Hello, I am Brenda Langford, region 13 board member for NNOC nurses and Chief Nurse Rep for Cook County health.

There have been many presentations about pathways to excellence in order to get magnet status for Cook County Hospital. However, there's nothing excellent about not being able to retain our nursing staff or not being able to fill vacant positions. The HR team and board of directors and Cook County health leadership are wasting money that is paid by taxpayers to educate nurses to further their education and degree then not allowing those nurses opportunities to find placement in those positions in our health system. These nurses are loyal to Cook County health and want to continue to provide care to our patient population that may not necessarily be served elsewhere. This is a problem be we are experiencing for nurses that receives 100% Tuition Reimbursement from Cook County Team obtain advanced degrees as well as problems we are having in hiring for the public health department and with the problems in filling vacant positions in the healthcare budget. Even the leadership in public health has recognized hiring difficulties. Public health leadership has signed onto the request to reclassify the public health nurses pay to be increased in order to fill necessary positions for public health initiatives that are being advertised in the new public health campaign promotions about the services we offer. It is interesting to me that we are investing money in a campaign about our services, yet we are unable to fill the positions because they are not comparative in pay to other departments doing similar work and are being blocked for consideration by HR. Furthermore, we are wasting time, and resources to take all these posting and reclassification concerns through the grievance process. If we cannot come to some kind of resolution to help our nurses be compensated for their services, many nurses will continue to leave Cook County health. If Nurses continue to leave Cook County health, there will be no nurses here who are invested in or are loyal to our mission to serve our patients. Cook County is already showing signs of inability to hire nurses to fill vacant positions. NNOC nurses are asking our commissioners, and board members to take a closer look at the hiring practices and inefficiencies so that we can fill vacant positions that Cook County committed in the last bargaining session to fill to relieve the staffing crisis experienced in Cook County health and to ensure that we have the necessary staffing to fulfill our commitments to serving the patient population of Cook County. Thank you.

Dear Cook County Health Board of Directors,

Cook County Department of Public Health has unveiled a new campaign focusing on the Public Health Heroes to raise awareness about the role that our department plays in making the communities healthier and safer and a 2023-2025 strategic plan focusing on the communities we serve but fail to give our nurses a competitive wage to allow for adequate staffing to fulfill our agencies vision.

I work in the IL Breast and Cervical Cancer Program and provide breast and cervical cancer screening services for the underserved, uninsured and underinsured women from our communities. I work with women who are scared and worried about breast or cervical cancer and not having the resources to get screened. Mothers worried about their breast or cervical symptoms being cancerous and not being able to afford cancer treatments, or finding resources for our patients who have more than health care needs. I work with the cancer patient who just lost their insurance and cannot afford the cancer treatments get enrolled in the Referral to Treatment Act.

I also assess every enrolled woman for other services needed to meet the social determinants of health, such as access to healthy foods, housing or education resources and work with partner organizations to provide those services to our community members.

I work with partner clinics and care teams to make sure all our women screened get the services needed and orders/documentation needed for their care. I complete care plans for women undergoing diagnostic procedures and work alongside their primary physicians and their care team to make sure all diagnostic procedures are completed. We go out to the public and educate our communities on the importance of health care maintenance and provide them the resources for our program.

As a public health nurse I complete emergency preparedness trainings and am ready to go in the field when needed. I have vaccinated the community to protect them against COVID-19, Flu and the current measles outbreak.

Our daily work mirrors our agencies mission and values, to achieve health equity for all people, yet our nurses face an inequality. Our Human Resource department needs to act now and provide a just wage to the public health nurses who make it their mission to bring our agencies resources to their communities. I have been here for about nine (9) years now, and love what I do because it makes a difference within our communities. I have received many thank you letters from clients who are so grateful for what we do. I believe we deserve this upgrade, and so does our leadership team. We need our Human Resources department to do their part and get this done for us nurses!

Sincerely,

Cristina Guerrero

## Good morning:

I'm writing this letter to respond to why the Public Health Nurses should be granted a reclassification /upgrade. I have been a public health nurse for a year and I have found that Public Health Nurses (PHN) play a valuable role to patients after they have been discharged from the hospital. Nursing care also extends after they leave the hospital and I have learned that the PHN is a valuable resource for a lot of patients after they leave the hospital settings.

As a PHN I go and assess the patients for any issues they may have and I assess to make sure the patient is meeting its goals and milestones. I offer community services and refer them to early intervention to provide some source of help for them. I also am a patient advocate and work with various multidisciplinary teams as well as socioeconomic classes. I service both the poor as well as the middle/upper class patients and they all have one thing in common they need our services to help them meet the developmental milestones and receive the care that is needed.

As PHN I on the south suburban communities we encounter some disparities by going into some very under privileged neighborhoods and we go and offer them the care they deserve or need. PHN service high risk infants, drug exposed, Hepatitis B, STD and exposure to lead all which requires some medical assistance, as well as nursing services after discharge from hospitals.

This reclassification is important to help keep Public Health Nurses striving in the Cook County Department of Health. We are doing the same work as Case Managers and offer services to the community as well such as vaccinations and following the infant for 2 years to assure they meet the desired goals and guidelines to meet their milestones. PHN also establish a bond with our clients and family we offer community services to the family besides our patient which is also greatly needed and appreciated.

I feel Public Health Nurses should be acknowledged and granted an upgrade in order to keep the PHN legacy alive. Our pay should be equal to or comparable to case manager position. This is needed to help with recruitment and retention of losing more nurses to Case manager positions and to help with recruiting more Public Health Nurses in the future.

This is why it's important to upgrade the classification as our jobs are very similar and we do the same with our population be it Apors, Lead, STD or Hepatitis B patients. this upgrade is also need to keep the Public Health Nurse from fading out.

Thank you

Susan Harris RN, PHN1

To whom it may concern,

The purpose of this letter is to address the ongoing nursing reclassification issue that Cook County Public Health nurses have been facing for the past two years. Our frustration with the lack of progress in this matter compels us to express our concerns. It was disheartening to find that our request for reclassification was denied, despite the acknowledgment of its reasonableness and justification by the head of the RN department and the Hearing Officer following the reclassification grievance meeting held on February 29th, 2024.

Firstly, it is crucial to understand the significance of Public Health to our communities, which includes promoting and protecting the health of populations while using nursing, social, and sciences to prevent disease and disability. The role of a Public health nurse includes and is not limited to promoting health by educating our public on topics such as maternal and infant mortalities, lead exposure, Breast and Cervical cancer screening, Hepatitis B, and infectious diseases such as TB and Hep B. We conduct screenings and assessments and follow up with the clients as we strive to provide our communities with the best health practices and services available from Public Health.

As a Cook County Public Health Nurse, we work primarily in underserved areas with individuals and families in various settings like homes, clinics, and, community health centers, catering to the needs of vulnerable populations. We manage a caseload of individuals and families assigned by geographic area, assessing their needs, and developing an individualized care plan. As Lead case managers, we perform home visits to educate families on how to safeguard themself from lead poisoning, provide appropriate referrals to necessary services, track family compliance, maintain comprehensive and up-to-date electronic and paper nursing records, and assist families in carrying out recommendations made by their primary care provider.

Since joining the Lead unit, I have observed an increase in our workload due to the loss of colleagues who have transferred to other case management positions for better-paying positions. That is why the reclassification upgrade is crucial to retain

our staff which will help maintain our day-to-day activities' productivity, prevent work delays, and allow the continuity of care instead of patients having multiple case managers, which then puts a strain on our ability to meet deadlines and maintain the quality of our work.

The reclassification upgrade is needed to ensure that our staff continues smoothly, and the employees remain satisfied, leading to increased work productivity and securing and maintaining the necessary funds for our department's operation. Therefore, we request that action be taken to finalize the nursing reclassification as soon as possible and compensate nurses for what they've been due and deserve.

Thank you for your time and attention to this matter.

Laetitia Kalombo.

## Good Morning,

My name is Linda Magee and I am a Cook County Public Health nurse. I have been a nurse with Cook County Health for 32 years, and have spent approximately 22 of those years with Cook County Department of Public Health. I have also worked in the Emergency Department, Endoscopy Unit, and Ambulatory and Community Health network/primary care.

I have always had a passion for Public Health nursing because I feel that Public Health embodies the Cook County Health mission statement. I provide service to some of the most vulnerable and underserved residents of suburban Cook County and strive to overcome health disparities and inequities for my clients. While Public Health nurses have many targeted populations, I work in the APORS program which stands for adverse pregnancy outcome reporting system. The target population for this program is high risk mothers and infants up to two years of age. A wide variety of health concerns are represented in my caseload including drug exposed infants, mothers and babies exposed to communicable disease, congenital malformations, nutritional deficiencies and failure to thrive to name just a few. A home assessment and psychosocial assessment are also a part of the program to address and overcome any barriers preventing optimum growth and development or access to health care for the family. Through assessment, health education, case management and linking families with needed resources, Public Health nurses are on the front lines of building Healthier Communities. In addition, Public Health nurses answer the call and respond to Public Health emergencies as they arise.

Over the past two years, the Public Health department has seen several nurses transfer to the Community Based Care coordinator position for the higher salary attached to the latter position. Both groups of nurses are providing similar case management/care coordination services. I feel this disparity needs to be corrected immediately to retain the Public Health nursing staff serving our communities. Losing even one or two nurses to the other Cook County case management program is statistically significant as we are a smaller department. I feel that nursing leadership works tirelessly to build the team and expand services, but the disparity in pay between the two case management positions causes staff turnover ultimately effecting services to our clients. I have also accepted a position as a Community Based Nurse Care coordinator and plan to transfer out of the Public Health Department because it represents a promotion. The Public Health nurses requested this disparity to be corrected about 2 years ago, but we were not even given the basic courtesy of a response until a grievance was filed. Please show us the respect of compensating Public Health nurses commensurate with our Cook County Nurse colleagues immediately. A long arbitration process will surely impact the ability to retain valued nursing staff at CCDPH.

Thank you for your time and consideration,

Linda Magee

Hello,

I have been working in department of public health since September 2023. I am passionate about working in public's health department because, the field of public health plays a critical role in the promotion of health, prevention of diseases and empowerment of individuals to manage illness and disabilities. The public health department serves residents of suburban cook county. I work in APORS program, which is the Adverse Pregnancy outcomes reporting system. I am a public health nurse 1 and My role in the APORS program is to monitor newborn/infant that are born high risk/ birth defects/or other abnormal conditions. Such as, prematurity, birth defects, endocrine/immune disorders, neonatal or fetal death and prenatal drug exposure, to name a few. I also help to support breastfeeding, monitoring infant growth and development, education on prevention of complications and illness, and referral for evaluation, treatment and supportive services. I feel the upgrade is important to us because, adequate pay helps retain experienced nurses. When nurses are compensated fairly, they are more likely to stay in their roles and ensuring continuity of care.

**Thanks** 

Oghonwen Ogbeide PHN1

Francesca's Statement on Public health Position Re-classification

Good day everyone! All protocols observed.

My name is Francesca Nwora-Takpor, case manager with CCCDPH with Healthy Homes &Lead Poisoning Prevention Unit. I have been working in CCH as an RN in different capacities for the past 24yrs.

On behalf of all Cook County Department of Public health nurses, I am here to humbly submit our formal request to reclassify us to FE position. I am asking that you make us whole by placing us on FE position as it is long overdue due to the services we render to the communities in our county (suburban cook county). Our services have provided a huge access to care, preventive health, and home visits/management to our low-income clients. According to the Collective Bargaining Agreement (CBA) language in Article 5, Section 5.3 which says in:

"B" An RN also may request that his/her position be reclassified, the request will be reviewed by the RN's departmental heads. If the Departmental agrees that the request is reasonable and justified, the Dept head will promote the RN or include this reclassification in the forthcoming departmental budget request. All these three steps have been met and was waiting for HR to sign off. This request started in earnest 2years ago.

We are more than qualified for this position and the work /job description surpassed that of FE position job description. Our Ph nurses have lived up to all the healthcare delivery system challenges, which continues to be dynamic, everchanging with new innovations. During the Covid pandemic, Public Health Nurses played an important role in serving Cook County communities and suburban environs.

Our outreach to the undeserved in our county cannot be overlooked especially, caring for families to meet their physical, social, mental needs such as mother and babies with defects, individuals with mental health, childhood Lead poisoning, clients afflicted with TB, cervical & breast cancer clients. All these groups of clients are followed -up with care after discharge from the hospital until they are completely healed. All these services we do in collaboration with

providers. These are some services our nurses provide to prevent, minimize infection & illness, hospitalization and prevent deaths in our communities.

I am therefore, asking that with all these reasons, that you grant our request and place us on FE position where we rightly belong to improve retention of nurses, make us more productive by boosting our morale and improve staffing which have affected our department. CCDPH nursing is seriously lacking and losing their nurses to other well-paid positions, though we provide more services than other departments. Finally, CCDPH COO, Dr., CNO and Dr B Peters are in support of our reclassification. Our understanding is that HR at this moment does not have the Head of HR to sign off this request. We want this matter to be resolved so that CCDPH will do the work it does best.

Thank you.

Francesca – Case Manager CCDPH