

New Mexico Health Resources: RECRUITMENT AND RETENTION

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History and Funding

- ▶ Public - Private Partnership
- ▶ Rural Primary Health Care Act
- ▶ Primary Care Office
- ▶ Office of Rural Health
- ▶ "Private Placements"
- ▶ Technical Assistance
- ▶ Workforce related research
- ▶ NM Primary Care Association
- ▶ Meeting coordination and logistics

Musts

- ▶ "The best employee (to recruit) is working in your organization," Fred Moskol
- ▶ "First to contact, first to contract"
- ▶ Vacancies must be known and real

Recruitment and Retention are Driven and Defined by Employers

- ▶ Corporate administrators and directors are responsible for adopting recruitment and retention programs.
- ▶ Absence of recruitment and retention plans eventuate in poor results.
- ▶ Few NM organizations develop recruitment and retention plans.
- ▶ Few NM organizations employ professional recruiters: NMHR staff work in their places.

Recruitment and Retention Defined

- ▶ Recruitment is the process of identifying the best qualified candidates (from within or outside) for a job vacancy in a cost effective and timely manner. NMHR is a clearinghouse.
- ▶ Retention is made up of the clinic or system practices that meet the needs of employees and encourage them to remain employed in place.

Which Professionals Usually Are Recruited by Safety Net Providers?

- ▶ Family Practitioners;
- ▶ Dentists, Dental Hygienists;
- ▶ Family Nurse Practitioners, Physician Assistants, Nurse Midwives;
- ▶ Ancillary and operational staff;
- ▶ Enabling legislation: Rural Primary Health Care Act (RPHCA).

High Tech, High Touch

- ▶ Recruitment and tracking software
- ▶ Smart phones
- ▶ Skype or Facetime
- ▶ Access to Job Boards or referrals from such: 3RNET, Practice Link, Practice Match
- ▶ Practice Sights, Doc in a Box
- ▶ <http://www.3rnet.org>
- ▶ <http://www.nmhr.org>

Activities

- ▶ Job fairs
- ▶ Residency visits
- ▶ Presentations to in-coming and out-going classes
- ▶ Breakfast, lunch and dinner
- ▶ CV and resume review
- ▶ Contract review
- ▶ Match-making

“Everything works, Nothing Works”

- ▶ High expenditure on travel and networking
- ▶ Resident relationships: resume and contract review
- ▶ Few expenditures on print advertising, giveaways, and/or mass mailings

Who Recruits in NM

- › Sourcing agencies
- › "In-House" recruiters
- › Administrators
- › Clinical Directors
- › Human Resource Personnel
- › Administrative Assistants

Recruiter Training Available: Recruiting 101 and 202

- › National Rural Recruitment and Retention Network – NMHR
- › Association of Staff Physician Recruiters – ASPR
- › National Association of Physician Recruiters – NAPR
- › Air Force, Army, and Navy Medical Recruiting

Competition for Health Professionals Increasing for Rural and Urban Underserved

- › Aging of the health professional population;
- › Rural versus urban;
- › Primary care versus specialty care.

Keys to Successful Recruitment

- › Preparation – is a physician or dentist really needed?
- › Action Plan – is a formal study required?
- › Persistence.
- › Adequate Budget for recruitment and compensation.
- › Community support and involvement – is a recruitment team needed?
- › Adequate human resources (people), not departments.
- › Optimism; and,
- › Realistic expectations in terms of time and competition.

Community Partnerships

- › There must be a defined need for a volunteer team, e.g., recruiting the significant other;
- › Volunteers should have job descriptions;
- › Orientation and training are important;
- › Abilities must be matched to tasks.

State and Federal Partnerships

- › WICHE Dental
- › NMDOH NM Health Service Corps
- › NMDOH FNP Mini-Grant Salary Support
- › NMHED Allied Health and Nursing Loan for Service Programs
- › NMHED Medical Student Loan for Service
- › NMHED Health Professional Loan Repayment
- › Conrad 30 J-1 Visa Waiver Program
- › NHSC Loan Repayment
- › NHSC Scholar Program
- › Centralized Recruiting: NMHR

State Supported Retention Programs

- ▶ NMDOH NM Health Service Corps Community Program
- ▶ NMDOH Rural Health Provider Income Tax Credit -Rural and Underserved

What is a Recruiter?

- ▶ Leads the recruitment effort;
- ▶ Makes appropriate assignments;
- ▶ May be the Contact Person and First Interviewer;
- ▶ May be assigned to any number of positions in an organization - do what is best for the process;
- ▶ Identifies who will work with the significant other or family members.

What is the Practice Opportunity?

- ▶ The practice setting, the physical plant(s) and call;
- ▶ The community and its profile;
- ▶ Compensation and Benefits.

Most Common Barriers to Successful Recruitment and Retention

- ▶ Too much call frequency;
- ▶ Lack of attention to or job opportunities for significant other;
- ▶ Lack of communication among parties;
- ▶ Low compensation guarantee;
- ▶ Limited benefits;
- ▶ School choice;
- ▶ Limited housing options;
- ▶ Cultural misalignment.

Recruitment Staffing Issues

- ▶ Administrators and Directors
- ▶ Untrained recruitment staff
- ▶ "Human Resources"
- ▶ Internal procedures
- ▶ Lack of responsiveness

Recruitment Strategies

- ▶ Local, regional, national in expense order;
- ▶ Provider networking;
- ▶ Classified advertising versus Internet;
- ▶ National Rural Recruitment and Retention Network;
- ▶ New Mexico Health Resources;
- ▶ National Health Service Corps;
- ▶ Direct Mail;
- ▶ Residency and training visits; and,
- ▶ Recruitment firms.

Motivators for Practice Selection

- ▶ Professional Motives: facilities and personnel, avoidance of isolation, reasonable workloads and call, working with a team, and adequate income;
- ▶ Personal Motives: Preference for community size and type, family and friends nearby, climate and geography, recreational and social opportunities, and how much involvement in community is required.
- ▶ Loan Repayment.

The Best Recruit:

- ▶ Is someone already employed.
- ▶ Costs of replacement recruitment processes are expensive and or contribute to declines in revenue.
- ▶ New graduates often cost more than keeping someone in place.

Questions frequently asked about Practice Related Issues by Applicants

- ▶ Can I get Loan Repayment in this site?
- ▶ How much call is required?
- ▶ Why is there a need for a new provider?
- ▶ Is there anyone else there?
- ▶ What is the status of the EHR?
- ▶ What are the major health issues in the community?
- ▶ Do people work well with one another?
- ▶ How hard is it to get licensed?

Recruiters must be able to Answer:

- › What is the service area?
- › What are the buildings and offices like, and where are they?
- › What support staff exist?
- › Which services does the clinic provide?
- › How far away is the nearest hospital?
- › With whom can I consult and to whom can I refer?
- › What patient transportation is available?
- › What opportunities for continuing education are available?

Questions frequently asked about Community Related Issues by Applicants

- › Is the clinic successful financially?
- › Can my significant other find a satisfying job?
- › What educational opportunities are there for my family?
- › What is the local school, public and private, situation?
- › What religious institutions are there?
- › What are the recreational, social and cultural opportunities?
- › Will I fit in culturally?
- › Where can we shop?

Significant Others Want Answers

- › Is there loan repayment available? If so, what kind?
- › Will my _____ earn what was promised?
- › What housing is available?
- › What are the other providers like?
- › Are there good schools?
- › Can I work locally?
- › Can I practice my religion freely?
- › Where is the closest place to shop?
- › Can I get a good "feel" for the community while my _____ interviews?

Retention is becoming a large issue

- › 50% of physicians leave within three years;
- › 12% of physicians leave within one year;
- › Some health professionals do not appear after being hired and contracts signed;
- › Scholarships have the least impact upon retention;
- › New hires, especially those with loan obligations almost immediately begin looking for other positions: two year cycle of obligation contracts.

Retention is a continuous process

- › Evaluate whether a community recruitment and retention committee should be organized;
- › Follow guidelines and boundaries about interactions with employees;
- › New hires should be welcomed into the community;
- › Providers and their significant others should receive an orientation to the community;
- › Anticipate questions that might lead them to leave for which answers will encourage them to stay;
- › Integrate them, if they want, into local cultural life; and,
- › Help to reduce isolation.

Sources of Potential Conflicts that Might Lead to Early Departure

- › Value differences;
- › Perceptual differences;
- › Personality clashes;
- › Scarce resources;
- › Role pressures;
- › Poor communication skills; and,
- › Unresolved situations.

Important Issues In Primary Care Physician Retention, by Rank Higher to Lower

- › Availability of relief coverage;
- › Quality of local schools;
- › Compatibility with professional colleagues;
- › Housing availability;
- › Telephone consultation;
- › Availability of peers within the clinic or practice;
- › Income potential;
- › Local consultation;
- › Continuing education opportunities; and,
- › Local cultural and social participation.

How Does Physician Income Play a Role?

- › For established physicians, with stable community life, income frequently is of little importance;
- › Income is more of a problem for the significant other;
- › Internal differences among incomes within a clinic system contributes to problems;
- › High debt in comparison to income;
- › Reimbursement discrimination in our health care system versus those who work with the poor and dependent.

Lifestyle Issues

- › “Call” for health care providers is the most important issue for lifestyle;
- › “1” in “4” is a target to achieve – but it requires four interchangeable providers;
- › With communities that have less than four providers of a single discipline, “groups without walls” might be created.

Resources

- ▶ New Mexico Primary Care Association;
- ▶ New Mexico Health Resources;
- ▶ National Rural Recruitment and Retention Network's Recruitment and Retention Manual;
- ▶ National Health Service Corps;
- ▶ New Mexico Department of Health, Public Health Division, Office of Primary Care/Rural Health;
- ▶ New Mexico Higher Education Department Health Professional Loan Repayment and Loan for Service Programs.

Roadblocks to Recruitment and Retention

- ▶ Primary care providers are in short supply;
- ▶ Unrealistic expectations may exist about the ability to recruit or retain providers;
- ▶ Lack of attention to family issues;
- ▶ Seeking the perfect candidate;
- ▶ Lack of planning and recruiter employment;
- ▶ No contact with candidates within 24 hours;
- ▶ No formal offer letters or contract documents;
- ▶ Lack of community need for the type of provider.


