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**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

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5/1/24

To,

Debra Savage

Chairwoman & service reviewer board

525 West Jefferson, 2nd Floor

Spring field. IL 62761

RE: Restructuring of healthcare resources in rural La Salle County
following closure of three area hospitals

Dear Ms. Savage,

Enclosed are the data collected regarding rural urban discrepancy in terms of available healthcare resources for identical population and resulting adverse consequences on the health of the citizens both physical and economical.

The move to change the structure of existing hospitals in Ottawa will lead to major inconveniences to 30-40 thousand citizens in terms of delivering babies, having procedures done as well as inpatient admissions.

Currently the only hospital delivering babies in Lasalle, Bureau and Putnam County is in Ottawa and that is overburdened & understaffed affecting the OB healthcare in the area. The cesarean section delivery rate in the county is one of the highest in the nation!

I have been a practicing pediatrician in the area for the last 43 years and witness to the fact that there were at least four hospitals delivered babies before the closure of three hospitals with loss of beds and personnels.

People travel 50-70 miles to deliver babies, do follow ups. This is a third world with in first world and there are many other communities across the country in a similar situation.

There is an urgent need at Federal, State and local level to come up with some minimally acceptable answers to address the matter.

I would suggest keeping Ottawa facility as it is and open Peru facility back to where it was. Ottawa has been delivering babies since Ryburn hospital in 1850s.

Sincerely,



Armar Dave, MD

Practicing physician

4/30/24

To,

Community leaders and all concerned parties

The impact of hospital closures and restructuring of the resources by OSF Peoria.

Total bed capacity before closure of three hospitals in LaSalle County Illinois serving 141848-174843 population. Data obtained online.

St. Mary's Streator 97

Spring Valley 44

IVCH 64

Mendota 25

Princeton 25

St. Elizabeth Ottawa 63

Total Bed capacity before closure approximately 293

OB services were offered at following hospitals:

St. Mary's

IVCH

St. Margaret

St. Elizabeth

Total bed capacity after closure and opening of the new facilities under OSF will be as per publication by OSF and communication:

New Peru Facility 64

Mendota 25

Princeton 25

Total 114

Total approximate loss of beds 179

Total loss of facilities delivering babies 3

There will be only one facility to deliver babies for one of the largest counties in the state. These facilities do provide healthcare to Putnam and Bureau counties.

The Medical Staff configuration

We had at least one obstetrician in Peru, Spring valley, St. Mary's and Ottawa who were residents of these communities there is none today they are all frequent flyers and local facilities are the places to work not places to live with no or little interest in local schools, hospitals, roads, and other infrastructure related matters.

We had at least one General surgeon in each of these towns residing locally in those towns and we have none anymore to the best of my knowledge.

There is going to be a hardship for the local population related to distances because of the reduction and redistribution of the resources.

I hope the local leaders, industrial leaders as well as local lay public should know that and participate in decision making process as to what is best for the affected communities.

The impact on economy related to attrition of employment is going to be substantial and unavailability of data does not allow me to comment on this matter in valid sense.



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1/20/2024

To,

Sisters of Order of St. Francis
OSF Administration Inclusive of all St. Anthony, Paul etc
Civic Leaders in LaSalle County
Industrialists in LaSalle, Bureau and Putnam County
Governor state of Illinois
President of the United State of America
Board members.
Senators
Congressmen
ISMS
AMA
Colleagues

Sub: Status of Health care in LaSalle, Bureau, and Putnam County after closure of three hospitals / State of Rural healthcare in America the third world in the middle of the first world!

Dear Colleagues,

Access to healthcare services is critical to good health and it implies that healthcare services are available and obtainable in a timely manner. Availability of adequate healthcare facilities (hospital / emergency room and infrastructures) and adequate health care workforce are two most critical enablers of the healthcare service system.

Rural Community in LaSalle, Bureau and Putnam County:

The closure of three regional hospitals during the past years has left many people without any meaningful healthcare services over a vast area covering mainly three counties viz LaSalle, Bureau and Putnam as well as other adjacent counties too.

The people living in rural communities must travel 50-70 miles to deliver babies, to get emergency care, to get any involved medical care required in hospital care. As of now St. Elizabeth in Ottawa is the only hospital serving these and other counties delivering babies and providing complex care it is capable of.

I am presenting the data collected online for establishing a correlation between population and the health service facilities /resources in two of the counties in Illinois, one (LaSalle, Bureau, and

Putnam) representing rural and one (Peoria) representing a mix of urban / rural. Both serve, to a large extent, an equal number of inhabitants showing the stark imbalance.

LaSalle, Bureau, and Putnam County:

- The total population of LaSalle, Bureau, and Putnam County about 152478 is served by Ottawa hospital/St. Elizabeth, St. John's in Princeton and St. Anthony in Mendota are the only hospitals serving the needs of all these counties.
- The total number of primary care physicians serving that population is about 52.
- The total number of hospital beds available for 152478 people in these three rural counties 108 and that includes ICU beds, which comes to 1 bed per 1411 persons this data includes St. Elizabeth in Ottawa, St. Anthony in Mendota, and St. Clare in Princeton.
- There has been a loss of close to 194 beds because of the closure of three area hospitals St. Mary's in Streator, IVCH in Peru, and St. Margaret's in Spring Valley.
- There are 10 OB/GYN but only one on call for a given time slot and some of them reside in the tri county area most of them are either locum or live far away.
- Two midwives in LaSalle, Bureau, and Putnam County affiliated or working with Ottawa hospital/St. Elizabeth delivering babies.
- 1,202 babies born in 2021.
- St. Elizabeth hospital in Ottawa is the only hospital delivering babies in tri county area as of now.

Peoria County:

- The Peoria County population is 178383
- There are a total 1157 beds including ICU beds and I have a suspicion there are more because I only added Methodist and St. Francis not the Proctor in Peoria and also not added Galesburg and Pekin. There are 36 beds in Pekin and close to 100 beds in Galesburg. With this total number of beds in Peoria county comes to about 1293.
- The number of physician in Peoria county are 1159 (OSF data)
- There are 57 OB/GYN
- 14 pediatric psychiatrists
- 13 practicing midwives.
- 2,149 babies born in 2021

Table 1 A Comparative Picture of Health Facilities between LaSalle + Bureau + Putnam vs Peoria County

S N	Count y	Populatio n	Number of Physicia n	Physician for 10000 of population	Hospita l Beds	Bed ratio (1 bed / Population)
1	Peoria	178383	1151	64.5240858 2	1293	137.9606
2	LaSalle	108078				
	Bureau	38828				
	Putnam	5572				
	Total	152478	52	3.41032804 7	108	1411.833

Findings and Impacts:

The above statistics prove that there is an acute shortage of health service facilities and resources in LaSalle, Bureau, and Putnam County. The cascade effects of shortfall in health facilities in the LaSalle + Bureau + Putnam are:-

- The healthcare workers overburdened and burned out because of excessive demands placed on them;
- Shortage of hospital infrastructure and human resources to accommodate and attend overflow and patients within a reasonable time of their arrival. While there is an extended waiting period for outpatients, most of the time there are no beds and patients wait for hours and at times days in the emergency room before a bed is found somewhere 90 miles to 100 miles away.
- The lack of training offered to staff in many areas of patient care due to various reasons.
- Our tri-county (serving to three counties) emergency room at Ottawa functions as an acute psychiatric care holding place for children with mental issues until they find an indoor mental facility usually 70-150 miles away to transfer depending upon acceptance/ insurance/ availability of bed. Due to distance and unavailability of public transportation as well as poor socio-economic status these kids are either not followed and fall through the traps because the local psychiatrists and the Ottawa hospital are not approved/ due to certification/ legality/ availability to accept and follow these patients.

Inclement weather conditions (which are frequent during winter in this area) further stress the situation as transfer of patients may not be possible. The chances of fatal outcomes cannot be ruled out during such a challenging situation because there is a paucity of competent resources available at local level to take care of matters. The closure of rural hospitals in LaSalle, Bureau, and Putnam County has added distances between the health service delivery system and patients leading to a very stressful situation! These distances need to be bridged ASAP.

The number of practicing physicians reduced because closure of the hospitals left them unemployed and others with no place to work or care for their patients. Many took early retirement. Replacing the physician workforce in rural America is difficult despite all kinds of incentives offered by Federal and State Government as well as rural hospitals.

Many other healthcare professionals like nurses, lab technicians, X Ray technicians etc. lost employment overnight and either quit working or joined other far away workplaces.

Recommendations:

Major health service establishments like OSF and Government health department need to contemplate effective strategies for replacing the lost health service capacities (including physicians and support workers) in LaSalle, Bureau, and Putnam County urgently. The issue is serious and challenging as it involves multiple factors (community's health and safety,

Government policies, procedures and finally service provider's i.e. agencies like OSF interest / inclination).

I strongly feel that - a civilian task force made of civic leaders, industrial leaders; leader representing average men, local politicians should be established to study and assess issues / challenges of health services in LaSalle, Bureau, and Putnam County and issue recommendations on the solution.

We discussed health service delivery and its quality during various meetings I attended, but we never tried to look at the bigger picture covering adequacy of services and negative impact of the closure of hospitals on the community in the neighborhood. May be due to the fact that the overall community welfare, as a subject, falls under State Government's jurisdiction? The nonchalant attitude prompted me to write this "white paper" to see if someone will sincerely, objectively and holistically look at the situation and get community at large, State and Federal Government involved and have more help more space more personnels more expertise to serve the same size population as some urban areas have like in this case Peoria.

Disclaimer:

I have been actively practicing in this community for the last 42 years and these are exclusively my views, my personal observations and views. Some of the data included in this paper are collected while my online research. I regret if there are any errors or omissions.

Sincerely,

Amar Dave, MD

Practicing physician in Ottawa

Rural healthcare in America; The Third World in the middle of the first world

Counties	Peoria	Lasalle	LaSalle, Bureau, Putnam
Population	181,111	108,965	141,848-174,845
Hospital beds	1157	108	
Beds/population	1/156		1/1,618.93
Physicians	1,159		26
Physicians/population	1/156		1/3,000-6,000
APRNS	478	250-90	
APRNs/population	1/378.89	1/1210	1/1576
Midwives	13		2
Midwives/population	1/13,931		1/70,000
Babies born in 2021	2,149		1,202
Hospitals delivering babies	3		1
Loss of beds due to closure of 3 hospitals			194
ICU beds	148		13
ICU BED/population	1/1223.7		1/13449.6
Pediatric psychiatrists	14	0	
Pediatric ICU beds	16	0	
NICU beds	34	0	
General surgeons	54	3	