COOK COUNTY HEALTH & HOSPITALS SYSTEM

Toni Preckwinkle
President
Cook County Board of Commissioners



Cook County Health & Hospitals System Board Members

M. Hill Hammock • Chairman

Commissioner Jerry Butler • Vice Chairman

Lewis Collens

Ric Estrada

Ada Mary Gugenheim

Emilie N. Junge

Wayne M. Lerner, DPH, FACHE

Erica E. Marsh, MD MSCI

Carmen Velasquez

Dorene P. Wiese, EdD

John Jay Shannon, MD Chief Executive Officer Cook County Health & Hospitals System

September 15, 2015

Dr. John Jay Shannon Chief Executive Officer Cook County Health & Hospitals System 1900 W. Polk Street, Suite 220 Chicago, Illinois 60612

Mr. Patrick M. Blanchard Independent Inspector General 69 W. Washington Suite 1160 Chicago, Illinois 60602

Ms. Mary T. Robinson Compliance Administrator 69 W. Washington, Suite 840 Chicago, Illinois 60602

> Semi-Annual Report September 2015

Dear Dr. Shannon, Inspector General Blanchard and Ms. Robinson:

This is the second semi-annual report issued pursuant to Section IV.C.2. of the Employment Plan (Plan) filed on October 23, 2014 on the heels of the Plan's anniversary. This report will cover the six (6) month period from March 1 through August 31, 2015, describing any auditing activities, violations of the Plan, recommended remedial actions and corrective action by Cook County Health and Hospitals System (CCHHS) when necessary and as appropriate. Due to the nature of activity during the past six months, this report will focus on staff training activities and touch on some of the trends or recurring issues identified through the minimal monitoring during this time period. In addition, several investigations were started and/or completed during this time frame with reports pending.

EMPLOYMENT PLAN STAFF

Much of the activity reported here, particularly the training efforts, would not have been possible without the addition of initially two employees in March, then a third in June, to my team. Dr. Shannon believed it was important to provide me with staff to sufficiently oversee and execute the provisions of the Plan for an organization of this size. Each of my Employment Plan Analysts as legal training along with significant group training and investigative experience to draw from as they assist me in my monitoring, training, auditing and investigating duties. Although this summer the focus was on training, they will begin to engage in more of the auditing and investigative/reporting functions required by my office.

TRAINING

My first semi-annual report explained that I would roll out face to face training in three (3) phases: Human Resource (HR) training which consists of a three (3) part series totaling approximately eight (8) hours of training; Supervisor/Interviewer training which consists of a two (2) part series totaling approximately 3.5 hours of training; and the Employee training which has a compliance piece as well as an overview of the hiring process as required by the Plan that lasts approximately one (1) hour. In total, there were 206 face to face training session held between March and August.

HR remains 100% in compliance with the training mandate of the Plan which includes a requirement that each HR employee receive training within 90 days from his/her start date. During this reporting period, I conducted four (4) face to face HR training sessions over a period of seven (7) days for new employees and contractors in HR.

Interviewer/Supervisor training is a constant, ongoing effort as new supervisors or interviewers are identified, hired, or promoted into non-union positions which require them to participate in the hiring process. I have personally trained 492 employees to be eligible to make decisions in the hiring process since last autumn, several of which no longer work for CCHHS. During this reporting period, I conducted a total of 24 face to face Supervisor/Interviewer training sessions, with two sessions scheduled for each month to capture newly hired, promoted or transferred employees who are now eligible for this training.

In addition to the continued efforts to conduct face to face trainings for HR and Supervising/Interviewing employees, in May, I rolled out a massive training effort to ensure that all CCHHS employees received training as required by the Plan. This training consisted of compliance training (information about the Shakman Consent Decrees, Cook County Ordinances requiring mandatory reporting of suspected or identified unlawful political discrimination and political contacts) as well as an overview of what is required of HR, my office, and all staff, applicants and candidates during the hiring process. Between mid-May and mid-August, my office trained approximately 5,500 employees during 150 face to face training sessions held at all three of the main CCHHS campuses (Stroger Hospital/Main, Provident Hospital, and Oak Forest Health Center) on all three shifts (day, evening and night). In addition to the three main campus training sessions, my staff and I traveled to many of the CCHHS ambulatory (ACHN) clinics throughout Cook County to train staff face to face to ensure a minimal disruption to patient care. As of August 31, 2015, 94% of the over 6,200 CCHHS staff had completed training with additional trainings scheduled each month to capture new employees. This monumental achievement would not have been possible without the direct support of Dr. Shannon, HR (by providing administrative support at the beginning of the training roll out), and the Department Heads – who played roulette with the schedules in order to accommodate this training effort.

Future State

Although this training initiative was monumental due to the immediacy of needing the employees trained, I am pleased with the results of the face to face trainings. This training method was (and remains) important to ensure accurate understanding of the massive changes and cultural shift that the Plan requires, as well as to more efficiently address the many questions and concerns that implementing significant hiring policy changes trigger for both the staff who may move through a hiring process, as well as the supervisors and interviewers that have to implement the procedures. For the employees unfamiliar with past Cook County hiring practices, it is important to explain in person why such regulation and detailed procedures are necessary. There were some employees not very receptive to the information about the Plan requirements, but the vast majority of employees, staff and supervisor alike, were grateful for the

structure, able to applaud the subtle and not so subtle changes in HR and in hiring new or former employees, and generally pleased with the progress CCHHS has made since the *Shakman* litigation began in 1969 often sharing direct experiences which reinforced the development of some Plan provisions.

During the next reporting period, there will be several additional training initiatives to work on and implement. Those include training all Supervisors on the Policies and Procedures Manual currently under development which will non-hiring employment actions such as discipline, overtime, transfers and interim assignments; continuing face to face trainings for all new employees on the Plan; and working with Corporate Compliance to integrate the Plan training into the developing Learning Management System (LMS). By integrating and utilizing the LMS, my office will more easily schedule, track and monitor compliance with the training requirements of the Plan by allowing easier access to the managers and employees to training schedules. The LMS will allow for more efficient tracking of employee compliance with the training.

The final training initiative to begin during the next reporting period is to create online training modules to meet the annual training requirements of the Plan. By incorporating the annual Plan training with CCHHS annual training modules, we can minimize patient care disruption and allow for easy access to the training materials. The current goal is to implement the online annual Plan training in autumn of 2016.

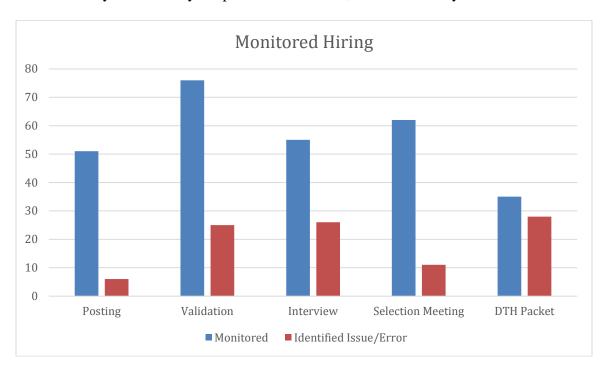
MONITORING/AUDITING ACTIVITIES

Due to the massive training initiative implemented this past spring and summer, I took a slight step back from many monitoring efforts. It was important to sacrifice active monitoring for training, because ensuring the staff was educated on the Plan and its provisions was considerably more important. My staff and I believe we have provided a solid foundation from which HR will now be able to efficiently implement many of the Plan provisions over which HR did not have direct control when initially implementing the Plan in October and more fully in February as described in my first report.

My first report identified that HR was implementing many of the Plan provisions of which it has control. This included notification to the Compliance Administrator (CA) of posted requisitions, validations, upcoming interviews, meetings and selections, as well as hiring process results in the form of Decision to Hire (DTH) packet. Initially, several provisions were not rolled out such as Veteran's Preference during application validation, Internal Candidate Preference for non-union positions, validating discipline for current or former employees, utilization of an Ineligible for Hire list, and a slow roll out of the Actively Recruited Positions process. HR has since rolled out Veteran's Preference during application validation (June 2, 2015), and fully rolled out the Actively Recruited Positions process for all eligible positions (end of August 2015). CCHHS is much closer to implementing the Ineligible for Hire list and the Internal Candidate Preference for non-union positions, but significant work is still needed before CCHHS can fully implement the discipline validation provisions of the Plan.

The CA continues to monitor CCHHS' efforts to implement and consistently adhere to the Plan provisions and guidelines. However, my staff has also done a fair share of monitoring in spite of the significant amount of time spent training. This was due to my belief that training not only occurs during a scheduled training session, but also in real time while the procedures are occurring within HR and the departments. I have broken down the amount of monitoring my staff has accomplished during this reporting period, and I will supplement with some examples of common practices, mistakes, or issues that arose during our monitoring efforts. I anticipate a more robust accounting of monitoring activities in my next report.

During the last six months, my staff has monitored 51 posted requisitions ("postings"), 76 validations which include randomizations and Applicant Review Panel (ARP) meetings, 55 interview processes, 62 selection meetings, and reviewed or audited 35 DTH packets. The graph below identifies the ratio of concerns or errors that may have been identified during each process. Whenever a concern, issue or error was identified, if feedback and/or redirection was not given immediately to the employee, it was often communicated shortly thereafter by telephone conversation, email or visit by me.



Posting

As the graph indicates, there were not a significant number of errors identified when simply reviewing posting language. Many of the identified errors stemmed from inaccurately transferring the minimum qualifications listed in the job description onto the posted requisition. Another frequent error was the listed minimum qualifications did not match the prescreening questions that the applicants must answer to move forward in the process. In one case when this occurred, the inaccurate significantly altered the applicant pool because it required the applicants to have a certification that was not actually necessary for the position. Another common result with this error was that the posting allowed for more applicants to make it through to the validation process, thus not actually impacting the applicant pool. The safeguard of the validation process and requiring that applications be reviewed by HR prior to moving a candidate forward to interview ensures that the correct minimum qualifications were screened. In each of these examples, as soon as the recruitment team was alerted to the error, we were able to determine the best course. Often, the best course of action required a re-posting of the position for public solicitation of applications to ensure the integrity of the Plan. And sometimes, we all agreed that the validation process was able to cure the defect. In all of the communications with HR with these issues, the HR employees were very receptive to the information and in formulating corrective action.

Validation

The graph identifies that approximately one third (1/3) of the monitored validations had some concern, error, or question that arose. Whenever there is a question about why an applicant was made eligible or ineligible, or how a specific minimum qualification was assessed, the recruitment team member overseeing that process was cooperative with my inquiry. A few examples of issues observed: applicants moving forward in the process did not meet the minimum qualifications; HR failed to carry over applicants from the internal application period to the external application period; and applicants validated out of the seniority order. The Plan allows for me to make recommendations which modify the final interview lists based on my review as long as I put those recommendations in writing. Each time I recommended that an applicant be removed from an interview list or added to an interview list, HR was receptive and complied with that recommendation. However, in some cases, after further discussion of the application review concerns, deference was given to the recruitment team when their determinations were reasonable and in line with accepted practices.

I mentioned in the preceding paragraph that sometimes HR failed to carry over applicants from the internal application period to the external application period. This would occur when a position needed to be posted publicly, but only internal applications were accepted for a period of time in accordance with a Collective Bargaining Agreement (CBA). During this "internal" posting period, often external applicants would apply to the position, because our system does not allow us to filter out external applicants efficiently. As a practice and internal policy, HR does not automatically disqualify those external applicants who applied during the wrong posting period, but will leave their applications in an available status to allow for review once the external posting period has begun. There are several technical (I.T.) related reasons that this may occur, but when they are identified by my team, HR quickly corrects the error and validates the applicants as required by the Plan.

Interview

Approximately half of the interviews monitored identified some error or concern about how the process was implemented. In each case that a concern was observed, my analyst would either immediately work with the interviewing panel to correct the error or concern, or bring the matter to me so that I could work with the panel or work with HR on correcting the panel behavior. Monitoring the interviews and selection meetings is an additional training avenue that we hope to utilize more often as it yields very immediate and lasting results when corrections to the implementation of the interview process is necessary. The most common concern identified during the interviewing process by my team was that panelists were rephrasing the interview questions. The Plan requires that the interview panel ask each candidate the same, HR approved interview questions during the course of that interview process. If questions are rephrased, it can alter the meaning of the question, thus presenting information that cannot be compared to other candidates' responses or equally assess a particular qualification. The Supervisor/Interview training session focuses heavily on the interviews and interview questions. So, although follow up questions are highly encouraged, rephrasing or altering interview questions is prohibited.

When such interview question rephrasing occurs, this usually merits a follow up during another hiring process or set of interviews to ensure that the issue does not persist. My staff and I have observed that once this issue is identified in an active interview process instead of a training session, it is more easily understood and results in changed behavior. For the most part, the interview panelists are very receptive to the feedback and correct the errors in the future. There are even some hiring managers and panelists that request the presence of my staff or I to attend the interview in order to give feedback and assist them through a process that is often significantly different from what they are accustomed.

Selection Meeting

When my staff and I attend selection meetings, we usually assist the department in working through the steps of the new process. There is a lot of paperwork that goes into the selection process, and we provide guidance when in attendance, often solicited, sometimes not solicited but necessary to ensure proper implementation of the Plan. Proper notice is one of the biggest issues we run into during selection meetings, the second most frequent problem is that the panel will forget to take notes as required about the selection meeting. HR assists me and my staff in reinforcing both the notice requirements (48 hour advance notice of any selection meeting) as well as following up with the departments about a lack of selection notes to support the decision made. In fact, HR catches many of these concerns prior to review by my office, and if notes were not taken during the selection meeting, the recruitment team will have the hiring manager or lead panelist prepare a summary memorandum to assist in explaining the results of the selection. The corrective action taken when appropriate notice was not taken is often a detailed review of the entire process by my office, but once in a while it will result in scheduling a second selection meeting to ensure that the results of the interview and selection process are accurately recorded.

DTH Packet

DTH packet review often leads to identifying some paperwork that was inadvertently omitted, signatures forgotten, additional explanation or clarification about the results, and once in a while, concerns with the job description and posting arise at this stage. It is not surprising that as HR and the departments become accustomed to the new processes and significant amount of new paperwork that errors or missing information will be found upon final review. These are usually easily and quickly corrected by discussion between HR and the department, or less common, me and the department. However, when I do get involved in following up with the department about missing information or needed corrections, they are cooperative and usually learn from the feedback given. I view this as another training opportunity for the time being, though as the Plan is more frequently implemented by all of the departments, I will expect that these errors become less frequent.

When concerns with the job description and posting language are identified at this stage of the process, I work with not only the recruitment team but also the compensation and classification team which is tasked with creating and revising the job descriptions. In a few instances, concerns about the wrong minimum qualifications appearing the posting language resulted in the position needed to be reposted to ensure that the Plan was followed, any applicable CBA was followed, and that the correct applicant pool was moved through the process.

I expect that as my staff begins to increase monitoring activity over the next reporting period, we will continue to see significant improvement in the implementation of the Plan processes as well as the continued increase in collaborative efforts between HR and the Departments which will result in problem solving of issues or concerns prior to any Plan violations occurring. Between March and August, I have already seen an increase in communication between departments and my office, as well as departments and HR. Communication is a good indication that the Plan guidelines and purpose will be carried out appropriately.

INVESTIGATIONS

I have not issued any Incident (investigation) Reports since the filing of the last semi-annual report, because my focus has been on training my own staff as well as rolling out the Employee training as required by the Plan. Several of the investigations that were filed during the first reporting period have

been completed; however, reports are still pending. Those will be reported on during the next semi-annual report in March 2016.

Since March 1, 2015, I have received an additional 29 complaints or allegations that the Plan was not followed. Two (2) of those concerns were identified by my staff while monitoring; seven (7) concerns were brought to my attention through HR recruitment staff or leadership; one (1) issue was brought to me from a complainant but was forwarded to the Office of the Independent Inspector General (OIIG) for investigation due to allegations of unlawful political discrimination; and 19 filed by complainants from outside HR or a compliance office.

My staff identified significant concerns during the interviews for two different positions in two different departments. In one, the panel did not follow procedures regarding the interview questions – significantly rephrased interview questions which created very different interviews for the candidates considered for the position. In the other department, the interviewing panel collaborated about the candidates without individually assessing them as required and made several concerning comments about the candidates. Reports on both of these concerns are pending finalization and should be released relatively soon.

HR brought seven (7) potential violations to my attention this reporting period consisting of the following allegations: a department used different interview questions from what HR had approved prior to the interviews; a few hiring managers may have made offers to the candidates or promises of offers; two issues involved panelists not identifying conflicts of interest in accordance with the Plan; and others involving candidates complaining that individuals had been hired despite not meeting minimum qualifications for the job. Most of these are still under investigation, but at least two are pending finalization of the reports.

As for the remaining complainant-filed allegations, three have reports pending, and the remaining are in various stages of investigation. Many of the allegations focus on the validation process, a few focus on the selection and offer process, and others provide vague allegations that they have never been called for interview despite applying for numerous positions over the last few years. This type of allegation can often lead into an investigation of not only whether the proper validation procedure was used, but also whether the applicant has lied on any of those numerous applications in order to better his/her chances of receiving an interview.

Incident Reports issued which identify Plan violations require a recommendation for remedial action. I have not issued an Incident Report pursuant to this Plan requiring remedial action yet. However, when I do release such a report, HR is then required to respond to those recommendations. Despite the lack of reports issued and the opportunity to official respond to recommendations, to date HR has collaborated with me on identifying and correcting simple violations of the Plan that can be corrected immediately (lack of interview notice in a timely fashion, failure to conduct an interview, failure to use approved interview questions). When a department fails to give the appropriate notice for interviews or selection meetings, HR and/or I have required that the meetings and interviews be rescheduled in accordance with the Plan. If a hiring manager identifies a panel member to HR that has not been trained, interviews are stalled until that panelist can be trained by me or another panel member is selected. Most recently, HR and I discussed how lack of notice of a conflict of interest should be handled, and we both agreed that a new panel would need to conduct a second round of interviews with no input from the panel member that had the conflict. This was carried out by the department with monitoring by my office, resulting in a process free of conflict of interest (in this case, although some of the final result was the same, other candidates had been ranked that the first panel did not rank).

SUMMARY

Despite some delays with implementing the Plan fully, overall, much progress has been made over the last 11 months since the Court approved the CCHHS Employment Plan. There is much left to do; we must finalize the Policies and Procedure Manual and completely implement all Plan provisions. Nonethesless, we have made significant progress this year in educating the staff at all levels and seen a significant shift in process efficiency based on that education (and continuing education). Education is the foundation of change, and we are now moving away from the training and into the full implementation phase.

Sincerely,

Carrie L. Pramuk-Volk

EMPLOYMENT PLAN OFFICER

cc: Ms. Elizabeth Reidy, General Counsel for CCHHS

Canul-Volk

Ms. Gladys Lopez, Chief of Human Resources for CCHHS