

COOK COUNTY HEALTH & HOSPITALS SYSTEM **EMPLOYMENT PLAN - SUPPLEMENTAL POLICIES**

POLICY TITLE: SALARY ADJUSTMENTS FOR GRADE 24 POSITIONS PAGE 1 of 1

Date of Approval: 04/19/18 Effective Date: 05/01/18

Policy Number: 02.01.22

Associated Personnel Rule: 2.02

Policy Form:

Salary Adjustment Request

Form

AREAS/EMPLOYEES AFFECTED: This Policy applies to all Departments and all Employees. If any provision in this Policy conflicts with the CCHHS Personnel Rules, the Personnel Rules shall govern. If a specific provision in this Policy conflicts with the Employment Plan, the provision in the Employment Plan shall govern.

PURPOSE: To provide the parameters that are considered when determining if the compensation of an Employee currently in a Grade 24 Position warrants a salary adjustment.

POLICY AND PROCEDURE: This policy identifies the process and parameters that will be considered when determining whether a Grade 24 Position warrants a salary adjustment.

No Political Reasons or Factors. The adjustment of a salary associated with a Grade 24 Position must be done in accordance with applicable and relevant Cook County ordinances, Budget Resolutions, CCHHS Personnel Rules, this Policy, and the Employment Plan, as and if applicable. No Employment Action relating to the adjustment of a salary for a Position or Positions or affecting an Employee holding a Position may be based on any Political Reasons or Factors.

Salary Adjustment(s). Factors that will be considered when determining whether a salary adjustment is warranted for an Employee classified as Grade 24 include but are not limited to:

- 1. whether the Job Description for the Position has been amended to include additional educational requirements, additional credentials such as certification, licensure, etc. and/or significant and additional duties and responsibilities that become a part of the day-to-day responsibilities of the Position;
- 2. whether the Employee's span of control is significantly expanded;

- 3. whether industry demands for the role have caused the Position to be identified as a "Hot Job": 4. whether market adjustments for the Position have escalated;
- 5. whether sufficient funds for such adjustment have been included in the County's Annual Appropriation Ordinance in effect.

The expansion of existing duties that do not require an amendment to the Job Description will not be considered factors that will be taken into consideration nor will they be used as a justification to request a salary adjustment.

Submission of Request for a Salary Adjustment. A Deputy CEO must complete a Salary Adjustment Request Form and submit it to the Chief Human Resources Officer or his or her designee. Detailed information to support the request must be included on the Salary Adjustment Request Form, including:

- 1. a list of the specific and detailed additional duties and responsibilities that have been added to the Job Description and a certification that, as applicable:
 - the additional duties and responsibilities are now a part of the Employee's day-to-day responsibilities;
 - the additional duties and responsibilities assumed are not temporary in nature;
 - the additional duties and responsibilities are not part of either a short or a long-term project; and
 - d. the additional duties and responsibilities are not ones the Employees is currently performing;
- a detailed explanation of the expansion of the Employee's span of control;
- 3. a detailed list of the specific industry and/or technological changes that require changes to the Job Description requiring the addition of:
 - additional years of experience;

¹ Hot Jobs are identified by the CCHHS Chief of Human Resources based on changes in the supply and demand for the skills and abilities of a position in the market and fluctuate with the changes in healthcare delivery models.

- b. additional educational requirements; and
- c. additional credentials such as certification, licensure, etc.;
- 4. a detailed explanation of industry demands for the role that caused the Employee's Position to be identified as a "Hot Job"; and
- 5. a detailed explanation of the market adjustments escalation(s) for the Employee's Position.

Additional information / document(s) that should be attached to the Salary Adjustment Request Form includes:

- 1. the Employee's current Job Description; and
- 2. a copy of the Employee's current resume

<u>Approval/Denial of Request to be Submitted for Final Approval</u>. The Chief Human Resources Officer or his or her designee will provide a recommendation whether the request is appropriate and will submit the recommendation to the Chief Executive Officer or his or her designee, for their review and approval. Written notice of the CEO's determination will be sent to the Deputy Chief Executive Officer who submitted the request. DHR will send a copy of the determination along with the initial request to the EPO and the OIIG.



Salary Adjustment Request Form

| Date: | | |
|-------------|--|---|
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| To: | Chief Human Resources Officer | |
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| From: | Deputy Chief Executive Officer | |
| | Deputy Chief Executive Officer | |
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| | nection with the Salary Adjustment for Grade ng Grade 24 position: | e 24 Positions Policy (02.01.22), I submit this request for the |
| Emplo | oyee Name: | |
| Job Ti | tle: | Job Code: |
| Denartment: | | |
| Divisio | on / Unit | |
| | port of this request, I provide the following in scription be amended as follows: | nformation identifying why the position now requires that the |
| Overvi | ew / Scope: | |
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| Span o | f Control: | |
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| Duties: | |
|---------------------------------|--|
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| Minimum Qualifications: | |
| William Qualifications. | |
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| The change is required because: | |
| The change is required because. | |
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In support of this request attached please find:

- 1. A copy of the Job Description for the position identified; and
- 2. A copy of the named employee's current resume

I understand expansion of existing duties that do not require an amendment to the job description for this position will not be taken into consideration nor will be used as a justification to request a salary adjustment.

I further understand that final approval and implementation of any adjustment is subject to relevant and applicable Cook County ordinances, County Budget Resolutions, CCHHS Personnel Rules, this policy, CCHHS' Employment Plan, etc.

No Political Consideration Certification

I certify that I am aware that I am strictly prohibited from conditioning, basing or knowingly prejudicing or affecting any term or aspect of CCHHS employment or hiring upon or because of any political reason or factor or knowingly inducing, aiding, abetting, participating in, cooperating with or threatening any act which is proscribed above. I certify, under penalty of perjury, as provided by the law that, to the best of my knowledge, Political Reasons or Factors did not enter into any Employment Actions taken with respect to this position or any related Employment Action. I understand that failure to comply with the above prohibitions may result in sanctions, including disciplinary action up to and including termination and may subject me to criminal prosecution.

| Requestor: | | | |
|---------------------------|-------------------------------------|--------------------|--|
| Name: | | | |
| Signature: | | Date: | |
| | | | |
| CCHHS Chief Human Reso | ources Officer's Review and Approva | al or Denial: | |
| | Approved | Denied | |
| | | | |
| The request is approved a | and the CCHHS HR recommended sal | ary adjustment is: | |
| From: | | To: | |
| The request is denied bes | | | |
| The request is denied bec | ause. | | |
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| | | | |
| Name: | | | |
| Signature: | | Date: | |
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| CCHHS Chief Executive Officer's Final Review and Approval or Denial: | | | | | | |
|--|-----------------------------|--|--|--|--|--|
| Approved Denied | Adjusted as indicated below | | | | | |
| The request is approved with the following changes / mod | ifications: | | | | | |
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| The request is denied because: | | | | | | |
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| Name: | | | | | | |
| Signature: | Date: | | | | | |