

**PROPOSED SUBSTITUTE TO FILE 23-0523
(Health and Hospitals Committee 2-7-2023)**

Sponsored by: ALMA E. ANAYA, DENNIS DEER and BRANDON JOHNSON, County Commissioners

PROPOSED RESOLUTION

RESOLUTION TO ASSESS NEEDS AND IMPROVE THE QUALITY AND EFFECTIVENESS OF BEHAVIORAL HEALTH CARE PROVIDED BY COOK COUNTY GOVERNMENT

WHEREAS, the Substance Abuse and Mental Health Services Administration (SAMHSA) defines behavioral health as the promotion of mental health, emotional, psychological, and social well-being and resilience; the treatment of mental and substance use disorders; and the support of those who experience and/or are in recovery from these conditions, along with their families and communities; and

WHEREAS, an Illinois Department of Public Health report from 2015 identified that behavioral health visits to Illinois emergency departments (ED) were growing faster than any other category of care offered through Illinois EDs; and

WHEREAS, the Illinois Department of Public Health's Illinois Healthcare Report Card of 2018 has reported that residents of Cook County had an average of 4.1 mentally unhealthy days per month; and

WHEREAS, the same report showed a health disparity in which African Americans face a greater risk of relying on emergency departments to access behavioral health care, with 1.67 times more visits than whites; and

WHEREAS, according to a 2016 survey of behavioral health facilities conducted by the Chicago Department of Public Health 79% of publicly available behavioral health agencies reported unmet mental health needs and 61% reported unmet substance-use-related needs; and

WHEREAS, a 2019 report from the Alliance for Health Equity identified "quality" as the greatest overarching need for behavioral health services in Cook County; and

WHEREAS, in the middle of the COVID-19 pandemic 31.3% of adults in Illinois reported symptoms of anxiety and/or depressive disorder, compared to 31.6% of adults in the U.S; and

WHEREAS, according to Children's Hospital of Chicago, 44% of Chicago children experienced an increase in at least one mental or behavioral health system during the pandemic compared with before the pandemic; and

WHEREAS, lack of mental health and behavioral services along with other community support are a major concern for recidivism in people either released from the County Jail or on electronic monitoring; and

WHEREAS, Cook County Government has typically allocated funding for behavioral health services, and funding is allocated for these programs; and

WHEREAS, access to mental health service and equity is highly disparate in underserved communities; and

WHEREAS, there is no regular documentation nor oversight mechanism to evaluate the number of people served, any overlap in patients and communities served, or the impact and efficacy of all the disparate County-wide services provided; and

WHEREAS, an assessment of the behavioral health work conducted by Cook County can help Cook County Government identify best practices, needs, and priority areas to grow behavioral health care.

NOW, THEREFORE BE IT RESOLVED, that Cook County entities, departments, agencies or offices that conduct behavioral health services shall submit two (2) reports yearly to the Health and Hospitals Committee of the Cook County Board with details of their services during a public hearing of the Committee. Those entities, departments, agencies, or offices should include but not be limited to:

- a. The Cook County Health and Hospitals System, which will include one report on the Cook County Health and Hospital System, the Cook County Department of Public Health; (CCDPH), Cermak Health Services of Cook County (Correctional Health) and Juvenile Temporary Detention Center (Correctional Health);
- b. The Cook County Sheriff;
- c. The Cook County State's Attorney;
- d. The Cook County Public Defender; and
- e. The Office of the Chief Judge of Cook County.

FURTHER BE IT RESOLVED, that the reports shall include the following information, as applicable to each entity, on behavioral health initiatives, programs, and activities:

- a. Data on the population served, including a breakdown of where patients of the program reside in Cook County and the total year-to-date number of patients served;
- b. Overall goals of the behavioral health program(s) and information on the best practices in this type of programming;
- c. Information on the providers, managers, operators, and/or contractual personnel of the behavioral health care program, activity, or service, and any information on external partners working with your agency on this program;
- d. Key performance indicators that are used to measure the results of the program;
- e. Quality measures or expectations for contracts involved in the program;
- f. Information on how the care provided in this program serves the best interests of the patient/recipient of care;
- g. Information on the participant's continuum of care plan and whether the participant has received follow-up care at a Cook County hospital(s) or clinic(s) including medication management as a part of aftercare;
- h. An evaluation of the impact of the program and an overview of its effectiveness, particularly as it pertains to vulnerable populations, racial and ethnic minorities; and populations facing disparities in behavioral health outcomes, behavioral health care, and behavioral healthcare access;
- i. Information with the costs associated with the program(s) and funding source(s);
- j. Any additional information which may facilitate the Committee's understanding of the program, initiative, or activity; and
- k. Any additional information which may foster a more accurate assessment of behavioral health care needs and opportunities for collaboration or growth within the Cook County Government's efforts around behavioral health care programs.

Effective Date: This resolution shall take effect immediately upon adoption. The reporting schedule shall be as follows: The first bi-yearly reports (December - May) shall be submitted to the Cook County Board by the June Board Meeting Agenda deadline and shall be heard before the Health & Hospitals

Committee in July of each year. The second set of reports (June - November) shall be submitted to the Cook County Board by the December Board Meeting Agenda deadline and shall be heard before the Health & Hospital Committee by January of each year.