1. Collaboration Name: **Southern Illinois Comprehensive Care Collaborative**

2. Name of Lead Entity: **Alton Memorial Hospital**

3. List All Collaboration Members:

   Alton Memorial Hospital and Gateway Regional Medical Center

4. Proposed Coverage Area: **St. Louis Metro East, Southern Illinois**

5. Area of Focus: **This collaborative focuses on Obstetrical Care for mothers and infants and Behavioral Health Care for those suffering from mental or substance use disorders.**

6. Total Budget Requested: **$21,585,263**
**Project Description**

0) **Eligibility Screen**

1. Does your collaboration include multiple, external entities?

   Yes

2. Can any of the entities in your collaboration bill Medicaid?

   Yes

1) **Participating Entities**

Contact Information for Collaborating Entities

1. What is the name of the lead entity of your collaborative?

   **Alton Memorial Hospital**

2. Please provide primary contact information, secondary contact information, and the Tax ID# of each entity in your collaborative. Please list the lead entity in the top row.

   **Primary contact for collaboration:**

   **Entity Name:** Alton Memorial Hospital  
   **Tax ID:** 37-0661172  
   **Primary Contact:** Brad Goacher  
   **Position:** Chief Operating Officer  
   **Email:** brad.goacher@bjc.org  
   **Office Phone:** (618)463-7268  
   **Secondary Contact:** David Braasch  
   **Secondary Contact Position:** President  
   **Secondary Contact Email:** david.braasch@bjc.org

   **List of entities participating in the collaboration:**

   **Entity Name:** Gateway Regional Medical Center  
   **Tax ID:** 36-4460628  
   **Primary Contact:** Shane Watson  
   **Position:** Chief Executive Officer  
   **Email:** swatson@qhcus.com  
   **Office Phone:** (618)798-3993  
   **Secondary Contact:** Lucas Prather  
   **Secondary Contact Position:** Assistant Chief Executive Officer  
   **Secondary Contact Email:** lprather@qhcus.com
Participating Entities

1. Are there any primary or preventative care providers in your collaborative?

Yes

1A. Please enter the names of entities that provide primary or preventative care in your collaboration.

In this collaboration, Alton Memorial Hospital is a women’s health primary/preventative care provider. Gateway Regional Medical Center also offers primary/preventative care as part of its services but will focus on its behavioral health services for purposes of this collaboration.

2. Are there any specialty care providers in your collaborative?

Yes

2A. Please enter the names of entities that provide specialty care in your collaborative.

Alton Memorial Hospital and Gateway Regional Medical Center are specialty care providers.

3. Are there any hospital services providers in your collaborative?

Yes

3A. Please enter the name of the first entity that provides hospital services in your collaborative.

Alton Memorial Hospital

3B. Which MCO networks does this hospital participate in?

✓ YouthCare
✓ Blue Cross Blue Shield Community Health Plan
✓ IlliniCare Health
✓ Meridian Health Plan (Former Youth in Care Only)
✓ Molina Healthcare

3C. Are there any other hospital providers in your collaborative?

Yes

3D. Please give the name of your second hospital provider here.

Gateway Regional Medical Center

3E. Which MCO networks does this hospital participate in?

X YouthCare
✓ Blue Cross Blue Shield Community Health Plan
✓ IlliniCare Health
✓ Meridian Health Plan (Former Youth in Care Only)
 ✓ Molina Healthcare

4. Are there any mental health providers in your collaborative?
   Yes

4A. Please enter the names of entities that provide mental health services in your collaborative.

  **Gateway Regional Medical Center is a mental health provider.**

5. Are there any substance use disorder service providers in your collaborative?
   Yes

5A. Please enter the names of entities that provide substance use disorder services in your collaborative.

  **Alton Memorial Hospital and Gateway Regional Medical Center are substance abuse disorder service providers.**

6. Are there any social determinants of health services providers in your collaborative?
   Yes

6A. Please enter the names of entities that provide social determinants of health services in your collaborative.

  **Alton Memorial Hospital and Gateway Regional Medical Center are social determinants of health services providers.**

7. Are there any safety net and/or critical access hospitals in your collaborative?
   Yes

7A. Please list the names of the safety net and/or critical access hospitals in your collaborative.

  **Gateway Regional Medical Center is a safety net hospital.**

8. Are there any entities in your collaborative that are either certified by the Illinois Business Enterprise Program (BEP) or not-for-profit entities that are majorly controlled and managed by minorities?
   No

9. Please list the Medicaid-eligible billers (firms that can bill Medicaid for services) in your collaborative, and the Medicaid ID for each.

  **Alton Memorial Hospital, Medicaid ID: 370661172-001**
  **Gateway Regional Medical Center, Medicaid ID: 364460628-001**
10. Project Types in the Transformation funding statute. Check all that apply. If none, please provide a brief description of what kind of entities comprise your collaboration. This question is informational only and will not affect eligibility)

Safety Net Hospital Partnerships to Address Health Disparities

✓ Safety Net plus Larger Hospital Partnerships to Increase Specialty Care

✓ Hospital plus Other Provider Partnerships in Distressed Areas to Address Health Disparities (led By Critical Area Hospitals, Safety Net Hospitals or other hospitals in distressed communities)

Critical Access Hospital Partnerships (anchored by Critical Area Hospitals, or with Critical Area Hospitals as significant partners)

Cross-Provider Care Partnerships Led By Minority Providers, Vendors, or Not-For-Profit Organizations

Workforce Development and Diversity Inclusion Collaborations

Other

2) Project Description

Brief Project Description

1. Provide an official name for your collaboration.

Southern Illinois Comprehensive Care Collaborative

2. Provide a one to two sentence summary of your collaboration’s overall goals.

The Southern Illinois Comprehensive Care Collaborative, based in Madison County, Illinois, will provide access to more comprehensive and quality Obstetrical and care in and around Madison County, and Behavioral Health care to all residents of Southern Illinois.

Detailed Project Description

Provide a narrative description of your overall project, explaining what makes it transformational. Specify your service area, identify the healthcare challenges it faces, and articulate your goals in addressing these challenges; explain your strategy and how it addresses the causes of these challenges, and lay out the expected timeframe for the project. Describe any capital improvements, new interventions, delivery redesign, etc. Your narrative should explain the need for each significant item in your budget, clarifying how each connects to the overall goals and operations of the collaboration.

Executive Summary

The Southern Illinois Comprehensive Care Collaborative (“SICCC”) was created to improve the health and wellness of the individuals of the St. Louis Metro East area of Southern Illinois. The SICCC is the combined effort of Alton Memorial Hospital and Gateway Regional Medical Center working together to address the
current complex challenges surrounding these communities. The collaboration will focus on two service lines that are currently high in demand, riddled with health disparities and critical to the overall wellbeing of the communities. This obstetrical and behavioral health care initiative will radically change this landscape by offering tailored solutions to improve outcomes and decrease health disparities for the members of communities we serve.

The collaboration seeks to fill healthcare gaps in care for mothers and babies and target behavioral health conditions in the underserved St. Louis Metro East (“Metro East”), Illinois counties and communities that border the Mississippi River across from St. Louis, a part of Illinois that continuously ranks high on the CDC’s social vulnerability index. Specifically, the goal of this collaborative is to address the physical and behavioral health and social needs of the communities by providing increased access to quality obstetrical and behavioral health care and facilities via directly addressing several of the community’s social determinants of health.

This will transform how prenatal and obstetrical care is delivered to mothers and babies, and how behavioral health care is delivered and accessed for the area. Expanded OB/GYN facilities and offerings will be developed at Alton Memorial Hospital to increase the capacity for quality care and better serve the women and infants of the Metro East, while a Psychiatric Emergency Crisis Center (“PECC”) is constructed at Gateway Regional Medical Center to increase mental health and substance use disorder treatment availability and options for care. The PECC, combined with additional outpatient behavioral health services that will be offered, will form a more cohesive continuum of care for behavioral health patients in the Metro East and throughout Southern Illinois.

According to the UIC Transformation Data and Community Needs Report, the number one and two reasons for inpatient hospitalization in the Metro East in 2019 and 2020 were pregnancy/childbirth and mental/behavioral health, respectively. Gateway Regional Medical Center has been collaborating with Alton Memorial Hospital for the past year discussing how best to address the health disparities involving behavioral health and obstetrical care in the Metro East. The collaboration between these two hospitals is a sustainable solution that will help the most vulnerable members of the community.

Providers

The providers in the SICCC are Alton Memorial Hospital and Gateway Regional Medical Center. Both collaborators are Medicaid-enrolled providers eligible to bill for Medicaid services.

Alton Memorial Hospital

Since 1937, Alton Memorial Hospital (“Alton”) has cared for residents in Alton, Madison County, Illinois, and the surrounding communities. Alton Memorial is a part of BJC HealthCare, a nonprofit health care organization serving the health care needs of urban, suburban, and rural communities in the greater St. Louis area and Southern Illinois. Alton Memorial is a 158-bed full-service acute care hospital. Alton Memorial Hospital offers patients a variety of inpatient and outpatient services including surgery services, medical imaging, interventional and diagnostic heart services, cancer care, rehabilitation, 24-hour emergency care, ambulance services and more. In 2020, Alton had 804 employees, 488 physicians, 158 staffed beds, 6482 admissions, 30,470 emergency department visits, 2715 outpatient surgery visits, and Alton Memorial’s Women’s and Infants Unit has been delivering babies for more than 65 years.

Gateway Regional Medical Center

Founded in 1921, Gateway Regional Medical Center (“GRMC”) is a 305-bed hospital in Granite City, Madison County, Illinois, specializing in the delivery of behavioral health services. GRMC is the only safety
net hospital in Madison County, Illinois. One hundred of GRMC’s beds are dedicated to the provision of behavioral health services, including adult, senior, and medical detox. GRMC also provides outpatient, intensive outpatient program, and TMS therapy. GRMC has provided behavioral health services since 1975 and has continuously provided education on mental illnesses for the community to help educate on appropriate measures to deal with the many forms of mental illness. In addition to behavioral health services, GRMC offers emergency services, surgical and outpatient services and has many primary and specialty care physicians located throughout the service area, with 134 physicians on the Medical Staff. In 2020, GRMC had 19,575 emergency department visits, 2,321 surgery visits, and 6,567 admissions.

Service Area

The primary service area is the Metro East area across the Mississippi River from St. Louis, specifically Madison and St. Clair counties. Alton Memorial Hospital is located in Alton, Illinois, and Gateway Regional Medical Center is in Granite City, Illinois. This collaboration will also be beneficial to patients, especially behavioral health patients due to a lack of facilities in the state, throughout the Southern Illinois region and, in some instances, the entire State of Illinois. The maps attached to the end of this document demonstrate the wide-reaching service area for each portion of the project.

Challenges

Illinois ranks 28th in the nation for access to care according to a report published in 2021 by Mental Health America, Inc. The University of Illinois at Chicago’s Transformation Data & Community Needs Report found that the Metro East is one of five areas in Illinois with the greatest concentration of social vulnerability to health inequities and poor health outcomes.

According to the UIC report, in the Metro East, Obstetrical and Behavioral Health are the two specialties with the most need in the community. The topmost frequent hospitalizations for the Metro East are related to labor and delivery / childbirth: complications of labor and delivery, maternal care related to the fetus and amniotic cavity and possible delivery problems, and obstetric complications not elsewhere classified.

Infant mortality is an important indicator of the overall health of a community, as factors that influence infant mortality can also impact the wider community, such as living conditions, economic development, and quality and access to medical care. In 2018, the U.S. national infant mortality rate was 5.7 deaths per 1,000 live births. Data from the Illinois Department of Public Health shows the infant mortality rate in Madison County in 2018 was a staggering 10.1 out of 1,000, almost twice that of the national rate. Unfortunately, St. Clair County was not much better at 7.1 deaths per 1,000 live births.

There are additional metrics that can be used to gauge the health of the community. Preterm birth is the birth of a baby prior to 37 weeks gestational age and can cause short-term and long-term health problems for the baby. Low birth weight is when a baby is born weighing less than five pounds, eight ounces. Having a low weight at birth can cause serious health problems. A baby who is very small at birth may have trouble eating, gaining weight, and fighting off infections. Very low birth weight is when a baby is born weighing less than three pounds, four ounces. On average, only 1% of babies born in the United States are very low birth weight.

The following chart shows 2019 IDPH data for preterm, low birth weight, and very low birth weight for Madison and St. Clair Counties.

<table>
<thead>
<tr>
<th></th>
<th>Madison County</th>
<th>St. Clair County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Births</td>
<td>2,748</td>
<td>3,006</td>
</tr>
<tr>
<td>Preterm Births</td>
<td>280 (10.2%)</td>
<td>397 (13.2%)</td>
</tr>
<tr>
<td>Low Birth Weight</td>
<td>211 (7.6%)</td>
<td>347 (11.5%)</td>
</tr>
<tr>
<td>------------------</td>
<td>------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Very Low Birth Weight</td>
<td>32 (1.2%)</td>
<td>75 (2.5%)</td>
</tr>
</tbody>
</table>

The data shows that a significant number of preterm births occurred in both counties. Additionally, there are far too many babies born with low or very low birth weights; the very low birth weight total for St. Clair County is over twice the national average.

After issues related to childbirth, the topmost frequent reasons for hospitalization in the Metro East are related to mental disorders: mood disorders and schizophrenia-related disorders, and mental and behavioral disorders due to psychoactive substance use (or, stated more simply, substance use disorders), according to UIC’s Transformation Report. The two disease groups comprising the greatest percentage of readmissions and resource intensive hospitalizations were mental illnesses (mainly mood disorders and schizophrenia) and substance use disorders. 85.2% of patients seeking behavioral health treatment use emergency rooms as a point of care, meaning one out of every eight emergency room visits in the State of Illinois involves a mental health or substance use condition.

According to Mental Health America, Inc., Illinois also ranks 19th in the nation for the prevalence of mental illness. Despite 1,526,000 of Illinoisan adults having a mental health condition, only 40% of people with mental illness sought treatment in the past year. 4,878,923 people in the state live in a mental health professional shortage area. Additionally, the Metro East was found to have low levels of outpatient care, both before and after hospitalization, which suggests that there is a crucial lack of access to outpatient care.

Goals

This project is focused on two of the 10 most disadvantaged counties in Illinois, Madison and St. Clair, located directly across the border from St. Louis, Missouri. This collaboration will improve access to care, while at the same time addressing the social determinants of health barriers that currently prevent Metro East residents from seeking out care and treatment.

This collaboration hopes to radically change Obstetrical and Behavioral Health care in the Metro East. To accomplish this, the SICCC’s goals can be grouped into three main categories: increase capacity, reduce and eliminate barriers to care, strengthen clinic-community linkages, and promote care engagement.

Build Capacity

There is a significant need for increased capacity for care in the Metro East community. Simply stated, the area needs more quality facilities to treat mothers and their infants. To decrease infant mortality and preterm births, the women of the Metro East need increased access to prenatal care and a place to deliver that can handle a volume of patients and provide support to the infants who need it directly after birth. The SICCC will address this by increasing the capacity of an existing operating room, both in square feet and in the number of staff who will work in the OR, increase the number of pre- and post- C-section recovery beds available, and increase the number of providers available to cover the Level II nursery for babies that require additional care after birth.

Additionally, there is a considerable need for more behavioral health beds for patients suffering from a mental health crisis or a substance use disorder. The community also desperately needs increased outpatient treatment for mental health and substance use disorders. The SICCC will address this need by building capacity for treatment and increasing the number of patients who can be treated by constructing an emergency crisis center and facilitating the transfer of care for patients transitioning from different levels of care. This will help to alleviate pressure on local emergency rooms by providing patients a place to go other that the ER when suffering from a mental health crisis. The increased ability to care for outpatients and those transitioning from...
a different level of care will address the lack of patients who are able to receive care.

The success indicators for increased capacity for care will be an increase in the numbers of individuals who receive obstetrical and behavioral health care. This will be measured by tracking the increase in the number of individuals who receive care over time as the project continues to grow and reach its full potential. Additionally, the number of Medicaid patients to use the services will be tracked, which will show an increase in the number of vulnerable patients who receive care.

Reduce and Eliminate Barriers to Care
Some of the barriers identified by the Metro East community during discussion sessions hosted by UIC to create the Transformation report were access to care, lack of awareness of healthcare services, lack of awareness of where to get care and how to pay for it, and insufficient transportation to and from care.

This project specifically seeks to address the lack of knowledge regarding care options; inability to pay for treatment or lack of understanding of how to access programs or insurance that offset the cost of care; stigma associated with receiving treatment for mental health or substance abuse issues; lack of transportation to and from health appointments; limited appointment availability; and geographic clinician shortage.

These causes were chosen to be addressed because obstetric and behavioral health care are both areas that are significantly lacking in the community. Many people are unable to get adequate care because they simply do not know where or how to find it. People with mental health issues will not seek care due to the stigma or fear and shame associated with it. Others are limited by the ability to afford care and the associated costs, such as transportation. The collaborative decided there was a need in the area for quality mother/baby and behavioral health care and chose to address as many barriers to that care as reasonably possible.

The collaborative will undertake the following activities to reduce or eliminate barriers to care faced by the vulnerable members of the collaborative’s community: increase the availability and effectiveness of care in the community; increase the proportion of adults who get recommended evidence-based preventive health care for both obstetrical and behavioral health; increase the proportion of pregnant women who receive early and adequate prenatal care; reduce the number of people who can’t get behavioral health care when they need it; increase the ability of obstetrical and behavioral health professionals to provide more high-quality care to those who need it; increase the amount and quality of community outreach regarding services; increase community outreach to promote participation in health education, behavioral health education, prevention and health insurance programs; increase the use of community health workers to engage patients in their care and treatment; increase the quantity and diversity of clinicians; and develop, implement and evaluate interventions to prevent fetal demise and its risk factors.

The proposed activities will decrease healthcare disparities and barriers to care and, at the same time, increase health equity because they target very specific deficiencies in obstetrical and behavioral health care in the area. The causes of the obstacles that this project specifically seeks to address are lack of knowledge regarding care options; inability to pay for treatment or lack of understanding of how to access programs or insurance that offset the cost of care; stigma associated with receiving treatment for mental health or substance abuse issues; lack of transportation to and from health appointments; limited appointment availability; and geographic clinician shortage. These causes were chosen to be addressed because obstetric and behavioral health care are both areas that are significantly lacking in the community. Many people are unable to get adequate care because they simply do not know where or how to find it. People with mental health issues will not seek care due to the stigma or fear and shame associated with it. Others are limited by the ability to afford care and the associated costs, such as transportation. The collaborative decided there was a need in the area for quality mother/baby and behavioral health care and chose to address as many barriers to that care as reasonably possible.
The project will incorporate racial equity by focusing on outreach, education, treatment and continuity of care of minority members of the community. In the Metro East, studies have shown that racial and ethnic minorities have been historically underserved in prenatal and behavioral health care. By increasing overall access to quality care, via increasing the number of patients who can receive treatment, increasing the outreach in the minority community to advise of available options, increasing educational opportunities to better understand the need for care, and increasing the number of individuals employed to assist patients successfully navigate the continuum of care, the collaborative will reduce the obstacles and disparities most often suffered by racial and ethnic minorities.

Strengthen Clinic-Community Linkages
Clinic-community linkages are the connection between healthcare and community-based wrap-around services in order to address health, healthcare access, and the social determinants of health. Clinic-community linkages leverage the treatment expertise of healthcare systems, the on-the-ground knowledge of community-based organizations and the trust that residents have in those organizations to support a more active approach to chronic disease management to use that data to direct transformation funding to reduce existing health disparities and improve the health of Illinoisans.

This project would improve the integration, efficiency and coordination of care across provider types and levels of care. The collaboration will focus on: creating a seamless transition of care from one level of care to another as the situation warrants and the client’s needs demand it; integration of primary care, substance abuse, mental health and psychopharmacology capabilities that will focus on multiple co morbidities in selected high users’ cohorts using an inordinate number of resources; creation of community resources that will provide wraparound services persons whose conditions are aggravated by SDOH; creating clinical and administrative structures that mitigate, curb, or eliminate barriers to getting the right care to the right patient at the right time; and conducting quality driven meetings to discuss progress/outcomes, facilitate staff education, promote equity initiatives, and promote quality-related information specific to health plan performance. The collaborative will address a majority of HFS’ core measures to aid in the assessment of the quality of care and health outcomes via the following activities: increase in the amount and quality of prenatal and postpartum care; increase cervical cancer and STD screening for expectant mothers; provide assistance with comprehensive diabetes care and HIV viral load suppression for pregnant women; provide initiation and engagement in alcohol and other drug abuse or dependence treatment; increase follow-up after hospitalization for adults with mental illness; effectively use of pharmacotherapy for opioid use disorder; and increase follow-up after emergency department visits or inpatient care for substance abuse disorders and mental health diseases.

The immediate, measurable impacts that will show progress against the obstacles the collaboration is targeting include: number of patients with no prior prenatal care; fetal demise statistics for the hospital; number of patients seeing community health workers; number of Medicaid patients seeking prenatal care at the hospital; number of Medicaid patients seeking behavioral health care at the crisis center and as outpatients; number of people who attend educational offerings; number of interactions with health educators; and patient survey satisfaction results, for such items as ease of access, interaction with provider, quality of care, etc.

These goals have been discussed with, and have the full support of, many members of the Metro East community representing a variety of groups and interests, including racial and ethnic minorities. The following individuals have written letters of support:

State Legislators:
- Senator Christopher Belt – 56th Senate District
• Senator Rachelle Crowe – 56th Senate District
• Representative Jay Hoffman – 113th Legislative District
• Representative Amy Elik – 111th Legislative District

County/City Officials, Law Enforcement and EMS
• Abbott EMS – Leslie Schmidt, Executive Director
• Alton Memorial EMS – Jason Bowman
• Anderson Hospital EMS and Emergency Preparedness – Eric Brandmeyer, Director
• City of Alton Police Department – Marcos Pulido, Chief of Police
• City of Edwardsville Police Department – Jay Keeven, Chief of Police
• Mayor of Alton, Illinois – David Goins
• Glen Carbon Police Department – Todd A. Link, Chief of Police
• Macoupin County Public Health Department – Kent Tarro, CEO/Administrator
• Madison County Sheriff’s Department – Jeff Connor, Chief Deputy
• Madison County Health Department – Toni Corona, Director Public Health
• Madison County Mental Health Board – Deborah Humphrey, Executive Director
• St. Clair County Mental Health Board – Dana Rosenzweig, Executive Director

Hospitals
• Alton Memorial Hospital – Dr. Laura Burton, President of the Medical Staff
• Alton Memorial Hospital – Gary Ayres, Chairman Alton Memorial Board of Directors
• Anderson Hospital – Keith Page, President and CEO
• Christian Hospital – Rick Stevens, President
• Crossroads Community Hospital – William Davis, Interim CEO
• Heartland Regional Medical Center – M. Edward Cunningham, CEO
• HSHS St. Elizabeth’s Hospital – Patty Fischer, President and CEO
• Jersey Community Hospital – Beth King, CEO
• Memorial Hospital – Michael McManus, President
• OSF HealthCare, Saint Anthony’s – Jerry Rumph, President
• Red Bud Regional Hospital – Shane Watson, CEO
• Union County Hospital – James Ferris, CEO

Community Organizations
• Alton Community Unit School District #11 – Dr. Kristie Baumgartner, Superintendent
• Call For Help – James Kellerman, Executive Director
• Centerstone – John G. Markley, Regional CEO
• Chestnut Health Systems – Orville Mercer, Vice President of Strategy and Innovation
• Coordinated Youth and Human Services – Bobbie Smith, Executive Director
• Granite City Fire and EMS – Kenny Prazma, Chief
• Jewel Ride – Tapiwa Muperekhi, Co-Founder and CEO
• Madison County Urban League, Inc. – Brenda Walker McCain, President and CEO
• Midwest Career Source Vocational School – Sulbrena Day, Administrator
• National Alliance on Mental Illness Southwestern Illinois – Kristine Gamm-Smith, Exec Dir
• Oasis Women’s Center – K.M. Trushel, Executive Director
• Overnight Warming Centers in Alton – Dave Burger, Volunteer Coordinator
• RiverBend Growth Association – John Keller, President
• Riverbend Head Start & Family Services – Eugene A. Howell, MPA, President and CEO
• SIHF Healthcare – Larry McCulley, President and CEO
• Southwestern Illinois College – Nick Mance, President
• Southern Illinois University Edwardsville – Dr. Randall Pembrook, Chancellor
• St. John’s Community Care – Nancy Berry, Executive Director
• Tara Cares – Bobbi Pratt, Regional Director of Admissions
• Tarlton Corporation, WBENC-Certified Women’s Business Enterprise – Joseph F. Scarfino, Project Executive

**Timeframe**

The goal of this project is to provide ongoing care well past the time period for this project. Transportation services to and from appointments will begin as soon as funding is secured. Architectural and mechanical plans will be developed, with construction slated to begin in early 2022. Facility completion and opening are planned for late 2023. After construction, funding will be focused on increasing staff to handle the increased capacity. Beyond the five-year grant period, this project will be indefinitely self-sustaining via increased revenues from the increased capacity to provide care and will permanently fill the void in care that currently exists.

**Proposed Project**

The Southern Illinois Comprehensive Care Collaboration is requesting $21,585,263 over the course of the five-year project. This includes $14,483,115 in year one, $3,795,347 in year two, $1,602,588 in year three, $1,520,066 in year four, and $1,568,937 in year five. Of the requested funds, $12,728,443 is for the one-time expense of construction. The budget demonstrates a decrease in reliance on Transformation funding over time as the increase in patient volume and care provided increases and the associated revenue begins to offset the Transformation funds.

The proposed plan includes the following activities that will address the disparities faced by members of the Metro East community:

- Construct a Psychiatric Emergency Crisis Center (“PECC”) in Madison County, Illinois, that will create a centralized location for those in psychiatric crisis to receive immediate assessment and treatment. The PECC will provide inpatient and outpatient services and care coordination.
- Increase capacity to provide care and treatment of expectant mothers by constructing and outfitting an additional operating room that can handle the expected increase in cesarean sections.
- Create a coordinated transportation system to provide transportation to and from healthcare appointments. The collaboration will partner with a transportation company to provide transportation to, to create ease of access to care.
- Provide Mental Health First Aid training to First Responders, Community Leaders, Community Members, and Family Members of those with behavioral health struggles to understand what to do when one encounters someone going through a mental health crisis.
- Provide Care Coordination for behavioral health patients that come through the PECC. The care coordination will help make sure that patients receive follow up care and will help them navigate the healthcare system.
- Create a seamless transition from outpatient to inpatient and outpatient or ED to community as the situation warrants and the client’s needs demand it.
• Integrate primary care, substance abuse, mental health and psychopharmacology capabilities that will focus on multiple comorbidities in selected high users’ cohorts using inordinate number of resources.
• Create community resources that will wrap needed services around persons whose conditions are aggravated by social determinates.
• Facilitate delivery of psychiatric care for the region’s hospitals, emergency medical services, law enforcement and community mental health providers.
• Align with Washington University specialists for Maternal-Fetal Medicine consults for high-risk pregnancy.
• Community Health workers will have available resources such as transportation vouchers and food supplies for at-risk mothers during pregnancy and following infants to year 1.
• Form a partnership between the hospital and local health department and confirm that goals align.
• Coordinate follow-up care between the hospital and WIC for early intervention when the breastfeeding couplet is experiencing problems.
• Ensure that teaching and support done by the hospital and local health department is consistent.
• Raise community awareness by involving the hospital marketing department in creating Baby-Friendly promotional materials.
• Offer consistent education in breastfeeding support and management to hospital and community partners through local health department quarterly trainings.
• Reach out to physicians to offer education on the Baby-Friendly Hospital Initiative, breastfeeding, and community resources.
• Encourage physicians to act as role models for mothers by sharing their positive personal experiences with breastfeeding.
• Establish a system that will make WIC peer counselors more visible in the hospital.
• Proactively attempt to hire staff who reflect the diversity of enrollee demographics.

The project scope includes a 3,000+ square foot Operating Room expansion at Alton to provide increased C-Section coverage. The project will include an expansion of one operating room, the addition of 10 incremental pre- and post-surgery bays, and additional space for pre- and post-surgery support.

Special care nursery staff, additional anesthesia coverage and 24/7 Pediatric coverage highlight the operational changes to meet the State of Illinois Level II nursery requirements.

A Psychiatric Emergency Crisis Center (“PECC”) will be constructed at GRMC with a dedicated entry point for both emergency presentations via EMS and Law Enforcement. Direct admissions from other area hospitals and nursing homes will be incorporated into the design of the PECC. GRMC will provide a separate, dedicated treatment area for patients experiencing acute and chronic psychiatric issues outside of the ER where acute medical emergencies present.

A centralized crisis observation area will triage, stabilize and make disposition plans for individuals in a mental health crisis. Security will be centralized in the PECC to facilitate emergency and direct admissions, as well as visitors to behavioral health services.

The cost to operate the PECC at full capacity at approximately $221,000 per month, which encompasses wages and benefits, supplies, Medical Directorship to oversee the program, purchased services (primarily our billing and collection costs at a % of estimated revenues) and transportation costs that are going to be needed to transport patients from distal ED’s and return them home.

The PECC will partner with Chestnut Health Systems to provide additional outpatient care. Chestnut Health
Systems is a 501c3 not for profit organization founded in 1973 that works with approximately 15000 unique clients per year. CHS offers primary care, a full spectrum of substance abuse treatment, and comprehensive mental health care through its Federally Qualified Health Center, licensed Community Mental Health Center, and Certified Community Behavioral Health Clinic (“CCBHC”). CCBHC’s provide a comprehensive range of mental health and substance use disorder services to vulnerable individuals. They must directly provide (or contract with partner organizations to provide) nine types of services, with an emphasis on the provision of 24-hour crisis care, evidence-based practices, care coordination with local primary care and hospital partners, and integration with physical health care. Chestnut is the largest residential provider of services to persons who are seriously mentally ill south of Chicago. In addition to its facility bound services, Chestnut is located in 120 schools across the state. The organization operates 7 major divisions of work, in 25 locations ranging from the Metro East, to Chicago.

Chestnut staff members will be located in the PECC for the purposes of improving the ability of patients to access community behavioral health services following discharge and would have a team of people at Chestnut’s facilities that would provide the further treatment these patients need, as well assist them in procuring other community services available to them. In doing so, they would ensure that those in need received the support and treatments needed to maintain improved mental health status of these patients and reduce reliance on higher cost PECC and inpatient services.

The total estimated number of new employees that will be hired over the duration of the project is approximately 74. As services continue to expand, additional employment opportunities will develop. Those positions will be filled by members of the community that mirror the community served. The collaboration members will continue to support students in the medical fields of nursing, emergency medical technicians, social work, and advanced practice nurses with the goal of growing the pool of minority candidates for potential employment.

One of the deterrents to care is transportation to behavioral health services such as intensive outpatient programs, individual counseling sessions and also when discharged from an inpatient behavioral health stay and the need to return to home. As part of this grant request, the SICCC is proposing a voucher program with area transportation companies whereby the collaboration would pay for transportation in pre-arranged contractual relationships with cab, EMS, and other transport avenues. Many patients needing outpatient behavioral health services refuse the services because they have no means of transportation to and from such programs. The SICCC is asking for $250,000 annually as part of the grant to establish a transportation program for behavioral health patients needing this service.

The proposal aligns with and supports four out of the five Department pillars of improvement, with an emphasis on Maternal/Child Health and Adult Behavioral Health. It also attempts to deliver the highest-quality, most cost-effective services possible by establishing a framework for ongoing assessment and the identification of potential opportunities for healthcare coordination and improvement. The proposal prioritizes equity across all program goals as the aim for improvement efforts by analyzing data to strategically pinpoint improvement needs. The proposal seeks to provide better care to the Metro East by improving population health and access to care and increase effective care coordination. It also addresses the Health People/Health Communities initiative because it attempts to improve participation in preventive care and screenings; promote integration of behavioral and physical healthcare; create consumer-centric healthcare delivery system; implement evidence-based interventions to reduce disparities; and invests in the development and use of health equity performance measures.

The proposal is realistic and adequately funded. The collaborative has a very specific goal of increasing access to quality obstetrical and behavioral health care and has outlined a realistic means of achieving that goal. Additionally, the collaborative has decided on projects that will be self-sustaining within the timeframe for the project.
In support of the Illinois HFS Quality Framework Goals for Better Care, quality metrics demonstrating improved access to care and increased effective of care coordination will be gathered. Proposed metrics will be tracked via EHR software and Medicaid utilization data, as well as physical counts of individuals utilizing the offerings.

Proposed metrics include: number of women with no prenatal care; number of C-Section rate for low-risk women with no prior births; rate of preterm birth and infant mortality prior to discharge; rate of postpartum visits; overall number of patients provided behavioral health care and comparative utilization rates; 7-day and 30-day follow-up after high-intensity care for substance use disorder; 7-day and 30-day follow-up after inpatient hospitalization visit to the emergency department for behavioral health services that result in hospitalization; overall number and length of behavioral health hospitalizations; number of repeat behavioral health hospitalizations within 30 and 90 days of initial admission; and overall number and comparative utilization rates of community-based program offerings.

The proposed budget will decrease reliance on Transformation funding over time because payer reimbursements for services will increase over time. The project is designed to increase capacity for care. After the initial investment to expand and improve the facilities providing care, those sites will increase the volume of Medicaid and uninsured patients. The increase in volume will also result in an increase in patients insured by traditional plans, all of which will help to cover the cost of continuing operations.

The members of the SICCC spent substantial time conferring and arrived at a shared understanding of the governance structure and process that will successfully join the collaborators into a unified initiative to accomplish the goals of the mission. Serious thought has been given to the execution, management, accountability, and inter-reliance of the participating members of the collaboration.

The collaboration members will execute a binding contractual agreement prior to receipt of funds, which will be approved by each entity’s governing authority. The agreement will set forth the governance structure in detail, beginning with the formation of a diverse and inclusive Board of Directors with a commitment to equity. The Board of Directors will be comprised of members from all collaborators, as well as members of the community, to share the responsibility of governance over the project. The Board will have the following composition: four representatives appointed by Alton Memorial Hospital, including one community member with expertise in mother-child health issues; four representatives appointed by Gateway Regional Medical Center, including one community member well versed in the behavioral health issues in the community; one representative appointed by Chestnut Health Systems; and one appointed by Southern Illinois Healthcare Foundation (“SIHF Healthcare”), a Federally Qualified Health Center with locations throughout the Metro East that provides care on a sliding fee scale to many of the community’s vulnerable obstetrical patients.

Additionally, the Board plans to use Advisory Committees to further engage members of the community in key decision-making processes. The committees will serve to engage key stakeholders from the service, public and private sector in an active review of community resources and opportunities. It is the hope of the collaborators to find advisory committee members with diversity in experience, gender, race, and age that have knowledge of and membership within the communities served; knowledge of the collaboration’s work; prior involvement with one or more of the collaborators; and passion for this important mission.

Initially, the Board will approve policies drafted by collaborators to be followed throughout the project and determine agreed upon priorities of the collaborative. The Board will oversee the construction projects and will receive updates on the progress and milestones and will meet on a regular basis to review financial and operational performance. Once construction of the facilities is complete, the Board will continue to confer and manage the project to ensure alignment with the original goals.

The collaborating entities have chosen to outline an agreed upon set of metrics that will set specific goals,
benchmarks and expected results. The agreement will also outline the scope of participation for each entity, including responsibilities of each entity and staffing commitment. The SICCC Board of Directors will hold the collaborative participants accountable for their actions, decisions, and implementation of said decisions. Some of the mechanisms that will be put in place to ensure adherence to policies and procedures include: creating clearly defined and written roles and responsibilities for key members; ensuring a safe environment for individuals to share ideas; regular progress check-ins to track performance and give feedback; regular meetings, at various levels of leadership, to stay aligned with the goals of the project; and regular policy and process review to evaluate what is working and opportunities for improvement.

The collaborative has chosen to execute a binding contractual agreement endorsed by the leadership of each organization, rather than creating an umbrella legal entity. The agreement will create a Board of Directors for the collaborative with a composition that mirrors the racial and ethnic make-up of the community it serves. Additionally, the Board plans on recruiting members of the community and representatives from local community-based organizations to serve on Advisory Committees to be further connected to the community and the needs of its most vulnerable members.

Both partners in the collaborative have agreed that Alton Memorial Hospital will serve as the fiscal agent. The SICCC Board will be tasked with ensuring direct payments to providers within the collaboration are used for the program’s intended purpose. The Board will ensure internal fiscal integrity measures are put in place and will implement safeguards to ensure that the funds are distributed and used for the collaborative’s intended purpose. Fund distribution policy and procedures will be determined and followed, and Alton Memorial will be held responsible for following those policies to ensure timely distribution of funds.

During the initial phase of the project the Board will be given updates regarding the capital improvement projects and all construction funds will be reviewed and approved to ensure accurate tracking of payments and appropriate use of funds. Once the facilities are opened, the Board will continue to ensure funding is used properly by continually assessing utilization of service rates and whether the collaborative continues to meet or exceed pre-determined quality metrics.

Conclusion

With the help of the Illinois Department of Healthcare and Family Services Health Transformation Collaboratives initiative, the Southern Illinois Comprehensive Care Collaboration will provide quality Obstetrical and Behavioral Health care to a part of Illinois that needs this project to overcome the obstacles that have been in place for many years. This will give the racial and minority groups in the area a chance at even footing in their care and treatment with their fellow Illinoisans. The collaborative is happy to answer any follow up questions IDHFS may have about the goals or strategies of this important mission.

3) Governance Structure

Structure and Processes

1. Please describe in detail the governance structure of your collaboration and explain how authority and responsibility will be distributed and shared. How will policies be formulated and priorities set?

The members of the Southern Illinois Comprehensive Care Collaboration ("SICCC") spent substantial time conferring and arrived at a shared understanding of the governance structure and process that will successfully join the collaborators into a unified initiative to accomplish the goals of the mission. Serious thought has been given to the execution, management, accountability, and inter-reliance of the
participating members of the collaboration.

The collaboration members will execute a binding contractual agreement prior to receipt of funds, which will be approved by each entity’s governing authority. The agreement will set forth the governance structure in detail, beginning with the formation of a diverse and inclusive Board of Directors with a commitment to equity. The Board of Directors will be comprised of members from all collaborators, as well as members of the community, to share the responsibility of governance over the project. The Board will have the following composition: four representatives appointed by Alton Memorial Hospital, including one community member with expertise in mother-child health issues; four representatives appointed by Gateway Regional Medical Center, including one community member well versed in the behavioral health issues in the community; one representative appointed by Chestnut Health Systems, which offers primary care, a full spectrum of substance abuse treatment, and comprehensive mental health care through its Federally Qualified Health Center, licensed Community Mental Health Center, and Certified Community Behavioral Health Clinic; and one appointed by Southern Illinois Healthcare Foundation (“SIHF Healthcare”), a Federally Qualified Health Center with locations throughout Madison County and the St. Louis Metro East that provides care on a sliding fee scale to many of the community’s vulnerable obstetrical patients.

Additionally, the Board plans to use Advisory Committees to further engage members of the community in key decision-making processes. The committees will serve to engage key stakeholders from the service, public and private sector in an active review of community resources and opportunities. It is the hope of the collaborators to find advisory committee members with diversity in experience, gender, race, and age that have knowledge of and membership within the communities served; knowledge of the collaboration’s work; prior involvement with one or more of the collaborators; and passion for this important mission.

Initially, the Board will approve policies drafted by collaborators to be followed throughout the project and determine agreed upon priorities of the collaborative. The Board will oversee the construction projects and will receive updates on the progress and milestones and will meet on a regular basis to review financial and operational performance. Once construction of the facilities is complete, the Board will continue to confer and manage the project to ensure alignment with the original goals.

Accountability

2. How will collaborating entities be made accountable for achieving desired outcomes? How will the collaboration be made accountable for acting prudently, ethically, legally, and with extensive participation from each participating entity? What methods will be used to enforce policy and procedure adherence?

The collaborating entities have chosen to outline an agreed upon set of metrics that will set specific goals, benchmarks and expected results. The agreement will also outline the scope of participation for each entity, including responsibilities of each entity and staffing commitment. The SICCC Board of Directors will hold the collaborative participants accountable for their actions, decisions, and implementation of said decisions. Some of the mechanisms that will be put in place to ensure adherence to policies and procedures include: creating clearly defined and written roles and responsibilities for key members; ensuring a safe environment for individuals to share ideas; regular progress check-ins to track performance and give feedback; regular meetings, at various levels of leadership, to stay aligned with the goals of the project; and regular policy and process review to evaluate what is working and opportunities for improvement.
New Legal Entity

3. Will an umbrella legal entity be created as a result of your collaboration?

No

Payments and Administration of Funds

4. How will you ensure direct payments to providers within your collaboration are utilized for your proposed program’s intended purpose? If the plan is to use a fiscal intermediary, please specify.

The collaborative has chosen to execute a binding contractual agreement endorsed by the leadership of each organization, rather than creating an umbrella legal entity. The agreement will create a Board of Directors for the collaborative with a composition that mirrors the racial and ethnic make-up of the community it serves. Additionally, the Board plans on recruiting members of the community and representatives from local community-based organizations to serve on Advisory Committees to be further connected to the community and the needs of its most vulnerable members.

Both partners in the collaborative have agreed that Alton Memorial Hospital will serve as the fiscal agent. The SICCC Board will be tasked with ensuring direct payments to providers within the collaboration are used for the program’s intended purpose. The Board will ensure internal fiscal integrity measures are put in place and will implement safeguards to ensure that the funds are distributed and used for the collaborative’s intended purpose. Fund distribution policy and procedures will be determined and followed, and Alton Memorial will be held responsible for following those policies to ensure timely distribution of funds.

During the initial phase of the project the Board will be given updates regarding the capital improvement projects and all construction funds will be reviewed and approved to ensure accurate tracking of payments and appropriate use of funds. Once the facilities are opened, the Board will continue to ensure funding is used properly by continually assessing utilization of service rates and whether the collaborative continues to meet or exceed pre-determined quality metrics.

4) Racial Equity

High-Level Narrative

A fundamental focus of healthcare transformation is racial equity. Please provide a high level description of how the design of your proposal incorporates racial equity. (Greater detail will be requested in the questions below.)

The project will incorporate racial equity by focusing on outreach, education, treatment and continuity of care of minority members of the community. Studies have shown that racial and ethnic minorities have been historically underserved in prenatal and behavioral health care. By increasing overall access to quality care, via increasing the number of patients who can receive treatment, increasing the outreach in the minority community to advise of available options, increasing educational opportunities to better understand the need for care, and increasing the number of individuals employed to assist patients successfully navigate the continuum of care, the collaborative will reduce the obstacles and disparities most often suffered by racial and ethnic minorities.
Racial Equity Impact Assessment Questions

1. Which racial/ethnic groups may be most affected by and concerned with the issues related to this proposal?

Racial and ethnic minority groups in the community are most affected by and concerned with the issues this collaboration seeks to address.

For example, in Illinois, Black women were about three times as likely to die from a pregnancy-related condition as White women. If babies of Black women had fetal and infant mortality rates that were the same as the babies of low-risk White women, 212 Black fetal and infant deaths would be prevented each year in the State of Illinois.

While studies have shown that the racial and ethnic disparities in how Illinois adults report experiencing poor mental health for more than one week in a month, mental health treatment for racial and ethnic minorities was significantly lower than White counterparts.

2. Have stakeholders from different racial/ethnic groups — especially those most adversely affected or from vulnerable communities — been informed, meaningfully involved and authentically represented in the development of this proposal? Who’s missing and how can they be engaged?

Stakeholders from the racial/ethnic groups most adversely affected have been informed, meaningfully involved and authentically represented in the development of this proposal. The views of the minority community have and will continue to be considered by engaging diverse representation of those communities in the area. This collaborative was designed in partnership with the racial and ethnic groups most adversely affected. The Board of Directors will have community member representatives and the advisory committees used by the Board will engage racial and ethnic minorities in project development decisions.

3. Which racial/ethnic groups are currently most advantaged and most disadvantaged by the issues this proposal seeks to address? How are they affected differently? What quantitative and qualitative evidence of inequality exists? What evidence is missing or needed?

The most disadvantaged racial/ethnic groups are individuals belong to racial and ethnic minorities. Infant mortality rates are lower and behavioral health interventions and treatment are higher for White residents. Additional evidence that would be helpful would include statistics related to knowledge of available resources to better inform how best to ensure all members of the community can access needed care.

4. What factors may be producing and perpetuating racial inequities associated with this issue? How did the inequities arise? Are they expanding or narrowing? Does the proposal address root causes? If not, how could it?

Factors that may be producing and perpetuating racial inequities associated with this issue include a lack of quality care in the area and a lack of knowledge about the available resources. These inequities arose years ago, were perpetuated through generations, and continue to expand. This proposal addresses the root cause of the inequities by increasing access to care in the community and providing education to community members on how to take advantage of available resources.
5. What does the proposal seek to accomplish? Will it reduce disparities or discrimination?

This proposal seeks to increase the availability and quality of obstetrical and behavioral health care services in Madison County, the Metro East, and all of Southern Illinois by increasing the capacity for those services at the collaborative hospitals, and to increase the quality of the continuum of care for those individuals seeking treatment. This will reduce disparities and discrimination by increasing the number of individuals who can seek care in the community and decreasing the obstacles to care usually faced by its most vulnerable members.

6. What are negative or unforeseen consequences and positive impacts/opportunities for equity as a result of this proposal? Which racial/ethnic groups could be harmed or could benefit? How could adverse impacts be prevented/minimized and equitable opportunities be maximized?

A negative or unforeseen consequence of this project could be the inability to reach minority members of the community. Educating residents on available services and when and how to utilize those services will be the key to success for this project. Adverse impacts could be prevented or minimized, and equitable opportunities maximized by educating the racial and ethnic minority population on available resources and when to seek care and treatment.

7. Are there better ways to reduce racial disparities and advance racial equity? What provisions could be changed or added to ensure positive impacts on racial equity and inclusion?

What is needed in Madison and St. Clair counties is access to quality obstetrical and behavioral health care for its underserved residents. This collaborative will provide that care. Increased access to care for racial groups currently not receiving quality care is the best way to reduce racial disparities and advance racial equity in the setting of access to quality care. Additional provisions that could be added to ensure positive impacts on racial equity and inclusion include specific monitoring of usage of the care by racial and ethnic minority members of the community, and specific targeting of marketing and outreach to those individuals to ensure that they are aware of all resources available.

8. Is the proposal realistic, adequately funded, with mechanisms to ensure successful implementation and enforcement? Are there provisions to ensure ongoing data collection, public reporting, stakeholder participation and public accountability?

The proposal is realistic and adequately funded. The collaborative has a very specific goal of increasing access to quality obstetrical and behavioral health care and has outlined a realistic means of achieving that goal. Additionally, the collaborative has decided on projects that will be self-sustaining within the timeframe for the project.

There are mechanisms in place to ensure successful implementation and enforcement. A Board of Directors will lead the project and ensure that the funds are used appropriately and to the fullest advantage. There are provisions to ensure ongoing data collection, public reporting, stakeholder participation and public accountability. The Board of Directors will include members of the community in advisory committees to ensure that the needs of the community remain always at the forefront. There are adequate and easily measurable methods to ensure that the needs of the community are being met by the project and that the underserved members of the community are seeing the maximum potential benefit.
9. What are the success indicators and progress benchmarks? How will impacts be documented and evaluated? How will the level, diversity and quality of ongoing stakeholder engagement be assessed?

The success indicators will be an increase in the numbers of individuals who receive obstetrical and behavioral health care. This will be measured by tracking the increase in the number of individuals who receive care over time as the project continues to grow and reach its full potential. Additionally, the number of Medicaid patients to use the services will be tracked, which will show an increase in the number of vulnerable patients who receive care. Quality of care can be measured through satisfaction surveys and community feedback. The level, diversity and quality of ongoing stakeholder engagement will be assessed regularly by the SICCC Board of Directors, and the Board will effectuate changes as needed to ensure the goals of the project are met.

5) Community Input

Service Area of the Proposed Intervention

1. Identify your service area in general terms (e.g., “West Chicago”, “East St. Louis Metro Area”, “Southeastern Illinois”).

St. Louis Metro East Area

2. Please select all Illinois counties that are in your service area. (NOTE: Selecting a county does not mean that your intervention must service the entire county.)

- Madison, St. Clair

3. Please list all zip codes in your service area, separated by commas.

   62001, 62048, 62095, 62223, 62257, 62002, 62058, 62097, 62225, 62258, 62010, 62059, 62201, 62226, 62260, 62018, 62060, 62203, 62232, 62264, 62021, 62061, 62204, 62234, 62269, 62024, 62062, 62205, 62239, 62281, 62025, 62067, 62206, 62240, 62282, 62034, 62074, 62207, 62243, 62285, 62035, 62084, 62208, 62249, 62289, 62040, 62087, 62220, 62254, 62293, 62046, 62090, 62221, 62255

Community Input

1. Describe the process you have followed to seek input from your community and what community needs it highlighted.

   The plans and goals of the project have been discussed with, and have the full support of, many members of the Metro East community representing a variety of groups and interests, including racial and ethnic minorities. Letters of support have been received from Illinois state representatives and senators, county and city officials, law enforcement agencies, EMS, hospitals, and local community organizations.

Input from Elected Officials

1. Did your collaborative consult elected officials as you developed your proposal?

   Yes
1A. If you consulted Illinois federal or state legislators, please select all legislators whom you consulted.

Senator Christopher Belt – 56th Senate District
Senator Rachelle Crowe – 56th Senate District
Representative Jay Hoffman – 113th Legislative District
Representative Amy Elik – 111th Legislative District

1B. If you consulted local officials, please list their names and titles here.

Abbott EMS – Leslie Schmidt, Executive Director
Alton Memorial EMS – Jason Bowman
Anderson Hospital EMS and Emergency Preparedness – Eric Brandmeyer, Director
City of Alton Police Department – Marcos Pulido, Chief of Police
City of Edwardsville Police Department – Jay Keeven, Chief of Police
Mayor of Alton, Illinois – David Goins
Glen Carbon Police Department – Todd A. Link, Chief of Police
Macoupin County Public Health Department – Kent Tarro, CEO/Administrator
Madison County Sheriff’s Department – Jeff Connor, Chief Deputy
Madison County Health Department – Toni Corona, Director Public Health
Madison County Mental Health Board – Deborah Humphrey, Executive Director
St. Clair County Mental Health Board – Dana Rosenzweig, Executive Director

6) Data Support

1. Describe the data used to design your proposal and the methodology of collection.


7) Health Equity and Outcomes

1. Name the specific healthcare disparities you are targeting in your service area, including by race and ethnicity. Describe the causes of these disparities that your project specifically seeks to address and explain why you have chosen to address these causes.

This collaboration is targeting the following healthcare disparities: access to care and poor quality of care; access to care coordination, or chronic disease management; access to a primary care physician for pregnant women; access to behavioral health physician; and poorer quality patient-provider interactions.

2. What activities will your collaborative undertake to address the disparities mentioned above? What immediate, measurable, impacts will follow from these activities that will show progress against the obstacles or barriers you are targeting?

The collaborative will address a majority of HFS’ core measures to aid in the assessment of the quality of care and health outcomes via the following activities: increase in the amount and quality of prenatal
and postpartum care; increase cervical cancer and STD screening for expectant mothers; provide assistance with comprehensive diabetes care and HIV viral load suppression for pregnant women; provide initiation and engagement in alcohol and other drug abuse or dependence treatment; increase follow-up after hospitalization for adults with mental illness; effectively use of pharmacotherapy for opioid use disorder; and increase follow-up after emergency department visits or inpatient care for substance abuse disorders and mental health diseases.

The immediate, measurable impacts that will show progress against the obstacles the collaboration is targeting include: the number of patients obtaining women’s’ health primary care; fetal demise statistics; number of patients seeing community health worker; number of Medicaid patients seeking prenatal care; number of Medicaid patients seeking behavioral health care; number of people who attend educational offerings; number of interactions with health educators; and patient survey satisfaction results, for such items as ease of access, interaction with provider, quality of care, etc.

3. Why will the activities you propose lead to the impact you intend to have?

The proposed activities will decrease healthcare disparities and increase health equity because they target specific deficiencies in obstetrical and behavioral health care in the area.

8) Access to Care

1. Name the specific obstacles or barriers to healthcare access you are targeting in your service area. Describe the causes of these obstacles that your project specifically seeks to address and explain why you have chosen to address these causes.

The obstacles to healthcare access the collaborative are targeting include health literacy/education, economic, healthcare service, sociocultural, and environmental barriers.

The causes of these obstacles that this project specifically seeks to address are lack of knowledge regarding care options; inability to pay for treatment or lack of understanding of how to access programs or insurance that offset the cost of care; stigma associated with receiving treatment for mental health or substance abuse issues; lack of transportation to and from health appointments; limited appointment availability; and geographic clinician shortage. These causes were chosen to be addressed because obstetric and behavioral health care are both areas that are significantly lacking in the community. Many people are unable to get adequate care because they simply do not know where or how to find it. People with mental health issues will not seek care due to the stigma or fear and shame associated with it. Others are limited by the ability to afford care and the associated costs, such as transportation. The collaborative decided there was a need in the area for quality mother/baby and behavioral health care and chose to address as many barriers to that care as reasonably possible.

2. What activities will your collaborative undertake to address the disparities mentioned above? What immediate, measurable, impacts will follow from these activities that will show progress against the obstacles or barriers you are targeting?

The collaborative will undertake the following activities to address the disparities faced by the vulnerable members of the collaborative’s community: increase the availability and effectiveness of care in the community; increase the proportion of adults who get recommended evidence-based preventive health care for both obstetrical and behavioral health; increase the proportion of pregnant women who receive early and adequate prenatal care; reduce the number of people who can’t get behavioral health care when they need it; increase the ability of obstetrical and behavioral health
professionals to provide more high-quality care to those who need it; increase the amount and quality of community outreach regarding services; increase community outreach to promote participation in health education, behavioral health education, prevention and health insurance programs; increase the use of community health workers; increase the quantity and diversity of clinicians; and develop, implement and evaluate interventions to prevent fetal demise and its risk factors.

3. Why will the activities you propose lead to the impact you intend to have?

The proposed activities will lead to the intended impact because they directly address the reasons vulnerable members of the community do not have access to care.

9) Social Determinants of Health

1. Name the specific social determinants of health you are targeting in your service area. Describe the causes of these social determinants that your project specifically seeks to address and explain why you have chosen to address these causes.

This collaborative was formed because studies show that the social determinants of health have a higher impact on population health than healthcare and that a higher ratio of social service spending versus healthcare spending results in improved population health. In the Metro East, pregnancy and behavioral health are the first and second reasons individuals seek medical care. SICCC will target SDOH that center around mother/baby and behavioral health healthcare access and quality, transportation, healthcare related educational opportunities, and social support and community inclusivity.

The causes of these SDOH that this project specifically seeks to address include: lack of access to quality care in the community; lack of transportation to and from healthcare appointments; lack of education and knowledge of how to navigate the healthcare system, when professional evaluation is needed, and how to go about paying for the care sought; lack of support throughout the healthcare continuum; lack of understanding of certain disease states, especially in the behavioral health realm; lack of knowledge in the community about how to deal with or treat those with behavioral health issues; lack of knowledge about available resources.

2. What activities will your collaborative undertake to address the disparities mentioned above? What immediate, measurable, impacts will follow from these activities that will show progress against the obstacles or barriers you are targeting?

The proposed plan includes the following activities that will address the disparities faced by members of the Metro East community:

- Construct a Psychiatric Emergency Crisis Center (“PECC”) in Madison County, Illinois, that will create a centralized location for those in psychiatric crisis to receive immediate assessment and treatment. The PECC will provide inpatient and outpatient services and care coordination.
- Increase capacity to provide care and treatment of expectant mothers by constructing and outfitting an additional operating room that can handle the expected increase in cesarean sections.
- Create a coordinated transportation system to provide transportation to and from healthcare appointments. The collaboration will partner with a transportation company to provide transportation to, to create ease of access to care.
• Provide Mental Health First Aid training to First Responders, Community Leaders, Community Members, and Family Members of those with behavioral health struggles to understand what to do when one encounters someone going through a mental health crisis.

• Provide Care Coordination for behavioral health patients. Chestnut Health Systems will provide care coordination for patients that come through the PECC. The care coordination will help make sure that patients receive follow up care and will help them navigate the healthcare system.

• Create a seamless transition from outpatient to inpatient and outpatient or ED to community as the situation warrants and the client’s needs demand it.

• Integrate primary care, substance abuse, mental health and psychopharmacology capabilities that will focus on multiple comorbidities in selected high users’ cohorts using inordinate number of resources.

• Create community resources that will wrap needed services around persons whose conditions are aggravated by social determinates.

• Facilitate delivery of psychiatric care for the region’s hospitals, emergency medical services, law enforcement and community mental health providers.

• Align with Washington University specialists for Maternal-Fetal Medicine consults for high-risk pregnancy.

• Community Health workers will have available resources such as transportation vouchers and food supplies for at-risk mothers during pregnancy and following infants to year 1.

• Form a partnership between the hospital and local health department and confirm that goals align.

• Coordinate follow-up care between the hospital and WIC for early intervention when the breastfeeding couplet is experiencing problems.

• Ensure that teaching and support done by the hospital and local health department is consistent.

• Raise community awareness by involving the hospital marketing department in creating Baby-Friendly promotional materials.

• Offer consistent education in breastfeeding support and management to hospital and community partners through local health department quarterly trainings.

• Reach out to physicians to offer education on the Baby-Friendly Hospital Initiative, breastfeeding, and community resources.

• Encourage physicians to act as role models for mothers by sharing their positive personal experiences with breastfeeding.

• Establish a system that will make WIC peer counselors more visible in the hospital.

• Proactively attempt to hire staff who reflect the diversity of enrollee demographics.

3. Why will the activities you propose lead to the impact you intend to have?

These activities will have the intended impact because they are all specific, quantifiable activities that target some of the main reasons why certain members of the community are unable to seek the care they need. The proposed activities will improve healthcare access and quality because they target major barriers to care.

10) **Care Integration and Coordination**

1. Describe how your proposal improves the integration, efficiency, and coordination of care across provider types and levels of care.

This project would improve the integration, efficiency and coordination of care across provider types
and levels of care. The collaboration will focus on:

- Creating a seamless transition of care from one level of care to another as the situation warrants and the client’s needs demand it.
- Integration of primary care, substance abuse, mental health and psychopharmacology capabilities that will focus on multiple co morbidities in selected high users’ cohorts using an inordinate number of resources.
- Creation of community resources that will provide wraparound services persons whose conditions are aggravated by SDOH.
- Creating clinical and administrative structures that mitigate, curb, or eliminate barriers to getting the right care to the right patient at the right time.
- Conducting quality driven meetings to discuss progress/outcomes, facilitate staff education, promote equity initiatives, and promote quality-related information specific to health plan performance

2. Do you plan to hire community health workers or care coordinators as part of your intervention?

Yes

2A. Please submit care coordination caseload numbers and cost per caseload (stratified by risk, if applicable).

The collaborators anticipate a high-risk pregnancy caseload of 5 per month and providing service to 7 newborns per month until age one. It is estimated that Obstetrical care will be up to a 150-patient caseload by end of year two, with annual caseload cost of approximately $300,000.

The PECC will provide care coordination and support a smooth transition back into the community or to the next level of care. The care coordination caseload numbers are approximately 1 to 10-15 and the cost per caseload is approximately $105,000 per year. There are five staff needed to handle the caseload, with each having a salary of $85,000. Other considerations related to care coordination include transportation ($18,000), Medication Assistance ($18,000), and Food/Clothing ($18,000), for a total cost of $479,000.

3. Are there any managed care organizations in your collaborative?

No

3A. If no, do you plan to integrate and work with managed care organizations?

No

11) Minority Participation

1. Please provide a list of entities that will be a part of your collaboration/partnership that are certified by the Illinois Business Enterprise Program (BEP) and/or not-for-profit entities majorly controlled and managed by minorities that will be used on the project as subcontractors or equity partners.

The collaborative is committed to maximizing the use of minority-controlled businesses at every level of the project from actively securing minority contractors for the construction, to partnering with minority owned transportation vendors to provide non-emergent medical transportation in the Metro East region. Opportunity for use of BEP businesses will be explored as a matter of course for all subcontracting needs.
JewelRide LLC, Edwardsville, Illinois, a non-emergency medical transportation company, is an Illinois CMS certified BEP for Minority, Females and Persons with Disabilities.

2. Please describe the respective role of each of the entities listed above, and specify whether they will have a role only during the implementation of your proposal or if they will have a role in the ongoing operation of your transformed delivery system.

JewelRide LLC will have an ongoing role in the project by providing the critical service of patient transport to and from the facilities, providers and programs that are the focus of this project. This will increase access to healthcare for the disadvantaged members of the community who lack reliable transportation to and from their appointments.

12) Jobs

Existing Employees

1. For collaborating providers, please provide data on the number of existing employees delineated by job category, including the zip codes of the employees’ residence and benchmarks for the continued maintenance and improvement of these job levels.

In total, the members of the collaborative currently have 1,704 employees. No jobs will be eliminated as a result of this collaboration and new employment opportunities will become available over the course of the project.

New Employment Opportunities

2. Please estimate the number of new employees that will be hired over the duration of your proposal.

74

3. Describe any new employment opportunities in the future alignment of your proposal and how those opportunities reflect the community you serve.

The total estimated number of new employees that will be hired over the duration of the project is 74. This number will be broken down as follows:

PECC at Gateway Regional Medical Center:

The PECC will need to hire additional clinical and non-clinical staff to support the additional patient population, including Registered Nurses, Licensed Clinical Social Workers, Psychiatric Advanced Practice Nurses, Behavioral Health Technicians, and a Director for the PECC to run the program. The breakdown of those staff is as follows:

An additional 10 PECC jobs will be created in ancillary support service areas (Dietary Aids, Environmental Service Techs, Lab Techs, Pharmacy Techs) to accommodate the increased need in both the PECC and the psychiatric inpatient units to support the influx of patients anticipated with the opening of the program.
OB Services at Alton Memorial Hospital:

This project would include hiring additional Special Care Nursery Staff to accommodate the increase in babies being born in the facility, Community Health Workers to assist moms-to-be and new moms with obtaining appropriate care and resources to promote healthy pregnancies and infants, and a Registered Nurse (RN) Program Lead to ensure that the program runs smoothly and meets its goals.

In total, we anticipate hiring 74 new FTEs as a result of this collaboration, broken down as follows:

<table>
<thead>
<tr>
<th>Position</th>
<th>Number of Full-Time Equivalent (FTE) Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Health</td>
<td></td>
</tr>
<tr>
<td>PECC Director</td>
<td>1 FTE</td>
</tr>
<tr>
<td>Psychiatric Advanced Practice Nurse</td>
<td>5 FTE</td>
</tr>
<tr>
<td>Licensed Clinical Social Worker</td>
<td>5 FTE</td>
</tr>
<tr>
<td>Psych Unit Registered Nurse</td>
<td>15 FTE</td>
</tr>
<tr>
<td>Other Registered Nurse</td>
<td>10 FTE</td>
</tr>
<tr>
<td>Psych Unit Behavioral Health Technician</td>
<td>10 FTE</td>
</tr>
<tr>
<td>Other Behavioral Health Technician</td>
<td>10 FTE</td>
</tr>
<tr>
<td>Ancillary Services</td>
<td>10 FTE</td>
</tr>
<tr>
<td>Obstetrical Services</td>
<td></td>
</tr>
<tr>
<td>RN Program Lead</td>
<td>1 FTE</td>
</tr>
<tr>
<td>Special Care Nursery Staff</td>
<td>5 FTE</td>
</tr>
<tr>
<td>Community Health Worker</td>
<td>2 FTE</td>
</tr>
<tr>
<td>TOTAL:</td>
<td>74 FTE</td>
</tr>
</tbody>
</table>

As services continue to expand, additional employment opportunities will develop. Those positions will be filled by members of the community that mirror the community served.

4. Please describe any planned activities for workforce development in the project.

The collaboration members will continue to support students in the medical fields of nursing, emergency medical technicians, social work, and advanced practice nurses with the goal of growing the pool of minority candidates for potential employment.

13) Quality Metrics

Alignment with HFS Quality Pillars

1. Tell us how your proposal aligns with the pillars and the overall vision for improvement in the Department’s Quality Strategy.

The proposal aligns with and supports four out of the five Department pillars of improvement, with an emphasis on Maternal/Child Health and Adult Behavioral Health. It also attempts to deliver the highest-quality, most cost-effective services possible by establishing a framework for ongoing assessment and the identification of potential opportunities for healthcare coordination and improvement. The proposal prioritizes equity across all program goals as the aim for improvement efforts by analyzing data to
strategically pinpoint improvement needs. The proposal seeks to provide better care to the Metro East by improving population health and access to care, and increase effective care coordination. It also addresses the Health People/Health Communities initiative because it attempts to improve participation in preventive care and screenings; promote integration of behavioral and physical healthcare; create consumer-centric healthcare delivery system; implement evidence-based interventions to reduce disparities; and invests in the development and use of health equity performance measures.

In support of the Illinois HFS Quality Framework Goals for Better Care, quality metrics demonstrating improved access to care and increased effective of care coordination will be gathered. Proposed metrics will be tracked via EHR software and Medicaid utilization data, as well as physical counts of individuals utilizing the offerings.

Proposed metrics include: number of women with no prenatal care; number of C-Section rate for low-risk women with no prior births; rate of preterm birth and infant mortality prior to discharge; rate of postpartum visits; overall number of patients provided behavioral health care and comparative utilization rates; 7-day and 30-day follow-up after high-intensity care for substance use disorder; 7-day and 30-day follow-up after inpatient hospitalization visit to the emergency department for behavioral health services that result in hospitalization; overall number and length of behavioral health hospitalizations; number of repeat behavioral health hospitalizations within 30 and 90 days of initial admission.; and overall number and comparative utilization rates of community-based program offerings.

2. Does your proposal align with any of the following Pillars of Improvement?

2A. Maternal and Child Health?

Yes

Maternal and Child Health: Propose measurable quality metrics you propose to be accountable for improving. You should choose at least one metric from the quality strategy.

Proposed measurable quality metrics include: women who have received no prenatal care; C-Section rate for low-risk women with no prior births; improved maternal and infant health outcomes; reduced preterm birth rate and infant mortality prior to discharge; and improved rate and quality of postpartum visits.

2B. Adult Behavioral Health?

Yes

Adult Behavioral Health: Propose measurable quality metrics you propose to be accountable for improving. You should choose at least one metric from the quality strategy.

Measurable quality metrics include: 7-day and 30-day follow-up after high-intensity care for substance use disorder; pharmacotherapy for opioid use disorder; crisis response services that result in hospitalization; visits to the emergency department for behavioral health services that result in hospitalization; overall number and length of behavioral health hospitalizations; and number of repeat behavioral health hospitalizations.
2C. Child Behavioral Health?

No

2D. Equity?

Yes

Equity: Propose measurable quality metrics you propose to be accountable for improving. You should choose at least one metric from the quality strategy.

Proposed measurable quality metrics include: women’s access to preventive/ambulatory health services.

2E. Community-Based Services and Supports?

Yes

Community-Based Services and Supports: Propose measurable quality metrics you propose to be accountable for improving. You should choose at least one metric from the quality strategy.

Proposed measurable quality metrics include: utilization rates of community-based program offerings.

3. Will you be using any metrics not found in the quality strategy?

No

14) Milestones

For all activities described in your proposal, please provide a calendar of milestones to show progress (e.g., when IT will be purchased, when IT will be operative, when construction projects will begin and end, when people will be hired, etc.) The timeline should be in months from award.

Milestones

Month 1:
- Initiate finalizing architect designs/seeking contractor bids/securing building permits
- Identify transportation options

Month 4:
- Begin building construction
- Start clinical operations as policy preparation, EMR development

Month 6:
- Secure transportation vendors

Month 12:
- Finalize clinical operations components
- Begin personnel recruitment

Month 16:
- Hire and train personnel

Month 18:
- Complete building construction
Month 19:
   Psychiatric Emergency Crisis Center operational
   Patient transportation operational

Month 20:
   Quality metrics reported

15) **Budget**

1. Annual Budgets across the Proposal

The Southern Illinois Comprehensive Care Collaboration is requesting $21,585,263 over the course of the five-year project. This includes $14,483,115 in year one, $3,795,347 in year two, $1,602,588 in year three, $1,520,066 in year four, and $1,568,937 in year five. Of the requested funds, $12,728,443 is for the one-time expense of construction. The budget demonstrates a decrease in reliance on Transformation funding over time as the increase in patient volume and care provided increases and the associated revenue begins to offset the Transformation funds.

2. Number of Individuals Served

Please project the number of individuals that will be served in each year of funding.

- Year 1 Individuals Served: 100
- Year 2 Individuals Served: 1,513
- Year 3 Individuals Served: 2,781
- Year 4 Individuals Served: 3,536
- Year 5 Individuals Served: 3,858
- Year 6 Individuals Served: 4,043

16) **Sustainability**

Include a narrative that describes how your budget will decrease reliance on Transformation funding over time and how reimbursements for services and other funding sources will increase and establish sustainability over time. (i.e. how will your project continue to operate without HTC funding?)

The proposed budget will decrease reliance on Transformation funding over time because payer reimbursements for services will increase over time. The project is designed to increase capacity for care. After the initial investment to expand and improve the facilities providing care, those sites will increase the volume of Medicaid and uninsured patients. The increase in volume will also result in an increase in patients insured by traditional plans, all of which will help to cover the cost of continuing operations.
Letters of Support
June 24, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region's delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center's PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Christopher Belt
Illinois State Senator
57th District—Illinois
June 2, 2021

Dear Director Eagleson:

I am writing to express my support for Gateway Regional Medical Center’s efforts to develop a coordinated response to the mental health crisis across our state. With additional state funding, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a Psychiatric Emergency Crisis Center (PECC) located at the Granite City location. Gateway has 100 licensed behavioral health beds to accommodate adults in the area. The center has been serving Southern Illinois for more than 100 years and has the medical experience needed to provide this care in our community by building a safe and functional space for individuals experiencing mental health crises.

Across Illinois, many individuals experiencing mental health crises are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people with acute behavioral health needs. Community crisis treatment options are scarce, and the competition for psychiatric inpatient beds is fierce. Consequently, people with mental health crises are often boarded or held in the emergency departments and jails while waiting for inpatient care.

Gateway’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients would receive medical triage, psychiatric assessments and stabilization services to identify appropriate disposition recommendations. Patients in need of 24-hour-or-less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for patients in need.

The creation of a PECC at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Rachelle A. Crowe
State Senate | 56th District
May 27, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an
inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Jay C. Hoffman
State Representative
113th District
Date: 06/16/2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

I am writing you to show our support, from the Granite City Fire Department to Gateway Regional Medical Center, in their efforts to developing a regional response to the mental health crisis in our city and the surrounding areas. Gateway is looking to establish a Psychiatric Emergency Crisis Center at our Granite City location. As we continue to serve our community through EMS services, we are consistently seeing patients that are in need of the help that Gateway Regional Medical Center wishes to provide to the many individuals experiencing a mental health crisis.

Gateway Regional Medical Center is committed to serving the needs of our city and the surrounding communities, and a regional crisis center will be a great resource to our Police and Fire Agency’s that are trying to provide help for these patients.
Please grant access to the funding provided by the state and give them the opportunity to make this happen.

Fire Chief

Kenny Prazma

Kenny Prazma
June 1, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62703

Dear Director Eagleson:

I am writing on behalf of the Madison County Mental Health Boards to express support and a commitment to continued collaboration with Gateway Regional Medical Center (Gateway) in the development of a coordinated regional response to the mental health crisis across our state. As a “Community Mental Health Authority,” it is the Board’s mandate and role to assess and address local community behavioral health needs. Recent assessments affirm that the proposed transformation addresses critical community mental health needs. Gateway has been serving Southern Illinois for over 100 years and has professional experience in caring for individuals with psychiatric and medical needs in this community. I am confident that if granted access to the state transformational funding, Gateway will be positioned to establish a dedicated Psychiatric Emergency Crisis Center (PECC) that will dramatically change the region’s delivery of an emergency response to psychiatric and emotional crisis. The hospital located in Granite City has 100 licensed behavioral health beds consisting of three units, an adult-female, adult-male, and older-adult unit. It is fully equipped and has the physical space that allows for the expansion and construction of a safe and functional environment conducive to the needs of individuals experiencing a mental health crisis.

Across Southern Illinois, many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 would provide psychiatric access for community providers and behavioral health specialists (including case managers and social workers) seeking to refer individuals for care. The PECC team would also coordinate the transition of care to outpatient services or inpatient hospitalization. Patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hours or less crisis stabilization would receive treatment in the PECC, reducing inpatient admissions and resulting in the availability of inpatient beds for individuals requiring more intensive treatment.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. The PECC, would increase access and assure the appropriate level of care for individuals experiencing a mental health crisis.

Respectfully,

Deborah Humphrey, MBA, BSN, RN  
Executive Director

157 N. Main Street Suite 380  
Edwardsville IL 62025  
(618) 692-6200 ext. 4357  
(618) 692-8986 Fax
June 9, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need of an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

[Signature]

Chief Jay Keeven  
Edwardsville Police Department
Dear Director Eagleson:

I am writing you to show my support and commitment for Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, this medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care throughout our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies, like mine. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Todd A. Link
Chief of Police
City of Alton, Illinois

POLICE DEPARTMENT
1700 EAST BROADWAY
ALTON, ILLINOIS 62002
(618) 463-3505 Ext. 635

Marcos Pulido
Chief of Police

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grant Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

I am writing you to show my support and commitment as the Alton Police Department collaborates with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations.
Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations.

The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly.

Through the PECC, this population will receive the care they need, when they need it.

Respectfully,

Marcos Pulido
Chief of Police
June 9, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Major Jeff Connor
Chief Deputy Sheriff
Madison County Sheriff’s Office
June 1, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region's delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center's PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations.

The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Orville Mercer
Vice President of Strategy & Innovation
Chestnut Health Systems

50 Northgate Industrial Drive
Granite City, Illinois 62040-6852

Phone: (618) 877-4420  TTY: (618) 877-9920
Fax: (618) 877-9250 (Client Records)
June 2, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Feel free to contact me if you have further questions.

Sincerely,

John G. Markley, B.S., M.B.A.
Regional CEO
June 9, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Brad Goacher, FACHE, MBA
Chief Operating Officer
June 2, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing to you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

Shane Watson, CEO
May 27, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

As Chief Executive Officer of Union County Hospital in Anna, Illinois, I am writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location.

Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.
The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it. Thank you for your consideration of this urgently needed resource.

Sincerely,

James R. Parris, FACHE
Chief Executive Officer
June 18, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services 
201 South Grand Avenue, East 
Springfield, Illinois 62763 

Dear Director Eagleson:

Please take this letter as our whole-hearted support of the collaboration project between Gateway Regional Medical Center and Alton Memorial Hospital in the development of a coordinated regional response to the mental health crisis across our state. Psychiatric services across the country and especially in Southern Illinois is and continues to be a crisis.

If the transformational funds requested are granted, the medical center will be given the opportunity to dramatically change the region's delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

M. Edward Cunningham  
Chief Executive Officer
June 29, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

Patti Fischer
President and CEO
HSHS St. Elizabeth’s Hospital

1 St. Elizabeth’s Blvd.
O’Fallon, IL
618-234-2120
www.steliz.org
June 1, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

[Signature]

Jerry Rumpf, FACHE
President, OSF Saint Anthony’s Health Center
June 9, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Re: Letter of Support and Commitment

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

[Signature]

Keith Page
President & CEO
June 10, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location.

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Sincerely,

Michael McManus, President
Memorial Hospital Belleville - Shiloh
June 11, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

[Signature]

Director, EMS & Emergency Preparedness

[Address]

6800 State Route 162
Maryville, Illinois 62062
618-288-5711
Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

I am Executive Director of NAMI SWI (National Alliance on Mental Illness Southwestern Illinois). We are writing you to demonstrate our support and commitment to collaborate with Gateway Regional Medical Center in developing a coordinated regional response to the mental health crisis across our state. We have a close collaboration with their Behavioral Health component. Gateway provides NAMI SWI with office space and many other benefits. We have high regard for them. Our organization is prepared to assist in this endeavor in any way that we can. NAMI SWI averages 1 to 3 calls per week from people whose adult child is in a psychotic episode and is wandering the streets, creating a nuisance to others in public or perhaps escalating. The police are called in and will generally take them to Gateway for an evaluation. Gateway Regional Medical Center is the primary hospital in our region for treating people who are in a psychiatric crisis and need either hospitalization or referral to other resources. The resources however, are limited.

If Gateway Regional is granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has both the professional experience with providing both psychiatric and the medical care needed to provide these services to the community. At this time, emergency departments and law enforcement agencies. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment is a critical piece of our to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Kristine Gamm-Smith-Executive Director
June 18, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

Please take this letter as our whole-hearted support of the collaboration project between Gateway Regional Medical Center and Alton Memorial Hospital in the development of a coordinated regional response to the mental health crisis across our state. Psychiatric services across the country and especially in Southern Illinois is and continues to be a crisis.

If the transformational funds requested are granted, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

William E. Davis
Interim Chief Executive Officer
June 16, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

Please accept this letter as our support and commitment to collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. In our work with people who are unhoused, we regularly discover that many face mental health obstacles. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location.

Unfortunately, we have witnessed how quickly our local hospitals and first responders are overwhelmed with the influx of individuals who have acute behavioral health needs. Community crisis treatment options are scarce, especially during the nights when behavioral health presentations peak. We need more inpatient beds for those needing care. Until funding arrives and solutions are realized, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. We have experienced this first-hand in our work and desire something better.

Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations.

The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, our neighbors will receive the care they need, when they need it.

Sincerely,

[Signature]

Dave Burger  
Volunteer Coordinator  
Overnight Warming Centers in Alton
June 9, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

Leslie Schmidt
Abbott EMS
Office of the President  
2500 Carlyle Avenue • Belleville, IL 62221-5899  
866-942-SWIC (7942), ext. 5247 • 618-235-2700, ext. 5247 • Fax 618-277-0631

June 10, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Respectfully,

Nick Mance  
President
June 14, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region's delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

Dr. Randall G. Pembrook, Chancellor

Office of the Chancellor, Rendleman Hall, Room 3316, Campus Box 1151, Edwardsville, Illinois 62026-1151. 618/650-2475
October 28, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Rick Stevens, FACHE
President
October 29, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

The Madison County Health Department supports and is committed to collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations.

The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

Toni M. Corona, B.S., L.E.H.P.
Director Public Health
October 28, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

On behalf of the St. Clair County Mental Health Board, I would like to express our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location that is also accessed by St. Clair County residents.

A significant number of individuals in St. Clair County experience mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal.

Timely and improved access to appropriate behavioral health care would be a great benefit for our communities. Thank you for the opportunity to comment on the highly valuable initiative.

Sincerely,

Dana Rosenzweig, LCSW
Executive Director
November 1, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

As JewelRide, we will help with efforts directed at providing a seamless experience of healthcare transportation to address transportation needs, a critical social determinant of health.

Sincerely,

Tapiwa Mpereki
(Co-Founder and CEO)
October 27, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis. As an integrated FQHC providing Behavioral Health Psychiatric Care, Mental Health Therapy, SUD/OUD Treatment and Recovery, and Medical and Dental Care, we have utilized the services of Gateway Regional Medical Center’s Behavioral Health Care for many years.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be
admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it. We look forward to working with you to coordinate the expansion of these greatly needed services.

Sincerely,

[Signature]

Kent Tarro, M.S., R.D.
CEO/Administrator
October 26, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

James Kellermann
Executive Director, Call for Help, Inc.
9400 Lebanon Road, East St Louis, IL 62203
October 26, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

I am writing you to show support for Gateway Regional Medical Center’s development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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People in crisis need help quickly. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal to serve this vulnerable population.

Sincerely,

Nancy J. Berry, MHA
Executive Director
October 29, 2021
Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location.

Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male, and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or are detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community.

This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need of an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations.

The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Sincerely,

[Signature]
Suebrena Day, RN, MSN, PhD
Administrator
November 8, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

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Sincerely,

Beth King, CEO
Jersey Community Hospital

400 Maple Summit Rd. | PO Box 426 | Jerseyville, IL 62052 | jch.org
November 16, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

On behalf of the four skilled nursing facilities I consult with, we are writing you to show our support and commitment as we collaborate with Gateway Regional Medical Center in the development of a coordinated regional response to the mental health crisis across our state. If granted access to transformational funding provided by the state, the medical center will be given the opportunity to dramatically change the region’s delivery of emergency response to psychiatric and emotional crisis by establishing a dedicated Psychiatric Emergency Crisis Center (PECC) located at their Granite City location. Gateway Regional Medical Center has 100 licensed behavioral health beds consisting of adult female, adult male and older adult units. The hospital has been serving Southern Illinois for over 100 years and has the professional experience with psychiatric and medical care needed to provide this type of care in our community. Additionally, the medical center is fully equipped with available physical space to build a safe and functional space for individuals experiencing a mental health crisis.

Across Southern Illinois many individuals experiencing a mental health crisis are sent to local hospital emergency departments or detained by law enforcement agencies. As a result, emergency departments and local jails are overrun with people having acute behavioral health needs. Community crisis treatment options are scarce, especially during evenings and nights when behavioral health emergency department presentations peak. The competition for dwindling psychiatric inpatient beds is fierce. Consequently, persons with mental health crises are boarded or held in the emergency departments and jails while waiting for inpatient care. Gateway Regional Medical Center’s PECC would provide 24/7 psychiatric access that providers and behavioral health specialists (including case managers and social workers) are looking for in our community. This team would be able to coordinate a transition of care to either outpatient services or inpatient hospitalization. At the PECC, patients will receive medical triage, psychiatric assessments, and stabilization services to identify appropriate disposition recommendations. Patients in need of 24 hour or less crisis stabilization would not need to be admitted into an inpatient psychiatric unit but would stay in the PECC, leaving the inpatient beds for the patients in need an inpatient stay.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Below is a list of the four skilled nursing facilities I consult with.

Stearns Nursing & Rehabilitation LLC
3900 Stearns Ave.
Granite City, IL 62040

Granite Nursing & Rehabilitation, LLC
3500 Century Drive
Granite City, IL 62040
Sincerely,

**Bobbi Pratt**
Regional Director of Admissions
217-248-5690
bpratt@tarahc.com
October 26, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

Alton Memorial Hospital has been providing outstanding care to patients in the River Bend region of southwestern Illinois for over 80 years. As a member of BJC Healthcare, AMH delivers world class medicine in our local communities while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, which this transformation funding will allow AMH to expand, reducing the overall cost of care for high risk mothers.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Larry McCulley  
President & CEO
September 29, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

I am writing to request your support for Alton Memorial Hospital’s (AMH’s) application for Healthcare Transformation Collaborative funding. We intend to use these funds to develop a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center.

Alton Memorial Hospital has been providing outstanding care to patients in southwestern Illinois for over 80 years. As a member of BJC Healthcare, we deliver world class medicine locally, while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, and Transformation funding will allow AMH to expand our reach into the communities we serve. We expect this will improve access and reduce the overall cost of care for high-risk mothers, under-resourced children, and those with mental healthcare needs.

If granted funding, AMH will hire and train community health workers to improve the maternal and infant health in Madison County. This will foster relationships between those who need care and those positioned to provide it and help to identify and remove systemic barriers to care. Another component of our proposed plan includes increasing AMH’s pediatric coverage to 24/7 in order to meet the needs of both the newborn nursery and the growing number of pediatric patients cared for in our emergency department. We are confident that connecting patients to round-the-clock pediatric-trained providers will improve quality and foster connections to local primary care providers.

Transformation dollars would also facilitate creation of a Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center. Through the PECC, the vulnerable population in mental healthcare crises will receive the essential care they require, where and when they need it: locally and quickly. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal.

In closing, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Dr. Laura Barton
President of the Medical Staff
October 15, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

Alton Memorial Hospital has been providing outstanding care to patients in the River Bend region of southwestern Illinois for over 80 years. As a member of BJC Healthcare, AMH delivers world class medicine to our local communities while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, which this transformation funding will allow AMH to expand, reducing the overall cost of care for high risk mothers.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

BJC HealthCare selected Tarlton Corporation as the Construction Manager for this project. Tarlton Corporation is a WBENC-Certified Women’s Business Enterprise and a certified WBE in the State of Missouri and City of St. Louis. Tarlton provides General Contracting and Construction Management services in the Midwest since 1946. Over the past two decades, Tarlton has successfully managed a
diverse group of healthcare projects and vendors for the BJC family of healthcare facilities including St Louis Children’s Hospital, Christian Northwest Siteman Cancer Center, Christian Northeast, Missouri Baptist Hospitals St. Louis/Sullivan, as well as numerous other projects located throughout the St. Louis Medical campus.

Over the past two decades, Tarlton has successfully supported minority and women enterprises as well as a diverse workforce on a variety of healthcare projects in the St Louis and Southern Illinois region. The Tarlton team has managed projects totaling $140M in healthcare costs, averaging 20% MBE and 30% WBE contracts participation along with 19% MBE and 6% WBE workforce (boots on the ground) participation. Tarlton is extremely proud of our strong commitment to improving diversity and inclusion on all our projects in the region.

Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Joseph F Scarfino

Joseph F. Scarfino
Tarlton Project Executive
October 1, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62703

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

Alton Memorial Hospital has been providing outstanding care to patients in the River Bend region of southwestern Illinois for over 80 years. As a member of BJC Healthcare, AMH delivers world class medicine in our local communities while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, which this transformation funding will allow AMH to expand, reducing the overall cost of care for high-risk mothers.

The creation of this Psychiatric Emergency Crisis Center (PECC) at Gateway Regional Medical Center symbolizes a regional and statewide commitment to serving the needs of one of the most vulnerable populations. The presence of a regional crisis center will help optimize the resources healthcare providers, first responders, law enforcement, and other community agencies have at their disposal. People in crisis need help quickly. Through the PECC, this population will receive the care they need, when they need it.

Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Bobbie Smith
Executive Director

Ensuring All We Serve Have a Brighter Tomorrow!

2016 Madison Ave, Granite City, IL 62040
Phone: 618-676-2383
September 24, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue East
Springfield, Illinois 62763

Dear Director Eagleson:

I am writing this letter of recommendation to support Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

As Executive Director of the Oasis Women’s Center for over 40 years and as Chair of Chairs of the Third Judicial Circuit Family Violence Prevention Council since its inception in 1996, I am happy to confirm that I support this application wholeheartedly. Alton Memorial Hospital has been providing outstanding care to patients in the River Bend region of southwestern Illinois for over 80 years. As a member of BJ C Healthcare, AMH delivers world class medical services in our local communities while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, which this transformation funding will allow AMH to expand, reducing the overall cost of care for high risk mothers.

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Again, I encourage the Illinois legislature to award funding to this worthy project that will improve the physical and mental health resources in our community. I have no hesitation in supporting this application for funding. If you need any further information, please do not hesitate to call me and I will be happy to help.

Sincerely,

[Signature]

K. M. Trushel
Executive Director

Proud member of United Way of Greater St. Louis

PHONE: (618) 465-1978 • 111 MARKET STREET • ALTON, ILLINOIS 62002
September 22, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

Alton Memorial Hospital has been providing outstanding care to patients in the River Bend region of southwestern Illinois for over 80 years. As a member of BJC Healthcare, AMH delivers world class medicine in our local communities while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, which this transformation funding will allow AMH to expand, reducing the overall cost of care for high-risk mothers.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Gary Ayres
Chairman
Alton Memorial Board of Directors

One Memorial Drive | Alton, IL 62002 | (618) 463-7311
September 21, 2021

Director Theresa Eagleson  
Illinois Department of Healthcare and Family Services  
201 South Grand Avenue, East  
Springfield, Illinois 62763

Dear Director Eagleson:

Riverbend Head Start & Family Services is writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

Alton Memorial Hospital has been providing outstanding care to patients in the River Bend region of southwestern Illinois for over 80 years. As a member of BJC Healthcare, AMH delivers world-class medicine in our local communities while providing access to large academic medical centers for complex patient needs. There is a strong desire for the residents of Alton and the surrounding communities to receive this care close to home, which this transformation funding will allow AMH to expand, reducing the overall cost of care for high-risk mothers.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Eugene A. Howell, MPA  
President / CEO  
Riverbend Head Start & Family Services
September 21, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Brenda Walker McCain
President/CEO
September 21, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing to show our support as we partner with Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services across our state. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

Shane Watson
Chief Executive Officer
September 21, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

[Signature]

Jerry Rumph, FACHE
President, OSF Saint Anthony’s Health Center
September 20, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

[Signature]

Dr. Kristie Baumgartner
Superintendent
September 22, 2021

Director Theresa Eagleson
Illinois Department of Healthcare and Family Services
201 South Grand Avenue, East
Springfield, Illinois 62763

Dear Director Eagleson:

We are writing you to ask for your support of Alton Memorial Hospital (AMH) in the development of a coordinated regional response to both Women and Infants Health and Behavioral Health services in conjunction with Gateway Regional Medical Center. If granted funding provided by the state, AMH will use community health workers to positively impact the maternal and infant health in Madison County. Another component of the proposed plan includes 24/7 pediatric coverage to meet the needs of both the newborn nursery and the growing number of pediatric patients without primary care support. Transportation support and food vouchers provided to the community health workers will allow AMH to have a positive impact in the communities we serve.

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Again, we encourage the Illinois legislature to award transformation dollars to this worthy project that will improve the physical and mental health resources in our community.

Sincerely,

John Keller, President