

Toni Preckwinkle
President, Cook County Board of Commissioners
John Jay Shannon, MD
Chief Executive Officer, Cook County Health

August 6, 2019

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

10TH EPO SEMI-ANNUAL REPORT

Dear Dr. Shannon and Inspector General Blanchard:

This is my 10th 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 January 1, 2019, through June 30, 2019.

TRAINING

My office is still heavily involved with the training of staff about the Employment Plan and Supplemental Policies & Procedures. We have created online courses to ensure that all new employees receive an overview of the Plan (Employment Plan Training/Onboarding) within the first 90 days of hire; it is also issued annually to all staff each year. In addition, management is required to complete two additional online courses yearly after they have completed a classroom session for: (1) Employment Plan Interviewer Training and (2) Supplemental Policies & Procedures Training.

All annual Plan training requirements are administered using the online courses, except for the annual Human Resources (HR) training. Classroom sessions are still available for new managers or newly promoted employees, HR employees, and those wishing to take a classroom course in lieu of an online module. Among the Plan requirements covered is the obligation to report political discrimination and political contacts to the OIIG.

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



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	Number of Sessions	Employees Trained
Interviewer/Hiring	8	68
Supplemental Policies	7	68

As noted in my last report, I began transitioning the Supplemental Policies & Procedures Training classroom session to HR’s Learning & Development team (L&D Team). This process began in May and continues through the next reporting period. In May and June, the L&D Team trained newly hired or promoted employees on most of the Supplemental Policies while my office continued to train on the Discipline Policy. I or my staff is available during each Supplemental Policies & Procedures session to provide subject matter expertise during the training. In addition, the L&D Manager and I are working to refresh the training with updates and interactive modules during the session as we remove the Discipline Policy from this course in the near future. We expect the changes to the Supplemental Policies and Procedures training will begin by the end of 2019.

My office will continue to train all CCH staff on the Discipline policy, but as noted in my last report, it will 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 creating a safe environment and culture to foster patient and employee satisfaction with CCH. My office is coordinating with a multidisciplinary team from Quality, HR, and Nursing to create and implement these changes which we plan to initiate during 4th quarter of 2019 to a pilot group.

MONITORING

Hiring

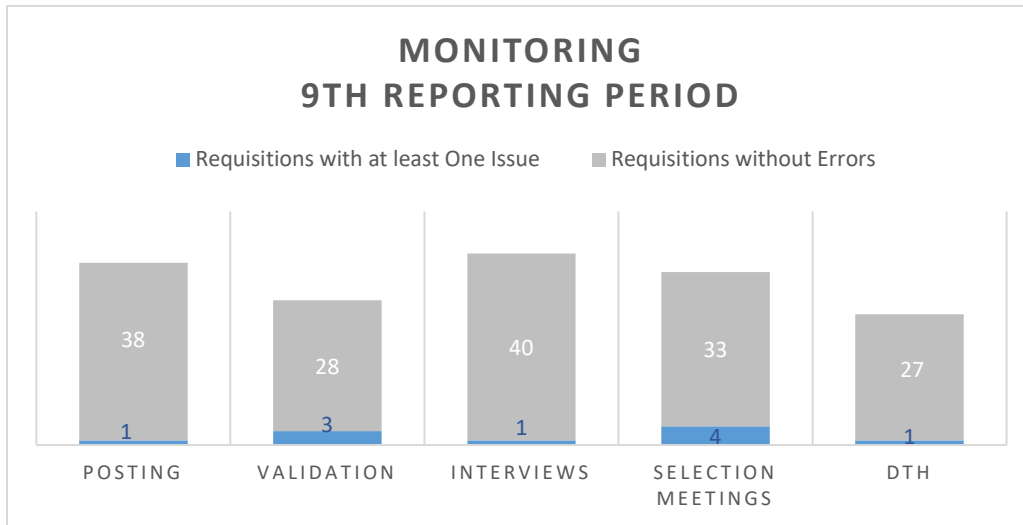
During this reporting period, HR posted approximately 600 requisitions (sometimes representing multiple vacancies per requisition)² and there were 39,498 applicants for those posted positions. Of

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

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. 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.

Toni Preckwinkle
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those approximately 600 requisitions posted, my office monitored (in various and often multiple stages) 19% of those. The stages at which monitoring occurred is depicted in the chart, below.



General and Actively Recruited Positions Hiring

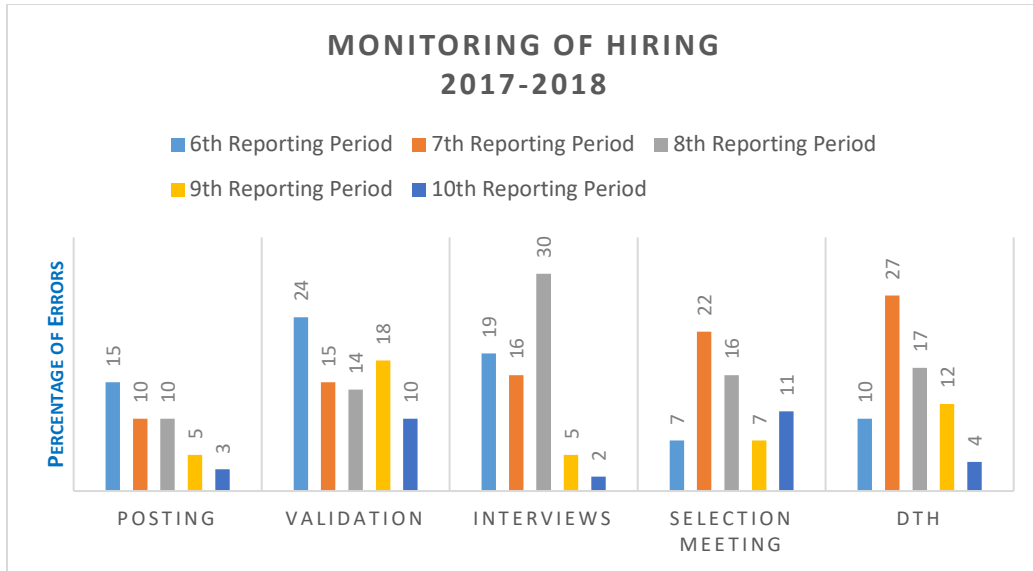
My office monitored approximately 104 General and Actively Recruited hiring processes this reporting period. This accounts for roughly 17% of the posted requisitions.

As the chart displays, we identified very few errors in execution of the hiring processes during this reporting period. Although some of the processes monitored had multiple errors or mistakes that needed to be corrected, we generally found that with a little guidance by HR or my office, management executed the Plan as intended. What this chart does not show is the proactive involvement of CCH leaders in ensuring compliance by seeking guidance throughout the hiring processes and their receptiveness to direction from HR or my team. However, when errors were identified by my team, they were corrected immediately by HR or the department, and all of them were corrected before an offer was made to the selected candidate(s).

The next chart shows the progress made over the past two and one half years (2017, 2018, part of 2019). The continued decline in identified errors is evidence of the hard work all CCH leadership has undertaken to make the Plan work. Most noteworthy is the dramatic decrease in errors during the interviewing and decision to hire processes.

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Advance Clinical Position (ACP)

My office monitored eight (8) different ACP positions during this reporting period. We identified one requisition with missing information when the final DTH packet was sent prior to an offer going out to selected candidates. The DTH packet did not contain the ranked list from the department, as required. However, HR was able to provide the required information upon request.

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 12 Direct Appointment RTHs. All but one complied with the Plan requirements. One of the RTH packets submitted was for a candidate that was just shy of the required years of experience for the position. Once this was brought to the attention of the CHRO, the RTH was withdrawn. Of the 11 compliant RTH packets submitted, 10 of the candidates have begun employment with CCH during this reporting period.

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 four (4) Medical Department appointment RTHs this reporting period. All of them complied with the Plan requirements.



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Executive Assistants

HR submitted five (5) RTH packets for Executive Assistant positions for the CEO, Deputy CEO, Chief Nursing Officer (CNO), and COO of Integrated Care pursuant to Section X of the Plan. My office did not identify any concerns with any of the selections; four of the five selected individuals began employment during this reporting period, one of which was a promotional position to the Executive Assistant to the CEO.

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 10 LORs. None of the LORs were from Political Officials or Contacts.

Summary

In sum, although there were occasions where 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. My team and I monitored approximately one sixth of the requisitions posted during this reporting period and did not identify a significant amount of noncompliance during those observations. Overall, much of our monitoring efforts work to assist management in maintaining compliance by providing direction and guidance as the processes unfold, preventing misuse of the procedures from becoming systemic.

Supplemental Policies

Transfers (#02.01.12)

There were two (2) transfer requests received by my office this reporting period. The first one received in January was for a shift and division transfer for a supervisor. The business need was adequately justified on the documentation and there was no concern with the transfer. The second transfer request was from the HR department moving an analyst from the Stroger Campus to Cermak Health Services. This transfer was also compliant with the policy.



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Interim Assignment (#02.01.16)

During this reporting period, HR submitted five (5) approvals for Interim Assignment/Interim Pay according to the policy requirements. Four of the Interim Assignments were the result of resignations or retirement of the predecessor. There were no concerns with any of the submissions.

Training Opportunities (02.01.13) & Overtime (02.01.14)

My office did not conduct any audits of these two policies during this reporting period. However, the Plan requires that every June and December, I issue No Political Consideration Certificates (NPCC) to Department Heads for each of these policies. These NPCCs were sent out to Directors and Leadership on June 3, 2019, utilizing a research tool that allows CCH to capture physical signatures and the policy documents (for the Training Opportunities policy). All of the NPCCs were obtained by the end of June in compliance with the policies. A more extensive audit of one or both of these policies will be completed in the next reporting period.

Salary Adjustments for Grade 24 Positions (#02.01.22)

During this reporting period, there were 100 salary adjustments for Grade 24 employees. One of them was related to a Director's increased job responsibilities as she took over the duties associated with a vacant position which CCH does not intend to fill. A market study was prepared in accordance with the increased duties and was provided with the approved salary adjustment forms. This increase was compliant with the policy.

The remaining salary increases (99) were done pursuant to a budgetary decision in 2018 to provide non-merit based increases to our non-union management positions. Several business reasons were identified and presented as to why this was important, not the least of which were that (1) non-union employees had not received a salary increase in several years while union employees did, and (2) many of our leadership positions were well below the 25 percentile of market rates. Executive leadership advised me of this process in 2018, sought out my guidance on how to comply with the Plan when increasing the salary of so many Grade 24 employees at one time, but did not execute the increase until early 2019. HR and executive leadership created a set formula by which each employee would receive the salary increase; the increase ranged from 3% to 6% for all but nine (9) employees and was based on longevity in the position. My office is working with HR to understand more about

Toni Preckwinkle
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the increases received by the nine (9) employees that did not follow the formula when calculating the increase.

Although the paperwork is pending for the salary determination of one of our recent Direct Appointments, HR and I identified that several salary determinations were delinquent. After we complete our review to determine which Grade 24 salary determinations are still outstanding, HR will complete the process and provide the appropriate paperwork to my team and the OIIG as required. I will provide an update in the next Semi-Annual report.

Discipline (02.01.15)

During this reporting period my office transitioned the day to day tracking of discipline back to HR. This allowed my team to take a more focused approach to monitoring the policy requirements. We can observe more pre-disciplinary hearings and investigatory meetings as well as grievances. It has also provided more time to do a comprehensive evaluation and efficient upkeep of the Ineligible For Hire List, as described below. During the course of observing the pre-disciplinary and grievance process, my team did not identify any significant issues or concerns with the policies or procedures.

Between January and June of this year, there were approximately 720 disciplinary action forms (DAFs) issued to CCH staff. Of those, nearly one half (46%) were related to attendance problems and were issued pursuant to the CCH Attendance Policy. Of the 720 disciplinary actions taken, 6.5% were terminations. My team reviewed each of the terminations to ensure compliance with the policies and to update our Ineligible For Hire List pursuant to the Plan Section IV.P.

We made one update to the Ineligible For Hire List during this reporting period, adding 45 individuals to the list. Of the 45 individuals added to the list, two were 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 Chief Human Resource Officer (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. She did not receive any appeals during this reporting period.

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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-Compliance³ to the manager and Department Head. The Notice alerts management to the issue in real time as well as instructs them on how to correct or avoid the situation. During this last reporting period, I issued 16 such Notices.

Of the 16 notices issued, 10 of them were related to non-compliance with the Discipline Policy. In each instance, the manager corrected the error when it was brought to his or her attention. The discipline related notices were the result of two types of errors: (1) failure to get all required signatures on the DAF, and (2) failure to send the DAF to HR in the proscribed time frame (within 5 days of issuing the discipline to the employee). Eight (8) of the 10 Notices of Non-Compliance were related to failing to capture all of the required signatures as required by the policy.

There were six (6) Notices of Non-Compliance with hiring provisions of the Plan. All six (6) stemmed from managers failing to provide the required advance notice to HR and my office for interviews, application review meetings, and selection meetings. In each instance, there were no further violations of the Plan following the issuance of the notice.

INVESTIGATIONS

During this reporting period, we received 32 new complaints and issued three (3) incident reports. Of the 32 complaints filed, 14 were closed during this reporting period, including four (4) which were forwarded to other department(s) for handling. In all, 17 files were closed (including the 14 new complaints); summaries provided below.

New Complaints

EPO2019-3: Complainant is an employee with concerns about positions added to the Actively Recruited list. Complainant believes that one of the positions identified does not meet the qualifications for the list, while the other position is still listed in the CCH budget despite information provided to her that the position would be eliminated. *Pending.*

³ These Notices of Non-Compliance were formerly referred to as Violation Letters.



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EPO2019-4/ 19-003: Investigation 19-003 stems from a manager concern about a current employee's resume; based on observed behaviors, the complainant believes the employee's application and resume may have been falsified. *Pending.*

EPO2019-5: Complainant alleged that HR failed to appropriately screen application materials, because the Complainant has not received interviews for positions to which Complainant is qualified. The main concern was that Complainant was on a "blacklist" and was blocked from promotional opportunities. After a look into Complainant's various recent applications and a meeting with the Complainant, it was determined that there were no Plan violations to investigate as each application was handled exactly as the Plan required. *Closed.*

EPO2019-6: An anonymously filed complaint that a Director was creating a hostile work environment by failing to discipline certain employees when appropriate and was also receiving kickbacks from one employee that was protected from discipline. This matter was referred to the Office of the Independent Inspector General (OIIG). *Closed.*

EPO2019-7/19-002: This complaint was referred by the OIIG. A CCH Department website, not associated with the main CCH website, was discovered and this website provided links to apply for an unpaid fellowship position at CCH. Upon investigation it was identified that in fact this department was accepting applications via the link on its website for an unpaid fellowship program in violation of Plan Section VII.C which requires that unless a National Matching database is used to recruit residents and fellows, the General Hiring Process should be used to select individuals for such an opportunity. I sustained the allegation of a Plan violation and recommended that the department work with HR to either utilize the General Hiring Process to recruit and select individuals to fill these unpaid position(s), or work with HR and General Counsel's Office to create the appropriate contracts with qualified educational institutions. *Sustained.*

HR Response: In its response report, HR agreed with my findings and recommendations. A job description and posted requisition was created immediately, and the department is currently utilizing the General Hiring Process to bring fill these positions.

EPO2019-8: An anonymous complaint was received via the Compliance Hotline. It generally alleged that CCH was hiring unqualified candidates to fill vacancies. Unfortunately, there was insufficient information to begin an investigation so the file was closed. *Closed.*



Toni Preckwinkle
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EPO2019-9/19-003: An HR manager reached out when she received a telephone call about a recently hired employee. The caller alleged that the employee's academic credentials had been falsified by the caller; the employee did not have a G.E.D. as required for the employee's position. As the investigation was underway, the employee was terminated from CCH for other, unrelated reasons and was added to the Ineligible For Hire List for a termination for cause. As the employee no longer worked at CCH, this investigation was closed without a final determination, because the employee's cooperation was needed to complete the investigation. *Closed.*

EPO2019-10: An employee and a Director raised a concern about a CCH supervisor, alleging the supervisor was aggressive and unprofessional during interactions with other employees which created a hostile working environment. We referred this complaint to the CCH EEO Director for further investigation and closed our file accordingly. *Closed.*

EPO2019-11: Complainant was a Director that reached out about two employees that formerly worked in Director's department that were promoted in the relatively recent past into much higher grade positions in another department. Director was concerned that the two employees did not meet the new job qualifications. After a review of all of the hiring documents related to the movement of these two employees, it was determined there was Plan violation and the file was closed without further investigation. Each went through a Plan required hiring process and were identified as meeting the qualifications for the new positions. *Closed.*

EPO2019-12: Complainant alleged harassment and bullying by her manager in retaliation for trying to move into a supervisory position a few years ago and for filing a grievance related to discipline action against Complainant. Complainant filed a similar complaint with the CCH EEO Director and her union representative filed a grievance pursuant to the Collective Bargaining Agreement related to the disciplinary issues. As such, my office will not investigate, but will instead await resolution of the grievance and EEO investigation. *Pending.*

EPO2019-13/18-006A: During the course of an investigation into a complaint filed in 2018 (Investigation 18-006), it was identified that there were several employees working within a department on the Stroger Campus did not meet the minimum qualifications for their positions. After reaching out to HR about the issue to determine what steps should be taken next, it was determined that a full audit of the department should take place. HR and my office are currently



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auditing all of the employee files for this department. Reports will issue once the full audit is completed. *Pending.*

EPO2019-14/19-005: After review of several OIIG investigative reports relating to the same supervisory-level position at CCH, my office began to review all of the hiring packets related to that position since its inception. *Pending.*

EPO2019-15/19-004: Complainant alleges that complainant is receiving discipline in retaliation for filing a complaint with our office in 2017 (IR 17-009). Complainant further alleges other employees are not disciplined for the same behavior. *Pending.*

EPO2019-16: A Department Head reached out to advise my office that an employee contacted her about a posted vacancy to which the employee applied. The Department Head felt the contact was in violation of the Section V.C.2 Prohibited Contacts. After meeting with the employee, it was determined that the employee was new to the organization (still within the probation period) and at her prior employers it was expected that an employee advise his or her leadership when applying for another position within the company and to find out how things were done at CCH. My office advised the employee to reach out the HR in the future when the complainant was unsure of the hiring processes. No intentional violation of the Plan was identified and the matter was closed without further investigation or action. *Closed.*

EPO2019-17/19-004: A supervisor alleged that one of her employees was disproportionately disciplined and treated differently than other employees similarly situated. The allegations were almost identical to that of the employee in EPO2019-15 so the files were combined and are currently under investigation. *Pending.*

EPO2019-18/19-007: Complainant was concerned that not only was he working outside of his job classification, and that prior attempts to reclassify him into the appropriate job had failed, but now he was teaching the newly hired directors how to perform their jobs in the department while still performing similar-level work to those new directors. Upon initial review of the documents provided, my office opened an investigation into the job classification in general and this employee's position within the department in particular. *Pending.*

EPO2019-19: Complainant alleged that she was inappropriately disqualified for a position to which she applied. Upon initial inquiry, it was determined by HR that this employee inaccurately had a



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John Jay Shannon, MD
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transfer code attached to her position making it appear that she was ineligible to move into a new position right now. HR has corrected the error. The file has been closed without further investigation or action. *Closed.*

EPO2019-20: Complainant alleged that the current Director in Complainant's department is hiring less qualified individuals for management positions based on prior employment history with the Director. Initial inquiry underway. *Pending.*

EPO2019-21: Complainant alleges that the department has pre-selected other individuals to fill positions to which complainant applied and that management "does not like me." Inquiry underway. *Pending.*

EPO2019-22: Complainant is a supervisor and alleges that complainant was disciplined for an incident that occurred while complainant was not at work and complainant's manager did not want to issue the discipline but the Director insisted. Complainant alleges that others should have been disciplined but were not, and that Complainant is singled out. Inquiry underway. *Pending.*

EPO2019-23/19-006: HR forwarded a concern that a manager made an offer to an candidate prior to HR becoming aware of the selection and processing the decision, which in fact, was incomplete and premature. After an initial inquiry, my office opened an investigation which is almost complete. *Pending.*

EPO2019-24/19-007: Allegation that Director brought in managers without publicly posting the positions and allowing department employees to compete for the positions. Investigation is now complete and we are in the process of drafting the report. *Pending.*

EPO2019-25: Complaint forwarded to my office; Complainant filed an EEOC charge alleging that her manager terminated her on the basis of race. I referred this matter to the CCH EEO Director for handling. *Closed.*

EPO2019-26/19-008: Complainant alleged improper manipulation of the discipline process by changing the level of discipline after it was signed (decreased it). After an initial inquiry, an investigation was opened to determine if there was a pattern of this type of change. Investigation complete; draft report pending. *Pending.*



Toni Preckwinkle
President, Cook County Board of Commissioners

John Jay Shannon, MD
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EPO2019-27: Complainant filed EEOC charges against CCH alleging racial and national origin motivation for discipline issued. I referred this matter to the CCH EEO Director for handling. *Closed.*

EPO2019-28/19-009: A Department Head shared concerns that a candidate selected during a hiring process may have had access to the interview questions in advance of the interview. My office has investigated the matter and is currently drafting a report on our findings. *Pending.*

EPO2019-29: Three separate anonymous complaints were received via the Compliance Hotline alleging that a Department Head is improperly transferring employees and positions are not publicly posted as required by the Plan. Inquiry pending. *Pending.*

EPO2019-30/19-010: Complainant alleged that the Director in the Department met with complainant and another interview panelist after a hiring sequence and had them change their scores for one of the candidates interviewed. By lowering the scores on two interview questions, that candidate was no longer eligible for consideration despite the panel determining that the candidate was well suited for the position. Upon investigation, it was found that the Director suggested the panelists change their interview scores, the Director was not present during the interviews, and the Director stopped the interview panel from meeting at the scheduled time to finalize the selection and did not advise HR or my office of the new selection meeting time as required by the Plan. Based on those findings, I recommended the following: (1) the panelists should correct their Interview Evaluation Forms to reflect the original scores provided for each question that was changed at the Director's behest; (2) a proper selection meeting with the appropriate advance notice to HR and my office should be held and my office will monitor the meeting; (3) based on the improper interference, the Director should not remain the Hiring Manager for that particular position; (4) my office will monitor all hiring processes in that department for the next 12 months from the date of the report to ensure compliance with all aspects of the Employment Plan; (5) all personnel in the department authorized to participate in hiring should go through a re-training on the Employment Plan's hiring processes and procedures to ensure a clear understanding of the expectations and regulations; and (6) that the Director should be disciplined at a level commensurate with violating a core principle of the Plan consistent with the current practice of CCH with a recommendation for termination; however if termination is not in line with current discipline practices a minimum of a five day suspension was recommended. *Sustained.*



Toni Preckwinkle
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John Jay Shannon, MD
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HR Response: HR quickly issued a response to my recommendations, agreeing to implement all of them. At present, the hiring packet is under review by HR to determine the appropriate steps for the interview panel to take; the Director was terminated for cause and his name will be added to the Ineligible For Hire list; and I am working with the Interim Director to schedule his managers for training on the Hiring Processes.

EPO2019-31: An applicant filed a complaint with my office alleging that HR failed to provide the applicant with the proper testing location and refused to provide final results. HR advised applicant that the applicant failed the pre-employment testing and could not proceed. Inquiry has ended; no investigation is necessary. The complainant has been contacted and the file closed. *Closed.*

EPO2019-32: Complainant alleged that HR and the department were refusing to interview Complainant despite meeting the minimum qualifications for the positions to which Complainant applied. Complainant had not contacted HR to learn about the status of all of the applications yet, so Complainant was instructed to first contact HR. Inquiry pending follow up with Complainant. *Pending.*

EPO2019-33/19-010A: Complainant alleged retaliation by the Director due to the complaint 19-010 filed previously. Investigation has concluded, a draft report is underway. *Pending.*

EPO2019-34: Complainant alleged that a job description was specifically crafted to prevent Complainant from meeting the eligibility requirements for the position. Complainant further alleges the job was designed for a specific individual. Upon initial inquiry, it was determined that the department used a standard job description for the position, but based on department need, utilized a language requirement which is at the discretion of the Hiring Manager to use. The position was posted appropriately and the Complainant was advised accordingly. No further investigation was needed and the file was closed. *Closed.*

2018 Complaint

EPO2018-26: Complainant applied to two Direct Appointment positions and alleged Complainant was not selected due to political, age and/or religious discrimination. Complainant received an interview but was not selected. After an extensive discussion, the Complainant decided to hold off on moving forward with this Complaint until Complainant could further consider the implications.



Toni Preckwinkle
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After six months, Complainant failed to follow up with my office; this file was closed at that time without further investigation. *Closed.*

Reports Issued

My office issued four (4) incident reports this reporting period. Two were sustained, and two were not sustained. For the two reports with sustained findings, recommendations were made and HR implemented all of the recommendations outlined in the reports. Below is a summary of the two reports not described above:

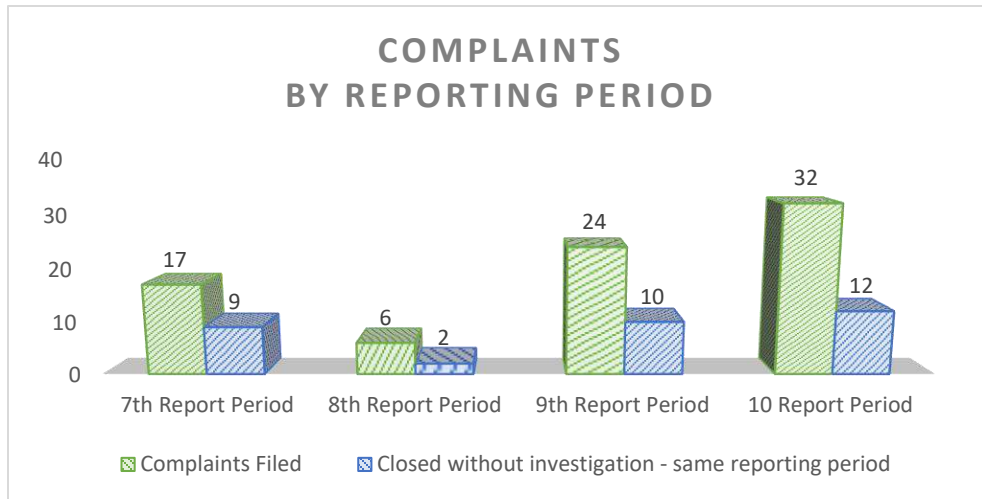
18-011: A Department Head reached out to my office to alert us that an employee was inquiring about the status of applicants and was trying to convince management to select specific individuals for the position. After investigating the matter, it was determined that the outreach by the employee was simply a misunderstanding about with who to inquire about CCH hiring policies and procedures. Once that was explained to the employee, the employee understood why the Department Head was concerned. No recommendation was necessary. *Not sustained.*

17-002: HR provided my office with information that a Candidate may have falsified her application and resume in order to secure a position as CCH. After a full review of all of the Candidate's application materials and a discussion with the Hiring Manager about the interview conducted, it was clear that this Candidate believed she would have graduated by the time the application period was complete and an interview given. However, when the Candidate for whatever reason did not finish her degree, as intended, and was upfront with the interview panel at the time of her interview. The interview panel noted this in their records and submitted those records to HR. There was insufficient evidence that the Candidate intentionally falsified her application materials and therefore there was insufficient evidence to recommend placing her on the Ineligible For Hire List. *Not sustained.*

The graph, below, shows the increased volume of complaints handled by my office during the last four reporting periods. The number of complaints received per reporting period increased significantly from just one year ago. It is almost double from the 7th Reporting Period and is more than five times the volume of the 8th Reporting Period. The file and investigation closure rate stays relatively low as the changes to the Plan evolve and take more of our energy away from the

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investigations. To remedy this, my office is working to recruit additional staff in order to expeditiously handle the volume of work.



EMPLOYMENT PLAN AMENDMENTS

Three Plan amendments were proposed this reporting period. Each was presented to the OIIG as required by Plan Section XIII and approved for a pilot study. The proposed changes to the Plan were to add: (1) a preferred qualification screening process at the validation stage of the General Hiring Process; (2) a telephone screening process for the General Hiring Process; and (3) a Hiring Fair Process. Once we get through the pilot of each of these new processes, we will update the language accordingly and add into the Plan.

Screening processes for General Hiring

The first two submitted amendments modify the validation process under General Hiring (Section V of the Plan). In order to use either process (or both), the Hiring Manager must request approval from the CHRO.

The first amendment allows HR to screen applicants by the preferred qualifications in addition to the minimum qualifications. Our current process does not distinguish which candidates may have a preferred qualification; all external applicants are processed in one of two categories: Veteran applicants and all other applicants. This amendment creates four categories of external applicants that meet at least the minimum qualifications: Veteran applicants that those that meet at least one of the preferred qualifications, all other applicants that meet all of the preferred qualifications,



Toni Preckwinkle
President, Cook County Board of Commissioners

John Jay Shannon, MD
Chief Executive Officer, Cook County Health

applicants that meet at least one of the preferred qualifications, and applicants that do not meet any preferred qualifications. If there are more than 10 applicants in any given category (except the Veteran category), the HR team will randomize the applicants in that category before they begin screening the applications. If there are an insufficient number of applicants to place on the Interview List from one category, they will begin screening applications from the next category.

The second amendment outlines a telephone screening process that the HR team will use while screening applicants to place on the interview list. It requires the HR team to work very closely with the Hiring Manager to identify the qualifications for which HR will screen, and then each candidate will be evaluated by HR about whether to be placed on the Interview List. This process can be used when screening only for the minimum qualifications or in conjunction with the preferred qualification screening process noted above. The goal of both of these changes is to identify the best candidates to present to the Hiring Managers.

Hiring Fair

The third amendment creates a hiring process that incorporates a Hiring Fair or Open House (Fair) model of meeting applicants and candidates. It is a bifurcated process which simultaneously allows us to screen applicants and schedule them for interview in the traditional manner while also allowing interested individuals to attend a Fair and receive an interview while at the Fair. The main distinctions for this process are that the public Notice of Job Opportunity remains open until the end of the Fair; candidates may be interviewed at the Fair even if they did not apply prior to attending the Fair (must apply by end of day); multiple interview panels will be operating simultaneously; and there is an accelerated decision to hire process by which selected candidates receive an offer within approximately a week of the Fair. CCH will host its first Fair using this amendment on September 5, 2019. A report on its success and lessons learned will be in my next report.

HR and my team have been working to develop the procedures to put in place in order to execute these new amendments. Once those procedures are finalized, we will begin training on the new procedures and implement a pilot program for each amendment to assess ways to improve it before implementing throughout all of CCH. These are the first three of several more amendments under development. More changes are to follow throughout the next reporting period.

Toni Preckwinkle
President, Cook County Board of Commissioners
John Jay Shannon, MD
Chief Executive Officer, Cook County Health

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: Five updates were made to this list in - January, February, April, and two in May. We added 38 new positions to the list, six of which were creating a bilingual requirement for the position. In addition, seven positions were corrected (title change, clarification of qualifications, or changed job code), and we removed 1 position for which we no longer recruit or have at CCH.

Exhibit 5: Five distinct updates were made to this list – one in February, March, two in May, and one in June. Three positions were job description and job code changes, and five new positions were added to the list (one of which replaced at position already present on the list but simultaneously removed). The CHRO and I will be conducting a comprehensive review with the CEO of the entire list during the next reporting period to determine whether any changes need to be made to the existing positions currently not in use by CCH.

Exhibit 13: Three distinct updates were made to this list – one in January and two in May. We added 16 new positions to the list, two of which were creating a bilingual requirement for the position. Additionally, one position's job code was corrected.

Toni Preckwinkle
President, Cook County Board of Commissioners

John Jay Shannon, MD
Chief Executive Officer, Cook County Health

SUMMARY

This reporting period brought about many changes to our Plan which will require significant changes to our procedures and training materials over the next few months. We are very excited to see how well the Plan amendments work and look forward to partnering further with our Hiring Managers to make our employment practices meaningful and user-friendly.

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
Barbary Pryor, Chief Human Resources Officer, CCH
Andrew Jester, Office of the Independent Inspector General