spent $2 trillion of the American people's money and purchased the worst inflation in more than 40 years.

Well, actually, that is not all it purchased.

GOVERNMENT FUNDING

Mr. MCCONNELL. Madam President, sure, the Democrats' $2 trillion didn't buy our country anything lasting like a Hoover Dam or an Interstate Highway System—nothing like that—but the money had to go someplace—and, boy, did it ever.

Democrats and lots of the media spent most of 2020 and 2021 shouting that Republicans were risking calamity because we didn't want to dump endless sums into slush funds for State and local governments. It turns out we were right, and they were wrong. State and local governments are now so awash in Democrat bailout money they can't even figure out where to put it.

One recent news report found this bonanza has ''provided a boon for localities seeking to build or upgrade their pickleball amenities.'' Yes, you heard that right.

Dozens of municipalities are adding pickleball courts to their park and recreation offerings—and many are using a slice of their coronavirus aid package to underwrite the construction boom. If the Hoover Dam and the Lincoln Tunnel are enduring monuments to the New Deal's infrastructure spending, perhaps pickleball courts will become a lasting legacy of the $1.9 trillion American Rescue Plan.

In New York, one county set aside $12 million in so-called relief funds to renovate a minor league baseball stadium. In Iowa, county officials put aside $2 million—listen to this—to buy a private ski area. In Colorado, two golf courses are getting their irrigation systems replaced, thank goodness. In Wisconsin, a skate park is getting a million-dollar makeover.

The American Rescue Plan didn't rescue working people from anything. It only rescued bureaucrats from any semblance—any semblance—of fiscal sanity.

Remember, Democrats openly admitted they viewed pandemic relief as an ideological Trojan horse. They called this terrible, deadly virus ''a tremendous opportunity to restructure things to fit our vision.''

And so right on cue, their so-called rescue plan has funded environmental justice grants to address something called inequitable tree canopy cover in Massachusetts. Some public school systems, in the vice grip of Big Labor, are using their windfalls to advance bizarre indoctrination in things like critical race theory.

The rescue plan dollars have funded staff trainings to make sure the educators paid to look after young kids are up on all of the latest ''woke'' buzzwords and causes.

The American people wouldn't want this junk if it were free. They definitely don't want it for the pricetag of $2 trillion of their money and the worst inflation in a generation.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. DURBIN. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

HEAL INITIATIVE AND GUN VIOLENCE

Mr. DURBIN. Madam President, over the past 2 years, our understanding of healthcare and good health practices has changed. The pandemic revealed we cannot limit the delivery of care to the hospital or the doctor's office. We need to reach out, particularly to the most vulnerable members of our communities, directly, personally. That is exactly what is underway in Chicago right now.

Four years ago, I brought together the CEOs of the top 10 hospitals in Chicago. They were located in areas around the city, I noticed, that were comparable to the areas of greatest gun violence, each one of those hospitals. So I asked the 10 CEOs to come over for breakfast—I bought the bagels and coffee—and they sat down around the table and they looked at one another and they told me: This is the first time we have ever sat in the same room together.

They are competitors. They are trying to get the same people to come to their hospitals. But this morning was a conversation about what they had in common.

These hospitals are on the frontlines of treating victims with bullet wounds. When I met with those CEOs in 2018, we talked about how you not only treat this kind of violence but how you prevent it.

We launched something called the Chicago HEAL Initiative. ''HEAL'' stands for Hospital Engagement, Action, and Leadership. Despite being competitors, these 10 hospital CEOs sat down, and on their own—without my input, without my urging or any Federal mandates—wrote 16 things they thought they could achieve over a span of 3 years. I looked at the list and said that this sounds good to me.

We knew we couldn't solve every aspect of the complex problems facing us with gun violence, but it was a good start. They said to me: This is the first time we have ever gotten together, and we were able to come up with an agreement.

Well, last week, the 3 years were up, and we announced what happened at these hospitals over the last 3 years. The gunshot patient in the emergency room, hospitals are no longer just stitching up their wounds; they are also addressing the emotional scars to prevent retaliation. Last year, 3,000 gunshot victims were paired with counselors and caseworkers.

Without these interventions, we know that nearly half—half—of the gunshot victims would be back in the hospital within 5 years. That is a fact.

But the hospitals are also looking further upstream to try to put an end to violence in the city of Chicago.

People say the best way to stop a bullet is with a job. Well, these 10 hospitals took that to heart. Over the last 3 years, these 10 hospitals increased new hires from neighborhoods of the highest gun violence, which face more poverty than other neighborhoods, obviously, by a whopping 21 percent.

Here is what they do. They go into the high schools and middle schools around the hospitals where they do business and sit down and talk to the kids and say: How would you like to shadow one of our nurses or one of our doctors, see what it is like in the hospital here and maybe even have a summer internship? All of a sudden, young people have taken an interest in that hospital that they walk by every day and never ever related to.

The hospitals also decided they have economic clout. Think of the money that is spent on goods and supplies at every hospital in America. Well, they decided to reach out to their suppliers and say to them: We are going to give you special consideration if you will locate part of your business in the neighborhood around our hospital so that people in the neighborhoods can be working to provide the goods and materials that we need.

They increased goods and services from local suppliers by nearly 30 percent—$120 million last year—just the beginning, seed money to get these businesses in the neighborhood supplying the hospital.

Importantly, these 10 hospitals are going into the Chicago middle and high schools offering apprenticeship programs, and it is working. Last year, 5,000 students went through these apprenticeship and intern programs.

This is especially important 2 years into the pandemic. Our hospitals have been hit with shortages of nurses, doctors, and critical support staff—not just in the city of Chicago, I might add, but the entire State. I spoke to the Southern Illinois Health Clinic CEO, and he has talked to me about the same thing they are running into in Chicago. They just don't have enough medical professionals.

I met last week with members of the Illinois Hospital Association. They told me that the shortages and burnouts in our health workforce is their top concern. They are working with local schools to recruit students.

A few years ago, I kept hearing this nursing shortage, nursing shortage, and I decided I had to learn what was behind this. And it is a very simple fact of economics. Here is what it comes down to. If you are a registered nurse in my State of Illinois, it is not uncommon for you to have an opportunity to make a six-figure salary, not uncommon at all. And particularly if you are