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**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

Debra Savage, Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson, 2nd Floor
Springfield, Illinois 62761

Re: University of Chicago Medical Center ("UCMC", the "Medical Center"),
UCMC Dedicated Cancer Hospital (the "Project")
Application for CON Permit

Dear Chairperson Savage:

We are pleased to submit our application to the Illinois Health Facilities & Services Review Board ("IHFSRB" or the "Review Board") to construct a world-class, comprehensive cancer facility on the Hyde Park Campus of UCMC on the South Side of Chicago.

Last year, the Review Board approved a Master Design Permit (Project #22-004) to allow UCMC to spend funds in excess of the capital review threshold to carefully plan for and design this cancer center. The Review Board's approval allowed UCMC time to engage its broader community in this planning effort, alongside the architects, and to refine the design based on the community's input.

We believe the Project for which we now seek approval represents the thoughtful collaboration of key stakeholders, including residents in our planning area, not just for the construction of a new building, but also for a model of groundbreaking cancer care – and cancer prevention – established upon the principles of access, equity, dignity and innovation.

Background

A half-century ago, a cancer diagnosis seemed unbeatable. Despite remarkable advances in cancer detection and treatment during this time, the benefits have not been distributed equally, and the prognosis for many cancers, and many populations with cancer, remains poor, with our residents on the South Side some of the farthest behind. People who live on the South Side of Chicago are twice as likely to die from cancer than those who live just about anywhere else in America. In fact, cancer is the second leading cause of death on the South Side. The situation is expected to grow even worse in the years ahead, with the incidence of cancer projected to grow 19% in the next five years on the South Side compared to only 9.1% in the five collar counties surrounding the City.

With such staggering statistics, we know there is no single solution for health equity and that cancer is not a problem to be solved alone.

Master Design Process

Over the years, UCMC has fostered strong relationships with civic leaders, community organizations, health care providers and residents to strategically improve health and access to quality care on the South Side of Chicago, culminating in our work to bring Adult Level I Trauma care to the South Side four years ago, and more recently,

the South Side Healthy Community project – a collaboration of 13 hospitals and community health centers committed to advancing the South Side’s entire ecosystem of health care. We similarly believe our local war on cancer is a team effort.

The approval of the Master Design Permit enabled us to strategically plan the design and development of a world-class, dedicated, comprehensive inpatient and ambulatory cancer facility in partnership with our community. Robust community and patient engagement was at the core of our design process to allow input not from only our architectural and engineering professionals, but also from current patients and cancer survivors. Over the past ten months, UCMC conducted a community telephone poll, sent out over 200,000 community engagement surveys, convened its Community Advisory Council four times, hosted two town hall meetings, and met with community hospital, political and faith leaders. We learned that our community supports the development of a world-class comprehensive cancer facility in their neighborhood as a destination for those with cancer from near and far, and we are pleased that the enclosed CON application will be followed by their letters of support.

We also learned from the community that a cancer facility means more to them than treatments and medication for when they get sick but a place that can help them stay well. For this reason, we transformed the design of the ground floor of the building to be a mainstay of health and wellness for all comers by providing a healing environment to welcome patients along all stages of their treatment journey. It would also serve as a community hub for cancer prevention, screening and diagnoses with healthy lifestyle and wellness classes and other educational resources. This year alone, UCM hosted 11 health fairs, 12 talks and presentation on topics such as cancer education, breast density and colorectal cancer, five cancer health equity “Webinar Wednesdays” and at least 21 other events split between women’s and men’s health.

We believe our community helped us to better design a comprehensive cancer facility for whole-person cancer care that values the quality of life, for today, and for the time to come.

Current Project

As the result of this collaborative design process, we propose the construction of an 80-bed dedicated cancer facility as part of our Medical Center hospital license that would consolidate a broad spectrum of inpatient and outpatient cancer care currently dispersed throughout at least five other buildings on campus. This comprehensive cancer facility would deliver cutting-edge diagnostics and innovative therapies, many of which are developed by our own faculty. Patients would benefit by having greater access to screening, cancer detection, and the latest treatment, all anchored by UCMC’s pioneering research that aims to drive “bench-to-bedside” care.

We know that a cancer diagnosis is life changing, so it is essential to design a facility that makes treatment easy to navigate and accessible for our patients and their families. As one of the first freestanding cancer centers in the region, the building would bring together personalized and integrated cancer care, as well as cancer screening and prevention, with the following services:

- 80 private, inpatient beds, including 64 Medical-Surgical beds and 16 ICU beds, with dedicated family space to accommodate overnight stays.
- 90 consultation and examination rooms with a patient- and family-centric design for medical oncology, surgical oncology, and palliative and supportive oncology specialists.
- A Breast Center for multi-disciplinary care for breast cancer patients including screening and diagnostic imaging, with five mammography units, as well as biopsy rooms, physician office space and support services.

- Infusion Therapy Services with private infusion rooms grouped by cancer type to replace an outdated, open bay design.
- An expanded Oncology Rapid Assessment Clinic for urgent care and pain and symptom management to better protect immunocompromised patients from protracted emergency department visits.
- A Radiology Imaging Suite, consisting of two MRIs, two CT Scanners, two ultrasound units, two procedure rooms with mobile C-arm/fluoroscopy, and one X-ray to facilitate imaging for ambulatory patients.
- Dedicated space throughout the facility that integrates clinical trial participation and clinical care delivery, not only to encourage early learning about groundbreaking research that is at the core of our mission, but also to facilitate study visits for those who choose to enroll, particularly for groups that have been underrepresented in cancer research.
- An Oncology Patient Support Center devoted to cancer research, prevention, detection, treatment, and survival that offers complementary therapies and stress reduction, as well as educational space for community education and support for healthy living.
- Shelled space for future vertical and horizontal expansion.

We also know that healthcare is complex and dynamic and that health care delivery systems need to be adaptive. Typically, research and development supporting new diagnosis and treatment have been isolated from patient care, but the proposed Project would synthesize these related disciplines under one roof and embed the cancer facility into the pipeline of innovation and discovery of our larger university. With such synergy, UCMC would seek to reduce time from innovation to application, which traditionally has been slow.¹ In this way, the Project would not only provide a new physical structure but also profound change in the patient care model, optimizing and personalizing cancer treatment for every single patient well into the future.

Cutting-edge Cancer Care is already one of UCMC's Premier Programs

UCMC has been a world-renowned cancer center with international reach and one of only 71 hospitals within the U.S. designated by the National Cancer Institute ("NCI") as delivering cutting-edge cancer care to patients in its communities since 1973. UCMC's Comprehensive Cancer Center designation by the National Cancer Institute is the highest federal rating a cancer center can achieve. It is the highest standard for cancer programs and is bestowed upon the nation's top cancer centers in recognition of innovative research and treatments.

Our Comprehensive Cancer Center attracts cancer patients from around the world; however, our primary commitment is to the people of the Chicago metropolitan area and, particularly, the residents of surrounding neighborhoods including Bronzeville, Grand Boulevard, Hyde Park, Kenwood, Washington Park and Woodlawn. Maintaining a vibrant conversation with our South Side neighbors helps the Comprehensive Cancer Center better understand and meet patient needs. A key part of the Comprehensive Cancer Center's mission is to promote cancer health equity among all populations, especially among groups where there are known cancer disparities based on race, ethnicity, language and geographic location.

¹ An large-scale analysis of the rate of adoption of new, effective care practices demonstrated that it takes an average of 17 years for a medical breakthrough to go from publication to broad adoption.
ZS Morris, S Wooding, J Grant. The answer is 17 years, what is the question: understanding time lags in translational research. J R Soc Med 2011; 104:510-520 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3241518/Accessed May292019.10.1258/jrsm.2011.110180.22179294>.

With this distinction, UCMC recognizes its ongoing responsibility to overcome the existing barriers to high quality care and push the boundaries of possibility for its community. Patients who are treated at comprehensive cancer centers experience superior survival rates compared to patients treated at facilities without this designation. While outcomes at NCI cancer centers are already strong, the rates of “textbook outcome” are even higher at dedicated cancer hospitals. The likelihood of a patient surviving their cancer after five years at a dedicated cancer center is 17% higher than at other hospitals. That is true across many types of cancer, including the most common – breast, colorectal, lung and prostate. The Medical Center and its more than 200 cancer researchers and physicians are committed to developing a new health care delivery model to further prevent and reduce cancer’s devastating effects, which will be more effectively delivered in a facility that fuses the most advanced technology, medical research, and compassionate clinical care through real-time collaboration for the benefit of all cancer patients.

High Rates of Utilization at UCMC Reduce Community’s Access to Cancer Care

The Medical Center routinely uses more than 90% of its available beds and has been operating under “surge” conditions more than half the time, meaning that we often have no available inpatient beds and more than 20 patients awaiting admission from the emergency department. Operating at these high rates utilization affects our ability to accept transfers of acutely ill patients from other area hospitals, and we frequently cannot accept transfers because of bed shortages. Yet, the hospitals within our planning area depend on UCMC to accept patients in need of a higher level of care. The acuity mix of UCMC is more than 45% higher than that of any other hospital in the planning area, which means that UCMC’s patients are more acutely ill than patients occupying the same types of beds elsewhere in the region. UCMC’s capacity constraints come at a time when specialty care on the South Side is already strained and the resources available to its residents greatly diminished with 16 hospital closures reducing inpatient capacity by more than 54% over the past 25 years.

Health Disparities Persist

The end result of these care delivery challenges is an immense disparity in health outcomes compared to North Side residents of Chicago. South Siders in some neighborhoods have a 30-year lower life expectancy. This inequality has been further exacerbated by the COVID-19 pandemic, as evidenced in the highly disparate death rates relative to white residents and North Side neighborhoods. Even before the pandemic, healthcare disparities such as lower screening rates and higher mortality rates for some cancers were apparent in medically underserved communities due to the lack of access to quality care. From 2014-2018, the residents on the South Side of Chicago were 28.6% more likely to receive a cancer diagnosis than residents in other parts of the City and 25.2% more likely than others in Illinois. Similarly, for similar periods of time, 14.9 deaths per 100,000 residents from breast cancer (2013-2017) compared to 12 in Illinois and 19.9 colorectal cancer deaths compared to 13 for Illinois.

Project Will Elevate the Delivery of Cancer Care to the South Side of Chicago

While UCMC is a destination for cancer patients from all over the globe, it is an essential provider of services for patients from the South Side of Chicago and throughout Illinois and has made some significant strides in bringing cancer care to its residents. For example, 80% of breast cancer patients on the South Side of Chicago receive care at UCMC. Additionally, 80% of local women are seeking regular mammography as a cancer screening tool. However, breast cancer is just one among hundreds of different cancers, and an imbalance of resources still exists on the South Side of Chicago. Residents continue to have the highest cancer mortality rates in the City but the

fewest resources. In fact, the mortality rate from cervical cancer on the South Side is almost as high as in several of the poorest nations in the world.

We seek to address this imbalance by proposing greater access to, and a dedicated space for, the treatment and management of the entire life cycle of cancer – from pre-diagnosis, cancer treatment, remission and beyond. UCMC plans to build a comprehensive cancer facility that has not been built before, one with a data-driven design and innovative layout that facilitates interdisciplinary collaboration both in the lab and beside our patients.

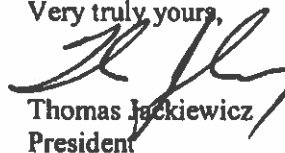
Project Will Uplift the Overall Determinants of Health on the South Side of Chicago

With the construction of a dedicated, comprehensive cancer facility, UCMC commits to making an approximately \$815 million investment on the South Side, one of the largest capital development projects in the area's history. Of this amount, UCMC strives to obtain participation from at least 35% certified MBE/DBE and 6% percent certified WBE vendors and to obtain 40% of on-site workforce hours from Chicago residents emphasizing the eight zip codes surrounding the Medical Center's Hyde Park-Woodlawn campus (60609, 60615, 60616, 60619, 60621, 60637, 60649 and 60653). With such goals, UCMC recognizes that healthy communities mean much more than medical care and seeks to champion the importance of the social determinants of health and the role that economic security so prominently plays.

A dedicated, comprehensive cancer facility will foster more timely, efficient and compassionate delivery of cancer care at UCMC and will better integrate the resources of both UCMC and community hospitals into the local health care delivery system. While UCMC is the only academic medical center within this local delivery system, each institution plays an important and distinct role. With the proposed cancer center, and our work with the South Side Healthy Community Organization, we propose to expand not just cancer care at UCMC, but also to expand collaboration with the other providers in our planning area and, together, to strengthen access to health care overall.

The development of a dedicated, comprehensive cancer facility that is also dedicated to cancer prevention is a critical component to providing exceptional care to patients and to dismantling the persistent healthcare injustice so long faced by our community. Our South Side patients should not have to leave their neighborhoods to access world-class, human-centered cancer care that similarly attracts patients regionally, nationally and internationally. We know a comprehensive inpatient and ambulatory cancer facility of this caliber will mean more lives saved, and we request approval of this Project to enable us to bring this essential care to our community.

Very truly yours,



Thomas Jackiewicz
President

The University of Chicago Medical Center