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Sent: Wednesday, March 16, 2022 9:07 PM

To: Gildemeister, Stefan (MDH) <stefan.gildemeister@state.mn.us>; Simon, Alisha (MDH) <alisha.simon@state.mn.us>

Subject: Children's Hospital Mental Health, and Saint Paul PICU removal

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March 15, 2022

Mr. Gildemeister and Ms. Simon,

As a registered nurse at St. Paul Children's hospital in the Pediatric Intensive Care Unit (ICU), we write to you with concerns about the request to add more mental health beds and want to share my perspective on why the removal of the PICU from St. Paul is concerning. We hope to alert you to a few things you may want to consider when completing your Public Interest Review.

In your letter to Dr. Gorlick, the CEO of Children's Hospital, you asked for information on how Children's would manage a critically ill mental health patient. It is important for you to understand the rate at which our admissions have increased. Children's can only make predictions based on past data, and that does not capture the extent of the growing mental health issue.

Our numbers have been growing quarter to quarter, and I would urge you to gather the data and compare the growth through the year. This year thus far has been shocking.

As you will see, the number of patients who need ICU support is growing, and transportation of a critically ill child is not without risk. There is a very real need for ICU support at the St. Paul campus in this unit and our emergency room.

We often receive transfers from critical access hospitals as well. This would mean a

third transfer: Critical Access hospital > Children's MPLS > Children's St. Paul Mental Health. Any transfer is not only a strain on the transport system, but also results in a delay in care; and a delay in care is a denial of care.

Mental health patients are not the only population we serve. We take admissions from all over the Twin Cities, east metro and western Wisconsin for all childhood illnesses, such as viral illness, sepsis, and pneumonia. If those patients need an ICU-level of care, they will also have to travel further to the Minneapolis campus, when they need immediate services. Keeping the PICU in St. Paul would reduce the amount of travel time needed. Some who have testified in support of the bill to give Children's this exception have said that the issue of the PICU is a "separate proposal", but the movement of the PICU will impact the care of any of the patients who would make use of those new mental health beds.

To our knowledge, there is not a mental health facility in the area that is attached to an emergency department and does not have intensive care support. Please consider in the Public Interest Review that the emergency room will be a major entry point for this program, and if the exception is granted, Children's St. Paul will be the only facility with this model not supported by an ICU.

Children's nurses will fiercely advocate for the opening of these beds. However, we must assure that these children and families in crises have immediate access to the highest level of care needed to ensure high quality patient care that they need and deserve

Thank you for your attention to this matter.

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