

Minutes of the Meeting of the Quality and Patient Safety Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, February 16, 2023 at the hour of 10:30 A.M. This meeting was held by remote means only, due to the determination that a public health emergency exists.

I. Attendance/Call to Order

Chair Kim called the meeting to order.

Present: Chair Karen E. Kim, MD, MS and Directors Raul Garza and Otis L. Story, Sr. (3)
Directors Joseph M. Harrington; Tanya R. Sorrell, PhD, PMHNP-BC; and Mia Webster Cross, MSN, RN

Absent: None (0)

Additional attendees and/or presenters were:

Abayome Akintorin, MD – John H. Stroger, Jr.
Hospital of Cook County
Michael Alebich, DO - Attending Physician,
Division of Hospital Medicine
Leathecia Arnold – Director of Health
Information Management
Linh Dang – Chief Experience Officer
Leslie Frain – Associate Chief Quality Officer
Mark Loafman, MD – Chair, Department of
Family and Community Medicine
Jeff McCutchan - General Counsel

Erik Mikaitis, MD – Chief Quality Officer
Iliana Mora –Chief Administrative Officer,
Ambulatory Services
Israel Rocha, Jr. – Chief Executive Officer
Deborah Santana – Secretary to the Board
Raji Thomas – Director of Patient Safety
Craig Williams - Interim Chief Administrative
Officer, Operations and Development

The next regular meeting of the Quality and Patient Safety Committee is scheduled for Thursday, March 23, 2023 at 10:30 A.M.

II. Public Speaker Testimony

The following individual provided virtual public testimony:

1) Dawn Cole – family member of patient

Following the presentation of testimony, the Committee requested that the administration provide a follow up report on this particular case involving patient experience. Linh Dang, Chief Experience Officer, stated that she will reach out to Ms. Cole and provide a follow-up report; Craig Williams, Interim Chief Administrative Officer, Operations and Development, will provide a follow-up report on the portion of the comments involving Environmental Services.

III. Report on Quality and Patient Safety Matters

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

Dr. Erik Mikaitis, Chief Quality Officer, provided an overview of the HRO Dashboard. The Committee reviewed and discussed the information.

III. Report on Quality and Patient Safety Matters (continued)

B. Regulatory and Accreditation Updates (Attachment #2)

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

Director Story requested information on the most recent mock survey. Dr. Mikaitis responded that this information will be provided within the next two (2) weeks.

C. Update from HRO Clinical Documentation Workgroup (Attachment #3)

Dr. Michael Alebich, Attending Physician in the Division of Hospital Medicine, provided an overview of the Update from the HRO Clinical Documentation Workgroup. The Committee reviewed and discussed the information.

D. Update on CCH Specialty – Access, Wait Time and Referrals in Review (Attachment #4)

Iliana Mora, Chief Administrative Officer, Ambulatory Services, provided an overview of her report. The Committee reviewed and discussed the information.

IV. Action Items

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

None were presented for the Committee's consideration.

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

- i. Receive report from EMS President
 - Approve Stroger Hospital Medical Staff Appointments/Reappointments/Changes (Attachment #5)
- ii. Receive report from MEC President
 - Approve Provident Hospital Medical Staff Appointments/ Reappointments/Changes (Attachment #5)

Before the Committee received the EMS and MEC reports from Drs. Akintorin and Loafman, Chair Kim provided an update to the Committee regarding a recent meeting of the Joint Conference Committee on January 18, 2023. Among other duties, the JCC provides a liaison between the Board, Hospital Administration and Medical staff; thus providing a forum for discussion of issues that arise of interest to all parties.

Topics discussed at the January meeting included Non-Union Physician Compensation and Research/Clinical Trials.

EMS noted that the compensation discrepancy between union and non-union physicians is making it difficult to recruit quality candidates for Department and Division Chairs. It was recommended that the CCH Administration provide changes in compensation to non-union Physician Leaders to mirror the annual pay increases and incentives given to physicians who are members of the union. It was noted that the CEO is currently finishing up policies, working with the Administration and individually with department chairs to include a 3-tier plan with an end goal of re-evaluating market salaries by dollar amount.

With regard to the subject of research/clinical trials, the EMS expressed concerns that the clinical trial pause might negatively impact the ability to retain talented young physicians and that the organization was missing out on the opportunity to enroll our patients in much needed studies. It was recommended that the administration take every effort to restart new clinical trials as soon as possible.

A new JCC meeting to include follow up from this meeting is anticipated to be held in April 2023.

Dr. Abayomi Akintorin, President of the EMS of John H. Stroger, Jr. Hospital of Cook County, presented the proposed Stroger Hospital medical staff action items for the Committee's consideration. Dr. Mark Loafman, Chair of the Department of Family and Community Medicine, presented the proposed Provident Hospital Medical Staff Appointments/Reappointments/Changes for the Committee's consideration on behalf of Dr. Marlon Kirby, President of the Medical Executive Committee of Provident Hospital.

C. Minutes of the Quality and Patient Safety Committee Meeting, December 16, 2022

D. Minutes of the Quality and Patient Safety Committee Meeting, January 19, 2023

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

E. Any items listed under Sections IV and V

Director Garza, seconded by Chair Kim, moved the following:

- Approve Item IV(B) Stroger Hospital medical staff appointments, reappointments and changes;
- Approve Item IV(B) Provident Hospital medical staff appointments, reappointments and changes
- Accept Item IV(C) December 16, 2022 Quality and Patient Safety Committee Meeting Minutes; and
- Accept Item IV(D) January 19, 2023 Quality and Patient Safety Committee Meeting Minutes.

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

Yeas: Chair Kim and Directors Garza and Story (3)

Nays: None (0)

Absent: None (0)

THE MOTION CARRIED UNANIMOUSLY.

V. Closed Meeting Items

- A. Stroger Hospital and Provident Hospital Medical Staff Appointments / Re-appointments / Changes**
- B. Claims, Litigation and Quality and Patient Safety Matters**
- C. Matters protected under the federal Patient Safety and Quality Improvement Act of 2005 and the Health Insurance Portability and Accountability Act of 1996**
- D. Quarterly Patient Safety Report**

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

On the motion to recess the open meeting and convene into a closed meeting, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chair Kim and Directors Garza and Story (3)

Nays: None (0)

Absent: None (0)

THE MOTION CARRIED UNANIMOUSLY and the Committee convened into a closed meeting.

Chair Kim declared that the closed meeting was adjourned. The Committee reconvened into the open meeting.

VI. Adjourn

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

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

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Karen E. Kim, MD, MS, Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Follow-up/Requests:

Follow-up: Following the presentation of testimony, the Committee requested that the administration provide a follow up report on this particular case involving patient experience. Linh Dang, Chief Experience Officer, stated that she will reach out to Ms. Cole and provide a follow-up report; Craig Williams, Interim Chief Administrative Officer, Operations and Development, will provide a follow-up report on the portion of the comments involving Environmental Services. Page 1

Request: Director Story requested information on the most recent mock survey. Dr. Mikaitis responded that this information will be provided within the next two (2) weeks. Page 2

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ATTACHMENT #1

COOK COUNTY
HEALTH



HRO Dashboard

Quality and Patient Safety Committee

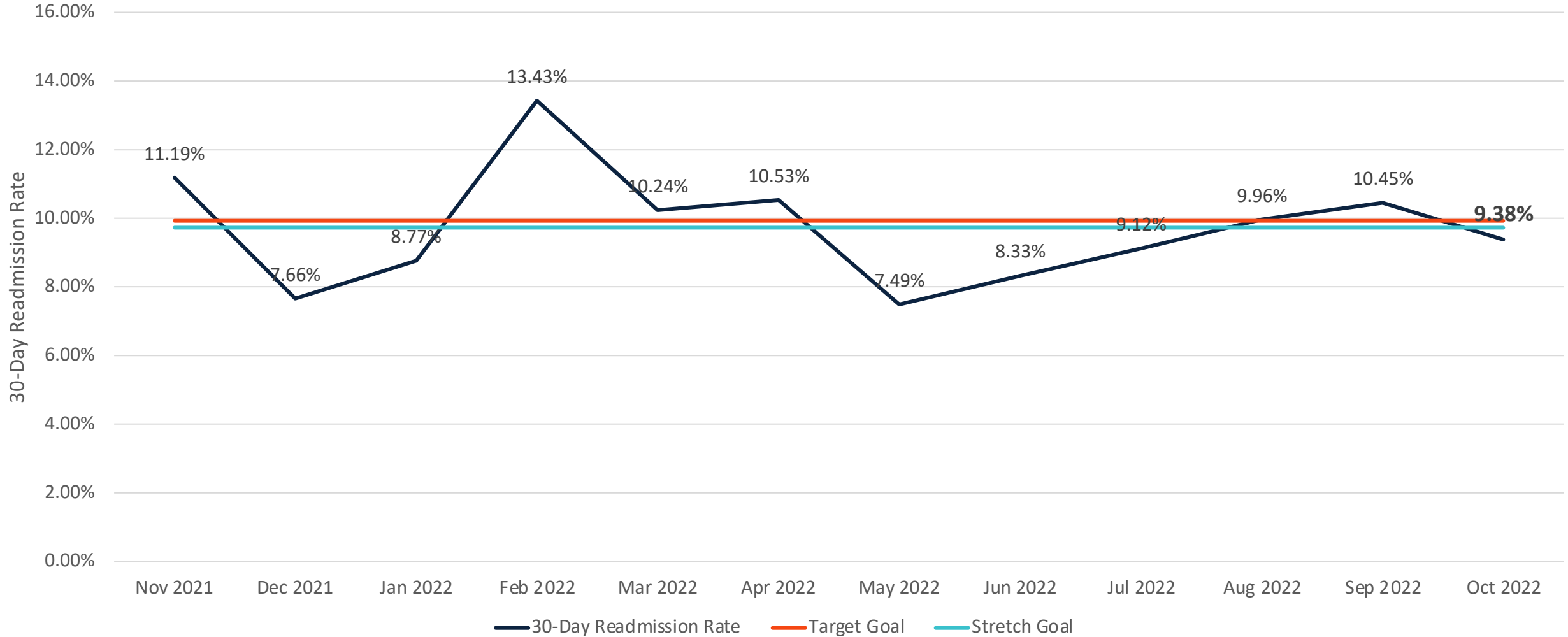
February 2023



COOK COUNTY
HEALTH

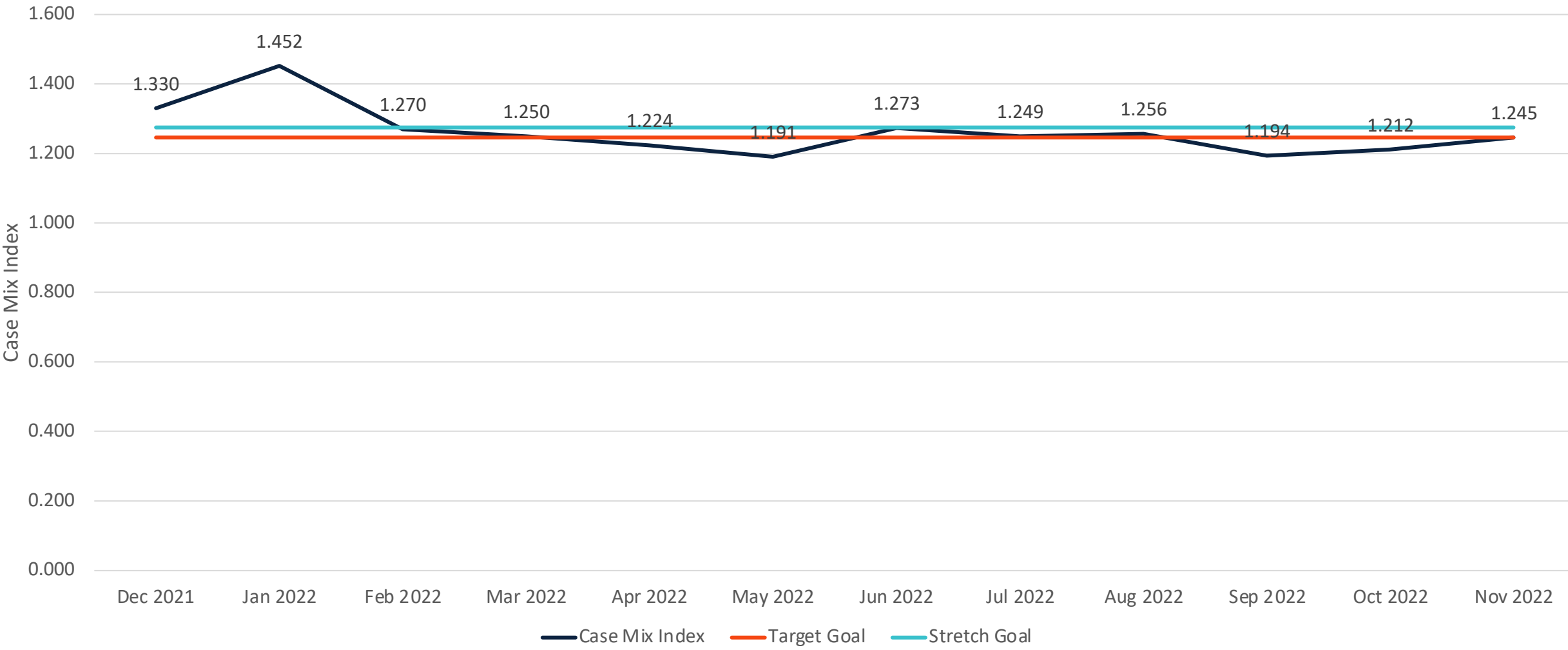
30-Day Readmission Rate (Stroger Hospital)

HRO Domain: Readmissions



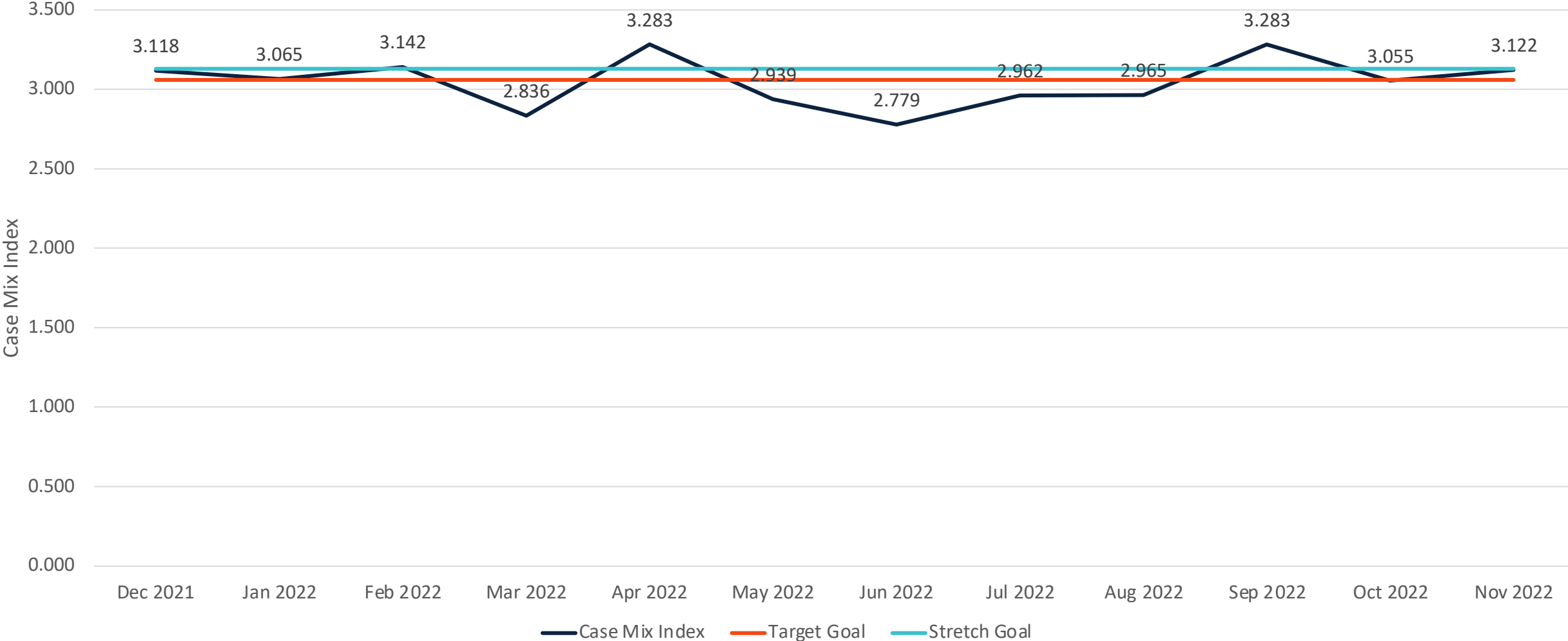
Case Mix Index, Medical Cases (Stroger Hospital)

HRO Domain: Clinical Documentation



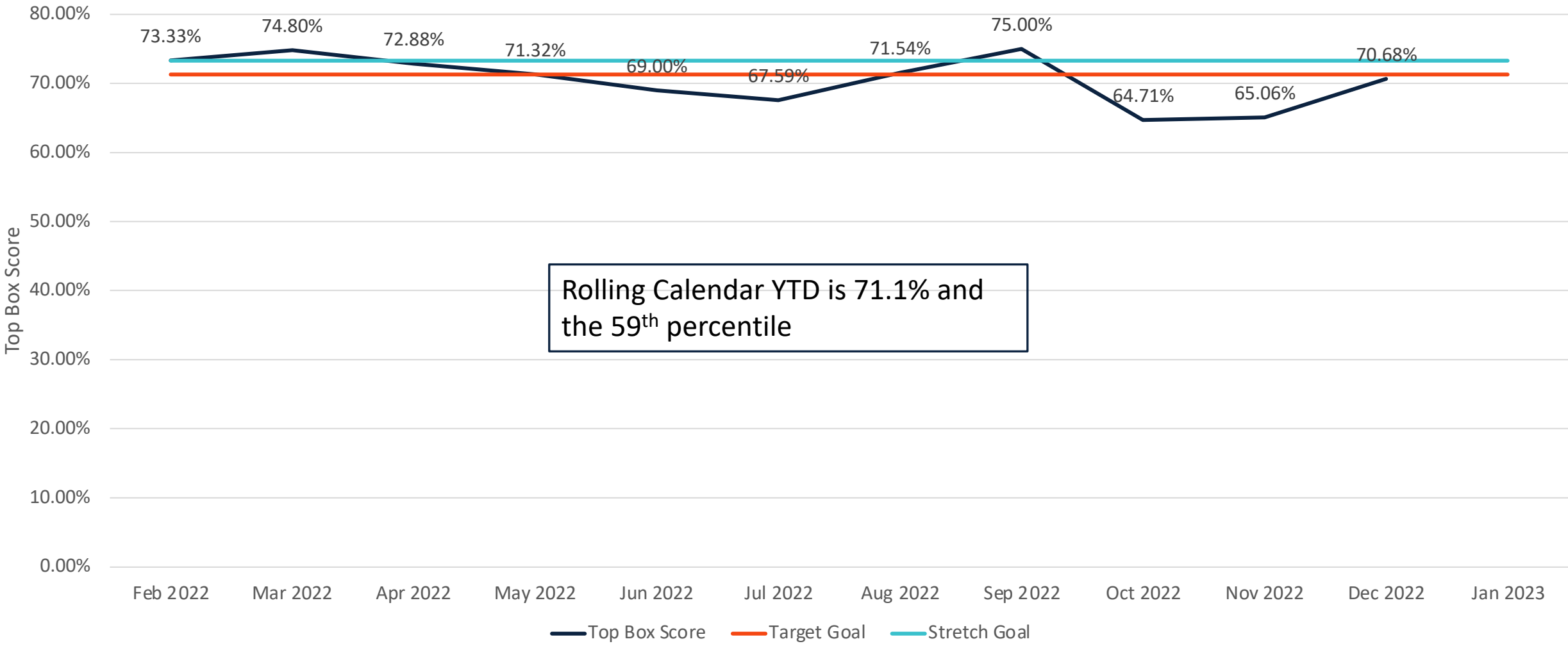
Case Mix Index, Surgical Cases (Stroger Hospital)

HRO Domain: Clinical Documentation



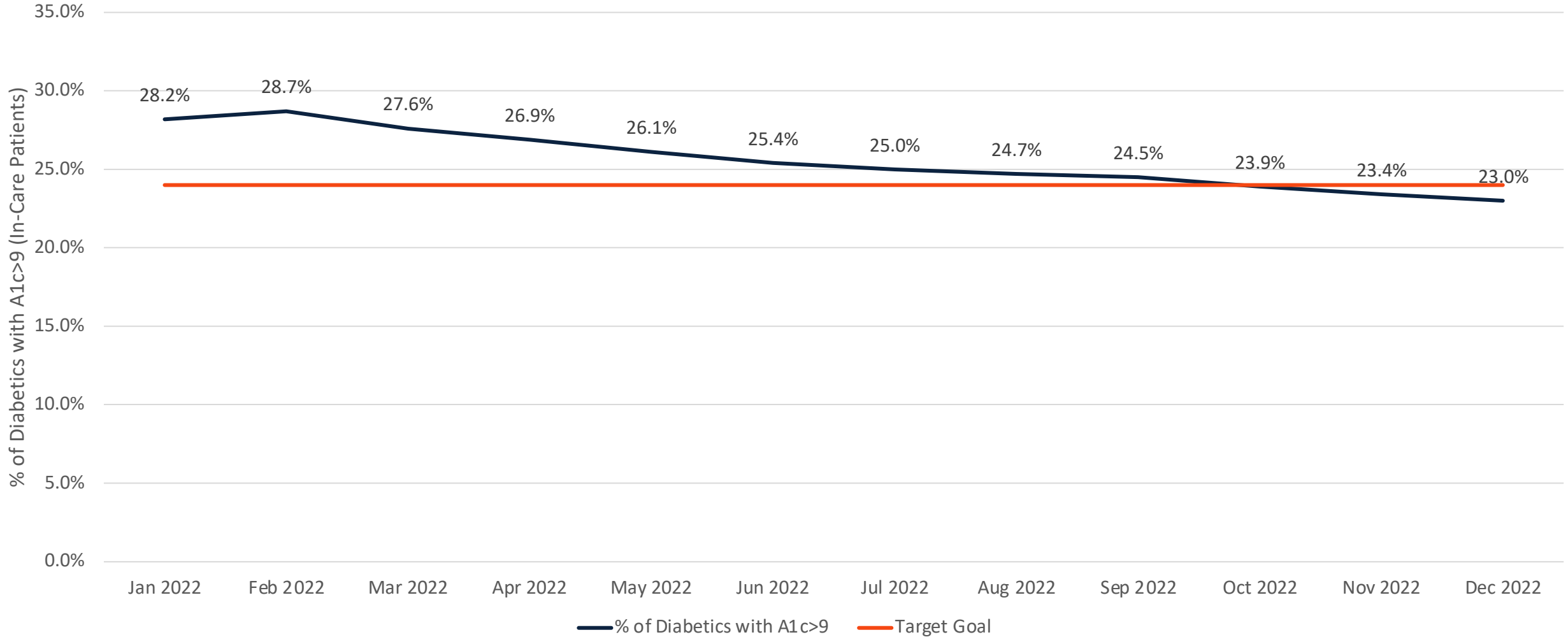
Top Box Score, Recommend Hospital (Stroger Hospital)

HRO Domain: Patient Experience, rolling calendar 02/01/2022 to 01/31/2023



HbA1c > 9% for In-Care Patients

HRO Domain: HEDIS



Metric

Definition

30-Day Readmission Rate

- *Patient unplanned admission to Stroger within 30 days after being discharged from an earlier hospital stay at Stroger*
- **Calculation:** Raw unplanned readmission rate (# of readmissions / total # of eligible discharges)
- **Population included:** all inpatient discharges from Stroger
- **Cohort inclusions:** any payer; any age; alive at discharge
- **Cohort exclusions:** Admitted for primary psychiatric dx; admitted for rehabilitation; admitted for medical treatment of cancer (chemotherapy, radiation therapy); admitted for dialysis; admitted for delivery/birth
- **Reporting timeframe:** reported monthly with a 1-month lag to allow for 30-day readmission window; reported by month of patient discharge
- **Data source:** Vizient Clinical Data Base

Case Mix Index

- *Average relative DRG weight of a hospital's inpatient discharges, calculated by summing the Medicare Severity-Diagnosis Related Group (MS-DRG) weight for each discharge and dividing by the total number of discharges*
- **Population included:** all inpatient discharges from Stroger
- **Cohort inclusions:** any payer; any age; reported by Medical MS-DRG and Surgical MS-DRG (*Surgical: an OR procedure is performed*)
- **Cohort exclusions:** none
- **Reporting timeframe:** reported monthly by most current month available; reported by month of patient discharge
- **Data source:** Vizient Clinical Data Base

Recommend the Hospital

- *Percent of patient responses with "Definitely Yes" (top box response) for Recommend the Hospital item in HCAHPS survey*
- **Calculation:** Percent of patient responses with "Definitely Yes" (top box) / total survey responses
- **Population included:** Stroger; 18 years or older at time of admission; non-psychiatric MS-DRG/principal diagnosis at discharge; alive at discharge; >1 overnight stay in hospital as inpatient
- **Cohort exclusions:** discharged to hospice care; discharged to nursing homes or SNFs; court/law enforcement patients; patients with a foreign home address; "no-publicity" patients"; patients who are excluded because of rules and regulates of state in which hospital is located
- **Reporting timeframe:** reported monthly by most current month available; reported by month of survey received date
- **Data source:** Press Ganey

HbA1c >9%

- *Percent of adults (ages 18-75) with diabetes Type 1 or Type 2 where HbA1c is not in control (>9.0%)*
- **Calculation:** Percent of diabetic patients with HbA1c not in control / total diabetic patients
- **Population included:** (Age 18-75 years as of December 31 of current year AND two diabetic Outpatient/ED visits in the current year or previous year) OR (One diabetic Inpatient visit in the current year or previous year) OR (Prescribed insulin or hypoglycemic or anti-hyperglycemics in the current year or previous year)
- **Cohort exclusions:** none
- **Reporting timeframe:** reported monthly by most current month available; reported by month of patient visit
- **Data source:** NCQA, HEDIS

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ATTACHMENT #2

COOK COUNTY
HEALTH



CCH Regulatory Update

February 2023



COOK COUNTY
HEALTH

Regulatory Updates

February 2023

Provident:

- TJC triennial survey in 2023 not in 2024 (TJC moving to schedule prior to Covid)
 - Provident TJC Extension Surveys for Mobile MRI and In-Patient Dialysis will be rolled into the Triennial survey
- TJC “Mock” at Provident Jan. 9th-12th hosted by QHR
 - 3 surveyors for 4 days and 1 LS/EOC surveyor for 2 days
 - Weekly TJC survey readiness meetings have started
- CAPP (Lab)survey expected in 2023 (also moved to pre-Covid schedule)

Regulatory Updates (cont.)

February 2023

Stroger:

- Stroke Certification Survey: Expect Feb. 2023
 - Will receive 7 business day notification
- Trauma Designation Survey (New, Voluntary): Date TBD
 - Preparation-Started February 2022
 - Necessary staff hired to move forward in 2023
- Belmont Cragin Health Center TJC Extension Survey: One day unannounced, Date TBD
 - Expect this to be rolled into TJC triennial

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ATTACHMENT #3

COOK COUNTY
HEALTH



Clinical Documentation Domain

QPS Agenda Review Meeting

February 2023

Michael Alebich, DO, FACP

Leathecia Arnold, MHA, RHIA, CCS, CHTS-TR

David Brady, MBA, MSN, RN

Executive sponsor: Dr. Richard Keen



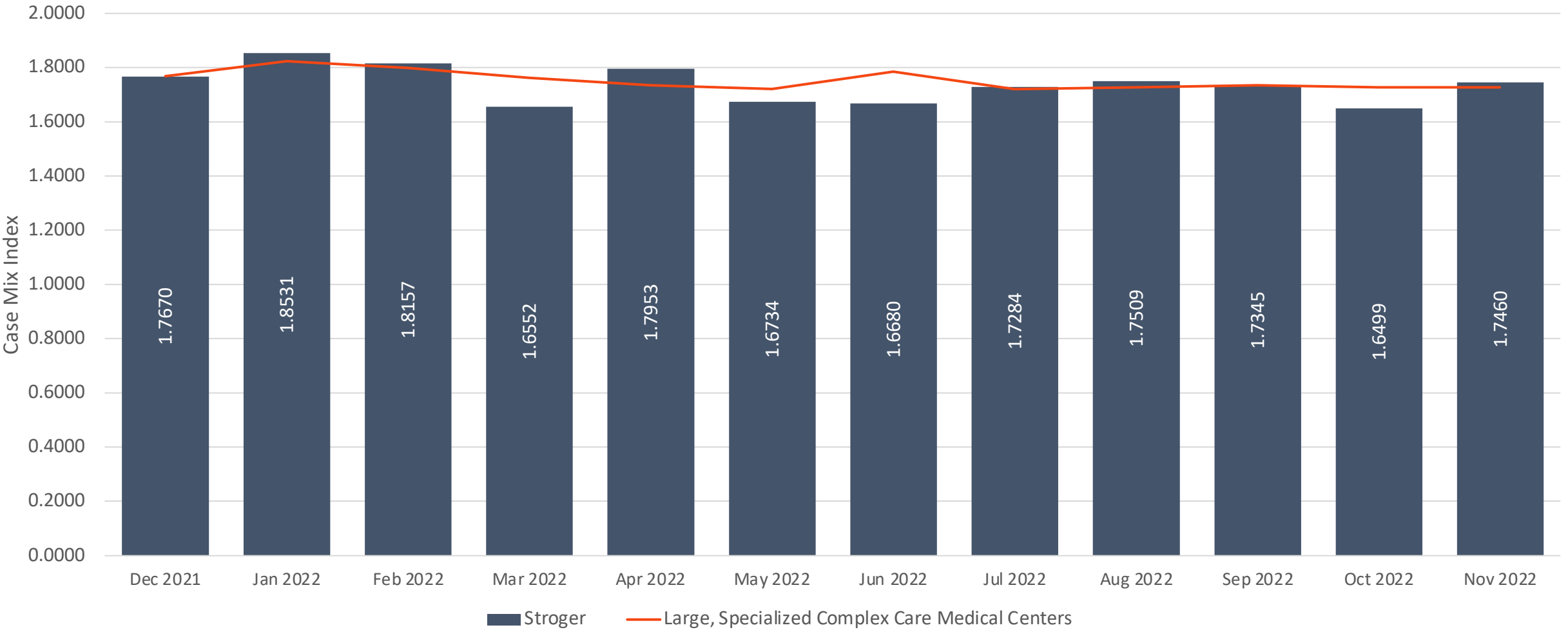
COOK COUNTY
HEALTH

Metrics

	Goal
Hospital CMI	1.753
Medical CMI	1.246
Surgical CMI	3.06
Medical Capture Rate	75 th percentile Vizient Mean
Surgical Capture Rate	75 th percentile Vizient Mean

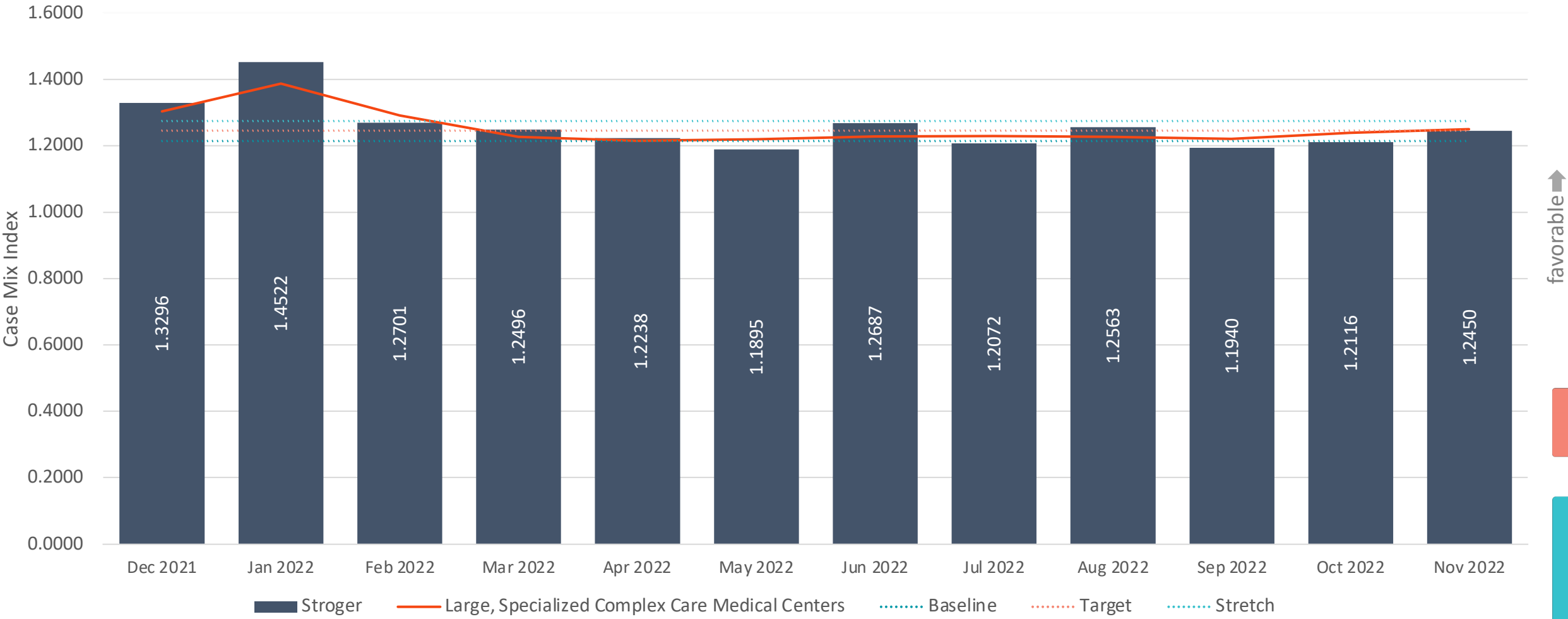
Case Mix Index

Overall



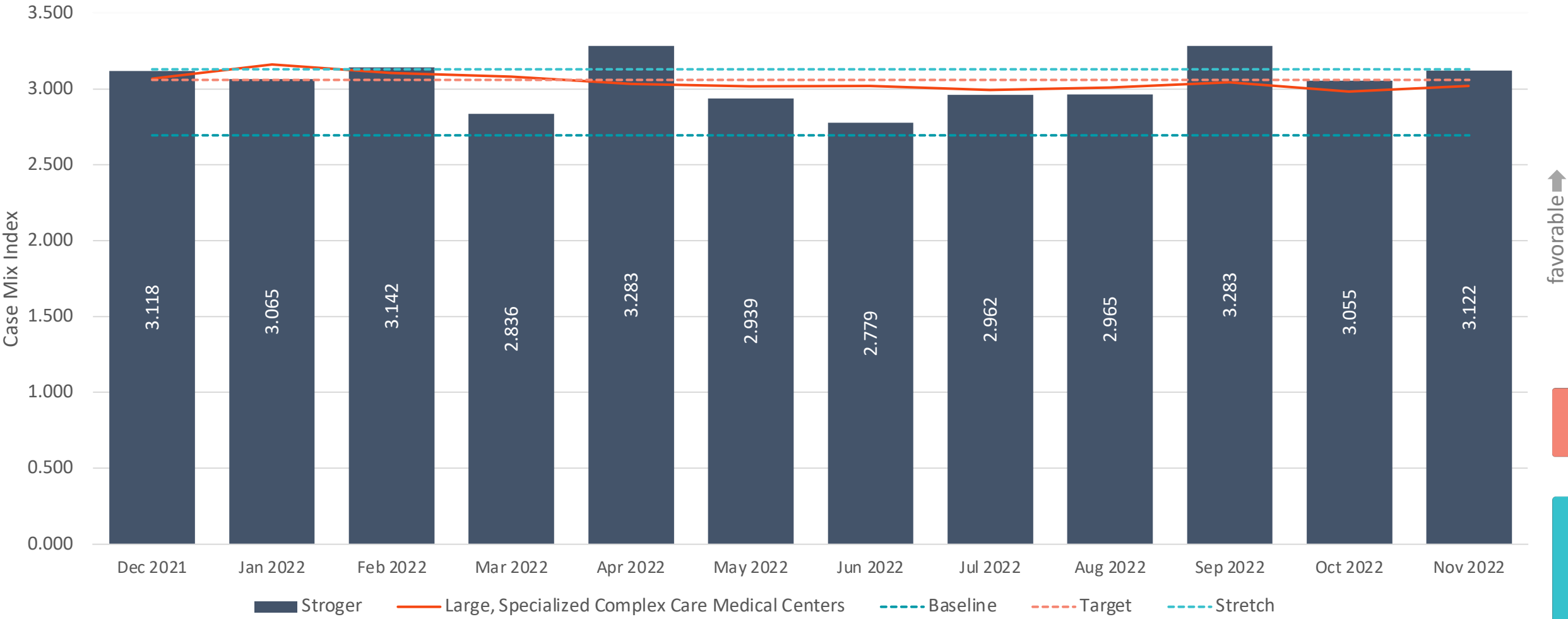
Case Mix Index

Medical MS-DRG



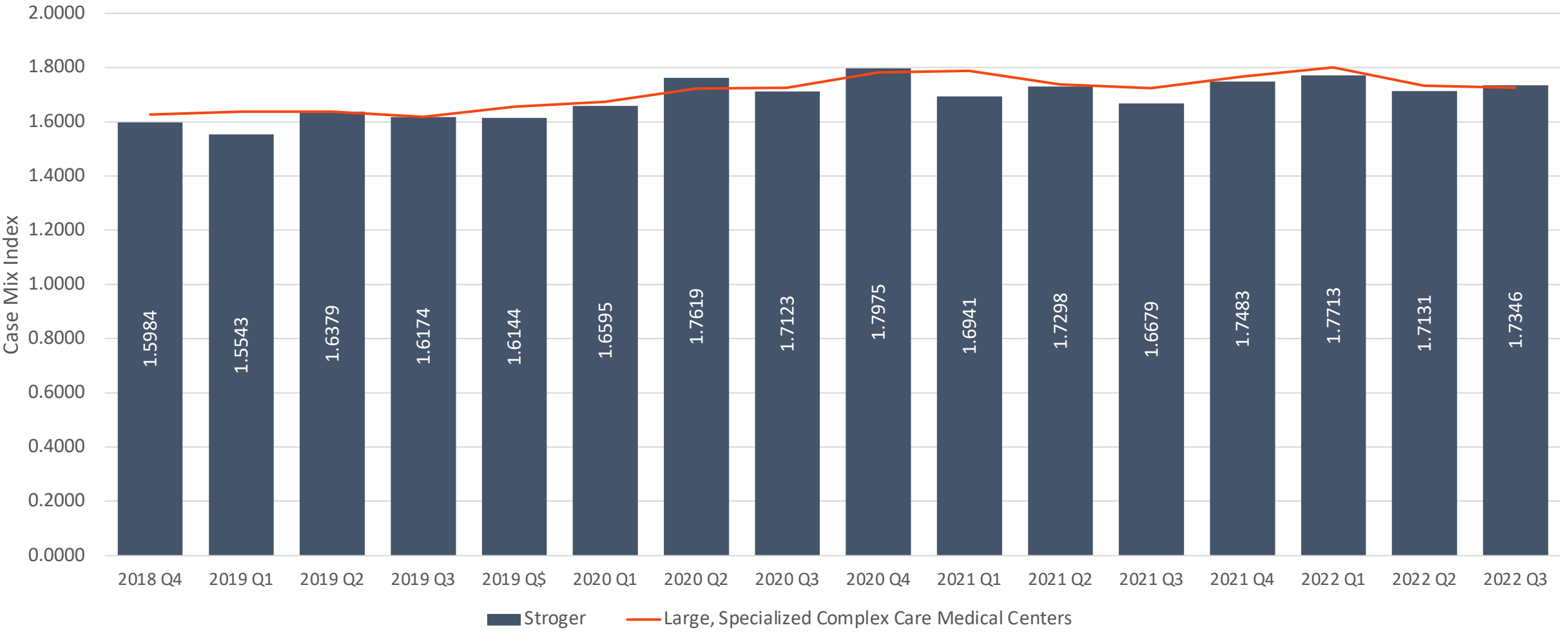
Case Mix Index

Surgical MS-DRG



Case Mix Index

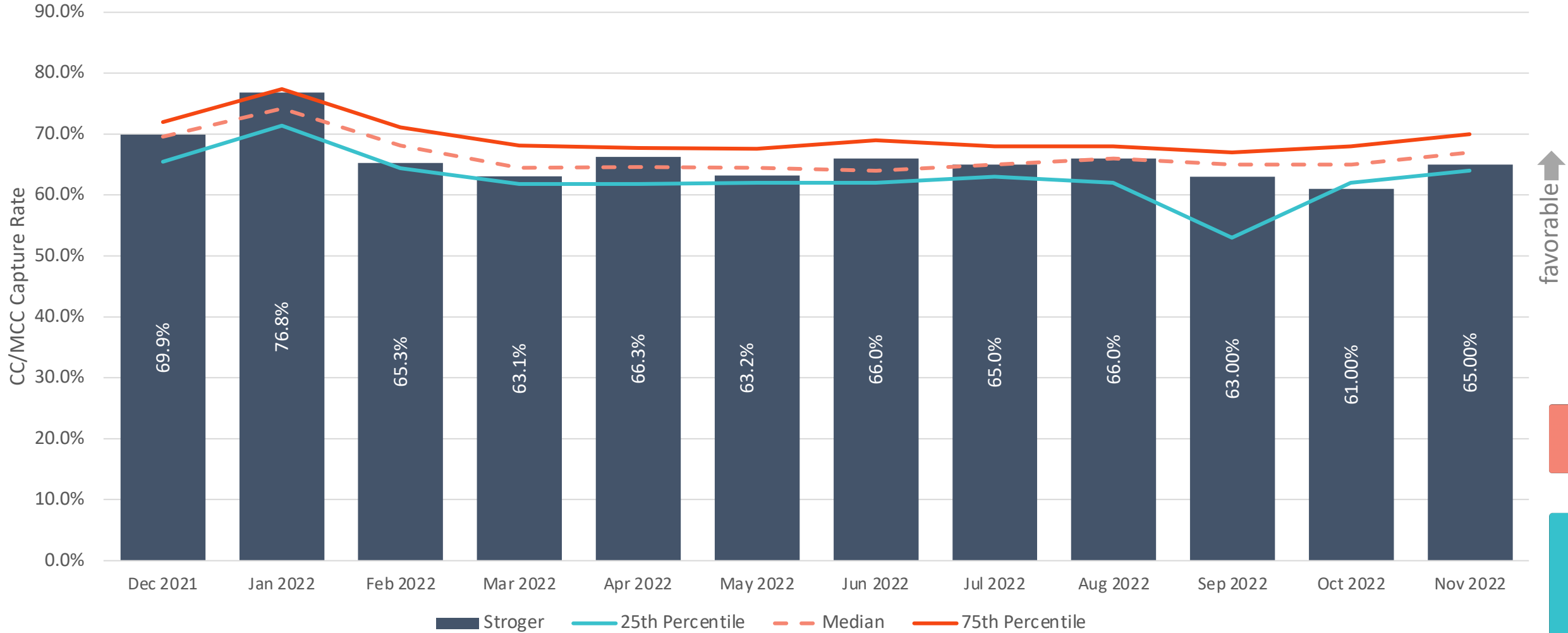
All Service Lines



favorable ↗

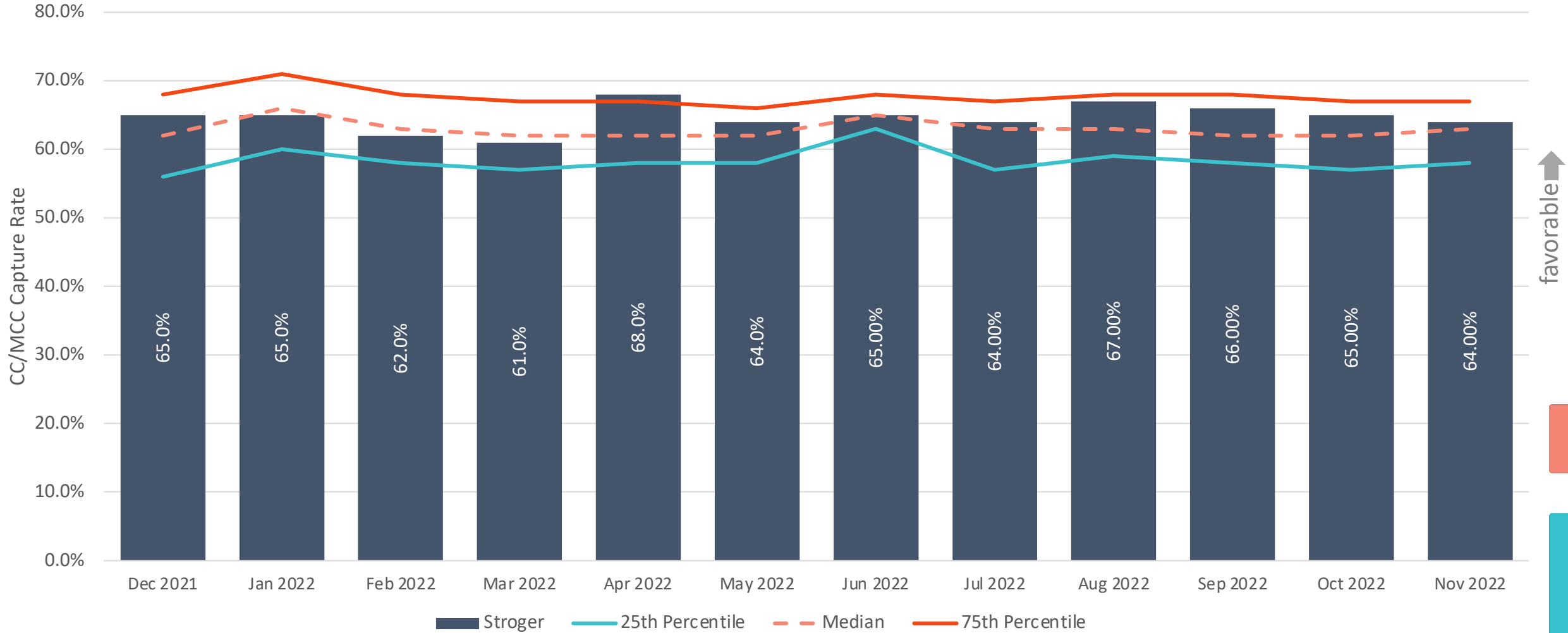
CC/MCC Capture Rate

Medical MS-DRG



CC/MCC Capture Rate

Surgical MS-DRG



A Success Story: Medicine and Vascular Surgery

	Pre-Intervention	Post-Intervention
CMI	2.996	3.214
Capture Rate	85%	89%
Mean LOS	8.96	10.23
LOS Index	1.23	1.22
Mortality Index	0.58	0.36

Impressions and Future Directions

1. Surgical CMI and capture rates showing sustained improvement
2. Hospital-wide CMI is directly proportional to surgical CMI
3. CDI specialists and medical-surgical collaboration are essential
4. Resources needed to implement real-time intervention and further develop medical-surgical collaboration

COOK COUNTY
HEALTH



Thank You

Questions?



COOK COUNTY
HEALTH

Cook County Health and Hospitals System
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ATTACHMENT #4

CCH Specialty- Access, Wait Time and Referrals in Review



Iliana Mora

Chief Administrative Officer, Ambulatory Services

CCH Quality and Patient Safety Meeting

February 16, 2023



COOK COUNTY
HEALTH

CCH Specialty- Access, Wait Time and Referrals in Review



Iliana Mora

Chief Administrative Officer, Ambulatory Services

CCH Board of Directors Meeting

February 24, 2023



COOK COUNTY
HEALTH

CCH Specialty Referral Backlog (Non-scheduled Orders)



Average Referral to Appointment (Seen) Date

Avg. Wait Time in Days by Fiscal year (calendar days) CCH Specialty Orders



Specialty Clinics with Greatest Reductions in Backlog

Greatest Improvements in Waiting Queue Reduction

Specialty Clinic	FY19 Q1	FY23 Q1
Eye New General - Sengstacke	2,268	11
Foot - Stroger	3,119	3
General Surgery - Stroger	276	0
GI Pediatrics - Stroger	80	0
GI - Sengstacke	509	16
Hand - Stroger	854	1
Hematology/Medical Oncology - Stroger	153	15



Specialty Clinics with Greatest Reductions in Backlog

Greatest Improvements in Waiting Queue Reduction

Specialty Clinic	FY19 Q1	FY23 Q1
Musculoskeletal - Stroger	145	17
Neurology - Stroger	549	0
Ortho - Stroger	1,123	19
Pain - Stroger	678	51
Psychiatry - Austin	51	4
Pulmonary/Sleep - Stroger	690	0



Tactics Implemented to Improve Specialty Access



1. Check referral order logic (clinical decision making)



2. Add clinic sessions for APPs



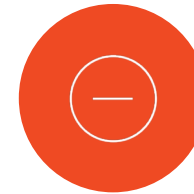
3. Expand days of clinics from once weekly to multiple times



4. Expand footprint of services from Stroger to across ACHN and offer multiple locations for appointments



5. Reduce number of different slot types



6. Removal of duplicate orders



7. Added Direct scheduling from Primary care



8. Onboarded Surgical Navigators to reduce procedure cancellation, prior auth, optimize initial consult, improve experience

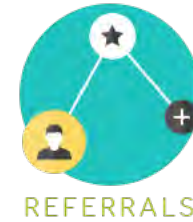


9. Overbooking



FY2023 Improvement and Expansion Strategies

- Referral RFP- electronic ease of external referrals and resulting process



- Patient self-scheduling and self-insurance verification



- Improving patient's ability to reschedule at their fingertips



- Continued expansion of specialty footprint

- Centralizing diagnostic and procedure scheduling and workflows



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ATTACHMENT #5



COOK COUNTY HEALTH

Leadership

Toni Preckwinkle
President
Cook County Board of Commissioners

Israel Rocha, Jr.
Chief Executive Officer
Cook County Health

Board of Directors

Lyndon Taylor
Chair of the Board

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

Jay Bhatt, DO, MPH, MPA
Robert Currie
Raul Garza
Joseph M. Harrington
Karen E. Kim, MD, MS

Mike Koetting
Heather M. Prendergast, MD, MS, MPH
Robert G. Reiter, Jr.
Sam A Robinson, III, PhD
Otis L. Story, Sr.

To: Quality and Patient Safety Committee
From: Executive Medical Staff Committee of John H. Stroger Jr., Hospital
Date: February 10, 2023
CC: Cook County Health
Memo: John H. Stroger Jr., Hospital Medical Staff Action Items

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

Please be advised that the Executive Medical Staff Committee of John H. Stroger Jr., Hospital of Cook County Health has approved the attached list of medical staff action items on February 10, 2023 by electronic vote for your consideration.

Thank you kindly
Respectfully Submitted,

Abayomi E. Akintorin, MD President, EMS



TO: Quality, Patient and Safety Committee

FROM: Abayomi E. Akintorin, MD
EMSC President

SUBJECT: Medical Staff Appointments and Other Business Recommended by the **Credentials Committee 1/26/2023.**

Medical Staff Appointments/Reappointments Effective 2/16/2023 . Subject to Approval by Cook County Health Systems Boards.

Old Business

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

New Business

Initials:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Barquet Piza, Viviana Sofia, MD	Provisional	Surgery/Ophthalmology		Approved	
Darwish, Dana, MD	Provisional	Surgery/Ophthalmology		Approved	
Falck, Benjamin, MD	Provisional	Medicine/Dermatology		Approved	
Hoshizaki, Melissa Ann, MD	Provisional	Emergency Medicine		Approved	

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ON FEBRUARY 16, 2023



Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
James, Steven Michael, MD	Provisional	Medicine/PCCM Occupational		Approved	
Miller-Finch, Andrea, MD	Provisional	Oral Health		Approved	
Outler, Kendra, MD	Provisional	Anesthesiology		Approved	
Sangal, Kajal, MD	Provisional	Surgery/Ophthalmology		Approved	
Van Aartsen, Daniel, MD	Provisional	Medicine/Infectious Diseases		Approved	
Zhang, George, MD	Provisional	Surgery/Ophthalmology		Approved	

Reappointments:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Ahmed, Fazal, MD	Active	Psychiatry		Approved	
Alexander, Jorelle, DMD	Active	Oral Health		Approved	
App, Megan, MD	Active	Ob/Gyn		Approved	
Bhat, Gifty, MD	Provisional	Pediatrics/Genetics		Approved	
Blaney, Rodney, DMD	Active	Oral Health		Approved	
Clapp, William, MD	Active	Medicine/Pulmonary & Critical Care		Approved	
Datta, Swati, DO	Active	Medicine/ General Medicine		Approved	
Davidovich, Micheal, MD	Active	Medicine/General Medicine		Approved	



Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Dawalibi, Salim, MD	Active	Correctional Health/Med Surg		Approved	
Joseph, Antony, MD	Active	Anesthesiology/Adult Anesthesia		Approved	
Kleinman, Amanda, MD	Consulting	Psychiatry		Approved	
Krantz, Anne, MD	Consulting	Medicine/ General Medicine		Approved	
Kronic, Aleksandar, MD	Provisional	Medicine/Dermatology		Approved	
Loafman, Mark, MD	Active	Family Medicine		Approved	
Manikkan, Ajaydas, MD	Active	Medicine/Hospital Medicine		Approved	
McLeod, Yvonne, DDS	Active	Oral Health		Approved	
Meehan, Timothy, MD	Voluntary	Emergency Medicine		Approved	
Menon, Shreevidya, DO	Consulting	Emergency Medicine/Peds Emergency		Approved	
Paul, Reena, MD	Active	Correctional Health/Med Surg		Approved	
Piette, Warren, MD	Voluntary	Medicine/Dermatology		Approved	
Ramic, Alma, MD	Active	Correctional Health/Psychiatry		Approved	
Saini, Abhimanyu, MD	Active	Medicine/Adult Cardiology		Approved	
Siwy, Grazyna, MD	Active	Medicine/General Medicine		Approved	
Tulaimat, Aiman, MD	Active	Medicine/Pulmonary & Critical Care		Approved	
Tymouch, Jaroslav, MD	Active	Anesthesiology/Pain Management		Approved	



Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Vernik, Jane, MD	Active	Medicine/ Nephr/Hypertension		Approved	

Change in Clinical Privileges (Additions/Removal):

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

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 BY THE QUALITY AND PATIENT SAFETY COMMITTEE
 ON FEBRUARY 16, 2023



Change in Category Status:

Name	Category From: To:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Alanís, Alex, MD	Provisional to Active	Emergency Medicine		Approved	
Barnes, Arti, MD	Provisional to Voluntary	Medicine/Infectious Disease		Approved	
Barrett-Perry, Carmella, MD	Active to Voluntary	Oral Health		Approved	
Hayani, Karen, MD	Provisional	Pediatrics/Infectious Disease		Approved	
Krunic, Aleksandar, MD	Provisional to Consulting	Medicine/Dermatology		Approved	
Madan Kumar, Harsha Vardhan Hampasandra, MD	Provisional to Active	Pediatrics/Allergy		Approved	
Schmidt, Mary Lou, MD	Provisional to Active	Pediatrics/Peds Hema/Oncology		Approved	
Tawadros, Mina, MD	Provisional to Active	Correctional/Med Surg		Approved	
Tragos, Christina, MD	Provisional to Active	Surgery/Plastic Surgery		Approved	
Vardhan, Sindhuja Harsha, MD	Provisional to Active	Pediatrics/Allergy		Approved	

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 BY THE QUALITY AND PATIENT SAFETY COMMITTEE
 ON FEBRUARY 16, 2023



Resignations/Retirement:

Name	Effect Date:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Atty, Corinne, DO	2/16/2023	Radiology		Approved	
Becker, N M, MD	2/16/2023	Surgery/Ophthalmology		Approved	
Black, Stephanie, MD	2/16/2023	Medicine/Infectious Diseases		Approved	
Botchway, Pamela, MD	2/16/2023	Pediatrics		Approved	
Chen, Michael, MD	2/16/2023	Radiology		Approved	
Kopulos, Luke, MD	2/16/2023	Radiology		Approved	
Premkumar, Ashish, MD	01/26/2023	Ob/Gyn		Approved	
Schmidt, Julie, MD	12/15/2022	Ob/Gyn		Approved	
Severin, Paul, MD	2/16/2023	Pediatrics		Approved	
Udechukwu, Victor MD	2/16/2023	Medicine/Hospital Medicine		Approved	

CCHHS
APPROVED
 BY THE QUALITY AND PATIENT SAFETY COMMITTEE
 ON FEBRUARY 16, 2023



Old Business

Non-Physician Providers

Change in Clinical Privileges (Additions/Removal) STROGER					
Name	Privileges Request to add: Request to remove:	Department/Division	Discussion/Action	Recommendation	Follow-Up
N/A					

Non-Physician Providers

Initial:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Dela Cruz, Ralph S., APRN	Provisional	Family Medicine	<i>NPP Addendum Protocol /FPPE Received-Pending IL CS</i>	Approved	
Huynh, Kiev A., APRN	Provisional	Medicine/General Medicine	<i>NPP Addendum Protocol /FPPE Received-Pending IL CS</i>	Approved	

New Business

Initials:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Bowers, Mark, CCP	Provisional	Surgery/ Cardiothoracic		Approved	
Mohammed, Mohammed, CCP	Provisional	Surgery/ Cardiothoracic		Approved	
Piper, Lauren, PsyD	Provisional	Psychiatry		Approved	
Ryan, Amanda, PA-C	Provisional	Medicine/Neurology	<i>NPP Addendum Protocol /FPPE Pending CS/DEA</i>	Approved	

Reappointments:

Name	Category	Department/Division	Discussion/Action	Recommendation	Follow-Up
Argueta, Alejandra, PA-C	Physician Assistant	Emergency Medicine		Approved	
Assian, Sarah, PA-C	Provisional	Medicine/Infectious Diseases		Approved	
Baluka, Stephanie, PA-C	Physician Assistant	Medicine/Internal Medicine		Approved	
Kanikunnel, Meriam, PA-C	Physician Assistant	Medicine/Adult Cardiology		Approved	
McBride, Dianna, APRN	Nurse Practitioner	Medicine/General Medicine		Approved	
Peculis, James, PA-C	Physician Assistant	Surgery/Urology		Approved	
Seaman, Lisa, LAc	Acupuncturist	Anesthesiology/Acupuncturist		Approved	

Sims, Kevin, PA-C	Physician Assistant	Correctional Health/Med Surg		Approved	
Slowikowski, Rosemarie, CRNA	Provisional	Anesthesiology/Pain Management		Approved	
Swais, Giries, PsyD	Clinical Psychologist	Psychiatry		Approved	
Wolfinger, Richard, PA-C	Physician Assistant	Emergency Medicine		Approved	

Change in Clinical Privileges: (Additions/Removal)

Change in Clinical Privileges (Additions/Removal):	Privileges Request to add: Request to remove:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Stigall, Latura, APRN	Adding prescriptive authority	Medicine/Infectious Diseases	Approved		

Additional Collaborator:

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

Change in Collaboration (Addition/Removal):

Name	Category/ Collaborator To: From:	Department/Division	Discussion/Action	Recommendation	Follow-up
Kanikunnel, Meriam, PA-C	To: Rami Doukky, MD From: Sorin Lazar, MD Grzegorz Pietrasik, MD	Medicine/Adult Cardiology		Approved w/ no prescriptive authority	

Change in Category Status:

Name	Category From: To:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Assian, Sarah, PA-C	Provisional to Physician Assistant	Medicine/Infectious Disease		Approved	
Slowikowski, Rosemarie, CRNA	Provisional to CRNA	Anesthesiology/Pain Management		Approved	
Valentine, Alyssa, CGC	Provisional to Genetic Counselor	Surgery/Oncology		Approved	

Resignations:

Name	Category Effect date:	Department/Division	Discussion/Action	Recommendation	Follow-Up
Bozylinsky, Katherine, PA-C	1/23/2023	Medicine/Infectious Diseases		Approved	

Sanction Screening Reporting –

IDFPR Disciplinary Action Report for November 2022 (see attached) reviewed as of 1/17/2023 – No Findings.

CMS OPT OUT Affidavits report reviewed as of 1/17/2023 – No Findings.

CMS Preclusion Report reviewed as of 1/17/2023 – No Findings.



COOK COUNTY HEALTH

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Toni Preckwinkle
President
Cook County Board of Commissioners

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Chief Executive Officer
Cook County Health

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Mia Webster Cross, MSN, RN

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

February 10, 2023

Dear Members of the Quality and Patient Safety Committee:

Please be advised that at the Provident Hospital Medical Executive Committee Meeting held on February 10, 2023 the Medical Executive Committee recommended the actions on the enclosed documents. It is being presented to you for your consideration.

Respectfully,

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

Provident Hospital of Cook County



TO: Quality and Safety Committee
FROM: Marlon Kirby, MD
President, Medical Executive Committee
SUBJECT: Medical Staff Appointments and Other Business Recommended by the
Medical Executive Committee on February 10, 2023

Medical Staff Appointments/Reappointments Effective: 2/16/2023 subject to Approval by the Cook County Health.

New Business

Initial

Nelson, Michael, MD- Emergency Medicine - Recommended

Reappointments:

Clapp, William D., MD- Internal Medicine - Recommended

Joseph, Antony, MD – Anesthesiology - Recommended

Tulaimat, Aiman, MD – Internal Medicine - Recommended

Hall-Ngorima, Regina, MD- Psychiatry - Recommended

Kudaravalli, Padma, MD- Internal Medicine - Recommended

Saini, Abhimanyu, MD- Internal Medicine - Recommended

Loafman, Mark, MD- Family Medicine - Recommended

Category Change:

Hall-Ngorima, Regina, MD - Provisional to Affiliate - Recommended

Christina Tragos, MD – Voluntary to Active - Recommended

William A Kcomt, MD - Provisional to Active - Recommended

Ahmad Alwakkaf, MD - Provisional to Active - Recommended

Kailash Bajaj, MD - Provisional to Active - Recommended

Farah D. Ciftci, MD - Provisional to Active - Recommended

CCHHS
APPROVED
BY THE QUALITY AND PATIENT SAFETY COMMITTEE
ON FEBRUARY 16, 2023

A handwritten signature in black ink, appearing to be "A. Kirby".

