Minutes of the meeting of the Human Resources Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, October 14, 2010 at the hour of 7:30 A.M. at John H. Stroger, Jr. Hospital of Cook County, 1901 W. Harrison Street, in the fifth floor conference room, Chicago, Illinois.

I. **Attendance/Call to Order**

Acting Chairman Golden called the meeting to order at approximately 7:45 A.M. A quorum was not present; however, the Committee began to receive information. A quorum was reached when Chairman Zopp assumed the Chair at approximately 7:50 A.M.; the Committee began to consider the items presented.

Present: Chairman Andrea L. Zopp and Directors Quin R. Golden and Sister Sheila Lyne, RSM (3)

Director Hon. Jerry Butler

Absent: Directors David Carvalho and Jorge Ramirez (2)

Additional attendees and/or presenters were:

- Michael Ayres
- Patrick T. Driscoll, Jr.
- William T. Foley
- Patricia Kelleher, MD
- Elizabeth Reidy
- Deborah Santana
- Deborah Tate
- Anthony J. Tedeschi, MD, MPH, MBA

II. **Public Speakers**

Chairman Zopp asked the Secretary to call upon the registered speakers.

The Secretary called upon the following registered public speaker:

1. George Blakemore Concerned Citizen

III. **Report from System Director of Human Resources** (Attachment #1)

Deborah Tate, System Director of Human Resources, provided an update on the following activities: implementation of the Taleo System; 100 in 100 – A Targeted Nursing Recruitment Campaign; and update on the Personnel Rules.

During the discussion of the update on the Taleo System, Director Golden inquired whether there would be an additional cost associated with the contract extension, or whether the contract was based upon deliverables. Ms. Tate responded that she was unsure if there was a cost associated with the extension, but indicated that the Taleo contract is with the County, not with the System.

IV. **Recommendations, Discussion/Information Items**

A. **Leadership Report – Organizational Re-design** (Attachment #2)

William T. Foley, Chief Executive Officer of the Cook County Health and Hospitals System, presented a report on the System’s organizational re-design that has taken place over the past eighteen months. He noted that he will provide more information at a later date on how the organizational re-design impacts all levels of the organization. Additionally, information on the organizational structures at the affiliate level will be provided.
IV. Recommendations, Discussion/Information Items

A. Leadership Report – Organizational Re-design (continued)

Director Lyne inquired regarding the use of consultants. Mr. Foley indicated that, in terms of consulting services, the following are companies providing the majority of consulting services at the System: PricewaterhouseCoopers - providing services as part of the performance improvement initiative, which includes Revenue Cycle activities; ACS - providing services as a partial outsourcing of information technology services, and some services relating to the Lawson System; and Health Management Associates (HMA) - providing consulting services relating to Medicaid strategies. He noted that a request for proposals (RFP) has been issued for the partial outsourcing of information technology services; these services are meant to supplement staffing, as many of these types of positions are difficult to recruit.

The Committee discussed some of the positions listed within the organization, with regard to functions and whether they were expected to be needed only for a specific period, or whether they were expected to be permanent. Director Golden inquired regarding the position title of System Director of Human Resources; she asked whether this position should instead be titled Chief of Human Resources. Mr. Foley responded that he has discussed the subject with Ms. Tate; the title that would be consistent with the industry would be Chief Human Resources Officer.

With regard to the performance improvement initiative activities of PricewaterhouseCoopers, Director Golden asked how ownership is shown for each of the initiatives. Mr. Foley responded that he can provide an organizational structure for the performance improvement project, which includes an executive sponsor and statement of work for each of the eight initiatives.

B. Update on employee influenza vaccination program

Dr. Patricia Kelleher, Director of Employee Health Services at John H. Stroger, Jr. Hospital of Cook County, provided an update on the employee influenza vaccination program. She presented a program summary through April 30, 2010 (Attachment #3).

Dr. Kelleher provided information on employee educational efforts. She stated that the educational programs will be System-wide, and will include online training for all employees.

C. Update and discussion of pending information requests

There were no pending information requests to be discussed at this time.

V. Action Items

A. Any items listed under Sections IV, V and VI
VI. **Closed Session Discussion/Information Items**  
   A. **Discussion of personnel matters**  
   B. **Update on labor negotiations**  
   C. **Report from System Director of Human Resources**

Director Golden, seconded by Director Lyne, moved to recess the regular session and convene into closed session, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), which permits closed meetings for consideration of “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” and 5 ILCS 120/2(c)(2), regarding “collective negotiating matters between the public body and its employees or their representatives, or deliberations concerning salary schedules for one or more classes of employees.”

On the motion to recess the regular session and convene into closed session, a roll call was taken, the votes of yeas and nays being as follows:

Yeas: Chairman Zopp and Directors Golden and Lyne (3)  
Nays: None (0)  
Absent: Directors Carvalho and Ramirez (2)  

THE MOTION CARRIED UNANIMOUSLY and the Committee convened into closed session.

Chairman Zopp declared that the closed session was adjourned. The Committee reconvened into regular session.

VII. **Adjourn**

Director Golden, seconded by Director Lyne, moved to adjourn. THE MOTION CARRIED UNANIMOUSLY AND THE MEETING ADJOURNED.

Respectfully submitted,
Human Resources Committee of the  
Board of Directors of the  
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Ms. Andrea Zopp, Chairman

Attest:

XXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary
HR Committee Meeting

October 14, 2010
Taleo Next Steps

- The Taleo consultant has provided support on the following:
  - Technical Fixes
  - Functionality
  - Content

- CCHHS continues to move forward with System training through the end of October

- County contract that ends this month
  - Still need on-boarding, integration and report management support
100 in 100: A Targeted Nursing Recruitment Campaign

Cook County Health and Hospitals System
October 2010
100 in 100 Update

- **Selecting High Performers through Behavioral Interviewing** training for Nursing Leadership is scheduled for October 7th and 8th.
- Media plan is in final draft with a focus on targeting minority/diversity recruitment, particularly Hispanic.
- Recruiting Contractor begins on 10/12 to support this effort.
- Format for Employee Referral Incentive plan has been completed; working on processing details.
- Two new programs included in this campaign:
  - On-Boarding and Peer Mentoring
  - HR 60/90
Personnel Rules (update)

- Personnel Rules were effective July 1\textsuperscript{st}
- Amendments completed last month to both:
  - Rule 9.05, \textit{Grievance Procedure} requires a change adding language and re-publishing this Rule
  - \textit{Important Notice}, addition of Cook County Shakman Compliance Administrator language

- Personnel Rules placed on the CCHHS Intranet
- Distributed to the Leadership and Management team
Leadership Report
Organizational Re-design
October 2010
Agenda

• Overview
• Span of Control
• Centralization
• Redesign
• Future Development
Overview

Goal
Develop an organizational structure that is cost effective and positions CCHHS for successful implementation of the Strategic Plan

Guiding Principles
- Span of control is lean and effective
- Services centralized to reduce duplication and take advantage of economies of scale
- Operational structure supports leadership and promotes accountability
- Recruit and develop talent necessary for successful execution of the Strategic Plan
Overview

Challenges

◆ Management is challenged by the volume and complexity of work
◆ Core management processes are poorly defined and require redesign
◆ Managing in a matrix environment is unfamiliar for many
◆ In clinical departments, accountability for department management is not clearly defined between physicians and department managers
◆ Communication is inconsistent across and within system affiliates
◆ Accountability for performance needs to be built into the organization at all levels
## Overview

### Re-structuring Strategies

<table>
<thead>
<tr>
<th>Span of Control</th>
<th>Centralization</th>
<th>Redesign</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Reduce management layers</td>
<td>• Systemness</td>
<td>• Developing management skills to support System operations and strategic focus</td>
</tr>
<tr>
<td>• Eliminate redundant job functions</td>
<td>• Similar services consolidated under one management structure</td>
<td>• Build/strengthen infrastructure to support System operations</td>
</tr>
<tr>
<td>• Modify ratio of management to non-management staff</td>
<td>• Economies of scale</td>
<td></td>
</tr>
<tr>
<td>• Improve accountability</td>
<td>• Acquiring talent which supports System and shared services approach</td>
<td></td>
</tr>
</tbody>
</table>

- **Centralization**
  - Systemness
  - Similar services consolidated under one management structure
  - Economies of scale
  - Acquiring talent which supports System and shared services approach
Organizational Structure
May 2009

* Contracted position
### Span of Control - Key Accomplishments

<table>
<thead>
<tr>
<th>Areas of Focus</th>
<th>Accomplishments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing &amp; Peri-operative</td>
<td>- Eliminated/revised several Nursing Director and Associate Director positions across JSH, OFH and PH to streamline reporting to CNO’s.</td>
</tr>
<tr>
<td>Services</td>
<td>- Consolidated Endoscopy and Surgery under a single director for more cohesive management.</td>
</tr>
<tr>
<td>Support Services -</td>
<td>Centralized reporting structure for Building Maintenance/Grounds/Trades for improved span of control; trade employees now moving between sites resulting in improved efficiency.</td>
</tr>
<tr>
<td>Building/Grounds/Trades</td>
<td>Revised reporting structure of medical staff leadership for more effective span of control.</td>
</tr>
<tr>
<td>Medical Staff</td>
<td></td>
</tr>
</tbody>
</table>
# Centralization - Key Accomplishments

<table>
<thead>
<tr>
<th>Areas of Focus</th>
<th>Accomplishments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership</td>
<td>Centralized system leadership reporting structure— hospital COOs report to System COO, hospital CFOs report to System CFO, hospital CNOs report to System Chief Clinical Officer.</td>
</tr>
<tr>
<td>Clinical and Non-Clinical Operations</td>
<td>Centralized key clinical (Lab, Pharmacy) and non-clinical (Public Relations, Building &amp; Grounds) departments under one director, consolidating services.</td>
</tr>
<tr>
<td>Management Functions</td>
<td>Developed system-wide position control and capital equipment purchasing.</td>
</tr>
<tr>
<td>Procurement</td>
<td>Consolidated procurement under a single system-wide supply chain manager and materials manager resulting in improved approach to contracting and GPO management.</td>
</tr>
<tr>
<td>Revenue Cycle</td>
<td>Centralized revenue cycle leadership positions across system to improve standardization and facilitate using staff interchangeably across system; built local hospital accountability for revenue cycle through hospital CFOs. Centralized all general accounting functions to materially decrease error, improve payment cycle and internal controls.</td>
</tr>
<tr>
<td>Medical Staff</td>
<td>Drafting system-wide Medical Staff Bylaws that will facilitate reduction of overlapping Medical Staff Committees and enable physicians to practice across the system without redundant credentialing at each site. Consolidated clinical departments under System Chairs.</td>
</tr>
<tr>
<td>Human Resources</td>
<td>Centralized and restructured Human Resource function through identifying and standardizing critical job duties required to support the evolving CCHHS service delivery model. Policies and practices will be consistent across the System.</td>
</tr>
</tbody>
</table>
## Redesign - Key Accomplishments

<table>
<thead>
<tr>
<th>Areas of Focus</th>
<th>Accomplishments</th>
</tr>
</thead>
</table>
| Leadership              | Established leadership and departmental structure for important system-wide functions such as Compliance, Diversity and Multi-cultural Affairs, Internal Audit, Public Relations, Performance Improvement, Business Development, General Counsel, System Risk Management, and Quality.  
                          | Implemented facility COO management changes, coaching initiatives, and monthly operating reviews to improve performance and accountability.                                                                         |
| Clinical Operations-Nursing, Pharmacy, Peri-op | Created and staffers key department level positions:  
- Assistant Director of Pharmacy- focus on system-wide quality/compliance  
- System Director Nursing Professional Development- focus on professional development and standardization of policies and procedures  
- System Director Clinical Informatics- standardize Nursing documentation |
| Medical Staff           | Initiated Physician Assistant Program and increased use of PA’s in place of reduced resident hours for improved use of mid-level providers.                                                                      |
| Human Resources         | Created and staffers key system level positions:  
- System Labor Relations Director  
- System Human Resources Generalist  
- System Nurse Recruiter           |
## Future Development

<table>
<thead>
<tr>
<th>Areas of Focus</th>
<th>Strategy</th>
<th>Future Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decision Support</td>
<td>Redesign</td>
<td>Develop system-wide decision support function</td>
</tr>
<tr>
<td>Medical Staff</td>
<td>Centralization</td>
<td>Organize under one medical staff</td>
</tr>
<tr>
<td>Revenue Cycle</td>
<td>Centralization</td>
<td>Complete centralization, training, and recruitment</td>
</tr>
<tr>
<td>Quality</td>
<td>Centralization</td>
<td>Build centralized organizational structure</td>
</tr>
<tr>
<td>Care Management</td>
<td>Redesign/</td>
<td>Develop new system-wide care management model</td>
</tr>
<tr>
<td></td>
<td>Centralization</td>
<td></td>
</tr>
<tr>
<td>Service Line(s)</td>
<td>Redesign</td>
<td>Develop system-wide service line leadership</td>
</tr>
<tr>
<td>Leadership Development</td>
<td>Redesign</td>
<td>Hire System Director of Leadership Development and Training Develop and Implement Leadership Development Program</td>
</tr>
</tbody>
</table>
ATTACHMENT #3
## CCHHS Personnel H1N1 Vaccination Program Summary through 04/30/2010

<table>
<thead>
<tr>
<th>Facility</th>
<th>H1N1 Vaccines Administered</th>
<th>Medical Contraindication</th>
<th>H1N1 Vaccine Received Outside</th>
<th>Approximate Employee Number</th>
<th>Approximate Personnel Number</th>
<th>Employee Compliance %</th>
<th>Personnel Compliance %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stroger Hospital/ACHN</td>
<td>3467*</td>
<td>33</td>
<td>16</td>
<td>4114</td>
<td>5594</td>
<td>3516*/4114</td>
<td>3516*/5594</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>85%</td>
<td>63%</td>
</tr>
<tr>
<td>Cermak/CCJDC</td>
<td>430</td>
<td>0</td>
<td>25</td>
<td>421</td>
<td>487</td>
<td>393*/410</td>
<td>455*/476</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Includes 11 on LOA</td>
<td>Minus 11 on LOA</td>
<td>Minus 11 on LOA</td>
</tr>
<tr>
<td>CCDPH</td>
<td>312</td>
<td>18</td>
<td>3</td>
<td>336</td>
<td>339</td>
<td>330*/330</td>
<td>333*/333</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Includes 6 on LOA</td>
<td>Minus 6 on LOA</td>
<td>Minus 6 on LOA</td>
</tr>
<tr>
<td>Oak Forest Hospital</td>
<td>844</td>
<td>16</td>
<td>12</td>
<td>949</td>
<td>1339</td>
<td>813*/921</td>
<td>872*/1311</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Includes 28 on LOA</td>
<td>Minus 28 on LOA</td>
<td>Minus 28 on LOA</td>
</tr>
<tr>
<td>Provident Hospital</td>
<td>619</td>
<td>17</td>
<td>55</td>
<td>650</td>
<td>850</td>
<td>467*/631</td>
<td>691*/831</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Includes 19 on LOA</td>
<td>Minus 19 on LOA</td>
<td>Minus 19 on LOA</td>
</tr>
<tr>
<td>Total</td>
<td>5,672</td>
<td>84</td>
<td>111</td>
<td>6470</td>
<td>8609</td>
<td>5519*/6406</td>
<td>5867*/8545</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Includes 64 on LOA</td>
<td>Minus 64 on LOA</td>
<td>Minus 64 on LOA</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>86%</td>
<td>69%</td>
</tr>
</tbody>
</table>

- *Stroger H1N1 Vaccine number includes vaccines administered to all personnel categories.
- Compliance includes number of staff receiving H1N1 vaccine through CCHHS or other site, or documenting medical contraindication.
- Personnel numbers have fluctuated during flu season and number currently listed c/w previous number.
- LOA (Leave of Absence) – Sites other than Stroger reported the number of employees currently on leave of absence that were subsequently not included in the denominator of individuals expected to receive vaccine.

Prepared by the Office of John H. Stroger, Jr. Hospital of Cook County EHS