Cook County Health & Hospitals System: A Year in Review
June 2014–June 2015

The Cook County Health & Hospitals System is in the midst of a transformative journey: continuing on with its historical mission of providing care to those most in need while adapting to an expanded role as a steward of population health and a Medicaid managed care health plan. It is with this lens that CCHHS is taking an innovative and integrated approach to the fulfillment of our mission by aligning our work as a provider of care, both in traditional and correctional settings, a public health authority and a health plan.

The system has achieved significant success in numerous arenas during the last 12 months thanks to the dedication and hard work of countless CCHHS clinicians, employees and partners and the aligned support of the CCHHS Board of Directors, Cook County Board President Toni Preckwinkle, Cook County commissioners, and legislators. This June CCHHS also recognized the one year anniversary of Dr. Jay Shannon’s tenure as CEO. This brief provides a summary of achievements CCHHS attained between June 2014 and June 2015.

Historical Role as a Provider of Care

For more than 180 years, Cook County has provided a safety net for health care in the greater Chicago region, caring for our most vulnerable populations, including the impoverished, the uninsured and underinsured. Over the past year, CCHHS has taken on numerous initiatives to support our mission to provide quality care for all and protect the health of our communities.

CCHHS by the Numbers

- 217,953 unique patients
- 151,831 emergency department visits
- 14,359 surgeries
- 1.7 million outpatient prescriptions filled
- 226,770 diagnostic scans
- 5 million lab tests
- 227,953 emergency department visits
- 22,796 inpatient admissions
- 5 million lab tests
- 6.5 million inpatient medication doses administered
- 742,348 outpatient visit registrations
- 14,359 surgeries

Clinical Care:

- CCHHS is transforming our approach to primary care for patients at the system’s 16 primary care clinics. This new focus includes working with patients to assign them to a health care site that serves as their “medical home” to improve care continuity, the patient-provider relationship and patients’ health status. The system’s efforts were recognized this spring when we received Primary Care Medical Home certification from The Joint Commission.
- Staff continue to strengthen the stroke program at Stroger Hospital through multidisciplinary partnerships, education and increased participation in clinical stroke trials. Recently reaccredited by The Joint Commission as an advanced primary stroke center, the program treats more than 450 stroke patients each year.
- CCHHS treated more than 1,700 people newly-diagnosed with cancer. Stage for stage, people who are treated for cancer at CCHHS do as well as those who are treated at some of the best cancer programs in the country. The health system received accreditation by the American College of Surgeons for its Academic Comprehensive Cancer Care Program,
an accreditation it has earned consistently for the past 15 years. Stroger Hospital receives millions of dollars each year from the National Cancer Institute and other organizations to fund cancer screening, treatments, research and more. Stroger Hospital also installed two new linear accelerators to deliver precise and advanced radiation treatments to cancer patients with less damage to surrounding tissue. These machines put our cancer treatment capabilities on par with other academic medical facilities and allow the system to safely treat a higher volume of patients.

- The cardiac catheterization lab and interventional radiology suites are undergoing expansions to improve patient experience and increase capacity in these high-volume areas. These renovations are part of a $30 million capital spending commitment that also includes the purchase of new hospital beds, wheelchairs and stretchers.
- Stroger Hospital, which performs nearly 7,000 MRIs each year, installed a new advanced MRI machine to provide leading-edge diagnostics.
- Comprehensive ophthalmology services were established at Provident Hospital, with clinics five days a week that offer various subspecialties and are staffed by 3 newly-hired ophthalmologists. The department sees upwards of 200 patients each week. Ophthalmology services are also being expanded at Oak Forest Health Center.
- Patients and clinical operations were fully moved into the Residential Treatment Unit at the Cook County Jail. With 276,450 square feet of space and 979 beds, the RTU is a comprehensive facility where detainees with mental health and substance use disorders receive care.
- With more than 5,500 visits annually, the Cook County Trauma and Burn Unit continues to provide comprehensive care to treat our most critically injured patients. In addition to caring for patients’ physical wounds, the unit’s violence prevention program strives to address the mental, emotional and spiritual injuries of patients who have experienced violence. The unit also earned National Burn Center Verification from American Burn Association.
- CCHHS conducted more than 75,000 intake screenings as the provider of health care to detainees at the Cook County Jail.
- The Centers for Disease Control and Prevention (CDC) announced it is launching a national initiative to reduce deadly antibiotic resistant “superbug” infections based on a successful pilot program created by CCHHS and Rush University Medical Center that reduced the spread of Carbapenem-resistant Enterobacteriaceae (CRE) infections.
- The Ruth M. Rothstein CORE Center had more than 44,400 visits, caring for individuals with HIV/AIDS and other infectious diseases, providing a wide array of primary and specialty care, education and social support services.

**Finance:**

- For the first time in modern history, CCHHS increased its net position by more than $20 million in fiscal year 2014.
- Today, more than 65 percent of our patients have some form of insurance coverage - a milestone for the health system that has traditionally served as the safety net for the uninsured.
- CCHHS’ unreimbursed care costs have decreased from more than $500 million in 2013 to $342 million in 2014 as a result of more patients becoming insured.
Human Resources:

- The HR department filled more than 1,100 vacancies in the last year, including 102 new nurses in the first six months of 2015 alone.
- The fourth cohort of the Leadership Development Program graduated. Program participants learn strategies and skills to improve the patient experience, better manage their teams and identify opportunities to implement these approaches into everyday practice in a capstone project. Thirty participants have graduated from the program in the last year.
- New employee orientation has been centralized to ensure that all new employees are receiving a comprehensive and uniform orientation to the system revamped with a new focus on improving the patient experience as well as an opportunity to meet new employees from other facilities.

Medical Education:

- Supporting 21 different medical residency and fellowship programs, CCHHS trained more than 1,300 residents and fellows, 475 allied health students and 545 additional physicians in training that rotated through the system to enhance their learning experience.
- The system’s trauma care training expanded to include not only enlisted members of the Navy, but also the Special Forces. Through this program service members receive hands-on training in treating traumatic wounds before they are deployed to potential combat zones.

Process Improvement:

- A new 14-bed 4 Flex Unit was opened at Stroger Hospital to care for admitted patients whose stays are anticipated to be less than 72 hours for treatment of a common condition using evidenced-based interventions. Additionally, because the unit is for patients with more routine ailments, clinical staff have honed their patient education skills to ensure maximum compliance with medications and physicians’ recommendations. This unit provides a more appropriate and healing setting for short stay patients and improves flow throughout departments.
- The Stroger Emergency Department underwent an extensive throughput improvement process which has resulted in ED treatment times decreasing by 35 percent and the number of patients leaving without being seen has dropped by 75 percent.
- With momentum from the success in the ED, the system has launched a process improvement initiative for operating rooms.
- As part of its Primary Care Medical Home accreditation, the system has enhanced primary care processes in its outpatient clinics, improving “ownership” of patients by the medical homes, anticipatory visit planning and responsiveness in between visits.
- CCHHS set robust goals, 90th percentile, for core measures of care quality for its hospitals. The core measures address heart attack, congestive heart failure and pneumonia. Stroger Hospital recently met those measures, achieving top decile performance in core measure areas.

Public Health:

- The Cook County Department of Public Health (CCDPH) was awarded a $2.4 million Partnerships to Improve Community Health grant to expand implementation of evidence-based interventions
that reduce the burden of chronic disease and health inequity in suburban Cook County by encouraging healthy eating, exercise, use of public land and smoke-free living.

- CCDPH, one of the few departments in Illinois certified by the national Public Health Accreditation Board, led an investigation into a local measles outbreak. The outbreak included 14 confirmed cases in suburban Cook County and one in Chicago. CCDPH did extensive contact tracing, identified 180 exposed individuals and actively monitored 66, though none developed the disease.
- More than 94 percent of all CCHHS staff, complied with the system’s influenza vaccination policy, mitigating the spread of the virus during the 2014-15 flu season and protecting the health of our patients, staff and community.
- In response to the international Ebola outbreak, CCHHS launched a system-wide education and preparedness campaign to ensure our ability to appropriately identify and treat an individual with Ebola. The campaign included numerous drills, coordination with countless local, state and federal partners and personal protective equipment training for over 500 employees. CCDPH was responsible for the long-term monitoring of 34 travelers from the affected countries.
- The services provided by courthouse-based public health clinics were transferred to ambulatory clinics within the CCHHS system to better connect individuals who have or are at-risk for chronic or infectious diseases with a primary medical home.

Recognition of a High Quality, Safe System of Care:

- Ambulatory and Community Health Network, Ambulatory Care Certification, The Joint Commission
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- Provident Hospital, Gold Seal of Approval for Hospital Accreditation, The Joint Commission
- Stroger Hospital, Advanced Certification for Primary Stroke Centers, The Joint Commission and The American Heart Association/ American Stroke Association
- Stroger Hospital, Academic Comprehensive Cancer Care Program Accreditation, American College of Surgeons
- Stroger Hospital, National Burn Center Verification, American Burn Association
- Stroger Hospital, Level III NICU and Administrative Perinatal Network Hospital designation, Illinois Department of Public Health
- Stroger Hospital, Dialysis Unit certification, Illinois Department of Public Health

Modern Role as an Integrated Health System & Provider of Choice

CCHHS is continuing the transformation that originated with the advent of federal health care reform and the creation of our own Medicaid managed care health plan, CountyCare. Now caring for more insured patients than ever before, many of whom are covered through CountyCare, CCHHS must become a provider of choice for insured patients, not a provider of last resort, so we may continue to serve our historic mission. This will require a renewed focus on the patient experience, accessibility and amenities- key elements that draw people to choose a health care provider.
CountyCare: Celebrating 1 year as a Medicaid managed care health plan

- July 2015 marks CountyCare’s one year anniversary as a County Managed Care Community Network (MCCN). In July 2014 CountyCare transitioned from an 1115 Waiver demonstration project to a County MCCN, establishing the plan as a permanent option for individuals in Cook County enrolling in Medicaid and allowing the plan to expand its reach to include traditional Medicaid populations.

- As one of the largest managed care plans in the greater Chicago region, CountyCare now serves nearly 180,000 members, up from 99,000 members in July 2014. Plan membership has exceeded the budgeted goal of 155,000 members for Fiscal Year 2015.

- CountyCare is one of two provider owned and operated MCCNs in the state. This means that the plan has a unique focus on supporting health care providers to foster the creation of patient-provider relationships and improved health outcomes.

- CountyCare partnered with Medical Home Network Accountable Care Organization (MHN ACO) to improve member care coordination, access to care and reduce health system fragmentation. As part of the plan’s association with MHN ACO, CountyCare offers participating providers historical and real-time health information exchange so they can effectively monitor the health status of their patients and the quality of the care they are receiving across the spectrum.

- La Rabida Care Coordination Entity was selected by CountyCare to offer provider-focused care coordination services to children with special needs and their families.

- In partnership with Treatment Alternatives for Safer Communities (TASC), CCHHS has helped more than 12,000 detainees at the Cook County Jail enroll in Medicaid; more than 4,000 of those individuals enrolled in CountyCare.

- CCHHS enhanced its collaboration with TASC to link individuals being released from the Cook County Jail with vital services such as transportation, medical and behavioral health care and more.

- CountyCare established an expanded relationship with Community Counseling Centers of Chicago (C4) to increase access to behavioral health services for the plan’s Family Health Plan and Seniors and Persons with Disabilities populations. This agreement stabilized C4 to remain operational and continue to serve its current clients (many of whom would have turned to CCHHS if services were interrupted), as well as CountyCare members.

- CountyCare and CCHHS are working to help educate Medicaid enrollees about the redetermination process to ensure continuity of their coverage. CountyCare has seen a sharp decrease in the number of member Medicaid cancellations after sending redetermination reminders within state guidelines to members at risk of losing coverage.

CountyCare Members’ Voices

- “It’s a privilege, an honor, to receive it.”- Cynthia
- “This card saved my life. I’ve been clean 10 months today.”- Eugene
Leadership:

- Continuing in its transformation to an independently governed integrated health system, the CCHHS Board of Directors was strengthened by the addition of three new members, enhancing the leadership and guidance provided by the board to system executives.
- At the urging of the CCHHS Board, system leadership adopted a metrics-driven reporting system that cascades from all committees to the full board as well as the Cook County Board of Commissioners.
- CCHHS appointed new Chairs to lead the Departments of Medicine, Family Medicine and Correctional Health as well as an Associate Medical Director to lead the system’s ambulatory primary care and a Lead Physician for Cicero Health Center. A number of executive leaders also joined the team to help modernize CCHHS into a fully-integrated system.
- U.S. Senator Dick Durbin introduced a bill to reinstate county and municipal jails into the National Health Service Corps loan repayment program. If passed, the legislation will improve CCHHS’ ability to recruit health care providers to Cermak Health Services. CCHHS is thankful for Senator Durbin and Cook County Board President Toni Preckwinkle for their leadership on this issue.
- The system collaborated with its many advocacy partners, including the National Association of Counties, the American Hospital Association, America’s Essential Hospitals, the Illinois Hospital Association and the Metropolitan Chicago Healthcare Council to address policies and initiatives that have a significant impact on CCHHS’ mission and operations.

Patient Experience:

- CCHHS kicked-off a comprehensive patient experience improvement strategy to position CCHHS as a preferred provider for high-quality, respectful and person-centered care.
- A new Patient Support Center was created to coordinate all incoming inquiries to the system, including appointment requests and referrals. The support center fields an average 1,300 calls each day in the caller’s preferred language. The center also added nursing support to provide real-time advice to patients calling with clinical questions and expanded center hours from 4:00 p.m. to 7:00 p.m.
- Our ambulatory clinics established hours on Saturdays to meet the needs of patients who often find it challenging to see their physician during the work week. To date, there have been more than 7,300 Saturday clinical encounters in our community health centers.
- Working closely with the Cook County Department of Capital Planning and Policy, CCHHS has made great progress with our central campus redevelopment project. A group of finalists has been selected to propose plans for the development that will include new outpatient clinical space replacing Fantus clinic, which was originally built in 1959. The new plan also includes administrative space and solutions to address the need for additional patient parking.

Looking Forward

In keeping with both our historical and modern roles, CCHHS intends to develop and implement shared strategies across our clinical care sites, correctional and public health services and our Medicaid managed care health plan to drive improved population health for the whole of Cook County. The health system must not transform independently, but in concert with the populations we serve. To that end, CCHHS will continue to assess the services we provide, including where, when, and how we provide them to ensure that our operations are best aligned with the needs of our patients. The ongoing transformation of CCHHS will ensure the health system can continue to serve and protect the health of our communities and all individuals in need as we have for more than 180 years.