### **AMBULATORY SERVICES**

Lead Executive: Craig Williams, Chief Administrative Officer, Operations and Development

Reporting Period: July 2024

Report Date: August 16, 2024

### Strategic Initiatives • OKR Highlights • Status Updates



#### Patient Safety, Clinical Excellence & Quality

- The Value-Based Care Team has successfully completed the inaugural quarter of the Ambulatory
  Operational Task Force (AOTF) series. This initiative provides a structured platform for clinical
  chairs and operational leaders to present volumetric data, highlight successes, and identify
  opportunities for enhancing outpatient clinical services. The AOTF fosters deep collaboration
  among ambulatory, strategy, revenue, and department leaders, facilitating the creation of jointly
  developed action plans to drive continuous improvements.
- The Joint Commission conducted an on-site Medicare Survey on July 18, 2024. We are pleased to report that the ACHN's mitigation plan for each identified condition-level finding has been approved.
- The Primary and Specialty Care Clinic's Quality team developed a new process map to better clarify roles (clerk, medical assistant, provider, and nurse) in implementing self-management goals.
- The Joint Commission Evidence of Standards Compliance (ESC) report (details corrective actions for citations) will be submitted in August.



#### **Health Equity, Community Health & Integration**

- In July 2024, the Patient Support Center handled more than 56,000 patient calls with an average response time under 60 seconds, and 3,250 Nurse Triage calls with an average response time of 20 seconds.
- HealthViewX, the new referral platform for CCH partners, has surpassed 15,000 referrals with 450 active users. Ophthalmology is the most requested specialty, and Ultrasound is the top diagnostic request. Phase II of the Cerner Provider Portal is in progress, aiming to include Lab, Radiology, and Pathology.
- The CCH Transportation Survey for July received over 4,000 responses with an average rating of 3.7/4 (93%). Additionally, 87% of patients reported they would be unable to attend their appointments without CCH transportation assistance.
- The Neuroscience department was awarded the American Heart Association *Get with the Guidelines* Gold Plus Award in Stroke.





### **AMBULATORY SERVICES**

- Strategies are being implemented to address the psychiatry waiting list including having a licensed behavior health therapist (LBHT) conduct assessments and develop a new algorithm to assist with referrals to psychiatry. Leadership will continue to work with HIS/Cerner to finalize the new referral order and train LBHTs to assist with mental health assessments.
- Behavioral Health (BH) services are being streamlined to clarify the types of services offered, and BH leadership will keep collaborating with Finance and IT to accurately map district codes for the different BH services such as social work, Psychology, etc.
- CCHIP participated in the 52nd Annual Fiesta Del Sol Festival, a major Hispanic community event in Chicago. Our team offered HIV awareness, health education, and testing/counseling to 152 attendees.
- In July, 260 individuals received rapid HIV tests through targeted screening, with no new positives identified. 33 patients were successfully re-engaged with Ambulatory Care and Social Services after being lost to follow-up for over 12 months.
- Specialty Care saw a 2% increase and 1% increase year-to-date, despite challenges in provider recruitment affecting surgical and medical clinics at multiple locations.
- The team's primary focus remains on implementing strategic pillars to enhance community service and cater to patients' specific needs (testing to meet surgical requirements) and post follow-up (after a procedure or hospitalization).
- Cook County Health vaccinated a total of 390 individuals for COVID-19 in July. All ACHN clinics are equipped to screen, test, and vaccinate community members. The CORE Center administered 29 Mpox vaccinations.
- The New Arrival Clinic at Belmont Health Center has served a total of 30,230 unique patients. More than 6,800 new arrival patients were registered by the CCH Mobile Care Coordination team at the City of Chicago landing zone in the month of July, with 52% receiving same-day medical screenings and care at the New Arrival Clinic
- ACHN has maintained a daily presence of care coordination staff at each city shelter to support new arrivals across all 19 locations, including 4 state-operated shelters.
- The Operations and Communications teams collaborated to implement paid advertisements on Facebook, Instagram, LinkedIn, and Twitter during operational hours to enhance awareness of Express Care.
- The RN triage queue has been developed, approved, and is set to go live on August 27, 2024, to handle all incoming calls for Express Care patients.





### **AMBULATORY SERVICES**



#### **Patient Experience & Employee Engagement**

This month ACHN saw a 0.08% decrease from June in our overall "Likelihood to Recommend" score
year-to-date bringing their score to 65.75%. ACHN leadership will meet in August to discuss and
develop a plan for increased system-wide visibility, while the Specialty Care task force is working
on improving clerk experience to boost results.

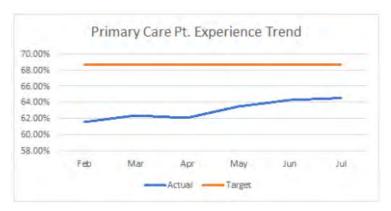


- Specialty Care's patient experience metric, "Likelihood of Recommending," has experienced a
  modest decrease of 0.15%, resulting in a current rate of 65.77%. On a positive note, the
  Ophthalmology clinic has demonstrated the greatest improvement, with a percentage change of
  4.90% and a current top box score of 62.89%. Furthermore, the Cancer Center continues to excel,
  maintaining a leading position within ACHN with a top box score of 73.83%.
- The overall trend for Primary Care's "Likelihood of Recommending" increased from 64.29% to 64.58% with a continued upward trend. In addition, Arlington Heights, Austin, and Robbins have exceeded their year-end target for "Likelihood to Recommend." Patient experience strategies will remain an integral part of the daily huddle.





### AMBULATORY SERVICES





#### **Growth Innovation & Transformation**

- CORE leadership has been preparing for a new onsite specialty clinic with the Pulmonary team, starting in August. We are also working on enhancing Continuity Clinic service delivery for patients discharged from Cermak and enrolled in care at CORE.
- The Cancer Center launched a specialized Dietary Support program for cancer patients and secured an additional year of NCORP (NCI Community Oncology Research Program) clinical trials funding, supporting 10 full-time employees.



### **Optimization, Systemization & Performance Improvement**

- The Cerner Referral Orders for Specialty Behavioral Health's Licensed Clinical Social Workers
  (LCSWs) have been finalized. The system is scheduled to go live on August 5, 2024, with training
  sessions also planned for August.
- The 7-Day Post-Hospitalization Pilot for CountyCare will be launching and aims to enhance scheduling across CCH with Behavioral Health providers, improving access for patients recently discharged from psychiatric hospitals. We have collaborated with Finance and IT to finalize the necessary billing codes. CountyCare is currently working on filtering the referral list, and a meeting is scheduled for August to discuss implementation.
- Nurse clinicians are providing ongoing training on instrument handling and glucometer use across Primary and Specialty clinic sites.





### **AMBULATORY SERVICES**



#### Workforce: Talent & Teams

ACHN currently has 174 positions in recruitment: 30 are actively posted, 12 are pending posting, 48
are undergoing candidate qualification verification, 24 are in the interview stage, 43 decision-tohire packets are under review, 17 offers have been accepted, 37 are in pre-recruitment, and 4 are
on hold awaiting repost. To date, we have hired 80 individuals this fiscal year.



#### **Fiscal Resilience**

- Primary Care volumes were below target by -0.9% (151) visits for the month of July. Year-to-date volumes are off by 3.2% to budget. Unsigned notes saw an increase from the prior month.
   Cottage Grove and GMC had significant changes in the number of unsigned notes when compared to prior months.
- The Primary Care team is making significant improvements with timely signed notes by sending early reminders. Englewood continues to move in a positive direction. The increase for Cottage Grove and GMC were unexpected. ACHN Leadership has informed the managers and will closely monitor to ensure timely reminders are sent for closing notes.
- As of July 2024, ACHN is performing within expectations, having utilized 68% of the budgeted projections year-to-date.

| Office / Program / Account           | FY24 Budget | Expenses    | Obligations<br>(BPA's/PO's) | Expenditures<br>(Expenses +<br>Obligations) | Funds Available | %<br>Expended |
|--------------------------------------|-------------|-------------|-----------------------------|---|-----------------|---------------|
| 4893 - Ambulatory & Community Health |             |             |                             |   |                 |               |
| Network of Cook                      |             |             |                             |   |                 |               |
| Grand Total                          | 179,269,432 | 113,522,313 | 7,943,468                   | 121,465,781                                 | 57,803,651      | 68%           |

• We have four non-personnel contracts valued at \$500,000 or more. Two of these contracts have expired, but amendments are in progress and there are no service gaps.

| Contract Number Contract Name |                           | Agreement Amount | Expiration | Notes/Updates  |
|-------------------------------|---------------------------|------------------|------------|--|
| H18-72-030                    | Anchor Mechanical         | \$ 959,634.00    | 6/30/2024  | RFP will go out for a 2nd time as there is one proposal for the RFP. The lack of responses will cause a delay in awarding the contract.  ACHN will need to amend the current contract.  There is no anticipation of gaps in service. |
| H21-25-012                    | DaySpring Janitorial Svcs | \$ 2,300,000.00  | 11/30/2024 | RFP will go out for environmental services.  Amendment requested to add new clinic at 467 E 31st St. Chicago.  |
| H18-25-037                    | Alivio Meidcal Center     | \$ 1,106,745.09  | 4/30/2024  | No gaps in service. Six-month extension in process. Contract extensions maxed requiring RFP for new Patient Navigator contract.  |
| H17-25-064                    | Medspeed                  | 3,843,844.06     | 11/30/2024 | •Sponser/Labs has initiated the RFP for a new contract   |





### CERMAK HEALTH SERVICES

Lead Executive: Jesus "Manny" Estrada, Chief Operating Officer, Cermak Health Services

Reporting Period: July 2024 Report Date: July 19, 2024

### **Strategic Initiatives • OKR Highlights • Status Updates**



### Patient Safety, Clinical Excellence & Quality

Cermak Health Services' Dr. Chad Zawitz has co-authored a new publication, recently accepted into the BMC Public Health Journal titled "Guiding the Implementation of Wastewater-based Surveillance for Carceral Infection Control with Perspectives from People with Lived Experience of Incarceration during the COVID-19 Pandemic". This study involved interviews with staff and individuals with lived experience in custody settings, intended to better inform future use of wastewater surveillance.



### **Health Equity, Community Health & Integration**

Cermak leadership continues to trouble shoot issues at Cermak in regard to increase COVID surges, increase in population and ongoing challenges.

Cermak Health Services, in collaboration with our CCSO partners, have conducted another successful ectoparasite assessment sweep. Approximately 500 patients were screened for ectoparasites over the past week in an ongoing effort to maintain a pest-free custodial living environment. Special thanks and acknowledgement are due to the Cermak Nurses and their colleagues.





### CERMAK HEALTH SERVICES



#### Growth Innovation & Transformation

Cermak Health Service's Dr. Chad Zawitz co-authored a new scientific journal submission titled, "Genomic epidemiology analysis to detect the role of antibiotic use on the spread of MRSA in an urban jail and surrounding communities". This study was a collaboration with RUMC and the University of Michigan Medical Center and School of Public Health. This study examined the impact of antibiotic use/stewardship and its impact on the development and spread of MRSA within custodial settings and the greater community at large.

In and effort to improve patient safety and improve better documentation on patient adherence on medication compliance, Cermak Health Services is finalizing of removal of KOP (Keep-On-Person) as an option for medication delivery. Cermak Pharmacy Staff along with Medical Providers are working on to converting patient KOP Orders to non-KOP (Dose By Dose) Orders, converting approximately 1400 Orders for 800 patients.



### **Optimization, Systemization & Performance Improvement**

Eric Spruth, Cermak Art Therapist, lead completed the Labyrinth Project at the Juvenile Temporary Detention Center. The project columnated with the creation of a labyrinth on the floor of one of the centers open areas. The practice of labyrinth walking integrates the body with the mind and spirit. It is a form of active meditation that can help individuals to break free of thoughts or behaviors, and to focus and clarify your thoughts, your intentions and stay calm. Labyrinth walking would be a new and creative activity or therapy that will be available to the youth and staff at the facility.

The Chicago Department of Public Health has released updated "Guidance for Mitigation of COVID-19 and Other Respiratory Illnesses in Congregate Setting Facilities." Cermak Infection Control has reviewed and implemented these updated guidelines as applicable to the Cook County Jail environment.



#### **Workforce: Talent & Teams**

Pierre Nunez, PhD, has accepted the position of Chief Correctional Psychologist, Cermak Health Services. In this role, he will be responsible for coordinating of





### CERMAK HEALTH SERVICES

clinical mental health services for Individuals in Custody (IICs) at Cook County Jail. Dr Nunez has been at Cermak for 24 years as a Correctional Psychologist and served as a Mental Health Specialist after earning a master's degree in psychology at the University of Wisconsin-Madison. He earned a Doctorate in Psychology from Northwestern University and completed a two-year Postdoctoral Fellowship in Emergency and Crisis Intervention Services at Northwestern Memorial Hospital's Institute of Psychiatry. After completing his training, he returned to Cermak to serve as inpatient Unit Director. Workforce team continues to brainstorm ways to better assist the system in moving vacant positions forward through the hiring process. Currently the Patient Care Services Team is preparing for an August hiring fair.

Chad Zawitz, MD, represented Cermak Health Services as a participant in the annual John H Stroger Hospital Internal Medicine Boot Camp orientation. Dr Zawitz provided an introduction to healthcare in custody settings. This training is to help ensure CCH patients moving between Cermak and JSH receive the highest standards of compassionate care.



#### **Fiscal Resilience**

Cermak Health Services met with the State of Illinois Department of Healthcare and Family Services (HFS) to discuss the next steps regarding the implementation of the newly approved 1115 Waiver. Five milestones were identified for the successful implementation of the waiver, which will allow Cermak to bill for patients receiving key services 90 days prior to discharge from the Cook County Jail. This program will allow Cermak patients to have improved transitions of care into the community and Cermak is excited to continue these discussions with HFS.





### **CERMAK HEALTH SERVICES**

### Budget to Actual -

Overall, across all accounts, Cermak is on track and JTDC is lower than budgeted expectation through the end of July 2024

| 118  |             |            |             |             |           |
|--|-------------|------------|-------------|-------------|-----------|
|  |             |            |             |             | %         |
|  |             |            | Obligations | Funds       | Expende   |
| Office / Program / Account                               | FY24 Budg   | Expense *  | (BPA's/PO'  | Availabl    | d ▼       |
| 4240 - Cermak Health Services of Cook County             |             |            |             |             |           |
| 0 - DEFAULT (41195.4240.0)                               | -           | 5,862      | -           | 5,862       | No Budget |
| 10155 - Administration (41195.4240.10155)                | 12,448,221  | 7,841,849  | 3,376,278   | 11,218,127  | 90%       |
| 10160 - Administration and Clerical (41195.4240.10160)   | -           | -          | 3,571       | 3,571       | No Budget |
| 13500 - Environmental Services (41195.4240.13500)        | 2,762,461   | 1,764,966  | 25,812      | 1,790,778   | 65%       |
| 13945 - Finance (41195.4240.13945)                       | 243,273     | 159,941    | -           | 159,941     | 66%       |
| 14915 - Human Resources (41195.4240.14915)               | 263,532     | 122,298    | -           | 122,298     | 46%       |
| 15050 - Information Technology (41195.4240.15050)        | 231,171     | 165,907    | -           | 165,907     | 72%       |
| 15435 - Laboratory Services (41195.4240.15435)           | 641,650     | 358,786    | 21,800      | 380,586     | 59%       |
| 15805 - Material Management (41195.4240.15805)           | 462,003     | 224,413    | 19,620      | 244,033     | 53%       |
| 15880 - Med/Surg - Administration (41195.4240.15880)     | -           | -          | 2,810       | 2,810       | No Budget |
| 15895 - Medical Administration (41195.4240.15895)        | 10,761,208  | 6,171,233  | 105,852     | 6,277,085   | 58%       |
| 16480 - Nursing - Administration (41195.4240.16480)      | -           | -          | 283         | 283         | No Budget |
| 17015 - Oral Health (41195.4240.17015)                   | 2,496,986   | 1,299,237  | 20,020      | 1,319,257   | 53%       |
| 17170 - Patient Care Services (41195.4240.17170)         | 46,480,058  | 23,434,093 | 799,057     | 24,233,150  | 52%       |
| 17395 - PCS - Emergency Services (41195.4240.17395)      | -           | 1          | -           | 1           | No Budget |
| 17610 - Pharmacy (41195.4240.17610)                      | 9,838,834   | 5,164,938  | 796,520     | 5,961,459   | 61%       |
| 18445 - Quality Assurance (41195.4240.18445)             | 776,331     | 495,576    | -           | 495,576     | 64%       |
| 18485 - Radiology (41195.4240.18485)                     | 845,217     | 537,029    | _           | 537,029     | 64%       |
| 19650 - Storerooms (41195.4240.19650)                    | -           | -          | 18          | 18          | No Budget |
| 29235 - 240 General Store Inventory (IV) (41195.4240.292 | -           | 396,646    | 6,836       | 403,482     | No Budget |
| 16005 - Health Information Management (HIM) (41195.42    | 422,736     | 280,358    | _           | 280,358     | 66%       |
| 16125 - Mental Health Services (41195.4240.16125)        | 17,258,018  | 8,775,327  | 59,667      | 8,834,994   | 51%       |
| 19635 - Store Room (41195.4240.19635)                    | -           | -          | 141         | 141         | No Budget |
| 20475 - Txbl GO Ser 2009B BABS Bond Fd (41195.4240.204   | -           | 10,099     | _           | 10,099      | No Budget |
| 29165 - General Store Inventory (IV) (41195.4240.29165)  | 271,687     | 177,776    | 77,781      | 255,557     | 94%       |
| 15485 - Law Administration (41195.4240.15485)            | -           | -          | 562         | 562         | No Budget |
| Grand Total  | 106,203,386 | 57,386,335 | 5,316,630   | 62,702,964  | 59%       |
|  |             | ,,         | -,,         | -2/. 52/204 | 2576      |





### **CERMAK HEALTH SERVICES**

|  |             |           | Obligations  | Funds      | %<br>Expende |
|--|-------------|-----------|--------------|------------|--------------|
| Office / Program / Account                             | FY24 Budg ▼ | Expense 💌 | (BPA's/PO' ▼ | Availabl 🕶 | d ▼          |
| 4241 - Health Services - JTDC                          |             |           |              |            |              |
| 10155 - Administration (41197.4241.10155)              | 1,041,815   | 193,319   | 99,275       | 292,594    | 28%          |
| 16015 - Medical Services Administration (41197.4241.16 | 731,730     | 492,872   | -            | 492,872    | 67%          |
| 17015 - Oral Health (41197.4241.17015)                 | 309,492     | 244,910   | -            | 244,910    | 79%          |
| 17170 - Patient Care Services (41197.4241.17170)       | 3,629,502   | 2,189,456 | 52,333       | 2,241,789  | 62%          |
| 19815 - Support Services Administration (41197.4241.19 | -           | -         | 356          | 356        | No Budget    |
| 10755 - Behavioral Health (41197.4241.10755)           | 3,971,104   | 2,346,181 | -            | 2,346,181  | 59%          |
| Grand Total  | 9,683,643   | 5,466,739 | 151,964      | 5,618,703  | 58%          |



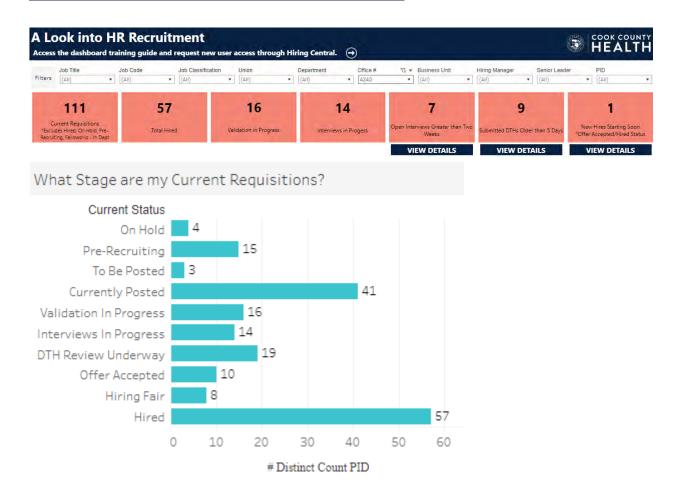




**CERMAK HEALTH SERVICES** 

### **Staffing**

### **CERMAK STAFFING / VACANCY and HR ACTIVITY STATUS**

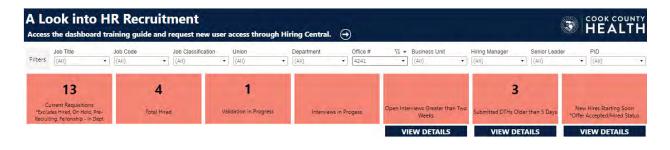


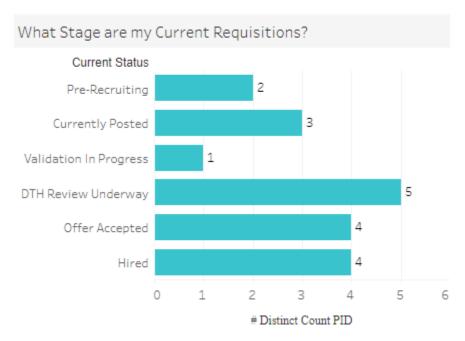




### **CERMAK HEALTH SERVICES**

#### JTDC STAFFING / VACANCY and HR ACTIVITY STATUS























**CERMAK HEALTH SERVICES** 

#### Procurement --

The following contracts for \$500K or more and are set to expire in the next 9 months.

| <u>Number</u> | <u>Supplier</u>                   | PO Description   | End Date    |
|---------------|-----------------------------------|--|-------------|
| H17-25-037    | CORPORATE CLEANING SERVICES INC.  | H17-25-037 - Service, Window Cleaning  | 31-May-2024 |
| 77000032606   | SCHECK & SIRESS PROSTHETICS, INC. | 77000032606 - Service, Custom Orthotics  | 31-Jul-2024 |
| 77000133454   | AB STAFFING SOLUTIONS LLC         | H22-25-164 SERVICE, PROFESSIONAL RADIOLOGY<br>STAFFING SERVICES                        | 25-Sep-2024 |
| 77000064455   | ODP BUSINESS SOLUTIONS LLC        | H19-25-077 - Supplies and Services, Office Supplies                                    | 21-Nov-2024 |
| 77000063013   | W W GRAINGER INC                  | H19-25-063 - Supply, Institutional Supplies for<br>Maintenance, Repair, and Operations | 30-Nov-2024 |
| 77000063015   | ALLIED WASTE TRANSPORTATION, INC. | H19-25-103 - Service, Waste Removal Services<br>Throughout CCH                         | 30-Nov-2024 |
| H18-25-114    | KORE SAE, LLC                     | H18-25-114 - Service, Temporary Staffing   | 30-Nov-2024 |
| 77000073375   | LINDE GAS & EQUIPMENT INC.        | H20-25-023 - SERVICE, MEDICAL GAS  | 08-Dec-2024 |
| 77000091769   | QUEST DIAGNOSTICS INC.            | H21-25-034_SERVICE, REFERENCE LABORATORY TESTING                                       | 31-Dec-2024 |
| 77000107994   | MAXIM HEALTHCARE SERVICES INC     | H22-25-052_ Services_Locum Tenens and AP Staffing                                      | 14-Feb-2025 |
| 77000075883   | STERICYCLE INC                    | H20-25-063 - Waste Removal for Medical,<br>Hazardous, Sharps and Pharma Waste          | 31-Mar-2025 |
| H16-72-052    | LINDE GAS & EQUIPMENT DIV LINDE   | H16-72-052 - Service, Certification, Maintenance, and Repair of Medical Gas Systems    | 31-Mar-2025 |





# DIVISIONAL EXECUTIVE SUMMARY COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

Lead Executive: LaMar Hasbrouck, MD, MPH, MBA, Chief Operating Officer

Reporting Period: July 2024 Report Date: August 1, 2024

### **Strategic Initiatives • OKR Highlights • Status Updates**



#### **Health Equity, Community Health & Integration**

- The COVID-19 case numbers, hospitalizations, and wastewater surveillance are trending up in Illinois but at a more modest rate than much of the rest of the country. The predominant variant is the KP.3 variant, which is a FLiRT strain and is a subvariant of Omicron. Current vaccines will give reasonable coverage against this variant in preventing severe disease, and an updated vaccine will be available in the fall.
- The first case of West Nile Virus in Illinois this season was diagnosed this month. The person is a resident of suburban Cook County.
- The Communicable Diseases Unit is planning our approach to addressing a
  potential H5N1 (Bird Flu) outbreak in our jurisdiction. Human cases are
  slowly rising in dairy workers. National wastewater surveillance is underway
  and provides a snapshot of hotspots of activity. Currently, suburban Cook
  County has minimal activity.
- The Emergency Preparedness and Response Unit is in the process of developing partnerships with Morton and Triton colleges. The colleges will serve as points-of-dispensing or vaccination (POD) sites. The team plans to form partnerships with all suburban Cook County community colleges after the Democratic National Convention ends.
- The Breast and Cervical Cancer Screening program team participated in "Kidfest," a back-to-school event, held by the Family Christian Health Center which had 1,371 attendees. The team engaged mothers in conversations about breast and cervical health. 20 women signed up to be enrolled.
- The Policy team supported the Community Behavioral Health team's Substance Use Education and Awareness Series Kick-off Day, held July 30, 2024, in Maywood. The team provided elected officials with further information on prevention efforts and Naloxone as well as, how the community defines effective responses to opioid and substance use.









### Optimization, Systemization, & Performance Improvement

Construction plans for the vaccine redistribution warehouse have been approved and are on track for substantial completion by the end of the year.

### **Budget to Actual**

**Budget to Actual File: FY24 CCH Budget to Actual July 29, 2024** 

| Office &<br>Account | FY24 Budget | Expenses   | Obligations<br>(BPA's/PO's) | Expenditures<br>(Expenses +<br>Obligations) | Funds<br>Available | % Expended |
|---------------------|-------------|------------|-----------------------------|---|--------------------|------------|
| 4895 - DPH<br>Total | 21,992,570  | 10,133,557 | 619,962                     | 10,753,519                                  | 11,239,050         | 49%        |

### **Staffing**

As of July 2024, CCDPH has - 41 vacant positions to date (actively recruited) - 3 Requests for Hires (RTH) are awaiting budget approval or to be posted/reposted. The remaining positions are being actively recruited (see table below).

### FY24 metrics Snapshot, as of July 2024

| RTHs<br>Submitted<br>MTD/ YTD | Pre-<br>Recruiting | To be<br>Posted | Postings<br>currently | ARP<br>Received | Interviews<br>in<br>Progress | e-DTH<br>underway | Candidate<br>Offers | Vacancies<br>Filled<br>In<br>July | YTD<br>position<br>filled |
|-------------------------------|--------------------|-----------------|-----------------------|-----------------|------------------------------|-------------------|---------------------|-----------------------------------|---------------------------|
| 18/69                         | 4                  | 1               | 7                     | 4               | 3                            | 6                 | 1                   | 3                                 | 17                        |





# DIVISIONAL EXECUTIVE SUMMARY COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

### **Procurement**

The following vendors or subgrantee \$500K or more are all active contracts.

| Contract # | Vendor or Subgrantee Name                              | Expires On |
|------------|--|------------|
| H21-25-129 | AgeOptions   | 5/31/25    |
| H22-25-154 | Flowers Communications Group                           | 5/31/25    |
| H21-25-138 | Housing Helpers/Proviso Partners for Health            | 5/31/25    |
| H21-25-140 | Illinois Board of Trustees/UIC School of Public Health | 5/31/25    |
| H21-25-182 | United Way of Metropolitan Chicago                     | 5/31/25    |

<sup>\*\*\*\*</sup> Month to date (MTD) - Fiscal year to date (YTD)





<sup>\*\*\*\*\*</sup>Vendor or Subgrantee contract dates are extended.

### **HEALTH PLAN SERVICES**

Lead Executive: Aaron Galeener, Chief Administrative Officer, Health Plan Services

Reporting Period: July 2024

Report Date: August 15, 2024

### Strategic Initiatives • OKR Highlights • Status Updates



#### Patient Safety, Clinical Excellence & Quality

### National Committee for Quality Assurance health plan ratings

In May, CountyCare finalized its measurement year 2023 Healthcare Effectiveness Data and Information Set (HEDIS) quality results. CountyCare's HEDIS results contribute to the plan comparison quality scores from the National Committee for Quality Assurance (NCQA), which will be officially released in the fall.

Also in May, CountyCare's 2023 Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey closed. The annual CAHPs survey is an opportunity for members to provide feedback on CountyCare's services and provider network. The survey is anonymous, voluntary, and administered to a statistically significant number of members. CAHPS is part of a national project by NCQA and contributes to CountyCare's quality ratings.

#### CountyCare saw the following HEDIS and CAHPS results:

- Improvement in health outcomes in key areas of focus for the health plan, including primary care engagement, maternal and child health, and follow up after hospitalization for mental health.
- Increase in 15 of 17 of hybrid measure rates from the prior year.

In alignment with Healthcare and Family Services' (HFS) quality priorities, CountyCare continues to focus on member experience, behavioral health, immunizations, maternal and child health, and primary care engagement.





### HEALTH PLAN SERVICES



# Health Equity, Community Health, & Integration Illinois Healthcare Transformation Section 1115 Waiver

On July 29, CountyCare leadership joined Governor J.B. Pritzker, County President Toni Preckwinkle, and other federal, state, and local officials in a press conference to celebrate the Centers for Medicare and Medicaid approval of the 1115 Waiver. An 1115 waiver is "an experimental, pilot, or demonstration projects that promote the objectives of the Medicaid and Children's Health Insurance Program (CHIP) programs."

The 1115 waiver, approved from July 2, 2024, to June 30, 2029, will add new reimbursable Medicaid services, including:

- Health-related social needs, like housing and nutritional supports
- Pre-release services for eligible individuals that are incarcerated for up to 90-days
- Violence prevention and intervention services
- Substance use disorder services
- And others

Healthcare and Family Services (HFS) plans to start implementation with services to address housing and food insecurity. In July, several representatives from CountyCare and each of the health plans began working closely with HFS to make it a successful implementation.



# Member Experience Transportation transition

On July 17, CountyCare executed a soft launch with its new transportation vendor, ModivCare, allowing for them to begin scheduling non-emergency medical transportation for dates of service after July 31.

On August 1, 2024, CountyCare completed the full transition to the new transportation vendor. CountyCare's new partner, Modivcare, maintains an extensive network of providers that maintain multiple levels of transportation services, including private and public transportation, and mileage reimbursement for caregivers. There is no change in the transportation benefit, however CountyCare will have a more extensive network and new modes to request rides. In addition to requesting rides by phone, members will be able to





### **HEALTH PLAN SERVICES**

use a mobile app or website that will allow for live trip tracking, mileage reimbursement, and the ability to manage and book trips for multiple family members.



### Growth, Innovation, & Transformation Redetermination

Having surpassed the one-year anniversary of the resumption of Medicaid redetermination, CountyCare continues to execute a comprehensive member education and outreach strategy to support members with redetermination, including a communications campaign through mail, text, phone, email, the CountyCare website, social media, and community events.

- CountyCare had a 91.5% retention rate in June.
- As of May, CountyCare has hosted 245
  Redetermination
  Events with an
  attendance of over
  10,500 individuals,
  including over 8,400
  CountyCare members.



- Between April and July, CountyCare saw heightened attendance of up to 100-150 individuals at Redetermination Events.
- CountyCare expects to see a lower retention rate in September due to the full Health Benefits for Immigrant Adults and Seniors population going through redetermination simultaneously with an August 15 submission date.

Beginning in May, the Illinois Department of Human Services began attending CountyCare's Redetermination Events to support members with their redeterminations onsite. We are thankful for this partnership and our ability to better support our members through the Medicaid renewal process.





### **HEALTH PLAN SERVICES**



### **Optimization, Systemization, & Performance Improvement**

#### Provider network improvement

In 2024, CountyCare has continued its focus on improvements to its provider network management department.

- Early this year, CountyCare launched an initiative to make improvements to provider contract management processes, provider data management quality, and the CountyCare provider directory.
- The new provider directory is on track to go live this fall.

This key initiative will optimize members' experience by ensuring they have better information regarding CountyCare's in-network providers. It will also strengthen CountyCare's relationships with its provider network as improved provider data will lead more successful claims adjudication and processing.



#### **Fiscal Resilience**

#### Risk adjustment strategy

CountyCare is performing an analysis in 2024 to assess the gaps and inadequacies in coding to focus on opportunities for improvement in the risk scores, thereby capturing additional revenue for providers and CountyCare. Risk adjustment is a process for quantifying an individual's health status into a risk score and is an important element of medical billing which focuses on ensuring that health plans and providers receive appropriate payments for the extent of care they provide to patients.

In the short term, CountyCare will:

- Identify specific providers to facilitate provider education and clear-cut coding policies through increased collaboration.
- Consistently rebalance priorities, monitoring the data to refocus based on leading and lagging performance indicators.

In the long term, CountyCare will:

• Link population health management and risk adjustment through better integrated systems to adjust payments for risk and quality of care.





### **HEALTH PLAN SERVICES**

- Implement risk adjustment mechanisms that rely on automated collection from data sources used for care improvement and population health management.
- Execute an evidence-driven strategy for risk adjustment to improve equity by aligning with risk adjustment incentives and models.



# Workforce: Talent & Teams Employee engagement survey

This past July, Cook County Health Human Resources conducted its bi-annual Employee Engagement Survey with all team members. The survey is confidential and provides invaluable information about staff satisfaction and opportunities to improve the Health Plan Services working environment. Eighty-three percent of the Health Plan Services team's 352 eligible employees participated. Health Plan Services looks forward to receiving its departmental results and developing action plans and activities to make Cook County Health an even better place to work.

### **Budget to Actual Through July 2024**

CountyCare's July membership of over 426,100 members was higher than the monthly average budgeted projection of 391,000. The net impact of revenue and expenses remains balanced and within budget.

| Office & Account                  | FY24 Budget   | Expenses      | Obligations<br>(BPA's/PO's) | Expenditures<br>(Expenses +<br>Obligations) | Funds<br>Available | % Expended |
|-----------------------------------|---------------|---------------|-----------------------------|---|--------------------|------------|
| 4896 - Health Plan Services       |               |               |                             |   |                    |            |
| CONTRACTUAL SERVICE Total         | 2,886,625,971 | 2,218,693,133 | 23,204,932                  | 2,241,898,065                               | 644,727,906        | 78%        |
| OPERATIONS & MAINTENANCE Total    | 7,748         | 5,572         | -                           | 5,572                                       | 2,176              | 72%        |
| PERSONAL SERVICES Total           | 46,192,543    | 27,105,067    | 622                         | 27,105,689                                  | 19,086,854         | 59%        |
| 4896 - Health Plan Services Total | 2,932,826,262 | 2,245,803,771 | 23,205,555                  | 2,269,009,326                               | 663,816,936        | 77%        |
| Grand Total                       | 2,932,826,262 | 2,245,803,771 | 23,205,555                  | 2,269,009,326                               | 663,816,936        | 77%        |







### **HEALTH PLAN SERVICES**



Of the 91 FY2024 positions in recruitment, 55 (60%) of requisitions have been hired, 12 positions have interviews in progress, and 7 new hires are on track to start in the coming weeks. Since our last update, 9 new team members have been hired. CountyCare is continuing to prioritize staff recruitment to ensure the continued success of the plan.



#### **Procurement**

The following contracts for \$500,000 or more are set to expire in the next 9 months.

| Service                             | Vendor     | Description  | Type of contract | Contract end date |
|-------------------------------------|------------|--|------------------|-------------------|
| Interoperability and Patient Access | 1Up Health | In alignment with the Cures<br>Act, provides Centers for<br>Medicare and Medicaid<br>required interoperability and<br>patient access technology<br>services. | Procurement      | 02/28/2025        |





### PROVIDENT OPERATIONS

Lead Executive: Arnold F. Turner, MD

Reporting Period: July 2024

Report Date: August 16, 2024

### **Strategic Initiatives • OKR Highlights • Status Updates**



### Patient Safety, Clinical Excellence & Quality

- Master Educator Navis Carson Dunn has secured the funding for the Crisis Prevention Institute training for the ED nursing staff. The training Is scheduled to start In November.
- The kick-off meeting for the elevator modernization project was held on 07/01/2024.



#### **Health Equity, Community Health & Integration**

- Plans for staffing the first aid stations for the Bud Billiken Parade were finalized.
- Dr. Rich Keen, Chair of Surgery, and Dr. Florian Stroie, Men's Health attending
  physician, and a representative from Siemens evaluated the OR's for expanding
  cystoscopy services and establishing a men's health program at Provident. This will
  expand access to prostate cancer screening which has a higher incidence in African
  American men.
- Plans are underway with CountyCare to host a community baby shower at Provident in September.



#### **Patient Experience**

• Provident nursing leadership went live with IRound platform. Managers and House Administrators are now tracked for goals/targets.





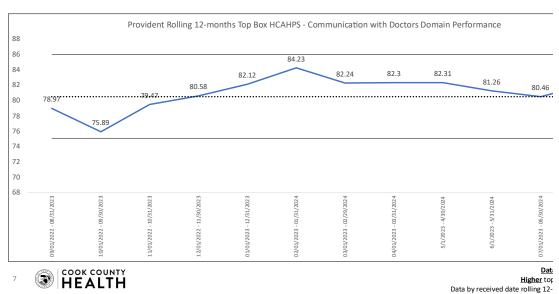


### PROVIDENT OPERATIONS

The goal for the Doctors Domain Is 81.0

### **HCAHPS Measures**

Rolling 12-months HCAHPS Top Box Score for Doctors Domain





#### **Growth Innovation & Transformation**

- Meetings were held to discuss expanding cystoscopy services at Provident and capital requested
- Plans for a Pain Clinic at Provident were discussed with Dr. Taruna Panmetcha,
   Division Chair, Pain Management.
- Meeting commenced with the A/E firm, Bailey Edward, to finalize the space options and discuss the design of the GI suites.





### PROVIDENT OPERATIONS



### **Optimization, Systemization & Performance Improvement**

- The CT scanner console upgrade was completed successfully with the collaboration of the Stroger ED, Patient Transportation, and the Stroger CT department. While the scanner was down, patients were transferred to Stroger for urgent CT scans from the ED and 8 West med/surg unit without Incident.
- Completed installation of Medivators (endoscope sterilizers).



#### **Workforce: Talent & Teams**

- Provident Hospital Nursing Vacancy rate has been decreased from peak of 57% in 2023 to 36% in July 2024
- The new Materials Management Supervisor, Omar Rodriguez, started at Provident.



#### **Fiscal Resilience**

| May YTD<br>(In \$000) | Actual  | Budget   | Variance (Favorable/Unfavorable |
|-----------------------|---------|----------|---------------------------------|
| Income                | \$37.9  | \$30.2   | \$7.7 (25.5%) Favorable         |
| Expense               | \$46.1  | \$55.8   | \$9.7 (17%) Favorable           |
| Labor (Salary &       | \$24.9  | \$26.5   | \$1.6 (6%) Favorable            |
| Contract)             |         |          |                                 |
|                       |         |          |                                 |
| Gain/Loss             | (\$3.4) | (\$24.1) | \$20.7 (86%) Favorable          |























### **Budget to Actual**

| Office   | √¹ FY24 Budget | Expenses   | Obligations<br>(BPA's/PO's) | Expenditures<br>(Expenses +<br>Obligations) | Funds<br>Available | % Expended |
|--|----------------|------------|-----------------------------|---|--------------------|------------|
| ■ 4891 - Provident Hospital of Cook County     |                |            |                             |   |                    |            |
| Non- Personnel                                 | 20,543,860     | 6,360,205  | 2,290,215                   | 8,650,420                                   | 11,893,441         | 42.11%     |
| Personnel                                      | 24,156,520     | 14,873,933 | -                           | 14,873,933                                  | 9,282,587          | 61.57%     |
| 4891 - Provident Hospital of Cook County Total | 44,700,380     | 21,234,138 | 2,290,215                   | 23,524,353                                  | 21,176,027         | 52.63%     |

The actual spend should not exceed 69.95%

#### **Staffing**

| 105  | 46          | 11                     | 19                    | 9   | 4                                | 13  |
|--|-------------|------------------------|-----------------------|---|----------------------------------|---|
| Current Requisitions<br>*Excludes Hired, On Hold, Pre-<br>Recruiting, Fellowship - In Dept | Total Hired | Validation in Progress | Interviews in Progess | Open Interviews Greater than Two<br>Weeks | Submitted DTHs Older than 5 Days | New Hires Starting Soon<br>*Offer Accepted/Hired Status |

### What Stage are my Current Requisitions? **Current Status** On Hold Pre-Recruiting To Be Posted Currently Posted 27 Validation In Progress Interviews In Progress 19 25 DTH Review Underway Offer Accepted Hiring Fair 1 Hired 46 10 40 50 # Distinct Count PID





### PROVIDENT OPERATIONS

#### Procurement --

• The following contracts for \$500K or more and are set to expire in the next 9 months.

| Contract # | Vendor Name                          | Expires    |  |  |
|------------|--------------------------------------|------------|--|--|
| H22-25-090 | Dialysis Care Center Management, LLC | 11/30/2024 |  |  |
| H22-25-187 | ADT Commercial, LLC                  | 11/30/2024 |  |  |
| H21-25-011 | Dialysis Care Center Management, LLC | 11/30/2024 |  |  |





### STROGER OPERATIONS

Lead Executive: Donnica Austin-Cathey

Reporting Period: July 2024

Report Date: August 20, 2024

### Strategic Initiatives • OKR Highlights • Status Updates



#### Patient Safety, Clinical Excellence & Quality

- The rolling 6-month average for percent Left without being seen (LWBS) was 2.47% In the Emergency Department. The Emergency Department continues to outperform the target for July.
- The Laboratory went live with a new Osmometer. Prior to the new equipment, the lab was sending Osmos to UIC since March while we waited for implementation of our new equipment.
- The Laboratory has successfully removed Joint Commission findings regarding Critical Values and Glucometer Disinfection/Cleaning.
- Directors and Med/Surg managers have been collaborating closely with RN Bed coordinators to produce a call-off report that tracks attendance and compliance in real-time.
- The Nursing falls rate for the month of July was 1.20/1,000 patient days. We remain below state and national averages. Also, there were zero Hospital Acquired Pressure Injury (HAPI) for the month of July.



### **Health Equity, Community Health & Integration**

 There is a comprehensive hand hygiene campaign underway to improve hand hygiene among all staff members. We know that washing hands is the most effective way to prevent the spread of germs.





### STROGER OPERATIONS



#### **Patient Experience**

- Stroger Nursing leaders are working to improve patient experience and facilitating discharge preparation by conducting regular rounds on patients who do not speak English to further assist in their stay.
- There was a decrease in the Nursing Domain performance for patient experience.
   The Nursing leaders continue to focus on hardwire the CI CARE elements, leader rounding and behavioral standards.



#### **Growth Innovation & Transformation**

- Stroger Average Daily Census for the month of July was 211 against the budgeted census of 210.
- Physical Therapy/Occupational Therapy/Speech Lanaguage Pathologist are ensuring to mentor each staff member individually on difficult patient cases to improve clinical care overall.
- In Rehab, they are orienting a new OT manager and have been shadowing/cotreating with both Inpatient and outpatient staff at all locations and service lines to identify gaps in care and areas of growth.



#### **Optimization, Systemization & Performance Improvement**

- Hospital Throughput Initiative Phlebotomy AM draws completed by 7 am 75% for July which meet the benchmark.
- The Laboratory is currently working with Cross County to implement electronic timekeeping for our agency staff members.
- Nursing Staffing coordinator manager has been collaborating with workforce management, checking with agency registered nurses, and establishing expectations for absences and tardiness.
- Discharge recommendation field has been added to all Speech Language
   Pathologist notes template so medical staff can find diet recommendations easier.





### STROGER OPERATIONS



#### **Workforce: Talent & Teams**

- Dr. Victoria Alagiozian-Angelobva was officially named Chair, Department of Pathology.
- Maria Juaniza started as a Pathology Extender in the Gross Room.
- The Laboratory has received acceptance offers for Immunology Supervisor and one Provident CLA position.
- The Nursing leadership team has hired two RN Bed coordinators and two agency ward clerks have been cross-trained for coverage gaps. The Director of Critical Care position at Stroger is currently open and the team is working with HR on qualified candidates to start interviewing the first week of September.
- A new Physical Therapy Associate Manager started at Blue Island to ensure onsite manager on a regular basis.



#### **Fiscal Resilience**

• In Rehabilitation, discussions regarding delays with VFSS in radiology suite and the need to address so we can continue to increase patient encounters.

### **Budget:**

| Office & Account   | FY24 Budget   | Expenses    | Obligations<br>(BPA's/PO's) | Expenditures<br>(Expenses +<br>Obligations) | Funds<br>Available | %<br>Expended |
|--|---------------|-------------|-----------------------------|---|--------------------|---------------|
| 4897 - John H. Stroger Jr. Hospital of Cook County Total | 1,079,248,005 | 656,485,129 | 59,619,167                  | 716,104,296                                 | 363,143,709        | 56%           |

#### **Human Resources Recruitment:**

| 737  | 452         | 89                     | 108                   | 35  | 21                               | 99  |
|--|-------------|------------------------|-----------------------|---|----------------------------------|---|
| Current Requisitions *Excludes Hired, On Hold, Pre- Recruiting, Fellowship - In Dept | Total Hired | Validation in Progress | Interviews in Progess | Open Interviews Greater than Two<br>Weeks | Submitted DTHs Older than 5 Days | New Hires Starting Soon<br>*Offer Accepted/Hired Status |



