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**EMPLOYMENT PLAN OFFICE 22<sup>ND</sup> SEMI-ANNUAL REPORT**

Dr. Mikaitis and Inspector General Paxton:

**INTRODUCTION**

This is the 22nd Semi-Annual Report covering the Employment Plan Office's observations and activities between January 1 – June 30, 2025<sup>1</sup>, and goals and new initiatives July 1 – December 31, 2025.


As you know, the Employment Plan ("Plan") and Supplemental Policies ("policies") contain employment action policies and procedures developed by Cook County Health ("CCH") over the course of a collaborative process providing for CCH's 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 lawful bases for their decisions.

The Employment Plan Officer ("EPO") is tasked with supporting compliance with the provisions and spirit of the Plan by:

<sup>1</sup> I have occasionally provided more real-time information throughout.

<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.

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- Preparing Plan-related 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, investigating, and reporting on complaints of non-compliance with the Plan’s procedures and responding to requests from the public for redacted reports
  - Reviewing and providing feedback related to any proposed amendments to the Plan prior to implementation
  - Referring reports of political contacts and/or unlawful political discrimination to the Office of the Independent Inspector General (“OIIG”)
  - Maintaining the Direct Appointment List (list of the positions that may be filled via appointment by the Chief Executive Officer) and reviewing proposed appointments for compliance prior to hire
  - Maintaining a current copy of the Ineligible for Hire List and responding to requests for same from the public, and
  - Issuing public reports semi-annually addressing Plan-related activities for the reporting period.

Between January and June of this year, the Employment Plan Office continued to perform the functions detailed above.

### **EMPLOYMENT PLAN AMENDMENTS**


- **Updates to Exhibits**


Some hiring processes require maintenance of lists identifying the titles which may be filled using the particular process. For this reason, the lists must be updated to ensure compliant use. The criteria and process for inclusion varies from list to list.

- Direct Appointment List

In the applicable period, the Direct Appointment List (Plan Exhibit 5) was updated twice, with fourteen (14) changes made to existing positions and five (5) new positions approved for inclusion.

Notably, we identified and addressed inaccuracies in the list that resulted following the 2023 approval of a new job description for director-level positions in Nursing. Where Nursing’s “director” job descriptions to that point were tied to specified operational areas, the new job description was general and meant for all directors regardless of their area of





assignment. As approved, the understanding was that the new job description would be implemented on a rolling basis to fill vacancies as employees in the existing, area-specific director positions separate from CCH. It was further understood that existing director job titles would be stricken from the list and replaced with the new job description on the same rolling basis as replacements were hired.

This process was first used in 2024 when an existing director separated from CCH and the position was filled. Early this year, we observed that several additional new employees had been hired as appointments using the new job description despite that only the one existing director had separated. After discussing our concerns with HR and Nursing leadership, it became apparent that they found it necessary to hire directors in operational areas that did not previously have directors and that they did not understand that each PID on the list must be approved. From there, we provided the guidance necessary to document justification for the additional PIDs and obtain the OIIG's approval to add additional director PIDs to the list and hire in compliance with the Plan.

- Other Lists

Neither the Actively Recruited List (Plan Exhibit 2) nor the Certified/Licensed Healthcare Professional Positions List (Plan Exhibit 2) were updated. The Advanced Clinical Positions List (Plan Exhibit 13) was updated three (3) times, and the Department Division & Section Chair of Medical Department of Medical Staff List (Plan Exhibit 12) was updated once.<sup>3</sup>

- **Procedural Amendments**

The Plan is a living document and may be modified by the Chief Executive Officer (“CEO”) as CCH’s needs change. The process requires written notice to the EPO and the OIIG of any proposed changes to provide an opportunity to review and comment on the proposed amendment prior to implementation. This typically takes the form of a version of the existing Plan produced by HR that proposes new or amended language in red line format. In this review process, the EPO and OIIG are looking to ensure that the new or amended procedure proposed is designed to prevent the opportunity for discrimination and provides the level of transparency necessary to demonstrate non-discriminatory decision-making and compliance with all other applicable legal requirements. Once an amendment is approved, the updated document is publicly posted on the CCH Intranet (for employees) and the CCH website (for the public).

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<sup>3</sup> Exhibit 12 was updated to reflect authority to use the process described in VII.B for senior medical leadership positions with job titles covered by that section (that had not been added to the List since it was created in 2017).



- New Amendments

In the period covered by this report, two processes were approved for inclusion in the Plan: (1) Accelerated Hiring Process (a proactive and transparent process facilitating expedited hiring of eligible positions without interviews with Department Head approval following a reduced posting period) and (2) Emergency Hiring Process (an additional provision added to an existing section of the Plan) providing two methods of expedited hiring of permanent employees when the CEO has certified an emergency.

Despite HR's obligation to publish Plan updates on its website when amendments are approved, HR has not posted the new amendments and still has not posted the two temporary "revised" hiring process amendments and one permanent EPO investigation process amendment approved in 2022. The resulting lack of clear structure and transparency continues to be one of our top concerns. In July 2025, CCH engaged a legal contractor to incorporate all approved modifications into the official Plan document. I hope that in the next semi-annual report we are able to report that the Plan has been fully unified and made publicly accessible.

- Past Amendments

It is worth noting that the Revised Hiring Process and the Revised Hiring Fair Process were approved through an informal request and review process in 2022 given exigencies that existed at the time and were limited for use until 1,500 employees could be hired. These temporary amendments were meant to provide CCH with time to develop permanent processes that would be incorporated into the Plan via the standard amendment process. It is safe to say that CCH has hired more than 1,500 employees since those temporary processes were approved, and it is my recommendation that CCH take one of the following actions: (1) propose them as permanent amendments (if that is their desire), (2) revert to the respective permanent (unrevised) Plan hiring processes, or (3) prioritize the development and proposal of permanent amendments making use of the knowledge gathered during this period.

- Recommended Amendment

During the period covered by this report, CCH leadership developed a volunteer policy. We provided guidance consistent with Plan principles (proactive and transparent) and have recommended that the process be included in the Plan.


## **INVESTIGATIONS**

During the preceding reporting period we received eighteen (18) new complaints and resolved seventeen (17) investigations. As of the close of the period covered by this report, the EPO had seventeen (17) matters under investigation.



- **Pending Investigations**

The following table represents the data the Board previously requested for inclusion in this report: a list of outstanding investigations along with their respective dates of inception.



Investigation #	Open Date
EPO2023-022	06/26/2023
EPO2023-023	08/02/2023
EPO2023-024	08/25/2023
EPO2024-010	08/05/2024
EPO2024-015	10/28/2024
EPO2024-017	10/21/2024
EPO2024-018	11/01/2024
EPO2024-019	12/04/2024
EPO2025-001	01/04/2025
EPO2025-004	02/10/2025
EPO2025-007	02/28/2025
EPO2025-009	02/28/2025
EPO2025-011	02/28/2025
EPO2025-013	04/01/2025
EPO2025-015	04/01/2025
EPO2025-016	04/15/2025
EPO2025-017	05/28/2025

Though eight (8) investigations opened prior to the current calendar year remain pending, this represents a drastic reduction in the backlog that had built up over time due to long-term short staffing in the EPO and the multiple competing priorities (including the development and roll-out of temporary hiring processes) faced during the pandemic and resulting from the Great Resignation. We will continue to prioritize the timely completion of investigations.



- **New Investigations**

The newly opened investigations concern various allegations including, but not limited to, conflicts of interest, improper interviewing, improper denial of interview, and failures to adhere to disciplinary process requirements.

- **Closed Investigations**

The EPO is empowered to resolve complaints in a variety of ways to best serve all stakeholders. Although some complaints are resolved via EPO Incident Reports containing findings and recommendations for corrective action, many are resolved where the complainant has concerns about matters not involving the Employment Plan (e.g. harassment, toxic work environment, mismanagement, waste or fraud) and, with the complainants' consent, we make the appropriate referrals. Still other investigations may be closed where the complainant, subject employee, and/or necessary evidence are no longer available to complete the investigation. While we always communicate with every complainant to fully assess their concerns, we refer matters to appropriate authorities for resolution where we ultimately determine that the Plan is not implicated. Those authorities include Corporate Compliance, the EEO, management, or the OIIG.


- Incident Reports Issued & HR's Responses<sup>4</sup>

- EPO2023-014 (issued June 30, 2025): This investigation was prompted by the discovery that a hiring fair applicant, whose name HR found on the Ineligible for Hire ("IFH") List when screening for eligibility, had represented in her application that she resigned from CCH (in contrast with CCH records showing she had been terminated). This office initiated an investigation to determine whether the candidate had falsified her application, an offense that would result in a recommendation to continue for another period on the IFH List. The former employee reported that it was her understanding that she resigned in 2019 and represented that she had never been advised of placement on IFH List. Our investigation showed that HR's records from 2019 did not prove that the former employee was notified of her past termination and contained documentation that could support the employee's belief that she had resigned.

We did not recommend in the incident report that the applicant be added to the IFH List (her term had since lapsed) but did recommend that HR use certified mail to send to the applicant documents providing clear notice of her termination so that there can be no confusion about the reason for her separation if she applies

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<sup>4</sup> The Employment Plan requires that CCH HR issue a response to the EPO Incident Report within 30 days confirming implementation of the action recommended or explaining why the CEO has elected to take alternative action and describing that action taken.



for other CCH positions in the future. HR's response, received on July 31, 2025, expressed agreement with our recommendation rather than confirming implementation of the recommendation (or alternative action taken) as required by the Plan. As of the issuance of this report, HR had not verified implementation of this recommendation.


- EPO2024-014 (issued February 24, 2025): This investigation explored the circumstances surrounding the efforts by a Direct Appointment employee seeking a Grade 24 salary adjustment since 2017.

Although we found no violation of the policy and made no recommendation concerning the evident gaps in communication within CCH leadership, we did recommend modifying the applicable Grade 24 Salary Adjustment policy to define the term "Deputy CEO" since CCH no longer uses "Deputy CEO" job descriptions. In its response, HR expressed its intention to seek unspecified modifications to the policy in the future rather than complying with the Plan's requirement to confirm implementation of the EPO's recommendation (or alternative action taken).

- EPO2024-006 (issued June 30, 2025): Through this investigation, we determined that a hiring manager committed serious misconduct in a hiring process by posting a position for purposes of hiring a pre-selected candidate. During the hiring process, the hiring manager privately confronted a potential competing candidate and actively discouraged her from applying. After the posting, HR determined the pre-selected candidate was not eligible and referred the competing candidate (who had applied despite the earlier discouragement) for interview. In his communications with HR, the hiring manager sought *both* to sabotage the competing candidate and to convince HR to restore the candidacy of the pre-selected candidate. These behaviors by the hiring manager are of the sort which led to, and show the ongoing need for, the Employment Plan's requirements regarding transparency in hiring.

In the incident report we recommended corrective action for the hiring manager. HR agreed with the recommendation in its written response, received on July 31, 2025. What the response did not do, though, is comply with the Plan's requirement to confirm implementation of the EPO's recommendation (or alternative action taken). We saw no evidence to suggest that corrective action had been initiated against the hiring manager as of the issuance of this report.

- EPO2024-010 (issued February 24, 2025): This office investigated a CCH hiring sequence wherein we made the following findings: (1) The hiring manager violated the Employment Plan where she chose to interview a candidate who did not meet the minimum qualifications, (2) the same candidate falsified her application by claiming to possess a certification she did not have and by providing a false document to CCH purporting to be the required certification and (3) the nature and timing of communications between another candidate in the same hiring sequence



and an interview panelist did not constitute a prohibited contact under the Employment Plan.

In the incident report, we recommended corrective action for the hiring manager and placement of the candidate who had falsified her application on the IFH List. HR did not respond in writing within 30 days to confirm implementation of the EPO's recommendations (or alternative action taken) as required by the Plan. The response came months later, on July 22, 2025, following a status inquiry from this office. At that time, we learned that the recommendation to implement corrective action against the hiring manager had not and could not be implemented because the hiring manager resigned two months after we issued the incident report. Additionally, we learned that HR had not added the candidate found to have falsified her application to the IFH List. The delay to this point is noteworthy given the candidate has submitted applications for CCH positions nine (9) times since the candidate's falsification of application materials was made known to HR and has not been disqualified via the IFH List.


- EPO2024-012 (issued June 5, 2025): This office investigated a complaint by an applicant who asserted that CCH altered a job description during the period between the two times it was posted to preclude the applicant from acquiring the position. Evidence developed by the investigation established that, after the change to the job description, the applicant was deemed eligible and was interviewed. The applicant scored poorly during the interview and was not selected. We concluded that the change to the job description (which served to reduce the minimum qualifications rather than narrow them to the exclusion of the applicant) was unrelated to the applicant whose interview score determined the result of her candidacy. We made no recommendations and thus no response from HR is required.

## **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:

- **Employment Plan**

This training, which provides a broad overview of the purpose, function and requirements of the Plan, is offered to new employees and included in annual training. During the applicable period, we discovered that HR had at some point removed this self-paced training from the bundle HR delivers to new employees through the learning management system that it manages. Although we were able to verify that the content has since been restored to the LMS, HR has not provided us with the information necessary to identify



which employees still require this Plan-mandated training. We recommend that HR assess the dates the training was absent from the new employee bundle and require those who onboarded during that period of time to complete the training.

- **Interviewer**

Leaders are required to attend this in-person training within their first ninety (90) days and before participating in our hiring processes. This training is also offered to other eligible employees and agents with applicable approvals. During the applicable period, the EPO offered eight (8) sessions and trained sixty-three (63) employees. Jointly with HR, we also offered three (3) ACP Refresher sessions at the request of Medical leadership.

Annual training is also required and is currently due, meaning that compliance will be addressed in the next semi-annual report.

- **Supplemental Policies and Procedures<sup>4</sup>**


Training on the Supplemental Policies, like training on our hiring processes, is required of all new leaders and annually thereafter. This training is also offered to eligible agents with applicable approvals. During the applicable period, the EPO and HR jointly offered seven (7) sessions and trained fifty-two (52) employees. We also jointly offered four (4) Discipline Refresher sessions, which were optional for leaders who implement discipline.

Annual training is also required and is currently due, meaning that compliance will be addressed in the next semi-annual report.

- **HR Staff**

New HR staff are required to receive comprehensive training on the Plan and supplemental policies within their first ninety (90) days, on any updates to the Plan and/or policies, and annually. Training is delivered in three parts: one by the EPO and two by HR leadership. In the applicable period, my office conducted two (2) sessions and trained ten (10) new employees. According to our records, several 2024 and early 2025 hires had not completed all required HR/new hire training as of the issuance of this report. We shared our records with HR leadership and recommended administrative process involving the prompt scheduling of required sessions to bring everyone into compliance, as well as advance scheduling of later sessions to ensure that all training is completed within the timeframes set forth in the Plan.

In terms of Plan updates, we provided training to the Recruitment team when the Accelerated Hiring Process was approved and before it was implemented. We also advised HR leadership of the training plan we would utilize *pre-implementation* should Dr. Mikaitis



decide to use the expedited hiring process that includes interviews that is included in the new provision in Emergency Hiring.

I identified in the last semi-annual report that annual training for HR staff was overdue and that catchup was a priority. Some, but not all, required annual training was completed in the applicable period. All remaining HR annual training is scheduled to both commence and conclude this fall. We will verify satisfaction of this requirement in the next semi-annual report.

### **HIRING & EMPLOYMENT ACTIONS**

We routinely offer guidance to both user departments and HR 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), and it is a big part of what we do<sup>5</sup>. We also observe/monitor employment actions in progress to evaluate compliance and assist 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 and/or advise the HR staff appropriate to assist with corrections, where appropriate.

Because the volume of hiring and other employment actions that we oversee is so high, we do not monitor and/or audit every employment action. Outside of processes we are consulted on or brought into because of concerns raised, we mostly implement monitoring and document review projects involving sampling designed to allow us to gain insight into where we can enhance training content and resource materials to support HR and hiring department leaders.

These Employment Plan Office activities are summarized below.

#### **HIRING**

- **Revised Hiring Process**

The Revised Hiring Process is one of the two hiring processes approved 2022 for temporary use. This process was designed to speed up hiring, by requiring hiring departments to validate/screen for most General Hiring (entry level) positions and by streamlining interview documentation and the selection processes for both entry-level (General Hiring) and Actively Recruited positions.

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<sup>5</sup> Some examples of EPO interventions during the period covered by this report involved: (1) interview panel insufficiencies, (2) prohibited contacts, (3) candidate eligibility concern, (4) interview procedure concerns, (5) notice concerns, and (6) Letter of Recommendation submission concerns.



- Application Review Panel Packets

We reviewed ten (10) Application Review Panel (ARP) forms approved by HR. These forms are completed by the hiring department in the process of screening applicants and identifying individuals to interview. The result is their proposed interview list. Significantly, only those who meet all minimum qualifications (“MQs”) for a position may be recommended, notations must be provided to provide transparency regarding the panels’ determinations not to interview qualified applicants, and HR verifies that applicable requirements are met before approving the interview list.

Fortunately, we did not identify any noncompliance in our ARP sampling. We did, however, identify several good catches by HR recruiters who became aware of noncompliance with the Plan and ensured course correction. One involved a hiring department which scheduled interviews without having first completed and returned to HR the ARP packet as required. The recruiter advised us of the problem and was able to correct the department with our assistance. Another example of a good catch occurred where a hiring department attempted to restore the candidacy of a previously ineligible candidate after the interview list was finalized. The recruiter reached out to us and, with our assistance, resolved the matter by explaining to the hiring department that the interview list was final and could not be changed (particularly via private communications between a dispositioned candidate and a hiring department).

- Decision to Hire Packet Review for Actively Recruited Positions


We selected twenty-four (24) Decision to Hire (“DTH”) packets<sup>6</sup> within the reporting period. 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 and therefore provide for a comprehensive review. We observed noncompliance in one (1) of the packets where it failed to include significant documentation including evidence of education, certificate and interview evaluation forms from a particular interviewer involved in the selection process.

- Interview & Selection Meeting Monitoring

During the reporting period, we monitored fifteen (15) interviews within a sampling of five (5) requisitions. We observed instances of noncompliance with the Plan where there was a lack of notice to the EPO and OIIG of second round interviews, use of modified or otherwise unapproved interview questions during interviews and, in one instance, the presence of an unauthorized person sitting in interviews and taking notes. Where we

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<sup>6</sup> The DTHs were selected for review randomly by identifying the DTHs received during the first full week of two separate months of the reporting period.



observed noncompliance, we offered real time coaching to address the noncompliance in teachable and useful ways.

We also monitored three (3) selection meetings which flowed from the interview sequences identified above. Although selection meetings themselves were largely compliant, we identified what appears to be a growing practice by hiring departments delaying selection meetings in favor of scheduling them on future dates without required advance approval from the EPO. Per the Revised Hiring Process, selection meetings are required upon the conclusion of the final interview to avoid delays in hiring activity and to eliminate the administrative burden to provide separate notice to the EPO and OIIG. Scheduling later selection meetings without required approval from the EPO presents a significant concern because it denies the EPO and OIIG notice and opportunity to monitor compliance. We have continued to emphasize this requirement when training interviewers and asked HR to stress this point in standardized guidance materials it supplies to hiring managers in their hiring processes.

In the course of our monitoring of interviews we identified another good catch by a recruiter who observed that only one panelist was identified in the notice provided for upcoming interviews. The recruiter recognized that this was not compliant with the Plan and advised the department update the notice to identify at least one additional panelist as necessary to comply with the Plan's two (or more) person panel requirement. Identifying the full panel on notices sent to HR, the EPO and OIIG is important, and it provides the opportunity to identify panelists not authorized to participate.

- **Advanced Clinical Positions**


The Advanced Clinical Positions hiring process is used to recruit and hire physicians and other clinical positions eligible pursuant to placement on the ACP List.

- **Decision to Hire Packet Reviews**

We sampled and reviewed six (6) requisitions resulting in DTH packets for positions filled via the Advanced Clinical Positions hiring process that were approved throughout the reporting period<sup>7</sup>. As explained above, 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 and therefore provide for a comprehensive review of a hiring process. We observed noncompliance in one (1) of the packets. Specifically, the noncompliant packet was missing critical documentation of clinical candidate credentials, including educational credentials. We addressed these concerns directly with the hiring

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<sup>7</sup> The packets were sampled at the beginning of January and March, 2025.



department and otherwise communicated these concerns to recruitment to prevent recurrence.

- Other ACP Observations

- We noticed that applicants who complete a paper job application (permitted by this process) have been using a very outdated Cook County form that provides contact information for the Shakman Compliance Administrator (an office that no longer exists and that has no role with CCH employment actions since late 2018) for the types of concerns that are to be addressed by this office. We advised HR leadership of this finding so that the form could be replaced by CCH form containing correct guidance and contact information. As of the issuance of this report, the outdated form is still in use.
- We also noticed that some ACP eligible positions in recruitment had not been added to the ACP List, leading to confusion in the recruitment process or the DTH stage. We advised the appropriate team within HR and that was corrected.
- We developed information that a hiring manager for an ACP position had sought approval to consider an individual who had applied by sending application materials directly to the hiring department rather than through the process required by the Plan (and detailed in the applicable job posting). We advised the hiring manager and the recruiter that individuals may not apply directly to a hiring department or after the close of a posting and that the individual could not be considered.


- **Hiring Fairs**

The Revised Hiring Fair Process is one of the two hiring processes that was approved in 2022 for temporary use. This process constitutes a modification of the Plan's Hiring Fair Process and was designed to streamline volume hiring and provide the ability for applicants to apply, be screened, and receive contingent offers (if selected) all in one day.

During the applicable period, CCH held two (2) hiring fairs. The EPO monitored both hiring fairs (one in person and one solely via document review) including "overflow" interviews which took place following the second hiring fair<sup>8</sup>. Prior to each fair, our office reviewed the requests and supporting documentation to ensure that Plan-compliant fairs had been planned before approving them. Occasionally, we identified concerns which HR was able

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<sup>8</sup> While we are not staffed to monitor every hiring fair in person, we do conduct in-person monitoring, in conjunction with follow-up review of fair documentation, in a sampling of the fairs as part of our efforts to gauge overall compliance. Specifically, we monitor the functions related to: (a) registration, (b) interviews, (c) administrative verification, and (d) contingent offers. Each of these four areas of a hiring fair involves several administrative processes governed by the Plan and related HR procedures.



to rectify prior to each fair. Additionally, we made ourselves available to provide guidance or support as issues or questions arose. This function of the EPO was critical during the second of the two hiring fairs, which took place in conjunction with a Cook County event. Attendance at the joint event was overwhelming and CCH could not conduct interviews of all registrants/applicants on the day of the fair as required by the Plan. Our office provided guidance for the development of a process for conducting the overflow interviews and determining order of offers to those selected to ensure compliance with Plan principles<sup>9</sup>.

Following the fair dates, we examined records to assess compliance with recordkeeping requirements and to ensure that the documentation generated during the fairs was compliant. Although documents generated during the fairs demonstrated mostly compliant process, some noncompliance was identified. For example, we determined that HR had not tendered offer letters and other required correspondence to candidates on fair day following their interviews. This led to confusion after a fair where a candidate's and HR's respective recollections of verbal communications did not align. HR advised that, although some of the confusion was due to a candidate's inherent confusion concerning which CCH positions she had applied for, HR agreed to resume the required practice of tendering required correspondence on the same day as the fairs.

We also observed that the registration form for the events, which is to be completed in real time on fair day, had not been completed several days after a fair where it continued to show that some candidates were still waiting for interview. We brought this to HR's attention, and they determined the issue likely flowed from candidates choosing to leave a fair rather than wait for an interview. HR agreed to and did modify the registration form to capture this circumstance going forward.

- **Direct Appointments**

Under the Direct Appointment process, the CEO may appoint individuals to the high-level, specialized professional positions that have been approved by the OIIG to appear on Exhibit 5, one of the Plan lists described above. Certain criteria must be met for a position to be eligible for inclusion on the list, and the appointee must meet all MQs identified in the job description.

In total, there were twenty (20) Direct Appointment hires in the applicable period. We identified a few minor administrative errors that were quickly corrected.

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<sup>9</sup> Should HR intend to participate in similar events in the future, we encourage that they develop an overflow process to be proposed for inclusion in the Plan.



- Concern: Failure to Satisfy MQs Post-Hire

In the last EPO semi-annual report, we detailed the findings of our review of the current qualifications of appointees who had not met MQs at the time of onboarding (under circumstances where the applicable job description provided for a period of additional time post-hire to satisfy all requirements). In that review, we discovered deficiencies in three (3) of the six (6) employees appointed under such circumstances and recommended, going forward, that HR and the hiring department discuss their relative responsibilities for ensuring satisfaction of post-hire MQs at the time of onboarding.

We have since identified another posting that required the appointee to possess a specific certification or eligibility to be certified within 12 months after hire. The appointee did not possess the certification upon hire and his/her 1-year anniversary fell within the time covered by this report. Upon learning that the employee had not become certified, HR leadership took the position the employee does not require the certification identified in the job description and posting – but only *eligibility* to be certified. We disagree with HR's interpretation of that language.


We recommend against further use of language in CCH job descriptions incorporating eligibility requirements by reference. To the extent that CCH wishes to require that a candidate meet all criteria necessary to be eligible for a specific certification, *but not the certification itself*, the certification's individual eligibility criteria *at that time* should be specifically detailed in the MQ section of the job description without reference to the certification. A certification's eligibility criteria could change over time, and further, an investigative process should not be required to validate a CCH application. We also renew our recommendation that to the extent CCH chooses to continue use of job descriptions that allow for the satisfaction of MQs post-hire that HR implement a process that ensures proper tracking and enforcement by HR and/or the hiring department.

- Other Recommendation

Several new high-level executive positions have been added to the Direct Appointment List over the past several months. Because a position's eligibility to be on the list and filled via appointment is conditioned, in part, on the position's level on an applicable organizational chart, we recommended to HR that HR conduct a thorough evaluation to identify any positions that (by virtue of a new level of leadership) have fallen below the threshold to qualify for direct appointment hiring and remove them from the list.

- **Medical Staff Appointments**

This hiring process, which is similar to the process used for direct appointments, is used when our CEO and Board of Directors appoint a candidate to lead a department, division



or serve as a section chair of the medical departments of the medical staff. Seven (7) DTH packets were produced. We reviewed the packets produced and did not identify anything of concern.

- **Executive Assistant Appointments**

This hiring process is also 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. No Executive Assistants were hired in the applicable period.

- **Accelerated Hiring**

- Pilot

Before the permanent process was finalized and approved, HR sought and received EPO and OIIG approval to utilize the process for accelerated hiring that was approved for temporary use in 2023 and 2024 to permanently fill grant positions that had previously been administered by Hektoen. This office will include a sample review of hiring conducted under that process in the next semi-annual report.

- Permanent Process


Because the permanent Accelerated Hiring Process was not approved and ready for implementation until late in the period covered by this report, EPO document reviews will be included starting in the next semi-annual report.

Though a hiring manager is required to identify the hiring process that will be used at the Request to Hire stage, we approved use of this new process on positions for which the applicable request form had been submitted prior to approval of the amendment under the following conditions: (1) documentation of the applicable Department Head's approval to switch processes must be included in each impacted posting file, (2) no activity beyond submitting the RTH form may have taken place, and (3) the process could only be used for positions meeting the eligibility criteria detailed in the amendment.

### **Settlements & Awards**

Under the Plan, CCH may comply with any judgment, negotiated settlement of a claim, complaint or arbitral award that requires CCH to take an employment action with respect to a specific individual or individuals that would otherwise be contrary to the requirements of the Plan.

Late in the most recent prior reporting period, we learned that CCH had executed settlement agreements with four (4) unions to resolve grievances alleging that CCH's use of agency workers resulted in erosion. The agreements, which included some variations, involved required processes for CCH offer to convert agency workers to permanent



employees outside of a Plan hiring process under specific circumstances. We did not have access to necessary documents and information prior to our most recent EPO semi-annual report and committed to providing a process review in this report.

Our review was limited to documents, received on July 30, 2025, that were generated in the course of the non-competitive conversion process implemented to satisfy the requirements of one of the settlement agreements. This process resulted in the acceptance of one hundred and one (101) offers made on or before December 20, 2024. We did not identify offers made to individuals outside of the confines of the applicable settlement agreement which would violate the Employment Plan<sup>10</sup>.

We were not advised of any other settlements or awards that resulted in the implementation of the types of employment actions detailed in the Plan's HR Quarterly Reports provision.

- **Letters of Recommendation**

The Plan requires the EPO 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 and their recruiter upon receipt (as opposed to after the hiring process) so that a determination may be made as to whether the recommendation may be considered or whether it constitutes a Political Contact that must be reported to the OIIG. Only valid recommendations may be considered by our hiring teams.


We reviewed six (6) LORs submitted for candidates during the applicable period, with only one (1) coming to us through the process described above. We learned of the others incidentally (long after they had initially been produced to the hiring department) and they were produced pursuant to an EPO request. Upon review, none of the letters required referral to the OIIG. Though we do not have data to suggest systemic non-compliance with the requirement to produce LORs, we have engaged HR leadership to discuss strategies that support hiring managers' efficient satisfaction of this requirement.

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

- **Demotion (#02.01.20)**. No demotions were reported in the applicable period.
- **Discipline (02.15.15)** We reviewed a sampling of seventy-two (72) discipline packets, including all thirty-six (36) terminations executed during the applicable period.

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<sup>10</sup> Offers were made on or before December 20, 2024, as per the settlement agreement, to individuals who had been contracting with CCH in the same or a related role at the time the settlement agreement was executed, and who met the MQs of the position into which they were hired.



When we review discipline, 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 actual or apparent violations that do or could impact validity of the discipline issued, while others are more administrative in nature - meant to support HR's tracking and maintenance of discipline.


Some of the findings, which we consider more administrative in nature, include failing to complete certain data fields on the applicable form (e.g., the employee's employee identification number). The more significant deviations we sometimes see include 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, Hearing Officer Decision) so that its file is complete and so that compliance may be verified, failing to follow the required progression of discipline, citing an employee for infractions inconsistent with the findings of a Hearing Officer, or including Protected Health Information (PHI) protected by the Health Insurance Portability & Accountability Act.

Based upon our review, we identified the following (as compared against the most recent prior reporting period):

Discipline	Total (last report)	Total (current report)
Total <u>Sample</u> Reviewed	61	72
Total Terminations (all terminations were reviewed)	29	36
<b>Concerns Identified</b>		
Hearing Officer Decision not attached, where required. <b>Critical to demonstrating due process was provided</b>	2	3
Pre-Disciplinary Notice not attached, where required <b>Critical to demonstrating due process was provided</b>	3	4



Witness signature not provided, where required <b>Critical to explaining absence of employee signature and demonstrating the discipline was issued to the employee</b>	3	6
Late submission to HR (after 5 days) <b>Critical to ensuring complete files providing for timely compliance reviews and use of progressive discipline</b>	8	16
Evidentiary documents not attached, where required (e.g., timecard for attendance discipline) <b>Critical to demonstrating policy infractions, where applicable</b>	1	6
Failure to verify Management Assessment completed <b>Critical to ensuring fair process and utilization of Just Culture</b>	2	24
Union Affiliation not completed, where applicable <b>Critical to demonstrating CBA compliance</b>	1	1
Hire date not provided <b>Critical for assessing whether probationary rules apply</b>	0	4
Missing or late Department Head signature on discipline <b>Critical to demonstrating required advance approval</b>	0	2
Protected Health Information included <b>Cannot violate HIPAA</b>	0	1
Failure to identify policy infractions on DAF <b>Critical to demonstrating due process.</b>	0	4




Termination letter not attached, where required <b><i>Critical to demonstrate notice of termination was provided</i></b>	3	4
Investigatory Meeting Notice not attached, where required <b><i>Critical to demonstrating due process was provided</i></b>	3	3

Though a team within HR conducts its own independent compliance review of the completed discipline packets submitted to HR before placing them in an employee's personnel file, these reviews may take place at different times than ours. We directed questions or concerns related to our most significant findings<sup>11</sup> to the applicable team within HR 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. We also use this data to improve training and increase compliance.

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

Grade 24 positions are high-level positions that are not subject to a designated salary schedule. The processes for setting and adjusting the salaries are set forth in two of the Supplemental Policies.

- Classifications




One of the two policies addresses how the salaries of new and vacant existing Grade 24 positions are set. An array of factors<sup>7</sup> (including review of relevant market data) are considered when setting the salaries for these high-level/highly skilled positions. Based upon consideration of the factors, HR's Classification & Compensation team submits a recommended salary range (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 hiring packets. We most frequently see these forms in Direct Appointment hiring packets - which also include a separate form identifying the salary offered to the individual hire.

For this reporting period, copies of all forty-two (42) Salary Determination forms completed during the applicable period were produced and reviewed. What we discovered is that the form designated for this policy is being used beyond the circumstances specified in the policy. For example, several related to existing, non-vacant positions and

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<sup>11</sup> It is our practice to send such notices where PHI is identified, progressive discipline is not demonstrated (where necessary), discipline approvals are not documented (where necessary), and where documents demonstrating due process are not produced. In the applicable period, we also brought to HR's attention an error in an email they had circulated to system leadership that could result in non-compliance.



several others related to positions that are not Grade 24. We also noted that those related to existing but vacant positions did not capture policy criteria that provided the basis/authority for the review.

We recommend that to the extent that CCH intends to use the Grade 24 Salary Determination Form for circumstances outside the requirements of Classification of Grade 24 Positions (02.02.21), that the form be re-labeled and modified to require documentation identifying and demonstrating compliance with *all* applicable authorities.


- Adjustments

The second policy governs how salaries of employees in these positions may be adjusted and what factors may be considered in entertaining a request. Like the classification process, the process is initiated using a request form, and a review of market data is often involved. The CHRO evaluates the request and makes a recommendation to the CEO for review and approval.

Eighteen (18) Grade 24 salary adjustments for the applicable reporting period were produced for our review pursuant to a document request.

- Four (4) of the requests for adjustments produced were for direct reports to the CEO. All were based upon alignment with the current market based upon the job descriptions provided. All were approved by the CEO based upon HR's recommendation following the completion of market studies and analysis.
- Fourteen (14) of the adjustments were for Pharmacy leaders, to address pay inequities for non-union leaders following salary increases for union employees in the department, and all were approved by the CEO based upon HR's recommendation following market and internal analysis.

We noted a failure to provide resumes (a required attachment) for several of the employees. We also noted that, while market data was produced, there was no narrative analysis to explain the bases for the resulting market-based salary adjustments. Though the policy does not detail specific process or documentation requirements for use in evaluating market studies and determining salaries, the policy does require a detailed explanation of market adjustment escalation for each position and the Plan dictates that CCH's employment actions must be proactive and transparent. Consistent with observations included in past reports, the salary related information provided in the materials for the adjustments approved in the applicable period left us with many questions, including whether HR has a proactive and transparent process for determining salaries where the use of discretion is involved. We noted, for example, that there were several instances in which salary adjustments were given to multiple employees within the



same job title/job code but their individual post-adjustment salaries differed. The bases for the differences were not explained.

For the sake of transparency, we continue to recommend that CCH's compensation-related documentation include narrative analysis tied to all applicable authorities to explain not only the recommended range for a job title under review but also each individual employee's adjustment (critical where there are multiple employees in the same job title subject to a salary review)<sup>12</sup>. We also remain interested in receiving documents contemporaneously with the determinations as anticipated by the policy to provide for more timely evaluation and to prevent workflow challenges in our department.

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

- Background

These policies govern the processes by which employees may be temporarily assigned the duties of another position, qualify for and earn interim pay, and the duration of same. 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.

During the period covered by this report, we received a total of twenty-eight (28) interim assignment packets, nineteen (19) of which involved retroactive approvals/pay, ten (10) exceeded one year and, in some cases as discussed below, recruitment efforts are unclear.

- Observations

In the past several EPO semi-annual reports, I have addressed concerns with patterns of apparent non-compliance and the EPO's ability to assess and report compliance with these policies. The facts that the two policies do not align<sup>13</sup> and that requests are approved despite vague and incomplete documentation on the forms have presented significant challenges from a compliance oversight perspective. HR leadership has always acknowledged the need to address these policies and the applicable forms but has not yet been able to do so.


- Long-term Assignments, "Additional Duties" & Transparency Concerns

We have routinely found these assignments, which are meant to be temporary (pending return of an employee on leave or pending the permanent hire of an employee into an identified vacancy), to significantly surpass the initial 6-month assignment period. While

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<sup>12</sup> It is our understanding that CCH has engaged a consultant relative to classification and compensation protocols, including those for market studies. We await the results.

<sup>13</sup> The Interim Pay Policy has been due for an update since 2014 and at least every three years thereafter.



extensions are permitted in 3-month increments when justified, we often find assignments have been extended multiple times without any documentation regarding *why* the vacancy had not been filled since the last extension (e.g., that there has been recruitment activity that has not yet resulted in a hire). In many instances over time, we have found no documentation to suggest recruitment activity for a permanent hire had ever commenced<sup>14</sup>.


Also, in instances in which an employee has been assigned some “additional duties” from another position rather than receiving the assignment of an interim job title, reference to the official job title from which the duties were taken were not provided (with an applicable job description) and we were unable, therefore, to assess whether the assigned employees are qualified to perform the duties and whether the duties themselves warrant additional pay under the policy (50% or more of the duties of a higher level job).

A few examples of lengthy Interim Assignments and “additional duties” assignments extended during the time covered by this report are provided below:

- A non-union physician has been in the same assignment performing additional “Program Director” duties since late 2021. Over time, the forms represented intention to fill the position permanently in FY 2022, then FY2023, FY2024 and now FY2025. In January 2025, upon receiving another extension approval, we engaged HR regarding our concerns that the request/approval packets had never identified the CCH job title that the interim duties belong to, had never provided the job description the duties belonged to (only a bulleted list of “additional duties”), and had never included the date the position became vacant. In March of this year, we received another extension packet that still did not identify the date the vacancy began but (for the first time) included a Program Director job description (approved in 2024) along with language suggesting plans to submit the paperwork necessary to initiate hiring. Our review of CCH hiring status records just before issuing this report show that the department received necessary approval to hire in July and that the long-term interim employee, alone, was interviewed in August. As of the issuance of this report, the interim assignment had been extended through early December.
- We identified that another non-union physician had been in the same assignment performing additional “Medical Director” duties that (identified via a bulleted list) since late 2021. Over the years, the extension approval forms reflected intention to fill

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<sup>14</sup> The EPO is not staffed to open an investigation for every Interim Assignment that, on the face of the documents, is not clearly compliant. That said, we have at times looked outside of the four concerns of the paperwork produced for assignments with multiple extensions to see if there is any evidence of an intent or effort to fill a position – and have often come up empty handed.



the “additional duties” position permanently in the next fiscal year. Where the space identifying the beginning of the vacancy was blank or “n/a” in early packets, later extension packets reflected a vacancy as of March 2022. In the period covered by this report, we raised questions about the need for continued extensions and raised concerns about insufficient transparency regarding the same. In the final HR-approved extension, in March 2025, the packet included (for the first time) a job description approved in 2024 and a notation that someone had accepted the position and would start shortly. Our review found that the physician who had been performing the duties since 2021 was hired into the position as of April 20, 2025.

- Upon receiving an extension packet that would bring a non-clinical, non-union employee up to two (2) years in an interim assignment, we asked for the forms to be updated to include additional information to explain the delay in filling the position permanently. After two years, the hiring process was completed and the interim assignment employee was hired into the permanent position.

- Retroactive Pay


We also routinely find instances in which Interim Pay is approved retroactively even though the department did not submit the request to HR in advance as required<sup>15</sup>. The practice of entertaining late requests and implementing approvals retroactively is non-compliant, creates the opportunity for duties to be performed by unqualified employees, and places employees performing interim duties in a precarious position. In the period covered by this report, for example, a department sought approval for an interim assignment that HR denied the request because the employee did not meet MQs. Because the request form had proposed a start date preceding submission of the request, this suggested to us that an employee had been performing duties he/she was not qualified to perform outside of the scope of his/her job description without compensation. Such would not be the case if HR adopted a stronger approach against non-compliant interim assignment requests from departments.

- Interim Pay for Union Employees & Transparency Concerns in Documentation for Union Employees

Other patterns we have advised you of in past reports is HR’s practice of approving Interim Pay for union employees (even though the Interim Pay Policy is expressly limited to non-union employees) as well as approving Interim Assignments for union employees

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<sup>15</sup> Timely submission and approval by HR is important, especially for new assignments, as there is a screening component and an employee should not be assigned, even temporarily, to perform duties he or she is not qualified to perform.



supported by documentation that does not demonstrate compliance with the Interim Assignment Policy. As you know, full compliance with the Plan and policies is mandatory absent a superseding CBA requirement. The approval memos and forms for these employees use language such as “Per the CBA,” without identifying the CBA or providing a citation to the specific superseding provision as required by the Plan<sup>16</sup>. Without that information, we are unable to assess whether apparent non-compliance in the documents produced to us truly violates an applicable policy or whether the approval was dictated by a superseding CBA authority.

In the period covered by this report, we encountered for the first time an employee who received retroactive pay for two types of additional pay: Interim Pay for additional administrative duties and “extra duty” pay for additional clinical duties. This highlights the need for standardized process and documentation related to *all* non-standard forms of pay utilized by CCH.

I have often explained that this small office, currently only three (3) employees, is not staffed to make inquiries and/or conduct investigations for each document review we complete when we are not able to ascertain compliance in the documentation produced. For some time, we have advocated that the forms for *all* employment actions require citation to any superseding CBA authorities to provide necessary transparency to anyone wishing to assess compliance. It has always been our position that, for every employment action, the applicable form (and required attachments) must demonstrate full compliance with applicable Plan or Supplemental Policy requirements and that it should not be necessary to engage in investigative activity to verify compliance.

To ensure transparency in several of the packets submitted during the period covered by this report, we engaged with HR to request documentation demonstrating the existence of superseding CBA authorities and were advised that the process was dictated by “past practice.” Though HR did not provide documentation requested to evidence past practice mandates, its leadership did commit to ensuring that past practices would be codified in the CBAs in upcoming contract negotiations. I am pleased to report that HR leadership has also recently committed to return to this issue and resolve the problems with the policies and their related forms once agency hiring requirements have been met.

- **Layoff/Recall (#02.01.17)**

HR reported that there were no lay-offs or recalls for the period covered by this report.

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<sup>16</sup> “If a CBA conflicts with the language in this Employment Plan or the CCH Personnel Rules, the language in the CBA will govern provided it does not permit or involve the use of any Unlawful Political Contact or Unlawful Political Discrimination.” Employment Plan, Section III.D




- **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). We reviewed five (5) reclassification request packets, all of which were approved by HR.

Our notable observations are as follows:

- The final approver within HR did not execute NPCCs for any of the approved reclassifications despite the policy's requirement that all employees participating in the reclassification of a position must execute one.
- The reclassification documentation produced in connection with the reclassification requests approved throughout the six-month reporting period were submitted to the EPO only after document request was issued to HR leadership, despite the policy's requirement to send our office written notification of the determination upon completion of the review and desk audit. The manner in which records have been shared results in less timely compliance evaluation and bottlenecks in this office's workflow.
- Other required documents were not produced in some instances (e.g. complete request form, organizational chart, and/or current job description).
- Though market data was provided, HR's documentation did not provide the analysis necessary to provide adequate transparency regarding the bases for its salary-related determinations. The data included with the documentation suggests the process is not free from subjective influence.
- Timeliness of the administration of the process was unclear or otherwise concerning.
  - In one instance, the packet we received included a reclassification request that had been approved in March 2024. We first questioned why an approved request from early 2024 was produced for the first time in July 2025. We then noticed that the new job description provided was unsigned, causing us to question when the reclassification had been implemented. Upon review of current Payroll records shortly before issuance of this report, we determined that the employee had not been reclassified as of the issuance of this report – almost a year and a half after the reclassification was approved.

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- In one instance, the packet related to a reclassification request for three individuals in the same job title approved for a two-step salary increase in January 2025 that had been initiated in July 2022. The new job description provided was unsigned, and the approval suggested a need to coordinator with the union, causing us once again to question whether the reclassification had been implemented. Upon review of current Payroll records shortly before the issuance of this report, we determined the reclassification had not been implemented. Our interpretation of the documents is that the employees approved for reclassification have been performing duties determined to be two grades above their current pay grade since 2022.

We have previously recommended that HR produce all documents related to a reclassification request in a standardized manner and upon determination to allow timely and efficient review, evaluation, and reporting on compliance with the policy's requirements. We have also previously recommended use of a single form for all required NPCCs to ensure all are captured, as well as the inclusion of analysis related to salary determinations to provide necessary transparency. Based upon what we observed in the documents produced for the reporting period, we renew all recommendations. Given the apparent process delays demonstrated in the documents submitted for the applicable period, we now also recommend that HR develop a mechanism for documenting and explaining delays in a reclassification review, determination, or implementation.


- **Third-Party Providers (02.01.18)**

This policy governs the retention and performance of those contracted to perform recruitment functions. In the applicable period, no new Third-Party Provider contracts were executed and no new contractors were brought in to provide services under pre-existing contracts.

- **Training Opportunities (02.01.13) & Overtime (02.01.14).**

These policies exist to ensure that overtime and training opportunities the policies apply to are equitably distributed. Department heads are required to track how individuals are notified of opportunities, the criteria for selection, and who received the training opportunity or overtime (where foreseeable and not assignment-specific) and maintain files containing relevant documentation. We did not review department tracking forms or files for the time covered by this report.

Unlike the other supplemental policies, NPCCs for these policies are not collected each time overtime or training is offered or assigned. Rather, NPCCs are collected semi-annually in an electronic format.

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- **NPCCs.** NPCCs for both policies were circulated to all department heads systemwide in June as the policies require semi-annual NPCCs. For the applicable period, given the time-consuming nature of the standard collection process and short staffing in the EPO, forms were circulated via email with a directive to execute the forms and maintain all relevant documentation in their department files.

Our hope is that a permanent solution will be developed prior to December 15, 2025, the next semi-annual NPCC due date. I will include status in the next semi-annual report.

- **Transfers (#02.01.12)**

This policy requires leaders to provide notice to HR and the EPO when an employee or employees have been transferred (temporarily or permanently) *to another work location within his or her assigned department* and to provide information regarding the reason for the transfer(s) and the bases for selecting the individual(s) transferred. No transfers were reported in the applicable period.

### **INELIGIBLE FOR HIRE LIST**


The Ineligible for Hire List (“List”) is a list created, updated, and maintained by HR documenting former employees and contractors who separated from CCH (either through termination, resignation in lieu of termination or demobilization) for any of several reasons detailed in the Plan. The List is routinely reviewed by HR in hiring processes as part of validating the eligibility of candidates, and individuals on the list are ineligible to be hired at CCH for a period of five (5) years.

The CHRO routinely reviews terminations, resignations in lieu of termination, and contractor demobilizations<sup>17</sup> to evaluate whether inclusion on the List was warranted, and this is followed by circulation of the List as updated to reflect those changes. In total, thirty-two (32) names were added in the five (5) updates that were circulated in the period covered by this report.

The Plan also provides for names to be removed from the List under circumstances where their time on the list has expired, an appeal is granted, or an individual is return to work via a settlement or award. Nine (9) individuals were removed at the expiration of their designated 5-year period, and those changes were reflected on the updates that were circulated. Two (2) appeals were submitted during the applicable period, and both were denied. Both appeals were based upon allegations that due process was not provided in

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<sup>17</sup> We identified an opportunity to improve internal processes that will ensure HR’s routine review of contractors who have been demobilized for cause and shared a recommendation with HR.



the disciplinary process preceding their terminations and both are now subject to investigation by this office. We are actively engaged with HR and Legal leadership to ensure that CCH's corrective action processes provide adequate due process.

We identified two instances in which necessary updates were not addressed in the applicable time period. In the first, the name of a former employee who had been placed on the List and who was returned to CCH employment pursuant an award was not removed. The second, described herein under Investigations, results in the delay to add the employee found to have falsified her CCH job application. We advised HR upon identification of these two instances, and I am confident that they will be addressed promptly.

### **WEBSITE**

The Plan specifies certain content and information that our website must contain, making it a primary required mechanism to provide transparency regarding our implementation of the Plan. Significant improvement has been observed and reported in recent past EPO semi-annual reports. The most recent improvements and the opportunities that remain are detailed below:


- **Quarterly Reports**

In past semi-annual reports, we reported that the HR Quarterly Reports posted on CCH's website as required by the Plan did not include specific types of required data. This was due, in large part, to the fact that the report template did not include fields to capture all required data and the process of compiling data for the reports was largely manual. After several discussions with HR leadership over time, technical and process-related factors limiting the ability to compile and report on the required data were addressed and we have reported on incremental improvements achieved in each applicable reporting period. Transparency to the public is that much better for it.

As of the most recent past EPO semi-annual report, just one data point remained to be included into the fabric of these reports: settlement agreements and awards resulting in employment actions that would otherwise violate a Plan requirement. I am happy to report that in the Q1 and Q2 reports for 2025, HR included the new hires that were converted from agency<sup>18</sup> or hired via an approved hiring process after the conversion deadline as required by settlement agreements referenced above. In total, twenty-nine (29) such hires were reported for Q1 and one hundred sixty-four (164) were reported for Q2. Those

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<sup>18</sup> As above, certain contractors in place as of the execution of the erosion settlement agreements could be converted to employees without a hiring process so long as they met all eligibility requirements.



interested in following ongoing process will be able to identify future related activity in upcoming HR Quarterly Reports.

The only remaining improvement required at this point is to ensure that *all* employment actions implemented by HR pursuant to a settlement or award are reported consistent with the HR Quarterly Reports provision the Plan. We have continued our discussions with HR leadership on this important requirement. I will provide an update in the next semi-annual report, in March 2026.

- Job Descriptions

In past semi-annual reports, I reported non-compliance with language in the Plan requiring CCH to include job descriptions on its website. For some time, non-compliance was related to the fact that there was no technological mechanism to upload them. A tool was developed and implemented in summer 2024. Following spot checks, we determined that full compliance has not been achieved. HR assured us there is a plan to identify all sources of challenge and to develop solutions.


### **NEW & UPCOMING**

- New

- **Director of Talent Acquisition.** In June, CCH onboarded Karen Hughes into the newly created Director of Talent Acquisition position. Ms. Hughes came in with energy and ideas. We are confident that she will have a positive impact on Plan compliance, and we look forward to working together on matters of mutual interest.

- Upcoming

- **Plan Unification.** This office has consistently recommended and reported on the need to formally document and publicly post all amendments that have been approved by the OIIG and EPO since that last formal Plan update in early 2020. Though just after the period covered by this report, CCH has engaged a contractor to assist with this important task. Unification will ensure transparency for CCH employees and the public and provide the source necessary for hiring managers, HR, and this office to ensure consistent and compliant implementation of all Plan requirements.
- **HR and Leader Training.** Creating and improving training content, getting all new HR employees, interviewers and supervisors up to date with new employee training, and getting existing HR employees, interviewers and supervisors up to date with annual training is a high-level priority for the EPO in the coming months. This will require significant collaboration with various leaders in HR, which is already underway.
- **Training for Administrative Support.** As previously reported, this office developed training content for those who assist with administrative functions



related to hiring (e.g., scheduling and facilitating interviews, providing required notices for monitorable activities, collecting documents, producing required documents to HR) and shared it with HR leadership. The next agreed-upon step is for HR to test the training with administrative personnel who are experienced with supporting hiring processes so that their feedback may be incorporated into the final product prior to broad use.

We believe that offering this type of training to administrative support personnel will result in improved compliance, reduced hiring department frustration, and efficiencies resulting in a reduction in the overall time to fill positions.


### **EPO RECOMMENDATIONS**

I have included several recommendations throughout this report, most of which are carried over from prior reports. We hope that the following may be achieved prior to conclusion of 2025:

- Amending the Interim Assignment and Interim Pay Policies. Updating the policies and forms will ensure clear, defined, enforceable rules and further ensure that documentation provides sufficient transparency.
- Developing Workflows for HR's administration of the Plan and Supplemental Policies. HR's documentation of standardized workflows for employees within HR staff who implement Supplemental Policies (for inclusion in training content) would ensure consistency and compliance. We recommend the highest priority be given to validation process and HR's implementation of the following Supplemental Policies: discipline, interim assignment and interim pay, reclassification/desk audit, grade 24 classification and adjustment, lay-off and recall.
- Developing a Job Aid for each of the CBAs. By developing a job aid for each CBA that details all provisions in the CBA that supersede an Employment Plan, Supplemental Policy or Personnel Rule requirement and how to satisfy the provisions' requirements, HR and hiring managers will have ready access to the information necessary to properly implement employment actions governed by CBAs. These tools would also provide the EPO with the information necessary to assess whether apparent noncompliance with a Plan or policy requirement constitutes a violation or is a permissible process adjustment required to honor an applicable, superseding CBA requirement<sup>19</sup>.
- Updating all Employment Action Forms. As above, we believe it is critically important to update all employment action forms to require documentation of all compliance points and citation to specific conflicting CBA requirements when the documents

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<sup>19</sup> To our understanding, there are over twenty (20) individual CBAs, and superseding provisions often require employment actions that are a blend of CCH and CBA process. Without this type of guide, we are vulnerable to inefficient and noncompliant processes.



produced for the employment action do not align with an applicable Plan or policy requirement.

- Improved Support for Implementation of Training Opportunities and Overtime Policies. By coordinating to develop processes to increase understanding and reduce administrative burden on leaders related to tracking and document maintenance required by the Training Opportunities and Overtime policies, implementation will be streamlined and compliance will improve.

### **CONCLUSION**

We have work ahead of us but are moving in the right direction. 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. I will report further progress in March 2026.

Sincerely,

*Kimberly A. Craft*

EMPLOYMENT PLAN OFFICER

cc: CCH Board of Directors *via* Deborah Santana, Secretary of the Board  
Ellie Bane, Chief Legal Officer  
Win Buren, Chief Human Resources Officer  
LaShunda Cooperwood, Office of the Independent Inspector General