



## 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

Recruitment

Retention

RECRUITENTION



#### 4 Part R & R Plan: 15 Action Steps





### 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



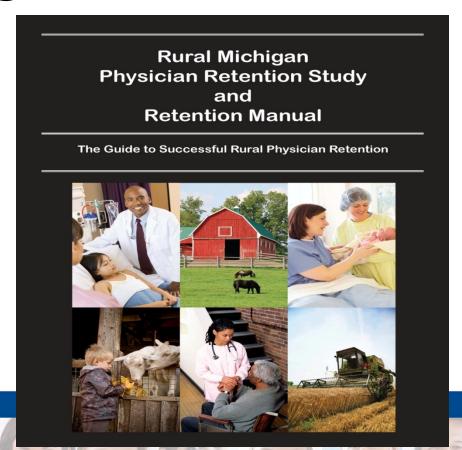
# Part IV Follow up and Follow Through



- 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/NHSC Retention Collaborative

November 5, 2012

Cecil G. Sheps Center for Health Services Research The University of North Carolina at Chapel Hill

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#### STATE /ORGANIZATION FARTICIPANTS IN COLLABORATIVE

Altaka Department of Health and Secul Service.
California Office of Statement Health Meaning and Development
Delaware Department of Health and Secul Service.
Leve Department of Public Health
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#### 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

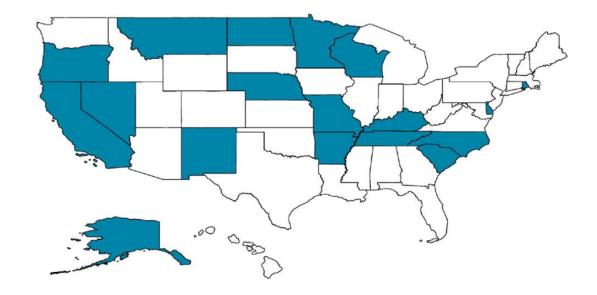


#### **Now Practice Sights**

- 1<sup>st</sup> 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<sup>nd</sup> 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!



#### Retention Collaborative State Members 2016





PARTICIPATING STATES / ORGANIZAIONS		3RNet	SORH	PCO	YEAR
					JOINED
Alaska	Alaska Department of Health and Social Services	✓	✓	1	2012
Arkansas	Arkansas Department of Health	✓	✓	1	2013
California	California Office of Statewide Health Planning and Development	✓		✓	2012
Delaware	Delaware Division of Public Health	✓	✓	✓	2012
Kentucky	Kentucky Department of Public Health			✓	2012
Minnesota	Minnesota Department of Health		<b>√</b>	<b>√</b>	2016
Missouri	Missouri Department of Health and Senior Services		<b>/</b>	✓	2013
Montana	Montana Department of Health and Human Services			1	2012/2016
Nebraska	Nebraska Department of Health and Human Services	<b>✓</b>	<b>✓</b>	✓	2012
Nevada	Nevada Division of Public & Behavioral Health / Office of Primary Care  Nevada Office of Rural Health  Nevada Primary Care Association  NV Western Interstate Commission for Higher Education (WICHE)	✓	<b>*</b>	<b>√</b>	2015
New Mexico	New Mexico Health Resources, Inc.	<b>✓</b>			2012
North Carolina	North Carolina Office of Rural Health  North Carolina Medical Society Foundation	1	<b>*</b>	✓	2012
North Dakota	University of North Dakota Dept. of Family & Community Medicine			1	2012
Oregon	Oregon Health Authority / Primary Care Office Oregon Office of Rural Health	1	1	✓	2016
Rhode Island	Rhode Island Department of Health	1	✓	1	2016
South Carolina	South Carolina Office of Rural Health  South Carolina Dept. of Health & Environmental Control / Office of Primary Care  South Carolina AHEC / Medical University of South Carolina	<b>V</b>	<b>V</b>	<b>√</b>	2016
Tennessee	Tennessee Rural Partnership*	✓			2016
Wisconsin	Wisconsin Division of Public Health			✓	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?













nd Retention Network

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#### What factors matter in rural?

#### Facility/Hospital Geographic Scope of Practice Medical support Economic and Community Schools • Emergency Care Nursing Workforce Loan Repayment Support Climate Competition Mental Health Call/practice Coverage Perception of • Part-time Obstetrics • EMR Community Opportunities Perception of Administration • Welcome & Quality Spousal Satisfaction • Signing Bonus Duties Recruitment Specialist Availability • Televideo Support Plan for Capital Investment



#### Thank you for your time today.

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