

**From:** Rislove, John  
**To:** [Gildemeister, Stefan \(MDH\)](#)  
**Subject:** adolescent bed expansion  
**Date:** Friday, December 16, 2016 1:39:17 PM

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Hi Mr. Gildemeister, My name is John Rislove and I am the Director of Behavioral Health at Winona Health in Winona, MN. We have a small 8 bed secure inpatient adult unit. Like most places we are full or on diversion much of the time. We would support the expansion of beds at PrairieCare for patients under 21 years of age. I'm sure the professionals thinking of this are diligently looking at double occupancy rooms from many angles which I think can be the challenge but I think it would be workable in a flexible system.

On your first bullet point on are new beds needed.....Yes! In Minnesota I was once told by a State of MN Medical Professional that on any given day we are short 60 beds for adults....If PrairieCare can take more 18-21 year olds this may help with the shortage of adult beds. Also we have at times a child we are managing in our ED or put on our Medical floor while waiting for a child/adolescent bed to open in the State.

Due to the distance that PrairieCare is from Winona I would see no negative impact on our hospital should this initiative move forward either financially or in loss of existing staff.

Lastly, as double-occupancy is not the idea it is significantly more beneficial to a child/adolescent to be in a treatment facility than sitting in an ED, on a Medical floor, or in a crisis type bed with a mobile response team. If the hospital is therapeutic and the patients are closely monitored this would have many more benefits to the child/adolescent and their caregivers.

Respectfully,

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