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EMPLOYMENT PLAN OFFICE 15TH SEMI-ANNUAL REPORT

Dear Mr. Rocha and Inspector General Blanchard:

This is our office's 15th Semi-Annual Report issued pursuant to Section IV.C.2 of the Cook County Health (CCH) Employment Plan (Plan). This report covers amendments made to Employment Plan, our training, monitoring, auditing, and investigative activities between July 1, 2021 and December 31, 2021, and goals and new initiatives for January 1, 2022 through June 30, 2022.

During the applicable period, CCH had over 2,800 vacant positions due to turnover, a competitive job market, and the national workforce shortage. The Human Resources (HR) department was among the departments impacted. Critical line staff and leaders separated from the organization or promoted into new roles, resulting in the temporary redistribution and prioritization of work in favor of reducing the workforce shortage necessary to both support the provision of services for the health and safety of our patients, guests and employees and maintain all existing operations.

At the same time, the Employment Plan Office (EPO) continued to operate as a team of only three, representing a nearly fifty percent reduction of our pre-pandemic staffing.

EMPLOYMENT PLAN AMENDMENTS

None of the Plan processes were revised and no new processes were added. However, the following exhibits were updated in compliance with the Plan as additional positions were approved for inclusion:

- Actively Recruited Position List (Exhibit 1): This list was revised numerous times during the reporting period. Forty-six new positions were added.
- Direct Appointment Position List (Exhibit 5): This list was updated three times during the reporting period. Fourteen positions were approved to be added.
- ACP Position List (Exhibit 13): This list was updated once during the reporting period. Seven positions were added.

TRAINING

Previous semi-annual reports have outlined the multiple training sessions that our office conducts in conjunction with Human Resources (HR): Employment Plan Training [overview for all staff]; Employment Plan Interviewer Training [for management and leadership]; Supplemental Policies & Procedures Training [for management and leadership]; and HR Training [for HR personnel].

The information below pertains to each type of training conducted:

- Employment Plan Training: This online training is required of all new staff *and* as an annual refresher for everyone else. As previously reported, we transitioned to a new learning management system in the spring of 2021 and discovered that our deck was not technologically compatible with the new system. In the fall, I developed a new deck and submitted it to HR for review and finalization. HR leadership expressed a desire for the new manager of operational development to have input before the deck is utilized. That position was filled last month the task has been assigned to the new manager as the highest training priority.
- Employment Plan Interviewer Training: This four-hour, in-person training is required before participating in our hiring processes. Though this training is typically offered only once per month, we offered a total of twelve sessions. The additional sessions were offered to accommodate increased demand as well as employees with urgent training needs. In total, fifty-five employees were trained.

Employees are also required to complete an online refresher annually to maintain their eligibility to participate in our hiring processes. Like the all-employee training, this deck was found to be incompatible with the new learning management system. It, too, has been identified as a high-level priority for the new manager. Since this training may take another month or two to complete and introduce, my office is preparing to distribute the training deck to all individuals trained prior to 2021. We will also continue both accommodating department requests for refresher training and inviting employees to our in-person training as needed.

- Supplemental Policies and Procedures Training: We offered a total of seven sessions of this two-hour, in-person training and trained a total of forty employees. As with Interviewer training, there was increased demand. This represents an increase from the usual once per month offering.
- HR Staff Training. New HR staff and contractors have been trained as required. HR took the lead on providing the training sessions utilizing Employment Plan Office (EPO)-approved training decks.

HR staff is also required to receive annual refresher training. This training, which has been historically offered in-person, is significantly overdue. HR leadership determined that it was not operationally feasible to conduct this extensive training given the challenges and priorities described in this report's introductory paragraph. I prepared a deck to be distributed electronically until an in-person training is feasible. However, further collaboration between EPO and HR leadership is required before it is circulated. This training is high on my list of priorities given HR's important roles in facilitating and maintaining compliance.

- **Just Culture Training:** We previously reported on the development of a Just Culture¹ policy and the plan to pilot it in a select number of departments before a full rollout. This policy is meant to foster patient and employee satisfaction within CCH by providing management with the tools and education necessary to engage staff and create a safe environment and culture.

Three departments have been participating in the pilot to some extent since December 2019². A fourth department was included in December 2020, and we had anticipated a full rollout in 2021. These plans were put on hold due to the separation of our former manager of organizational development. As reported above, the vacancy was filled last month. The new manager has already begun preparing to oversee implementation and further rollout. Once the policy is fully implemented, the Disciplinary Action Policy will be severed from Supplemental Policies training and integrated into a comprehensive Just Culture & Accountability training program.

MONITORING

When we monitor an employment action, we assist management by providing direction and guidance as processes unfold. This prevents non-compliance in real time and serves as a form of training to prevent future non-compliance. We also provide guidance when we observe practices that do not technically violate the Plan, but which do not fully conform with best practices. Our monitoring is not always conducted in real time, and in many instances takes the form of document review. Either way, we recommend corrective measures either to hiring process participants and/or appropriate HR staff as issues are identified.

Hiring

To put our numbers into context, HR reports posting almost 1,500 requisitions³, completing almost 1,000 validation processes, and referring roughly 900 for interviews in 2021. Our office monitored *at least a part of one of the steps in the hiring process* for approximately sixty requisitions that took place during the reporting period.

While I have identified violations (and other concerns) throughout this section, I believe it is important to note that I did not encounter anything that would suggest that any were motivated by an intent to violate the Plan. Rather, it is my assessment that errors and missteps were caused/motivated by the extraordinary pace necessary to address critical staff shortages without adequate staff resources, training and/or supporting infrastructure.

General and Actively Recruited Positions

We monitored or audited eleven validation (application screening) processes, thirty-two interview processes, thirteen selection meetings, twenty-five Decision to Hire (DTH) packets, and nine posting processes. These numbers do not capture instances in which HR personnel reported issues

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 New leaders in the pilot departments had not received training since the separation of our manager of operational development in early 2021 and there had been no one designated since that time to oversee compliance.

³ Our count for the reporting period is 591 requisitions posted or re-posted.

and/or sought our guidance to prevent violations or instances in which we identified and addressed issues outside of formal monitoring.

Notable observations include:

- *Validations:*

- HR disqualified an applicant that an application review panel⁴ recommended for interview for failing to demonstrate possession of one of the minimum qualifications and the applicant was not placed on the final interview list. The list approved by HR was sent to our office per standard practice. The hiring manager subsequently contacted HR to discuss the basis for disqualifying the recommended applicant and, after walking the recruiter through the (internal) applicant's job description and providing information about the department's operations, convinced her to add the applicant to the list. We were not included in the discussion and the update was not sent to our office.

Upon learning that the candidate had been added to the list, we contacted the recruiter to determine what had transpired and reviewed the relevant documentation. Based upon our review, we agreed with the recruiter's initial determination and communicated our determination that the candidate was not eligible to proceed.

The hiring manager contacted us and provided the same information external to the application materials that had been provided to HR in support of the applicant's eligibility. We stood by the determination that the applicant was ineligible. The hiring manager escalated this issue to executive-level leadership, and leadership agreed with our determination. The candidate was not interviewed.

I contacted HR following resolution of this issue to discuss current process and the necessity for documented guidelines and procedures for approving and documenting validation at the time of interview.

- HR provided a hiring manager with the interview list for a general hiring process position. Rather than scheduling all of the candidates as required, the hiring manager reviewed the candidates' application materials, identified those who would be offered interviews, and shared her impressions with the interview panelists. We directed the department to assemble a new interview panel and to interview all candidates on the interview list.
- HR copied us on correspondence with a hiring department that sought to interview candidates that did not meet the minimum qualifications. We supported HR's determination *not* to approve the requested interviews.
- An application review panel did not review the applications of all candidates provided by HR. The panel reported that they had randomly determined which applications to review. We directed the panel to reconvene and conduct a complete review consistent with Plan requirements.
- An application review panel did not provide adequate documentation to explain why applicants with the same qualifications were treated differently in terms of their placement

⁴ A panel of trained employees (ARP) who have been assigned to review applications of applicants on the preliminary eligibility list and assemble the interview list from among those who meet the minimum qualifications. HR conducts an independent review of the applications of applicants proposed by the department before approving the interview list.

on the interview list versus the alternate interview lists. The panel reported that they had assigned interview list placements randomly. We directed the panel to reconvene for purposing of making and documenting substantive decisions.

- A hiring department's administrative support copied us on the submission to HR of a proposed interview list following an application review process. Knowing that the recruiter was out of the office that day and could not immediately respond, we reviewed the submission. The documentation demonstrated a review of only a portion of the applicants. We provided feedback and guidance and the packet was later re-submitted with errors, including failure to identify at least three candidates to interview from among those who met the minimum qualifications. We provided further guidance.
- An application review panel attempted to delete an applicant from the applicable form believing there had been a duplicative entry. We directed the panel to verify that the entry was in fact duplicative before deleting anything and the panel discovered the entry was not duplicative. The applicant remained on the list and his/her application was reviewed as required.
- An employee who had not received interviewer training served on two application review panels in short succession. In one case, the employee was one of only two to review the applications and we required another application review process. We also asked HR to conduct a review to determine if the ineligible employee had participated in any other hiring activities. Results are pending.
- We questioned placement of a candidate on the interview list following the department's application review process and HR's approval of the interview list. Upon consultation with HR, the applicant was disqualified.
- We disagreed with HR's determination to disqualify a candidate who received a disciplinary suspension *after* applying for a position. The Plan states that a suspension disqualifies an applicant who is suspended in the 12-month period *prior to* his or her application for the position⁵. The determination was modified.

Based upon communications with recruitment leadership and our own observations, significant guidance was required to support compliant and transparent validation at the department level. This will be addressed via training and, hopefully, in technology that will be developed to support the process.

- Interviews:

We observed the same types of issues noted in past semi-annual reports. The most common is when a panelist clarifies, explains or rephrases a question. We continued our practice in those instances of providing guidance to the panelists to prevent recurrence. We also continued our

⁵ Hiring managers are granted access to internal and recent past employees' personnel files in the final decision-making process and would be able to consider other discipline at that time.

practice of providing real-time guidance on proper completion of Interview Evaluation Forms⁶ (IEFs).

Notable observations include:

- An interview panel began conducting interviews before HR had approved the interview list and interview questions, and an untrained/ineligible employee served on the interview panel. We stopped the process and evaluated what had transpired via conversations with HR and the hiring manager, as well as a review of the documentation. Several errors had been made going back to the department's application review process. One of the applicants interviewed did not meet the minimum qualifications, and the panel did not ask all of the scored and weighted questions. Ultimately, we provided refresher training to the hiring manager responsible for the requisition and required that the application and interview processes be repeated consistent with Plan requirements.
- A validation error was made as evidenced by the fact that an ineligible candidate presented for interview. The interview panel immediately caught the error, and the candidate was disqualified. The value of having safeguards embedded throughout the process was demonstrated here.
- An interview panel at one of the hiring fairs were observed discussing impressions of a candidate as they were completing their Interview Evaluation Forms. We interjected and counseled the panelists on the applicable Plan requirements.

- *Selection Meetings:*

We continued our practice of providing real-time feedback on completion of the paperwork that supports and/or is generated during the selection meeting. The most common issues we encounter include the order in which candidates are listed on the Interview Panel Ranking Form (IPRF) and failure to document the final ranking.

Notable observations include:

- An interview panel failed to conduct a selection meeting within the required time frame following the interviews. They intended to conduct a second interview of the one candidate interviewed, which is allowable in the Actively Recruited process, and misunderstood the selection meeting requirement under those circumstances. Before the second interview was offered, the candidate (internal) separated from CCH. Rather than completing the process and all applicable documentation, the hiring department contacted HR to request a re-post. We required completion of all required Plan procedures and documentation requirements.
- An interview panelist, who was removed from the interview panel for operational reasons following the first interview, did not attend the selection meeting. This selection meeting was repeated at our request with the panelist present to provide input regarding the interview he participated in. We also directed the panel to document the reason for his attendance at only one interview.

⁶ The IEF is the form utilized by the interview panel during the interview process. Each panelist completes an IEF for each candidate interviewed. The form contains the approved interview questions, space to take notes, and space to score the candidate's response to each interview question.

Decision to Hire packets:

The Decision to Hire (DTH) packet contains all the documentation produced by the interviewed candidates (Taleo application, resume, transcripts, licenses or certifications, *Shakman* Certifications (NPCCs) letters of recommendation) and everything generated by the interview panel and hiring manager in the hiring process. These packets are submitted to our email account for final review after the HR recruitment staff has reviewed the packets for accuracy and compliance with the Plan. In addition to providing guidance to the recruitment staff as questions arise during their review of the packets, we review these packets for compliance both on random and targeted bases.

In some circumstances such as following hiring fairs, we review interview and selection documents before or concurrently with HR to support speedier finalization of the DTH packets. Under those circumstances, we assist with identifying errors and omissions in the paperwork and HR communicates with the departments to facilitate corrections.

There were six instances in which we identified minor, easily correctible administrative errors. Notable observations include:

- Information on a DTH form regarding the names and number of candidates interviewed did not match what was contained in the DTH packet. The recruiter determined that the department had mixed up documents between the internal only and the external posting of the position and the issue was corrected.
- The documents in a DTH packet failed to demonstrate that the selected candidate possessed one of the minimum qualifications. The qualification had not been validated in the screening process and had not been addressed by an interview question. Because the candidate selected was the only candidate interviewed, this deficiency was corrected via a validating question submitted via email with the response maintained in the interview file.
- HR involved us when a department was having difficulty with complying with their guidance regarding necessary corrections to interview documentation before offers could be made. They had been communicating the issues through the department's executive assistant without success. We met with the executive assistant to explain HR's requests and to walk her through how to best support the process.
- HR involved us when a department was having a difficult time making necessary corrections. In this instance, HR had been communicating directly with the interview panelist. We contacted the panelist to offer guidance and invited him to attend refresher training.
- HR contacted us when an interview question asked for purposes of verifying a minimum qualification elicited a response including protected information. Upon review of the question, we noted that it did not substantively match the corresponding pre-screening question and that the pre-screening question did not match the current job description. It had been our understanding from prior communications with HR leadership that the intention had been to change the minimum qualification that appeared on the job description across all CCH positions consistent with the language utilized for the pre-screening question. We did not require re-posting of the position because the question was not weighted and the one candidate who was interviewed did not receive an average interview score high enough to be considered for an offer. We brought the issue to the attention of HR leadership so that the mistake would not be repeated in subsequent postings.

- A packet contained educational documents for the selected candidate earned outside of the United States that did not clearly match the educational minimum qualification. After consulting HR, they obtained a foreign degree equivalency analysis and learned that the candidate's education did not meet the minimum qualifications. The candidate was disqualified.
- Upon pre-DTH packet review of Hiring Fair interview and selection documentation, I noted that the IPRF was used to document a process that was slightly modified for the Hiring Fair. Given the typical use of the form, the information presented was confusing. I made recommendations to address the concern.
- Postings:

Though verification of posting accuracy is incorporated into the DTH packet review after the hiring process has concluded, we additionally reviewed nine postings at the beginning of the hiring process to evaluate whether all required information was accurately included on the posting and in the applicant tracking system. We found no errors in that review⁷.

Advanced Clinical Positions (ACP)

This is the process utilized to hire physicians, psychologists, and advanced practice providers. We monitored five ACP processes primarily via the DTH review process. There were some minor administrative errors requiring correction.

Notable observations included:

- HR submitted a preliminary DTH packet to us upon discovering that the interviews were completed without notice. We also discovered that an individual who had not attended the most recent interviewer refresher training (to maintain eligibility) participated in the process. We reviewed the documentation and determined that the process was otherwise followed and did not require corrective measures. We reminded the hiring manager and administrative staff of the notice requirements and advised them that the individual who had not attended the most recent refresher would be required to attend in-person interviewer training before participating in any additional hiring processes.
- HR advised us of a process that resulted in no hires due to HR's disqualification of the selected candidates. In this hiring process, HR validation does not occur until the DTH packet has been submitted. Here, the department interviewed and recommended candidates that did not meet the minimum qualifications of the position. This is another good catch demonstrating the function of a safeguard built into the process. Validation requirements are addressed during in-person interviewer training and will be reinforced in the refresher training in development.

Direct Appointments & Medical Staff Appointments

We review Requests to Hire (RTH) packets submitted in connection with the CEO's request to appoint an individual to a Direct Appointment position. This reporting period, we received seven such packets. For the most part, when I had concerns, they were quick administrative fixes. However, there were a couple of exceptions:

⁷ Posting errors were identified in Decision to Hire reviews.

- Three selected candidates were hired and onboarded during the reporting period without advance circulation of the RTH packet to the OIIG and EPO pursuant to VIII.H. This advance circulation is meant to allow the opportunity for the OIIG and/or the EPO to object if Plan requirements are not satisfied before the hiring process is completed.⁸.
- One packet was produced with documentation that did not demonstrate the selected candidate's possession of all minimum qualifications. Both my office and the OIIG expressed concern. After expressing these concerns to the CHRO, the selectee's qualifications were fleshed out both verbally and in writing to the satisfaction of both the OIIG and the EPO.

A similar process is used when the CEO and the CCH Board of Directors appoint someone to a department, division or section chair of the medical departments of the medical staff (Plan Section VII.B). HR submitted two RTHs. I asked for a correction on one of the job descriptions (typographical error with substantive impact) before the RTH packet was circulated but otherwise had no concerns.

Hiring Fair

The Hiring Fair provision was added to the Plan in February 2020 but was not utilized until the summer of 2021 when HR and leadership made the decision to implement the process due to the critical staff shortage described in the introductory paragraph. Three of the four⁹ hiring fairs since that time were held during this reporting period, with the fourth largely planned in the reporting period.

We provided input on logistics that would support compliant 'day-of' processes, developed and implemented 'day-of' trainings for interview panelists and administrative support, and monitored some of the interviews and selection meetings. We also reviewed some of the interview and selection documentation submitted to HR to address errors and omissions and facilitate quicker processing¹⁰. Aside from one concerning observation during one interview (addressed earlier in the report), we did not identify any notable concerns with the interviews and selection meetings monitored.

The Hiring Fair process was included in the Plan as the pandemic was emerging and priorities were shifting. Understandably, there were no immediate plans to utilize a process that would involve large gatherings, and developing the training and infrastructure (e.g., standard operating procedures, checklists, tracking mechanisms and forms) was not identified as a priority. Unfortunately, the decision to start scheduling fairs to address critical staff shortages was made at a time when HR staff and the EPO were stretched thin and without adequate time to develop the training and supporting infrastructure critical to provide the requisite transparency and to facilitate compliant implementation of this very complex process. Because of how closely together the fairs

⁸ Two were hired at the end of the applicable reporting period. Their RTH packets were submitted in the current reporting period. This is another example of a process impacted by the separation of critical HR staff. The employee in the position responsible for facilitating notices separated during the reporting period and another employee was identified to assist on a temporary basis. It is my understanding that the hiring process to fill the vacancy has concluded and that an offer is imminent.

⁹ Nursing (2), Laboratory (1) and Managed Care (1).

¹⁰ These reviews took place prior to or contemporaneously with the recruitment team's review (the review conducted prior to HR's final approval of the DTH packet).

have been held, the necessary training and infrastructure have yet to be developed. In the absence of these important safeguards, as well as other observable internal and external challenges, missteps and errors occurred.

Though my office did not have the time and resources to fully audit the fair processes, the following violations and other process-related concerns were identified in one or more hiring fair:

- Position IDs (vacancies) were assigned to fair positions without funding secured via the Request to Hire process.
- Positions were posted without the requisite language identifying them as Hiring Fair positions. Though HR sent fair advertisements to current and past applicants for the job titles posted for the fairs, the advertisements did not identify the specific hiring fair requisition numbers or provide notice that the applicant must attend the Fair to be considered.
- Positions that were in the process of transitioning from non-union to union positions (and were expected to be filled as union positions) were posted as non-union positions. This is a concern because the Plan requires our postings to identify union status as the union/non-union status of a position may be relevant to a potential applicant's decision whether to apply and may therefore an error may impact the applicant pool.
- Requisitions were posted where the hiring process for the same position, utilizing the same requisition number and PIDs, had not been exhausted by the hiring department.
- Requisitions for positions to be filled via the process were re-posted after the applicant pools from earlier postings of the positions were exhausted. In some instances, this resulted in numerous requisitions for the same position rather than consolidating the existing vacancies *by position* (job title) into one Hiring Fair requisition. A concerning consequence was that multiple shifts and work locations were posted for the same job titles. This manner of posting is contraindicated in a process designed to facilitate more streamlined hiring. Of further concern is the fact that interview and selection processes were not adjusted to accommodate for this manner of posting. This introduced complications into the process of assigning PIDs.
 - The EPO was not made aware when final DTH packets were completed consistent with the process utilized for other hiring processes. I addressed this with HR and suggested a method that will provide the access necessary for my office's review without creating an unnecessary administrative burden.
- The team that registered Fair attendees did not properly communicate to attendees at check-in that there were specific requisitions for the hiring fair process and that they were required to apply to those specific requisitions/postings of the applicable positions to be considered.¹¹

¹¹ The Plan allows for individuals to interview before applying, but the Plan requires that CCH put on notice that they must apply for the specific hiring fair posting of the position for which they interviewed. In at least one instance, it was determined after the Fair that an applicant had not applied for a Fair requisition but rather an earlier posting of the position. The registration team had simply asked attendees whether they had applied for the job title.

- CCH did not provide attendees with required documentation regarding next steps in the process.
- CCH did not satisfy the Hiring Fair Informational Resources requirement. This provision requires the hiring department and HR to assign both staff and leadership to attend the Fair for the purpose of providing attendees with information concerning CCH, the department and the position(s) or to schedule question and answer sessions during the fair.

Aside from these concerns, some adjustments were made to the process to work around limited hiring department and recruitment staff availability in planning and implementing the Plan process. For example, in all but the most recent Fair, the application review and advance interview scheduling processes were not utilized. Though alternative validation methods were incorporated to meet the Plan's fundamental safeguard requirement, it is my understanding that HR leadership may wish the modification to be permanent and is interested in making other permanent changes to the existing process.

In my opinion, a formal review and amendment of the Hiring Fair provision is necessary to ensure compliance and transparency going forward. Creating workarounds on an *ad hoc* basis, even when the workarounds are compliant with the Plan's fundamental principles, sets a bad precedent. Soon enough, our rules would become the exception and our processes would be implemented without adequate transparency. I recommended that we discontinue use of the Hiring Fair process until the Plan is amended and the training and supporting infrastructure described above are developed.

Emergency & Temporary Hires

In August, CCH submitted the certification necessary to support the emergency hire of temporary legal interns to aid in tracking employee compliance with the COVID-19 vaccination mandate and provided all requested information to the Office of the Independent Inspector General (OIIG) regarding the job description, pay, selection process, and timelines.

Additionally, in the face of a COVID-19 resurgence, the OIIG approved one final extension of the timeframe for employing contract tracers, case investigators and case investigator supervisors who had been hired temporarily on an emergency basis pursuant to VIII.E. The extension expired December 31, 2021. All emergency hires separated at or prior to that date¹².

Miscellaneous

The Plan requires my office to review all letters of recommendation (LORs) and forward any containing a Political Contact to the OIIG with a Political Contact Log. Hiring departments are trained to forward LORs to us upon receipt (as opposed to after the hiring process) so that a determination may be made as to whether the recommendation may be considered by the interview panel and hiring manager. No LORs were submitted to my office in the reporting period.

In my last report, I expressed a desire to incorporate additional measures to support compliance with this requirement. One option I suggested was to include the requirement on the Hiring Checklist (a resource tool HR provides to hiring departments with every interview packet). The

¹² The OIIG also approved continued use of the Grant Position exception for non-emergent hiring into positions covered by the Contact Tracing Initiative.

other option was to include the process the interview panel instructions that were being finalized at that time. Neither measure has been implemented to-date.

Supplemental Policies

Reclassification of Positions (#02.01.11) and Desk Audits (#02.01.19)

- The reclassification requests addressed in our last semi-annual report that were withdrawn as incomplete were not re-submitted.
- One reclassification was approved but was not implemented. HR reported that there were budgetary reasons standing in the way of implementation but that will be resolved. We will continue to follow.
- Desk audits I recommended in a June 2021 Incident Report were not completed. HR acknowledged the recommendation and advised me that a staffing shortage in HR was responsible for the delay. Classification & Compensation is currently a team of only one.

Transfers (#02.01.12)

No transfers were reported.

Training Opportunities (02.01.13) & Overtime (02.01.14)

The Employment Plan Office submits electronic NPCCs for completion by the Department Heads twice per year specific to their implementation of the Training Opportunities and Overtime policies over the prior six-month period. The most recent NPCCs were due on December 15, 2021, and 152 out of 188 have been completed to-date. We will continue our follow-up efforts to achieve full compliance.

Interim Assignment (#02.01.16) and Interim Pay (#02.03.01)

HR submitted twenty-nine approvals for Interim Assignments and corresponding Interim Pay, eleven of which approved extensions of earlier approvals. Included among these were approvals for classifications of employees and circumstances not covered by the policies. HR explained that there is currently no better alternative to document and report the pay given that the applicable “special earnings” policy and corresponding form have not been completed¹³.

I continued to review the approvals and identify concerns from a compliance and transparency standpoint. In a few instances, I noted administrative errors that were easily fixed following a request for additional materials (e.g., current resume, transcripts, signed NPCC) or the correction of typographical errors. I also noted some other deviations that HR justified to my satisfaction under the present circumstances¹⁴. My most significant concerns in the reporting period stemmed

¹³ One of the two HR staff working on the policy separated from CCH, the other was promoted into another role, and the leader temporarily assumed additional duties left by another vacating leader. I drafted proposed form content for Interim Assignment and Interim Pay last summer which will be reviewed once HR leadership is available to attend to policy and Plan updates.

¹⁴ Employees continuing to perform existing duties on an interim basis, in their new probationary period, after being promoted to another position in the organization.

from the policies themselves. Due to the challenges and prioritization detailed in the introductory paragraph, the updates were not completed. They are currently under review.

Layoff/Recall (#02.01.17)

There were no layoffs or recalls during the reporting period.

Demotion (#02.01.20)

There were no demotions during the reporting period.

Grade 24 Positions: Classification (#02.01.21) and Salary Adjustments (#02.01.22)

Human Resources is required to perform a market study to determine the salary for Grade 24 positions when they are new, vacant, or subject to a request for an adjustment. The Chief Human Resources Officer (CHRO) approves all salary determinations and submits determinations and approvals to our office and the OIIG. In this reporting period, fifteen were submitted. In most instances, they came attached to Request to Hire packets for new Direct Appointments. One adjustment, which had been approved in the last reporting period, was also produced. We did not identify any concerns with the documentation.

In one of our more recent semi-annual reports, I suggested that clarification of certain language in the policy. HR agreed, but the update was not made. It is among several policies under review.

Discipline (02.01.15)

We reviewed approximately one hundred corrective actions, including eighty disciplines and twenty counsels. As of the time this report was issued, the total number of disciplines and counsels for the applicable period had not been officially calculated. I was able to verify that most discipline was lower level (below suspension)¹⁵ and that time and attendance infractions continued to be the most frequent basis for the issuance of corrective action.

The violations (and other concerns) we identified are broken down as follows:

- Data fields not completed (e.g., employee start date, incident date, verification of management assessment complete, union affiliation) (16)
- Data fields completed unsatisfactorily (e.g., incorrect use of section, insufficient description) (13)
- Corrective action packet not sent to HR or sent to HR late¹⁶ (10)
- Corrective action packet missing required documents¹⁷ (6)
- Outdated corrective action listed in Corrective Action History (6)
- Progression (failure to follow progression where required or initial failure to document earlier required steps) (5)
- Late or missing witness signature (required when employee does not sign) (5)
- Missing required HR approval signature (1)

¹⁵ There were twelve terminations and ten suspensions.

¹⁶ Timeliness for termination packets improved, presumably related to the additional support and reference materials introduced in the last reporting period. Three of twelve termination packets were produced late.

¹⁷ Five of twelve termination packets were incomplete. Additional reinforcement is necessary.

- Late, un-dated or missing Department Head or Supervisor approval signature (4)
- Inclusion of Protected Health Information in a corrective action packet (1)

Consistent with past practice, we met routinely with an employee from the Operations Counsel team to discuss violations and other concerns identified and she followed up with the issuing supervisors as necessary to provide guidance and/or require corrections. To improve compliance, we also implemented the optional refresher training described in our last semi-annual report. The training was well attended and well-received.

INELIGIBLE FOR HIRE LIST

HR and the EPO met several times to review terminations and resignations/retirements made in lieu of termination to evaluate whether inclusion on the Ineligible for Hire List is pursuant to Plan Section IV.P is warranted. Seventeen individuals who separated in the applicable period were added.

When an individual is added to the list, HR provides notice to those added to the list. Individuals (except those exempt from Career Service) may appeal the decision in writing to the CHRO within 30 days of the date the notice was sent. Unless the CHRO reverses the determination, the individual remains on the list for a period of five (5) years. The CHRO did not receive any appeals during this reporting period¹⁸.

Some removals from the list were not reported to the OIIG five business days *in advance* of removal as required by the Plan and the process of updating the List to include the names of some of the employees evaluated took a little longer than usual¹⁹.

A total of seven individuals were removed in the applicable period as their time on the list expired.

INVESTIGATIONS

During this reporting period, we received eleven new complaints. Of the new complaints filed, four were closed during this reporting period. We did not close any investigations opened in earlier reporting periods. As mentioned in previous reports, we have numerous pending investigations that have carried over from several past semi-annual reporting periods.

New Complaints

New complaints and their current statuses are as follows:

- EPO2021-22: An employee alleged that a supervisor was bullying her and creating a hostile work environment. Complaint was referred to the Equal Employment Opportunity (EEO) Department. *Closed*

¹⁸ Because there were no appeals in this reporting period, there was no opportunity for HR to implement the recommendation I made in our last report to utilize a template letter or determination form when responding to appeals.

¹⁹ The HR team member who had been responsible for this function separated in the reporting period. Another HR employee has been brought in temporarily to assist with parts of the process. My office assisted with the administrative component of updating the List. I also assisted with providing notice to the OIIG, albeit not within the timeframe provided for in the Plan. The hiring process is underway for the HR position that had been handling this function.

- EPO2021-23: The OIIG referred a complaint by a patient that alleged poor customer service. The matter was referred to the applicable department head. *Closed*
- EPO2021-24: Corporate Compliance forwarded a hotline complaint submitted by an employee who alleged that she was subject to poor working conditions/mistreatment, and racial discrimination. She also made unclear allegations implying possible concerns with a hiring process. This matter was simultaneously reported to the EEO Department and department leadership. *Pending*
- EPO2021-25: An employee alleged that he/she applied for a posted position and was informed that another less experienced employee was transferred into the position in violation of the Employment Plan and CCH transfer rules. *Pending*
- EPO2021-26: CCH Corporate Compliance forwarded two anonymous hotline complaints that alleged that a supervisor had created a hostile work environment, favored certain employees, and had been the beneficiary of favoritism due to nepotism. The hostile work environment allegations were referred to the EEO Department. *Pending*
- EPO2021-27: Anonymous complainant alleged that management was assigning higher level duties and unfairly distributing training opportunities within the department amongst employees holding the same position based upon favoritism. *Pending*
- EPO2021-28: Corporate Compliance forwarded an anonymous hotline complaint by an employee who alleged that employees were being forced to work inordinate overtime shifts via the use of threats of discipline for insubordination due to staff shortages. Operations Counsel and the department head were copied simultaneously. *Pending*
- EPO2021-29: Corporate Compliance forwarded a named hotline complaint by a named employee who alleged that a co-worker is working beyond her job description in a quasi-managerial capacity and engaged with the employee in a way that created a hostile work environment and hindered her performance. She further alleged that department leadership was aware and has not addressed the concern. Corporate Compliance advised that the matter had been referred to department leadership and management. Department management promptly responded and described a plan of action, which we are following. *Pending*.
- EPO2021-30: Employee alleged that a supervisor openly discussed her FMLA usage to an unrelated co-worker. *Pending*
- EPO2021-31: Our office was forwarded an unperfected IDHR (Illinois Department of Human Rights) discrimination charge by a contractor. We referred this matter to the EEO Department. *Closed*
- EPO2021-32: Corporate Compliance forwarded a hotline complaint by an employee who alleged miscalculation of overtime and holiday pay. The Payroll Department was simultaneously copied and addressed the issue. *Closed*

Reports Issued/HR Responses

Our office did not issue any Incident Reports this reporting period and did not receive formal HR Responses to the recommendations contained in the Incident Reports issued in June 2021²⁰.

NEW & UPCOMING

Employment Plan and Policy Updates

I have recommended specific Plan and Supplemental Policy updates throughout this report and recent past semi-annual reports. These updates (as well as updates to the corresponding training, procedures and forms) are the highest of my priorities as they serve as the backbone to facilitating compliant employment actions with the requisite transparency to demonstrate compliance.

It is worth noting that HR and various hiring managers, considering critical staffing shortages, are negotiating contracts with consultants to assist with various parts of the recruitment process for nursing positions. I collaborated with HR and the Legal Department on generally applicable language that will satisfy the overarching Plan requirements (e.g., contractor's agreement to comply with the Plan, Personnel Rules and applicable policies, refrain from engaging in unlawful political discrimination, report political contacts and unlawful political discrimination, sign no political consideration certificates [NPCCs], and attend Plan training, etc.). Beyond that, I advised all involved parties that to the extent that a proposed contract involves roles for recruitment consultants that the Plan does not currently authorize, a Plan amendment will be necessary prior to implementation.

Process Improvement

In our last semi-annual report, I reported that my office had been collaborating with HR and the Health Information Systems (HIS) Department on an initiative to automate key components of our hiring processes. At that time, I anticipated that key parts would be ready for implementation within months and could be more fully rolled out over time. That unfortunately did not happen, and the initiative has been at a standstill for several months. That said, the types of improvements we were working toward can still be seen on the horizon.

HR recently contracted with a project management team that is evaluating our hiring and recruitment practices and procedures (including the systems we utilize) and will ultimately assist us in adjusting and/or creating procedures and tools to support efficient and transparent compliance with all applicable Plan and collective bargaining agreement (CBA) requirements, as well as any HR policies. I provided the project management team with information regarding the earlier automation initiative and connected them to our HIS team who are available to provide information and access necessary to support their review and analysis of our existing technology. I also provided the team with information and input regarding Plan, CBA and other HR-required processes and procedures relevant to their broader review and analysis. Given my understanding of the timeframes built into the contract, I expect to have much to share in our next report.

²⁰ Informally, I am aware that HR intends to conduct a desk audit that was included among the recommendations.

CCH Website

The Plan specifies certain content and information that our website must contain. After a basic review of the current content, I identified the following as concerns:

- Various employee names and/or mailing addresses²¹ on the face of the Human Resources page or in the documents accessed via its links are incorrect/outdated.
- The Quarterly Report for Q4 of 2021 has not been uploaded.
- Some of the Plan exhibits (Department List, Certified/Licensed Healthcare Professionals List, and Department, Division & Section Chairs List) may be outdated.²²
- The website does not contain all the job descriptions required, and the ones it does contain do not appear to be the most current versions²³.

I also noted that the narrative content currently on the Human Resources page needs to be updated and reorganized, that the website does not contain an Employment Plan Office page, and that there is no reference or link to Employment Plan information on the Careers page (accessed by individuals interested in applying for positions). I intend to work with HR and our IT team to ensure that these updates and corrections are made on a priority basis.

HR and Employment Plan Office Staffing

I addressed HR and EPO staff shortages in this report's introductory paragraph and have indicated the impact of that throughout. It is important to report that relief is on the horizon for both departments.

- HR hired a new recruiter and has contracted to bring on a considerable number of additional recruitment resources. Additionally, as described above, we hired a new manager of operational development who is already actively engaged in updating Plan-required training content. It is also worth noting that we recently onboarded a new operations counsel. Finally, it is worth noting that the hiring process to fill the Assistant Administrator position is well underway. That position, which was vacant for a substantial portion of the reporting period, plays an important role in the Interim Assignment, Direct Appointment and Ineligible for Hire List processes and serves as a liaison to our office.
- The hiring process to backfill our department's program manager position, which is critical to managing our investigations, is underway. Mr. Rocha also recently allowed me to take the steps necessary to request the funding for another analyst position. Together with the anticipated increase in HR staff resources, process/technology improvements, and updated training of HR, hiring departments, and staff, these new hires will go a long way to support CCH Plan compliance.

Sincerely,



Kimberly Craft

EMPLOYMENT PLAN OFFICER

²¹ OIIG [satellite office], EPO and Corporate Compliance mailing addresses are incorrect. EPO and Chief Compliance & Privacy Officer names incorrect.

²² The exhibits themselves are the most current versions prepared but require review to ensure accuracy and completeness as they have not been updated since 2017.

²³ It is my understanding that a contractor has been engaged to address this issue.

cc: CCH Board of Directors *via* Deborah Santana, Secretary of the Board, CCH
Jeffrey McCutchan, General Counsel, CCH
Kent Ray, Associate General Counsel, CCH
Valarie Amos, Chief Human Resources Officer, CCH
Carrie Pramuk-Volk, Associate Chief Human Resources Officer, CCH
Andrew Jester, Office of the Independent Inspector General