

Healthy Hiring Post-Covid: Best Practices for Recruitment and Retention

Tina Wu, MD, MBA Chief Medical Officer Waltz Health



Objectives

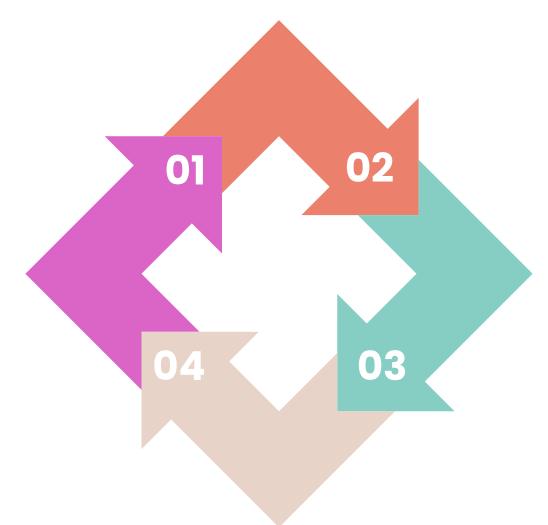


WHY IS THIS IMPORTANT?

WHAT HAPPENS WITH A HIRING MISS?

HIRING MISS

The core of the ER is the people.



QUALITY & SAFETY

A hiring miss can have poor decision-making, practice defensive medicine, order increased imaging & excessive consults

LIABILITY

RCAs, reviews, intra/interinstitutional reputational decay, legal reviews

TEAM & CULTURE DECAY

Excessive signouts, not arriving on time, dumping on the following team, toxic environment

WHY IS THIS IMPORTANT?

WHAT HAPPENS WITH A HIRING MISS?

THE WALL STREET JOURNAL.

U.S. | CRIME

Former Mount Sinai Doctor Sentenced to 2 Years for Sexually Abusing 4 Patients

David Newman pleaded guilty to one count of sexual abuse in first degree and four counts of sexual abuse in third degree



David Newman, a former emergency-room physician at Mount Sinai Hospital on Manhattan's Upper East Side, is seen after his arraignment at state Supreme Court in March 2016.

PHOTO: THOMAS MACMILLAN FOR THE WALL STREET JOURNAL



Dr David Newman

WHY IS THIS IMPORTANT?

WHAT HAPPENS WITH A HIRING MISS?













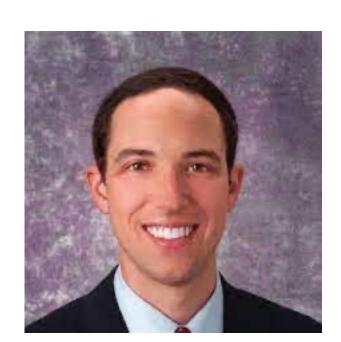
Manhattan doctor facing state discipline over child-sex charge

By Melissa Klein

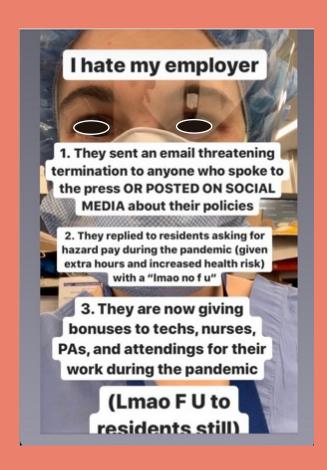
January 29, 2022 | 10:57am | Updated



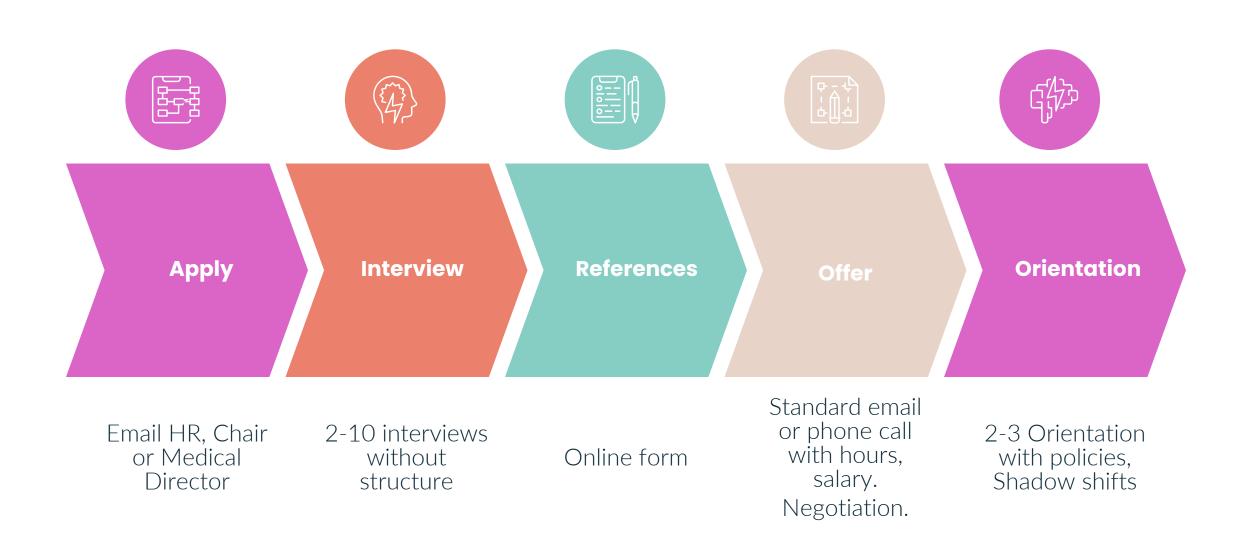
Dr. Michael Hilton pleaded guilty in 2019 to one count each of a criminal sexual act and endangering the welfare of a



A story or two.....

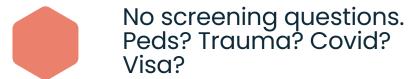


Traditional Model



Application Pitfalls



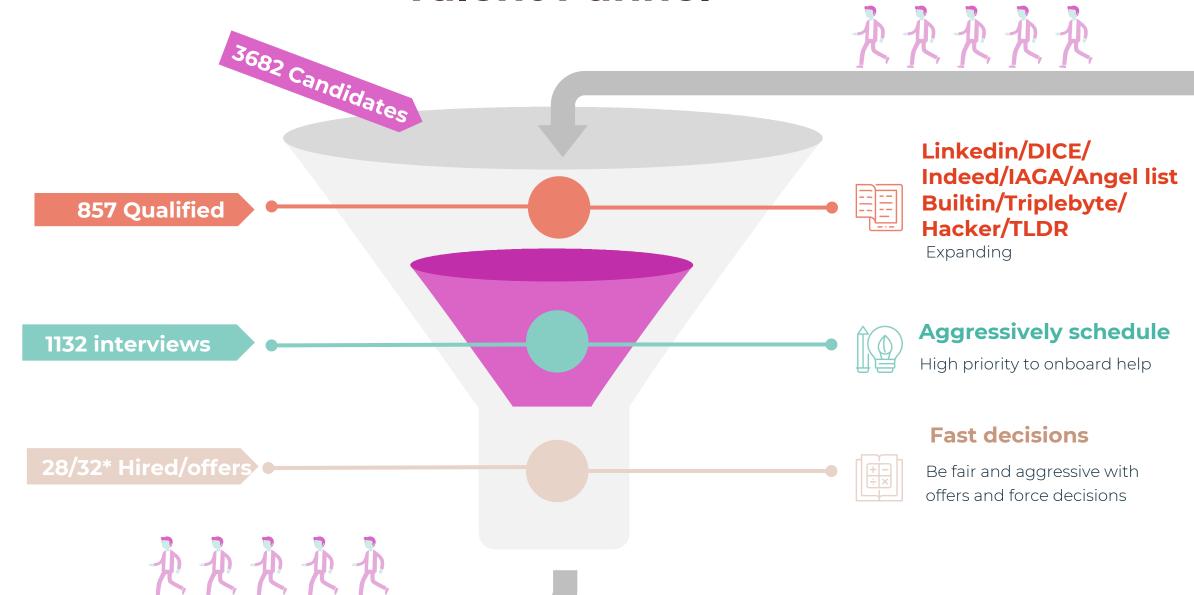


No standard application – CV? Cover Letter? Writing Sample?

Poor candidate experience without timeline or expectations

Bias with screening – internal candidates, arbitrarily eliminated

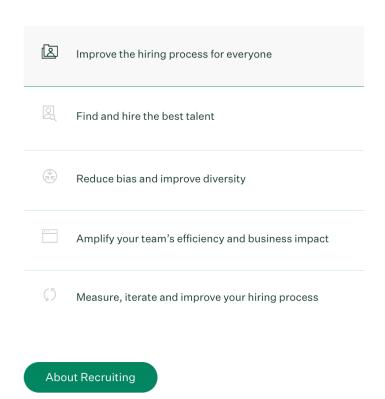
Talent Funnel

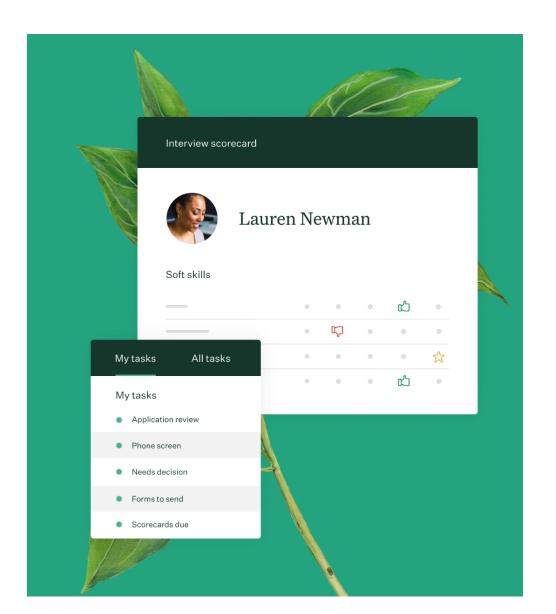




Applicant Tracking Systems

Optimize every aspect of hiring with Greenhouse Recruiting





INTERVIEW PITFALLS



Lack of training for interviewers

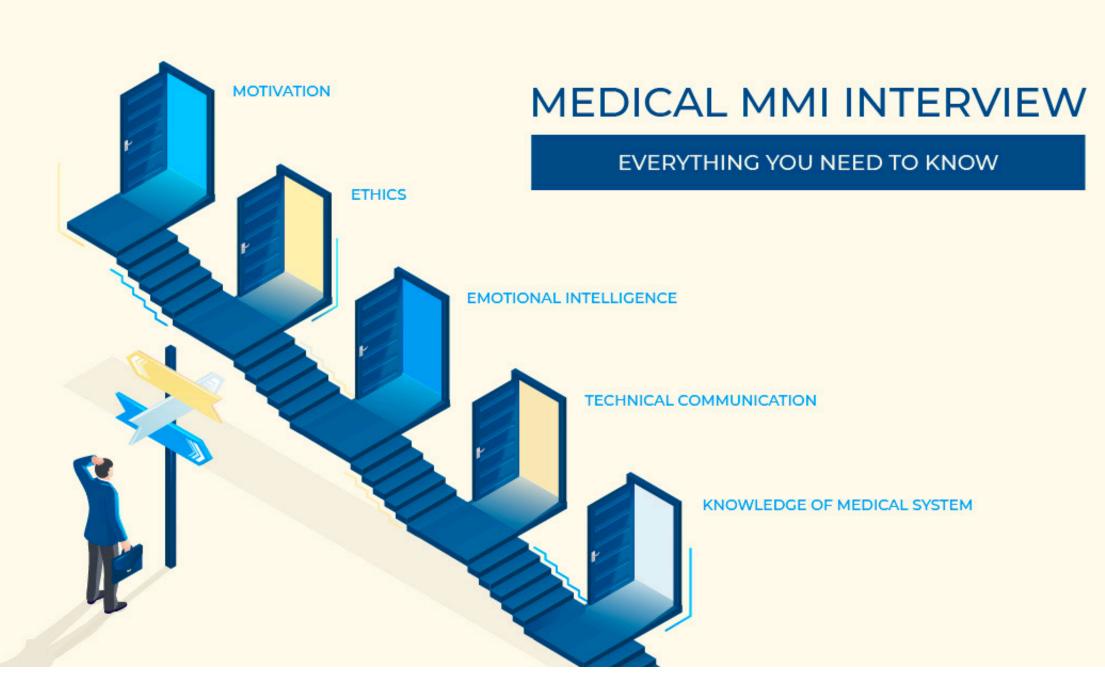
Not challenging, imbalance selling/evaluating, one dimensional

Feedback not elicited or taken into consideration

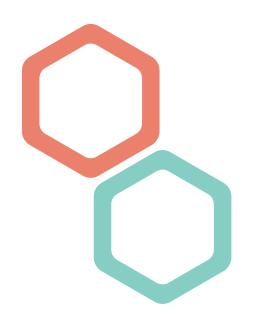


Unstructured, inconsistent





Structure

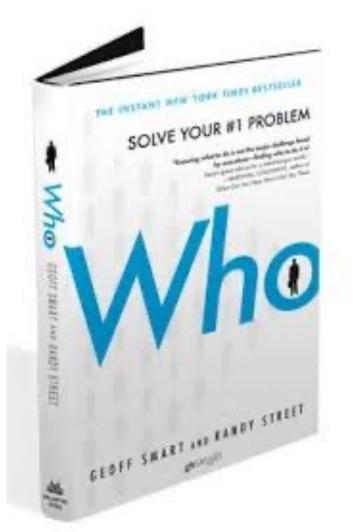


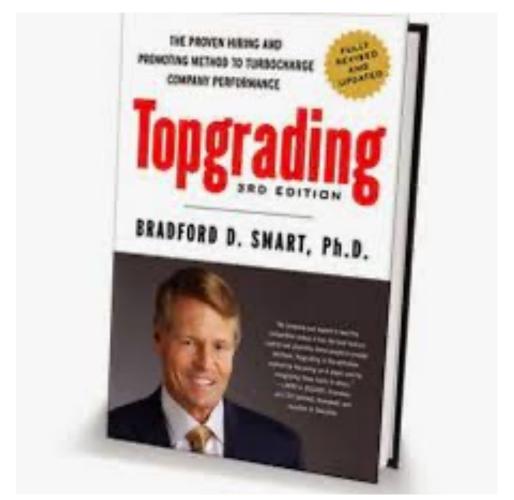
Diverse interview panel

Blind interviews

Standard / Same questions

Case-based





Reference Check Pitfalls

What reference checks?



....

We would appreciate receiving any information relating to this applicant, his/her character, ethical and professional standards and any other facts, which would be helpful to our Credentials Committee in evaluating his/her application.

If you have any questions or issues to complete this survey, please contact us at hmhcredentialing@hmhn.org.

Question: I. RELATIONSHIP OF REFERENCE SOURCE TO APPLICANT

Question: My responses are based upon (check all appropriate responses).

Direct observation
Review of accumulated information and reports about the practitioner's performance

Question: During what time period did you observe the applicant? From Date:

Question: Availability and thoroughness of patient care
○ Ex.
○ Good
○ Avg
○ BA
\bigcirc NI
Question: Appropriate and timely use of consultants
○ Ex.
○ Good
○ Avg
○ BA
○ NI
Question: Quality/appropriateness of patient care outcomes
○ Ex.
○ Good
○ Avg
○ BA
\bigcirc NI

Question: Verbal and written fluency in English
○ Ex.
○ Good
○ Avg
○ BA
\bigcirc NI
Question: Clarity/legibility of records
○ Ex.
○ Good
○ Avg
○ BA
\bigcirc NI
Question: Responsiveness to patient needs
○ Ex.
○ Good
○ Avg
○ BA
\bigcirc NI

Question: 1. Have you ever observed or been informed of any physical, mental, emotional, or behavioral issues that the applicant has or had that have affected or could potentially affect his/her ability to exercise all or any of the privileges requested or to perform the duties of medical staff appointment? If Yes, please explain.

○ Yes		
○ No		
 No information 		

Question: 2. To the best of your knowledge, has the applicant's license, clinical privileges, hospital appointment, affiliation with any healthcare organization, or other professional status ever been denied, challenged, investigated, terminated, reduced, not renewed, limited, withdrawn, suspended, revoked, modified, placed on probation, or voluntarily or involuntarily surrendered, or do you have knowledge of any such actions that are pending? If Yes, please explain.

○ Yes			
○ No			
Exit Survey	Finish Survey		

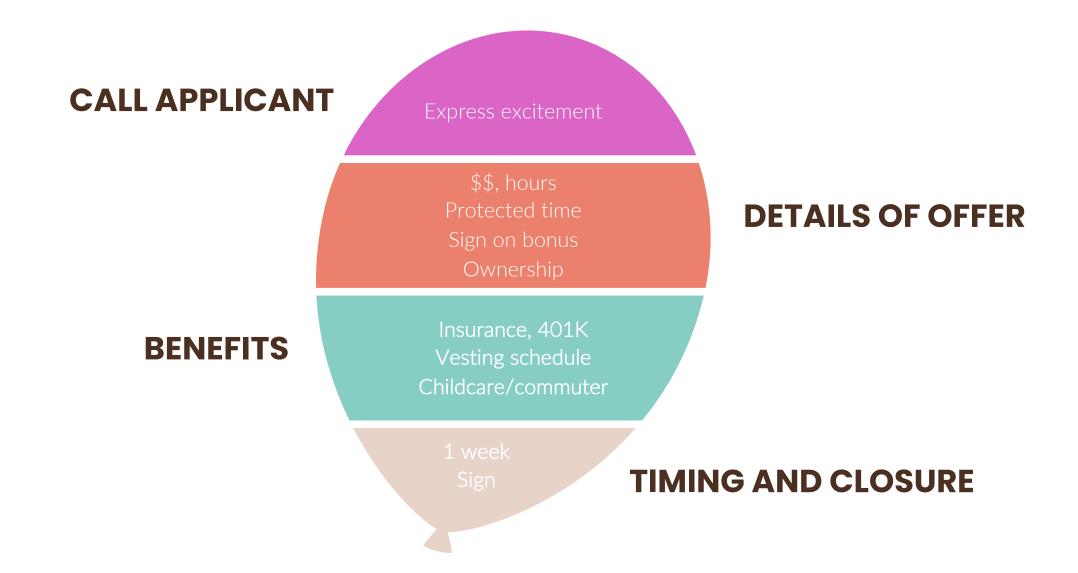
Your reference experience?

Some questions

- What would you rate them top 50%, 25%, 10%?
- What was the percentage of non-billable charts?
- Would they respond to emails?
- Call outs?
- Attitude?
- Example of outstanding patient care?
- Example of complaint?
- Timeliness?
- Signouts?
- Ever consistently on any lists?
- Would you hire again?

Ability to influence	
Ability to meet deadlines	
Big picture/ Visionary	
Calm under pressure	
Collaborative	
Comfortable with change	
Creative	
Detail-oriented	
Determination to succeed	
Entrepreneurial	
Flexible	
Hard working	
Hires A Players	
Holds people accountable	
Listening	
Loyal	

Offer



TRAINING / ORIENTATION

Mentors offer **MED** Check-ins to ensure confidential support **MENTOR** ease of onboarding **DIRECTOR** and career guidance. **PROVIDER** Orientation Pair provider with guidebook (online) another provider who **HANDBOOK BUDDY** can provide more so rules and policies are easily accessible regular check-ins

SUMMARY

- The traditional model is outdated and can be biased
- Newer, researched hiring processes have been adopted elsewhere
- Small changes can make a big difference
- Orientation and retention can decrease turnover and the need to hire.

