recognized center of excellence in rehabilitation.

Flashback...

Born in 1920, Brown lived in a small agricultural Alabama town that Brown remembers “had a certain sense of gentility in it.” The entire high school consisted of a little over one hundred students in grades seven through twelve. Working for pay from the time he was ten years old, Brown threw newspapers, held a job in a sawmill, and then worked for the county running a Caterpillar.

Ultimately, Brown was impassioned by his family practitioner, having survived pneumonia when he was ten. With a mother who was the only registered nurse in town and a father who was a degree pharmacist and a licensed civil engineer, Brown was clearly in a family that was on the move. Brown discloses, “I was endowed to do the same thing, to win the game, to knock the home run, to make the touchdown and to lead. Suddenly I was seventeen and didn’t have a very big workload. I went off to the Great University and have been gone ever since.”

He met his wife of sixty-two years at the University of Alabama, where she was studying nutrition and dietetics. Even today, she and Dr. Brown attend all the staff parties, and according to Betsy Fallon, “Mrs. Brown is amazing with everybody here; she is really part of the family.” The couple has two children, three grandchildren, and two great-grandchildren.

The Dénouement...

The best part about this story’s legendary ending is the lesson learned from the humble visionary who transformed himself from a surgeon to a CEO over a thirty-day period. Brown believes the commands are essentially the same. “I’ve learned that there is very little distinction between being a CEO of a big corporation and being a surgery icon who does big operations. In the operating room with a big procedure there are six to twelve people who are experts at what they do. The surgeon, captain of the ship, would be useless, could produce nothing without the yeoman. To be a good senior CEO, it is necessary that you make decisions alongside your staff. The senior officer evolves the plan with all of those people; he does like the surgeon does. He stands on their shoulders while they do the work and is there to help them as needed.” Brown is adamant that the amount of collaboration, agreement, passion, and energy that occurs is all part of the whole. “It is not from some big boss man,” he insists. “It is from the whole institution.”

Happily Ever After...

J. Brooks Brown is not just interested in Rehabilitation. He cherishes family and friends and the memories of both. Such is his pride in his past, he has assembled what he calls “The Big Red Book,” a two foot by three foot binder, which holds more certificates than mentionable and contains his father’s pharmacy diploma from the 1800’s alongside his conferred degrees and awards. He is currently writing massive amounts of history about himself and an account of the Hospital’s history.

A fan of outdoor activities, Brown says, “I’d rather get my shotgun and walk outside in the woods and go quail hunting for small birds that require skill.” He beams, “I’ve duck and goose-hunted in Canada. Next year, I’m going to have a hunt on the eastern shore.”

Once an avid traveler, he says, “the world’s gotten too congested.” Nowadays he prefers walking in the mountains and particularly enjoys visiting Jackson Hole.

An experienced carver, Brown finds that this craft “takes too long.” Discovering he could paint a picture in one afternoon, he now satisfies his artistic hunger by painting pastoral scenes, forests, mountains, and snow-covered green. “I’m not a good enough artist to paint people, I haven’t developed that,” he admits.

While Brown desires more time to participate in leisure activities, he retains his position as Chairman of the Board of Brooks Health System, and sits on UNF’s College of Health and Medical Advisory Board. He is unwavering when he says, “I would like to have some association with the institution as long as I can.” No doubt, Dr. J. Brooks Brown will always be associated with the institution that bears his name, and he credits his tremendous support system—composed of community and physicians—for making possible everything he has done.