Recruitment and Retention for Allied Health Professionals

Mike Shimmens, 3RNet Executive Director
Tom Rauner, PCO Director-Nebraska
3RNet.org - Who Are We?

- Non profit membership association
- Each of our 53 members are unique
- Funded partially through Federal Office of Rural Health Policy (FORHP)
- In existence over 20 years (1995)
- Education Outreach
  - Webinars
  - On site training
  - Regional workshops
- Website- 2016 Stats
  - 6875 jobs posted
  - 3186 candidates registered
  - 1984 placements: 10/1/15 - 9/30/16
“Recruitment and retention are not separate events – they are part of a process.”

Tim Skinner, ex-officio ED 3RNet
Part I  Planning and Preparation

Planning and preparation are the most important ingredients for ensuring a successful recruitment effort. They are also the most often neglected.

- 3RNet
1. Assess the Need
2. Gain support of key stakeholders
3. Form a recruitment and retention committee
4. Define your opportunity
5. Define the ideal candidate
6. Develop a recruitment budget
Part II  Searching for candidates
Step 7 Generate Candidates

• Use your unique selling points (USPs) in a creative way with graphics, pictures, quotes, etc.

• Create many different types of ads:
  – Short profile
  – Descriptive profile with photos
  – Internet version
  – Promotional packages, maybe video?
  – “Elevator speech”
Step 7 Continued

• Use multiple methods of sourcing to have greatest impact
  – On line job boards and advertising like Aidsportal or 3RNet
    Find your state member: 3RNet.org/locations
  – Journals and print media
  – Direct mail and email blasts
  – Databases like PracticeMatch, PracticeLink and Profiles
  – Employee referral programs
  – Residency programs with HIV training tracks
  – Social media – Facebook, LinkedIn, Twitter
  – Search firms – Understand the different types and your responsibilities (contingency, retained and hybrid)
Part III Screening candidates
8. Interview Candidates by phone or video conferencing
9. Conduct credential check
10. Interview the spouse/significant other
11. Check references
12. Conduct site visit
Part IV Follow up and Follow Through
13. Follow up communication
14. Negotiations
15. Retention plan implementation
Michigan Center for Rural Health
Retention Model – Step 1 Onboarding

• Step 1 includes the time between when a candidate agrees to your offer or signs a contract and their relocation or start date.

• This may be weeks, months or possibly even years between the two events.
Suggested activities may include:

• Communicate often in a way that best reaches them (phone, email, text).
• Ensure licensure and/or credentialing processes are progressing.
• Communicate with realtor if relocation is required.
• Plan orientation sessions: Community, office/clinic, hospital. Send to health professional.
• Ensure their office or work space is ready for their arrival.
• Plan social events that help ease family members into community.
• Other?
Retention Model – Step 2 Orientation

• Step 2 includes those activities from the first day of relocation through the first two weeks on the job.
Suggested activities may include:

• Provide a detailed orientation schedule for first two weeks prior to start.
• Welcome the health professional and their family within the first week.
• Include meeting with hospital administration (if applicable).
• Hospital tour (include relevant department directors).
• Clinic tour (lunch with staff).
• Clinic orientation involves the new health professional with issues regarding equipment, office space, scheduling, support staff, business cards, etc.
• Contact the spouse and family to see how they are adjusting to the community and to integrate the social mentor (if applicable).
• Other?
Retention Model –
Step 3 Communication/Retention

• Includes those activities after the first two weeks on the job and the first 3 years of work.
Suggested activities may include:

- Monthly meetings with identified administrators, practice managers, and mentor as identified in plan. Develop and offer feedback on job performance and discuss problems or any other topics relevant to the situation.
- Plan outreach activities to be incorporated into promoting new health professional.
- As information becomes available track performance related to health professional goals. After three months schedule quarterly meetings for the remainder of the first year (15-minute meetings).
- Incorporate planned meetings and activities for regular feedback over the first 3 years of employment.
- Other?
Multi-State Collaborative – 11 States

Findings of the First Year Retention Survey of the Multi-State/NHS C Retention Collaborative

November 5, 2012

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Prepared for the Multi-State/NHS C Retention Collaborative under contract to the North Carolina Foundation for Advanced Health Programs

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STATE/ORGANIZATION PARTICIPANTS IN COLLABORATIVE

Alabama Department of Health and Long Term Services
California Office of Statewide Health Planning and Development
District Department of Health and Social Services
Iowa Department of Public Health
Kentucky Department of Public Health
Massachusetts Department of Public Health
Nevada Department of Health and Human Services
New Mexico Health Services
North Carolina Office of Rural Health and Community Care
University of North Dakota School of Family Medicine
Washington State Department of Health

www.3RNet.org
Multi-state details

- Lead researcher is Dr. Don Pathman and the Sheps Center at UNC; Sponsor is Center for Health Leadership and Innovation in North Carolina
- Project leader is Tom Rauner of NE PCO (current 3RNet President)
- States participating grew from original 11 to 18
- Goal was to assess retention within their states and identify best practices to maximize retention of NHSC clinicians
- Survey both NHSC and state funded programs when requested by the state
Now Practice Sights

- 1\textsuperscript{st} year activities project activities centered around a cross-sectional survey that builds on the NHSC Long Term Retention Survey; 11 key findings reported.
- Data will allow stable estimates of retention and the predictors of retention for each participating state.
- 2\textsuperscript{nd} year activities centered on designing and building a longitudinal retention data gathering system that routinely surveys clinicians as they serve in loan repayment and other service programs.
- This web based system is designed to stand alone as Practice Sights – 18 States now using system!
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<tr>
<th>PARTICIPATING STATES / ORGANIZATIONS</th>
<th>3RNet</th>
<th>SORH</th>
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*Updated 2016*
Preceptors

• Recruit to your organization those interested in teaching. Recruitment questions to ask?
• Develop a culture of teaching within your organization. How?
• Incentivize for teaching. Pros and Cons?
What factors matter in rural?

**Geographic**
- Schools
- Climate
- Perception of Community
- Spousal Satisfaction

**Economic**
- Loan Repayment
- Competition
- Part-time Opportunities
- Signing Bonus

**Scope of Practice**
- Emergency Care
- Mental Health
- Obstetrics
- Administration Duties

**Medical support**
- Nursing Workforce
- Call/practice Coverage
- Perception of Quality
- Specialist Availability

**Facility/Hospital and Community Support**
- EMR
- Welcome & Recruitment
- Televideo Support
- Plan for Capital Investment
Thank you for your time today.

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