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March 14, 2024

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## **EMPLOYMENT PLAN OFFICE 19TH SEMI-ANNUAL REPORT**

Dear Dr. Mikaitis and Inspector General Cyranoski:

### **INTRODUCTION**

This is the 19th Semi-Annual Report covering my office's observations and activities between July 1 - December 31, 2023, and goals and new initiatives for January 1 - June 30, 2024.

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

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

- 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,

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<sup>1</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.

- 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, commenting on, and raising objections 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 CEO) 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 July and December of last year, we continued to perform the functions detailed above.

### **EMPLOYMENT PLAN AMENDMENTS**

- **Updates to Exhibits**

The Plan's General Hiring Process is the most structured of all hiring processes and is the default hiring process unless a position is eligible for an alternative hiring process. Some alternative processes involve lists that a job title must be included on to be eligible for the process. For this reason, the lists must be updated. The criteria and process for inclusion varies from list to list.

The Direct Appointment List (Plan Exhibit 5) was updated once during the period and six (6) new positions were approved for inclusion. The Actively Recruited List (Plan Exhibit 2), the Advanced Clinical Positions List (Plan Exhibit 13), Certified/Licensed Healthcare Professional Positions List (Plan Exhibit 2) and the Department Division & Section Chair of Medical Department of Medical Staff List (Plan Exhibit 13) were not updated<sup>2</sup>.

- **Procedural Amendments**

The Plan is a living document and may be modified by the CEO as CCH's needs change. The process requires written notice to my office and the OIIG of any proposed changes to provide an opportunity to review and comment on the proposed amendment prior to implementation. In this review process, the EPO and OIIG are looking to ensure that the new or amended procedures are proactive and provide for the level of transparency necessary demonstrate CCH's compliance with all applicable legal requirements.

An accelerated hiring process, which we presented to former Chief Executive Officer (CEO) Israel Rocha upon his request for EPO guidance regarding development of a hiring process that would

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<sup>2</sup> The need to incorporate updates to the Actively Recruited List is not critical at the present time as both General Hiring and Actively Recruited positions follow the same temporary hiring process. We are evaluating the accuracy/completeness of the other lists that have not had recent updates as of the drafting of this report. I will provide an update in the next report.

allow him to quickly and permanently<sup>3</sup> hire employees on an emergent basis, was approved on 8/02/2023 (for initial use as a pilot). Under this process, the CEO certifies an emergency, and Human Resources (HR) thereafter follows a very expedited, yet Plan-compliant process to permanently fill the vacancies identified. Department-level interviews are eliminated, and offers are made to candidates HR has verified to be eligible (via standard screening/validation process) in an objectively determined order until no vacancies remain.

The process was implemented in early August after Mr. Rocha certified an urgent need to fill numerous nursing vacancies. Dr. Erik Mikaitis, the Interim CEO, very recently requested an extension of the pilot period, certified additional vacancies in a broader grouping of positions, and asked for two modifications to the process. This office and the OIIG are working through that request with HR as of this report's drafting, and I do not anticipate problems.

Our observations of compliance with implementation of this process for the vacancies certified in the August request are addressed in the 'Monitoring' section of this report.

- **Documentation**

The EPO and the OIIG have approved several proposed procedural changes over the past two years<sup>4</sup>, but the changes have not been incorporated into the official Plan posted on the CCH website. I have identified this as a transparency concern in past semi-annual reports and have also identified how the absence of formalized documentation of the newer processes has resulted in staff's inconsistent and non-compliant implementation of applicable requirements. HR leadership acknowledged the requirement and included this task among its various competing priorities. It is our understanding that this will be addressed in the very near future.

## **INVESTIGATIONS**

In the last few EPO semi-annual report presentations to the Board, I reported that my office carried a large backlog of pending investigations (nearly 130 investigations were pending at the onset of 2023) the result of chronic short staffing in the department and other competing priorities. The Board, in early 2023, asked that this office focus on resolving outstanding investigations to reduce and hopefully eliminate the backlog of cases.

Though we have made significant process since that time, the EPO still had seventy-eight (78) pending investigations at the beginning of the period covered by this report. Though the reporting

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<sup>3</sup> The Plan's pre-existing emergency hires process does not provide for permanent hires because it does not require the types of processes necessary to support permanent hiring (e.g. posting the positions to the public).

<sup>4</sup> Historically, amendments to the Plan have been handled with HR submitting proposed modifications via redlines to the current Plan, followed by meetings and shared reviews to finalize the amendment. Once approved, modifications were immediately incorporated into the body of the Plan and posted on the website. Given that the historic process can be time consuming, and considering the exigent circumstances presented at that time by the pandemic and Great Resignation, the EPO and OIIG agreed to consider (and approved) procedural modifications that were proposed less formally - with the understanding that the processes would soon thereafter be formalized and inserted into the official Plan document.

period, we resolved forty-six (46) existing complaints<sup>5</sup> and received fourteen (14) new ones. The new complaints concern various allegations of, among others, misuse of ranked lists from hiring fairs, shift and work assignments, forged signatures on hiring forms and payroll adjustments not in compliance with CCH policy. Forty-six (46) matters are currently pending.

The findings and recommendations contained in the two (2) Incident Reports issued are summarized below. Under the Plan, HR is required to issue a report within thirty (30) days of the issuance (with the option of one thirty (30) day extension upon request): (a) confirming implementation of the EPO's recommended action, or (b) explaining why the recommended action was not implemented and describing the alternative action the CEO has elected to take and the specific reasons for such alternative action. HR's responses to the two (2) Incident Reports are summarized beneath the corresponding Incident Report summaries below.

- EPO2023-013. In a report issued on October 16, 2023, we concluded that an employee falsified her application for employment in two instances where she used fictitious titles which misrepresented her role in the organization when describing her CCH work history. The EPO recommended significant discipline for the subject employee.
  - HR issued a response on December 14, 2023, that did not confirm implementation of the recommendation but rather acknowledged agreement with the recommendation and stated an intent to issue discipline against the subject employee. As of the drafting of this report, departmental leadership has not initiated discipline.
- EPO2023-029. In a report issued on November 28, 2023, we concluded that the HR's modification of the minimum qualifications of a Direct Appointment position prior to submitting the candidate's application to this office and the OIIG for pre-hire review violated the Plan<sup>6</sup>. To support completion of the hiring process consistent with the principles contained in the Plan, we recommended that HR and the user department conduct recruitment activity using the new job description (affording the organization the benefit of a larger candidate pool) before making a final hiring decision. We also recommended the development of a standardized operating procedure and a job aide (both subject to review by this office) for use by individuals involved in Direct Appointment hiring to prevent recurrence.
  - HR issued a response on December 29, 2023, that did not confirm implementation of the recommendations but rather acknowledged agreement with the recommendations. The first recommendation was implemented, and, after further consideration, the Interim CEO ultimately chose to hire the candidate who had been previously selected by our former CEO. We did not object to that hire. As of the drafting of this report, we have not been provided with a procedure and job aide for EPO review.

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.

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<sup>5</sup> Complaints are resolved either by formal Incident Report or utilizing the processes in the 2022 amendment to the Plan's EPO investigations provision which grants the EPO authority to administratively resolve matters not suitable for resolution via a formal incident report.

<sup>6</sup> The job description was modified after learning that the candidate selected and put forward for the position failed to meet the existing minimum qualifications. This hiring process is described in more detail in the applicable section under 'Monitoring' below.

<b>Investigation Number</b>	<b>Complaint Date</b>
EPO2019-050	10/1/2019
EPO2019-015	2/23/2019
EPO2019-017	3/11/2019
EPO2020-029	6/26/2020
EPO2021-011	6/2/2021
EPO2021-011	1/11/2021
EPO2021-012	4/25/2021
EPO2021-014	5/6/2021
EPO2021-015	5/6/2021
EPO2021-016	5/13/2021
EPO2021-017	5/13/2021
EPO2021-018	5/18/2021
EPO2021-019	5/26/2021
EPO2021-020	5/28/2021
EPO2021-022	6/23/2021
EPO2021-023	6/15/2021
EPO2021-024	8/11/2021
EPO2021-025	11/5/2021
EPO2021-027	8/28/2021
EPO2021-028	9/3/2021
EPO2021-029	8/26/2021
EPO2021-030	9/16/2021
EPO2021-031	9/29/2021
EPO2021-032	12/6/2021
EPO2021-034	3/5/2021
EPO2022-001	2/7/2022
EPO2022-002	2/10/2022
EPO2022-004	3/14/2022
EPO2022-007	5/13/2022
EPO2022-008	6/22/2022
EPO2022-010	7/27/2022
EPO2022-011	7/28/2022
EPO2022-012	11/28/2022
EPO2022-013	9/30/2022
EPO2023-024	8/25/2023
EPO2023-025	8/26/2023
EPO2023-002	1/10/2023
EPO2023-003	1/23/2023

EPO2023-004	2/1/2023
EPO2023-014	5/25/2023
EPO2023-022	6/26/2023
EPO2023-023	8/2/2023
EPO2023-026	8/28/2023
EPO2023-027	8/30/2023
EPO2023-028	9/28/2023
EPO2023-030	11/1/2023

Eliminating the backlog of investigations and promptly addressing new complaints remains a priority for us.

### **TRAINING**

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

The information below pertains to each type of training conducted:

- **Employment Plan Training.**

This training, which provides a broad overview of the purpose, function and requirements of the Plan, is offered to new employees and included in annual training. It is up to date.

- **Employment Plan Interviewer Training.**

CCH leaders are required to attend this lengthy in-person training before participating in our hiring processes. During the applicable period, there were eight (8) in-person sessions, and eighty (80) employees were trained. Annual training is required thereafter to maintain eligibility. As of the issuance of this report, annual training is well underway.

- **Supplemental Policies and Procedures<sup>7</sup> (Policies) Training.**

Training on the supplemental policies, like training on our hiring processes, is required of all new employees and annually thereafter. During the applicable period, there were seven (7) in-person sessions, and sixty-six (66) employees were trained. As of the issuance of this report, annual training is well underway.

- **HR Staff Training.**

New HR staff are required to receive comprehensive training on the Plan and Policies. HR staff is also required to receive annual Plan and Policies training as well as training on any updates to the Plan and/or Policies. During the applicable period, there were six (6) in-person sessions and

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<sup>7</sup> The Supplemental Policies govern non-hiring employment actions and that must be compliant with the spirit of the Plan by being proactive and providing for transparency. These policies are addressed below, but some examples include discipline, reclassification of positions, demotions, and transfers.

eighteen (18) employees and third-party providers<sup>8</sup> were trained. As with the other types of trainings, annual HR training is also required. HR staff was provided annual training on the Revised Hiring Process, which governs our two most frequently utilized hiring processes. Plans are in development to offer annual training on the Advanced Clinical Positions hiring process, a third frequently used hiring process.

- We conducted a review of our training records and identified some actual and some potential outstanding HR training needs that need to be addressed. We are verifying those through HR's electronic records and working through that with HR as of the drafting of this report.

## **HIRING & EMPLOYMENT ACTIONS**

Offering guidance on correct implementation of the Plan (and on how to address and/or resolve errors or other unexpected circumstances in a manner consistent with Plan principles) is a big part of what we do. We also observe (monitor) employment actions in progress to assess for compliance and assist management by providing direction and guidance as processes unfold. This prevents non-compliance in real time and serves as a form of training to prevent future non-compliance. We additionally monitor compliance with Plan requirements via review of documents. Our practice is to recommend corrective measures and advise the HR staff appropriate to assist with corrections.

Because the volume of hiring and other employment actions that we oversee is so high, we do not monitor and/or audit every hiring process. Outside of processes we are brought into because of questions or concerns raised, we implement monitoring and document review projects involving sampling designed to allow us to gain insight into the types and rates of non-compliance and opportunities to enhance trainings or develop additional resource materials to support our leaders.

These EPO activities are summarized below.

## ***HIRING***

- **Revised Hiring Process.**

We randomly selected October 23<sup>rd</sup> through October 30<sup>th</sup> and reviewed all thirty-one (31) Decision to Hire (DTH) packets approved by HR during that time. 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. Through this project, we identified thirteen (13) instances of hiring process documents missing required signatures (HR staff, Hiring Manager, and/or Department Head), two (2) instances of employees participating in interviews despite not being eligible to do so<sup>9</sup>, two (2)

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<sup>8</sup> Third-Party Providers are individuals contracted by CCH to perform recruitment-related functions. They are required to adhere to the Plan's requirements.



instances where a job posting was significantly flawed,<sup>10</sup> and one (1) instance of a non-compliant method of scoring (that did not ultimately impact the validity of the hiring decision).

We also encountered the following instances of non-compliance (mostly via notice provided by HR upon discovery of the issues) and, where applicable, provided guidance to support resolutions consistent with the spirit of the Plan:

- Hiring Manager violated Plan via a prohibited contact. Human Resources verified that they re-educated the manager on the types of contacts that are prohibited.
- Hiring Manager submitted a candidate for hire that was selected outside of a competitive hiring process for a position not eligible for non-competitive hiring. The selection was not honored and had recruitment via the Revised Hiring Process was required.
- Hiring Manager engaged in a prohibited contact. HR and the EPO agreed that additional formal training was required for the employee and that training was completed.
- Hiring department conducted interviews after the Application Review Panel (ARP) meeting (at which a proposed interview list is generated) but before HR had verified eligibility of those chosen and approved the interview list. We advised HR that it would be allowable to process the interview results of those HR subsequently verified to be eligible.
- Interviews conducted before any screening activities had been completed. No remedial action was recommended as no candidates were selected for hire in the interviews.
- Hiring Manager conducted reference checks on the selected candidate which is not allowed under this hiring process. We requested notes of the reference checks be included in the DTH packet for transparency, and HR re-educated the Hiring Manager on the rules governing reference checks.
- Hiring Department interviewed candidates who had not been validated and who had not taken a required pre-employment test. HR subsequently validated the applicants the department had interviewed and facilitated testing of those who were determined to be eligible.
- Hiring Department conducted interviews without obtaining HR's advance approval of the questions utilized as required. Once HR verified that the questions were appropriate and would have been approved had they been presented in advance, we allowed the hiring recommendation to be processed. HR also re-educated the Hiring Manager on the requirement to submit interview questions for approval.
- Hiring Department sought to hire a previously dispositioned candidate from a requisition that had expired. The hire was not approved.

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<sup>10</sup> In both cases, the disqualifying questions entered into Taleo (questions that perform the system's automatic, initial pre-screening of an applicant's qualifications) did not align with the minimum qualifications contained in the job descriptions. When there is an error with the disqualifying questions, applicants who answer "no" to the erroneous questions will be automatically disqualified and never seen by HR or the hiring department.



- **Advanced Clinical Positions.**

We randomly selected and reviewed fifteen (15) DTH packets for positions filled via the Advanced Clinical Positions hiring process that were approved throughout the reporting period. 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. Through this project, we identified seven (7) instances of hiring process documents missing required signatures (HR staff, Hiring Manager, and/or Department Head) and two (2) flawed postings<sup>11</sup>.

- **Hiring Fairs**

During the applicable period, eighteen (18) fairs were conducted via the Revised Hiring Fair process. Our office reviewed each hiring fair request (to ensure a compliant planning process) before approving each fair. Occasionally, we identified concerns regarding the planned process which HR was able to rectify prior to each fair. Additionally, we made ourselves available to provide guidance or support as issues or questions arose.

We monitored and/or audited implementation of various aspects of the fairs held in October and December.

- In October, we committed staff to in-person monitoring on the day of the fairs for three different departments. Specifically, we intermittently monitored 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 Employment Plan and related HR procedures. We are pleased to report that Hiring Fair onsite compliance has significantly improved since the 2022 implementation of the increase in Hiring Fair activity and that no significant violations were observed in-person during our periodic monitoring of these activities at the October fairs.

Following the fair date, we looked at materials in a sampling of fair folders to assess compliance with Consolidated Ranked List (CRL)<sup>12</sup> documentation requirements since that was a concern observed in previous fairs. There was only one requisition for which the department selected more candidates for hire than we had available PIDs to offer (thereby necessitating a ranking of the remaining recommended candidates), and the CRL for that requisition was not properly sorted or signed. Furthermore, none of the other CRL forms that we reviewed for that fair date were signed by HR or the hiring department. We also performed a quick, informal spot check of the Interview Evaluation Forms and found several examples on which required HR signatures are missing.

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<sup>11</sup> In one instance, a minimum qualification was not addressed in the disqualifying questions, and in the second instance the disqualifying question did not correspond completely with the applicable minimum qualification.

<sup>12</sup> The CRL is a listing of candidates chosen for hire after all PIDs/vacancies available on the day of the fair have been filled. The Plan contains specific guidelines regarding the order the candidates must be listed on this document, used by HR to make offers later during the life of the requisition as additional PIDs become available.

- In December, we did not monitor in-person, but completed a document review of nine (9) randomly selected fair requisitions and twenty-three (23) related DTH packets. Our review revealed inconsistencies in the recordkeeping regarding ranked lists, registration forms, and candidate materials. We met with the Hiring Fair stakeholders in HR to address these observations and the meetings were productive. The HR team was receptive, engaged and committed to improvement in these areas.

- **Accelerated Hiring.**

As detailed above, this office and the OIIG approved an accelerated hiring process late last summer that was piloted with nursing positions. In lieu of the standard mechanism HR utilizes to share approved hiring packets with the EPO, we agreed for the sake of efficiency to access the applicable documents directly (within HR's electronic drive). We reviewed a sampling of the records associated with this new process primarily to assess whether the way the documents are organized and maintained provides for access and auditability:

- The DTH forms are not signed, meaning that they are not formally approved and there is no verification of NPCC compliance.
- Candidate documents were not consistently uploaded. We observed several instances where candidate folders had very limited information (some folders contained no information whatsoever<sup>13</sup>) and failed to designate which PID or requisition number was used to facilitate the recommended hire.
- Candidate folders for internals were not designated as such to distinguish them from outside candidates, and application/applicable union-related forms to request the position were not included.

Based on the foregoing observations, we recommend that HR make slight modifications to its practices surrounding documentation and maintenance of documents for accelerated hiring. Those include:

- DTH forms need to be signed. The form, which is used for most hiring processes, may need to be tailored so that there is a version that is better suited to this hiring process.
- Document a standardized approach for maintaining records for this hiring process. This will ensure that staff understand expectations and that my staff and I know where to look for applicable documents. Some suggestions include:
  - Create a main folder for each approved CEO certification including a current, complete list of approved job titles, associated requisition numbers, and PIDs.
  - Create a subfolder for each requisition to store candidate folders (containing relevant documents for each candidate selected for hire).

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<sup>13</sup> We did a spot check of those and found through other sources some candidates with empty folders had been onboarded.

- Create a list of documents that must be maintained in each candidate folder depending upon the following categories: external/accepted offer, internal (union)/accepted offer, offer not accepted.
- Upload all hiring process document to the candidate folders on a timely basis.

- **Direct Appointments.**

The Direct Appointment hiring process allows our CEO broad discretion in appointing individuals to high level positions within the organization. To create a position eligible for hiring under this process, the prospective job description is presented to the OIIG for approval. In approving these positions, the OIIG looks to verify that the Plan's criteria for qualifying as a Direct Appointment position is met. Though there is broad discretion to fill these positions and an open competitive process is not required, appointees must meet all minimum qualifications contained in the applicable job description and may not be selected based upon political reasons or factors.

As with any other hiring process, the job description is approved before candidates may be considered, and a job description may not be modified with the qualifications of an anticipated applicant in mind<sup>14</sup>. Once a candidate has been identified for hire, HR reviews the application materials to verify that the selected candidate is eligible and sends notice of the selected candidate with all required documents (job description, application, resume, NPCC, etc.) to our office and the OIIG. This collection of documents, referred to as the Request to Hire (RTH) packet, provides the opportunity for both offices to evaluate the candidates' qualifications and raise any concerns before the selectee is hired.

Nineteen (19) packets were circulated, and because there is an expectation that the EPO and OIIG will raise any concerns within a short timeframe following receipt (so that the hiring process of eligible candidates may proceed without delay), we prioritize review immediately upon receipt. We identified the following non-compliance and/or administrative concerns:

- Two (2) instances of administrative errors in packets regarding identification of the Job Code for the applicable position that were quickly corrected.
- Two (2) instances in which the candidates' salaries upon hire, according to the paperwork submitted, did not align with HR's initial market study range as identified on the associated Grade 24 Salary forms. This is addressed further in the 'Grade 24' section of this report.
- Two (2) instances in which the EPO and OIIG raised objections to the hire of candidates selected for the positions. Both submissions raised concerns related to the candidates' eligibility for their respective positions. In both cases, the EPO and OIIG requested meetings with HR and the hiring manager and articulated our concerns about the proposed hires. Although the two were resolved in different ways, the concern identified in both related to problems arising following insufficient review of the applicable job description before initiating recruitment activity.

One instance was the subject of an EPO investigation that resulted in an Incident Report described in the 'Investigations' section above. We determined that HR discovered that the

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<sup>14</sup> The reason this requirement is built into the Plan is because of historic allegations that a mechanism used to hire unqualified, politically connected candidates was to modify job descriptions to match their qualifications.

selected candidate did not meet the minimum qualifications for the position. Rather than disqualify the candidate and search for a qualified candidate, HR modified the job description in a way that rendered the candidate eligible then sought to hire the candidate. Both the EPO and the OIIG objected to the request to hire the selected candidate because the Plan specifically prohibits making changes to job descriptions with a particular candidate's qualifications in mind. This office made the recommendations described above in the 'Investigations' section that were designed to remedy the violation and prevent recurrence.

We look forward to receiving drafts of the recommended HR standard operating procedure and job aides that will ensure that both HR and the hiring departments are aware of all applicable requirements going forward.

- **Medical Staff Appointments.**

This hiring process, which is in some ways similar to the process used for direct appointments, is used when our CEO and Board of Directors appoint a candidate to lead a department, division or serve as a section chair of the medical departments of the medical staff. Five (5) RTH packets were produced. We reviewed the packets produced and did not identify anything of concern.

- **Executive Assistant Appointments.**

This hiring process is also somewhat similar to that used for direct appointments. A main difference is that the hires are appointed by the executive they are hired to serve rather than our CEO. Another difference is that there is no requirement that the packet be circulated for review prior to completion of the hiring process. One (1) Executive Assistant packet was provided, and we did not identify anything of concern.

- **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 upon receipt (as opposed to after the hiring process) so that a determination may be made as to whether the recommendation is a Political Contact that must be reported to the OIIG. Only valid recommendations may be considered by our hiring teams. One (1) LOR was submitted in the applicable period, and it was not a Political Contact.

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

- **Demotion (#02.01.20).**

There were no demotions reported during the reporting period.

- **Discipline (02.15.15).**

We reviewed a sampling of sixty-three (63) discipline packets, including all seventeen (17) terminations executed during the applicable period. Repeated tardiness was the most frequently cited infraction, followed closely by employee conduct and failure to follow instructions.

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 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 sometime 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 (HIPAA).

Based upon our review, there were twenty-three (23) actions that included at least one administrative error and twenty (20) that included at least one substantive concern. The most frequent of the more substantive concerns was the departments' failure to provide HR with documents that should have been but may not have been generated in the process (10). There were also seven (7) instances of failing to secure the employee or a witness' signature at the time of issuance, six (6) instances of concerns with documentation of necessary approvals, and one (1) submission that included PHI. Though a team within HR conducts its own independent review of discipline submissions, these reviews may take place at different times. We shared our more significant findings with 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 reported the inclusion of PHI directly to Corporate Compliance and the matter was promptly addressed.

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

The Grade 24 policies govern how the salaries of new and vacant existing Grade 24 positions are set. An array of factors<sup>15</sup> (including review of relevant market data) are considered when setting the salaries for these high-level/highly skilled positions<sup>16</sup>. 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 for the individual hire.

In two (2) of the Direct Appointment packets submitted during the applicable period, we identified discrepancies between the two applicable salary-related forms warranting inquiry<sup>17</sup>. In both instances, the salaries for the candidates were outside the recommended range that had been approved. One was higher than the range and one was lower. Under the policy, when there is a

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<sup>15</sup> Factors include but are not limited to scope of the position, whether it is hard to fill, the level of the position, and the fiscal responsibility of the position.

<sup>16</sup> Grade 24 include those with titles bearing the designation of "Director," Senior Director," System Director," Executive Director," "Officer," or "Chief," etc. and those requiring an advanced degree, professional license and specialized skills.

<sup>17</sup> In the last report, we identified three (3) similar scenarios and therefore determined that a closer review of the documentation for the more recent inconsistencies was warranted.

discrepancy between Classification & Compensation's recommendation and a hire's salary determination, the CHRO is required to document the justification. Here, rather than following that requirement, HR generated *new* salary studies that resulted in recommended ranges that aligned with the salaries that had been assigned.

Market studies should be used to provide an objective footprint within which negotiation can take place between the organization and a candidate. Adopting a process of permitting new market studies to support salaries that have already been determined renders the process vulnerable to abuse. We recommend revision of the policy, implementational procedures and forms to ensure that the market analysis process used by Classification & Compensation and the final salary determination by HR leadership are proactive and transparent. By this, I mean that there should be guardrails around the process used for conducting market analysis, and both recommended ranges and final salary determinations must be supported by access to all source documents and documented analysis justifying/explaining the recommendations and final determinations.

- Adjustments.

The Salary Adjustment policy governs how salaries of these positions may be adjusted. Like the classification process, the process is initiated using a request form and an array of set factors are considered. The CHRO evaluates the request and makes a recommendation to the CEO for review and approval.

Ten (10) Grade 24 salary adjustments for the most recent past reporting period were produced for our review just as we were preparing to issue the last semi-annual report and I advised you that our analysis would be included in this report. We reviewed the information packets associated with each of the salary adjustments<sup>18</sup>. The salary adjustments took place regarding employees in three departments broken down as follows: (7), (2) and (1). We identified the following concerns in our review of the supporting materials associated with the adjustments:

- Some job descriptions considered in the process did not appear to be official (unsigned) and, in one case, an incomplete request form (used to record the requestor's identity and the request date) was used.
- While the requests were accompanied by market data and documentation specific to the individual employees for whom adjustments were proposed, there was no documented analysis of the relevant sources to explain how the final salary for each employee was determined.
  - The need for documented analysis became apparent when the salaries of several employees in the same department and title/job code were reviewed and adjusted at the same time utilizing the same market data, but their resulting salaries varied without documented explanation. The lack of transparency became even more pronounced where the same market data was used for another very similar title in the department and yielded a salary substantially beneath the others without explanation.

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<sup>18</sup> In addition to complying with this policy and CCH's Personnel Rules, the policy states that adjustments must comply with relevant Cook County ordinances and Budget Resolutions. We have not assessed compliance with these external authorities.



- One of the requests approved contained a Department Head's justification supported, in part, by observations of the subject employee's job performance. This policy was designed to provide for adjustments related to factors related to a change in duties, necessary credentials, or external market factors. Job performance is not identified in the policy among the criteria to be evaluated and this policy may not be utilized to facilitate performance related raises. We intend to discuss this interpretation of the policy with HR. To prevent recurrence of even the appearance that performance may have been considered, we recommend that the language of the policy be updated, consistent with the Reclassification Policy (another policy that provides the potential for salary adjustments unrelated to job performance), to specifically prohibit the consideration of performance.

Consistent with our findings regarding the process used to set salaries, we believe that additional transparency is required in the process for adjusting salaries. We recommend that the policy, implementational procedures and form should be revised to ensure proactive and transparent process.

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

These policies govern the processes by which employees may be assigned to interim roles (or to temporarily perform additional duties), qualify for and earn interim pay, 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.

In several past semi-annual reports, I raised concerns regarding the policies' compatibility, compliance with their requirements, and the level of transparency provided in the submissions. I also provided detailed analysis demonstrating the source of these concerns.

- In the applicable period, we received and reviewed forty-five (45) Interim Assignment packets in which we continued to identify the same types of concerns identified in previous reports (though reflecting a reduction in late requests from user departments). Several of the requests sought to significantly backdate the onset of interim pay without explanation, and several involved the extension of longstanding assignments (exceeding 12 months) without providing sufficient transparency relative to justifying the ongoing need (e.g., a delay in the hiring process). While acknowledging that the policy permits three-month extensions beyond the original six-month period, we have advocated that transparency requires some explanation where these appointments long exceed the original period specified in the policy.

In several past reports, I have recommended a review of the policies (and related forms) so that they may be modified to address the compatibility concerns and to provide greater transparency. In my last report, I shared that HR had agreed with the need to modify the policies but noted that it did not appear that the updates would be made soon (since HR expressed the need to first hire a new Legal employee to manage the process). The policies have not been updated to date, but a recent update HR provided us suggests that current circumstances are such that necessary changes to these policies will soon be addressed.

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

There were no layoffs implemented in the months covered by this report. However, our office received notice during this reporting period of layoffs having taken place in the preceding reporting period. Specifically, three (3) employees in grant funded positions were designated for layoff in June of 2023 due to the expiration of grant funds. We reviewed the documentation associated with each layoff and did not identify anything of concern. We noted that all three (3) employees remained with CCH via lateral movement and, in one case, movement into a previously vacant position.

- **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).

No reclassification determinations were made in the reporting period. In a recent past semi-annual report, we identified the following types of concerns in Reclassification determination submissions:

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

We reported that we had discussed these observations with the Classification and Compensation supervisor and learned that the reclassification process has been identified among the priorities to be addressed by an optimization consultant team. Our wish list for optimization included:

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

This recommendation is pending. I will provide an update in the next report.

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

This policy governs the retention and performance of those contracted to perform recruitment functions. During the applicable period, one (1) new third-party contract was executed and implemented. The contract is compliant with the policy's requirement, and we are in the process of working with HR to secure NPCCs and ensure that those serving under the contracts are properly trained for their designated roles.

In the last report, I advised you that our compliance review for that period was limited to evaluating whether the individuals performing recruitment functions under this policy had received all required Plan training. There were nine (9) contractors we were uncertain of as that time and I

committed to providing you an update in this report. HR very recently confirmed that they had not completed all required training. They have since been trained.

In another recent past report, following a review of recent third-party provider contracts and other related documentation, we identified the following concerns:

- There was no central repository for the contracts and other policy-related documents and data.
- Department head requests and CHRO approvals were not always documented.
- Not all contracts contained language specifically requiring the contractors to comply with the Plan, Personnel Rules and this policy and refrain from engaging in any activities based on any political reasons or factors.<sup>19</sup>
- Some required NPCCs may not have been executed.
- There was no established process for tracking individuals performing under each contract (to be used for various purposes, including verification of training status, etc.).

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

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

HR's tracking has improved significantly since this issue was identified, but additional work remains. Both my office and HR have had multiple competing priorities but have committed to working together on the remaining improvements as time and resources permit. I will provide an update in the next report.

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

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

NPCCs, circulated to two hundred sixty-eight (268) department heads systemwide, were due most recently on December 15, 2023. As of the drafting of this report, twelve (12) have not fully complied. We will continue our follow-up efforts.

We did not review the other associated documentation associated with these policies for the applicable reporting period. We will identify one or both for projects to be completed in the current reporting period. I will provide an update in the next semi-annual report.

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<sup>19</sup> I advised previously that I had worked with HR and the Legal Department to develop standard language to be used in these contracts going forward.

- **Transfers (#02.01.12)**

In our last semi-annual report, we advised that transfers of union employees are common but had not previously been reported to the EPO as required by the policy. We advised you further that HR had acknowledged its obligation in this regard and had indicated it would begin reporting all transfers to the EPO per the policy<sup>20</sup>.

HR reported three (3) transfers of union employees reported in the applicable period. Though the policy requires that managers detail the “specific reasons” for each transfer, the documentation provided made identical generalized references to “[v]arious factors, including shifts and current seating assignments.” As a result, management failed to provide adequate transparency into its decision-making concerning which employees it chose to transfer. The documentation additionally failed to contain required NPCCs from employees who were the subject of the transfer.

To prevent recurrence, we intend to emphasize the need for the inclusion of clear and employee-specific selection criteria in upcoming Supplemental Policies training sessions and recommend that HR likewise stress to managers the importance of both documenting specific justifications for transfers and ensuring that all required NPCCs have been executed.

### **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 or a resignation in lieu of termination) 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 re-hired at CCH for a period of five (5) years.

The CHRO reviewed terminations and resignations/retirements made in lieu of termination to evaluate whether inclusion on the List was warranted several times during the applicable period. This resulted in five (5) updates that were circulated<sup>21</sup>.

- Twenty-three (23) individuals were added.
- Seventeen (17) individuals were removed.

Under the Plan, HR is required to provide advance notice to individuals who have been identified for inclusion on the List. For this period, there were six (6) instances in which these letters were not provided in advance as required<sup>22</sup>.

The Plan allows those added to the List to appeal the determination after receiving notice of their inclusion on the List and the CHRO grants or denies. Three (3) appeals were submitted for additions made during the applicable period, and all remain pending as of the drafting of this report. I will provide an update in the next report.

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<sup>20</sup> This decision is consistent with my office’s stated intention to work with leadership to improve transparency across all employment actions involving union employees. The Plan and supplemental policies requirements are mandatory unless an applicable CBA contains a conflicting requirement. Therefore, when HR or a departmental leader deviate from the Plan or applicable supplemental policy to honor a CBA, the superseding CBA provision must be identified in the applicable Plan and policy forms.

<sup>21</sup> Updates are circulated to the Bureau of Human Resources, CCH Recruitment, the OIIG, and the EPO.

<sup>22</sup> We addressed this with HR and ensured that letters would be sent.

## **WEBSITE**

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

- **Quarterly Reports.**

I previously reported that the reports are missing data required by the Plan. In the last semi-annual report, I advised that HR agreed to update the report template and include all required data starting with the second quarter of 2024.

- While HR is not there yet, a significant amount of effort has been made toward this goal. This is more involved (and therefore more time-consuming than initially anticipated) as system modifications are necessary to provide for automated reporting. This remains a priority and we expect resolution in the coming months. I will provide an update in the next report.

- **Current Job Descriptions.**

The Plan requires CCH's job descriptions to posted on the website and available to the public. I previously reported that while some job descriptions were posted on the website, most or all appeared to be outdated. I also previously reported that HR had advised the EPO that contracted support would be leveraged to address this issue.

- The current job descriptions have not been uploaded to-date, but there has been some progress in that the outdated job descriptions have been removed. There is a notice on the website (accessible by utilizing the link to the job descriptions) that we are updating our job descriptions and to check back. Though I understand that HR intends to address this, it appears that this initiative may take some time yet<sup>23</sup>. Because the job descriptions need to be accessible to the public, I recommend that the website notice be updated to include guidance on how to request job descriptions until they are available for direct access on the website.

- **Human Resources Page.**

I previously reported that Employment Plan-related content included on the HR page was not current, user friendly, that the Employment Plan Office did not have a page, and that there was no reference or link to Plan information on the Careers page (accessed by individuals interested in applying for positions). Because the website is an important source of the transparency required by the Plan, I committed to working with HR and other leaders to provide content for an EPO page and to give input on content updates for the HR page.

- Significant website updates have been made, including the addition of a separate, user-friendly page for the Employment Plan Office. The majority of the Employment Plan information on HR's page remains the same. It is my understanding that there are plans to update that page. In the meantime, I recommend adding a link to the EPO page in the section that currently addresses the Employment Plan.

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<sup>23</sup> We confirmed that HR's efforts to satisfy this requirement are ongoing, but I am not able to provide an estimated date of completion at this point.

## **NEW & UPCOMING**

- **Employment Plan Updates.**

The Employment Plan will be updated to include documentation of all process modifications (temporary and permanent) approved since 2022. In addition, a comprehensive Employment Plan review will be completed this year with the goal of developing new and/or modifying existing processes, procedures and systems that will reduce time-to-fill while also honoring the principles of the Plan, applicable CBAs, and all other applicable authorities.

- **Supplemental Policies.**

Progress will be made on updates to the Supplemental Policies (and related forms), ideally prioritizing Interim Assignments, Interim Pay, and Grade 24 policies.

- **Training.**

Updates and enhancements to all existing Plan trainings and related job aides will be prioritized as the Plan and Supplemental Policies are modified.

## **CONCLUSION**

We have work ahead of us, but I am confident that we 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 September.

Sincerely,

Kimberly Craft

*Kimberly Craft*

EMPLOYMENT PLAN OFFICER

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