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September 30, 2016

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4th Semi-Annual Report September 2016

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

This is the fourth semi-annual report issued pursuant to Section IV.C.2. of the Employment Plan (Plan). This report will cover the six (6) month period from March 1, 2016, through August 31, 2016, describing monitoring and auditing activities, investigations, violations of the Plan, recommended remedial actions and corrective action by Cook County Health and Hospitals System (CCHHS) when necessary and as appropriate.

TRAINING

As CCHHS develops all of our policies required by the Supplemental Relief Order (SRO) entered in *Michael Shakman, et al., vs. Democratic Organization of Cook County, et al.*, 60 C 2145 (N.D.Ill.), I work with Human Resources to ensure the relevant staff (or all of the staff) are trained on those new policies and procedures prior to implementation. Last year, the focus was the Plan and the Hiring provisions under the Plan. This summer, the training focus shifted to our Plan amendment which included a new hiring process, as well as the Supplemental Policies and Procedures Manual.

New Trainings

This reporting period, Human Resources (HR) and the Compliance Administrator (CA) developed the Policies and Procedures Manual which supplements the Plan, as well as an amendment to the Plan incorporating a new hiring process for credentialed positions (the Advanced Clinical Position (ACP) process). These policies were approved in May and June of 2016. Once approved, my team and I developed the training materials and embarked on another summer of training, though this year the target audience was supervisors and managers. These trainings have taken priority in my office as they are

necessary prior to implementing the new policies which will bring us that much closer to substantial compliance with the SRO and Shakman Consent Decrees.

ACP training began in June, and the initial target audience was the managers and Interviewers who hire the credentialed positions at CCHHS (advanced practice nurses, physicians, and physician assistants). A majority of the staff was trained during the Executive Medical Director's monthly leadership meeting; however, because it was summer, many subsequent sessions were necessary to get all necessary, previously trained managers and Interviewers familiar with the new hiring process. Now that previously trained employees have been trained, the ACP process has been incorporated into the face to face Employment Plan Interviewer training that all employees or members of management must take prior to participating in the hiring process.

Training on the Policies and Procedures Manual began in mid-July and is ongoing. All managers and supervisors are required to complete this training by October 1st, prior to the mid-October implementation of the policies. Due to vacations and holidays, it was initially difficult to build momentum to get all supervisors trained. Nonetheless, as of this week we have over 70% of the managers and supervisors trained, including all of the Senior Leaders. With a few weeks to go, the class sizes are dramatically increasing. I am confident we will have a substantial number of our supervisory and management staff trained by October 1.

Ongoing Trainings

In 2015, my office devoted a significant amount of time training all CCHHS employees on the Employment Plan provisions. Those trainings, and all of the trainings provided to new employees, were conducted at live training sessions until July 2016. During early spring, we developed an online training class which is now used to train newly hired employees within the first 45-90 days of employment as well as re-train all staff who previously receive training. Annual training rolled out the first week of August and now incorporates the online Employment Plan Training course which all CCHHS staff (employees and contractors) are required to take. The course is approximately 25 minutes long, covers reporting obligations and an overview of the hiring processes, and culminates in a 10 question quiz with a required 80% passing score. The Annual Education course is to be completed by October 31st, so I will be able to report on the success of the online course in my next report.

Our next training project is to develop an online annual course for Employment Plan Interviewer training. This process began last week. Our goal is to distribute the online Interviewer annual training online to those previously trained before the end of this fiscal year.

Our overall training goal is to have all annual training conducted through online course utilizing the CCHHS Learning Management System. This method of training allows for easier access by all of the staff across all shifts and locations, as well as more accurate tracking of compliance by my office as well as the departments. By late summer of 2017, we will have online training on the Employment Plan for all staff, as well as re-training on the Employment Plan, Interviewer Training, and Policies and Procedures training.

MONITORING ACTIVITY

My office significantly increased its monitoring activity during this last reporting period. During the last reporting period, we monitored 179 active position requisitions; this reporting period we monitored various stages of 214 requisitions. Overall, my office monitored 555 processes associated with the 214 requisitions, and identified issues, concerns or needed corrective action in 350 of the monitored events. There are a few reasons for the increased activity; the most important can be attributed to the lifting of a temporary hiring freeze for union positions due to a displacement process that ended in part in March. This caused an increase in interviews as departments attempted to fill the vacancies remaining after the displacement process.

Although we reviewed over 500 hundred processes (or stages in the hiring process) related to 214 requisitions, the number of requisitions that HR had active over this same time frame is far more than the 214 that my office tracked. The various stages that we monitored or reviewed included the following: posting process, HR validation, randomization procedures, department validation (for actively recruited positions), testing, interviews, tours, selection meetings, and Decision to Hire (DTH) packets. In addition, we began monitoring the recruitment activity under the new hiring process: Advanced Clinical Position Process (to be discussed further, below).

When considering which positions to monitor, I took into account various factors. Many positions and processes monitored were chosen based on how long it had been since that particular manager or panel filled a vacancy; whether previous monitoring had identified issues which we wanted to confirm had been resolved; an employee had been the subject of a sustained incident report and my office was required to monitor based on my previous recommendations; the CA brought a concern to the attention of me or HR; or HR brought concerns to my attention. Occasionally I would randomly choose a process to monitor, and I expect that method to be utilized more frequently as the Plan processes becomes habit.

Many of the identified missteps occurred during the interviewing and selection stage of a requisition and were identified by audit or active monitoring. The most common concern during the interviewing process related to failure to complete the forms accurately or timely. The Plan has specific requirements for

most of our hiring processes relating to the Interview Evaluation Forms, including scoring candidates immediately after the interview or that day's interviews; explaining scores of "1" or "5" for any given question; providing an interview summary; and using HR-approved questions. When my staff or I were present during the process, we often provided guidance and reminders on how to complete the forms. A few examples of issues identified:

- Panel did not take notes on their interview evaluation forms (this is allowed). However, both of the panelists gave scores of "5" to the candidates' responses, but there was no explanation as to why a score of "5" was given (which is required by the Plan). The forms were sent back to the department to provide further information and provided the required explanations.
- Panelists failing to score the candidates' interviews in the time required by the Plan. My staff did not monitor interviews but did monitor the selection meeting. The panel started candidate selection and discussion without completing the evaluation forms (scores) and did not know who was eligible to consider, because the average weighted score for each was not calculated. This led to confusion, but was rectified once my staff assisted them in completing the forms.
- On a few occasions, interview panelists would score candidates differently on yes/no questions even when the answer provided was the same. For instance, one candidate who answered "yes" was scored a "3," while another with the same documented answer was scored a "5." When this occurred, the evaluation forms were returned to the appropriate panelist for clarification if the scores were to stay the same, or with directions to make the scores consistent. Thankfully, the selection was not impacted and the changes did not necessitate that another selection meeting take place.

The first and third examples can be identified at the HR DTH-review stage before HR approves making an offer to the selected candidate(s). I have been working with the recruitment team this summer in order to ensure these reviews are occurring. HR leadership has been very supportive of my team and the recruitment team working together to ensure everyone is properly trained to screen for these errors.

During the validation stage of the hiring process, HR maintains much of the control or oversight for screening the applicants even if the position is Actively Recruited (the department initially screens the applicants). In all, my office reviewed approximately 160 validation processes. Of those 160 reviewed, we identified a concern with the final interview list in approximately 90 validations. The bulk of the issues were related to technical errors in updating TALEO (our applicant tracking system) with the accurate information about an employee's or applicant's status or providing a clear indication of what contributed to the applicant's eligibility or lack of eligibility.

I also reviewed validation processes when the CA had questions or concerns about how an applicant pool was reviewed. In many cases, I was able to clarify or provide additional information to demonstrate that, in fact, there was no problem with what transpired. However, in several instances, after my review, I would recommend that HR revise the interview list. The complexities of health professional positions can often be confusing to those of us reviewing the applicants in a vacuum, so I often reach out to both the recruitment team and the department to ensure we accurately review the candidate while staying true to the job description qualifications.

Another contributor to this number involved applicant complaints that they were incorrectly reviewed and dispositioned. In those cases, my staff or I review the validation of that applicant only. We often identified that HR had correctly screened the application and dispositioned the candidate appropriately. Only one instance did I recommend to HR to revise the interview list. In that case, there was a misreading of the minimum qualification, and upon review, when the correct minimum qualification was applied, the applicant was eligible for an interview.

Each of the areas we audit or monitor informs our training process. I have adjusted my trainings to incorporate the trouble areas of our process to ensure they are clear, as well as provide memoranda to the hiring managers to ensure the Plan is understood. In many instances, if I see that a process is not utilized to its fullest or anticipate that a misstep may occur, I will reach out to the hiring manager or department head to ensure familiarity with all of the steps necessary to fill the vacancy without undue delay. HR does this as well (including attending interviews and selection meetings to provide assistance), and I believe that improvements have occurred based on this type of outreach.

Advanced Clinical Positions (ACP)

On July 11, 2016, CCHHS went live with a new amendment to the Plan, the ACP hiring process for our credentialed positions (physicians, psychologists, dentists, advance practice nurses, and physician assistants). This process was developed to provide a more natural and competitive recruiting process for these highly sought-after, difficult to fill, and highly professional positions. Most of the recruiting effort is centered in the hiring department, with support from HR to advertise the positions and verify the selections. Due to the nature of the process, it's newness to our hiring managers, and the time of year we have rolled it out, the CA, my office and HR have given considerable focus to this endeavor since July 1.

The ACP process was developed last year and rolled out as a pilot process at Cermak Health Services in October 2015. The pilot implementation went well, with relatively few hiccups, but resulted in some minor modifications of the policy before it was approved by the parties as an amendment to the Plan. July

11, 2016, was when it went live to all CCHHS departments to which this hiring process could apply. After a slow start and only a few requisitions active, the momentum of interviews and hiring has begun to increase.

I hope to have some good data for my next report in March. For now, we were seeing great success with applicant interest now that the process is not so formal or restrictive; but a stumbling block right now is getting the hiring managers and their designees to remember to log all recruitment activity. The process is not very structured, but one requirement is that all recruitment activity must be logged by the department. I believe in a short amount of time, familiarity with logging all activity will become habit and more familiar.¹

Violations of the Plan

As discussed in my last report, in 2015 I began sending out violation notices to employees (and their department head) who commit a technical violation of the Plan which does not require a more involved investigation and reporting process. Technical violations may be a failure to alert me or HR of interviews, using the wrong interview questions, failing to complete a part of the process, or other activities which can be identified by a monitor which cannot be disputed. During this reporting period, I issued five violation notices, known as “EPO Letters.” Most often, there is corrective action recommended to comply with the Plan as well as provide an explicit reminder of that individual’s obligations under the Plan. On a few occasions, a process had to be completed again to ensure the integrity of the final decision. Below is an outline of the EPO Letters issued this reporting period:

1. Panel failed to do the following: provide notice of the selection meeting and change in interview times; to take notes during the selection meeting as required; and explain scores of “5” on the interview evaluation form. After reviewing the entire hiring packet, I recommended that the selection panel reconvene to amend the forms appropriately and conduct a selection meeting in the manner proscribed by the Plan and training. The selection meeting was rescheduled with me in attendance to guide them through the process and assist with corrections.
2. Hiring Manager failed to provide notice of the ARP meeting. A reminder of the Plan requirement was provided.
3. This panel failed to provide notice of the interviews; used the wrong interview questions (HR had approved a different set of questions); and did not explain scores of “5” on the interview evaluation forms. A reminder of the Plan requirements was provided, and the panel was asked to revise their evaluation forms with an explanation of any response with

¹ The activity log (a.k.a. Contact Log) is akin to keeping billable hours where every time an activity for the requisition is initiated or completed, it must be itemized. This also doubles as the NPCC for the recruitment and selection process for all employees outside of HR who touch the requisition.

a score of “5.” This was completed within a few days, and the department was able to proceed. There were no further issues from this manager and hiring panel.

4. A more egregious set of violations occurred by a department that was monitored in part by my office and in part by the CA as the interviews spanned several days. In this instance, the panel members failed to attend all of the interviews together; did not complete the interview evaluations timely, clearly, completely or independently; all of the panel members did not attend the selection meeting; one panelist changed the evaluation form and score for a candidate that she did not interview; and the panel did not consider candidates that should have been considered at the selection meeting. As each of the panelists no longer work at CCHHS and the overall decisions were not impacted by the above, the position was able to move forward without recreating the entire hiring process. Nonetheless, the Executive Director for that department was apprised of the situation and provided an explanation as to what went wrong and why. Future hiring processes in this department will be monitored extensively by my office and HR to ensure these same issues do not surface.
5. Hiring Manager did not send advance notice of the interviews in the time proscribed by the Plan to me or the CA. Notice was provided to the recruitment team, but that particular recruiter was out of the office at the time and notice was not provided to anyone else. A reminder was provided to include me on such notices.

AUDIT ACTIVITY

The Plan authorizes me to conduct audits on any of the employment actions covered by the Plan, the Policies and Procedures Manual or the Personnel Rules. During the last six months, my office has worked on three audits – 1 was completed, 1 is almost complete (discipline), and the other is pending completion. A summary of those audits follows.

Discipline

In my last report, I identified that the Compliance Administrator’s Office (CA) and my office were conducting a discipline audit prior to implementation of the new discipline policy.² The discipline policy has been finalized and will become effective in mid-October. Our initial audit is almost complete. We are in the second phase of that audit to follow up on information obtained during the initial phase.

² The Discipline Policy was approved and incorporated in the Employment Plan Policies and Procedures Manual (Manual) in June 2016; implementation of the Manual will occur in mid-October 2016.

Phase one of the audit consisted of identifying 7 departments to audit, then collecting discipline records from those department managers for discipline issued from July 1, 2015 through December 31, 2015. After the selected departments provided discipline records, we visited the departments to review their employee files for the staff who had received discipline during the relevant time frame. We found that some files were missing information or were incomplete, so we decided to move to phase two of this audit in order to get a complete picture of how discipline is processed and recorded by CCHHS. We hope to be done with phase two of the audit by the end of October. A complete summary of the audit will be outlined in my March 2017 report.

Hiring Process: Difficult to Fill Position

Occasionally my office, Human Resources, or a department will identify a position which is difficult to fill or where we fail to generate any applicants qualified to fill a vacancy. Since my last report, my office had the opportunity to conduct an audit on a position that a medical department struggled to fill. The Trauma Program Coordinator position had been posted twice and was not yielding any qualified applicants for interview and selection. In order to assist the Hiring Manager in determining the best way to proceed in filling this critical position, my office reviewed the entire applicant pool for the position to determine if there was a specific qualification that was particularly difficult to meet. The Hiring Manager was interested in finding out why known individuals in the workforce outside of CCHHS were not getting past the initial screening process.

After a complete review of the applicant pool and each applicant's responses to the prescreening questions, it became clear that one of the qualifications for the position was eliminating all of the applicants. The applicants who answered it honestly, disqualified themselves; the applicants who responded they did meet that qualification could not back it up in with identified experience on the application. After identifying the problematic qualification, the department was able to work with the Human Resources Department to modify the job description slightly and reword the prescreening questions so that candidates with the relevant, required experience could be considered. Once that process was completed, the department was able to review then interview several applicants, and the vacancy was filled.

Hiring Process: Newly Created Position

My office is in the midst of conducting an audit on the hiring process for a newly created position at CCHHS at the request of the CA's office. During the course of monitoring this particular position, several concerns were raised by the CA. I am following up on those concerns by auditing the process in its entirety. I will report on the outcome of that audit in my next report, because this review has not been completed in time for this report. However, some of the more troublesome

concerns or violations identified during the process were corrected with the department or Human Resources as they occurred.

INVESTIGATIONS

During the last six months, 14 complaints or allegations of potential Plan violations have been reported to my office. So far, out of the 12 complaints, we have opened four pending investigations. We began using a new numbering system this fiscal year. The “EPO” number tracks an allegation or complaint that comes in; and the “Inv.” number identifies that an investigation has been opened into the matter. Reports will issue only for investigation files. A breakdown of these concerns follows:

EPO2016-9/ Inv. 16-005: An employee who filed previous complaints with our office made new allegations related to a more recent hiring practice. He believed the hiring manager selects candidates based on National Origin, and that the Hiring Manager and panel changed the job description for the position to fit the qualifications of a particular candidate despite the candidate not meeting the education qualification for the position. This complainant also alleged that during the hiring process at issue and an additional hiring process, particular candidates were provided the interview questions in advance. The complaint about National Origin discrimination was forwarded to the EEO Director in HR. The investigation was opened on March 1, and is pending completion.

EPO2016-10: An anonymous complaint was filed through the Corporate Compliance hotline alleging favoritism, poor treatment of staff, Unlawful Political Discrimination, unequal awarding of overtime/compensatory time, and bullying in the department. This complaint was forwarded to the OIIG regarding the UPD allegations, HR will work with management regarding the bullying concerns, and my office is taking a preliminary look into the overtime issue. *Pending.*

EPO2016-11: Employee filed a complaint regarding bullying, sexual harassment and racial harassment. This complaint was forwarded to the EEO Director in HR; no further action necessary by my office. *Closed.*

EPO2016-12/ Inv. 16-011: Employee brought job description and promotion concern to my attention. Her promotion occurred several years ago, but her job title and the corresponding job description do not match her job duties from the day she was promoted through today. Preliminary inquiries warrant opening an investigation into this matter; investigation *pending.*

EPO2016-13: Complaint forwarded by HR regarding interview processes at one of the CCHHS facilities. The interview candidates alleged that a member of the interview panel was rude and disrespectful. A preliminary look into the matter identified that there were no alleged violations of policies (nor any identified

violations); however, the panelist of concern has been provided additional training and will continue to receive support and guidance from my office, HR and management. This panelist has also received management training from HR in the last six months. *Closed.*

EPO2016-14: Employee complaint of racial discrimination in the hiring process. No other violation of policy was identified or alleged, so I forwarded the complaint to the EEO Director of HR. *Closed.*

EPO2016-15: Employee complaint that she was not provided an interview for a position despite having received an interview the last time the position was vacant. She further alleged that one of the supervisors in that department did not meet the minimum qualifications for that position. Upon review of the files and an interview with the complainant, we were able to discern there were no violations of the Plan – employee was appropriately disqualified from the position for failing to meet a minimum qualification. As for the matter of the supervisor not meeting minimum job qualifications, a prior complaint alleged the same concern and a report is pending on that matter. In short, documentation demonstrated the supervisor did meet minimum qualifications for her current and previous positions at CCHHS. *Closed.*

EPO2106-16/ Inv. 16-008: Complaint filed in June by an employee who interviewed for a position but was notified that she was not eligible to move forward for failing to submit required documentation during the interview process in accordance with CCHHS policy. Initial inquiry did not provide sufficient information, so an investigation was opened and is currently *pending.*

EPO2016-17/ Inv. 16-009: Allegation that an employee provided false information during an interview. Investigation just opened and assigned; file *pending.*

EPO2016-18: Allegation that two employees in the same department did not meet the minimum job requirements for the positions they currently hold and that the manager “does whatever the union tells her” to do. A preliminary look into this matter identified that positions were filled through the displacement process. Inquiry opened into qualifications of the employees. *Pending.*

EPO2016-19: Information provided by HR that an applicant, disqualified twice for the same position (different requisitions), may be providing false information on her application. Assigned to staff to look into the matter to determine if the applicant has falsified her applications in violation of CCHHS Personnel Rules. *Pending.*

EPO2016-20/ Inv. 16-010: Allegation that CCHHS Personnel Rule 6.02 was violated regarding employee leave accrual. *Pending.*

EPO2016-21: Employee alleged that her offer of employment for a different position within CCHHS was wrongfully rescinded and filled with another candidate. Upon inquiry with HR recruitment and labor teams, it was identified that this position was filled through the displacement process; no further action needed on this issue. The Employee further alleged that she was initially interviewed for a position when it was initially posted but was not selected; then, upon repost of a different requisition for the same position, she was disqualified for not meeting the minimum qualifications. Inquiry complete; no investigation necessary; file *closed*.

EPO2016-22: New complaint from Employee regarding “unfair hiring practices” at CCHHS, in particular that there are different education requirements for the same grade of positions within a department. *Inquiry pending*.

Completed Investigations:

We have completed the investigation into several matters and reports are pending at this time. I will report on those investigations during my March 2017 report. However, a summary of the topics investigated include: unfair compensation to individuals in the same job classification, violation of CCHHS Personnel Rule 2.0 and Section IV.H of the Plan; inappropriate use of a Do Not Hire list which was created prior to the implementation of the Ineligible for Hire list required by the Plan; interview panelists manipulating the interview process to hire an unqualified applicant; manipulation of a job description to prevent the Complainant from allowing her to pursue higher level positions; allegations that a position was taken from one employee and the position was instead given to a “friend” of management; former employee falsified application materials; unjust rescission of offer; and unequal distribution of work assignments and training opportunities.

Reports issued

During this reporting period, I issued six incident reports pursuant to Section IV of the Plan. Of the six files closed, I did not sustain the allegations in five of the six investigations. In the one complaint that was sustained, the information was brought to us by a Department Head who was pressured to violate the Plan. A summary of each incident report is detailed below.

14-020: Employee alleged that CCHHS employment practices were not followed for several positions to which she applied. A few of the positions were not CCHHS positions, so we did not pursue those inquiries and referred the Employee to Cook County’s Compliance Officer. The remaining concerns about her disqualification or failure to be selected for CCHHS positions were investigated. It was identified during the investigation that CCHHS employment practices and the Plan were followed as required. *Not sustained*.

15-007: Employee alleged that the Plan was violated when she did not receive and interview for a position despite meeting all qualifications for the position, and the selected candidate did not meet minimum qualifications. After a thorough review and audit of the hiring process, the Employee's application and the selected candidate's qualifications, we determined there was no violation of the Plan or other CCHHS policy. *Not sustained.*

15-009: HR forwarded information to my office when the Recruitment & Selection Analyst became concerned that a manager may have inappropriately promised an employee a position for which the employee was not qualified as well as provided information about the applicant pool to the employee. Upon investigation, we found that the manager simply encouraged all of her staff to apply to the vacancy, because it would be a promotion for many of her staff, and that when this particular employee indicated she applied but was not granted an interview, the manager followed policy by directing the employee to contact HR. The allegations were not sustained; no violation of Plan or CCHHS policy. *Not sustained.*

15-012: Employee alleged CCHHS improperly rescinded an offer of employment for a position and that the reason for the rescission was incorrect, she was the most senior candidate. Upon investigation, it was determined that the offer was made in error, and HR appropriately rescinded the offer in order to make the offer to the selected candidate. Although no violation of the Plan or CCHHS policy transpired, I did recommend that HR draft a policy regarding written correspondence when rescinding an offer (which was not done in this case), and that HR update the Employee's application in TALEO (the applicant tracking system) to reflect an offer was made in error. The Plan requires that HR respond to any recommendation(s) made in a written response within 30 days (an additional 30 days can be requested/granted). HR agreed that written notice should be provided to candidates when an offer is rescinded, and would consider whether a policy was necessary to implement the recommendation. In addition, HR agreed that TALEO should be updated to reflect the rescission circumstances and would implement that update. *Not sustained.*

15-040: A Hiring Manager provided information that pressure was exerted by a member of her supervisory staff to violate the Plan and select a candidate for a position who did not meet minimum qualifications. This pressure continued over the course of several months, and Hiring Manager further indicated that the supervisor encouraged the candidate to write a letter to HR outlining her qualifications and why she should be given consideration for the position. My office investigation and concluded that there was sufficient evidence that the supervisor violated two provisions in the Plan: Sections V.C.1. Prohibited Contacts and Section V.F. Submission of Applications. A report was issued on May 17, 2016.

HR provided a written response indicating HR agreed with each recommendation which required the following: (1) the supervisor should attend Plan Interviewer Training again prior to participating in any hiring decisions (this was completed on September 15, 2016); (2) HR and/or my office monitor all interviews and selections of which this supervisor participates for a period of 12 months from the date of retraining; (3) this supervisor is not to be the Lead Interviewer for the 6 months following retraining in order to ensure understanding of the policies and process. *Sustained; to date, recommendations partially executed.*

16-001: In December of 2015, Complainant alleged that his interview was conducted in violation of the Plan. Specifically, he was only interviewed by two, instead of three, panelists, and the panel asked follow up questions. In addition, the Complainant alleged the panel was biased and did not take his seniority into account despite a Collective Bargaining Agreement requiring that seniority control when candidates are equally qualified. The investigation revealed that the Complainant was mistaken about the provisions of the Plan regarding the number of interview panelists and how interview questions were delivered. There was no violation. In addition, the panel documented appropriately and followed CCHHS policy and the Plan throughout the interview process. *Not sustained.*

HR Response to Investigation Reports

The Plan requires that HR provide a written response to an EPO Incident Report if I have provided recommendations, regardless if the allegations were sustained. As noted above, HR has provided two responses to reports issued during this reporting period. However, in addition to that HR response, HR provided a response to a report detailed in my previous March 2015 report – Incident Report (IR) 15-026.

I recommended the following in IR15-026:

1. CCHHS terminate the employee that falsified his application (in concurrence with the OIIG's findings in a separate but related investigation). HR responded that after a pre-disciplinary hearing was held, the employee was terminated in February of 2016.
2. The employee at issue should be placed on the Ineligible for Rehire list once implemented by CHHHS. HR responded it is in agreement; said employee will be placed on the list once implemented.
3. CCHHS HR should implement Plan Section V.P.2 which requires HR to conduct reference checks or verifications on external candidates offered a position at CCHHS. HR responded it currently lacks the infrastructure to implement that provision of the Plan, but it has taken steps to put that infrastructure in place.
4. As for the Panelist that violated the Plan, I recommended that Panelist meet with management and my office to review the policies violated to ensure adequate understanding of her responsibilities.

5. In addition, I recommended that Panelist receive discipline for violating two CCHHS policies, which is a major cause infraction under the CCHHS Personnel Rules.

HR responded that prior to implementation of these recommendations, of which it agreed with, the Panelist voluntarily resigned from CCHHS. HR also recommended placing the now former employee on the Ineligible for Rehire list. HR and I still need to address this recommendation by HR to determine if the former employee (Panelist) is eligible to be placed on that list once implemented.

SUMMARY

We have made quite a bit of progress over the last six months by training on the Supplemental Policies and Procedures; crafting, training and then implementing a much needed amendment to our hiring process; and preparing to roll out provisions of the Plan and our new Policies and Procedures which will get us into substantial compliance with the SRO. There is still a little work to be done, most importantly rolling out our new discipline policy and procedure. We anticipate rolling that out mid-October, and a substantial portion of my next report will focus on that implementation and the discipline audit.

Some of the provisions which still need implementation to achieve substantial compliance with the SRO are: (1) implementing the Ineligible for Rehire list during the hiring process; (2) implementing discipline file review during the hiring process; (3) rolling out the internal candidate preference process for our non-union positions; (4) publicizing our job descriptions on the CCHHS website; (5) employment verification for all external candidates offered a position at CCHHS; and (6) implementing all of the policies identified in the Policies and Procedures Manual. An update on the status of each of these steps will be covered in the March 2017 report.

Sincerely,



Carrie L. Pramuk-Volk
Employment Plan Officer

cc: Mr. Jeffrey McCutchan, Interim General Counsel for CCHHS
Ms. Gladys Lopez, Chief of Human Resources for CCHHS
Ms. Barbara Pryor, Deputy Chief of Human Resources for CCHHS