

Minutes of the Meeting of the Human Resources Committee of the Board of Directors of the Cook County Health and Hospitals System (CCHHS) held Friday, June 19, 2020 at the hour of 9:00 A.M. This meeting was held by remote means only, in compliance with the Governor's Executive Orders 2020-7 and 2020-39, and the Governor's Disaster Proclamation issued on May 29, 2020.

I. Attendance/Call to Order

Chair Richardson-Lowry called the meeting to order.

Present: Chair Mary B. Richardson-Lowry and Directors Mary Driscoll, RN, MPH; Heather M. Prendergast, MD, MS, MPH; and Sidney A. Thomas, MSW (3)

Board Chair M. Hill Hammock (ex-officio) and Directors Ada Mary Gugenheim and Otis L. Story, Sr.

Absent: None (0)

Additional attendees and/or presenters were:

Debra D. Carey – Interim Chief Executive Officer

Deborah Santana – Secretary to the Board

Jeff McCutchan –General Counsel

Barbara Pryor –Chief Human Resources Officer

The next meeting of the Committee will be held on Friday, September 18, 2020 at 11:00 A.M.

II. Electronically Submitted Public Speaker Testimony (Attachment #1)

The Secretary read the public speaker testimony submitted from the following individual into the record:

1. Charles Smith CCH Employee

III. Action Items

A. Minutes of the Human Resources Committee Special Meeting of May 27, 2020

Director Thomas, seconded by Director Prendergast, moved to accept the minutes of the Special Meeting of the Human Resources Committee of May 27, 2020. THE MOTION CARRIED UNANIMOUSLY.

B. Any items listed under Sections III and V

IV. Report from Chief Human Resources Officer (Attachment #2)

Barbara Pryor, Chief Human Resources Officer, reviewed the report, which included information on the following subjects:

- Covid-19 Response – Update
- The Joint Commission – Cook County Health Accreditation: Human Resources Accreditation Requirements

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Requests/Follow-up:

There were no requests for follow-up.

Cook County Health and Hospitals System
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June 19, 2020

ATTACHMENT #1

Electronic Testimonial Submission

No Reply - Cook County Health <WP-Notifications@cookcountyhealth.org>

Tue 6/16/2020 12:16 PM

To: Santana, Debbie <dsantana@cookcountyhhs.org>

Type of Message

Message

Message

Please include for Public Comment for Committee meeting on 6/19/2020.

Good morning Board Members and thank you for your time. As an employee of Cook County Health, the last several months have been challenging, both physically and emotionally. It has certainly served as a reminder of the importance of the work this organization provides to the community. I am proud that we were prepared to protect employees and take care of patients, much better than other many other hospitals.

What's surprising now is the sudden change. That early concern for the safety of employees and care for patients has been replaced with a single-minded effort to get everyone "back to work." Respectfully, we have been working. Hard. Everyone of my co-workers has given maximum effort toward responding to COVID-19. Nurses, Medical Assistants, and Health Advocates have work tirelessly, often outside of their regular areas, and at great personal risk. Office staff learned new technologies and setup offices in their homes to make sure work continued. COVID complicated our work in so many ways and required immediate response. Work weeks have stretched-- 50, 60 hours are regular and normal now. And, we are happy to do it as our contribution toward the mission.

Why then are you so focused on making us return to the office before it's safe, and without regard to whether our work is getting done? Distancing is impossible because offices and work spaces are very close. With four to an elevator, filling even a single floor will take over an hour. Many leaders are already blatantly ignoring universal masking requirements and scheduling in-person team meetings. It's hurtful to us employees that you do not find the work that we did over last 3 month valuable--that it's more important to you that we show up rather than allowing us to demonstrate that we can be both productive AND safe.

We all recognize that some work requires you to show up and be present. That work needs to be done, and that should be how and whether we decide fill the halls. This meeting demonstrates that this Board doesn't feel like in-person gatherings are necessary to get work done. And, I hope you agree that getting people "back to work," just to say you did it, is an unnecessary risk.

Name

Charles Smith

Address

1950 W Polk Street
Chicago, Illinois 60611
United States
[Map It](#)

Phone

(312) 864-8200

Phone Type

Work

Email

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ATTACHMENT #2

Human Resources Metrics Cook County Health HR Committee

Barbara Pryor
Chief Human Resources Officer

June 19, 2020



COOK COUNTY
HEALTH

COVID 19 Response



Update



COOK COUNTY
HEALTH

COVID-19 Response

HR Update

Employee Assistance Resources

- ❑ Magellan Healthcare / CCH Behavioral Health / Psych
 - ❖ Dealing with anxiety related to outbreak
 - ❖ Information Provided:
 - Crisis Communication
 - Mind Your Mental Health
 - Health and Wellness Library

Return to Work Task Force

- ❑ Safety Measures
 - Universal Masking
 - Plexiglass installation in patient facing areas
 - Increased cleaning of high touch surfaces
 - Placement of Physical Distance Markers
 - Rotation of staff schedules, shifts, start times
- ❑ Phase I – June 15th
 - Return of Employees with Private Offices/ Workspaces
- ❑ Phase II – July 15th
 - Balance of Staff



The Joint Commission

Cook County Health Accreditation



COOK COUNTY
HEALTH



Human Resources Accreditation Requirements

Staff Standards

The accreditation standards address how Human Resources verifies that its doctors, nurses, and other staff are qualified and competent:

Focus Area	Standard Label	Standard Text
Qualifications	HR.01.01.01	The hospital defines staff qualifications specific to their job responsibilities.
	HR.01.02.07	The hospital determines how staff function within the organization.
Staffing	HR.01.02.05	The hospital has the necessary staff to support the care, treatment, and services it provides.
Orientation	HR.01.04.01	The hospital provides orientation to staff.
Competence	HR.01.06.01	Staff are competent to perform their responsibilities
Evaluation of Performance	HR.01.07.01	The hospital evaluates staff performance.
Training & Education	HR.01.05.03	Staff participate in ongoing education and training.

Accreditation

Why Become Accredited ?

Accreditation demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

Internal Drivers

- Ongoing Performance Improvement
 - ✓ Address deficiencies that take up valuable staff time that could be spent caring for patients.
- Build a solid quality foundation
 - ✓ Regulations
 - ✓ Licensure
 - ✓ Certifications

External Drivers

- A majority of US state governments recognize Joint Commission accreditation as a condition of licensure for the receipt of Medicaid and Medicare reimbursements
- Become a High Reliability Organization
- Recognition
- Competitive Advantage
 - ✓ Quality Check Website and Reports

The Survey Process

What to expect?

- All regular Joint Commission accreditation surveys are unannounced.
- Joint Commission surveyors visit accredited health care organizations to evaluate standards of compliance a minimum of:
 - Once every thirty-six (36) months and,
 - Once every two (2) years for laboratories.
- Surveyors are highly trained experts who are:
 - Doctors, nurses, hospital administrators, laboratory medical technologists, and other health care professionals.
 - We generally expect at least two (2) surveyors over two days.
- During the survey, surveyors select employee files randomly and use their employee file as a roadmap to evaluate standards compliance.

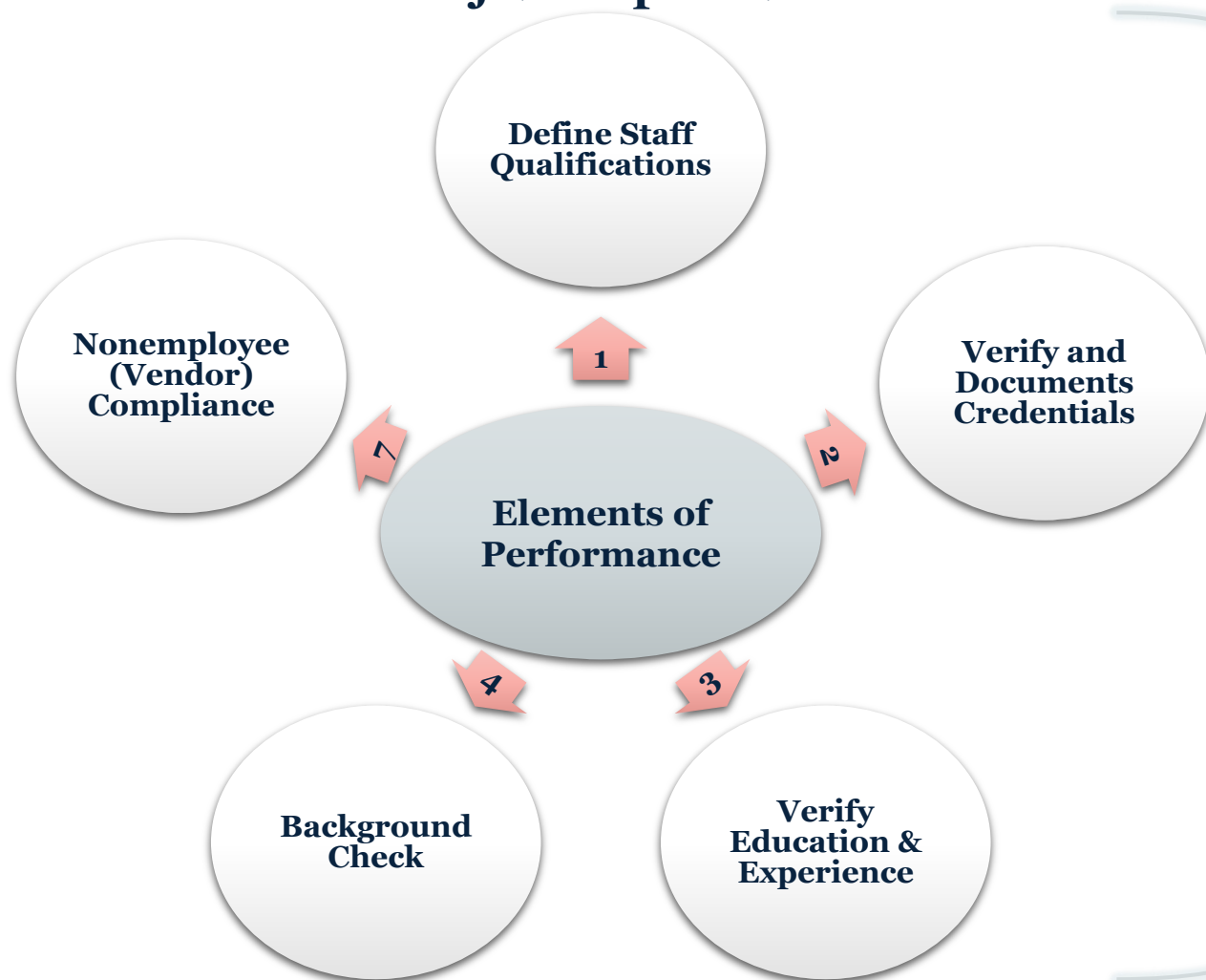
Human Resources Accreditation Requirements

Elements of Performance: CCH defines staff Qualifications



HR.01.01.01

CCH defines staff qualifications specific to their job responsibilities.



HR.01.02.07

CCH determines how staff function within the organization.



Human Resources Accreditation Requirements

Elements of Performance: CCH HR Verification

HR.01.02.05



CCH has the necessary staff to support the care, treatment, and services it provides.

- CCH verify staff qualifications & Licensure

Element of Performance 1

- Primary Source Verification of license, certification, or registration.

Element of Performance 2

- Primary Source Verification when required by hospital but not law and regulation

Primary Source Verification (PSV)

What is Primary Source Verification?

The Joint Commission defines it as “verification of an individual practitioner’s reported qualifications by the original source or approved agent of that source.”

Why is it important?

These requirements help safeguard the general public against individuals practicing medicine who are illegitimate and unqualified.



COOK COUNTY
HEALTH

Human Resources Accreditation Requirements

Elements of Performance: CCH provides orientation to staff.

HR.01.04.01



The hospital orients its staff to the key safety content before staff provides care, treatment, and or services. Completion of this orientation is documented.

Element of Performance 1

- Orients staff to key safety content before staff provides care, treatment, or services

Element of Performance 3

- Relevant policies and procedures
- Specific job duties, including infection prevention and control and assessing and managing pain
- Sensitivity to cultural diversity
- Patient rights, including ethical aspects of care
- Documented

Human Resources- New Hire

- ✓ All staff should have attended a Human Resource Orientation Session
- ✓ Completion of training requirements in LMS **within 60 days** of start date

Department- Promotions/ Transfers

- ✓ All staff should be trained and orientated on the expectations outlined within their Job description
- ✓ All staff should be trained and assessed on departmental specific competencies; these assessments should be documented
- ✓ A Departmental Orientation checklist should be completed **within 45 days** from the date of promotion/transfer into a new position and sent to Human Resources



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Human Resources Accreditation Requirements

Elements of Performance: CCH staff are competent to perform their responsibilities



HR.01.06.01

Competencies are the Staff's proven ability to do their job successfully or efficiently

Element of Performance 1

- Defines the competencies for staff who provide patient care, treatment, or services

Element of Performance 3

- Competency assessed by qualified staff

Element of Performance 5

- Competence initially assessed at orientation

Element of Performance 6

- Competence assessed and documented at least once every three years, or per policy

- ✓ Managers should review the job descriptions with their team to ensure there is an understanding of expectation of their responsibilities



Human Resources Accreditation Requirements

Elements of Performance: CCH management evaluates staff performance.

HR.01.07.01



The hospital evaluates staff based on performance expectations that reflect their job responsibilities.

Element of Performance 1

- Evaluates staff based on their job responsibilities.

Element of Performance 2

- Evaluates staff performance at least once every three years, or per policy.

Element of Performance 5

- Organization reviews nonemployee individual's competencies and performance at the same frequency as individuals employed by the organization.

✓ All staff members must receive a written performance evaluation as defined by CCH Personnel rules



Joint Commission Readiness

Human Resources Employee File Preparedness

Interoffice Joint Commission Audit form was created as a check off list to ensure compliance of employee files.



- ✓ Job Description
- ✓ Transcripts / Educational Requirements
- ✓ Applicable Licenses
- ✓ Pre-employment Screening Verification
- ✓ New Hire Hospital Orientation Acknowledgement Form
- ✓ Sanctions Email Verification

Employee Name:		COOK COUNTY HEALTH	
Supervisor Name:			
Department:			
Date in Current Role:			
Job Code:			
Job Title:			
Employee ID:		Operations posts list of files not received 30 days after orientation.	
Department of Human Resources - How To Organize The Recruiting / Personnel File			
CURRENT JOB DESCRIPTION DRIVES NECESSARY CREDENTIALS			
Verified ✓ or N/A	SECTION 1	Verified ✓ or N/A	SUPPLEMENTAL FILE
	I-9 Form Pulled		Employee Health Registration Long Form
	New Hire Reporting Form Pulled		Veteran's Form
	Education Incentive White Copy Pulled		Statement Concerning Employment Not Covered By Social Security
	GOA (Grant of Authority)*		DCFS Acknowledgement of Mandated Reported Status
	EBS Screen Shot		Applicant Exclusion from Federal Health Care Program
	DTH*		New Hire Reporting Form
	RTH		EEOC Form
	Application		EHS Drug Screen
	Transcripts / Educational Requirements		EHS Clearance to Work
	PAF		Conditional Employment Affidavit
	Applicable Licenses		Pre-employment Drug Testing Policy Acknowledgement
	Shakman Forms / Interviewer Notes		
	PSV (Pre-employment Screening Verification)		
	Job Description		
	Signed Offer Letter		
	Finger Print Form		
	Credentialing		
	Confidentiality Agreement		
	New Hire Hospital Orientation Acknowledgement Form		
	Employee Emergency Information		
SIGNATURE:		SIGNATURE:	
	SECTION 2 (Chronological Order)		SECTION 3
	Promotion Paperwork		Updated License
	Transfer for Work		ACLS/PALS/CPR
	LAF (Leave Action Form)		Certifications
	SAF (Separation Action Form)		Safety
	Supplemental Orientation Acknowledgement Form		LMS/Annual Training
			Department Orientation Form
			Continuing Education Requirements
	SECTION 4		SECTION 5
	Performance Appraisal Every 3 years		Discipline
	Competencies		Section 6
			Verification of Employment
			Deductions, Benefits, Accruals Pink Copy

YELLOW indicates date sensitive materials for auditing and placed in chronological order

- ✓ Performance Appraisal Every 3 years
- ✓ Competencies

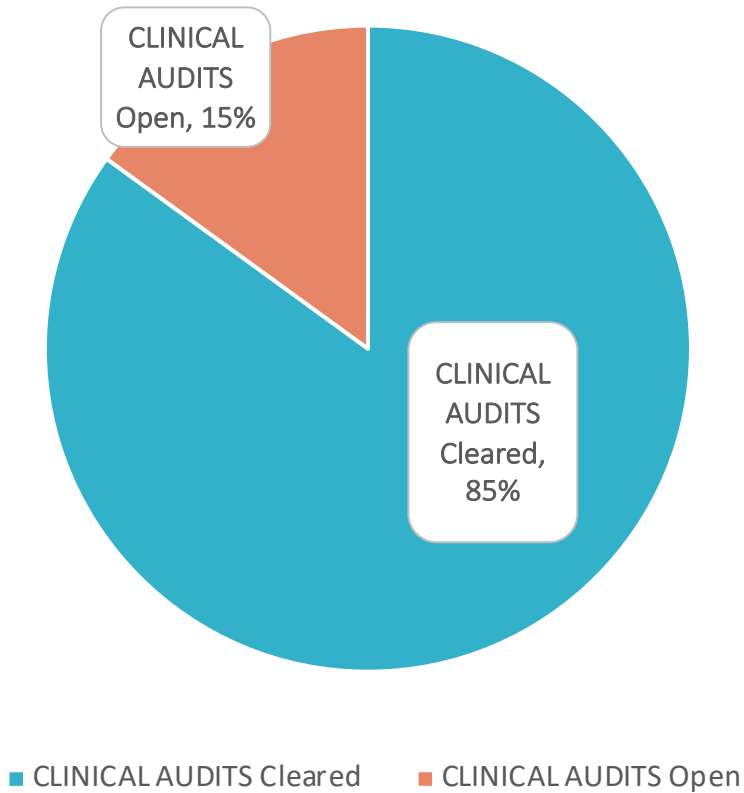
- ✓ Updated License
- ✓ ACLS/PALS/CPR
- ✓ Certifications
- ✓ LMS/Annual Training
- ✓ Department Orientation Form

Joint Commission Readiness

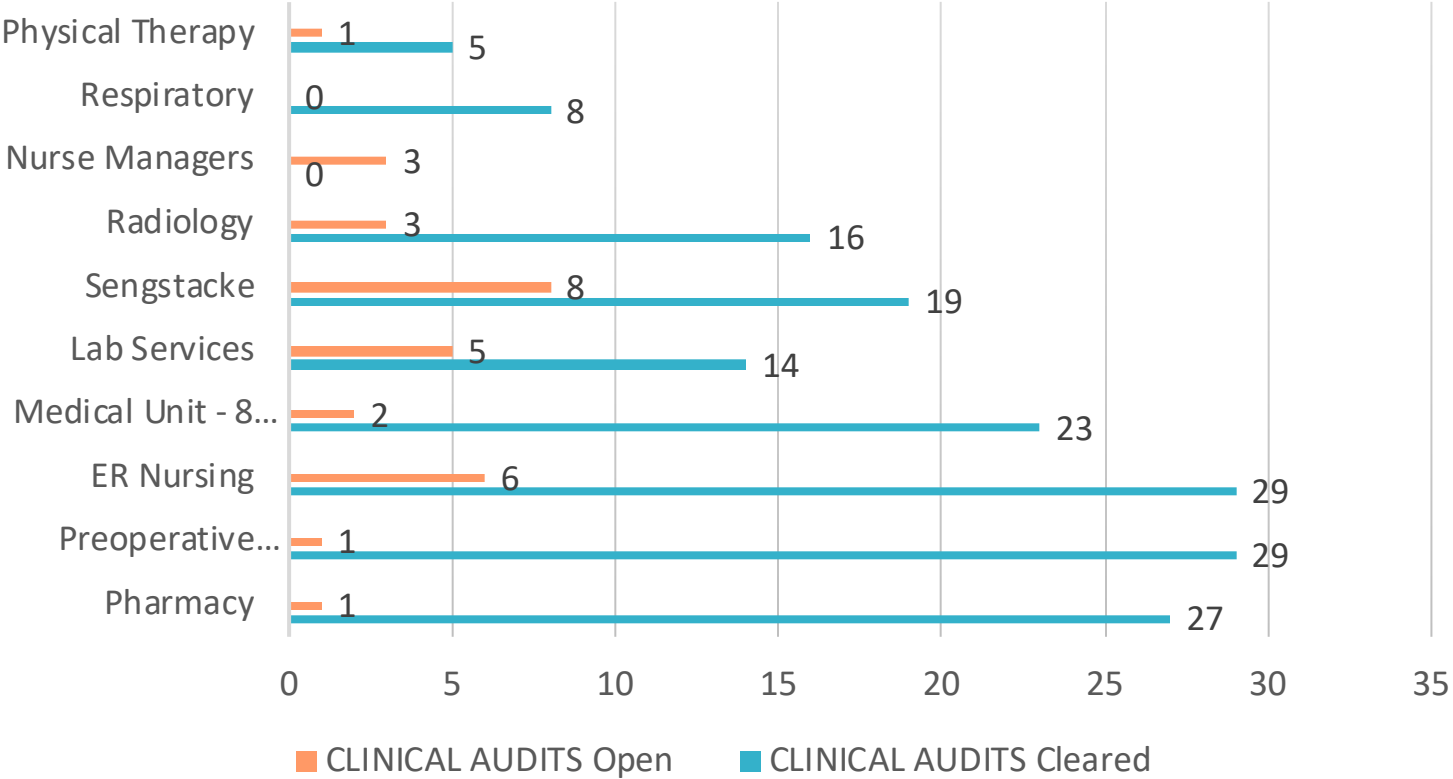
Provident – Metrics



PERCENTAGE OF COMPLIANCE



DEPARTMENTAL REVIEW



Metrics



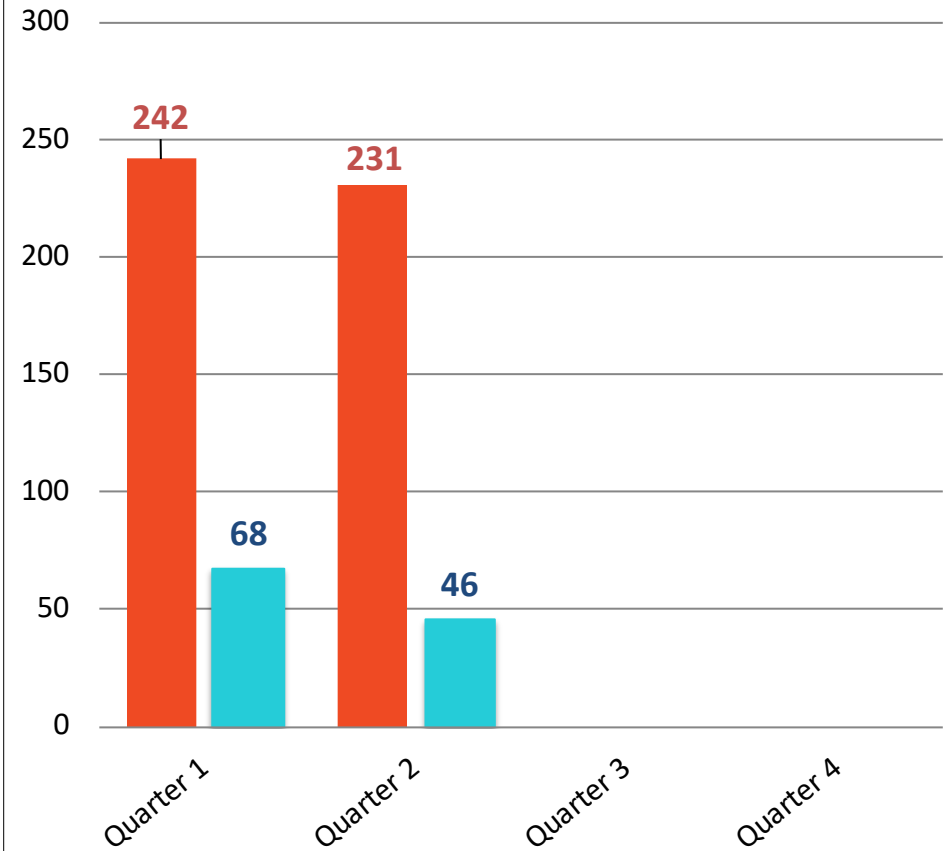
COOK COUNTY
HEALTH

FY 2020 CCH HR Activity Report

Thru 05/31/2020

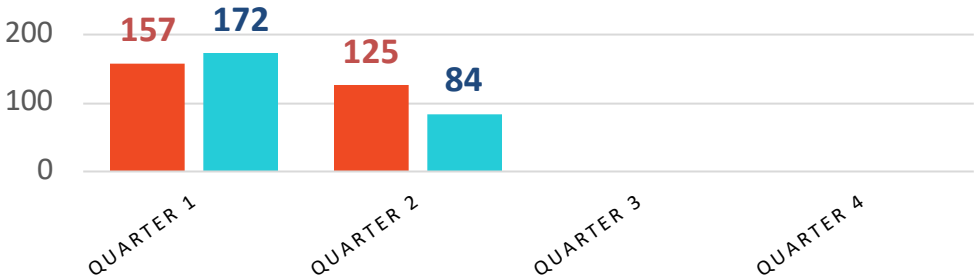
FILLED POSITIONS

■ 2019 Filled (473) | Externals (319)
■ 2020 Filled (114) | Externals (83)

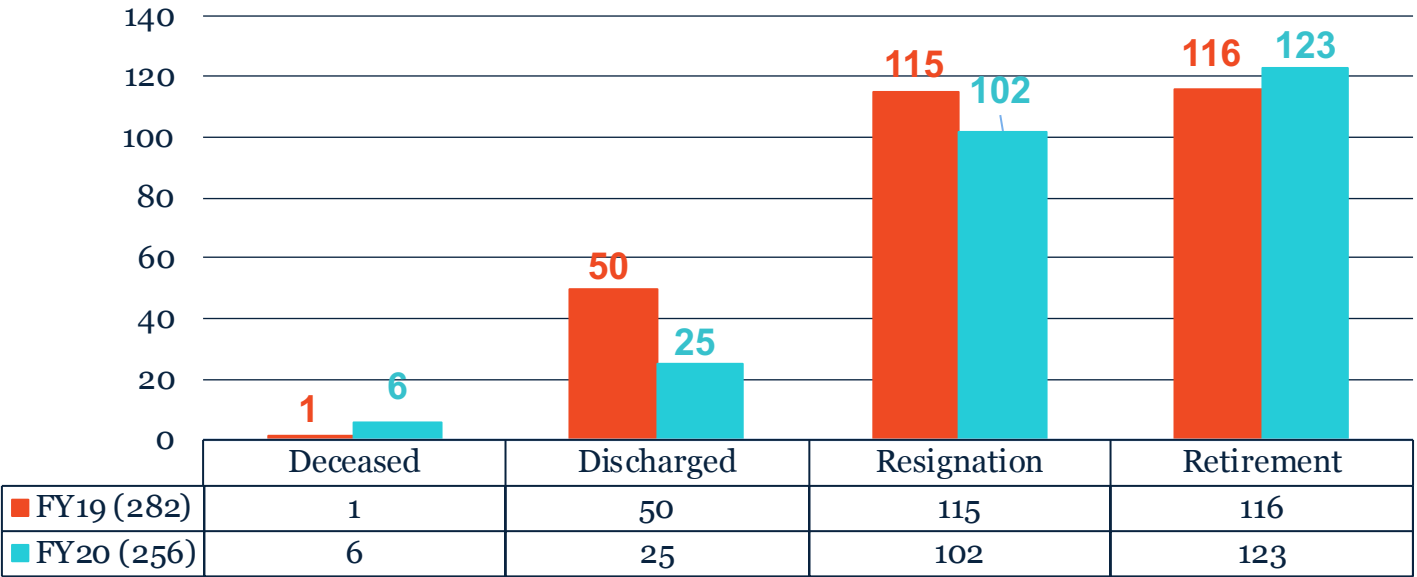
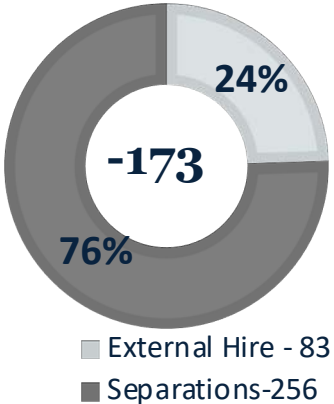


SEPARATIONS

■ 2019 Separations (282) ■ 2020 Separations (256)



NET

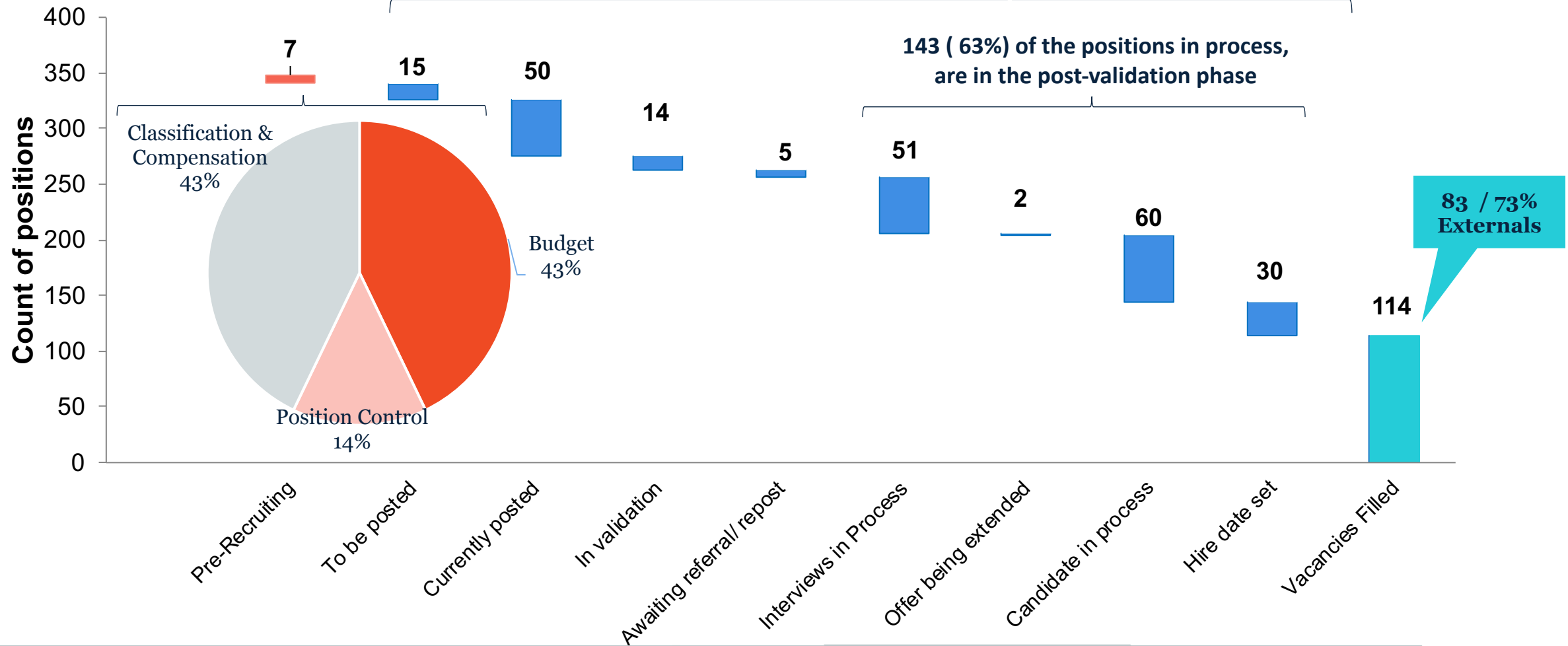


Cook County Health HR Activity Report – Hiring Snapshot

Thru 05/31/2020

Clinical Positions	157	69%
Non-Clinical Positions	70	31%

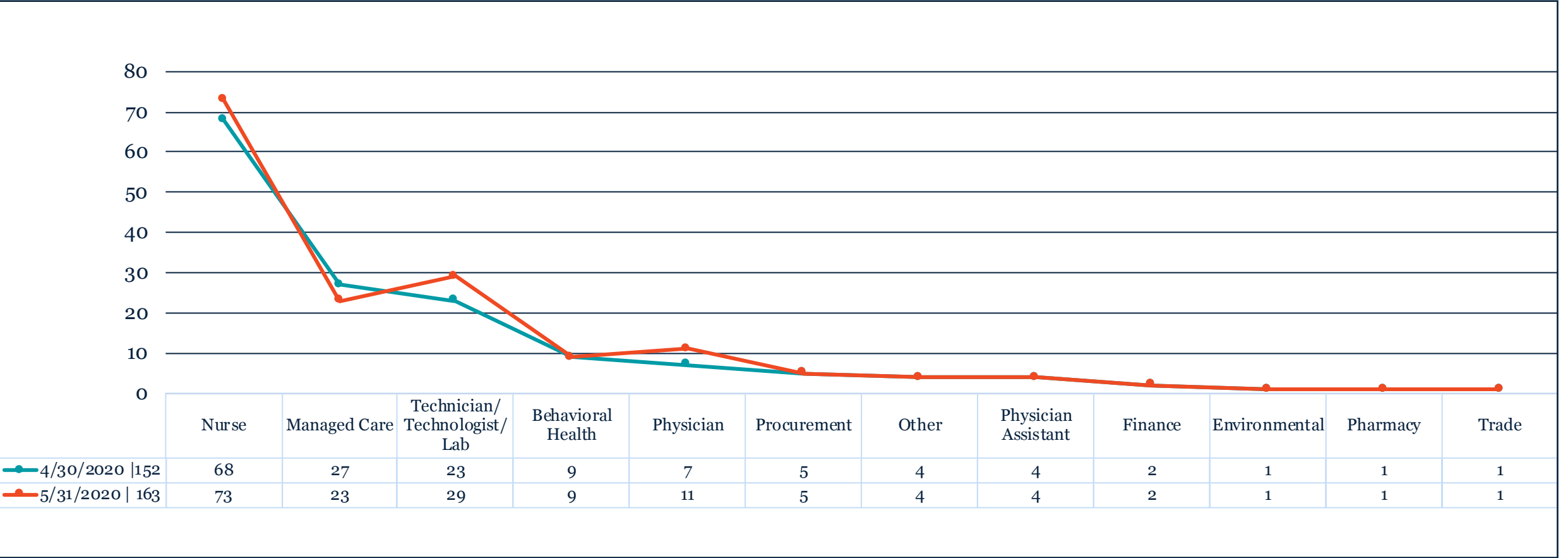
227 Positions in Recruitment



**COOK COUNTY
HEALTH**

Hiring Plan

Of the 227 positions in Human Resources, 163 were approved by the Department of Budget & Management Services:

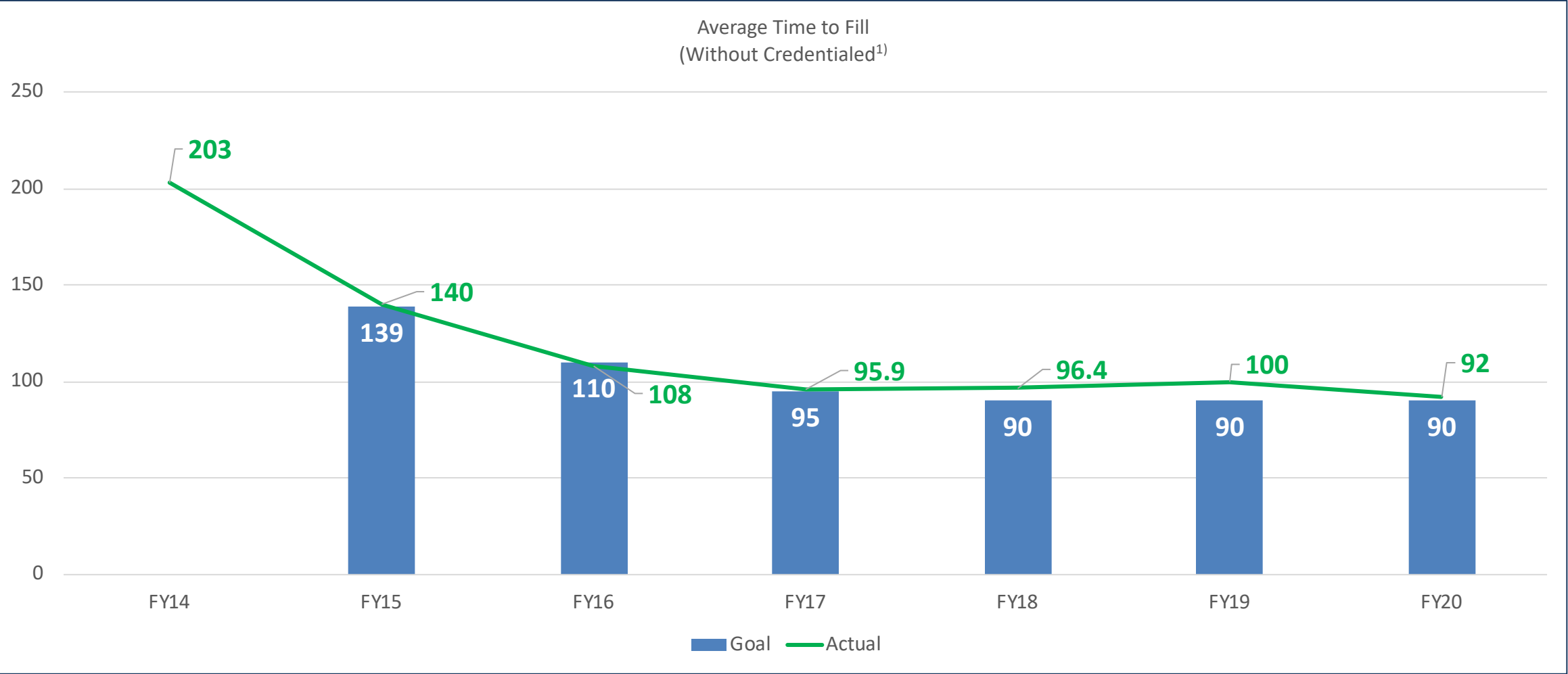


Nursing Positions Note:

- **22 RTHs - Shift Bid/Lateral Transfers**
- **73 RTHs - In Recruitment Cycle**
- **10 RTHs - Filled**
- 105 RTHs Approved**

Cook County Health HR Activity Report

Improve/Reduce Average Time to Hire*



¹Credentialed Positions: Physicians, Psychologist, Physician Assistant I and Advanced Practice Nurses.

Thank you.



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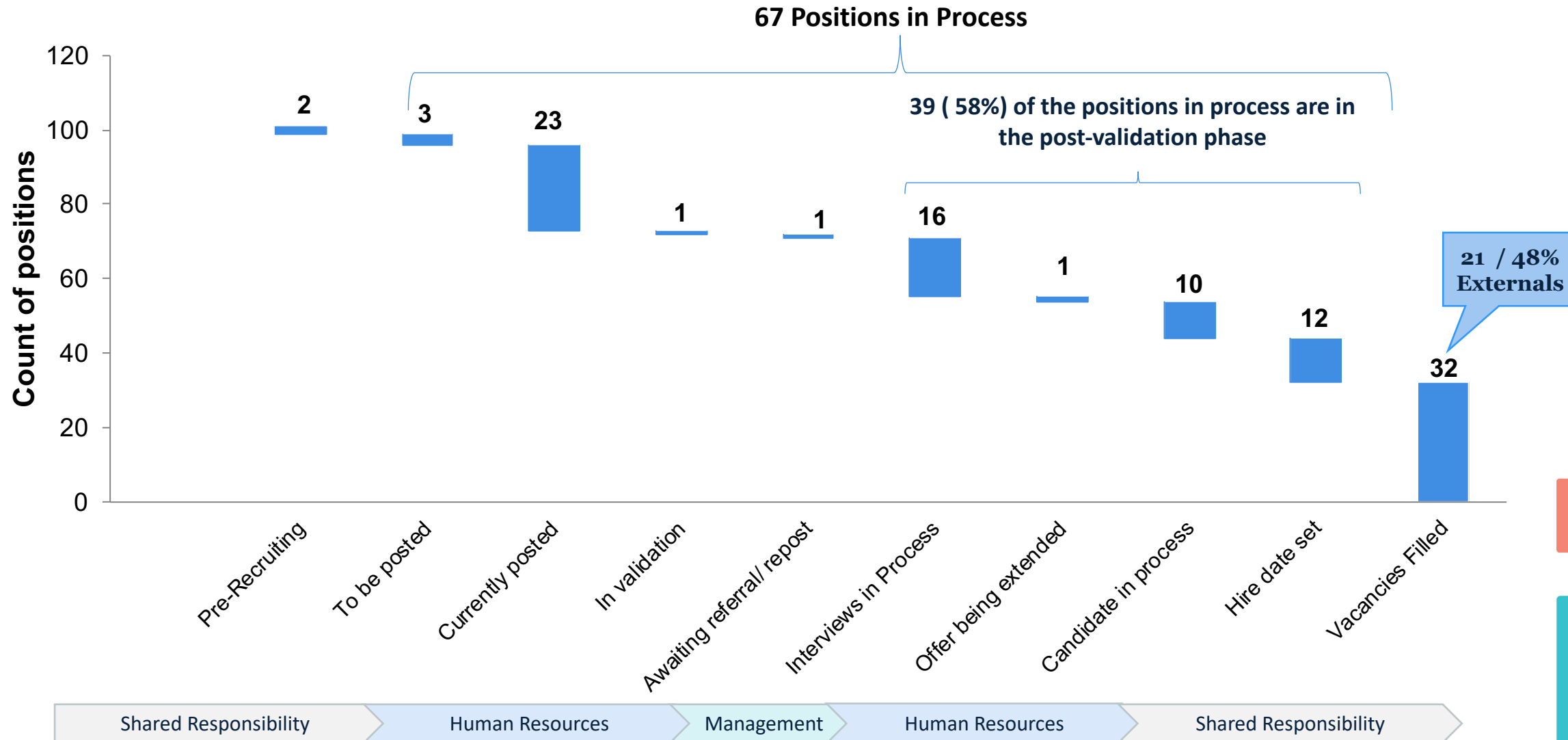
Appendix



COOK COUNTY
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Cook County Health HR Activity Report Nursing Hiring: CNI, CNII

Thru 05/31/2020



Cook County Health HR Activity Report – Revenue Cycle

Thru 05/31/2020
5 Positions in process

