

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 Thursday, April 21, 2022 at the hour of 10:00 A.M. This meeting was held by remote means only, due to the determination that a public health emergency exists.

I. Attendance/Call to Order

Chair Gugenheim called the meeting to order.

Present: Chair Ada Mary Gugenheim and Directors Mike Koetting (Substitute Member) and Heather M. Prendergast, MD, MS, MPH (3)

Board Chair Lyndon Taylor (ex officio) and Directors Hon. Dr. Dennis Deer, LCPC, CCFC and Joseph M. Harrington

Patricia Merryweather (Non-Director Member)

Absent: Directors Raul Garza and Otis L. Story, Sr. (2)

Additional attendees and/or presenters were:

Ciarria Alfred-Williams – Director of Quality,
Regulatory Affairs and Accreditation
Claudia Fegan, MD – Chief Medical Officer
Leslie Frain – Associate Chief Quality Officer
Umair Jabbar, MD – Stroger Hospital Division of
Hospital Medicine
Jeff McCutchan - General Counsel

John O'Brien, MD – Chair, Department of
Professional Education
Israel Rocha, Jr. – Chief Executive Officer
Deborah Santana – Secretary to the Board
Cassandra Wadlington – Director of Inpatient
Care Coordination

The next regular meeting of the Quality and Patient Safety Committee is scheduled for Thursday, May 19, 2022 at 10:30 A.M.

II. Electronically Submitted Public Speaker Testimony

There was no public testimony submitted.

III. Report on Quality and Patient Safety Matters

A. High Reliability Organization (HRO) Dashboard (Attachment #1)

Leslie Frain, Associate Chief Quality Officer, provided an overview of the HRO Dashboard. The Committee reviewed and discussed the information.

B. Regulatory and Accreditation Updates (Attachment #2)

Ciarria Alfred-Williams, Director of Quality, Regulatory Affairs and Accreditation, provided an overview of the Regulatory Update. The Committee reviewed and discussed the information.

C. Update from HRO Readmissions Workgroup (Attachment #3)

The following individuals provided an overview of the Update from the HRO Readmissions Workgroup: Dr. Umair Jabbar, from the Stroger Hospital Division of Hospital Medicine; and Cassandra Wadlington, Director of Inpatient Care Coordination. The Committee reviewed and discussed the information.

IV. Action Items

NOTE: action was taken on Agenda Items IV(A), IV(C) and IV(D) in one (1) combined motion.

A. Overview of Resident/Fellow Training (Attachment #4)

- Approve proposed clinical training affiliation agreements (included in Attachment #4)

Dr. John O'Brien, Chair of the Department of Professional Education, provided an overview of the presentation on Resident/Fellow Training and presented the proposed clinical training affiliation agreements for the Committee's consideration.

B. Approve appointments and reappointments of Stroger Hospital Department Chair(s) and Division Chair(s)

None were presented for consideration.

C. 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 #5)
 - Approve Stroger Hospital Medical Staff Appointments/Reappointments/Changes (Attachment #6)
- ii. Receive report from MEC President
 - Receive summary of Provident Hospital Quality and Performance Improvement Committee (Attachment #5)
 - Approve Provident Hospital Medical Staff Appointments/ Reappointments/Changes (Attachment #6)

Dr. Abayomi Akintorin, President of the EMS of John H. Stroger, Jr. Hospital of Cook County, was unable to attend due to an unexpected work-related conflict, and Dr. Marlon Kirby, President of the MEC of Provident Hospital of Cook County, was also unable to attend. It was noted that the Stroger and Provident Hospital Quality Committee summaries were sent in advance for the Committee's information, and the proposed Stroger Hospital and Provident Hospital medical staff action items are being presented for the Committee's consideration.

D. Minutes of the Quality and Patient Safety Committee Meeting, March 18, 2022

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

E. Any items listed under Sections IV and V

Director Prendergast, seconded by Director Koetting, moved the following:

- Approve Item IV(A) proposed clinical training affiliation agreements;
- Approve Item IV(C) Stroger Hospital medical staff appointments, reappointments and changes;
- Approve Item IV(C) Provident Hospital medical staff appointments, reappointments and changes;
- Accept Item IV(D) March 18, 2022 Quality and Patient Safety Committee Meeting Minutes

A roll call vote was taken, the votes of yeas and nays being as follows:

Yeas: Chair Gugenheim and Directors Koetting and Prendergast (3)

Nays: None (0)

Absent: Directors Garza and Story (2)

THE MOTION CARRIED UNANIMOUSLY.

V. 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**

The Committee did not recess into a closed meeting.

VI. Adjourn

As the agenda was exhausted, Chair Gugenheim declared the meeting
ADJOURNED.

Respectfully submitted,
Quality and Patient Safety Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Ada Mary Gugenheim, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Follow-up/Requests

There were no requests for follow-up made at the meeting.

Cook County Health and Hospitals System
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ATTACHMENT #1

COOK COUNTY
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HRO Dashboard

Quality and Patient Safety Committee

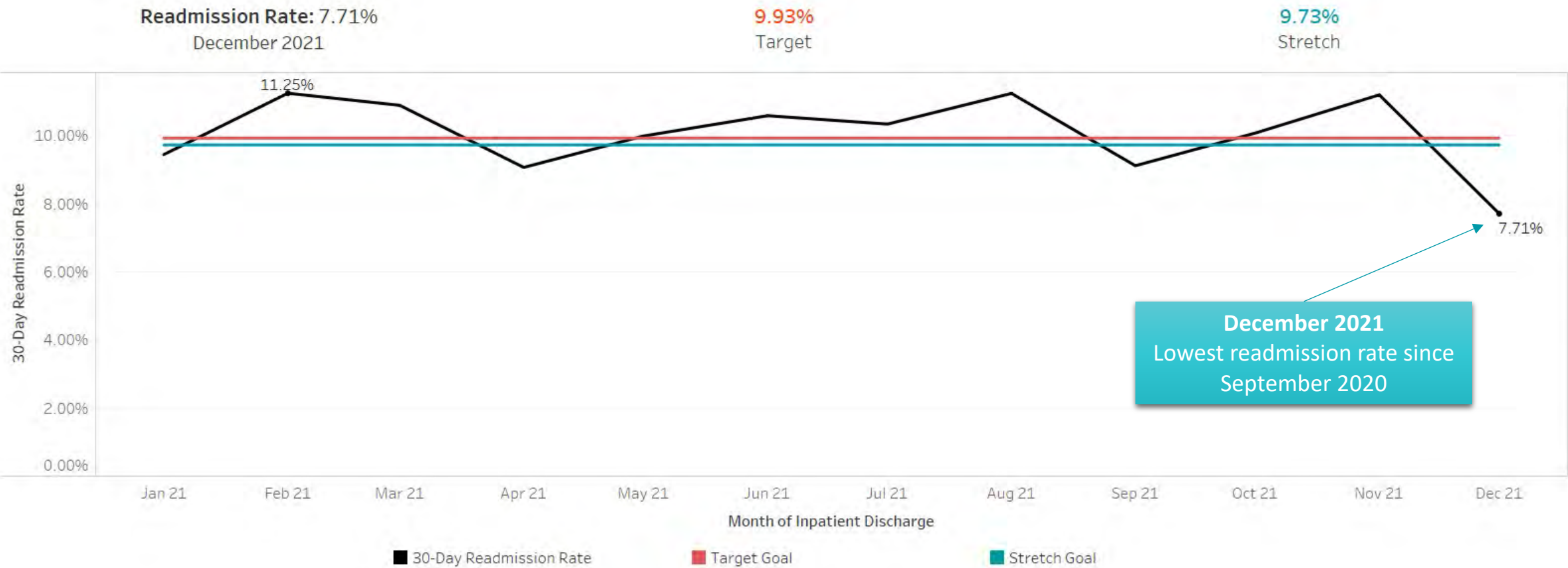
April 2022



COOK COUNTY
HEALTH

30-Day Readmission Rate (Stroger Hospital)

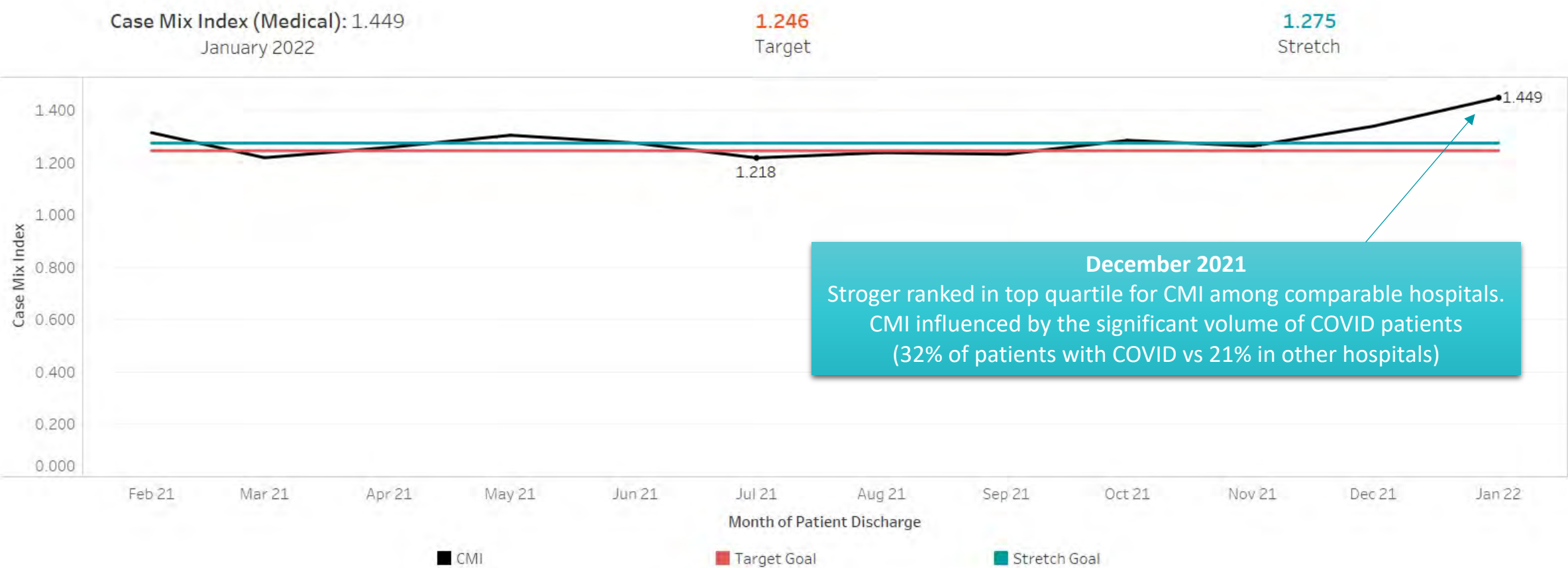
HRO Domain: Readmissions



*Lower readmission rate is favorable

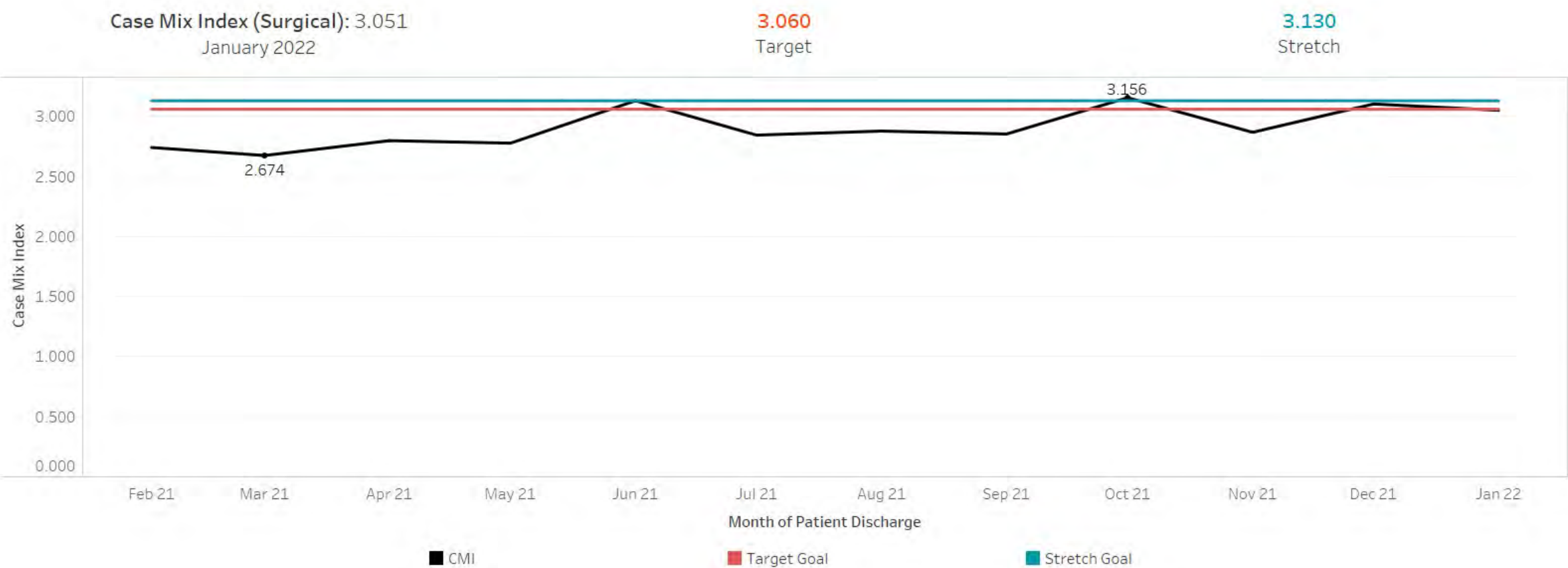
Case Mix Index, Medical MS-DRG (Stroger Hospital)

HRO Domain: Clinical Documentation



Case Mix Index, Surgical MS-DRG (Stroger Hospital)

HRO Domain: Clinical Documentation



*Higher case mix index is favorable

Top Box Score, Recommend the Hospital (Stroger Hospital)

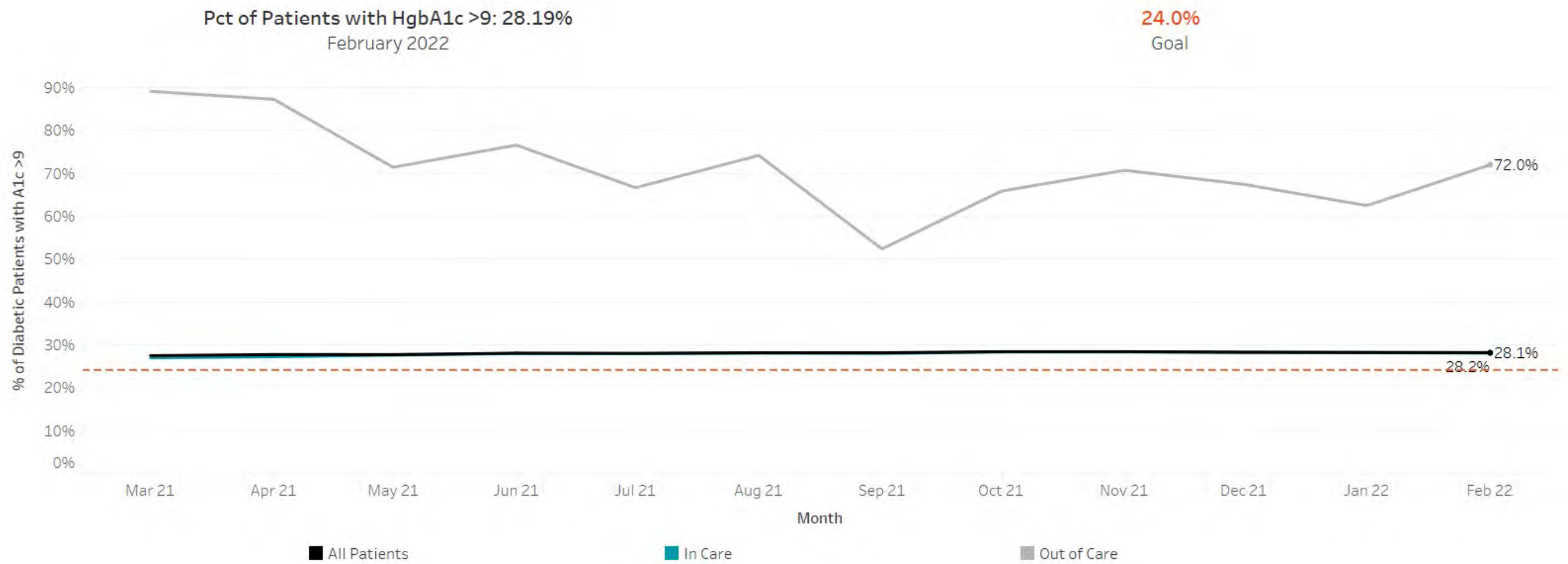
HRO Domain: Patient Experience



*Higher top box score is favorable

HbA1c >9%

HRO Domain: HEDIS



*Lower percent of diabetes patients (>9%) is favorable

Metric	Definition
30-Day Readmission Rate	<ul style="list-style-type: none"> • <i>Patient unplanned admission to Stroger within 30 days after being discharged from an earlier hospital stay at Stroger</i> • Calculation: Raw unplanned readmission rate (# of readmissions / total # of eligible discharges) • Population included: all inpatient discharges from <u>Stroger</u> • Cohort inclusions: any payer; any age; alive at discharge • Cohort exclusions: Admitted for primary psychiatric dx; admitted for rehabilitation; admitted for medical treatment of cancer (chemotherapy, radiation therapy); admitted for dialysis; admitted for delivery/birth • Reporting timeframe: reported monthly with a 1-month lag to allow for 30-day readmission window; reported by month of patient discharge • Data source: Vizient Clinical Data Base
Case Mix Index	<ul style="list-style-type: none"> • <i>Average relative DRG weight of a hospital's inpatient discharges, calculated by summing the Medicare Severity-Diagnosis Related Group (MS-DRG) weight for each discharge and dividing by the total number of discharges</i> • Population included: all inpatient discharges from <u>Stroger</u> • Cohort inclusions: any payer; any age; reported by Medical MS-DRG and Surgical MS-DRG (<i>Surgical: an OR procedure is performed</i>) • Cohort exclusions: none • Reporting timeframe: reported monthly by most current month available; reported by month of patient discharge • Data source: Vizient Clinical Data Base
Recommend the Hospital	<ul style="list-style-type: none"> • <i>Percent of patient responses with "Definitely Yes" (top box response) for Recommend the Hospital item in HCAHPS survey</i> • Calculation: Percent of patient responses with "Definitely Yes" (top box) / total survey responses • Population included: Stroger; 18 years or older at time of admission; non-psychiatric MS-DRG/principal diagnosis at discharge; alive at discharge; >1 overnight stay in hospital as inpatient • Cohort exclusions: discharged to hospice care; discharged to nursing homes or SNFs; court/law enforcement patients; patients with a foreign home address; "no-publicity" patients"; patients who are excluded because of rules and regulates of state in which hospital is located • Reporting timeframe: reported monthly by most current month available; reported by month of survey received date • Data source: Press Ganey
HbA1c >9%	<ul style="list-style-type: none"> • <i>Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is not in control (>9.0%)</i> • Calculation: Percent of diabetic patients with HbA1c not in control / total diabetic patients • Population included: (Age 18-75 years as of December 31 of current year AND two diabetic Outpatient/ED visits in the current year or previous year) <i>OR</i> (One diabetic Inpatient visit in the current year or previous year) <i>OR</i> (Prescribed insulin or hypoglycemic or anti-hyperglycemics in the current year or previous year) • Cohort exclusions: none • Reporting timeframe: reported monthly by most current month available; reported by month of patient visit • Data source: NCQA, HEDIS

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ATTACHMENT #2

CCH Regulatory

Ciarria Alfred-Williams, BBA, MPH
Director of Quality, Regulatory Affairs and Accreditation

April 2022



COOK COUNTY
HEALTH

Regulatory Updates

April 2022

Upcoming Surveys 2022

- Provident CAP (College of American Pathologists) Survey: May 12, 2022
- Stroger Trauma Designation Survey (New): December 2022
- Stroger Stroke Certification Survey: Window open July-Dec 2022
- Provident TJC Extension Survey for Mobile MRI-Pending 1 day unannounced expected after July 18,2022
- Belmont Cragin Health Center TJC Extension Survey -Pending 1 day unannounced

Updates/Future

- Joint Commission Stroke Survey Preparation-Starts April 2022 (QHR will be hosted a Mock Survey April 20, 2022)
- Stroger Trauma Designation Survey Preparation-Started February 2022
- Provident CAP (College of American Pathologists) Survey Preparation-On-going

Thank You



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ATTACHMENT #3

Readmissions Workgroup QPS Meeting

April 21, 2022



Cassandra Wadlington, RN

Umair Jabbar, MD

Workgroup Leaders



COOK COUNTY
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Hospital Readmissions

CMS Star Rating

Condition Specific Readmissions	April Report Jul 2016 to Jun 2019		July Report Jul 2017 to Dec 2019	
	Stroger	Nat'l Rate	Stroger	Nat'l Rate
Acute Myocardial Infarction, 30-day Readmission Rate	16.4%	16.1%	15.3%	15.8%
Heart Failure, 30-day Readmission Rate	23.0%	21.9%	21.9%	21.9%
Pneumonia, 30-day Readmission Rate	17.9%	16.6%	17.3%	16.7%
Chronic Obstructive Pulmonary Disease, 30-day Readmission Rate	19.4%	19.6%	19.6%	19.7%
Hospital-Wide Readmissions	April Report Jul 2016 to Jun 2019		July Report Jul 2019 to Dec 2019	
	Stroger	Nat'l Rate	Stroger	Nat'l Rate
30-Day Hospital All-Cause Unplanned Readmission Rate	17.5%	15.6%	15.9%	15.6%

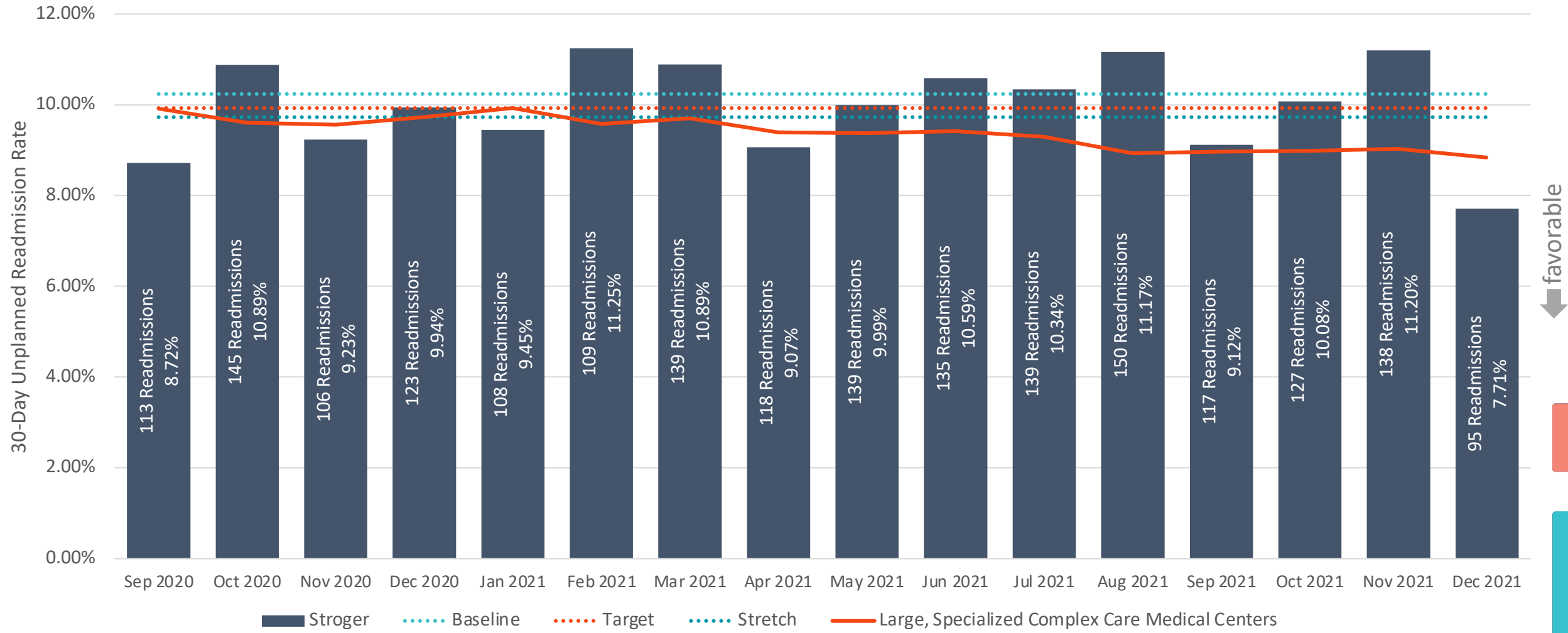
↑
"worse"
Nat'l Average

↑
"same"
Nat'l Average

30-Day Readmissions

Unplanned, Hospital-Wide, All-Cause

December 2021
Lowest readmission rate
reported for Stroger



Readmission by Base MS-DRG (of Index Visit)

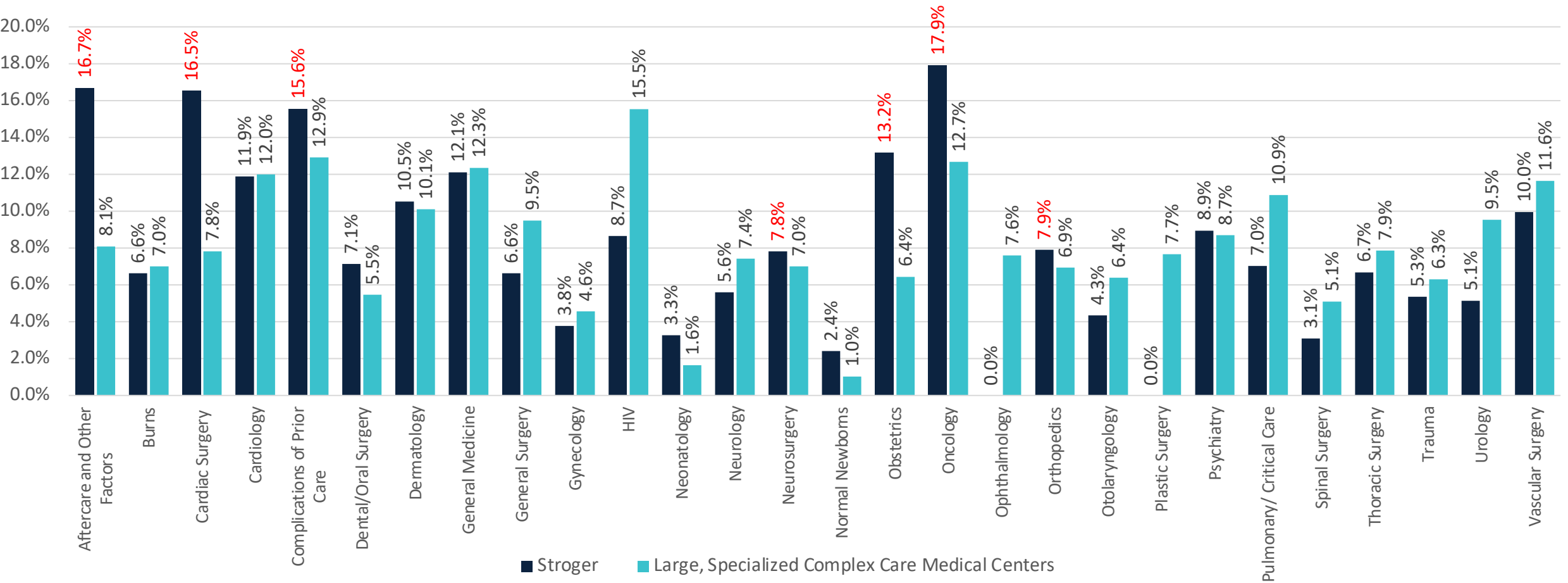
January 2021 to December 2021

Base MS-DRG	Total Cases	# 30 Day Readmits	30-Day Readmit Rate	# 14 Day Readmits	14-Day Readmit Rate	# 7 Day Readmits	7-Day Readmit Rate
101 hf/shock	722	100	13.85	48	6.65	26	3.60
294 septicemia w/o mv 96+ hrs	618	78	12.62	51	8.25	28	4.53
141 cirrhosis/alcoholic hepatitis	257	62	24.12	34	13.23	19	7.39
218 renal failure	273	45	16.48	27	9.89	15	5.49
132 esophagitis, gastroenteritis/misc digest dis	293	40	13.65	17	5.80	9	3.07
060 resp infect/inflam	565	36	6.37	26	4.60	14	2.48
339 antepartum/ectopic	243	36	14.81	27	11.11	16	6.58
273 rbc dis	162	34	20.99	16	9.88	12	7.41
114 major small/large bowel procs	242	29	11.98	23	9.50	12	4.96
097 ami, discharged alive	202	25	12.38	15	7.43	7	3.47

Readmissions by Vizient Service Line (Index Visit)

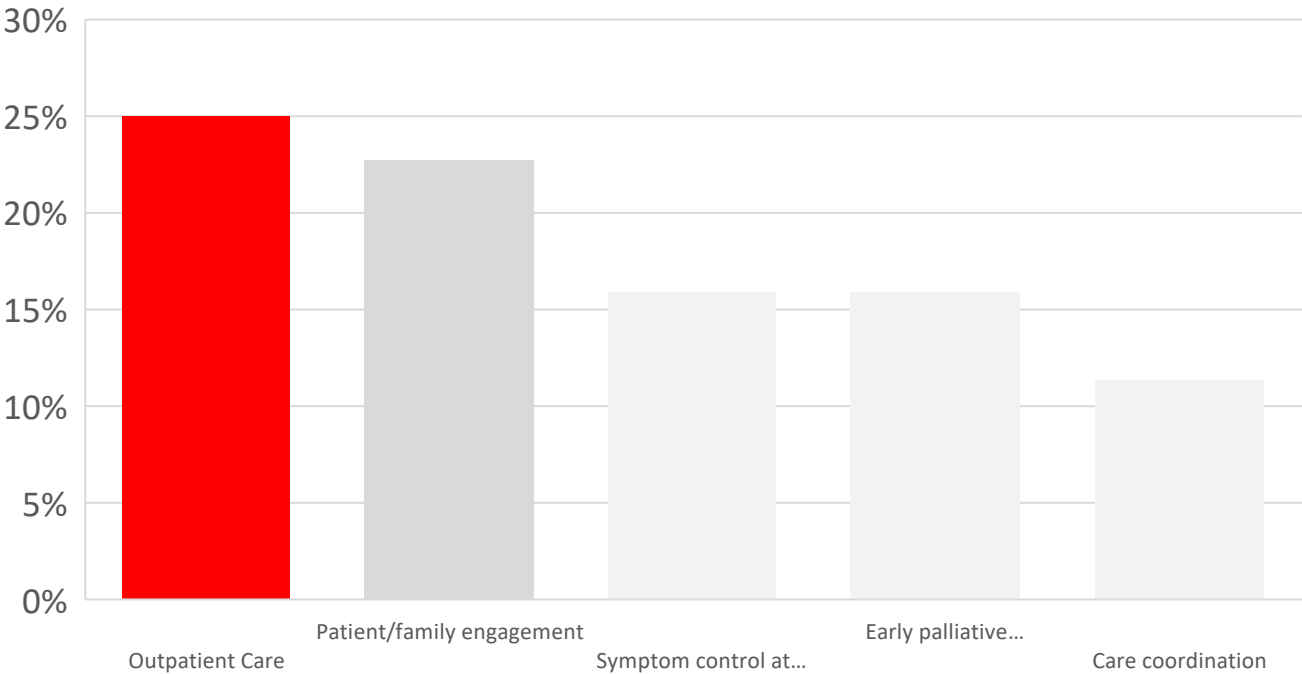
January 2021 to December 2021

30-Day Readmission Rate (all-cause, unplanned)

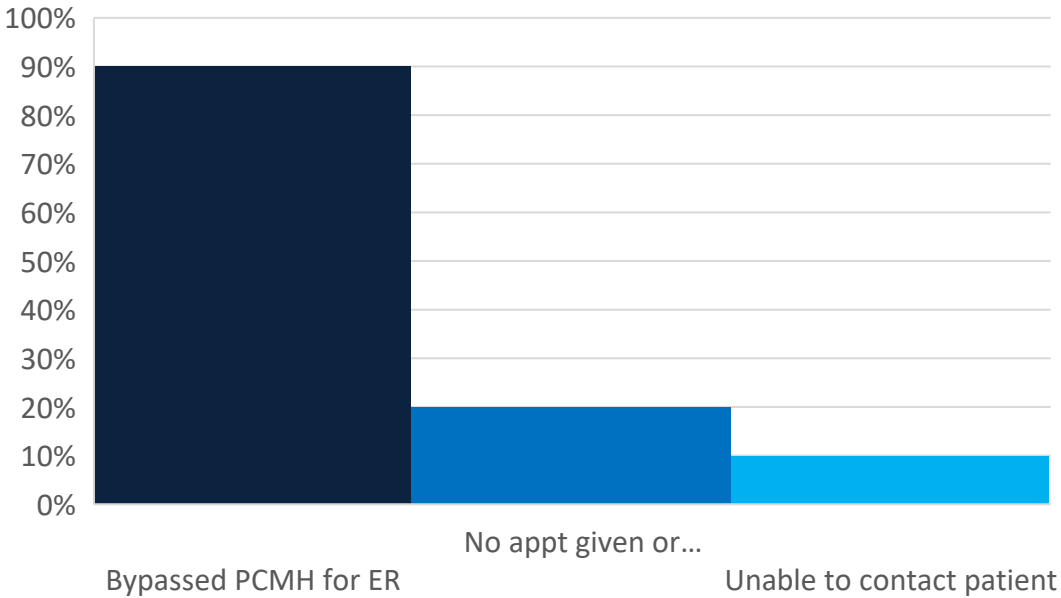


In-depth Analysis

What might have made a difference?

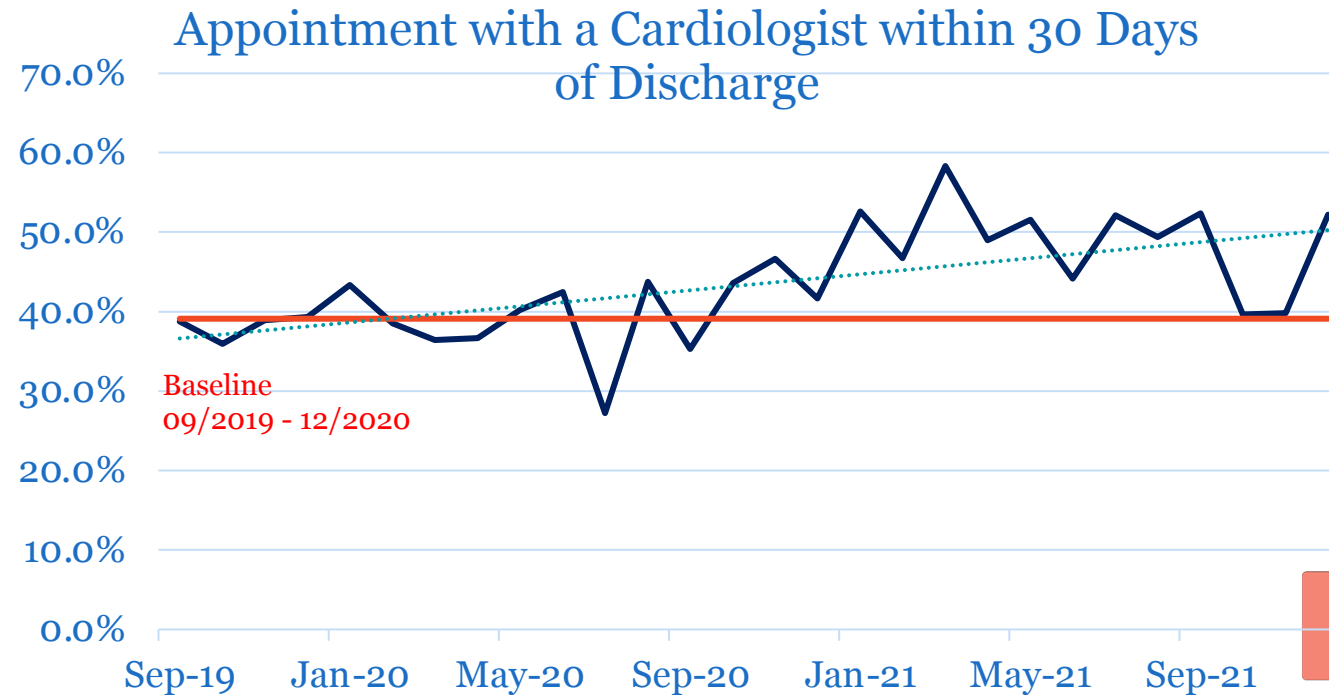


Outpatient Factors in Preventable Readmissions



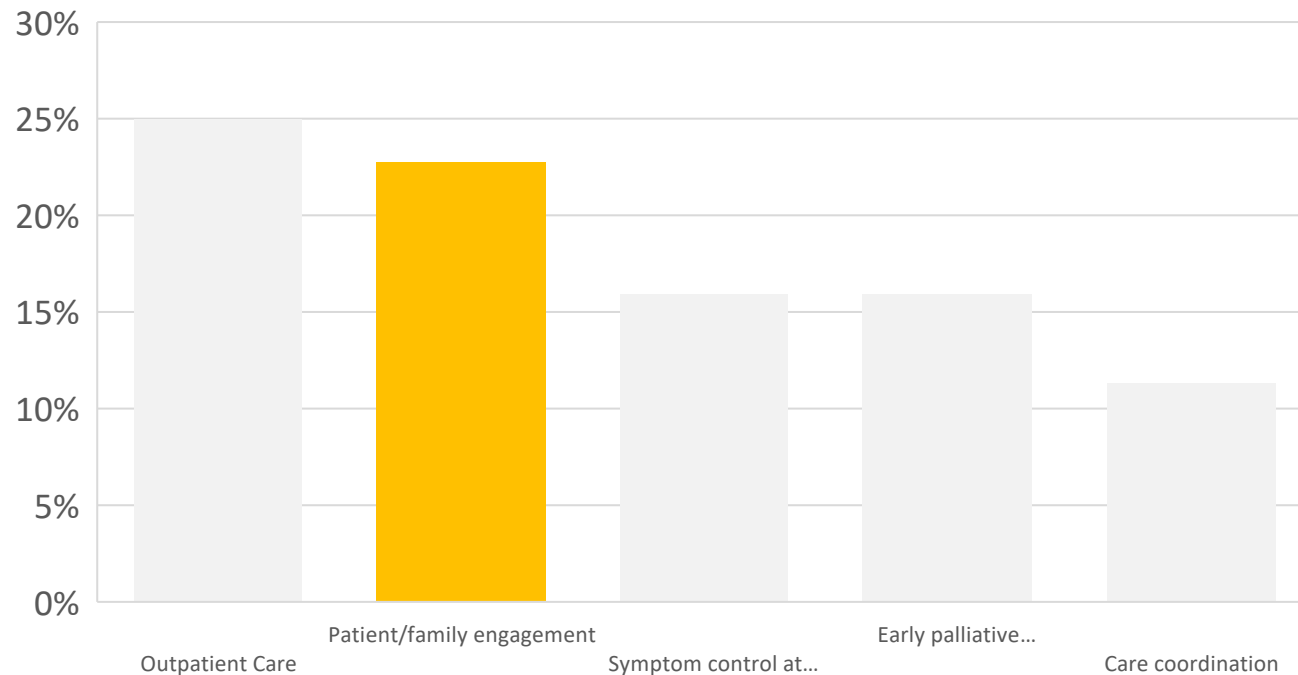
Outpatient Care: Interventions for CHF

- Reserved Attending and APP clinics for discharged patients
- Active Clinic Staff Engagement
- Responsive clinic phone access
- Reminder calls of appointments
- Monthly CHF Data Meeting: Clinic Staff, Transition RNs, APPs, Cardiology and Hospitalist Leadership



In-depth Analysis

What might have made a difference?



Common Lapses in Patient/Family Engagement:

- Adequacy of discharge destination
- Discharge medication reconciliation
- Self-care education (Wounds, catheters)

Patient/Family Engagement: Interventions for CHF

- Transition of Care RN Bedside Visits
- PharmD Student Medication Counseling
- Weekly CHF Huddles
- 48-72h Post-Discharge Calls

Self-Check Plan
for HF Management

RISE ABOVE
Heart Failure

Excellent – Keep Up the Good Work!

- ☐ No new or worsening shortness of breath
- ☐ Physical activity level is normal for you
- ☐ No new swelling, feet and legs look normal for you
- ☐ Weight check stable
Weight: _____
- ☐ No sign of chest pain

GREAT! CONTINUE:

- Daily Weight Check
- Meds as Directed
- Low Sodium Eating
- Follow-up Visits

Pay Attention – Use Caution!

- ☐ Dry, hacking cough
- ☐ Worsening shortness of breath with activity
- ☐ Increased swelling of legs, feet, and ankles
- ☐ Sudden weight gain of more than 2-3 lbs in a 24 hour period (or 5 lbs in a week)
- ☐ Discomfort or swelling in the abdomen
- ☐ Short of breath when lying down

CHECK IN! Your symptoms may indicate: A need to contact your doctor or provider Call 312-964-7648 and ask to speak with the nurse

Medical Alert – Warning!

- ☐ Frequent dry, hacking cough
- ☐ Shortness of breath at rest
- ☐ Increased discomfort or swelling in the lower body
- ☐ Sudden weight gain of more than 2-3 lbs in a 24 hour period (or 5 lbs in a week)
- ☐ New or worsening dizziness, confusion, sadness or depression
- ☐ Loss of appetite
- ☐ Cannot lie flat

WARNING! You need to be evaluated right away. Call your physician or call **911**

American Heart Association
Life is why

American Stroke Association

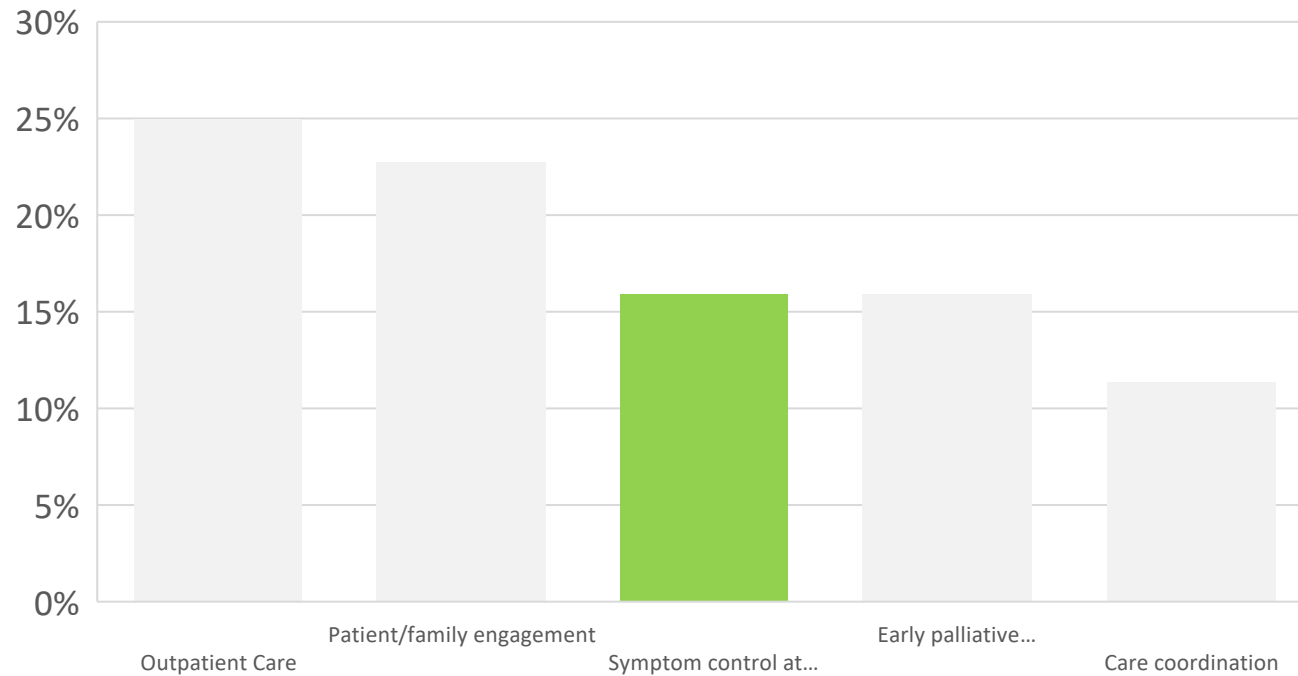
Adapted from: American Heart Association, Inc.
www.RiseAboveHF.org (2015)

COOK COUNTY HEALTH



In-depth Analysis

What might have made a difference?



Common non-resolved issues at discharge:

- Pain
- Dyspnea
- Correction of objective findings without addressing presenting complaint(s)

Enhancing Guideline Concordance: Interventions for CHF

- Inpatient Guide – Common lapses and solutions
- Quarterly Hospitalist Feedback and Education Session
- Cardiology consultation guidance

Top Guidelines Missed @ Stroger

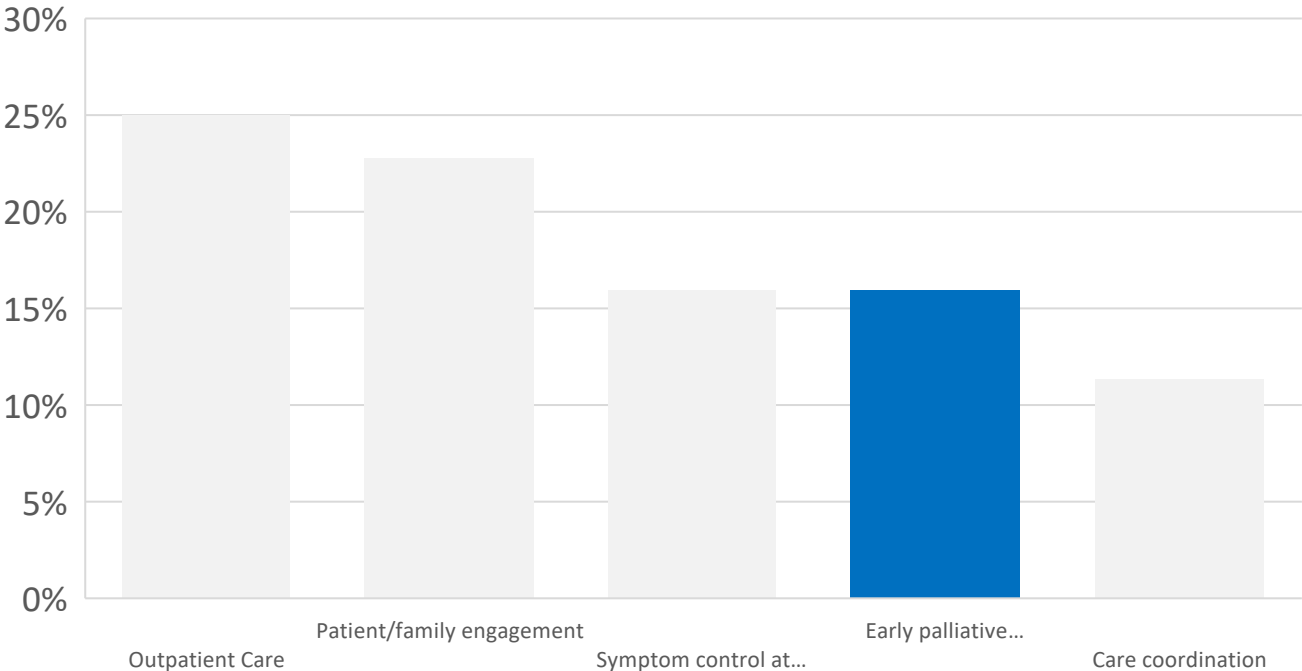
Sunday, May 9, 2021 10:11 PM

Recommendations for Anemia			
COR	LOE	Recommendations	Comment/Rationale
IIb	B-R	In patients with NYHA class II and III HF and iron deficiency (ferritin <100 ng/mL or 100 to 300 ng/mL if transferrin saturation is <20%), intravenous iron replacement might be reasonable to improve functional status and QoL. ^{173,174}	NEW: New evidence consistent with therapeutic benefit.
See Online Data Supplement D.			
<p>Routine baseline assessment of all patients with HF includes an evaluation for anemia in addition to other baseline laboratory measurements. Anemia is independently associated with HF disease severity, and iron deficiency appears to be uniquely associated with reduced exercise capacity. When iron deficiency is diagnosed and after full evaluation for cause, intravenous repletion of iron, especially in the setting of concomitant hepcidin deficiency in HF, may improve exercise capacity and QoL. Studies examining correction of iron deficiency in HF have demonstrated improvement in surrogate endpoints, such as QoL, NT-proBNP, and LVEF; however, controlled trials have been underpowered to detect reductions in hard clinical endpoints. The FAIR-HF (Ferric Carboxymaltose Assessment in Patients With Iron Deficiency and Chronic Heart Failure) trial¹⁷³ demonstrated improvements in NYHA class and functional capacity over a short-term exposure. The CONFIRM-HF (Ferric Carboxymaltose Evaluation on Performance in Patients With Iron Deficiency in Combination With Chronic Heart Failure) trial¹⁷⁴ included a larger cohort of patients (n=304) and demonstrated improvements in 6-minute walk test. A meta-analysis of 5 prospective controlled studies (631 patients) evaluated the effect of intravenous iron on deaths, hospitalizations, and other events in patients with HF and iron deficiency.¹⁷⁵ Patients receiving intravenous iron experienced limited but statistically significant improvements in functional capacity and LVEF but no reduction in mortality rate. The FAIR-HF 2 trial is underway to further address the potential benefit of intravenous iron in HF associated with iron deficiency. Therefore, a strong recommendation for intravenous iron repletion must await the results of an appropriately powered trial on morbidity and mortality. There is an uncertain evidence base for oral iron repletion in the setting of anemia associated with HF.</p>			
Recommendations for Stage C HFpEF (Continued)			
COR	LOE	Recommendations	Comment/Rationale
IIb	B-R	In appropriately selected patients with HFpEF (with EF ≥45%, elevated BNP levels or HF admission within 1 year, estimated glomerular filtration rate >30 mL/min, creatinine <2.5 mg/dL, potassium <5.0 mEq/L),	NEW: Current recommendation reflects new RCT data.
See Online Data			



In-depth Analysis

What might have made a difference?



Conditions with delayed palliative care involvement:

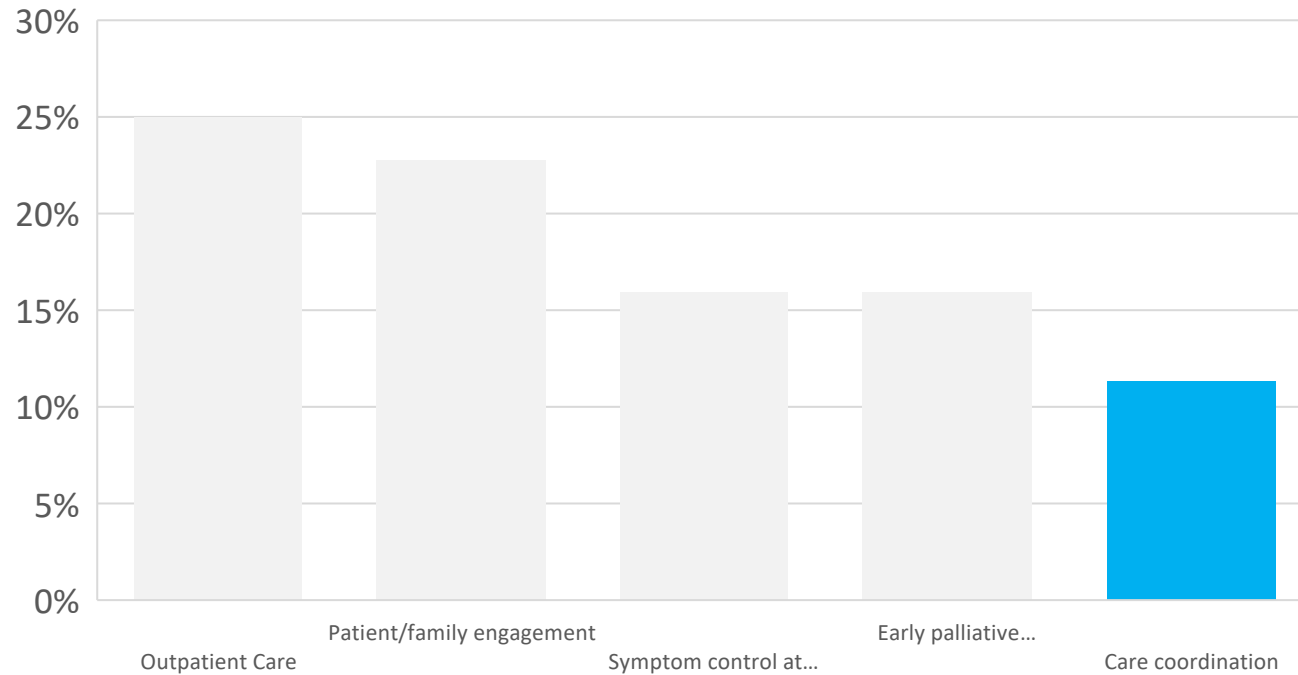
- Advanced cancer
- Advanced COPD/ILD
- Advanced heart failure

Patient characteristics

Immunocompromised	17%
Deceased @ 6 months	17%
Deceased @ 12 months	20%
Palliative involved at index?	0%

In-depth Analysis

What might have made a difference?

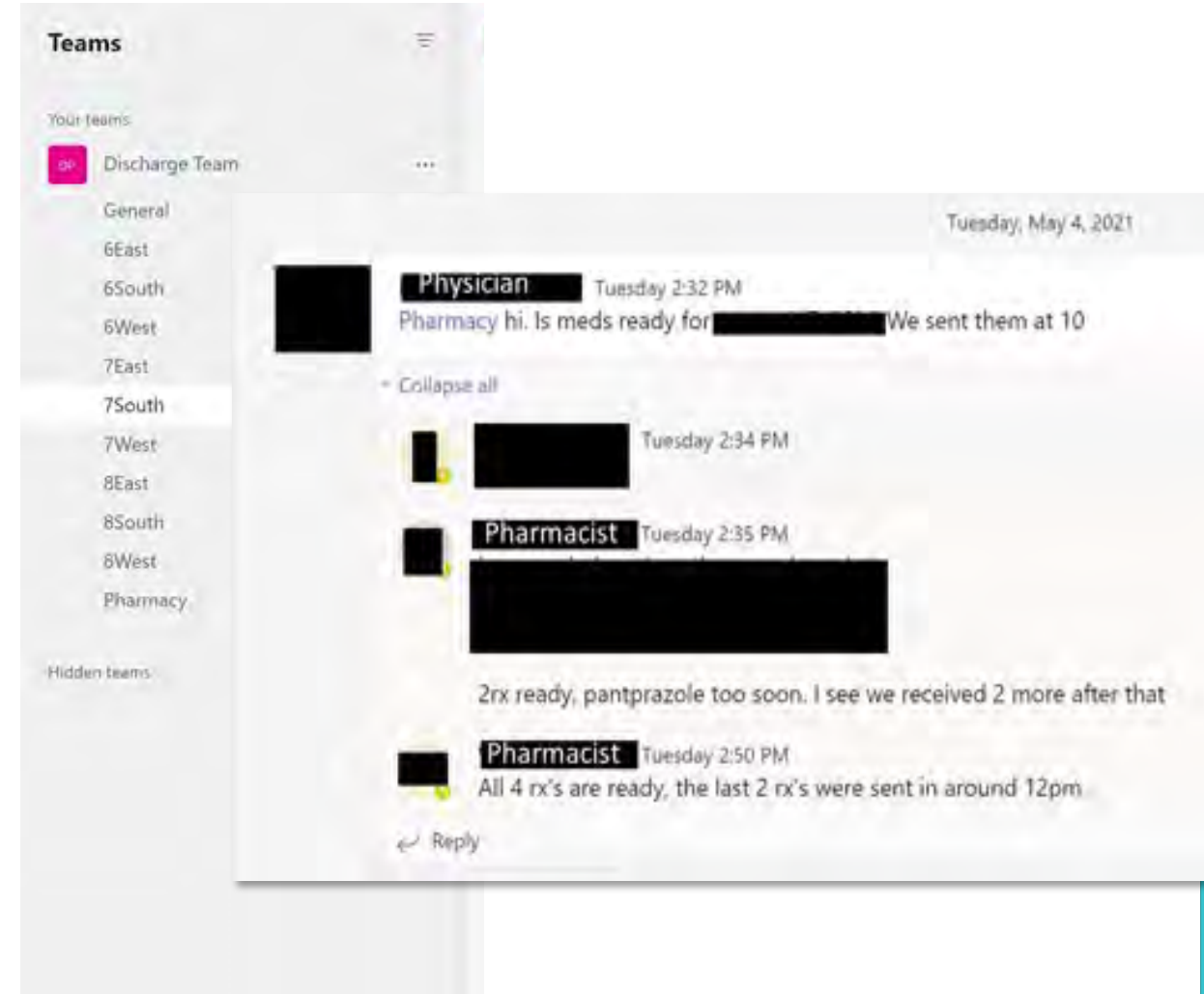


Situations where intensive care coordination alone would help:

- Psychiatric illness
- Substance abuse
- Housing insecurity

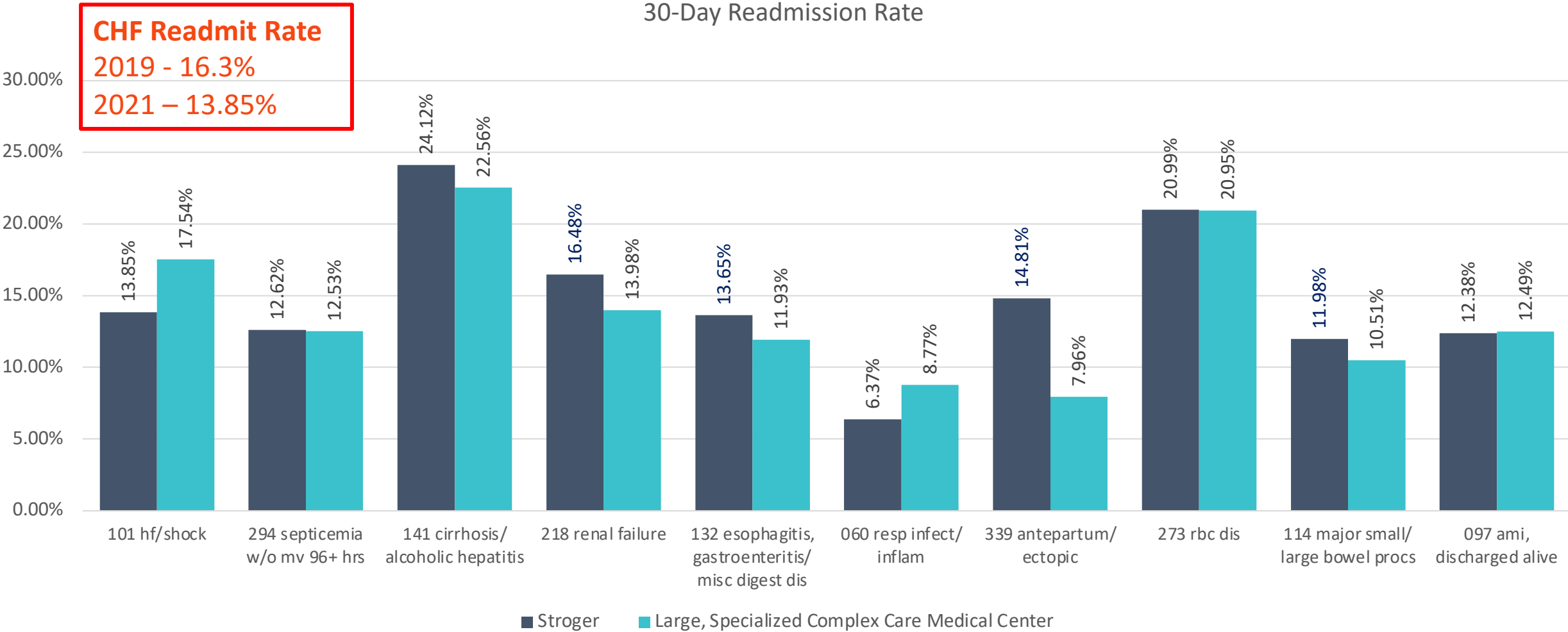
Coordinating Care: Interventions for CHF

- Transition of Care Team: Liza Gaines, RN and Luisa Guerrero-Gutierrez, RN
 - In-person introduction and education
 - Advocate for services to medical teams
 - Outreach for meds and appointments
 - Post-Discharge follow-up calls
- Pioneered integrated electronic communications with outpatient pharmacy



Readmission by Base MS-DRG (of Index Visit)

January 2021 to December 2021



30-Day Unplanned, All-Cause Readmission Rate

Heart Failure, Percentile Ranking, December 2020 to November 2021



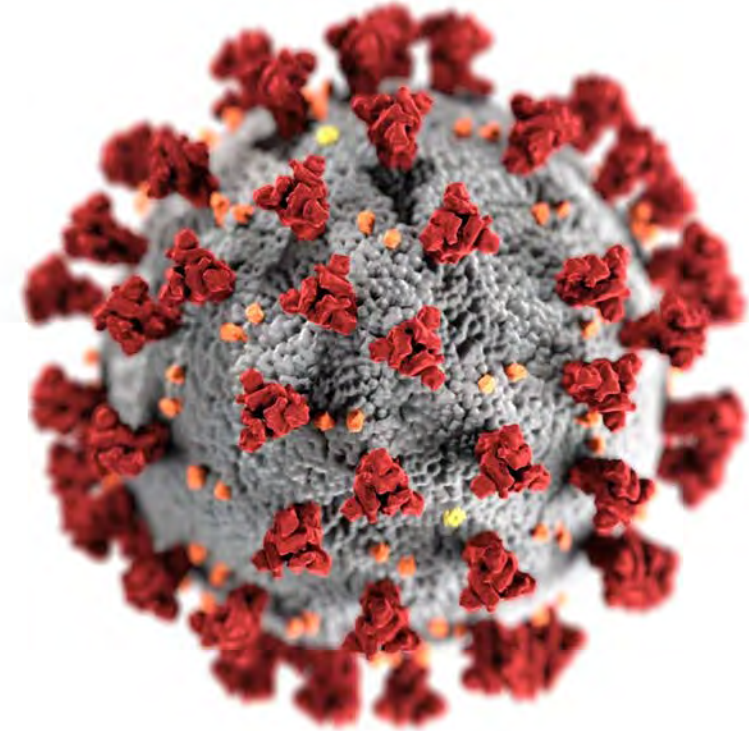
American Heart Association Awards



- Highest Distinction of AHA Heart Failure Award Recognition

Challenges in 2021

- Staffing
- COVID Surge



Roadmap for 2022

- Continue successes with CHF
 - Highlight CHF at Nursing Huddles
 - Initiate teaching on admit, continue across encounter and disciplines
 - CHF-specific nursing unit
- Replicate focused interventions
 - Asthma/COPD/Pneumonia
 - March: 2 additional TOCs onboarded and started

Roadmap for 2022

- Gap assessment with individual service lines:
 - Oncology
 - Cardio-Thoracic Surgery
 - Nephrology
- Realize strengths of geo-localization



Questions/Comments?



COOK COUNTY
HEALTH

Thank you ↗



COOK COUNTY
HEALTH

Cook County Health and Hospitals System
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ATTACHMENT #4

Overview of Graduate Medical Education

John M. O'Brien, M.D.

Chairperson, Department of Professional Education

April 14, 2022

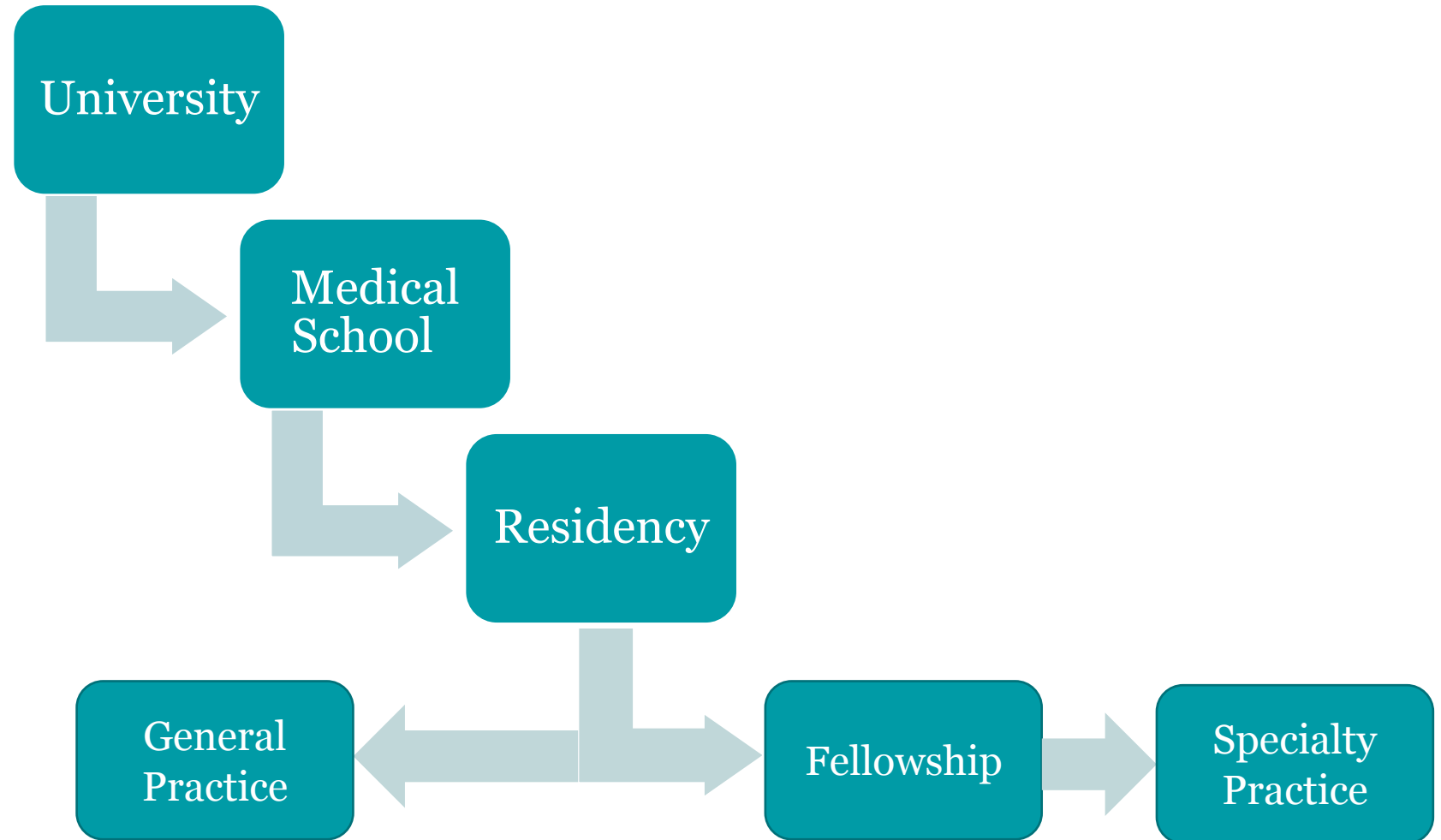


COOK COUNTY
HEALTH



Educating Doctors

Overview



History Of Medical Education in the U.S.

Slowly Creating Standards

- 1765 - 1st Med School
- 1866 – Cook County started the first internship in the U.S.
- 1876 - Association of American Medical Colleges
- 1910- Flexner Report
- 1920's-Internship and Residency following Med School became standard
- 1965 – Medicare Established: payments to hospitals to subsidize resident education



History of Medical Training in the U.S.

Increasing Regulation

- 1996 – Number of GME slots/hospital is capped
- 1999 – To Err Is Human
- 2002 – ACGME* institutes duty hour regulations (80 hours per week, 30 hour call, one day off per week)
- 2014 – ACGME establishes the CLER Program



Moving Away From A Service-Based Residency Model

Generally Accepted Benefits of Residencies/Fellowships

- Still facilitate a cost-effective model of 24/7 care of acutely ill patients
- Are associated with safer care and better outcomes¹
- Help to attract attending physicians
- Improve physician hiring decisions (when familiar with graduate's skills)
- Reduce recruiting costs
- Improve retention of newly hired attending physicians
- Provide valuable feedback that can improve hospital performance

¹ McAlister, Finlay et. al. *Post Discharge Outcomes in Heart Failure are Better for Teaching Hospitals and Weekday Discharges; Circ Heart Failure* 2013; 6:922-929

Quality of Care

Supervision

- All residents and fellows are accountable to an attending according to the program's supervision policy

Quality Improvement/Patient Safety

- Housestaff generate ~10% of all electronic Medical Event Reporting System (eMERS) reports
- All are participating in QI projects

Hours of Work

- Residents must comply with national work hour regulations.
- All programs have a contingency plan if a resident is fatigued.

Regulatory

- All Residencies and Fellowships* are Fully Accredited

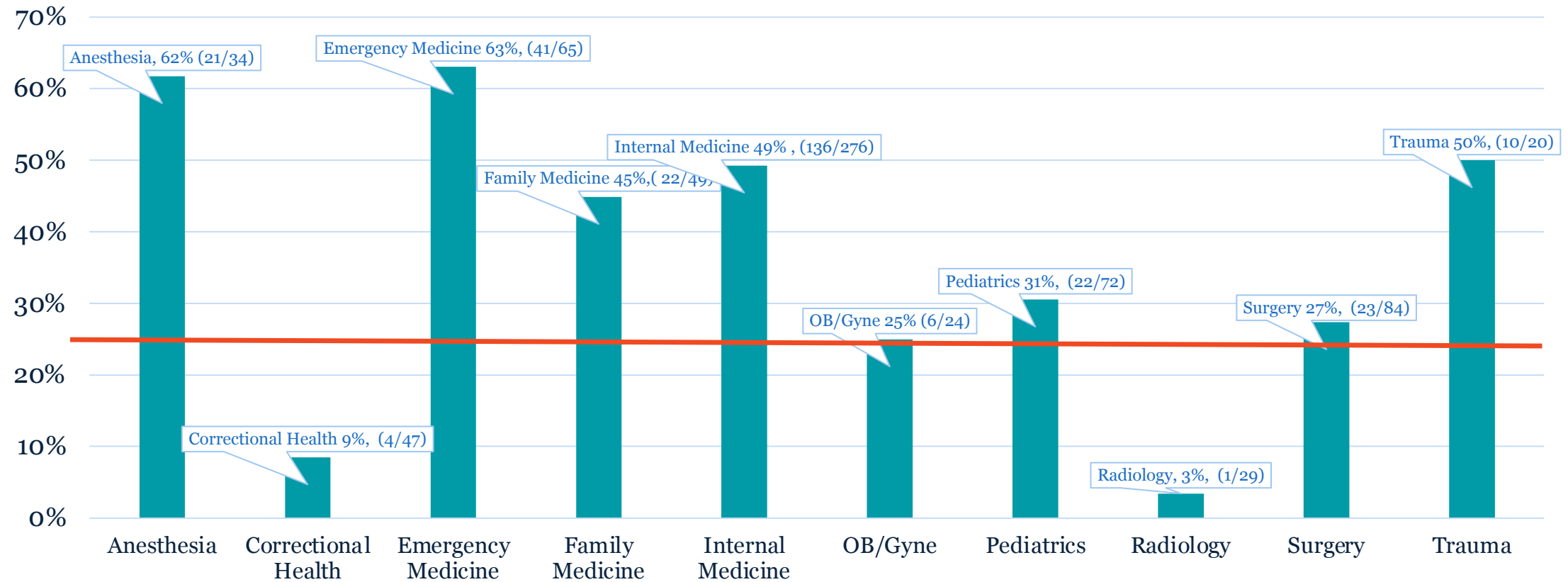
Estimating Cost

More Difficult Than For Attending Physicians

Salary and Benefits (Medicare/Medicaid Reimbursement)
Overhead (Coordinator/Protected Time for Program Director)
Can't Bill (Increase Billing Capacity of Attendings?)

Retention of Graduates

Composition of Departments – Percentage of Total Staff that Trained at CCH¹



Medical Education at Cook County Health

Today – 20 ACGME Accredited residencies and fellowships

- Stroger employs nearly 415 residents and fellows
- Additional trainees rotate through the hospital:
 - 450 residents and fellows from other programs (mostly Chicago area)
 - 1900 Medical Students



Accreditation of Fellowships & Residencies

() = Full Time Equivalent Trainees/program

ACGME Accredited

Internal Medicine (132)
Emergency Medicine (68)
Anesthesiology (36)
Family Medicine (36)
Radiology- Diagnostic (16)
Dermatology (12)
Neonatal Perinatal Medicine (6)
Preventive Medicine (4)
Pain Medicine (4)
Palliative Care/Hospice (3)
Surgical Critical Care (3)
Colon/Rectal Surgery (3)
Toxicology (Integrated) (2)

Ophthalmology (16)
Pediatrics (12)
Urology (10)
Pulmonary /Critical Care
Medicine (9)
Cardiovascular Disease (9)
Gastroenterology (9)
Hematology-Oncology (7)

CODA¹ Accredited

Oral Surgery (8)

ASHP² Accredited

Pharmacy (3)

Free-Standing Programs Without Accrediting Bodies

Burn (2)

Trauma (2)

Retinal Disease (2)

Simulation Laboratory (1)

Ultrasound (1)

Corneal Disease (1)

Total for all Programs=414



**COOK COUNTY
HEALTH**

¹ Commission on Dental Accreditation

² American Society of Health System Pharmacists

Unique Opportunities in Training

Trauma Fellowship (no accreditation available)

- 175 Emergency Medicine and Surgery Residents throughout the city rotate on the unit annually

Burn Fellowship (no accreditation available)

- 40 Emergency Medicine and Surgery Residents throughout the city rotate through annually

Toxicology Fellowship (accredited by the ACGME)

- Only Fellowship in Chicago
- 50 EM Residents Annually

Diversity, Equity & Inclusion Efforts:

GMEC* + Office of Equity and Inclusion + Blue Cross Blue Shield Illinois =
Efforts to Diversify Physician Work Force

Training for Medical Staff

- Unconscious Bias
- Holistic Ranking (match)

Establishing Benchmarks to create metrics

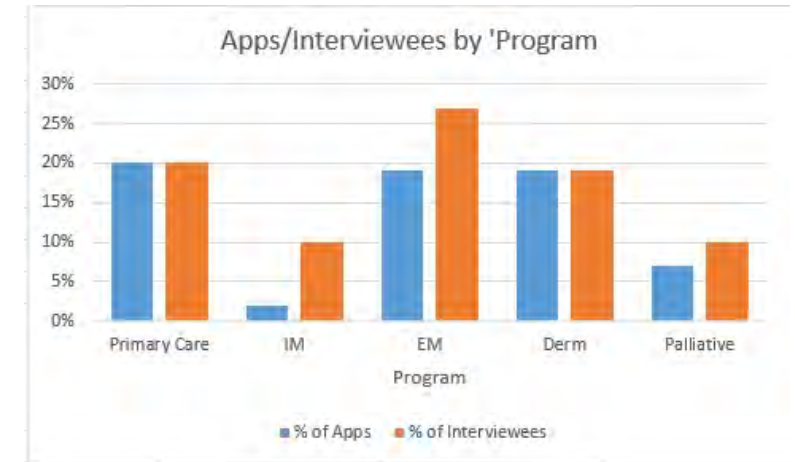
Monthly Meetings focused on education of staff/recruitment of residents

Creating Programing to support incoming Residents which include:

- Mentorships
- Speaker Series
- Networking Events

Identifying Partners to create a pathway to our institution

Participating in ACGME Equity Matters Programming



Action Item

Agreements for Review and Approval

APPROVED

APR 29 2022

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

Program	FTE residents	Contract Length-Yrs	Max. Ann. Reimbursed
RUSH			
Neurosurgery	4	2	\$371,316
Orthopedics	2	2	\$157,571
Plastics	1	2	\$92,856
NORTHSHORE UNIVERSITY			
Endocrine Surgery	0.5	3	\$55,258
Emergency Medicine	3.0	4	\$284,719
UNIVERSITY OF ILLINOIS-CHICAGO			
Pediatrics	1.35	3	\$128,255
ENT	3.0	3	\$307,764
Nephrology	2.1	3	\$221,873
Pathology	3.0	3	\$294,738

Cook County Health and Hospitals System
Minutes of the Quality and Patient Safety Committee Meeting
April 21, 2022

ATTACHMENT #5

**Stroger Hospital Quality Improvement & Patient Safety (HQuIPS) Committee
Summary Report to the Executive Medical Staff (EMS) Committee and Quality and
Patient Safety (QPS) Committee
For April 2022**

Chair: Dr. Pierko

Meeting Date: February 22, 12-1:30PM via WebEx

Regular or Special Meeting: Regular

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

February Reports:

- >Quality & Patient Safety Update
- >Quality/HRO Dashboard
- >Patient Safety
- >Infection Control
- >Nursing
- >Pharmacy
- >Care Coordination

HRO Dyad Report (s):

HRO Process of Care

Highlights: Majority of indicators favorable to goal. Topics of discussion/follow-up included:

Quality/HRO Dashboard: The surgical case mix index for November 2021 was 2.868. The Top Box Scores for December 2021 was 71.17% with a target of 71.30%.

Infection Control: Hand Hygiene Compliance is at 79.1% for December 2021 which is up from 74.1% in November 2021. The SIR regarding CLABSI was 0.5 for 2021 and there were no documented CLABSI for Q4 of 2021.

Nursing: Hospital Acquired Pressure Injuries met the 2021 goal of a 66% reduction compared to 2020. Patient falls had a 17% reduction in 2021 versus 2020 and there has been a 35% reduction of falls with injury in 2021 compared to 2020. The Barcode Medication Scanning compliance rate was 97.09% in scanning the wristband and 95.96% compliant scanning the medication for 2021 which met both stretch goals and Leapfrog Standards.

Pharmacy: The compliance of insulin in the appropriate bin is at 89% in January 2022 which is up from 86% in December 2021. The number of opioid prescriptions dispensed in January 2022 was 491 which is the lowest number for all of 2021.

Care Coordination: The compliance of an initial medical review within the 1st day of admission is 99% for the month of December 2021 which is up from 93% in November of 2021.

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 Executive Medical Staff (EMS) Committee and Quality and
Patient Safety (QPS) Committee
For April 2022**

Chair: Dr. Mark Loafman

Meeting Date: February 24th 9:00am-10:30am via WebEx

Regular or Special Meeting: Regular

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

February Reports

8 West/Med-Surg

ED Nursing

Transportation

Infection Control

Diagnostic Imaging

Food/Nutrition

Peri-op Nursing/PACU

Central Sterile Processing

EOC/Life Safety

Highlights:

8 West/Med-Surg: There have been no falls with injury or any Hospital Acquired pressure injuries for all of 2021. There have also been no CLABSI or CAUTI for all of 2021.

Infection Control: The Surgical Site Infection Rate remains at Zero for Q3 of 2021.

Diagnostic Imaging: The use of two patient identifiers has been 99.99% for all of 2021.

Food/Nutrition: All Registered Dietician assessments were completed on time for Q3 and Q4 of 2021.

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 Executive Medical Staff (EMS) Committee and Quality and
Patient Safety (QPS) Committee
For March 2022**

Chair: Dr. Mark Loafman

Meeting Date: January 27th, 9:00am-10:30am via WebEx

Regular or Special Meeting: Regular

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

January Reports

Pharmacy

Patient Access

Inpatient Care Coordination

Behavioral Health

Clinical Laboratory

Highlights:

Pharmacy: The appropriate use of anticoagulants per protocol has been 100% for all of 2021.

Inpatient Care Coordination: The medical insurance review completed within 48 hours for patients admitted was 94% in Dec 21 compared to 92% in Nov 2021.

Behavioral Health: Performing an A1C and lipid levels in patients on antipsychotic medication at least once a year was 97% for Dec 2021 and 94% in Nov 2021 with a goal of >80%

Clinical Laboratory: Critical lab value reporting to the patients responsible caregiver was 100% for all of Q4 2021.

There are no action items for the EMS Committee.

There are no actions for the QPS Committee.

Cook County Health and Hospitals System
Minutes of the Quality and Patient Safety Committee Meeting
April 21, 2022

ATTACHMENT #6



COOK COUNTY HEALTH

Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners

Israel Rocha, Jr.
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

Robert Currie
Raul Garza
Ada Mary Gugenheim
Joseph M. Harrington
Karen E. Kim, MD, MS

Mike Koetting
David Ernesto Munar
Heather M. Prendergast, MD, MS, MPH
Robert G. Reiter, Jr.
Otis L. Story, Sr.

To: Quality and Patient Safety Committee

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

Date: April 13, 2022

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 on April 12, 2022 for your consideration.

Thank you kindly.
Respectfully Submitted,

Abayomi E. Akintorin, MD President, EMS

John H. Stroger, Jr. Hospital of Cook County



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** on 3/24/2022.
Medical Staff Appointments/Reappointments Effective April 2022, Subject to Approval by Cook County Health Systems Board.

Old Business

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

New Business

Initials:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Brock, Max, MD	Provisional	Medicine/Adult Cardiology		Approved	
Czech, Kimberly, MD	Provisional	Pediatrics		Approved	
Wang, Jenny, MD	Provisional	Pediatrics		Approved	

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BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON APRIL 21, 2022

Reappointments:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Acob, Christine, MD	Active	Medicine/Hospital Medicine		Approved	
Ahmed, Wasay, MD	Voluntary	Medicine/General Medicine		Approved	
Athavale, Ambarish Mukund, MD	Active	Medicine/Nephrology/Hypertension		Approved	
Atri, Nipum, MD	Provisional	Medicine/Infectious Disease		Approved	
Awad, Sawsan, M., MD	Provisional	Pediatrics/Ped Cardiology		Approved	
Badri, Sheila M., MD	Active	Medicine/Infectious Disease		Approved	
Birkhead, Andrew G., MD	Active	Family Medicine		Approved	
Bonomo, Steven R., MD	Active	Surgery/General Surgery		Approved	
Castillo Curiel, Christian, MD	Active	Pediatrics/Neonatology		Approved	
Campagnoli, Tania Maria Del Mar, MD	Active	Medicine/Hospital Medicine		Approved	
Cejtin, Helen, MD	Active	Ob/Gyn		Approved	
Chaudhary, Shweta V., MD	Active	Surgery/Ophthalmology		Approved	
Deamant, Catherine, MD	Voluntary	Medicine/General Medicine		Approved	
del Mundo Galicia, Marisa, MD	Provisional	Pathology/Anatomic Pathology		Approved	
Dharia, Chiraag, MD	Active	Radiology/Diagnostic		Approved	
Dharmapuri, Sadhana, MD	Active	Pediatrics/Adolescent Medicine		Approved	
Disavino, Elia M., MD	Voluntary	Medicine/Neurology		Approved	
Dixon, Kimberly, MD	Active	Medicine/General		Approved	


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 BY THE QUALITY AND PATIENT SAFETY COMMITTEE
 ON APRIL 21, 2022

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
		Medicine			
Dorman, James R., MD	Active	Medicine/Neurology		Approved	
Dwarakanathan, Surendar, MD	Voluntary	Surgery/Ophthalmology		Approved	
Efgfske, Peter J. MD	Active	Radiology/Special Procedures		Approved	
Feldman, Robert Jay, MD	Active	Emergency Medicine		Approved	
Ferrer, Karen, MD	Active	Pathology/Anatomic Pathology		Approved	
Fogelfeld, Leon, MD	Active	Medicine/Endocrinology		Approved	
French, Audrey L., MD	Active	Medicine/Infectious Disease		Approved	
Gbotosho, Abidemi, DDS	Active	Oral Health		Approved	
Hart, Peter D., MD	Active	Medicine/ Nephrology/Hypertension		Approved	
Hernandez Guarin, Laura Natalia, MD	Voluntary	Medicine/Infectious Disease		Approved	
Lash, James Phillip, MD	Voluntary	Medicine/Nephrology/ Hypertension		Approved	
Ligas, Erik, DDS	Active	Oral Health		Approved	
Malhotra, Saurabh, MD	Active	Medicine/Adult Cardiology		Approved	
Kudaravalli, Padma, MD	Active	Medicine/General Medicine		Approved	
Kumapley, Rudolph, MD	Active	Medicine/Hospital Medicine		Approved	
Leikin, Jerrold Blair, MD	Voluntary	Emergency Medicine/Toxicology		Approved	
Lewis, Trevor, MD	Active	Emergency Medicine		Approved	
Nauman, Ahmad, MD	Active	Medicine/Hospital Medicine		Approved	


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 ON APRIL 21, 2022

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Needleman, Robert K., MD	Active	Emergency Medicine		Approved	
Nichols, Jeffrey W., MD	Active	Surgery/Ophthalmology		Approved	
Orris, Peter, MD	Voluntary	Medicine/Occ. Medicine/Pulmonary		Approved	
Osei, Albert M., MD	Active	Medicine/Nephrology/ Hypertension		Approved	
Prempeh, Avril Linda Serwah, MD	Active	Medicine/Hospital Medicine		Approved	
Quesada, Nancy M., MD	Active	Medicine/Pulmonary & Critical Care		Approved	
Reddy, Shalini T. MD	Active	Medicine/Hospital Medicine		Approved	
Ruggero, John M., DO	Voluntary	Trauma/General Surgery		Approved	
Sanati, Maryam, MD	Active	Medicine/Hospital Medicine		Approved	
Sansom, Sarah Elizabeth, DO	Provisional	Medicine/Infectious Disease		Approved	
Schwartz, David N., MD	Active	Medicine/Infectious Disease		Approved	
Sergel, Michelle J., MD	Active	Emergency Medicine		Approved	
Sha, Beverly E., MD	Voluntary	Medicine/Infectious Disease		Approved	
Tailor, Kallolini, S. MD	Active	Radiology/Diagnostic		Approved	
Tennery, Stephanie, MD	Active	Ob/Gyn		Approved	
Torres, Annie K., MD	Voluntary	Pediatrics/Child Protective Services		Approved	
Toth, Kenneth S., MD	Active	Anesthesiology		Approved	
Tweet, Marit Susan, MD	Voluntary	Emergency Medicine		Approved	
Weinstein, Robert A., MD	Voluntary	Medicine/Infectious		Approved	

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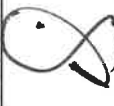
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BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON APRIL 21, 2022

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
		Disease			
Williamson, Sunita, MD	Active	Correctional Health/Med Surg		Approved	
Yadav, Neha, MD	Active	Medicine/Adult Cardiology		Approved	
Zia, Maryam Fatima, MD	Active	Medicine Hematology/Oncology		Approved	

Change in Clinical Privileges (Additions/Removal):

Name	Add Privilege(s)	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					


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 ON APRIL 21, 2022

Change in Category Status:

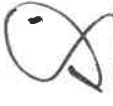
Name	Category From: To:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Awad, Sawsan, M., MD	From: Provisional To: Voluntary	Pediatrics/Peds Cardiology		Approved	
Dwarakanathan, Surendar, MD	From Voluntary to Consulting	Surgery/Ophthalmology		Approved	
Mathew, Sujia, MD	From: Active To: Voluntary	Medicine/General Medicine		Approved	
Piller, Simon, MD	From: Active To: Voluntary	Medicine/General Medicine		Approved	
Thomas, Shantay, MD	From: Active To: Voluntary	Family Medicine		Approved	

Resignations/Retirement:

Name	Effect date:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Barron, Anastasia, DO	09/17/2021	Radiology		Approved	
Cambalik, Stephen, MD	12/31/2021	Family Medicine		Approved	
Canelas, Elizabeth, MD	11/30/2021	Correctional Health Svcs.		Approved	
Clarke, Peter, MD	12/31/2021	Medicine/General Medicine		Approved	
Erra, Amani, MD	02/28/2022	Medicine/Hospital Medicine		Approved	
King, Kahina, DMD	11/19/2021	Oral Health		Approved	
Prinz, Richard, MD	02/28/2022	Surgery		Approved	
Senseng, Carmencita, MD	08/31/2021	Pathology		Approved	


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 ON APRIL 21, 2022

Name	Effect date:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Tatebe, Leah, MD	01/28/2022	Trauma		Approved	
Wroblewski, Igor, MD	06/30/2021	Medicine/Hospital Medicine		Approved	


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 ON APRIL 21, 2022

Non-Physician Providers

Old Business

Stroger Initial					
Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

Initials:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

Reappointments:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Bohannon, Mary, MSW	Social Worker	Psychiatry		Approved	
Cafferty, Breedge, M., CRNA	Nurse Anesthetist	Anesthesiology		Approved	
Calixto, Natividad, MSW	Social Worker	Psychiatry		Approved	
Catania, Ryan, MSW	Social Worker	Psychiatry		Approved	
Duda, Jane, E., CRNA	Nurse Anesthetist	Anesthesiology		Approved	
Eneogwe, Grace, CNP	Nurse Practitioner	Medicine/Gastro		Approved	
Espinosa, Jose, MSW	Social Worker	Psychiatry		Approved	

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ON APRIL 21, 2022

Floyd, Shaleyah, MSW	Social Worker	Psychiatry				
Gomez, Marisa, MSW	Social Worker	Psychiatry			Approved	
Koralewski, Kimberly, MSW	Social Worker	Psychiatry			Approved	
Lavender, Leo, MSW	Social Worker	Psychiatry			Approved	
Miranda, Karina, PA-C	Physician Assistant	Medicine/Endocrinology			Approved	
Novak, Mary, F, CRNA	Nurse Anesthetist	Anesthesiology			Approved	
Pashova, Borislava, MSW	Social Worker	Psychiatry			Approved	
Poston, Bridgette, MSW	Social Worker	Psychiatry			Approved	
Raya, Elisabeth, RDH	Dental Hygienist	Oral Health			Approved	
Rios, Leticia, MSW	Social Worker	Psychiatry			Approved	
Rogers, Ollie, CNP	Nurse Practitioner	Medicine/General Medicine			Approved	
Sheehan, Megan, F, CRNA	Nurse Anesthetist	Anesthesiology			Approved	
Tutaj, Lisa, PA-C	Physician Assistant	Correctional Health/Med Surg			Approved	
Waight, Sandy, MSW	Social Worker	Psychiatry			Approved	
Winston, Barbara, MSW	Social Worker	Psychiatry			Approved	
Williams-Hampton, Ericka, MSW	Social Worker	Psychiatry			Approved	

Change in Category Status:

Name	Category From: To:	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					


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 BY THE QUALITY AND PATIENT SAFETY COMMITTEE
 ON APRIL 21, 2022

Change in Clinical Privileges (Additions/Removal):

Name	Privileges Request to add: Request to remove:	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

Additional Collaborator

Name	Category/Collaborator To: From:	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

Change of Collaborator:

Name	Category/ Collaborator To: From:	Department/Division	Discussion/Action	Recommendation	Follow-up
N/A					


Resignations:

Name	Category Effect date:	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

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BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON APRIL 21, 2022



Other Business:

N/A

SANCTION SCREENING:

IDFPR Disciplinary Action Report for January 2022 (see attached) reviewed as of 3/14/2022 – **No Findings.**

CMS OPT OUT Affidavits report reviewed as of 3/14/2022 – **No Findings.**

CMS Preclusion Report reviewed as of 3/14/2022 – **No Findings.**



COOK COUNTY HEALTH

Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners

Israel Rocha, Jr.
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

Robert Currie
Raul Garza
Ada Mary Gugenheim
Joseph M. Harrington
Karen E. Kim, MD, MS

Mike Koetting
David Ernesto Munar
Heather M. Prendergast, MD, MS, MPH
Robert G. Reiter, Jr.
Otis L. Story, Sr.

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

April 8, 2022

Dear Members of the Quality and Patient Safety Committee:

Please be advised that at the Provident Hospital Medical Executive Committee Meeting held on April 8, 2022 the Medical Executive Committee recommended the actions on the enclosed documents. It is being presented to you for your consideration.

Respectfully,

Marlon Kirby, MD
Provident Hospital of Cook County
President, Medical Staff
Chair, Medical Executive Committee

Provident Hospital of Cook County



TO: Quality and Safety Committee

FROM: Marlon Kirby, MD
President, Medical Executive Committee

SUBJECT: Medical Staff Appointments and Other Business Recommended by the
Medical Executive Committee on April 8, 2022

Medical Staff Appointments/Reappointments Effective: 04/21/2022 subject to Approval by the Cook County Health.

New Business

Initial(s)

- Brock, Max, MD – Provisional - Internal Medicine/Cardiology – Recommended
- Pulimi, Sandeep, MD – Provisional – Internal Medicine - Hospital Medicine - Recommended
- Vergara-Rodriguez, Pamela Teresa, MD – Provisional Psychiatry - Recommended

Reappointment(s)

- Dharia, Chiraag, MD; - Affiliate – Diagnostic Radiology - Recommended
- Dharmapuri, Sadhana, MD; Affiliate – Pediatrics - Recommended
- Dwarakanathan, Surendar, MD; Affiliate – Surgery/Ophthalmology - Recommended
- Huhn, Gregory D., MD; Affiliate - Internal Medicine/Nephrology – Recommended
- Luria, Jamie S., DDS – Provisional – Surgery/Oral & Maxillofacial – Recommended
- Saurabh, Malhotra MD; Affiliate - Internal Medicine/Cardiology - Recommended
- Pitts, Thomas MD – Consulting- Internal Medicine/Endocrinology - Recommended
- Ree, Nicolas, DO; Affiliate – Clinical Laboratory - Recommended
- Tailor, Kallolini S., MD; Affiliate – Radiology/Diagnostic Radiology - Recommended

NPP Reappointment(s)

- Barchfeld, Rebecca L., CRNA; Provisional - Nurse Anesthetist – Anesthesiology - Recommended
- Bohannon, Mary, MSW; Social Worker/Psychiatry - Recommended
- Calixto, Natividad, MSW; Social Worker/Psychiatry - Recommended
- Cafferty, Breedge, M. CRNA; Provisional - Nurse Anesthetist – Anesthesiology - Recommended
- Catania, Ryan, MSW; Social Worker/Psychiatry - Recommended
- Duda, Jane, E., CRNA; Provisional - Nurse Anesthetist – Anesthesiology - Recommended
- Novak, Mary Frances, CRNA; Provisional - Nurse Anesthetist – Anesthesiology - Recommended
- Poston, Bridgette MSW; Social Worker/Psychiatry - Recommended
- Rios, Leticia, MSW; Social Worker/Psychiatry - Recommended
- Rogers, Ollie, CNP; Provisional; Internal Medicine/Internal Medicine - Recommended
- Sheehan, Megan F., CRNA; Provisional - Nurse Anesthetist – Anesthesiology - Recommended
- Waight, Sandy, MSW; Social Worker/Psychiatry - Recommended

CCHHS
APPROVED
BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON APRIL 21, 2022

A handwritten signature is written over the "APPROVED" text and extends into the date line.



- Williams-Hampton, Erika, MSW; Social Worker/Psychiatry - Recommended

NPP Change in category

- Barchfeld, Rebecca L., CRNA; Provisional to Nurse Anesthetist - Recommended
- Cafferty, Breedge, M., CRNA; Provisional to Nurse Anesthetist - Recommended
- Duda, Jane, E., CRNA; Provisional to Nurse Anesthetist - Recommended
- Miranda, Karina, PA-C; Provisional to Physician Assistant - Recommended
- Novak, Mary Frances, CRNA; Provisional to Nurse Anesthetist - Recommended
- Rogers, Ollie, CNP; Provisional to Certified Nurse Practitioner - Recommended
- Sheehan, Megan F., CRNA; Provisional to Nurse Anesthetist - Recommended

Change in category

- Hart, Peter D., MD - Internal Medicine/Nephrology; From Provisional to Active -Recommended
- Osei, Albert, M., MD – Internal Medicine/Nephrology; From Provisional to Affiliate – Recommended

Resignation

- Baron, Anastasia, MD - effective 9/22/21 - Informational
- Erra, Amani, MD – effective 2/28/22 - Informational

CCHHS
APPROVED
BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON APRIL 21, 2022

A handwritten signature, possibly "R", is written over the approval text.



COOK COUNTY HEALTH

Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners

Israel Rocha, Jr.
Chief Executive Officer
Cook County Health

Board of Directors

Lyndon Taylor
Chair of the Board

Hon. Dr. Dennis Deer, LCPC, CCFC
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Robert Currie
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Robert G. Reiter, Jr.
Otis L. Story, Sr.

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

April 15, 2022

Dear Members of the Quality and Patient Safety Committee:

Please be advised that at the Provident Hospital Medical Executive Committee Meeting held on April 15, 2022 the Medical Executive Committee recommended the actions on the enclosed documents. It is being presented to you for your consideration.

Respectfully,

Marlon Kirby, MD
Provident Hospital of Cook County
President, Medical Staff
Chair, Medical Executive Committee

Provident Hospital of Cook County



TO: Quality and Safety Committee

FROM: Marlon Kirby, MD
President, Medical Executive Committee

SUBJECT: Medical Staff Appointments and Other Business Recommended by the
Medical Executive Committee on April 15, 2022

Medical Staff Appointments/Reappointments Effective: 04/21/2022 subject to Approval by the Cook County Health.

New Business

Reappointment

- Cejtin, Helen, MD; Affiliate - OB/GYN – Recommended

CCHHS
APPROVED
BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON APRIL 21, 2022

A handwritten signature in black ink, appearing to be "S. Kirby", is written over the approval stamp.