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February 18, 2020

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11TH EPO SEMI-ANNUAL REPORT

Dear Ms. Carey and Inspector General Blanchard:

This is my 11th semi-annual report issued pursuant to Section IV.C.2 of the Cook County Health (CCH) Employment Plan (Plan). This report covers my office's training, monitoring, auditing, and investigative activities from July 1 through December 31, 2019.

TRAINING

In previous reports, I have extensively outlined the multiple Plan training sessions that my office conducts in conjunction with Human Resources (HR); they are: (1) Employment Plan Training [overview for all staff]; (2) Employment Plan Interviewer Training [for management and leadership]; (3) Supplemental Policies & Procedures Training [for management and leadership]; and (4) HR Annual Plan Training [HR personnel only]. With the exception of the HR Annual Plan Training, all trainings are provided online annually after all managers have been initially trained in a classroom course.

The following chart outlines the classroom trainings conducted by my office during this reporting period:

	Number of Sessions	Employees Trained
Interviewer/Hiring	7	42
Supplemental Policies	6	36
HR - Annual	4	39

In my last report, I noted that the Discipline Policy training will segregate from the other Supplemental Policies and become part of a multipart training initiative centered on creating a Just Culture.¹ This initiative is meant to provide management tools and education on engaging all staff in

¹ See Marx D. *Patient Safety and the Just Culture: A Primer for Health Care Executives*. New York, NY: Trustees of Columbia University; 2001.

creating a safe environment and culture to foster patient and employee satisfaction within CCH. We trained three departments for the pilot in November to test and improve this new approach; implementation began in those departments late December. Management was highly receptive to the training and approach. Though implementation has been slow, we anticipate a full CCH roll out by the end of 2nd quarter, 2020. Once that occurs, the Discipline Policy training will be integrated with the Just Culture and Accountability training.

MONITORING

Hiring

During this reporting period, HR worked approximately 400 requisitions (sometimes representing multiple vacancies per requisition)² and there were 22,466 applicants for those posted positions. Of those approximately 400 requisitions posted, my office monitored (in various and often multiple stages) 40% of those.

General and Actively Recruited Positions Hiring

My office monitored approximately 206 General and Actively Recruited hiring processes this reporting period. This accounts for roughly 38% of the posted requisitions. We monitored 118 postings; 13 validation (screening) processes; 39 interviews; 36 selection meetings; and 85 Decisions to Hire (DTH). However, when we removed the duplicate requisitions that may have been monitored across various processes, in all we monitored 150 requisitions this reporting period. From the processes which we randomly selected to audit and monitor, only two had an identifiable Plan violation;³ one at the interview stage and one at the DTH stage.

The observed interviewing error also happened to be a technical violation of the Plan. The Department did not get HR approval for the interview questions utilized during the interviews. The Plan requires an interview panel to use HR-approved questions. After a full audit of the file was conducted, it was determined that the questions used had been approved in the past by a former employee; however, under the current HR leadership, a few of the questions would not have been approved. Despite poor wording and lack of adherence to the Plan, there was no detrimental impact by using those questions. Therefore, the process advanced without further concern and the department was educated on the appropriate interviewing protocols.

Unfortunately, we still observe that many departments struggle to conduct interviews comfortably and efficiently. These are not Plan errors or concerns, but misconceptions the panel members hold that prevent them from executing interview and selection processes proficiently. The most common misconception is that the panel cannot ask follow up questions once the Candidate responds to an HR-approved question. Not only are follow up questions allowable, they are encouraged. In addition, we find that panel members are working through the selection process appropriately, but they fail to document those decisions and discussions accurately. Based on these observations, I and the HR leadership are crafting ways to dispel these myths through more robust training courses.

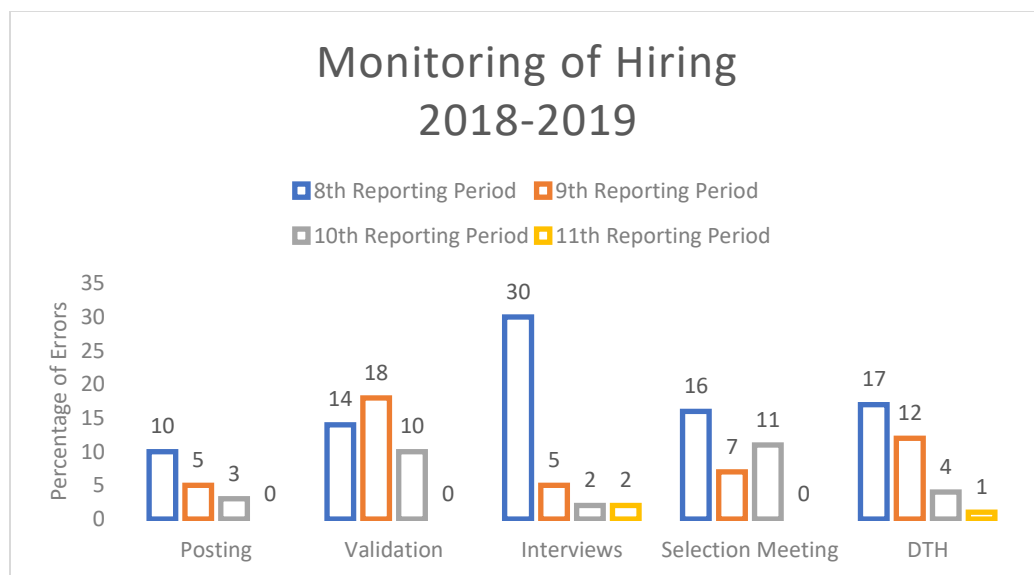
² This number represents the requisitions publicly posted during our reporting period; however, it does not represent the number of requisitions worked during that same time frame; that number is closer to 390. In addition, this number does not represent the number of positions HR worked to fill during this same time frame, as many vacancies may be associated under one requisition number.

³ This number does not include the violations for which Non-Compliance Notices were sent when HR or my office noted a technical violation of the Plan.

The DTH error consisted of missing documents in the packet. Although the Candidate interviewed was not selected for that particular position, all of the required documents such as official transcripts and proof of training were not included with the packet. This error had no practical impact on the position and was corrected in future packets from this same department.

Our monitoring data noted above does not show the proactive involvement of CCH leaders in ensuring compliance. Often, managers and leadership seek guidance throughout the hiring processes from HR or my team. In fact, I attribute the decrease in identified errors during our monitoring processes to HR’s attention to detail and improved outreach to the Hiring Managers. Nonetheless, when errors were identified by my team, they were corrected immediately by HR or the department, and all of them were corrected before any offer was made to selected Candidate(s).

The chart below shows the progress made over the past two years (2018 and 2019). The continued decline in identified errors is evidence of the hard work all CCH leadership has undertaken to implement the provisions and spirit of the Plan. Most noteworthy is the dramatic decrease in errors during the interviewing and decision to hire processes.



Advance Clinical Position (ACP)

My office monitored 11 different ACP positions during this reporting period. We identified two errors related to these eleven processes. Both errors related to missing documents in the final DTH packets – interview notes from one, application and NPCC in the other. In both instances, the documents were obtained from the Candidates; however, they had been omitted from the packets. Upon follow up, the packets were completed without further deficiency.

Direct Appointments

My office reviews all completed Direct Appointment requests to hire (RTH) pursuant to Plan Section VIII.G.3. This reporting period, the CEO, through HR, submitted six Direct Appointment RTHs. All complied with the Plan requirements.

A similar process is used when the CEO and Board of Directors appoint someone to a Department, Division or Section Chair of the Medical Departments of the Medical Staff (Plan Section VI.B). HR

submitted two Medical Department appointment RTHs this reporting period. Both RTHs complied with the Plan requirements.

Executive Assistants

HR submitted one RTH packet for an Executive Assistant position for the Chief Nursing Officer pursuant to Section X of the Plan. My office did not identify any concerns; it complied with the Plan requirements.

Letters of Recommendation

Plan Section V.C requires that my office reviews all letters of recommendation (LORs) for Political Contacts; and if Political Contacts are identified, that those are forward to the OIIG with a Political Contact Log. This reporting period, my team reviewed two LORs. None of the LORs were from Political Officials or Contacts.

Summary

In sum, although there were occasions when mistakes were made and errors needed corrected during the hiring processes, there was no observed pattern of intentional noncompliance with the Plan. In fact, the checks and balances put in place by the Plan are working well. HR is working with the departments when errors are made and reporting violations to my office when more pervasive or concerning issues arise. In general, our monitoring efforts focus on assisting management in maintaining compliance by providing direction and guidance as the processes unfold, preventing misapplication of the procedures from becoming systemic problems and practices.

Supplemental Policies

Transfers (#02.01.12)

There were three transfer notifications received by my office this reporting period. One of the notifications involved an employee who was also demoted. The business need was adequately justified on the documentation, and there was no concern with any of the transfers. The transfers were compliant with the policy.

Training Opportunities (02.01.13) & Overtime (02.01.14)

All of the NPCCs were obtained by the end of December in compliance with the policies. The audit from this data was incomplete at the time of this report; therefore, it will be discussed in the 12th Report.

Interim Assignment (#02.01.16)

During this reporting period, HR submitted 12 approvals for Interim Assignment/Interim Pay. Six of the Interim Assignment approvals were requests from leadership to extend previously approved Interim Assignments. There was one renewal approval that required correction of the dates and explanation. However, it was quickly remedied and no further issues were noted.

Of the six new submissions, two had technical errors that were quickly corrected (the wrong dates had been listed). In addition, three of the submissions raised concerns for both the Chief Human Resources Officer (CHRO) and myself. One submission was provided to CHRO for approval almost

one year after the assignment was given, and a few months after the assignment ended. The policy did not prevent this, but the CHRO immediately began a review of the policy and proposed several amendments to the Interim Pay Policy (#02.03.01) so that this would not occur in the future.

Soon after a review of the Interim Pay Policy began, two additional submissions were made and approved that highlighted another issue – extension requests were made every six months by leadership, not every three months as required. The CHRO reviewed that provision in the Interim Pay Policy as well. The Interim Pay Policy is currently in its final stages of review. Once that policy has been edited, the CHRO and I will review the Interim Assignment Policy to determine what, if any, edits are required.

Overall, there were no substantive concerns with the Interim Assignment submissions this reporting period. Each of the individuals approved for Interim Assignment were qualified to perform the interim duties. Despite the few technical errors noted during my review, and the more substantive concerns identified by the CHRO which led to a full policy review, leadership and HR are properly utilizing the Interim Assignment Policy.

Demotion (#02.01.20)

Demotions are permitted pursuant to the CCH Personnel Rules and the Demotion Policy (#02.01.20). In order to demote an employee, there needs to be a vacant position available into which the subject employee can be placed; it's based upon poor performance within the current position; and the subject employee must be qualified for the position into which she or he is demoted. I received paperwork for three (3) demotions this reporting period. The first demotion was pursuant to a negotiated settlement with a union during the grievance process. This is compliant with the Demotion Policy as well as the Plan provision which allows for implementation of settlements and awards (Section VII.F).

The other two demotions were performance and qualifications based moves. In one case, the employee was demoted into the position for which she was originally hired. There were no concerns with this paperwork; it was compliant with the policy requirements. Moreover, upon follow up, the employee appears to have adjusted well in the new role.

The second demotion occurred recently. My office was in the middle of auditing the process when the employee resigned to work elsewhere. The former employee's absence has made the audit a little more intricate and difficult; I expect to have a report completed and determination made about this demotion in by the end of the month.

Classification of Grade 24 Positions (#02.01.21)

Whenever a new Grade 24 Position is created, HR is required to perform a market study and make a determination of what the salary will be for the newly created Grade 24 Position. Policy 02.01.21 requires that the CHRO approve all salary determinations and submit the CHRO determination and approval to my office and the OIIG. This reporting period, five (5) Salary Determination forms were submitted. Overall, there were no concerns with the submitted documentation. However, for one position, the salary provided was insufficiently justified. Upon explanation and amended documentation, there were no additional concerns and HR was able to proceed with the offered salaries for these positions.

Salary Adjustments for Grade 24 Positions (#02.01.22)

During this reporting period, there were no new Salary Adjustment Requests for Grade 24 employees. However, as explained in my last report, HR previously submitted paperwork for 99 salary adjustments related to a leadership decision to provide a non-merit based salary increase to non-union management. Of those 99, nine employees received a substantial increase that was not inline with the formula utilized for the others. The OIIG reported (report IIG19-0315) in August that during this salary increase process, nine employees received increases that were not inline with the submitted Salary Adjustment form and formula. In addition, the OIIG determined that five had received increases in 2018 and 2019, therefore, the 2019 increases should be reversed.

Subsequent to the OIIG Report, HR submitted amended Salary Adjustment forms for those individuals outlined in IIG19-0315. The OIIG reviewed these pursuant to CCH Policy 02.01.22, and submitted a Supplemental Report to IIG19-0315, finding that there was insufficient information in the submitted paperwork to satisfy the Salary Adjustment Policy requirements. After a meeting with the OIIG, HR and my office, additional detail was added to the amended Salary Adjustment forms. My review determined that these second amended documents were sufficient to meet the requirements of the Salary Adjustment Policy; CCH was now in compliance with the salary increases for these employees. No further concerns were noted by the OIIG.

Discipline (02.01.15)

Disciplinary Actions:

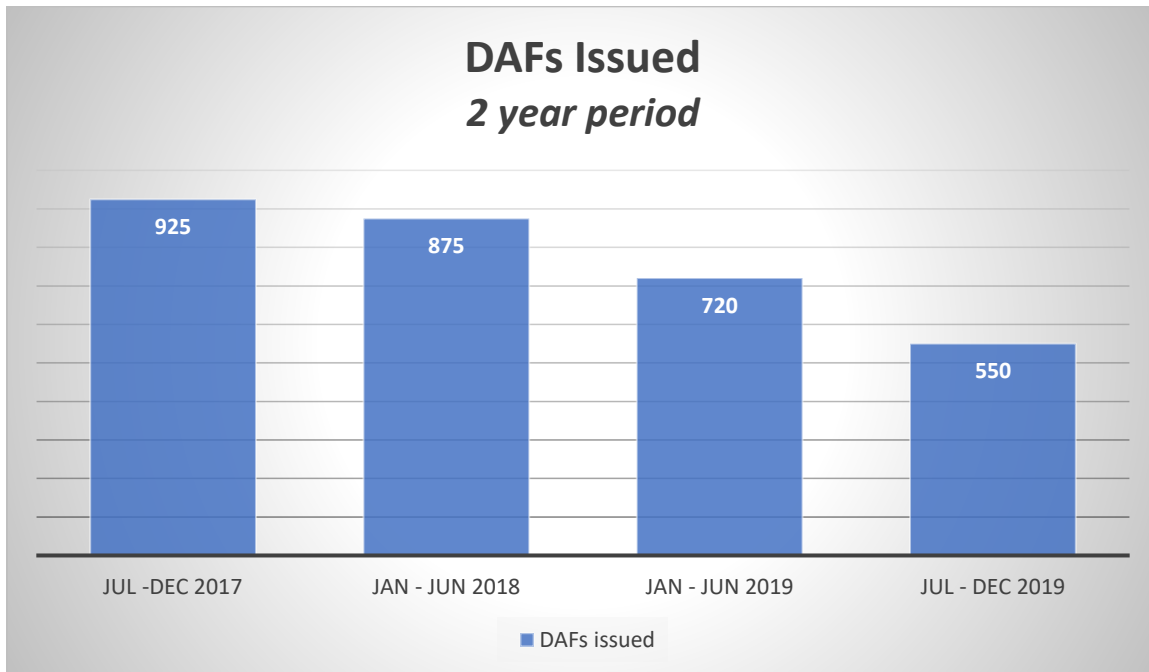
Between July and December of 2019, there were approximately 550 Disciplinary Action Forms (DAFs) issued to CCH staff.⁴ Of these DAFs, approximately 61% were related to tardiness or attendance issues, and 5% were terminations. However, when you account for the fact that 43% of the DAFs were Counseling (which is not a level of discipline under the Personnel Rules or the Collective Bargaining Agreements), there were only 313 DAFs that were directly related to discipline.

During the next reporting period, CCH will transition to using a new DAF currently in a pilot study with three departments. The new DAF will not document Counseling. A separate Counseling Form will be implemented in lieu of documenting it on the DAF. As this transition will be implemented System-wide in the 2nd Quarter of Fiscal Year 2020, I am acknowledging both sets of DAF counts in this report for comparative purposes. In the next report, we will focus on the DAFs only, which will not include Counseling. Consequently, approximately 57% of the 313 non-Counseling DAFs were related to tardiness or attendance issues, and 10% were terminations.

For comparative purposes, I created the chart below to demonstrate the decline in DAFs issued this reporting period. The chart shows the consistent decrease in issued DAFs by reporting period starting with the second half of 2017 (7th Report) and ending with the second half of 2019 (11th Report).⁵ With the imminent roll out of Just Culture initiatives, we expect to see that decrease even further within the next few reporting periods.

⁴ This approximated number was generated for the first time using the Oracle EBS system (EBS). It is an approximate number for two reasons: 1) it is probably that not all of the DAFs from this reporting period were entered by the time the report was run; and 2) the reporting from EBS cannot identify discreet DAFs for the same employee receiving multiple DAFs on the same day if the level of discipline is the same.

⁵ Due to the DAF tracking transition from the Employment Plan Office to Human Resources, I was unable to give an accurate number of DAFs issued in the 9th Report (July 16, 2018 through December 31, 2018).



Ineligible For Hire List:

We made four updates to the Ineligible For Hire List (List) during this reporting period, adding 76 individuals to the list. Of the 76 individuals added to the List, only one was pursuant to recommendations made by the OIIG. A review of the terminations occurs monthly, and a preliminary update of the List is provided to the CHRO. Once the List is finalized, the CHRO reaches out to those added to the List pursuant to Plan Section IV.P and then monitors for any appeals that come through HR. The CHRO received 11 appeals to placement on the List; however, none of the appeals were granted. Each former employee remained on the List.

Some individuals were also removed from the List this reporting period. A total of 17 individuals were removed from the List; four were removed because their time on the List expired. However, 13 individuals were removed after an audit was conducted last May and June. During the audit, it was determined that they were placed on the list only because it was an involuntary separation. That is not the criteria that is currently in use for placing someone on the List. Currently, an involuntary separation needs to occur for a major cause infraction that is more serious in nature, i.e. insubordination, job abandonment, negligent performance of duties, etc. Each of these 13 individuals separated from CCH during their probation, because they were not a good fit. That was deemed an insufficient reason to be placed on this List, and they were removed accordingly.⁶

Audit:

In December, my office completed the first of a series of discipline audits. We audited one of CCH’s larger departments in December, with additional departments to be audited monthly or bi-monthly throughout 2020. The department audited in December had previously been audited in 2017 and 2018. This audit was done to determine if improvements were made in the department’s

⁶ It was also determined during the audit that the erroneous placement on the List had not kept them from participating in any hiring processes at CCH.

implementation of the Discipline Policy, because the previous audits which were completed 1-2 years ago and the department management team had been retrained on this policy in 2019.

The results of the audit were not very promising. Although we have the raw data and review completed, we are currently drafting the final report which will include recommendations and necessary remedial action. In general, two locations were audited – the Stroger Campus and Provident Hospital. Compliance at Provident was significantly better than the compliance at Stroger; this location was 77% compliant with the policy. The one issue noted during the audit was failure to have all of the documents saved with the disciplinary actions. Despite the low volume, the concerns were not as complex and can be easily corrected.

The audit at the Stroger Campus identified multiple pervasive issues. In general, compliance at Stroger Campus was only 32%. There were many issues noted with most of the disciplinary actions; however, the two largest issues were (1) untimely filing of the discipline with HR as required, and (2) incomplete documentation due to missing signatures on the forms. Altogether, these two noted violations made up 77% of the deficient disciplinary actions.

These issues and violations did not go unnoticed by HR. Operations Counsel reached out to my office to suggest retraining this team on the discipline process and policy. Based on the results of this audit, that will be one of the main recommendations to the Department Head. My office will work with HR to ensure a robust training and follow up process is developed to assist this department with the Discipline Policy implementation.

NON-COMPLIANCE NOTICES

When technical violations of the Employment Plan and policies occur and an extensive investigation is unnecessary, my office issues a Notice of Non-Compliance⁷ (Notice) to the manager and Department Head. The Notice alerts management to the issue(s) well as instructions on how to correct or avoid the situation. During this last reporting period, I issued six such Notices sent to two departments.

Half of the Notices were sent for violations of the Discipline Policy. In each of those three instances, Protected Health Information (PHI) was found in the files sent to HR. The Department Head was notified of each of these violations, and instructed to not only remove the PHI, but also to ensure his management team understood what not to include in the discipline documents and files.

The other three Notices were sent to one department regarding failure to complete required Employment Plan Training pursuant to Section IV.E. After the first letter, all of the managers that were deficient in training were able to complete except for one. That one manager became the subject of the next two Notices issued to the department, each noting the manager's failure to attend the training over a period of five months despite significant correspondence and opportunity. The final Notice recommended discipline of the manager and attendance at the next training session. The Department Head applied my recommendation for discipline and ultimately moved to terminate the employee; however, the employee resigned prior to implementation of the termination.

INVESTIGATIONS

During this reporting period, we received 27 new complaints and issued three (3) incident reports. Of the 27 complaints filed, 11 were closed during this reporting period, including eight (8) which were

⁷ These Notices of Non-Compliance were formerly referred to as Violation Letters.

forwarded to other department(s) for handling. In all, 12 cases were closed (including the 11 new complaints); summaries provided below.

New Complaints

EPO2019-35: While reviewing a files for another complaint, my office identified that a particular job classification had different grades, both Grade 23 and Grade 24. We are auditing these to determine if needs to be addressed by HR. *Pending.*

EPO2019-36: Employee filed a complaint that she was harassed by a co-worker and the work environment is hostile. She also alleged that the co-worker made offensive, racial statements toward her. As the allegation was race-based and involved harassment, this was forwarded to the Equal Employment Opportunity (EEO) Director. *Closed.*

EPO2019-37: Complainant alleged age discrimination in the hiring process. After a brief review to confirm the Plan procedures were followed, this was forwarded to the EEO Director for investigation. *Closed.*

EPO2019-38: Allegation that a non-employee was communicating with others that she was a CCH employee and represented CCH. The department at issue reached out to the individual and advised her to stop. After an additional follow up, this file will likely be closed without further investigation. *Pending.*

EPO2019-39: Anonymous complaint by an employee forwarded to my office by the OIIG. Complainant alleged discriminatory hiring practices based on race. Specifically, it was alleged that some individuals in the position were required to have a Bachelor's Degree, when others were not; this was attributed to the race of the individuals that held the position without higher level education. *Pending.*

EPO2019-40: Former employee filed a complaint alleging that she was not allowed to rescind her resignation and was discouraged from filing a grievance by her Director. She ultimately did file a grievance pursuant to her collective bargaining agreement. *Closed.*

EPO2019-41: Employee filed a complaint on the Complaint Hotline alleging that management refused to move her according to her successful shift bid. After a brief inquiry with the department and HR, it was determined that although there was a delay, the complainant did move to the appropriate shift following the successful shift bid. File was closed without further investigation as there was no identified violation of HR policy, procedure or the Plan. *Closed.*

EPO2019-42/**19-012**: Former employee filed a complaint alleging that she was improperly and inappropriately given a one day suspension by her manager. In addition, the Hearing Officer that conducted the disciplinary hearing used the wrong documents when assessing whether discipline was appropriate and at what level. After a review of all of the hearing documents and interviews with the complainant and management, it was determined that there was no policy violation in the issuing of the discipline to the employee. We found that although the Hearing Officer was given a few documents about the employee that were incorrect (related to her job description and job requirements), those documents were not the sole basis for the decision. *Report issued; **not sustained.***

EPO2019-43: An anonymous complaint was filed on the Complaint Hotline alleging that the Department Head was (1) harassing employees which led to many resignations; (2) invading

employees' privacy by using cameras in the department; (3) favoring one particular race in the department; and (4) recently hiring two individuals that did not meet minimum qualifications for the positions. HR and Leadership are looking into the harassment concerns and racial favoritism allegation. Currently my office is looking into the allegation about recently hired employees not meeting the minimum qualifications for the position into which they were hired. *Pending.*

EPO2019-44: Employee filed a complaint to the Illinois Department of Human Rights that was then forwarded to me and our EEO Director once received by the organization. The allegations were hostile work environment created based on age, gender, and race discrimination; and retaliatory discipline based on age, gender and race factors. The EEO Director advised he would handle this case. *Closed.*

EPO2019-45: Anonymous employee complaint filed with my office, EEO Director, the CHRO, and the CEO. Complainant alleged that a supervisor was creating a hostile and "toxic" work environment. Complainant provided an example but did not provide sufficient detail about who was involved in order to look into one of the matters. The other allegations were allegations that the supervisor was not performing her job or "fakes" it by demanding more from her staff to do her work. Deferred to EEO Director for case management. *Closed.*

EPO2019-46/**19-013**: This case came to us from three different complainants: a Senior Leader, HR, and a former employee. The former employee reached out to the Senior Leader about concerns with a position that was not offered to her by HR after she received an "offer" from the department. The Senior Leader immediately forwarded this to our office to review. Shortly thereafter, HR forwarded similar information after HR spoke with the former employee, and in addition, provided information that the former employee may have falsified her application materials recently. The concern arose when the former employee refused to provide contact information for one of the former employers to conduct an Employment Verification. Finally, the former employee also filed a complaint (through the Senior Leader) about unfair hiring practices and her inability to get an interview for jobs she previously held at CCH. This case is currently under investigation. *Pending.*

EPO2019-47: Information forwarded by HR that an employee (Employee 1) may have intimidated another employee (Employee 2) that applied to and was selected for a position within Employee 1's department. We are currently looking into the matter. *Pending.*

EPO2019-48: Manger filed a complaint with my office alleging her supervisor was treating her differently based on her national heritage. She specified discriminatory remarks were made both publicly and privately, and alleged that her supervisor was aggressive and intimidating during one to one meetings. Based on the information and documentation provided by Complainant, this matter was referred to the EEO Director to look into the alleged national origin discrimination and work environment. *Closed.*

EPO2019-49: Employee filed a complaint alleging that her supervisor was unjustly giving her a larger work load, creating harsh working conditions, and harassing her. As an example, Complainant advised that management was threatening discipline. After looking into the discipline allegations and finding no unwarranted discipline was issued, the matter was referred to the EEO Director to look into the harassment and work conditions. *Closed.*

EPO2019-50: HR forwarded information to my office after learning that a recent hire may have been placed into the wrong position with the department. Specifically, it was alleged the department refused to move the employee into the role to which she was hired. This investigation is in progress. *Pending.*

EPO2019-51: HR forwarded information from an employee that indicated a department Director was moving individuals into different roles and positions within the same department without following CCH policy, specifically the Transfer Policy. This investigation is in progress. *Pending.*

EPO2019-52: Employee alleged that her manager was “doctoring” time cards to “avoid disciplining” another employee. This matter is currently under investigation. *Pending.*

EPO2019-53: Employee filed a complaint that her management was harassing her and not following proper procedures with respect to discipline. The employee also filed a grievance, which was handled through the CBA grievance process. As such, this case was closed. *Closed.*

EPO2019-54/**19-014**: A group of employees filed a complaint with my office and the OIIG alleging political discrimination, improper use and awarding of overtime, harassment, and creating a hostile work environment. The employees also alleged that HR and leadership was failing to address their concerns. My office has coordinated with the OIIG to look into this matter. *Pending.*

EPO2019-55/**19-015**: An employee and a manager brought a concern to my office that the Department Head was interfering in the hiring process when there was no authority to do so. My office has completed its investigation and the file is pending a report. No Plan violations were identified. *Pending report.*

EPO2019-56: Employee filed a complaint that a manager was demonstrating prejudicial behavior toward students; this prejudicial behavior was based on national origin. The matter was referred to the EEO Director and Department Head to work with the employee and look into this further. *Closed.*

EPO2019-57/**19-016**: HR and an employee brought concerns to my office that the employee was being worked out of classification and licensure. In addition, the employee also alleged that the department was engaged in unfair hiring practices by hiring Candidates not qualified for promotion. The investigation is complete and the report is pending. *Pending.*

EPO2019-58: HR reported they received a report that a manager was promising promotions and or pay increases to her staff. This matter is currently pending. *Pending.*

EPO2019-59/**19-017**: Employee alleged unfair pay practices based on race. The matter was referred to the EEO Director for review and investigation. However, my office is also investigating as it is within the same department as other allegations of racial hiring as well as hiring unqualified individuals. Investigation is pending. *Pending.*

EPO2019-60: Employee alleged that the manager in her department is only hiring individuals of one national origin. Specifically, the allegation was that the last 10 individuals hired were of the same national origin as the manager. The matter was referred to the EEO Director for investigation. However, based on other complaints received about this department, my office did a preliminary inquiry by pulling recent hiring records from the department. With the cooperation of HR, it was identified that the employees in that department hired over the last five years were diverse in ethnicity, more than half of which were not the same ethnicity as the manager. No further investigation was warranted. *Closed.*

EPO2020-1/**20-001**: A Department Head filed a complaint with my office that a supervisor in the department obtained interview and selection process information when that supervisor was not authorized to receive such information. Specifically, the supervisor was a Candidate for promotional

opportunities and had been interviewed for those positions. This matter is pending investigation. *Pending.*

Reports Issued

My office issued three (3) incident reports this reporting period. All three were not sustained. For the one report, despite the not sustained finding, I made recommendations about how the department should proceed in the future to avoid the appearance of a Plan violation. HR adopted my recommendations as outlined in the report. Below is a summary of each:

18-009: Employee filed a complaint with my office alleging that HR took away vacation time which she termed was a “condition of her employment.” The complainant provided information that when she was offered her position, she was provided a document and told she would receive five weeks of vacation. Because of the low pay offered, this was a deciding factor in whether she took the position. She then promoted into another position at approximately the same time that CCH transitioned to a new Time and Attendance system. During a review of that roll out of the new time system, it was identified that several employees, including the Complainant, were coded incorrectly and receiving too much vacation accrual each pay period. Each was alerted, including the Complainant, and the correct vacation accrual was put into the system. Complainant alleged that she was told she would need to “return” the excess vacation time she accrued. My office found that through a system error, the Complainant was given the incorrect (increased) vacation accrual. She was a former employee, and when she rejoined CCH, the system recognized her previous employment and provided her the CBA allotted vacation accrual. CCH corrected this when it was identified through a random audit of the system. Additionally, my office determined that Complainant was not required to “return” the excess vacation she may have accrued or utilized while she was receiving the additional vacation time. Finally, my office determined that the method of offer to the Complainant did not violate the Plan as alleged. She initially received a verbal offer and the Plan requires a written offer. However, her file contained the signed written offer that was executed in accordance with HR practice. Allegations not sustained; HR did not violate any policy of the Plan when it reduced Complainant’s vacation accrual in compliance with the Personnel Rules. ***Not Sustained.***

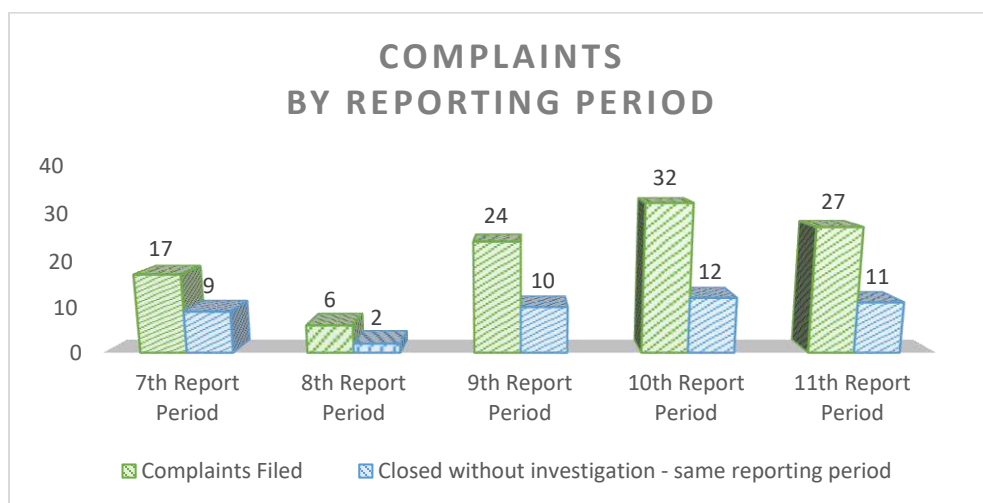
19-009: A Senior Leader brought concerns to HR and my office that a hiring process for a manager position within that department may have been compromised. Specifically, the Senior Leader received information that an interviewed Candidate may have been given access to the interview questions in advance of the interview. My office investigated and found that although there was opportunity, the hiring process was not compromised and the selected Candidate was not only qualified for the position, but she was able to answer the interview questions so well due to her current studies in that area. However, because there had been opportunity for the Candidate to find or review the interview questions in advance (she shared office space with the Hiring Manager), we recommended that leadership in the department receive reminders on how to maintain the integrity of the process and to keep all documentation related to Candidates and hiring under lock and key in shared spaces. In addition, I recommended that HR work with the Senior Leader to determine if a second interview would be necessary to dispel any doubts about the Candidate’s qualifications. ***Not Sustained.***

HR Response: Despite the not sustained finding, I made recommendations about how the department could move forward and additional training was needed. HR agreed with the recommendations and worked with the Senior Leader on how to coach management within that area on how to keep confidential matters in shared spaces. In addition, HR agreed to work with the Senior Leader on the next steps for filling the vacancy.

19-012: See information provided above for EPO2019-42/19-012. **Not sustained.**

Summary of 2019 Investigations

In 2019, my office saw a marked increase in complaints filed with or forwarded to us for review and investigation. The graph, below, shows the increased volume of complaints handled by my office during the last five reporting periods. The case and investigation closure rate stays relatively low as the changes to the Plan evolve and our focus is on training and re-education. However, to remedy this, I was able to recruit a Program Manager that began at the end of November 2019. Her initial focus will be on the investigations and closing cases in a timely manner. To assist her and the rest of my staff with this, we will begin using a new case management system in 2020 which automates much of what is currently a manual process for tracking case and investigation progress.



Over the course of 2019, my office received a total of 59 complaints, 26 of which were closed by the end of this reporting period. The average age of the 2019 complaints was 123 days. By far, the most frequent complaint involved the hiring process, mostly centered around Candidate screening or Candidate selection (often lack thereof). This was not surprising, as the screening process is often a mystery to the applicants, and the selection process is subjective. Hiring complaints accounted for just under half of the complaints received (42%).

The next largest category of complaints centered around discipline and the improper issuance of it. Discipline accounted for 17% of the complaints filed in 2019. Of course, in addition to the cases we reviewed or investigated, we also referred 11 complaints to the EEO Director. This accounted for 19% of cases in our office; however, we did continue to look into two of those based on other allegations made.

The chart below provides a further breakdown of all 2019 complaints by allegations:

Category	Number of Cases
Hiring	25
Discipline	10
Harrasment	5
Pay issues	3
Transfers	3
Retaliation	3
Discrimination	2
Working out of Classification	2
EEOC charges	2
Overtime	1
Work Place Violence	1
Other	2

Because we only closed 26 cases of the 59 filed in 2019, 33 cases will carry over into 2020. In addition, there are 21 open cases that carried over from 2017 and 2018 that need to either have investigations completed or reports issued. This brings the total number of cases carried over into the next reporting period to 54. Much of the inability to close out cases has been due to staff attrition. With a fully staffed office, I expect that not only will we be able to stay on target as we did in 2019 (with an average case age of 123 days), but also finally close out many of the older files that are awaiting final reports.

Finally, we have noticed that there has been a slight decrease in the percentage of cases with sustained findings. Of the 26 cases closed in 2019, seven (7) were full investigations with Incident Reports issued pursuant to Section IV of the Plan. Of the seven closed cases, only two (2), or 30%, had sustained findings. This is on par with past years where an average of 34% of the findings for closed cases are sustained. Some years have been higher, but only one year was lower. We expect that as we continue to close out our backlog of cases, that average percentage will decrease.

EMPLOYMENT PLAN AMENDMENTS

Plan Exhibit Amendments

My team works with HR on a monthly basis to review the different lists associated with the Plan. We focus regularly on the following exhibits: Exhibit 1 (Actively Recruited Position List), Exhibit 5 (Direct Appointment Position List); and Exhibit 13 (Advanced Clinical Position Exhibit List). During this reporting period we made the following updates to these lists:

Exhibit 1: Four (4) updates were made to this list – once in July, August, October and December. We added 50 new positions to the list, several of which were creating a bilingual requirement for positions already on the list. In addition, we created several new positions related to grants awarded to CCH that were previously managed outside of CCH by Hektoen Institute. Once those positions were brought into CCH, new positions needed to be created to fit those roles.

Exhibit 5: Three (3) distinct updates were made to this list – once in August and twice in November. Six new positions were added during this period, and seven positions had title and/or job code changes. Of the six new positions, two of them replaced positions which were subsequently removed.

Exhibit 13: Five (5) distinct updates were made to this list – twice in July, and once each in August, October and December. Overall, we added sixteen new nursing and physician positions to the list consistent with the requirements of the Plan.

Section V. General Hiring Amendments

In my last report, I described two General Hiring Process amendments that were preliminarily approved by the OIIG: a preferred qualification screening process, and a telephone screening process. These were described in detail. During this last reporting period, we were able to finalize the preferred qualification screening process, but needed to refine the telephone screening provision. In conjunction with HR, we were able to finalize the telephone screening provision and officially add it (along with the preferred qualification process) to the Plan in January.

In addition to these changes which began last spring, we proposed two other amendments to the General Hiring Process: a vendor preference process and an intern/extern preference process. The vendor preference process permits a Department Head to request that any vendor, contractor or agency worker at CCH get preference during the screening process over external applicants under certain conditions. The first condition is that the applicant must have worked for CCH for a minimum of 12 months in that department in a function that is directly related to the vacant position. In addition, the applicant must have done that work at some time within the last 12 months prior to application. Second, it requires the approval of both the CHRO and the Employment Plan Officer (EPO). Finally, if the vendor works at CCH through a sole-source contract, this must be identified during the request process and the OIIG must be notified.

CCH was able to test out this new provision when some grant funded positions were transitioned from Hektoen Institute to CCH. The Department Head submitted six requests for six different positions. The CHRO and I approved five of the six. The sixth request was denied because the contractor was two months shy of having worked at CCH for 12 months in that position. Nonetheless, this contractor was considered and interviewed for the position due to the low number of applicants.

The intern/extern preference provides an opportunity for any intern, extern or fellow that worked at CCH within the last 12 months to be excluded from the randomization process for external applicants. The intern/extern must have completed a minimum of a 3 month internship to qualify, and this preference also requires the approval of the CHRO. We currently do not have any General Hiring positions posted to which a CCH intern/extern preference has been requested. Nonetheless, this preference provides CCH the opportunity to get a return on its training and financial investments made in the interns and externs that rotate through CCH. It is unlikely this preference will be utilized often, as most of our fellows and interns are physicians who are permitted to go through the Advanced Clinical Position process instead of General Hiring.

Hiring Fair Process

In my last report, I noted that a new hiring process was approved and we were in the midst of testing out that new process – a Hiring Fair. We conducted a Hiring Fair for Operation Room (OR) Nurses on September 5, 2019. The process was very successful. CCH was able to recruit more experienced nurses as well as new graduates to consider CCH as a place of employment. Not only was the Nursing Department able to fill of of the entry level nurse vacancies in the OR through this fair, but due to the large response, they were able to rank a large number of qualified Candidates to draw upon should additional vacancies become available.

The process was not without its lessons learned. We were able to identify small ways to make the entire process more efficient during the check in, application, and interviewing processes. We plan to put these in place during our next hiring fair, whenever that may occur. It is not a process that can be used regularly or without careful consideration to the needs of the organization. It is timeconsuming and requires many resources. Nonetheless, I am encouraged by the positive feedback received from applicants and the department participants.

SUMMARY

During this reporting period, HR and my office developed and received final approval for several Plan amendments which will require concerted and extensive education over the next few months. HR completed its training on the Plan amendments in December; next, management will be educated on what new preferences and process are available, as well as how to utilize them.

Training will be a large focus over the next few months as we roll out new disciplinary action forms with the Just Culture initiative, educate management on the Plan amendments now available to them, and revamp the current trainings to address the errors and mistakes that are consistently observed during our audits and monitoring efforts. There will be many challenges in 2020, but I am excited to see how these new provisions, revised trainings, and the Just Culture initiative impact CCH's ability to hire new talent and engage the current CCH workforce.

Sincerely,



Carrie L. Pramuk-Volk

cc: CCH Board of Directors *via* Deborah Santana, Secretary of the Board, CCH
Jeffrey McCutchan, General Counsel, CCH
Kent Ray, Associate General Counsel, CCH
Barbara Pryor, Chief Human Resources Officer, CCH
Andrew Jester, Office of the Independent Inspector General