

DIVISIONAL EXECUTIVE SUMMARY

AMBULATORY SERVICES

Lead Executive: Craig Williams, Chief Administrative Officer for Operations and Development
Reporting Period: May, 2023
Report Date: June 15, 2023

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- The Cancer Center service line earned accreditation renewal from the Commission on Cancer through May 2024.
- To promote program knowledge and growth, the CORE Center provided FibroScan recertification, trainings, and service delivery demonstrations at ambulatory staff and infectious disease provider meetings.



Health Equity, Community Health & Integration

- ACHN is expanding access by adding cardiothoracic and plastic surgical ambulatory services to Sengstacke health center, to be fully implemented by autumn 2023.
- ACHN is expanding pediatric primary care services at the Blue Island community health center.
- The neurosciences service line will soon establish continuous EEG. In addition, ACHN is moving forward with purchasing the hyperfine STAT MRI. Offering continuous EEG and having this MRI equipment allows us to keep patients rather than transferring them out of the system for care.
- The CORE/Cook County HIV Integrated Programs (CCHIP) Injectable Cabenuva Program continues to expand across ACHN with the South Suburban HIV team partnering with the Blue Island community health center to provide training for nurses. The CCHIP program outreach team re-engaged ninety-eight patients in care. Through the community and routine HIV testing program, CCHIP tested 204 individuals from the community, nine of whom were newly diagnosed. ACHN is now providing monthly HIV prevention services at Morton East High School community health center. Through the CORE HAT (HIV/HCV Accessible Testing) Project at Cermak, ACHN now offers Hepatitis C testing, linkage to care and continues to provide ongoing training to staff and other support to help implement these services. Finally, ACHN revised the CORE/CCHIP HIV Reciprocal Training program to accommodate an upcoming training for more than twenty nurses at Juvenile Temporary Detention Center in collaboration with HIV Prevention/PrEP Services and HIV linkage to care.



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- Cook County Health CEO Israel Rocha and Dr. Urjeet Patel joined Senator Dick Durbin on June 9 to highlight the impact of widespread cancer drug shortages. Cook County Health is supporting policymakers as they work to address this national shortage with short- and long-term solutions.
- Through the community vaccine program, we continue to administer the COVID-19 Bivalent vaccine to the community and patients. The total number of people vaccinated in May was 1,236 (first dose 633, second dose 119, booster first dose 285, booster second dose 199). The Blue Island, North Riverside, and Arlington Heights COVID-19 vaccine and testing clinics were absorbed into the day-to-day clinic operations for these specific sites.
- ACHN continued to offer the Monkeypox vaccine at the CORE Center location. In May, a total of seventeen people were vaccinated for Monkeypox (first dose 11, second dose 6, booster first dose 0, booster second dose 0). CORE continues to provide available testing to employees, patients, and the community at the Stroger COVID-19 tent. In May, 291 tests were completed.
- The Patient Support Center answered 51,600 patient calls with an average answer speed under sixty seconds. The Central Triage Call Center answered 3,675 patient calls with average answer speed under twenty seconds. The CCH Transportation Department completed more than 3,350 patient rides for asylee seekers and completed more than 10,500 non-emergency patient rides overall.
- A Family Planning grant was extended for two additional grant periods (2023-2025) for a total value of \$1,761,600.
- The Refugee Health care coordination team members were embedded in shelters and the communities providing direct social services to asylee seekers, which increased the quality of the care coordination provided related to immunizations, STI treatments, well-child visits, prenatal care, medical complex care, etc. Although ACHN is seeing a decrease in no-show rates across ambulatory services for asylee seekers, ACHN continues to focus on educating patients on the importance of adhering to care plans by emphasizing its direct link to a healthy future. Since ACHN began providing care to asylum seekers through the end of May, there have been a total of 37,533 patient visits to a total of 7,619 patients (2,205 children; 1,947 women—117 of whom are pregnant; 3,473 men) and filled prescriptions for 7,022 patients requiring prescriptions.



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- Through an increase in scheduled visits and additional staffing funded through the American Rescue Plan Act (ARPA), ACHN is creating more access to behavioral health care.



Patient Experience & Employee Engagement

- Patient experience scores have improved on priority items and exceeded two of the seven goals for the month.

Site	Item/Composite	2022											
		Baseline	Jan Goal	Jan Actual	Feb Goal	Feb Actual	Mar Goal	Mar Actual	Apr Goal	Apr Actual	May Goal	May Actual	
ACHN Overall	Top Box Score (Overall)	57.29	57.51	57.30	57.73	57.29	57.95	58.37	58.17	58.29	58.39	58.63	
ACHN Overall	Degree to which you were informed about any delays	39.85	40.21	38.94	40.57	38.95	40.93	42.04	41.28	41.62	41.64	42.00	
ACHN Overall	Explanations the care provider gave about your problem or concern	63.21	63.50	64.79	63.80	63.73	64.09	64.42	64.39	64.27	64.68	64.61	
ACHN Overall	Likelihood to recommend care provider	64.08	64.34	64.08	64.61	64.13	64.87	65.33	65.14	64.87	65.40	65.18	
ACHN Overall	How well our staff worked together to care for you	62.32	62.55	60.86	62.77	60.59	63.00	63.00	63.23	62.88	63.45	63.23	
ACHN Overall	Likelihood to recommend	64.6	64.88	66.19	65.15	64.38	65.43	64.99	65.71	65.06	65.98	65.49	
ACHN Overall	Ease of obtaining referrals	57.22	57.40	54.85	57.57	54.97	57.75	58.08	57.92	57.52	58.10	57.74	
	Goal Unmet												
	Goal Unmet but improved from previous month												
	Goal Met												

- The top ten fastest improving clinics are shown below.

PG Overall—Site Performance

Peer Group: National Sites | PG Overall N=26263
Benchmark by: All Respondents

Name	n	Top Box Score			
		Current	Previous	Change	
Cancer Center	138	62.33%	44.44%	▲ 17.8	
Provident Behavioral Health	47	72.69%	57.34%	▲ 15.3	
Blue Island Primary Care	105	62.56%	55.52%	▲ 7.05	
Sengstacke (SH)	208	59.82%	53.11%	▲ 6.70	
Clinic H	48	58.33%	52.99%	▲ 5.35	
Sengstacke Primary Care	360	60.68%	56.15%	▲ 4.53	
Englewood	179	57.90%	53.44%	▲ 4.45	
Clinic D	30	64.57%	61.63%	▲ 2.95	
Prieto	120	53.63%	50.81%	▲ 2.82	
CCH Arlington Heights Center	144	56.15%	53.80%	▲ 2.35	



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- ACHN trained 543 team members in C-I-CARE. ACHN anticipates training an additional seventy-five team members in June and completing training for all Ambulatory clinics in August.
- The Women and Children's clinic began receiving patient satisfaction surveys for the first time ever, which is due in part to working with Press Ganey to re-map specialty care services and clinics to more accurately attribute to the specific services of the clinics rather than grouping them all together. As a result, Women and Children's clinic specific data is routing to the correct "site" on the Press Ganey portal.



Growth Innovation & Transformation

- The Cardiology service line successfully launched the Trans-catheter Mitral Valve Repair (MitraClip) program, marked by the successful performance of two of these procedures.



- Go-live for the initial phase of a Virtual Care Program is scheduled for autumn 2023 (timing contingent on labor discussions). Advanced practice providers will deliver virtual care services seven days a week. The virtual care work group – that includes clinical, operations, finance/revenue cycle, and technology - meet regularly to discuss system set-up, staffing models, provider documentation, workflows, etc.



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- Go-live for the Urgent Care Program will likely follow the virtual care go-live. The team continues to meet with key departments (HIS, Revenue Integrity, Communications and Marketing, etc.) about system set-up, provider documentation, reimbursement rates, workflows, etc.



Optimization, Systemization & Performance Improvement

- The Cancer Center service line previously implemented prior authorization in the infusion center for chemo drugs and has now expanded the process to include other therapies. Prior authorization helps us avoid delays in treatment and ensures proper payor coverage.
- The specialty care leadership team continues to partner with ECG consultants and other key stakeholders throughout the CCH system to optimize processes and tools to improve workflows for all specialty care clinics. In addition, the specialty care team is partnering with Finance to appropriately capture revenue from the correct clinic program in an effort to better manage finances and budget planning. Finally, the specialty care team continuously reviews volume, slot utilization, third next available appointment making, and number of sessions per provider, with emphasis on the advanced practice providers, to best optimize templates and improve access to care for patients.
- The primary care team continues to partner with Chicago Lighthouse and direct registration team members to make reminder calls to patients to improve show rates. Also, the registration teams are focusing on collecting, and updating, accurate patient contact information, including email addresses, to increase completion of patient experience surveys.
- Based on a recent audit of behavioral health treatment plan forms, ACHN updated the forms, in compliance with Medicare regulations, to be updated in the EMR.



Workforce: Talent & Teams

- ACHN has a total of 350 requests to hire in recruitment (fifty-seven validations in progress; fifty-seven interviews in progress; forty-eight open interviews greater than two weeks old; six decision-to-hire packets older than four days; five new hires



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starting soon). The remaining requests to hire are in the queue to be assigned to recruitment for validation.



Fiscal Resilience

- Primary Care: below budgeted volume for the month by 286 visits totaling 112,130 visits in FY2023.
- Specialty Care: above budgeted volumes for the month by 314 visits totaling 131,767 visits in FY2023.
- As of end of April 2023, ACHN is on track overall, having expended 51% of the budget, with 51% of the year completed.

Office / Program / Account	FY23 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended	Actual Expenses % Expended
Grand Total	134,030,236	64,726,318	3,425,655	68,151,973	65,878,263	51%	48%

- ACHN has eight contracts for \$500k or more set to expire within the next nine months.

Contract #	UPDATED VENDOR NAME	User Department	CONTRACT CATEGORY SUBTYPE	Amount Agreed	Expires On
H18-72-030	ANCHOR MECHANICAL INC	ACHN	General & Administrative	\$ 709,346.00	6/30/2023
H21-25-090	EDWARDS LIFESCIENCES	CARDIOLOGY	Cardiology / Radiology	\$ 550,000.00	7/31/2023
H21-25-114	BLACKHAWK MEDICAL TRANSPORTATION, INC, DBA ATI	Ambulatory Services	Health Care	\$ 2,380,000.00	8/31/2023
H21-25-114	BLACKHAWK MEDICAL TRANSPORTATION, INC, DBA ATI	Ambulatory Services	Health Care	\$ 2,380,000.00	8/31/2023
H20-25-024	VAYA WORKFORCE SOLUTIONS, LLC	Nursing	Professional Services	\$179,112,551.00	9/24/2023
H21-25-012	DAYSRING PROFESSIONAL JANITORIAL SERVICES INC	ACHN	Corporate Services	\$ 5,774,566.95	11/30/2023
H21-25-011	LLC	Nephrology	Health Care	\$ 8,427,311.00	11/30/2023
H20-25-100	ABBOTT	CARDIOLOGY	Cardiology / Radiology	\$ 6,690,000.00	12/31/2023



DIVISIONAL EXECUTIVE SUMMARY

CERMAK HEALTH SERVICES

Lead Executive: Jesus Manny Estrada, Chief Operating Officer

Reporting Period: May, 2023

Report Date: June 22, 2023

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- Cermak underwent a National Commission on Correctional Health Care (NCCHC) Accreditation Survey in March 2023. The initial report indicates all standards were met with some recommendations. Cermak is preparing an action plan for items identified by NCCHC as requiring follow up.



Health Equity, Community Health & Integration

- Cermak initiated project HAT (HIV/HCV Accessible Testing), an industry-funded grant that provides support for increased screening for HIV and HCV in vulnerable populations. The project funded through the CORE Center/Hektoen Institute was initiated due to presumed higher prevalence of undiagnosed HIV and HCV in our population. Funding covers several items, including phlebotomy staff, project leadership funds, and a jail linkage to care coordinator.
- Screening and testing related to the HAT project was operationalized. Testing includes; HIV, Hepatitis A/B/C serology, Syphilis EIA, Urine GC/chlamydia, Trichomonas (for females only). Specimens are processed overnight at the JSH lab, with automatic reports sent to Infection Control and Project HAT staff each weekday morning.
- On May 25, 2023, Dr. Arunkumar from the CCH Medical Examiner's Office conducted a site visit of Cermak/Cook County Jail. She was accompanied by two of her fellows. The site tour was coordinated and led by members of the CCSO leadership and security team and Dr Auguston-Ware.
- Cermak's Mental Health Services hosted representatives from Illinois Department of Corrections (IDOC) Mental Health Services Department. The purpose of the meeting was to develop a better understanding of the environment of Cook County Jail, and



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to discuss issues and potential solutions in the service of coordinating care for our patient population.



Patient Experience

- **Grievances/Appeals Management:**
There were 312 grievances and 94 appeals for the month of May 2023. The average response turn around time is 10.7 days for grievances and 9.1 days for appeals, thus meeting the required respective 15-business day response timeline.

Growth Innovation & Transformation



- Cermak is in the process of rolling out Phase 1 of our telehealth project. Phase 1 includes dialysis and renal services; go-live anticipated July 2023. Phase 2 involves access to telehealth in all ten living units and final roll out scheduled by Summer 2024.
- Cermak is in the process of finalizing realigned service line dashboards and KPIs. These tools will be used by the respective service lines to measure daily activities and outcomes. Once finalized, the metrics will be reported to System Quality Assurance.

Optimization, Systemization & Performance Improvement



- Cermak implemented a structured process for review of all unscheduled medical/mental health off-site transports. Reviews include assessment for appropriateness and reason for sending out.
- Cermak implemented a revised for process of reporting housekeeping/cleanliness issues in the Environment of Care Process.

Workforce: Talent & Teams



- Gina LoGalbo was on-boarded as the new HR Business Partner. Her position will provide a single point of contact for all Human Resources-related activity at Cermak.



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Fiscal Resilience



- Cermak, in collaboration with CDPH, has secured funding for support of infectious disease initiatives to include testing, treatment, and support. Funding will provide an opportunity to cover the cost of testing supplies and support through August 2024. Funding is for approximately \$500,000. Cermak has begun to plan and project for budget cycle 2024.
- Cermak continues Medicaid enrollment for patients entering the facility. One hundred percent of applicable candidates were screened for the month of May 2023. Cermak continues to assess impact of proposed Reentry Section 1115 Waiver which will potentially allow for the generation of revenues for returning residents.

Budget to Actual –

Overall, across all accounts, Cermak is on track and JTDC is lower than budgeted expectation through the end of May 2023.

Office / Program / Account	FY23 Budget	Expenses	Obligations (BPA's/PO's)	Funds Available	% Expended
4240 - Cermak Health Services of Cook County					
0 - DEFAULT (41195.4240.0) Total	-	1,611	-	(1,611)	No Budget
10155 - Administration (41195.4240.10155) Total	11,085,578	1,279,692	69,521	9,736,364	12%
10160 - Administration and Clerical (41195.4240.10160) Total	-	-	3,571	(3,571)	No Budget
13500 - Environmental Services (41195.4240.13500) Total	2,407,043	933,547	10,427	1,463,069	39%
13945 - Finance (41195.4240.13945) Total	265,349	130,808	-	134,541	49%
14915 - Human Resources (41195.4240.14915) Total	284,291	113,042	-	171,249	40%
15050 - Information Technology (41195.4240.15050) Total	185,839	101,251	-	84,588	54%
15435 - Laboratory Services (41195.4240.15435) Total	446,337	109,577	16,210	320,550	28%
15805 - Material Management (41195.4240.15805) Total	526,394	127,331	30,891	368,172	30%
15880 - Med/Surg - Administration (41195.4240.15880) Total	-	-	2,810	(2,810)	No Budget
15895 - Medical Administration (41195.4240.15895) Total	9,069,728	3,523,682	78,941	5,467,105	40%
16480 - Nursing - Administration (41195.4240.16480) Total	-	-	283	(283)	No Budget
17015 - Oral Health (41195.4240.17015) Total	2,068,375	738,679	-	1,329,697	36%
17170 - Patient Care Services (41195.4240.17170) Total	37,641,512	18,312,877	1,564,139	17,764,496	53%
17395 - PCS - Emergency Services (41195.4240.17395) Total	-	0	-	(0)	No Budget
17610 - Pharmacy (41195.4240.17610) Total	11,267,311	3,411,420	265,923	7,589,968	33%
18445 - Quality Assurance (41195.4240.18445) Total	730,282	329,365	-	400,917	45%
18485 - Radiology (41195.4240.18485) Total	653,067	325,380	-	327,687	50%
19650 - Storerooms (41195.4240.19650) Total	-	747	18	(765)	No Budget
29235 - 240 General Store Inventory (IV) (41195.4240.29235) Total	-	247,250	6,836	(254,087)	No Budget
16005 - Health Information Management (HIM) (41195.4240.16005) Total	327,509	136,285	-	191,223	42%
16125 - Mental Health Services (41195.4240.16125) Total	13,523,512	5,149,415	17,026	8,357,071	38%
20475 - Txbl GO Ser 2009B BABS Bond Fd (41195.4240.20475) Total	-	3,366	-	(3,366)	No Budget
29165 - General Store Inventory (IV) (41195.4240.29165) Total	589,186	54,694	80,786	453,706	23%
15485 - Law Administration (41195.4240.15485) Total	-	-	562	(562)	No Budget
Grand Total	91,071,312	35,030,021	2,147,945	53,893,346	41%



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Office / Program / Account	FY23 Budget	Expenses	Obligations (BPA's/PO's)	Funds Available	% Expended
4241 - Health Services - JTDC					
10155 - Administration (41197.4241.10155) Total	1,014,182	146,923	3,992	863,267	15%
16015 - Medical Services Administration (41197.4241.16015) Total	687,291	274,312	-	412,980	40%
17015 - Oral Health (41197.4241.17015) Total	305,195	132,999	-	172,196	44%
17170 - Patient Care Services (41197.4241.17170) Total	3,573,924	1,355,815	1,224	2,216,885	38%
19815 - Support Services Administration (41197.4241.19815) Total	-	-	356	(356)	No Budget
10755 - Behavioral Health (41197.4241.10755) Total	4,053,811	1,152,434	-	2,901,377	28%
Grand Total	9,634,403	3,062,483	5,572	6,566,349	32%

Staffing

CERMAK STAFFING / VACANCY and HR ACTIVITY STATUS

A Look into HR Recruitment

For Dashboard support, please contact Daniel Hughes - daniel.hughes@cookcountyhealth.org

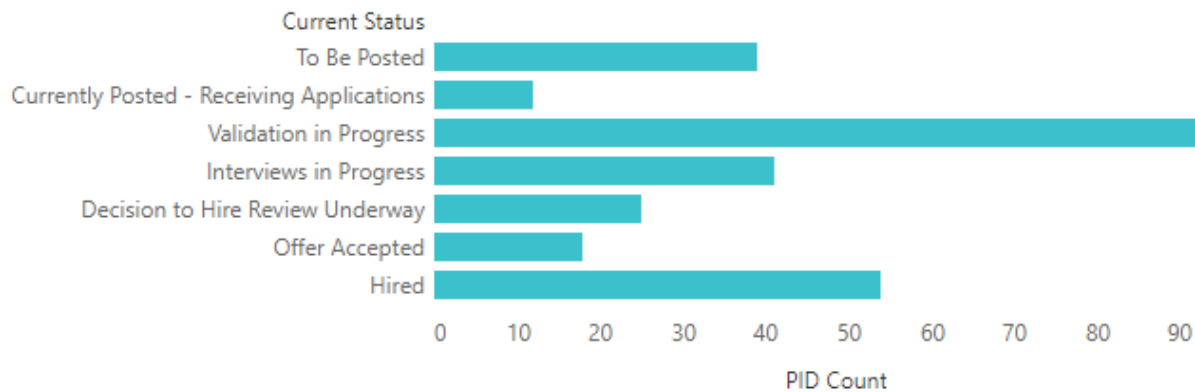


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Filters: Job Title (All) Job Code (All) Job Classifi... (All) Union (All) Department (All) Office # 4240 Business Unit (All) Hiring Mgr (All) Senior Lead... (All) PID (All)



What Stage are my Current Requisitions?



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CERMAK HEALTH SERVICES

JTDC STAFFING / VACANCY and HR ACTIVITY STATUS

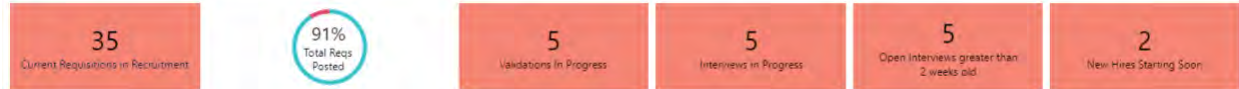
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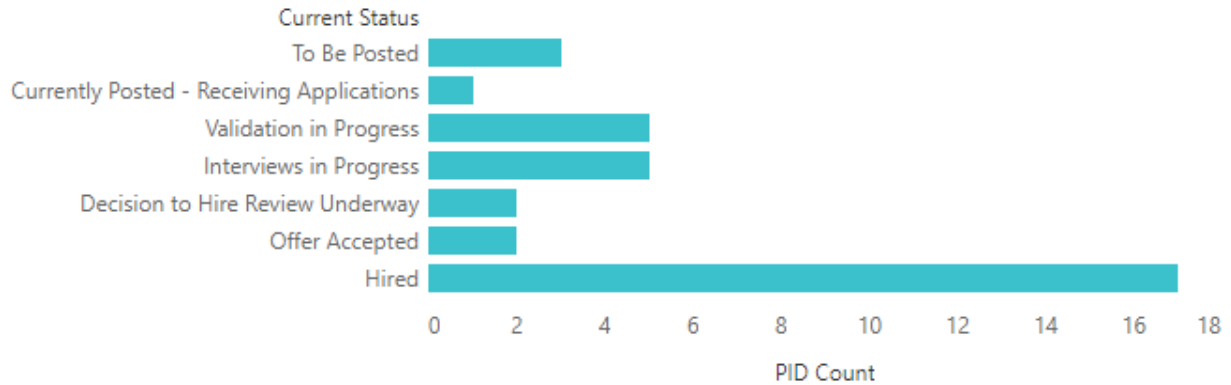


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Filters Job Title (All) Job Code (All) Job Classif... (All) Union (All) Department JTDC... Office # 4241 Business Unit (No...) Hiring Mgr (All) Senior Lead... (All) PID (All)



What Stage are my Current Requisitions?



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Procurement --

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

Number	Vendor Name	Description	Expires On
H16-72-052	LINDE GAS & EQUIPMENT DIV LINDE NORT	H16-72-052 - Service, Certification, Maintenance, and Repair of Medical Gas Systems	3/31/2023
77000125793	TANDYM GROUP LLC	77000125793 H22-25-171, RECRUIT TEMPORARY QUALIFIED MENTAL HEALTH PROFESSIONAL (QMHP)	6/30/2023
77000032606	SCHECK & SIRESS PROSTHETICS, INC	77000032606 - SERVICE, CUSTOM ORTHOTICS	7/31/2023
77000107994	MAXIM HEALTHCARE SERVICES INC	H22-25-052_ Services_Locum Tenens and AP Staffing	8/14/2023
77000054363	LINCOLN PARK DIALYSIS SERVICES INC	H19-25-046 - SERVICES, LINCOLN PARK DIALYSIS SERVICES INC DBA DAVITA INC	8/29/2023
77000102155	BLACKHAWK MEDICAL TRANSPORTATION,	H21-25-114 - SERVICE, AMBULANCE SERVICES WITH ADVANCED AND BASIC LIFE SUPPORT SERVICES	8/31/2023
77000081265	VAYA WORKFORCE SOLUTIONS, LLC	H20-25-024 - SERVICE, CONTRACT LABOR MANAGEMENT FOR NURSE REGISTRY	9/24/2023
77000064455	ODP BUSINESS SOLUTIONS LLC	H19-25-077 - Supplies and Services, Office Supplies	11/21/2023
H18-25-008	MAXIM HEALTHCARE SERVICES INC	H18-25-008 - Service, Temporary Staffing	11/30/2023
H18-25-114	KORE SAE, LLC	H18-25-114 - Service, Temporary Staffing	11/30/2023
77000091769	QUEST DIAGNOSTICS INC	H21-25-034_SERVICE, REFERENCE LABORATORY TESTING	12/31/2023
77000063015	ALLIED WASTE TRANSPORTATION, INC.	H19-25-103 - Service, Waste Removal Services Throughout CCH	12/31/2023



DIVISIONAL EXECUTIVE SUMMARY

COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

Lead Executive: LaMar Hasbrouck, MD, MPH, MBA, Chief Operating Officer
Reporting Period: May, 2023
Report Date: June 15, 2023

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- Not applicable



Health Equity, Community Health & Integration

- Equity Committee membership is finalized.
 - 100% - Membership has been identified that represents staff across the department. First meeting took place in May 2023.
 - The CCDPH Health Equity (HE) committee will advise on integration of health and racial equity into the department-wide systems, policies, and practices. The HE committee aims to center relationships and trust-building; work across units; and establish an iterative process for identifying learning opportunities, informing, and implementing actions, and sustaining equitable practices within CCDPH.
 - The initial charge of the Committee will be to support the CCDPH strategic planning process for 2023-2025 and advise on the integration of health and racial equity throughout the strategic plan. Upon completion of this task the committee will advance the purpose and assure full membership and participation.
- Meeting 1: Orient committee members to health equity.
 - 100% - Meeting 1 successfully completed. Some follow up needed to meet with individual members who could not make the first meeting.



Patient Experience

- Not applicable



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COOK COUNTY DEPARTMENT OF PUBLIC HEALTH



Growth Innovation & Transformation

- Gap assessment for our community/patient needs established
 - No change; need to develop new Key Result
 - 100% - We were able to implement our Cook County Health Atlas which incorporates health outcome data, social determinants of health data, and community related indices such as childhood vulnerability index, concentrated disadvantage, and social vulnerability index. We incorporated the hospitalization indicators in April.



Optimization, Systemization & Performance Improvement

- Development of unit-level plans/procedures for managers to monitor effectiveness and accountability of their remote staff.
 - No change
 - 75% - All unit directors have submitted their processes for supervising remote work and attendance logs from the time keeping system.



Workforce: Talent & Teams

- Create comprehensive onboarding plans and materials for new CCDPH staff.
 - 15% - UIC is working on the creation of learning materials and welcome videos.



Fiscal Resilience

- Quarterly CCDPH fiscal reports are submitted completely per required due date.
 - No change
 - 75% - CCDPH continues to work with Finance collaboratively to increase this number to the target of 100%.



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COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

Budget to Actual

Budget to Actual File: FY23 CCH Budget to Actual 06_05_2023.

Office & Account	FY23 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures	Funds	%	Actual
				(Expenses + Obligations)	Available	Expended	Expenses - % Expended
4895 - Department of Public Health							
Total	20,602,462	7,528,080	1,063,222	8,591,302	12,011,160	42%	37%
Grand Total	20,602,462	7,528,080	1,063,222	8,591,302	12,011,160	42%	37%

The Department of Public Health Division – Corporate is 42% expended against the approximately 51% year completed. The total for **Contractual Services** is at 69% expended, over the approximately 51% year completed. This is due to:

- 1) **Professional Services** in:
 - a) Administration having a \$647k Annual Budget vs \$626.5k in Total Act & Obligations (\$370.1k in Actual & \$256.4k in Obligations)
 - b) Communicable Diseases having a \$1.016 mil Annual Budget vs \$775.6k in Total Act & Obligations (\$111.4k in Actual and \$664.2k in Obligations)
- 2) **Medical Consultation Services** in TB Clinical Services having a \$921.5k Annual Budget vs \$591.8k in Total Act and Obligations (\$552.9 in actual & \$38.9k in Obligations)
- 3) **Communication Services** in Administration having a \$191.6k Annual Budget vs \$191.6k in Total Act & Obligations (\$191.6k in Actual)

CCDPH continues to be ahead of an even split across the year because of computer purchases related to the move to Bridgeview, contracts with vendors supporting implementation of an STI testing and prevention program, and unplanned expenses (e.g., vendor to support strategic planning process). Additionally, there are expenses that were paid by the corporate budget that will be reimbursed by grant funds. Please note that in most cases, these are encumbered expenses (open P.O.s) and not actual expenses paid.

Staffing

As of May 2023, CCDPH had 76 vacant positions. A total of 64 Request to Hires have been submitted, 16 of which are awaiting budget approval or to be posted/reposted, and several which are currently frozen. The remaining positions are at various points in the hiring process (see table below). CCDPH also has one direct appointment position in which the department conducted interviews. Two offers were made that were accepted with July start dates (Communications Manager and Regional Health Officer).



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COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

FY23 Metrics Snapshot, as of April 2023

RTHs Submitted	Budget Approved	Posted	Postings Closed	ARP Received	Referred for Interview	Interviews Completed	e-DTH submitted	Candidate Offers	Vacancies Filled
64	2	9	10	3	8	2	2	2	0

Procurement

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

Contract #	Vendor or Subgrantee Name	Expires On
H21-25-129	AgeOptions*	5/31/23
H21-25-140	Illinois Board of Trustees/UIC SPH*	5/31/23
H22-25-221	RTI**	12/31/23
H21-25-182	United Way of Metropolitan Chicago (UWMC)***	12/31/22

* These organizations are funded as part of the CDC Health Equity Grant. Contracts are being amended as part of the No Cost Extension under the CDC Health Equity Grant.

** There is a correction to the contract number for RTI. It is H22-25-221; H22-25-013 was written in prior reports. Amendment 2 that increased funds and extended the contract to 12/31/23 was executed in May 2023.

*** There is a correction to the expiration date for UWMC from 5/31/23 to 12/31/22. Amendment extending the contract to 5/31/24 was moving through the signatory process for execution in May.



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DIVISIONAL EXECUTIVE SUMMARY

HEALTH PLAN SERVICES

Lead Executive: Aaron Galeener, Chief Administrative Officer

Reporting Period: May 2023

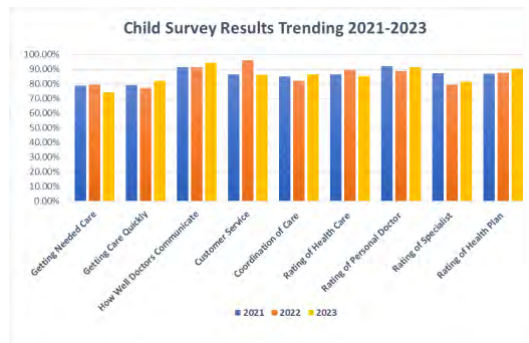
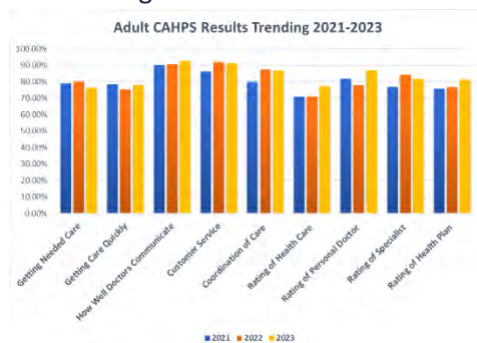
Report Date: June 23, 2023

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- CountyCare is accredited by the National Committee of Quality Assurance (NCQA). The Plan first became accredited in 2017, and is currently undergoing its second three-year reaccreditation.
 - **CountyCare is excited to announce that our documented evidence was submitted on June 6 and we are preparing for our two day onsite survey on July 24 and 25.**
 - The NCQA stars rating is based on CountyCare’s technical submission, Healthcare Effectiveness Data and Information Set (HEDIS), and Consumer Assessment of Healthcare Providers and Systems (CAHPS) scores.
 - NCQA plan ratings will be released in September 2023.
- **CountyCare has also completed a successful 2023 CAHPS submission.**
 - The CAHPS survey is completed by plans on an annual basis to gather feedback about members’ experience with their health plan and health care providers. The survey is anonymous, voluntary, and administered to a statistically significant number of members.



- For the adult and child populations, CountyCare observed a year over year increase in "Rating of Health Plan" between 2021 and 2023.



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- For both populations, CountyCare also experienced increases in “Rating of Personal Doctor,” “Getting Care Quickly,” and “How Well Doctors Communicate” from 2022 to 2023.
- Both children and adults reported a reduced rate in "Getting Needed Care." Improving access to care through the expansion of the network and telehealth services will continue be an area of focus over the next year.



Health Equity, Community Health & Integration

- **CountyCare was recently awarded by the National Association of Counties (NACo) for its Brighter Beginnings Program.**
 - [CountyCare’s Brighter Beginnings program is the Health Plan’s maternal and child health \(MCH\) program](#) uniquely designed to reach, educate, and support CountyCare’s MCH population through connections to community resources, a vast network of MCH providers, care management services, benefits and rewards, and access to actionable information.
 - Year to date through April, CountyCare has issued over 1,500 car seats, 400 sleep safe kits, and 74,300 diaper coupons.
 - CountyCare also offers care management to all pregnant members and will be offering medically tailored meals through its FoodCare program to members that are pregnant with diabetes or hypertension.



Patient Experience

- **Increasing access to Behavioral Health Services:**
 - To increase access to mental health and substance use disorder services, in April, CountyCare executed a value-based agreement with a clinically-integrated behavioral health network.
 - This behavioral health network will support CountyCare's effort to improve follow up after hospitalization and follow up after emergency department visit for behavioral health (HEDIS FUH and FUM measures).
 - Since contract execution, both teams have been working together to ensure a successful implementation and this new partner is on target to go-live with CountyCare on July 1.



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Growth Innovation & Transformation

- **Preparation for redetermination:** CountyCare has experienced significant growth due to the hold on Medicaid redeterminations and the continuation of 50% auto-assignment. In June, CountyCare’s membership increased to over 457,000 members enrolled in the plan.
- Medicaid continuous eligibility ended on April 1, 2023 and was de-coupled from the end of the Public Health Emergency (PHE). Healthcare and Family Services resumed Medicaid redetermination notifications in April. In early June, CountyCare learned that the first possible Medicaid terminations will be deferred one month and delayed to beginning in August of 2023.
- In May, CountyCare targeted the 13,606 members that are required to submit paperwork to complete their redetermination.

Month-Year	Estimated members that auto-renew	% of members that auto-renew	Estimated members that require renewal	Total members due for redetermination
Jun-23	14,513	52%	13,606	28,119

- CountyCare is executing a comprehensive member education and outreach strategy to prepare for the resumption of redetermination, including a communications campaign through text, email, website, social media, and community events.
- **The following activities were completed in May to notify members that require renewal:**

Communication channel	Results
Mail	<ul style="list-style-type: none"> • 7,388 postcards sent to head of case
Texts	<ul style="list-style-type: none"> • 21,984 sent to head of case
Paid redetermination ads on search engines and social media	<ul style="list-style-type: none"> • 9,739 total clicks on rede web page • 89,050 reached (# saw ad) • 826,800 total impressions (the number of times your ad is shown)



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Telephonic	<ul style="list-style-type: none">1,508 total calls to the rede hotline
E-Mail	<ul style="list-style-type: none">3,269 sent with a 31.2% open rate



Optimization, Systemization & Performance Improvement

- Health risk screening improvement:** Last June of 2022, CountyCare launched an initiative to increase its engagement rates, or rates of health risk screenings (HRS) within 60 days of member enrollment with the plan.
 - Since that time, CountyCare established a process to 1) send health risk screenings by mail, text, and online form, 2) increase its HRS incentive, and 3) add additional capacity to call members.
 - In April, CountyCare launched a new partnership with a vendor that is targeting members with no phone numbers and those that have an incomplete HRS as of the 31st day of enrollment with the plan.
 - These activities have resulted in a health risk screening rate of 59% in March, a significant increase from a year ago and exceeding its goal of 58%.



Workforce: Talent & Teams

- Staffing critical positions:** Health Plan Services continues to focus on hiring and effectively training team members to ensure the continued success of the plan.
- In May, CountyCare welcomed two new executive leaders to the plan:
 - Jai Mehta joined CountyCare as its Chief Financial Officer. Jai will be responsible for all financial and accounting oversight. This includes revenue cycle, financial reporting, operational reporting and planning for the financial needs of the Plan within the Cook County Health budget.
 - Robin Singh will serve as the CountyCare Chief Operating Officer and within this role, Dr. Singh will oversee new product line development, value-based care, and claims. He will also be taking leadership over CountyCare's network, provider data management, and provider relations.
- Training:**
 - In May, CountyCare held its third monthly a new hire training specific to the Health Plan Service division which includes a half day overview of the CountyCare Health Plan, managed care, and of each Health Plan department.



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CountyCare will continue to conduct these trainings monthly and will include all recently hired team members.

- In May, CountyCare also partnered with Connections for Abused Women and their Children (CAWC) to provide training on domestic violence to the CountyCare care management workforce.



Fiscal Resilience

- **Medical Cost Action Plans:** Opportunities for cost-savings will be a continued to be an area of focus for plan in 2023. Under its Medical Cost Action Plan structure, CountyCare executed \$10 million of estimated cost savings initiatives in the first quarter of the County fiscal year and achieved a County fiscal year-to-date margin of \$15.6 million. As of April:
 - CountyCare kicked off its implementation with its new pharmacy benefits manager, CVS Caremark, and is on track for a July 1, 2023 go-live. This transition will render approximately \$25 million in annual savings once complete.

Budget to Actual Through May 2023

Office & Account	FY23 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended	Actual Expenses - % Expended
4896 - Health Plan Services							
CONTRACTUAL SERVICE Total	2,611,214,125	1,694,806,401	54,673,168	1,749,479,570	861,734,555	67%	65%
OPERATIONS & MAINTENANCE Total	4,563	1,814	-	1,814	2,749	40%	40%
PERSONAL SERVICES Total	29,717,438	12,546,324	-	12,546,324	17,171,113	42%	42%
4896 - Health Plan Services Total	2,640,936,126	1,707,354,539	54,673,168	1,762,027,707	878,908,418	67%	65%
Grand Total	2,640,936,126	1,707,354,539	54,673,168	1,762,027,707	878,908,418	67%	65%

CountyCare's membership growth to over 455,000 members is significantly higher than the monthly average budgeted projection of 391,000. The net impact of revenue and expenses remains balanced and within budget.



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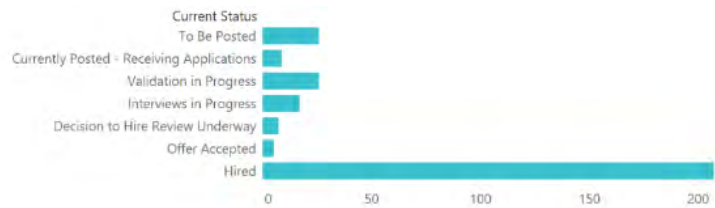
DIVISIONAL EXECUTIVE SUMMARY

HEALTH PLAN SERVICES

Staffing



Health Plan Services is excited to share that out of its 297 positions in recruitment, 207 have been hired (70%) and 4 new hires to are on track to start in the coming weeks. CountyCare is continuing to prioritize staff recruitment (including partnering with HR to host hiring fairs) to ensure the continued success of the plan.



Procurement

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

Service	Vendor	Description	Type of contract	Contract end date
Disability application services	Centauri Health Solutions	Support members with applying for Social Security Disability	Extension	06/30/23
Non-emergency medical transportation	First Transit	Non-emergency medical transportation to members	Extension	08/31/23
Dental and Vision	Guardian Avesis	Dental and vision benefit management services	Extension	09/30/23



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DIVISIONAL EXECUTIVE SUMMARY

STROGER OPERATIONS

Lead Executive: Donnica Austin-Cathey, Chief Hospital Executive
Reporting Period: May, 2023
Report Date: June 24, 2023

Strategic Initiatives • OKR Highlights • Status Updates



Patient Safety, Clinical Excellence & Quality

- Sepsis Rates are improving, rolling 12 month 41.21% against the goal of 35%.
- The pharmacy has been working with Vizient (GPO vendor) and directly with the manufacturers to manage drug shortages in order to maintain patient care.
- The physical therapy manager worked with nursing education to include information on appropriate choice of slings for lift equipment after a near-miss eMers event and reviewed the department's compliance with the QA pain management.
- Medical Education requested to transition the collection of Arterial Blood Gases under Respiratory's scope of practice. The requested go-live is on or before July 1, 2023, prior to the new Resident physicians joining CCH.
- The Respiratory Division in an effort to seek best practice, is creating intentional overlap between shifts to allow for RT:RT report on patient, improving safety and quality outcomes.
- Laboratory Services implemented the use of Pathogen Reduced (PR) Platelets. The new FDA approved treatment process reduces the rate of potential fatal transfusion reactions due to bacterial contamination and reduces the transmission of any blood borne virus or parasites that donors are not routinely screened for.
- Environmental Services has achieved a HCAHPS Score of 62 for the month of May against the goal of 59.



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STROGER OPERATIONS



Health Equity, Community Health & Integration

- The Pharmacy Division has been working closely with ACHN on medication compliance and implementation of the Discharge Medication program.
- Rehabilitation Services will be implementing Community Diabetic Education Programs at ACHN Locations. The first session is tentatively scheduled for September 28th, 2023 at 2:00 pm.
- The Respiratory Therapy Division has implemented chest physiotherapy (vest therapy) at Provident, matching services offered at Stroger.
- There is continued work towards implementation of rapid Strep A test in the Emergency Department to support Antimicrobial Stewardship goals Go-live anticipated by mid-July. Expected to expand testing to ACHN clinics after the ED.



Patient Experience

- The Pharmacy Division has implemented a medication synchronization program in order to reduce trips to the pharmacy to pick up medication.
- Nursing continues to hardwire leadership and staff rounding with a purpose, also auditing commit to sit and more classes regarding onstage and respect.
- We have increased appointment slots for educational classes in Rehab to improve access to outpatient services.



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STROGER OPERATIONS



Growth Innovation & Transformation

- Nursing leadership is currently working with the Burn Coordinator on the items needed for burn certification at Stroger.
- To provide accessible and accurate employee files, Respiratory Services has implemented virtual employee files. The original copies will be maintained in one source, but electronically available to all respiratory leaders, system wide, to virtually access files needed; ideal for survey readiness and managerial needs.
- Currently evaluating new molecular virology testing platforms to replace current system. This will create an opportunity to bring additional tests on board and provide more hands off efficiency for the technologist.



Optimization, Systemization & Performance Improvement

- Stroger Inpatient and Emergency Department have been working on handoff of patients, in order to avoid delays in transferring patients to the inpatient units.
- Effective, May 16th, 2023, Respiratory Therapy's charting is in i-View, the preferred flowsheet within Cerner, charting vital patient information with a variety of practitioners. Transition included a redesign of all charting fields to be compliance with standards.
- Respiratory Therapy has created electronic scheduling available remotely to all department members. Accessibility to electronic scheduling allows staff flexibility to request changes in their schedule and for leadership have an accurate projection of each shift.



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STROGER OPERATIONS



Workforce: Talent & Teams

- One Clerk V is in onboarding process, awaiting interview packet for Clerk V Bilingual position. We have also continued onboarding activities for two (2) Physical Therapists and one (1) Occupational Therapist staff member.
- Nursing Department has selected a Director of Patient Flow and collaborating with Human Resources to fill five (5) operational supervisor positions on 3-11pm and 11-7 am.
- The Laboratory Department welcomed three (3) new leaders in Histology, Point of Care and Molecular Supervisor.
- Pharmacy vacancies continue to be challenging, resulting in a continuous need for use of agency support.



Fiscal Resilience

- The Respiratory Therapy Chargemaster went live May 16, 2023. Based on reports, revenue is being captured successfully.
- The Pharmacy Department is partnering with the Managed Care department to secure additional third party plan contracts.
- Laboratory Services has participated in an RFP Process for Blood Supply and Histology Services.



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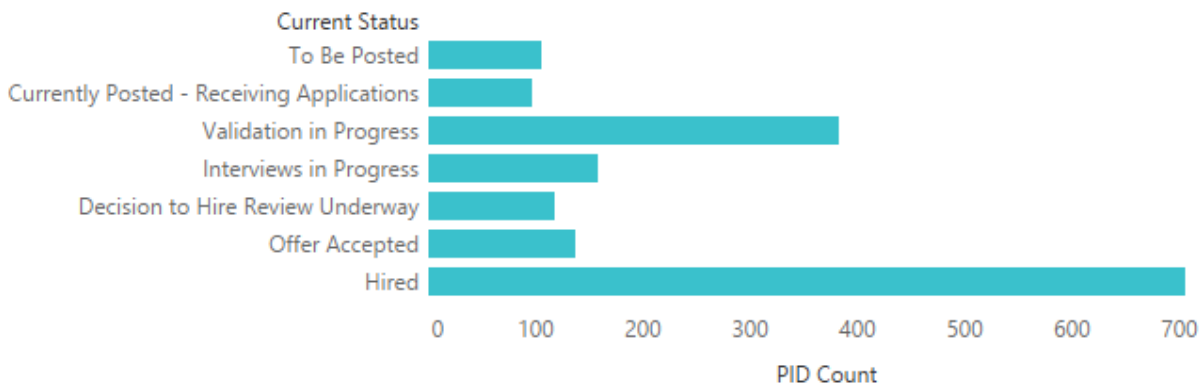
STROGER OPERATIONS

Budget to Actual – Stroger Is slightly below budget on year to date expenditures.

Office / Program / Account	FY23 Budget	Expenses	Obligations (BPA's/PO's)	Expenditures (Expenses + Obligations)	Funds Available	% Expended
4897 - John H. Stroger Jr. Hospital of Cook County						
Grand Total	851,504,938	379,544,979	33,770,086	413,315,065	438,189,873	49%

Staffing

What Stage are my Current Requisitions?



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