

Minutes of the Meeting of the Quality and Patient Safety Committee of the Board of Directors of the Cook County Health and Hospitals System held Wednesday, March 13, 2024 at the hour of 1:00 P.M., at 1950 West Polk Street, Room 5301, in Chicago, Illinois.

I. Attendance/Call to Order

Acting Chair Garza called the meeting to order.

Present: Directors Raul Garza; Tanya R. Sorrell, PhD, PMHNP-BC; and Mia Webster Cross, MSN, RN (3)

Patricia Merryweather (Non-Director Member)

Remotely Present: Chair Jay Bhatt, DO, MPH, MPA (1)

Also

Remotely Attending: Director Joseph M. Harrington

Absent: None (0)

Director Sorrell, seconded by Director Webster Cross, moved to allow Chair Bhatt to remotely participate in this meeting as a voting member. THE MOTION CARRIED UNANIMOUSLY.

Chair Bhatt assumed the Chair.

Additional attendees and/or presenters were:

Abayome Akintorin, MD – John H. Stroger, Jr.
Hospital of Cook County
Claudia Fegan, MD – Chief Medical Officer
Cynthia Fisch - Director of Quality and
Regulatory

Erik Mikaitis, MD – Interim Chief Executive
Officer
Alisha Patel – Assistant General Counsel
Beena Peters, DNP – Chief Nursing Executive
Deborah Santana – Secretary to the Board
Raji Thomas – Interim Chief Quality Officer

The next regular meeting of the Quality and Patient Safety Committee is scheduled for Thursday, April 11, 2024 at 11:30 A.M.

Dr. Erik Mikaitis, Interim Chief Executive Officer, provided a brief Measles update. His verbatim comments are below.

Good afternoon,

I wanted to share with this Committee an update on our ongoing response to the measles situation in Chicago. As you know, there have been 8 cases of measles confirmed within the city over the past week. 7 of those cases are related to exposure at the large city-run shelter for new arrivals.

Cook County Health has cared for 4 of those patients with confirmed measles infections. Because of the scale of the exposure, CDPH has indicated that it is reasonable to expect additional cases to be confirmed in the coming days. As such, we've activated our Incident Command structure within CCH to facilitate communication and planning. We are working closely with the City of Chicago, Cook County government, State of Illinois, and the CDC to coordinate our collective response.

One of CCH's main priorities has been to raise awareness and set a low threshold for our clinical teams to think about Measles for any patients that present with fever, cough or rash. Those are extremely common symptoms, especially for kids. We have created updated resources for our clinical team on our intranet that describes clinical symptoms, isolation and precaution protocols, and testing instructions. We have also shared information via all staff email to provide essential updates to all staff.

Two of the confirmed patients visited Stroger Hospital, the Professional Building and the Arlington Heights Health Center. These patients later tested positive for measles. In response, we issued an exposure notification to the other patients, visitors and staff who may have been in the vicinity of those patients. As a result, we issued a staff notification and media release on Monday.

Because measles vaccination is required for CCH staff, and because we are still requiring masking for both patients and team members in clinical areas, we feel the risk to staff is low. The risk of exposure is most concerning for unvaccinated individuals, as well as pregnant women and children who are too young to be vaccinated. We have shared information about potentially exposed individuals with CCDPH, and our own public health department is currently doing contact tracing for the Arlington Heights exposure.

There are no confirmed measles cases in suburban Cook County, but we are preparing nonetheless. CCDPH has communicated with the providers in their jurisdiction, and the other local municipal health departments in suburban Cook County. CCDPH and our ACHN facilities are discussing plans for collaborative vaccination and testing efforts. We are continuing our public education efforts to encourage people to get vaccinated against measles and raise awareness about measles symptoms. We have added measles to our special COVID and Mpox vaccine hotline so best direct patients seeking vaccination. We have also created multilingual social media graphics and posters about measles.

Regarding our response to new arrivals, we are continuing to offer medical assessments to new arrivals who have gone through the city intake process. We have cared for more than 27,000 patients through nearly 78,000 visits, and we have administered in excess of 73,000 vaccinations.

While we have done yeomen's work offering medical services to patients, it is important to note that neither health assessments nor vaccinations are mandatory. Our care coordination team worked over the weekend in support of the city's response and will continue to have expanded hours. We are in daily communication with the City of Chicago about their needs and how we can potentially support with additional vaccination and testing strategies. I expect to share more information on that in the coming days.

Finally, I want to emphasize how essential vaccination is to stop the spread of measles. The standard two dose series that most people get as young children is 97% effective at preventing measles infection. If someone hasn't gotten vaccinated, now is the time.

I really want to thank our team members who have been working around the clock on this response, especially Dr. Sharon Welbel and the infection control team, Craig Williams, and Dr. Hasbrouck. I'm proud of how our team has mobilized to support both internal and external mitigation efforts. Thank you.

II. Public Speaker Testimony

There was no public speaker testimony provided.

III. Action Items

A. Approve appointments and reappointments of Stroger Hospital Department Chair(s) and Division Chair(s) (Attachment #1)

Dr. Claudia Fegan, Chief Medical Officer, provided an overview of the two (2) proposed Stroger Hospital Division Chair Initial Appointments presented for the Committee's consideration.

Director Garza, seconded by Director Sorrell, moved to approve Item III(A) the two (2) proposed Stroger Hospital Division Chair Initial Appointments. THE MOTION CARRIED UNANIMOUSLY.

B. Executive Medical Staff (EMS) of Stroger Hospital and Medical Executive Committee (MEC) of Provident Hospital Matters

- i. Receive report from EMS President
 - Receive summary of Stroger Hospital-Wide Quality Improvement and Patient Safety Committee (Attachment #2)
 - Approve Stroger Hospital Medical Staff Appointments/Reappointments/Changes (Attachment #3)
- ii. Receive report from MEC President
 - Receive summary of Provident Hospital Quality and Performance Improvement Committee (Attachment #2)
 - Approve Provident Hospital Medical Staff Appointments/ Reappointments/Changes (Attachment #3)

Dr. Abayomi Akintorin, President of the EMS of John H. Stroger, Jr. Hospital of Cook County, reviewed the Stroger Quality Committee summary and presented the proposed Stroger Hospital medical staff action items for the Committee's consideration. Dr. Paul Allegretti, President of the Medical Executive Committee of Provident Hospital, was unexpectedly unable to attend the meeting; the proposed Provident Hospital Medical Staff Appointments/Reappointments/Changes were sent in advance and are presented for the Committee's consideration.

Director Garza, seconded by Director Webster Cross, moved to approve Item III(B) the proposed Stroger Hospital and Provident Hospital medical staff appointments, reappointments and changes. THE MOTION CARRIED UNANIMOUSLY.

C. Minutes of the Quality and Patient Safety Committee Meeting, February 15, 2024

Chair Bhatt inquired whether any corrections needed to be made to the minutes.

Director Sorrell, seconded by Director Webster Cross, moved to accept Item III(C) the Minutes of the Quality and Patient Safety Committee Meeting of February 15, 2024. THE MOTION CARRIED UNANIMOUSLY.

D. Any items listed under Section III

IV. Operational Excellence (OpEx)

A. OpEx Strategy Planning and Deployment

B. Appendix – OpEx Dashboards (Stroger, Provident, ACHN) (Attachment #4)

Raji Thomas, Interim Chief Quality Officer, provided an overview of the OpEx Dashboard. The Committee reviewed and discussed the information.

V. Report on other Quality and Patient Safety Matters

A. Regulatory and Accreditation Updates (Attachment #5)

Cynthia Fisch, Director of Quality and Regulatory, provided an overview of the Regulatory Update. The Committee reviewed and discussed the information.

VI. Closed Meeting Items

A. Stroger Hospital and Provident Hospital Medical Staff Appointments / Re-appointments / Changes

B. Claims, Litigation and Quality and Patient Safety Matters

C. Matters protected under the federal Patient Safety and Quality Improvement Act of 2005 and the Health Insurance Portability and Accountability Act of 1996

D. Quarterly Patient Safety Report

Director Garza, seconded by Director Sorrell, moved to recess the open meeting and convene into a closed meeting, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), regarding “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” 5 ILCS 120/2(c)(11), regarding “litigation, when an action against, affecting or on behalf of the particular body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent, in which case the basis for the finding shall be recorded and entered into the minutes of the closed meeting,” 5 ILCS 120/2(c)(12), regarding “the establishment of reserves or settlement of claims as provided in the Local Governmental and Governmental Employees Tort Immunity Act, if otherwise the disposition of a claim or potential claim might be prejudiced, or the review or discussion of claims, loss or risk management information, records, data, advice or communications from or with respect to any insurer of the public body or any intergovernmental risk management association or self insurance pool of which the public body is a member,” and 5 ILCS 120/2(c)(17), regarding “the recruitment, credentialing, discipline or formal peer review of physicians or other health care professionals, or for the discussion of matters protected under the federal Patient Safety and Quality Improvement Act of 2005, and the regulations promulgated thereunder, including 42 C.F.R. Part 3 (73 FR 70732), or the federal Health Insurance Portability and Accountability Act of 1996, and the regulations promulgated thereunder, including 45 C.F.R. Parts 160, 162, and 164, by a hospital, or other institution providing medical care, that is operated by the public body.”

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ATTACHMENT #1

Meeting of the CCH Quality and Patient Safety Committee

March 7, 2024

Back-Up Material for Item No. ,

Appointment and Re-Appointment of Stroger Hospital Department Chairs and Division Chairs

Respectfully requesting approval of the following:

Initial appointment of the following individual Division Chairs of the Medical Staff of the John H. Stroger, Jr. Hospital of Cook County:

Name	Department/Appt Term	Title
Anshu Singh, MD	Medicine Appt Term 3/1/24 – 3/31/26	Chair of the Division of Post Graduate Medicine
Dipika Patel, MD	Pediatrics Appt Term 3/1/24 – 3/31/26	Chair of the Division of Allergy & Immunology

APPROVED

MAR 22 2024

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

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ATTACHMENT #2

**Stroger Hospital Quality Improvement & Patient Safety (HQIPS) Committee
Summary Report to the Executive Medical Staff (EMS) Committee and Quality and Patient
Safety (QPS) Committee
For March 2024**

Chairs: Dr. Fakhran and Dr. Gomez-Valencia

Meeting Date: January 23rd, 2024, 12-1:30PM In-Person

Regular or Special Meeting: Regular

Minutes/Attendance: Minutes are attached for review at EMS, summary only for QPS

January Highlights:

Department of Imaging Services

- Inpatient turnaround time for STAT CT exceeded the goal of 4 hours in August, September and October of 2023
- Emergency Department turnaround time for STAT CT during all shifts without trauma averaged 2 hours and 10 minutes

Patient Feedback

- The preferred feedback method of contact for Q4 of 2023 was in-person (48.8%), followed by phone call (37.7%)
- One goal of Patient Feedback is to ensure that every CCH facility has adequate access to advocate services
- Another goal of Patient Feedback is to use data to leverage organizational improvements that align with the Patient Bill of Rights and to comply with regulatory standards

Pharmacy

- The prescription and dose volumes for January 2023 – December 2023 include:
 - 8,011,548 doses for the inpatient pharmacy
 - 951,244 prescriptions for the ambulatory pharmacy
- Temperature logs on refrigerators were recorded 100% of the time in December of 2023
- Vaccines were not stored beyond the manufacturer's expiration date in Q3 of 2024

There are no action items for the EMS Committee.

There are no actions for the QPS Committee.

**Provident Hospital Quality & Performance Improvement Committee
Summary Report to the Medical Executive Committee (MEC)
For March 2024**

Chair: David Brady

Meeting Date: January 25^h 11:00am-12:30pm via WebEx

Regular or Special Meeting: Regular

Minutes/Attendance: Minutes are attached for review at MEC, summary only for QPS

January Highlights

Pharmacy

- Total number of prescriptions dispensed in the outpatient pharmacy for Q4 of 2023 was 25,478
- Overall medication fill accuracy rate was 99.99%
- Total number of doses dispensed in the inpatient pharmacy for Q4 of 2023 was 54,669
- Overall medication fill accuracy rate was 100%

Behavioral Health

- 2023 Lipid and Hemoglobin A1C goal has been exceeded every quarter
- Earned a Press Ganey High Reliability Award in 2023

Patient Access

- Monthly registration accuracy percentages for the Emergency Room Department exceeded 92.1% in December of 2023
- Monthly registration accuracy percentages for the Ancillary Services Department exceeded 93.5% in December of 2023
- Monthly registration accuracy percentages for the Same Day Surgery Department exceeded 96.5% in December of 2023

There are no action items for the MEC Committee.

There are no actions for the QPS Committee.

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ATTACHMENT #3



COOK COUNTY HEALTH

Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners

Erik Mikaitis, MD, MBA
Interim Chief Executive Officer
Cook County Health

Board of Directors

Lyndon Taylor
Chair of the Board

Hon. Dr. Dennis Deer, LCPC, CCFC
Vice Chair of the Board

Jay Bhatt, DO, MPH, MPA
Robert Currie
Raul Garza
Joseph M. Harrington
Robert G. Reiter, Jr.

Sam A Robinson, III, PhD
Tanya R. Sorrell, PhD, PMHNP-BC
Otis L. Story, Sr., MA, MHHSA, FACHE
Mia Webster Cross, MSN, RN

To: Quality and Patient Safety Committee

From: Executive Medical Staff Committee of John H. Stroger Jr., Hospital

Date: March 01, 2024

CC: Cook County Health

Memo: John H. Stroger Jr., Hospital Medical Staff Action Items

Dear Members of the Quality and Patient Safety Committee of the CCH Board:

Please be advised that the Executive Medical Staff Committee of John H. Stroger Jr., Hospital of Cook County Health has approved the attached list of medical staff action items by electronic vote on March 01, 2024, for your consideration.

Thank you kindly and respectfully submitted,

Abayomi E. Akintorin, MD
President, Executive Medical Staff (EMS)



TO: Quality, Patient and Safety Committee

FROM: Abayomi E. Akintorin, MD
EMSC President

SUBJECT: Medical Staff Appointments and Other Business Recommended by the **Credentials Committee** held on **02/22/2024**.

Medical Staff Appointments/Reappointments Effective 03/07/2024 and are subject to Approval by Cook County Health Systems Boards.

PHYSICIAN PROVIDERS

NEW BUSINESS

Initial(s):

Bhorade, Rajeev, MD -Radiology/**Recommended**

Comments: Temporary privileges granted 2/9/2024

Carre, Joseph N., MD - Radiology/**Recommended**

Comment: Temporary privileges granted 2/9/2024

De Bruin, David, MD - Radiology/**Recommended**

Comment: Temporary privileges granted 2/8/2024

Doshi, Taral Jitendra, MD - Radiology/**Recommended**

Comment: Temporary privileges granted 2/22/2024

Goyal, Shami, MD – Family Medicine/**Recommended**

Guzalo, Erica Annette, MD - Radiology/**Recommended**

Comment: Temporary privileges granted 2/13/2024

Habib, Ali, MD – Radiology/**Recommended**

Comment: Temporary privileges granted 2/8/2024

Kay, Daniel J., MD - Radiology/**Recommended**

Licea, Rosaura, MD - Family Medicine/**Recommended**

Padilla, Nicole Marie, MD - Family Medicine/**Recommended**

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Patel, Anand DO Medicine – Internal Medicine/**Recommended**

Pejic Marijan, MD - Radiology/**Recommended**

Comment: Temporary privileges granted 2/09/2024

Pierre-Jerome, Frantz - MD Radiology/**Recommended**

Souman, Tameem M., MD - Radiology/**Recommended**

Comment: Temporary privileges granted 2/13/2024

Srivastava, Akanksha DDS - Surgery/Ora & Maxillofacial/**Recommended**

Tandon, Rajive, MD - Pulmonary & Critical Care/**Recommended**

Xu, Hanna MD - Family Medicine/**Recommended**

Reappointment(s):

Advani, Tushar, MD - Psychiatry/**Recommended**

Aguirre Castaneda, Roxana Luisa, MD - Pediatrics/Endocrinology/**Recommended**

Alebich, Michael DO - Hospital Medicine/**Recommended**

Awad, Sawsan, M., MD - Pediatrics/Peds Cardiology/**Recommended**

Bonomo, Steven R., MD - Surgery/General Surgery/**Recommended**

Czech, Kimberly A., MD - Pediatrics/Nephrology/**Recommended**

Disaviono, Elia MD - Medicine Neurology/**Recommended**

Egofske, Peter, J. MD - Radiology/Special Procedures/**Recommended**

Escalona, Yolanda, DO - Medicine, General Medicine/**Recommended**

Ferrer, Karen MD – Pathology/**Recommended**

Gobbi, Elizabeth, MD - Medicine, General Medicine/**Recommended**

Hart, Peter MD – Medicine/Nephrology/**Recommended**

Hamedani, Matthew S., DDS - Surgery/Oral & Maxillofacial/**Recommended**

Hentea, Cristina, MD - Pediatrics/Hematology/Oncology/**Recommended**

Imran, Muhammed, MD - Medicine, General Medicine/**Recommended**

Kato, Caroline, DO - Radiology, Diagnostic/**Recommended**

Kelly, Carolyn Marie DPM - Surgery/Podiatric/**Recommended**

Kotwal, Vikram MD - Medicine/Gastroenterology/**Recommended**

Malhotra, Saurabh MD – Medicine/Cardiology/**Recommended**

Maric, Nevenka MD - General Medicine/**Recommended**

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Mascarell, Susana, MD - Medicine, Endocrinology/**Recommended**
McPherson, Julita, M., MD - Family Medicine/**Recommended**
Murphy, Daniel Patrick DO - Family Medicine /**Recommended**
Nichols, Jeffrey W. MD - Surgery/Ophthalmology/**Recommended**
Paintsil, Isaac MD - Hospital Medicine/**Recommended**
Peart, Malaika Yahaira MD - Hospital Medicine/**Recommended**
Prempeh, Avril Linda Serwah MD - Hospital Medicine/**Recommended**
Ruggero, John – Trauma/**Recommended**
Rubin, Rachel, MD - Medicine, General Medicine/**Recommended**
Tennery, Stephanie, MD - OB/GYN/**Recommended**
Vij, Aviral MD - Medicine/Adult Cardiology/**Recommended**
Wang, Jenny Y., MD - Pediatrics/Critical Care Medicine/**Recommended**

Change in Clinical Privilege(s):

Collins, Yvonne, MD: OB/GYN- closure of FPPE (Re-entry plan) **Recommended**
Addition of surgical interventions for women w/Gynecological cancers w/restrictions
Vaithilingam, Siddharthan, MD: Pulmonary & Critical Care **Recommended**
Addition of EUS, ultrasound guided liver biopsy and core needle biopsy

Change in Category include to include “FPPE Initial” noted in MSOW images:

Armenta, Alexia MD – Emergency Medicine – Provisional to Consulting **Recommended**
Boubouleix, Kevin MD – Emergency Medicine – Provisional to Consulting **Recommended**
Coyle, Meredith MD – Medicine/Infectious Disease – Provisional to Active **Recommended**
Ehlers, Paul MD – Emergency Medicine – Provisional to Consulting **Recommended**
Gupta, Nita MD – Emergency Medicine – Provisional to Consulting **Recommended**
Kattar, Sandeep MD – Family Medicine – Provisional to Consulting **Recommended**
Mantis, Stelios MD – Pediatrics/Peds Dermatology – Provisional to Active **Recommended**
Montminy, Eric MD – Medicine/Gastroenterology – Provisional to Active **Recommended**
Mularczyk, Christopher MD – Surgery/Otolaryngology – Provisional to Consulting **Recommended**
Osborn, Rebecca MD – Medicine/Infectious Disease – Provisional to Active **Recommended**
Petrusevski, Taylor MD – Emergency Medicine – Provisional to Consulting **Recommended**
Zia, Maryam Fatima, MD – Hematology/Oncology – Active to LOA **Recommended**

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Zilberstein, Ashley MD – Pediatrics/Peds Dermatology – Provisional to Active **Recommended**

Resignations/Retirements:

Berg, Sarah, MD – Emergency Medicine **Recommended**

Garbharran, Sharad, MD - Psychiatry **Recommended**

Kolluri, Harini, MD – Pediatrics **Recommended**

Logan, Latania, MD – Pediatrics **Recommended**

Mafee, Mariam, MD – Dermatology **Recommended**

Mostafa, Gamal, MD – Surgery **Recommended**

Nimmagadda, Anitha – Medicine **Recommended**

Raji Osobu, Zainab, MD - Emergency Medicine **Recommended**

Schutt, Ryan, DO, - Trauma **Recommended**

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NON-PHYSICIAN PROVIDERS (NPP):

OLD BUSINESS

N/A

NEW BUSINESS

Initial(s):

Andrews, Binoy M APRN - General Medicine/ **Recommended**

Blaj, Julianna, APRN, Family Medicine/ **Recommended**

Comments: On NPP Protocol

Khilevich, Hannah PA-C - Medicine, Correctional Health/**Recommended**

Holman, Iris PA-C, Medicine - Correctional Health Services/**Recommended**

Klein, Matthew PA-C - Medicine, Neurology/**Recommended**

Comments: Temp privileges granted 2/7/2024

McClain, Pamela J., CCP - Surgery/Cardiothoracic/**Recommended**

Soriano, Gladis, APRN - Family Medicine/**Recommended**

Reappointment(s):

Buchanan, Latoya Jenae, LCSW - Psychiatry/**Recommended**

Falsey, Erin, CGC - Pediatrics/**Recommended**

Hansberry, Thomas, LCSW - Psychiatry/**Recommended**

Kempkiewicz, Samantha PA-C - Medicine/Adult Cardiology/**Recommended**

Vellookunnel, Shilpa PA-C - Medicine, Adult Cardiology/**Recommended**

Change in Collaboration (Addition/Removal):

Roberts, Kenrick PA-C – Trauma: Adding Collaborative Physician-Juan Rodriguez, MD/**Recommended**

Change in Clinical Privilege(s):

Larkin, Clara M., APRN- Family Medicine: Adding Prescriptive Authority/**Recommended**

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Change in Collaboration (From/To):

Dupiton, Sabine, PA-C - Gastroenterology

To: Anas Almoghrabi, MD - From: William Riles, MD/**Recommended**

Change in Category Status:

Augustine, Elma, Psy.D. - Psychiatry

Provisional to Psy.D./**Recommended**

Domanico Jalovec, Adrianna, LCSW - Psychiatry/Social Worker

Provisional to LCSW/**Recommended**

Igbinoba, Osasumwen, APRN - Psychiatry

Provisional to APRN/**Recommended**

Menendez, Beatriz, CGC - Psychiatry

Provisional to Provisional/**Recommended**

Resignations/Retirements:

Henderson, Jeffrey, CRNA - Anesthesiology/**Recommended**

McGee, Natalia, APRN - Medicine/**Recommended**

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Sanction Screening Reporting –

IDFPR Disciplinary Action Report for December 2023 reviewed as of 2/14/2024 – No Findings.

CMS OPT OUT Affidavits report reviewed as of 2/14/2024 – No Findings.

CMS Preclusion Report reviewed as of 2/14/2024 – No Findings.



COOK COUNTY HEALTH

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President
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Cook County Health

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Robert G. Reiter, Jr.
Sam A Robinson, III, PhD
Tanya R. Sorrell, PhD, PMHNP-BC
Mia Webster Cross, MSN, RN

Deborah Santana
CCH Secretary to the Board
1950 W. Polk Street, Room 9106
Chicago, IL 60612

March 1, 2024

Dear Members of the Quality and Patient Safety Committee:

Please be advised that on March 1, 2024, the Provident Hospital Medical Executive Committee voted to approve the Provident Hospital Credentials Committee recommended actions on the enclosed documents. It is being presented to you for your consideration.

Respectfully,

Paul Allegretti, DO
Provident Hospital of Cook County
President, Medical Staff
Chair, Medical Executive Committee

Provident Hospital of Cook County

TO: Quality and Safety Committee

FROM: Paul Allegretti, DO
President, Medical Executive Committee

SUBJECT: Medical Staff Appointments and Other Business Recommended by the
Medical Executive Committee on March 1, 2024

Medical Staff Appointments/Reappointments Effective: 3/7/24 subject to Approval by the Cook County Health.

Physicians:

New Business

Initial(s):

Goyal, Shami, MD - Family Medicine - Recommended
Patel, Anand, DO – Medicine/Internal Medicine - Recommended
Tandon, Rajive, MD -Pulmonary & Critical Care – Recommended
Zhang, Rainy, MD - Hospital Medicine - Recommended

Reappointment(s):

Bonomo, Steven R., MD - Surgery/General - Recommended
Gobbi, Elizabeth, MD -Internal Medicine - Recommended
Hamedani, Matthew S. DDS - Surgery/Oral & Maxillofacial - Recommended
Imran, Muhammed, MD - Internal Medicine - Recommended
Kato, Caroline, DO - Radiology/Diagnostic - Recommended
Kotwal, Vikram MD -Gastroenterology - Recommended
Malhotra, Saurabh MD – Medicine/Cardiology - Recommended
Mascarell, Susana, MD - Endocrinology - Recommended
McPherson, Julita, M. - MD, Family Medicine - Recommended
Nichols, Jeffrey W., MD - Surgery/Ophthalmology - Recommended
Sanati, Maryam, MD - Hospital Medicine - Recommended
Vij, Aviral MD - Cardiology - Recommended
Welbel, Sharon MD - Infectious Disease - Recommended

Change in Category:

Coyle, Meredith MD – Medicine/General Surgery – Provisional to Affiliate - Recommended
Hasan, Jafar S. MD – Surgery/Plastic Surgery – Affiliate to Active - Recommended
Komar, Thomas MD – Surgery/Infectious Disease – Provisional to Affiliate - Recommended
Montminy, Eric MD – Medicine/Gastroenterology – Provisional to Affiliate - Recommended

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Osborn, Rebecca MD – Medicine/Infectious Disease – Provisional to Affiliate - Recommended

Resignation(s):

Kelekar, Anita, MD – Radiology - Informational

Lynch, Linda Lynch, DO – Emergency Medicine - Informational

Mostafa, Gamal, MD – Surgery - Informational

Syed, Najeeb, MD – Internal Medicine – Informational

Non-Physician Providers (NPP):

New Business

NPP Initial:

Onwueme, Bundo E., PA-C, Surgery/Plastic Surgery - Recommended

NPP Reappointment(s):

Buchanan, Latoya Jenae, LCSW, Psychiatry - Recommended

Buresh, Alexa, PA-C, Surgery - Recommended

Hansberry, Thomas, LCSW, Psychiatry - Recommended

Kempkiewicz, Samantha PA-C, Medicine/Adult Cardiology - Recommended

Vellookunnel, Shilpa PA-C, Medicine/Adult Cardiology - Recommended

NPP Change in Category:

Igbinoba, Osasumwen, APRN Psychiatry Provisional to APRN - Recommended

Resignation(s):

Stacy Ervin, APRN – Hospital Medicine - Informational

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ATTACHMENT #4



Op Ex Steering Committee Dashboard for Stroger Hospital

DOMAIN WORKGROUPS		Metrics															
PATIENT EXPERIENCE		Target	Stretch Target	Baseline	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24
Rolling 12-month % Top Box for Comm. w/ Nursing Domain		73.00%	77.00%	69.30%	70.42%	70.44%	70.28%	69.26%	69.01%	68.69%	68.70%	69.17%	69.30%	68.86%	69.45%	68.97%	69.43%
Monthly % Top Box for Comm. w/ Nursing Domain		73.00%	77.00%	69.30%	65.01%	77.22%	70.33%	62.66%	67.72%	72.51%	66.51%	76.00%	73.45%	66.51%	69.28%	61.43%	70.34%
Rolling 12-month Survey Response Rate		15.00%	16.00%	13.60%	12.70%	12.80%	13.00%	12.90%	8.30%	13.00%	13.30%	13.50%	13.50%	13.00%	13.30%	13.40%	
Monthly Survey Response Rate		15.00%	16.00%	13.60%	14.10%	14.10%	14.50%	14.60%	12.90%	13.50%	16.40%	13.90%	14.20%	10.50%	12.20%	10.20%	
CLINICAL OUTCOMES		Target	Stretch Target	2022	2023	2024 Trend	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	
Monthly Volume of CLABSI		<=4	0	8	11	12	2	1	0	0	2	1	1	1	1	1	
SIR Rate CLABSI				0.56	0.76		1.90	0.87	0.00	0.00	2.00	0.76	0.78	0.61	0.60	0.80	
Monthly Volume of CAUTI		<=3	0	12	11	12	1	1	1	2	0	0	0	2	2	1	
SIR Rate CAUTI				0.46	0.47		0.55	0.47	0.43	1.00	0.00	0.00	0.00	1.00	1.00	0.51	
Monthly Volume of CDIF		<=11	0	43	27	24	3	2	1	3	2	1	3	4	3	2	
SIR Rate CDIF				0.64	0.38											pending	
		Target	Stretch Target	Baseline	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	
Monthly Volume of VTE PSI-12		<=7	0	14	0	0	4	0	1	0	3	1	0	1	2	2	
READMISSIONS		Target	Stretch Target	Baseline	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	
Rolling 12-month All Cause, All Payer, All Age - Readmissions Rate - CMS Definition Same Hospital		8.40%	8.00%	9.40%	9.37%	9.37%	9.03%	8.97%	8.88%	9.15%	9.22%	9.28%	9.19%	9.20%	8.89%	8.89%	
Monthly All Cause, All Payer, All Age - Readmissions Rate - CMS Definition Same Hospital		8.40%	8.00%	9.40%	9.18%	9.77%	8.23%	9.28%	9.04%	10.41%	8.28%	9.45%	8.48%	9.60%	6.65%	8.24%	
		Target	Stretch Target	Baseline	10/21-9/22	11/21-10/21	12/21-11/22	1/22-12/22	2/22-1/23	3/22-2/23	4/22-3/23	5/22-4/23	6/22-5/23	7/22-6/23	8/22-7/23	9/22-8/23	
IHA Rolling 12-Month All Cause All Payer - Readmissions including other hospitals		13.00%	12.00%	14.00%	14.72%	14.76%	14.59%	14.52%	14.44%	14.10%	14.13%	13.80%	14.08%	13.99%	14.07%	13.84%	
CLINICAL DOCUMENTATION		Target	Stretch Target	Baseline	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	
Monthly Avg CMI: Overall		1.9316	2.1000	1.7560	1.729	1.731	1.829	1.702	1.761	1.754	1.827	1.729	1.767	1.721	1.775	1.771	
Monthly Avg CMI: Medicine		1.3738	1.7400	1.2489	1.235	1.257	1.264	1.233	1.274	1.297	1.264	1.170	1.258	1.277	1.302	1.316	
Monthly Avg CMI: Surgical		3.3241	3.9000	3.0219	2.965	2.951	3.202	2.933	2.938	2.937	3.164	3.096	3.123	2.979	3.081	2.994	



Op Ex Steering Committee Dashboard for Stroger Hospital



Data sources: Patient Experience from Press Ganey; HAIs-Infection Control Dept; VTE PSI - Vizient; Readmissions - Vizient & Illinois Hospital Association; CMI-Vizient
Author: J. Rozenich, BS, MBA

Legend	Not meeting Target and no improvement from baseline performance	Not meeting target but improving from Baseline	Met Goal	Met Stretch Target



Op Ex Steering Committee Dashboard for Provident Hospital

DOMAIN WORKGROUPS		Metrics															
PATIENT EXPERIENCE		Target	Stretch Target	Baseline	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24
Rolling 12-month % Top Box for Comm. w/ Nursing Domain		79.80%	80.00%	74.63%	66.86%	69.39%	71.21%	72.25%	75.28%	76.07%	77.78%	74.63%	78.55%	76.89%	76.08%	79.13%	78.86%
Monthly % Top Box for Communication w/ Nursing Domain		79.80%	80.00%	74.63%	72.22%	86.67%	66.67%	74.07%	100.00%	77.78%	96.30%	66.67%	80.00%	63.64%	55.56%	100.00%	63.89%
Rolling 12-month Survey Response Rate		18.00%	20.00%	11.80%	11.80%	11.50%	12.00%	11.30%	11.90%	12.00%	11.90%	12.30%	12.70%	12.40%	12.60%	11.80%	
Monthly Survey Response Rate		18.00%	20.00%	11.80%	8.80%	12.00%	11.40%	6.60%	17.40%	14.30%	10.90%	15.40%	15.40%	12.70%	9.80%	8.60%	
CLINICAL OUTCOMES		Target	Stretch Target	Baseline	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	
Rolling 12 month SEP-1 Bundle Compliance		60.00%	65.00%	50.00%	50.00%	45.45%	52.38%	44.44%	44.83%	48.48%	48.65%	50.00%	45.00%	46.15%	47.50%	46.15%	
Monthly SEP-1 Bundle Compliance		60.00%	65.00%	50.00%	75.00%	0.00%	100.00%	16.67%	33.33%	75.00%	50.00%	66.67%	25.00%	33.00%	100.00%	0.00%	
Monthly Hand Hygiene Compliance		Target	Stretch Target	Baseline	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24								
		80.00%	90.00%	75.38%	72.78%	67.86%	65.07%	73.51%	75.12%								
THROUGHPUT		Target	Stretch Target	Baseline	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	
Rolling 12-month LWBS		4.50%	4.00%	5.50%	3.66%	3.80%	3.99%	4.12%	4.30%	4.46%	5.18%	5.51%	5.93%	6.49%	7.17%	7.40%	
Monthly LWBS Rate		4.50%	4.00%	5.50%	2.84%	3.93%	4.78%	4.12%	5.85%	5.95%	13.00%	8.27%	11.45%	11.59%	11.67%	5.55%	

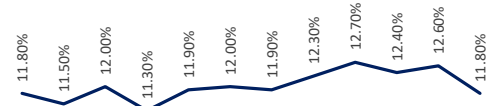


Op Ex Steering Committee Dashboard for Provident Hospital

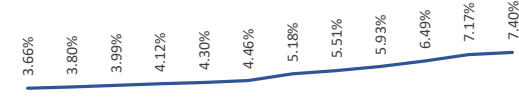
Provident Rolling 12-month % Top Box for Communication w/ Nursing Domain



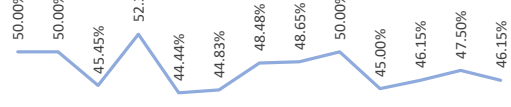
Provident Rolling 12-month Survey Response Rate



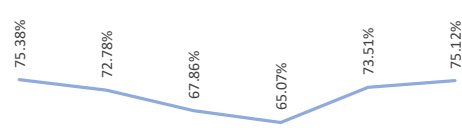
Provident Rolling 12-month LWBS Rate



Provident Rolling 12-month SEP-1 Bundle Compliance Rate



Provident Monthly Hand Hygiene Compliance



Legend



Data sources: Patient Experience from Press Ganey; Sep-1 Bundle chart abstracted CMS measure; Hand Hygiene TST Infection Control observation software; LWBS - BI Tableau
Author: J. Rozenich, BS, MBA

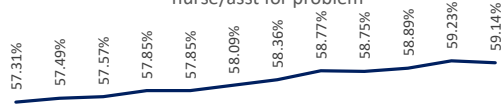


Op EX Steering Committee Dashboard for ACHN

DOMAIN WORKGROUPS Metrics

PATIENT EXPERIENCE		Target	Stretch Target	Baseline	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24
Rolling 12-month Concern of nurse/asst for problem		61.34%	63.56%	58.77%	57.31%	57.49%	57.57%	57.85%	57.85%	58.09%	58.36%	58.77%	58.75%	58.89%	59.23%	59.14%
Monthly Concern of nurse/asst for problem		61.34%	63.56%	58.77%	58.32%	58.94%	58.32%	58.23%	58.27%	59.52%	59.18%	60.57%	59.56%	61.37%	62.83%	57.25%
Rolling 12-month Provider CP explanations of prob/condition		66.80%	69.84%	64.78%	63.73%	63.83%	64.10%	64.18%	64.36%	64.58%	64.76%	64.78%	64.83%	64.98%	65.14%	64.94%
Monthly Provider CP explanations of prob/condition		66.80%	69.84%	64.78%	65.06%	63.92%	65.77%	64.60%	64.56%	65.03%	66.18%	64.88%	64.08%	67.58%	67.38%	62.36%
Rolling 12-month Courtesy of registration staff †		60.00%	65.00%	60.00%								60.00%	59.59%	60.90%	61.70%	60.27%
Monthly Courtesy of registration staff †		60.00%	65.00%	60.00%								60.00%	59.59%	62.31%	63.55%	58.10%
HEDIS		Target	Stretch Target	Baseline	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24
Rolling 12-month Hypertension Population Management BP <140-90 (Engaged & Affiliated)		55.00%	60.00%	50.53%	55.60%	55.90%	56.60%	57.10%	57.80%	58.00%	57.00%	56.00%	55.20%	54.90%	54.00%	53.70%
Rolling 12-month Cervical Cancer Screening (Engaged & Affiliated)		47.00%	52.00%	42.83%	43.90%	44.80%	45.60%	46.10%	46.30%	46.40%	46.40%	45.06%	45.91%	46.13%	46.00%	46.20%

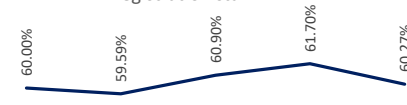
ACHN Amb Services Rolling 12-month Concern of nurse/asst for problem



ACHN Amb Services Rolling 12-month Provider CP explanations of prob/condition



ACHN Amb Services Rolling 12-month Courtesy of registration staff †



ACHN Amb Services Rolling 12-month Hypertension Population Management BP <140-90 (Engaged & Affiliated)...



ACHN Amb Services Rolling 12-month Cervical Cancer Screening (Engaged & Affiliated)...



Legend

Not meeting Target and no improvement from baseline performance	Not meeting target but improving from Baseline	Met Goal	Met Stretch Target
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Cook County Health and Hospitals System
Minutes of the Quality and Patient Safety Committee Meeting
March 13, 2024

ATTACHMENT #5

COOK COUNTY
HEALTH

CCH Regulatory Update

March 2024



COOK COUNTY
HEALTH

Regulatory Updates

March 2024

Provident:

- Presentations of audit data for the Joint Commission Triennial Hospital Survey are reported out regularly.
- Compliance of each finding is presented at select Hospital Committee Meetings.

Stroger:

- Corrective actions are underway on findings from the Mock Survey with updates reported out at our regulatory meeting to ensure compliance.
- The Primary Stroke Certification Program successfully completed the Intracycle Call with a *Passed Certification Decision* from The Joint Commission