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## EMPLOYMENT PLAN OFFICE 18TH SEMI-ANNUAL REPORT

Dear Mr. Rocha and Inspector General Cyranoski:

### INTRODUCTION

This is my office's 18th Semi-Annual Report covering my office's observations and activities between January 1<sup>st</sup> and June 30<sup>th</sup><sup>1</sup>, and goals and new initiatives for July 1<sup>st</sup> through December 31<sup>st</sup>.

As you know, the Plan and Supplemental Policies are manuals developed by CCH over the course of a collaborative process providing for Cook County Health's (CCH) dismissal from the *Shakman* litigation<sup>2</sup>, that detail system-wide policies, practices and procedures governing CCH hiring and other employment actions. The procedures are (1) proactive, meaning that they are designed to support compliance with laws prohibiting political and other forms of unlawful discrimination (e.g., age, gender, religion, race) and (2) transparent, meaning that our leaders are required to document their processes and the bases for their decisions.

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<sup>1</sup> I have taken some liberties to report on data and activity more current than June 30<sup>th</sup> and to provide information pre-dating January 1<sup>st</sup> to provide historic context.

<sup>2</sup> *Shakman v. Cook County et al.*, 69 CV 2145. The lawsuit, pending for many decades, was brought as a response to the County's use of political patronage as the litmus test for all decision making re employment actions, e.g., hiring, firing, discipline, transfer, interim assignment, salary determination etc.). The County, including CCH, was released from the lawsuit in 2018 following many years of effort to create and implement the Employment Plan. The Plan, designed to create durable and transparent safeguards against future abuses, was drafted in a collaborative process between CCH, the Court, the County and the Plaintiffs.

My office is tasked with supporting compliance with the provisions and spirit of the Plan by:

- Preparing training materials and training employees at all levels within the organization
- Observing and auditing employment actions implemented by Human Resources (“HR”) and department leaders to assess compliance
- Developing strategies and procedures to achieve compliance (utilizing an understanding of CCH’s business, organizational and staffing needs)
- Accepting and investigating complaints of non-compliance with the Plan’s procedures
- Referring reports of political contacts and/or unlawful political discrimination to the Office of the Independent Inspector General
- Maintaining the Direct Appointment List (list of the positions that may be filled via appointment by the CEO) and reviewing proposed appointments for compliance prior to hire
- Issuing public reports semi-annually covering EPO activities for the reporting period.

Between January and June of this year, my office continued to perform the functions detailed above with a significant additional focus on both (1) partnering with HR on efforts to modernize the Plan and decrease the time to fill CCH positions and (2) decreasing the backlog of pending investigations of alleged non-compliance.

## **EMPLOYMENT PLAN AMENDMENTS**

### ***PROCEDURAL AMENDMENTS***

Though the *existence* of the Plan and Supplemental Policies is mandated by court order, there is no requirement that the processes that were negotiated during litigation remain untouched in perpetuity. The Plan is a living document, meaning that it may be amended with Chief Executive Officer (CEO) approval, to modify existing processes or include new ones.

With the onset of the pandemic, the Great Resignation, and changes in the job market, CCH began facing the types of staffing challenges experienced nationwide that continue to exist. Given these challenges, the efficiency and speed of our hiring processes became a focus.

While the hiring provisions detailed in the Plan impact the time-to fill our positions, they are only one of several factors affecting the workflow required to fill vacancies at CCH<sup>3</sup>.

As reported in past semi-annual reports, HR and this office began working together immediately when these challenges arose to identify and implement changes to the Plan

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<sup>3</sup> Other factors include, (1) the requirement that CCH honor and apply all hiring-related requirements contained in the numerous collective bargaining agreements that apply to most of its staff, (2) the availability of staff to implement hiring processes/volume of work, (3) manual/inefficient implementation tools and procedures; (4) clinical credentialing, where applicable; and (5) flexibility with start dates.

and related forms that would expedite time-to-fill. These resulted in two temporary modifications to existing Plan processes that are still in effect: the Revised Hiring Process and the Revised Hiring Fair Process. Through these amendments (which were further modified over time<sup>4</sup>) advance notice requirements and other time frames were shortened, documentation was streamlined, and the ability to make day-of-fair offers was added. Implementation of these processes (as well as other contemporaneous efforts<sup>5</sup> to address the other factors affecting time-to-fill) made a big impact as demonstrated by the metrics Valarie Amos, our Chief Human Resources Officer, has shared at meetings of the Board.

In the most recent prior semi-annual report, I reported that Mr. Rocha, our CEO, had initiated another collaborative process involving a comprehensive review of the Plan's hiring processes (and the current implementational procedures) conducted by a multidisciplinary team with the directive to develop *permanent* amendments to process and procedures. The goal was to further reduce the time-to-fill vacant positions while honoring all applicable laws and collective bargaining agreements and while also providing the requisite transparency.

Though this effort is ongoing, I am happy to report that a new, permanent hiring process designed to significantly reduce time-to-fill was approved and implemented. The process provides for an accelerated timeframe of as short as a week from posting to offer under circumstances where Mr. Rocha believes accelerated hiring is appropriate and certifies the need. It has been piloted for hiring nurses and its impact on reducing time-to-fill will be demonstrated via metrics Ms. Amos presents to the CCH Board of Directors (Board). Initial success in the use of this new process has prompted the expansion of its use. Because implementation did not occur until August 10<sup>th</sup> our observations of compliance in implementation will be addressed in the next semi-annual report in March of next year. I will report on all additional modernization efforts and results at that time.

#### ***EXHIBIT AMENDMENTS***

The Direct Appointment List (Plan Exhibit 5) was updated three (3) times during the period as new positions were created and approved for inclusion on the list. Though new positions that would be eligible for the Actively Recruited List (Plan Exhibit 2) were created, that list was not updated. This does not pose a Plan-compliance issue during the life of the Revised Hiring Process as there is essentially currently no distinction between the way

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<sup>4</sup> This office and the OIIG approved two revisions to the temporary processes: (1) the elimination of the requirement in the Revised Hiring Process that interview questions be specifically tailored to verify minimum qualifications and (2) the elimination of the Revised Hiring Fair Process requirement that there be separate postings for each shift and location of a given position.

<sup>5</sup> As included in past EPO reports and as Ms. Amos has reported to the Board, there have been several contemporaneous efforts to address some of the other factors impacting time-to-fill. Specifically, (1) the recruitment team grew substantially (new hires and contracted support) and (2) consultants developed many tools for both HR and the hiring departments to optimize (automate) the process. Efforts are ongoing.

General Hiring positions and Actively Recruited positions are handled. The Advanced Clinical Positions List was not updated.

## **INVESTIGATIONS**

At my last EPO semi-annual report presentation to the Board, I reported that my office carried a large backlog of pending investigations the result of chronic short staffing in the department and other competing priorities. The Board asked that this office focus on resolving outstanding investigations to reduce and hopefully eliminate the backlog of cases.

After considerable work to assess the nature and posture of the older cases in the backlog, the EPO was able to resolve fifty-one (51) cases via the processes outlined in a recent amendment to the Plan's EPO investigations provision<sup>6</sup> which grants the EPO authority to resolve matters not suitable for resolution via a formal incident report.

Additionally, this office received twenty-one (21) new complaints during the reporting period<sup>7</sup>. We intend to issue formal Incident Reports regarding certain pending matters in the coming reporting period and will report on outcomes.

In the preceding reporting period, this office issued the following summarized Incident Reports and have received responses from CCH as highlighted beneath the summary of each investigation and recommendations.

- EPO2019-051. Allegation that a CCH employee was shifted within a department to perform in a role apart from the designated patient population as outlined in her job description. Due to the fact that this was due to a transformative expansion of the department in question and not the result of any individualized treatment of the employee, the EPO recommended HR initiate a reclassification procedure which took the employee's new role into consideration. HR Response: The employee was promoted into the appropriate role before HR could commence a reclassification effort.
- EPO2021-021. Allegation that an applicant asserting veterans' status per the Employment Plan was denied a position despite his veteran status. The investigation revealed that the applicant failed to produce the proper documentation during the application period and was therefore not eligible for veterans' status. The evidence developed during the investigation also showed (1) a degree of confusion in the recruitment team concerning which documents are sufficient to demonstrate veteran status and (2) inconsistency between the interview selection meeting notes and the order of the candidates on the ranking form. We recommended that HR (1) assess the

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<sup>6</sup> The provision providing for more efficient processing resulted from an amendment approved in 2022. The EPO's current investigative process will be evaluated as part of the comprehensive Plan modernization effort described above to identify tools and/or process modifications that would further reduce the time to complete an investigation while maintaining the requisite transparency.

<sup>7</sup> The new complaints involve a variety of allegations including, but not limited to, improper contacts with HR, non-compliance regarding fellowship opportunities, improper offers at hiring fairs, forgery in a hiring packet, workplace misconduct, misuse of disciplinary procedures and falsification of application materials.

application materials for the postings in question to ensure consistent application of veterans' preference screenings and (2) assess the selection meeting notes and raking form of the posting identified in the investigation and make any inquiry and corrections if needed. HR Response: HR reminded employees working in recruitment regarding documents which can be used to establish veteran status. Further, HR is awaiting confirmation from recruitment personnel whether any other candidates were impacted by the screening of veteran applicants.

- EPO2020-003. Allegation that CCH failed to manage a possible medical accommodation of a CCH employee arising from a work injury in 2014 resulting in the employee working completely outside of her job description. Although the investigation revealed that the employee suffered a work-related injury and was at least partially disabled as of 2014, no records or decision-maker witnesses were available to us from the period in question and, as such, we could not fully determine whether there was a formal arrangement from 2014 regarding an accommodation or whether the employee remains disabled. We recommended that HR examine the current arrangement and ensure that any accommodation, if needed, is documented and in compliance with legal requirements. We also recommended that HR and Employee Health Services take all steps necessary to ensure transparency in these types of matters. HR's response is pending.
- EPO2020-016. Allegations included improper HR validation, prohibited contacts in an employment action, and use of private emails for CCH business. We received a complaint that an employee hired in 2019 did not then meet the minimum qualifications for the position. The complainant further alleged that the improperly hired employee's manager had received a copy of the employee's resume from the employee's paramour (with whom the manager had a professional relationship) and used her private email account to communicate with subordinates and instruct them to assist the candidate in her application for employment. The preponderance of the evidence developed by the investigation showed that, at the time of application, the employee possessed a mix of part and full-time experience which, when added together, did not amount to the minimum experience required for the position. The evidence also showed that, although the manager's use of her personal email in support of the candidate was prohibited under CCH policy, the "assistance" contemplated and rendered to the candidate was limited to identifying the relevant posting on the CCH website. Since the manager is a union employee (and therefore had not received interviewer training), we recommended either that a trained leader provide oversight in the unit or that the union manager receive the trainings that non-union leaders receive to ensure leadership consistent with the requirements of the Plan and Policies. We also recommended that HR ensure all staff are sufficiently trained in identifying minimum qualifications and that leadership address the manager's violation of the email policy consistent with past practice. HR Response: HR acknowledged the screening error and has trained recruiters on this point. HR acknowledged the manager's union status and cited this in its declination to offer training to the manager despite her appearance of supervisory authority in the lab she, per HR, runs. HR will continue to advise departmental

leadership of this problem concerning her appearance of authority. Finally, the manager has been counseled concerning her use of personal emails to conduct CCH business.

- EPO2020-017. Allegation related to implementation of the Training Opportunities Policy. Complainant alleged that a department was offering training to some, but not all, similarly situated employees. Although the evidence developed by the investigation disproved the initial allegation, the evidence did disclose that the department in question was not in compliance with the policy requiring department heads to track non-mandatory training opportunities offered to staff. In this case, although the department did not itself initially disclose the training opportunity to staff, it discussed the training with staff, permitted to use of training leave and paid the employees while they attended the training. We believe this level of leadership involvement with the training triggered the policy’s tracking requirement<sup>8</sup>. We recommended supplemental policies training for two department leaders. HR Response: HR acknowledged the need to train the leader of the department but not the manager due to the manager’s lack of authority over staff by virtue of her union membership. HR has advised the department leader of the foregoing need to comply with the policy.
- EPO2020-018. Allegation that employee is not functioning in her current budgeted role. The preponderance of the evidence developed by the investigation showed that the employee in question has been functioning outside her role since 2020. While this arrangement seems to have been the result of the initial tentative agreement of all concerned (and may have had the tacit blessings of the former CHRO, former EEO Officer and former Operations Counsel), what remains is an arrangement that needs to be resolved such that the employee is functioning in her current title. We recommended the employee be returned to performing the duties of her job description and to her official place of assignment with the understanding that any changes to her place of assignment be documented per applicable policies. HR Response: HR agreed the employee needs to be returned to her original work assignment and will ensure the department effects such change.

The following is a list of outstanding investigations along with their respective dates of inception that the Board requested for inclusion with this report. It does not include any of the fifty-one (51) matters resolved in this latest reporting period. As of the date of this report, there are seventy-eight (78) pending matters.

Number	Investigation Number	Complaint Start Date
1	EPO2019-050	10/1/2019
2	EPO2019-015	2/23/2019

<sup>8</sup> This policy ensures that trainings that are not required of all employees (or all employees in a specific department or job title) are distributed fairly.



3	EPO2019-017	3/11/2019
4	EPO2020-001	12/23/2019
5	EPO2020-002	11/19/2020
6	EPO2020-002	6/18/2020
7	EPO2020-005	1/30/2020
8	EPO2020-0006	2/5/2020
9	EPO2020-20	4/8/2020
10	EPO2020-025	5/6/2020
11	EPO2020-026	3/17/2020
12	EPO2020-026	2/3/2020
13	EPO2020-027	6/4/2020
14	EPO2020-029	3/3/2020
15	EPO2020-029	6/26/2020
16	EPO2020-0031	8/11/2020
17	EPO2020-33	8/12/2020
18	EPO2020-036	10/26/2020
19	EPO2020-040	1/7/2020
20	EPO2020-041	1/21/2020
21	EPO2020-042	1/30/2020
22	EPO2020-043	8/11/2020
23	EPO2021-002	1/10/2021
24	EPO2021-003	12/28/2020
25	EPO2021-004	2/2/2021
26	EPO2021-0006	2/6/2021
27	EPO2021-008	5/25/2021
28	EPO2021-008.1	5/25/2021
29	EPO2021-009	2/26/2021
30	EPO2021-010	4/7/2021
31	EPO2021-011	6/2/2021
32	EPO2021-011	1/11/2021
33	EPO2021-012	4/25/2021
34	EPO2021-014	5/6/2021
35	EPO2021-015	5/6/2021
36	EPO2021-016	5/13/2021
37	EPO2021-017	5/13/2021
38	EPO2021-018	5/18/2021
39	EPO2021-019	5/26/2021
40	EPO2021-020	5/28/2021
41	EPO2021-022	6/23/2021
43	EPO2021-023	6/15/2021
44	EPO2021-024	8/11/2021
45	EPO2021-025	11/5/2021

46	EPO2021-027	8/28/2021
47	EPO2021-028	9/3/2021
48	EPO2021-029	8/26/2021
49	EPO2021-030	9/16/2021
50	EPO2021-031	9/29/2021
51	EPO2021-032	12/6/2021
52	EPO2021-034	3/5/2021
53	EPO2022-014	12/8/2022
54	EPO2022-014	10/7/2022
55	EPO2022-001	2/7/2022
56	EPO2022-002	2/10/2022
57	EPO2022-004	3/14/2022
58	EPO2022-005	5/2/2022
59	EPO2022-006	1/11/2022
60	EPO2022-007	5/13/2022
61	EPO2022-008	6/22/2022
62	EPO2022-009	5/23/2022
63	EPO2022-010	7/27/2022
64	EPO2022-011	7/28/2022
65	EPO2022-012	11/28/2022
66	EPO2022-013	9/30/2022
67	EPO2023-012	6/28/2023
68	EPO2023-024	8/25/2023
69	EPO2023-025	8/26/2023
70	EPO2023-002	1/10/2023
71	EPO2023-003	1/23/2023
72	EPO2023-004	2/1/2023
73	EPO2023-013	5/3/2023
74	EPO2023-014	5/25/2023
75	EPO2023-022	6/26/2023
76	EPO2023-023	8/2/2023
77	EPO2023-026	8/28/2023
78	EPO2023-027	8/30/2023

## **TRAINING**

Previous semi-annual reports have outlined the multiple trainings that our office circulates or conducts in conjunction with 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 training, which covers the Plan’s principles, protections and responsibilities, is offered to new employees and included in annual training. It is up to date.
- Employment Plan Interviewer Training. CCH leaders are required to attend this lengthy in-person training before participating in our hiring processes. During the applicable period, there were seven (7) in-person sessions, and ninety-four (94) employees were trained. Annual refreshers are required thereafter to maintain eligibility.

Annual training is significantly overdue.<sup>9</sup> I reported in the last semi-annual report a plan discussed with HR to update and circulate this training in topic specific modules to allow for quicker distribution of this important content.<sup>10</sup> Though this is still the plan, no modules have been completed for distribution. The fact that the Plan is currently under review for significant modifications presents some planning challenges.

By offering training on the Revised Hiring Process for continued eligibility last summer and by periodically offering optional Advanced Clinical Process refresher trainings, we have bridged the gap somewhat. By November of this year, I would like to begin offering a monthly online refresher session for those interested in a refresher and for those who have been recommended by their manager or HR as needing additional training at least until annual training modules have been completed for distribution<sup>11</sup>. I will work cooperatively with HR to define the content and develop the format.

- Supplemental Policies and Procedures<sup>12</sup> (Policies) Training. Training on the supplemental policies, like training on our hiring processes, is required of all new employees and annually thereafter. During the applicable period, there were seven (7) in-person sessions, and eighty-three (83) employees were trained. Like all-employee and annual interviewer training, we have been unable to distribute annual supplemental policies training since existing content became technologically incompatible with our new learning management system. The same plan for modular updates and distribution was agreed upon. To date, no modules have been completed. To bridge the gap, HR and my office continued to routinely offer virtual refreshers on the discipline policy, the most utilized *and* most complex of the supplemental policies.
- HR Staff Training. New HR staff are required to receive comprehensive training on the Plan and Policies. HR staff is also required to receive annual Plan and Policies training as well as training on any updates to the Plan and/or Policies. During the applicable period, there were fourteen (14) in-person sessions and almost thirty (30) employees and third-

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<sup>9</sup> Content circulated under our previous learning management system is not technologically compatible with the learning management system acquired in 2021.

<sup>10</sup> A modular approach has the added benefit of providing for an efficient way to update and communicate updates to a process or procedure.

<sup>11</sup> We have been successfully offering refreshers such as this for discipline for some time.

<sup>12</sup> The supplemental policies govern non-hiring employment actions and that must be compliant with the spirit of the Plan by being proactive and providing for transparency. These policies are addressed below, but some examples include discipline, reclassification of positions, demotions and transfers.

party providers<sup>13</sup> were trained. As with the other types of trainings, annual HR training is also required.

While the learning management system update did not impact the ability to offer HR's annual training (historically offered in person), other challenges such as Covid and HR's operational need to focus on hiring came into play. Though the plan is to ultimately return to a full, in-person annual training, we have bridged the gap by providing topic specific updates at HR staff meetings. The staff also recently received an annual refresher on the Revised Hiring Process, which currently covers the majority of CCH hiring. HR leadership communicates with us as the need for refresher training arises, and we are currently making plans with HR to offer a refresher on the ACP hiring process to the recruiters who oversee and facilitate ACP hiring.

## **HIRING & EMPLOYMENT ACTIONS**

A big part of what we do is offering interpretation and guidance on correct implementation of the Plan and on how to address and/or resolve errors or other unexpected circumstances in a manner consistent with Plan principles. We also observe (monitor) employment actions in progress to assess for compliance and 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 additionally monitor compliance with Plan requirements via review of documents. Our practice is to recommend corrective measures to department leaders and advise HR staff to assist with corrections as issues are identified.

### ***HIRING***

Most of the formal monitoring and auditing function is handled by an analyst. Because we were without an analyst for all but the first week of the applicable reporting period, our approach to monitoring hiring processes was temporarily modified. Though our day-to-day guidance was unaffected, our in-person monitoring and document reviews were reduced and less formal for many of our hiring processes.

- **Revised Hiring Process.** We conducted a review of all Decision to Hire (DTH) packets approved over the course of one randomly selected week in April. These packets are compiled at the end of a hiring process to include the job posting, applications, and all documents involved in the interview and selection process. Through that review, we identified some noncompliance such as continued non-compliance with an interview question requirement,<sup>14</sup> failure to produce a specific type of information to the EPO and OIIG,<sup>15</sup> and missing signatures on required forms. These findings were provided to HR leadership so that the issues could be resolved and so that recurrence may be prevented.

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<sup>13</sup> Third-Party Providers are individuals contracted by CCH to perform recruitment-related functions. They are required to adhere to the Plan's requirements.

<sup>14</sup> That provision was later removed from the Plan via an amendment as HR, the OIIG and my office all agreed that the other safeguards throughout the process.

<sup>15</sup> This was attributable to one employee and that employee was reminded of the requirement.

- **Hiring Fairs.** The temporary Revised Hiring Fair Process was approved for implementation in the spring of 2022 to introduce efficiencies meant to expedite the process and to provide for day-of-fair job offers. During the applicable period, there were twenty-five (25) fairs.

We reviewed hiring fair requests before approving each fair<sup>16</sup> (to ensure compliant process was planned) and made ourselves available to provide guidance or support as issues or questions arose but did not formally monitor and/or audit the fairs given our department's limited resources. Because our primary concerns with past fairs involved documentation and use of the Consolidated Ranks Lists and the maintenance and organization of fair documentation (to allow us to review for compliance), we spot checked for compliance and noted ongoing concerns in both areas. We met with HR's hiring fair team and project manager to address our concerns and make recommendations. The team was very receptive and engaged, and we are confident that we will find improvement when we are able to fully audit a future fair. I will report all findings in the next report.

- **Direct Appointments.** The Direct Appointment process allows our CEO broad discretion in appointing individuals to high level positions within the organization. To create a position eligible for hiring under this process, the prospective job description is presented to the OIIG for approval. Positions approved for this process are maintained on Exhibit 5 to the Plan.

Though there is broad discretion to fill these positions and an open competitive process is not required, appointees must meet all minimum qualifications and may not be selected based upon political reasons or factors. Once a candidate has been identified for hire, HR reviews the application materials to verify that the selected candidate is eligible and sends notice of the selected candidate with all required documents (job description, application, resume, NPCC, etc.) to our office and the OIIG. This collection of documents, referred to as the Request to Hire (RTH) packet, provides the opportunity for both offices to evaluate the candidates' qualifications and raise any concerns before the selectee is hired.

Twenty-one (21) packets were circulated, and we reviewed them all. One (1) packet (addressed in part in the 17<sup>th</sup> semi-annual report), was produced significantly late. The employee had been onboarded, without any review by the OIIG or EPO, in July of 2022. Records reflect that two other direct appointments that were employed in other roles at CCH prior to their appointments were onboarded prior to the expiration of the OIIG/EPO review period and communication of approval.

We reviewed all packets and verified that the appointees met the minimum qualifications and that all applicable documentation was included.

The salary documentation for three (3) of the candidates raised questions since the salaries listed on the certification form provided did not match the market study range on the form utilized to document the salaries of Grade 24 employees. Updated forms consistent with market analysis were later produced, along with explanations for the initial discrepancies. The errors were administrative in nature.

- **Medical Staff Appointments.** This hiring process, which is in some ways similar to the process used for direct appointments, is used when our CEO and Board of Directors appoint

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<sup>16</sup> The process is now functioning quite well.

a candidate to lead a department, division or serve as a section chair of the medical departments of the medical staff. Five (5) RTH packets were produced. We reviewed the packets produced and did not identify anything of concern.

- **Executive Assistant Appointments.** This hiring process is also somewhat similar to that used for direct appointments. A main difference is that the hires are appointed by the executive they are hired to serve rather than our CEO. Another difference is that there is no requirement that the packet be circulated for review prior to completion of the hiring process. Three (3) Executive Assistant packets were provided, and we did not identify anything of concern.
- **Letters of Recommendation.** The Plan requires my office to review all letters of recommendation (“LORs”) submitted by applicants and candidates and forward any that constitute a Political Contact to the OIIG. 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 is a Political Contact that must be reported to the OIIG. Only valid recommendations may be considered by our hiring teams. No LORs were submitted in the applicable period.

#### ***OTHER EMPLOYMENT ACTIONS (SUPPLEMENTAL POLICIES)***

- **Demotion (#02.01.20).** There were no demotions reported during the reporting period.
- **Discipline (02.15.15).** Two hundred seventy-nine (279) corrective actions, with just over one hundred (100) being formal (discipline), were issued in the applicable period. Almost fifty (50) disciplinary actions were at the level of suspension or termination. Consistent with past reporting periods, repeated tardiness was the most frequently cited infraction – cited one hundred thirty-two (132) times. For this period, tardiness was followed closely by both employee conduct and failure to follow instructions, both of which were cited one hundred nine (109) times. Negligent performance was the next highest at eighty-nine (89) citations, after which the next highest infraction dropped to thirty-one (31). Many of the other infractions were in the single digits.

We reviewed seventy-two (72) of the Discipline Action Form<sup>17</sup> packets (DAFs), which include the DAF and all related documentation, issued in the months covered by this report.

When we review a DAF packet, we identify anything inconsistent with the disciplinary action policy, the related personnel rule, and/or HR’s implementational procedures. Some of what we identify includes violations that do or could impact validity of the discipline issued, while others are more administrative in nature.

The types of violations and other concerns identified for the applicable period are consistent with those identified in past reports, with administrative errors such as failing to complete certain data fields on the DAF (e.g., the employee’s union, start date, or employee identification number) to more significant findings such as failing to secure the appropriate approvals (or failing to document that requisite approvals were secured) before issuing to the employee, failing to provide all required documents to HR (e.g., evidentiary statements,

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<sup>17</sup> The DAF is the form utilized to document discipline issued to an employee.

Hearing Officer Decision), failing to follow the required progression of discipline, or citing an employee for infractions inconsistent with the findings of the Hearing Officer. Based upon our review, there were twenty-six (26) DAFs that included at least one administrative error and thirty-one (31) that included at least one substantive concern. Though HR facilitates and independently reviews and tracks discipline submissions, we shared our findings with the Human Resources Business Partners (HRBPs) so that they could follow up with issuing supervisors if necessary and as appropriate to correct non-compliance and provide guidance to support future compliance.

It bears repeating that the services offered by the HRBPs, a role that was created last year, have been critical to improving compliance with this multi-step and largely manual process that often requires our supervisors to interpret and apply CBA requirements in addition to discipline policy and personnel rule requirements. Our teams work well together and have continued offering optional monthly discipline refreshers to our leaders. As I am drafting this report, HR and my office are preparing the imminent roll out of a new tool that will give our leaders more convenient access to the applicable policies, CBAs, fillable forms, fillable template letters, resource materials and contacts necessary to successfully implement discipline.

HR and my office remain committed to automating this process, and I hope to have some progress to report in my next semi-annual report.

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

*CLASSIFICATIONS*

The Classification policy governs how the salaries of new and vacant existing grade 24 positions are set. Unlike lower-graded positions, the salaries for these high-level management positions with titles bearing the designation of “Director,” Senior Director,” System Director,” Executive Director,” “Officer,” or “Chief,” etc. or are positions that require an advanced degree, professional license and specialized skills take an array of factors<sup>18</sup>, including review of relevant market data, into account. Based upon consideration of the factors, HR’s Classification & Compensation team makes a recommendation (via a form) which must be approved by the CHRO. Approved forms are submitted to my office and the OIIG when they are included in DTH packets, and the CHRO is required to explain any instances in which the final salary differs from classification & compensation’s recommendation.

*ADJUSTMENTS*

The Salary Adjustment policy governs how salaries of these positions may be adjusted. Like the process for setting the salaries, the process is initiated using a request form and there is an array of set factors that are considered. The CHRO evaluates the request and makes a recommendation to the CEO for review and approval. Several Grade 24 increases were produced for our review for the months covered by this report shortly before the due date for filing of this report. We have begun our review of these processes and expect to

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<sup>18</sup> Factors include but are not limited to scope of the position, whether it is hard to fill, the level of the position, and the fiscal responsibility of the position.



report findings and make any recommendations to CCH at a future date and in the next EPO semi-annual report.

- **Interim Assignment (#02.01.16) and Interim Pay (#02.03.01)**. These policies govern the processes by which employees may be assigned to interim roles (or to temporarily perform additional duties), qualify for and earn interim pay, as well as how much the pay is and how long these assignments and pay should continue. They have been utilized much more heavily and for longer periods of time in the face of the hiring and staff retention challenges encountered since the onset of the pandemic and the Great Resignation.

I raised concerns in several past semi-annual reports regarding the policies' compatibility, compliance with their requirements, and the level of transparency provided in the submissions and recommended a review and update of the policies and forms. The policies have not been updated to date.

In the applicable period, we received fifty (50) packets, of which six (6) were new assignments and forty-four (44) were extensions<sup>19</sup>. Departmental requests were often late and sought to backdate both the assumption of duties in an interim position and the start date of interim pay. We also identified an instance in which a department head, who admitted that the chosen employee did not meet eligibility requirements, submitted a request certifying eligibility. It was the department head's understanding that HR allows exceptions under certain circumstances. HR, not aware of the leader's understanding of the employee's lack of qualifications, approved the request, relying upon language regarding the employee's qualifications we found to be vague and that would have triggered a higher level of HR scrutiny in a hiring process. Though we determined through our follow up with the employee that the employee has experience (not included in the assignment request submission) qualifying her for the assignment, it is our recommendation that HR screen all requested interim assignments with the same level of scrutiny they would for permanent hires and that HR clear up any misunderstanding with department heads about the ability to assign ineligible employees to these roles. Whether permanent or temporary, we cannot allow individuals to perform duties they are not qualified to perform, and the qualifications must be apparent, for purposes of transparency, within the four corners of the request submission.

In addition to the above findings, we observed that assignments and pay continued to be extended well beyond the temporary six-month term contemplated by the Interim Pay policy. Though the policy does allow for extensions in three month increments if the need persists, the extension packets very often fail to provide transparency into the reason(s) the extensions are needed. By our review of the Hiring Manager Dashboard for seven (7) of the assignments at or beyond twelve (12) months, only two (2) showed efforts at recruitment and only one (1) extension asserted a basis, albeit vague, for the lengthy duration of the interim appointment.

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<sup>19</sup> Extensions are permissible in 3-month increments after the initial 6-month period, and several employees were extended more than once in the applicable period.



We followed up with HR recently to determine whether they intend to modify the policies<sup>20</sup> per our standing recommendation and they explained that they are waiting for the Associate General Counsel role to be filled as this project will require significant involvement of the Legal Department. We appreciate the need for HR and the Legal Department to collaborate on this issue, but we are unaware of an imminent hire and therefore hope the respective departments will devote time to this longstanding issue notwithstanding the current vacancy in the Associate General Counsel role<sup>21</sup>.

We offered recommendations of how to improve both department and HR compliance since we continue to observe some types of non-compliance<sup>22</sup> that may be corrected even without policy updates. I will update you on progress toward the policy updates and whether compliance has improved in the next semi-annual report.

- **Layoff/Recall (#02.01.17).** There were at least forty-three (43) layoffs implemented in the months covered by this report. Most of the layoff activity took place in April and May of this year due to downsizing flowing from the elimination of Covid grant funds. Our office received records of this activity approximately one week prior to the issuance of this report and we have not yet completed our analysis of the records. While we note that some employees otherwise scheduled for layoff were able to move into vacant CCH positions, our office continues to review layoff records for this period. Our findings will be detailed in the next semi-annual report.

According to our records, the last time HR produced a Recall List was in June 2021.

- **Reclassification of Positions (#02.01.11) & Desk Audits (#02.01.19).** Reclassification is the process utilized when the duties of a position, series of positions, or a group of different positions (the principal job duties of which are substantially equivalent) have diminished, increased or otherwise changed due to circumstances not related to the performance or identity of any individual holding the position(s).

In our last semi-annual report, we identified the following types of concerns in the documents:

- The requests forms do not always include all information or attachments required by the policy
- HR's determination forms (which contain the CHRO's NPCCs) were not always completed and that other required NPCCs were not always executed and/or included.
- Determination submissions are not standardized and are not submitted to our office contemporaneously or in a set cadence (upon approval or denial).

We reported that we had discussed these observations with the classification and compensation supervisor and learned that the reclassification process has been identified

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<sup>20</sup> Under the Plan, HR drafts and maintains the supplemental policies.

among the priorities to be addressed by an optimization consultant team. Our wish list for optimization included:

- Development of a standardized operating procedure and training for the classification and compensation team, including procedures for documentation, document sharing and document maintenance
- Development of a shared database for reclassification materials or a shared tracking mechanism

We received only one (1) determination for the applicable period and noted no concerns. It was a straightforward denial based upon insufficient basis for the request. We have not yet been updated regarding several pending 2022 requests we were advised of informally some months ago. The recommendations I made in the last report were not addressed, but we were advised earlier this month that the optimization team had just started its review. I will share progress in the next semi-annual report.

• **Third-Party Providers (02.01.18)**. This policy governs the retention and performance of those contracted to perform recruitment functions. In the last report, following a review of recent third-party provider contracts and other related documentation, we identified the following concerns:

- There was no central repository for the contracts and other policy-related documents and data
- Department head requests and CHRO approvals were not always documented
- Not all contracts contained language specifically requiring the contractors to comply with the Plan, Personnel Rules and this policy and refrain from engaging in any activities based on any political reasons or factors<sup>23</sup>
- Some required NPCCs may not have been executed
- There was no established process for tracking individuals performing under each contract (to be used for various purposes, including verification of training status, etc.).

We also discussed our observations with HR and leadership was in full agreement with our recommendation to develop a standard operating procedure governing implementation of this policy including:

- Creation of an accessible physical or virtual file that houses all related documents for each contract
- Updates to the applicable form to fully capture the request (even when initiated by HR), approval, and all other required CCH employee NPCCs
- Accessible tracking of individuals serving under each contract (start date, job function, certification of required training, end date)

HR has improved its tracking of the individuals providing these services since the last report but additional work remains. Both my office and HR have had multiple competing

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<sup>23</sup> I advised previously that I had worked with HR and the Legal Department to develop standard language to be used in these contracts going forward.

priorities but are committed to working together on the remaining improvements as time and resources permit.

Given our limited resources during the applicable period, our compliance review was limited to evaluating whether those individuals performing recruitment functions have received all Plan training required by the policy. By reviewing the most recent tracker supplied by HR against our training records, it is unclear whether nine (9) of the twenty-two (22) contractors have received the required training specific to recruitment functions. As of the drafting of this report, we are awaiting information from HR about their training status. I will provide an update in the next semi-annual report.

- **Training Opportunities (02.01.13) & Overtime (02.01.14)**. These policies exist to ensure that overtime and training opportunities are equitably distributed. Department heads are required to track how individuals are notified of opportunities, the criteria for selection, and who received the opportunity or overtime. Unlike the other supplemental policies, NPCCs are not collected each time overtime or training is offered or assigned. Rather, NPCCs are collected semi-annually in an electronic format.

NPCCs, circulated to two hundred eleven (211) department heads systemwide, were due most recently on June 15, 2023. As of this week, twelve (12) department heads have not fully complied. We will continue our follow-up efforts.

Due to competing priorities and our staffing level, we did not review and evaluate the department heads' trackers and records.

- **Transfers (#02.01.12)**

There were no transfers reported in the applicable period.

We learned, through communications with HR that transfers of union employees are common but have not been reported as required by the policy. There was apparently an agreement with the stakeholders in the *Shakman* litigation that transfers of union employees did not have to be reported because of the volume of activity. HR's plan is to change that and require notice to HR and the EPO of all transfers going forward<sup>24</sup>.

### **INELIGIBLE FOR HIRE LIST**

The CHRO reviewed terminations and resignations/retirements made in lieu of termination to evaluate whether inclusion on the Ineligible for Hire List ("List") was warranted. List updates were circulated three (3) times.

- Eight (8) individuals were added
- Sixteen (16) individuals were removed

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<sup>24</sup> This decision is consistent with my office's stated intention to work with leadership to improve transparency across all employment actions involving union employees. The Plan and supplemental policies requirements are mandatory unless an applicable CBA contains a conflicting requirement. Therefore, when HR or a departmental leader deviate from the Plan or applicable supplemental policy to honor a CBA, the superseding CBA provision must be identified in the applicable Plan and policy forms.

The Plan allows those added to the List to appeal the determination after receiving notice of their inclusion on the List and the CHRO grants or denies. There was one (1) appeal this period and it was denied.

## **WEBSITE**

The Plan specifies certain content and information that our website must contain, making it one of the main mechanisms to providing transparency into our implementation of and compliance with the Plan. The following are website-related issues identified in the past semi-annual reports and current status:

- Quarterly Reports. I previously reported that HR had fallen behind schedule on posting quarterly reports required by the Plan. Though the required reports are now posted on the website through Q2 of this year, my office identified where the reports are missing data required by the Plan. HR agreed to update the report template and include all required data going forward. I will provide an update on that initiative in the next semi-annual report.
- Current Job Descriptions. The Plan requires CCH's job descriptions to be posted on the website and available to the public. I previously reported that while some job descriptions are posted on the website, most or all appeared to be outdated.
  - This status has not changed. Though I understand that HR intends to address this, it appears that this initiative may take some time yet. In the meantime, requests for job descriptions are directed to HR.
- Human Resources Page. I previously reported that Employment Plan-related content included on the HR page was not user friendly, that the Employment Plan Office did not have a page, and that there was no reference or link to Plan information on the Careers page (accessed by individuals interested in applying for positions). Because the website is an important source of the transparency required by the Plan, I committed to working with HR and other leaders to provide content for an EPO page and to give input on content updates for the HR page.
  - I worked closely with HR and Communications in the applicable period and as of the drafting of this report, the go-live date for the EPO page is imminent. All parties agree that updating the EP-related content on the HR page is the next step. I will provide an update in the next semi-annual report.

## **NEW & UPCOMING**

- Employment Plan.
  - Modernization. As above, the Plan was amended to include a new hiring process that significantly reduces time-to-fill certain positions. A multidisciplinary team will continue to address the various factors impacting time-to-fill, and additional Plan amendments are anticipated. I will provide an update in the next semi-annual report.

- Transparency.
  - As above, it is our goal to ensure that the forms utilized for CCH employment actions require documentation identifying implementation of CBA required deviations from the applicable policy or Plan provision.
  - To provide transparency, a current copy of the Plan must be maintained on the CCH website. Though my office and the OIIG have approved several temporary and permanent amendments over the past year and a half, which were presented informally<sup>25</sup>, the amendments have not been formally documented and incorporated into the Plan and visible to our employees and the public. We have been advised that HR will complete this task as time permits. Completion of this task is critical, especially since the temporary amendments have been revised through several subsequently approved modifications and since comprehensive hiring fair training has not been developed. Without a singular, public source for Plan requirements, our processes are not transparent and are vulnerable to non-compliant implementation.
  - Other website updates are forthcoming, including launch of the new EPO page.
- Supplemental Policies.
  - Policy updates. As above, there are plans to update the Interim Assignment and Interim Pay policies. I will provide an update in the next semi-annual report.
- Optimization.
  - Recruitment. HR and its team of consultants continued to work toward optimizing our hiring processes to decrease time-to-fill and increase transparency. We supported these initiatives along the way and anticipate continued progress. One example, which is being rolled out as of the drafting of this report, is an improved mechanism for submitting a Request to Hire - the first step in initiating a hiring process. I will provide an update in the next semi-annual report.
  - Discipline. In past reports, I have offered my opinion that automating the discipline process, which is complex and quite manual, would result in improved compliance. HR has always agreed, and this has remained on our joint list of priorities. It is my understanding that we are approaching the point at which work may shortly begin. I will report any progress in the next semi-annual report.
- Training.
  - Hiring Fairs. As I have opined in previous reports, our comprehensive interviewer training (and corresponding parts of HR's training) requires updates, including addition of the hiring fair process. My hope is that this will be included prior to the next report.
  - General. It is a joint HR and EPO goal to completely overhaul and update our interviewer training content to make it more streamlined and interactive utilizing technology and the expertise of HR's Organizational and Workforce Development

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<sup>25</sup> In the interest of time, formality was not required prior to approval.

team. This may take some time due to competing priorities and the fact that the Plan (and therefore the processes covered in the training) is undergoing a comprehensive review and update process.

- Annual. Required annual training content will be updated in a format compatible with our current learning management system.
- HR/EPO Initiatives
  - Discipline Resources. Through monitoring and oversight, my office and HR identified the most frequent types of violations and our supervisors' pain-points and worked collaboratively on a one-stop shop for accessing the discipline policy, the applicable personnel rule provisions (including the Code of Conduct), resource materials and contacts, templates, fillable forms and examples of compliant documentation. The goal is to promote efficiency and compliant implementation. As of the drafting of this report, rollout was imminent.
  - My office and HR rolled out an EPO/HR communication tracker allowing for better tracking of questions and issues as they arise. We are still adjusting to this process, and I expect that we will be able to optimize it over time.
- EPO Staffing. The Employment Compliance Analyst position that was vacant since January was filled August 28<sup>th</sup>. Orientation and training are in progress, and we are utilizing the opportunity to review and optimize our internal processes and tracking mechanisms along the way.

## CONCLUSION

Like other employers nationally, we continue to face challenges with maintaining staff and filling vacancies at the rate necessary to maintain operations. We will continue to work collaboratively with HR and other CCH leaders to support compliance and to formulate creative solutions to reduce the time-to-fill positions. We still have a lot of work ahead of us, but I am confident that we are moving in the right direction.

I will report further progress in March of next year.

Sincerely,

Kimberly Craft

*Kimberly Craft*

EMPLOYMENT PLAN OFFICER

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