

*Creating a Recruitment
and Retention Program at
the Local Community Level*



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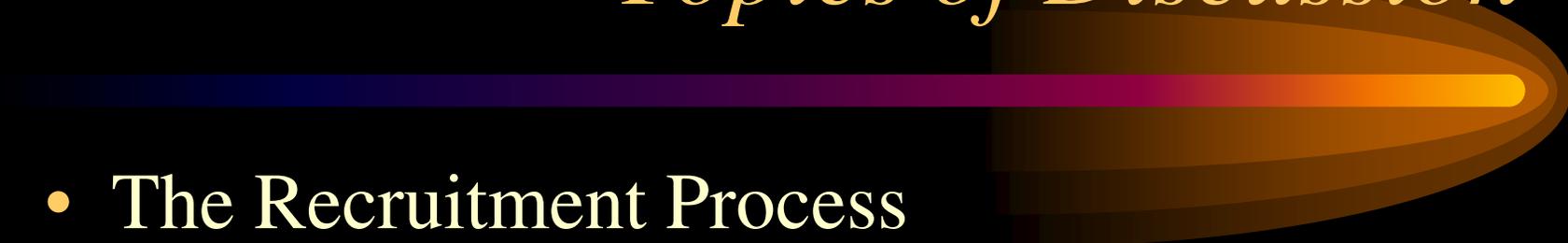
Introduction

- To development an outline/approach for working with communities to plan and implement an effective recruitment and retention program

Topics of Discussion

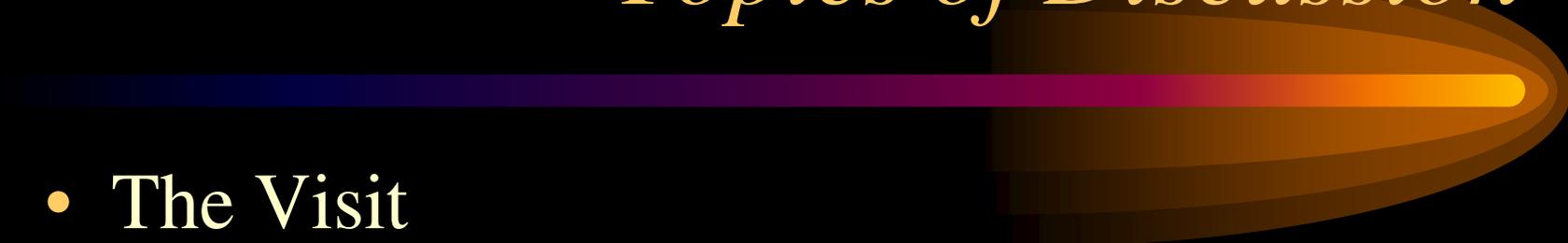
- Establishing the need
- How to approach the community
- Who should be involved
- Recruitment Committee
- Role of Committee members
- Use of a Recruitment Coordinator

Topics of Discussion



- The Recruitment Process
- Community Profiles
- Other Marketing Materials
- The Initial Telephone Interview
- Pre-Visit Interview
- Planning the Visit

Topics of Discussion



- The Visit
- Contracts and Negotiating
- Creative Benefit Packages
- **RETENTION!!!!!!!!!!!!**

Determining the Need

- If you are contacted by a practice, the first step is to determine if the request is REAL!
- There are a number of reasons to recruit additional providers, but all players must be on the same page.
- Most request come from Hospitals or other agencies who are trying to increase revenue.

Determining the Need; What to look For:



- Look at existing providers.
 - Number
 - Ages
 - Specialty
 - Hours Worked
 - Practice
- Talk to Current Providers
 - Do they believe other providers are needed.

Current Providers:

- Will they help in the recruitment effort.
- Will they accept new provider in call group if same specialty.
- What are their roles and what services do they provide.

Determine the Need Cont:

- Does the community understand the role of local health care facilities and providers?
- Are health care needs being met currently?
- Is there an access problem
 - Can appointments be made on a timely basis
- Does community use current services?

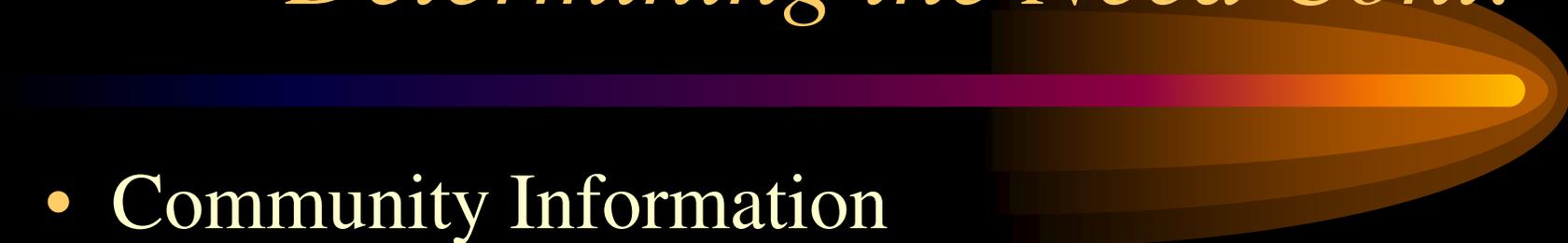
Determining the Need Cont:

- Conduct a patient survey
 - Where do they currently receive care.
 - Travel distance to current providers
 - Perception of quality of care by current providers.

Determining the Need Cont:

- What are the Demographics of service area?
 - Income Level
 - Population age/gender
 - Insurance coverage/type
- Will the Economic Base Support additional providers?

Determining the Need Cont:



- Community Information
 - Employment opportunities
 - Housing
 - Schools
 - Recreational Opportunities
 - Cultural Events
 - Transportation
 - Any other positive aspects of the community

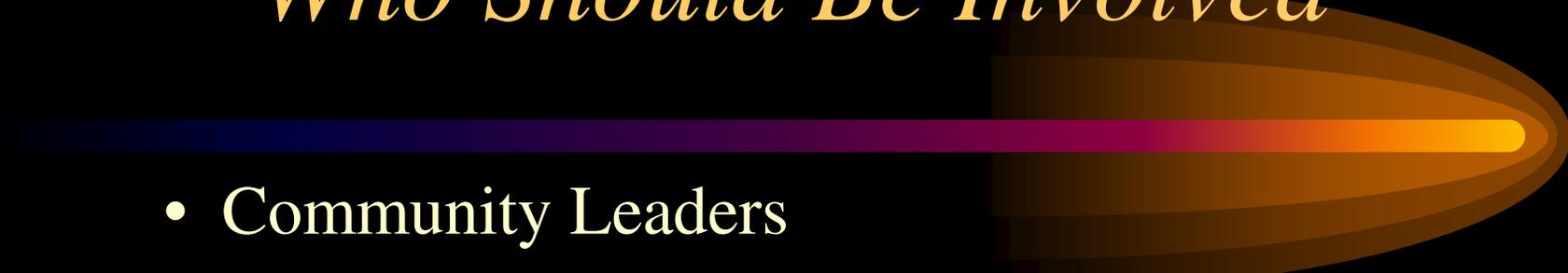
Determining the Need Cont:

- Medical Facility Information
 - Hospitals
 - HMO's/Managed Care Organizations
 - Long Term Care Facilities
 - Other's that would have an impact on recruitment and retention

Approaching the Community

- Numerous way - never-ending .
- Best is to publicize your services so communities will contact you.
- Build your reputation.
- If you feel you should contact a community, do so in a suggestive manner. You don't want to be blamed for failure.
- Community needs to be accountable.

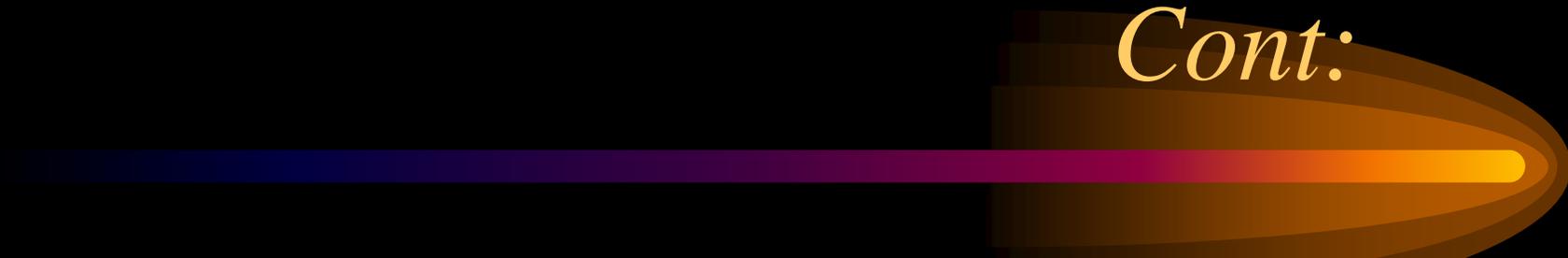
Who Should Be Involved



- Community Leaders
 - Business
 - Large Employers
 - Banker
 - Education
 - Real Estate
- Hospital Administrator/CEO
- Current Providers

Who Should Be Involved

Cont:



- Practice Manager/Administrator
- Long Term Care Facility
Managers
- Patients

Form Recruitment Committee from This Group

- Must be a team effort - Broad Based
- Two Groups, Primary/On-Call
 - Primary
 - Will be involved in every recruitment effort.
 - On-Call
 - Only involved if services are needed

Primary Group

- Recruitment Coordinator(if used)
- Current Providers
- Board Members (If community based)
- Hospital/Clinic Administrator

On-Call Group

- Real Estate Agent
- Education Representative
- Banker
- Clergy
- Pharmacist
- Chamber of Commerce Representative
- Local Employers

On Call Group Cont:

- Long Term Care Facility Managers
- Child Care Facility or Individual
- Lodging Facility

Role of Committee

- To represent and sell the community to prospective candidates.
- To oversee the recruitment process from initial contact to contract signing.
- Develop and initiate a retention plan.

Recruitment Coordinator

- One person to coordinate all recruitment activities.
- Should be employed, not volunteer.
- Attitude and personality is very important.
- Must be a self-motivator, self starter.
- Ability to socialize.

Role of Recruitment Coordinator

- Makes Initial Contact with candidate.
- Conducts telephone interviews.
- Conducts background checks and checks references.
- Conducts pre-visit interviews.
- Coordinates candidate and spouse site visits.

Role of Recruitment Coordinator

Cont:

- Ensures those members of the On-Call Committee are notified if needed.
- Transport candidate during site visit.
- Develops marketing and recruitment materials.
- Source/Locate potential candidates.
- Coordinate efforts with recruiting firms if used.

Step 2: Recruitment

- First you must provide a way for candidates to become interested in your opportunity.

Community Profile



- Brief description of practice opportunity
 - Specialty
 - Type of Practice
 - Facility
 - Hospital
 - Call Coverage

Community Profile Cont:

- Detailed community information, i.e., population, school systems, recreational opportunities, cultural events, demographics, etc.

Community Profile Cont:

- Remember, the Profile will probably create the **FIRST IMPRESSION** of your opportunity. Make sure it's well written and informative but don't over do it.

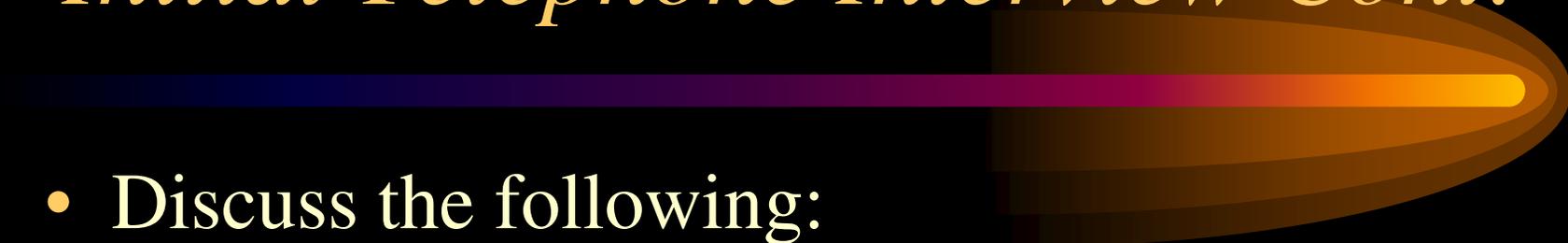
Other Brochures/Packets

- Chamber of Commerce
- Dept of Tourism
- Hospital
- Video Tapes
 - Viewing time should not exceed ten minutes
 - Most info should be on the community
 - Feature current providers

Initial Telephone Interview

- Have candidate describe the type of area he/she wishes to relocate to.
- Have them describe the type of practice opportunity they are looking for.

Initial Telephone Interview Cont:



- Discuss the following:
 - Practice Opportunity
 - Hospital size and number of physicians
 - County size and patient population
 - Demographics of your area
 - Any income guarantee

Initial Telephone Interview Cont:

- If still Interested
 - Talk about the history of the practice-type of procedures performed.
 - Philosophy of current providers

Initial Telephone Interview Cont:

- If candidate is a practicing physician, ask why they are looking to make a change.
- Ask what their program director or peers would say about their :
 - Attitude on availability
 - Bedside Manner
 - Competency

Initial Telephone Interview Cont:

- Do they have a current license?
 - Has there been any disciplinary action taken?
- When are they available to start?
- If still interested, send a package.
 - Verify mailing address and phone number.

Initial Telephone Interview Cont:

- Let them know the next step.
 - You will follow up within 2 weeks if you don't hear from them first.
 - If they show continued interest, you will arrange for a site visit.
 - Check references (even if referral is from a recruiting firm)

Pre-Visit Interview

- Make sure references have been checked.
- Set Dates
- Arrange transportation
- Rental Car
- Hotel

Pre-Visit Interview Cont:

- Have candidate participate in itinerary.
- Make sure spouse is involved
 - Ask what he/she wants addressed.

Pre-Visit



- Complete and mail itinerary to candidate.
- Send itinerary and CV to everyone that will participate in the site visit.
- Confirm travel two days prior to visit.
- Address any concerns or needs

Pre-Visit

- Follow up with everyone that will be involved in the site visit.
- Confirm hotel and any other reservations. (Child-care, real estate agent, etc.)

Pre-Visit

- Form a reception committee
 - Discuss agenda
 - Assign roles to specific individuals.
 - Discuss the “Message” you want to convey.
 - Know who will be discussing contractual issues and compensation package, and that all other members will defer those questions to the assigned person.

The Visit

- The Key is “Visit” not “Interview”
- If you have done your job in the pre-visit interview, the visit does not need to be another interview. It should be a relaxed and social time to get to know each other.
- Most other site visits will be more stressful which will increase your chances of signing the candidate.

The Visit



- One to one and a half days.
- Tour
 - Community
 - Hospital
 - Other Health Care Facilities
 - Schools
 - Other areas of interest on itinerary

The Visit

- Plan functions that fit your community/lifestyle.
- If interested, send candidate away with a verbal or written offer or sample contract.
- Make sure he/she knows you are interested in them.
- Determine their interest in you.
- Set follow up time.

The Ten Most Important Requirements of Primary Care Physicians

- Good medical facility with a competent staff
- Favorable geographic location

The Ten Most Important Requirements of Primary Care Physicians

- Social, recreational and job opportunities for the spouse
- Security and educational opportunities for the children
- Financial security

The Ten Most Important Requirements of Primary Care Physicians

- Call coverage and support (e.g. regular hours)
- Desirable demographics (e.g. a young population for a pediatrician, low Medicare caseload, etc.)
- Proven need for the physician's services

The Ten Most Important Requirements of Primary Care Physicians

- Acceptance by other physicians
- CME and other professional opportunities



Offering The Contract and Negotiating

Offering Contract and Negotiating The Financial Package

- Income guarantee or Salary
- Benefits
- Incentive bonuses
- Sign-on bonuses
- Student loan repayment

Offering Contract and Negotiating



- Be Flexible
- If one area is weak, e.g. low salary, be creative in other areas.
 - No Call
 - 8 to 5 hours
 - No Hospital Work
 - Part-Time

Offering Contract and Negotiating

- There are many reasons you need to be flexible
- Changes in the recruitment environment
- Current providers look at medicine as an occupation as opposed to a lifestyle.
- They want balance between their work life and family life.

Offering Contract and Negotiating

- There is a dramatic increase in the number of female physicians.
- Brings New needs
- Limited hours
- Shared positions

Offering Contract and Negotiating

- Child care needs
- Low or no call

Offering Contract and Negotiating Other Issues to Cover

- Term of Employment
- Duties of Physician
- Working Facility
- Work Schedule
- Vacation

Offering Contract and Negotiating Other Issues to Cover

- Professional Dues
- Professional Liability Insurance
- Life Insurance
- Medical Insurance
- Retirement Plan

*Now that you have them -
How do you keep them!*

- Retention comes before Recruitment and is more Important
- Why?
- Retention cost less than Recruitment
 - In Money (Approx 75,000 to recruit one)
 - In Effort (Approx 29 Months to recruit one)
- Much easier to recruit additional providers

*Now that you have them -
How do you keep them!*

- Starts with the first contact
- Being Honest about the negatives as well as the positives
- Give realistic expectations
- If only one thing is promised and not delivered, trouble is ahead

*Now that you have them -
How do you keep them!*

- Assign a retention coordinator
 - The recruitment coordinator is best choice
- Form a retention committee

*Now that you have them -
How do you keep them!
The Retention Plan*

- Define Your Objective
- Know who is accountable
- Put into play immediately

*Now that you have them -
How do you keep them!
The Retention Plan*

- Stay in-touch
 - Follow up phone calls
 - Don't forget the spouse
 - Have other individuals contact physician and spouse
 - Ask the Questions

*Now that you have them -
How do you keep them!*

The Retention Plan

- Conduct a thorough orientation
 - Hospital
 - Clinic
 - Current Staff
 - Nursing Home/Long Term Care Facilities
 - All other areas of work

*Now that you have them -
How do you keep them!
The Retention Plan*

- Local Medical Community
 - Those he/she will be receiving or giving referrals from/to
 - Professional Meetings/Associations

*Now that you have them -
How do you keep them!*

The Retention Plan

- Local Community/Social
 - Community Activities/Functions
 - Church

*Now that you have them -
How do you keep them!*

The Retention Plan

- The Old Pat on the Back
 - Plan Events
 - Newspaper Articles
 - Local Medical Society Newsletters

*Now that you have them -
How do you keep them!*

The Retention Plan

- Without showing your appreciation, you will be recruiting again.
- Remember, if you satisfy one doc, he tells four others. If he is unhappy he tells eleven. Thus, when you annoy one doc, you must satisfy three just to stay even.

*Now that you have them -
How do you keep them!*

- Conduct Physician Satisfaction Survey's every two to three years
- Insure Retention Committee addresses the following questions:
- Does anyone in the community relate to the provider on a personal level?

*Now that you have them -
How do you keep them!*

- Does the provider feel there is emotional support from partners and the community?
- Are the provider's family and spouse included in social events?
- Is the family happy - do they have a sense of belonging to the community?
- Can the provider find adequate time for family and recreation?

*Now that you have them -
How do you keep them!*

- Are there any unmet expectations, are original contract terms being met?
- Are referral patterns established and appropriate?
- Does the community utilize the provider's services fully?
- Are on-call responsibilities realistic and reasonable?

*Now that you have them -
How do you keep them!*

- Is there opportunity for continuing medical education or teaching?
- Does the provider need additional professional support?

- 
- Covering these issues will help you keep your providers and maintain a professional and pleasant work environment

Conclusion



- I hope you are enjoying the conference and have gained some from the presentation.
- If you have addition questions in the future, please call me at: 919-832-9686 or email to: tucker@3RNet.org

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- THANK YOU!!!!