



EMH Healthcare Lean, JIT Transformation Initiative 2011

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About the Presenters

Miranda R. Maynard is the Employment Supervisor for EMH Healthcare. She has spent the last fourteen years of her career in the area of Human Resources, specializing in the areas of recruitment and employment. The last thirteen years she has been recruiting specifically for the healthcare industry.

Miranda has been leading a talent acquisition team for an organization that has been recognized by the Cleveland, Ohio based organization, Employer Resource Council (ERC), as a NorthCoast 99 Employer for the last ten years. She is the past President and currently on the board for the Greater Cleveland Association of Healthcare Recruiters.

Miranda is a graduate of Bowling Green State University where she received her Bachelor of Science in Journalism. She is certified as a Professional in Human Resources through the Society for Human Resource Management.


David Szary

- “Fell” into recruiting in 1989!
- First half of career, recruited (and managed teams) in “high tech” industry for small, publicly-held “high-growth” staffing/outourced service provider.
- In 1997, founded The Recruiter Academy (www.recruiteracademy.com).
- 2009 - founding partner of **LEAN** (www.leanhumancapital.com), combining Recruiter Academy educational solution with analytic and process optimization experts.
- Worked with thousands of recruiters from over 2500 companies spanning 8 countries, 40 states and 110 different markets throughout the US *including many respected Healthcare organizations.*






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Recruitment Metrics Benchmark Study




- Partnership with NAHCR.
- Benchmark key business metrics and processes (based on Lean Principles) that:
 - Are critical to assessing performance with respect to time, cost and quality.
 - Align with their healthcare organizations key business objectives.
 - Can quantify the recruitment organizations ROI to executive decision makers.

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Benchmark Study – Statistics




- Aggregate Data Information:
 - 60 Participants
 - 450,000 + Aggregate Employee Population
 - 106,000 + Aggregate RN Population
 - 98,000 Hires Overall in 2009
 - 31,000 RN Hires in 2009
 - 3.25M Total Aggregate Applicants applied in 2009
 - 510,00 RN applicants applied in 2009
 - 39% Academic Facilities
 - 36% of the prestigious 'Elite' Honor Role systems participated in our study.*
 - 37% of participants made the US News & World Report 2010-11 Best Hospital ranking.*

*152 of best hospitals (4852) as rated by US News and World report (appear in one of the 16 specialties). 14 Hospitals made the Honor role (high scores in at least 6 of the 16 specialties).


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Benchmark Study Participants

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Benchmark Study Participants



<ul style="list-style-type: none"> Abrazo Healthcare Akron Children's Hospital Atlantic Health Aurora Health Care Banner Health Baptist Health System Barnes Jewish Hospital Baylor Health Care System Beaumont Hospital Bronson Healthcare Group Carilion Clinic Cedars-Sinai Medical Center Children's Hospital Central California Clarian Health Conemaugh Health System 	<ul style="list-style-type: none"> Covenant Health Crittendon Hospital Medical Center EMH Regional Healthcare System Forsyth Medical Center – Novant Froedtert Health Genesis Healthcare Corporation Georgetown Hospital System Hackensack University Medical Center Harborview Medical Center - UW Medicine Henry Ford Health System Holy Cross Hospital Humility of Mary Health Partners Kaweah Delta Health Care District Lake Health Lakeland Regional Medical Center Lee Memorial Health System 	<ul style="list-style-type: none"> McLaren Health Care Memorial Health System (CO) Memorial Health System (IL) Mission Health System Moses Cone Health System New York-Presbyterian Norton Healthcare Ochsner Health System Ottumwa Regional Health Center Presbyterian Healthcare – Novant Rush University Medical Center Saint Mary's Health Care Sanford Health Scottsdale Healthcare Scripps Health WakeMed Health & Hospitals 	<ul style="list-style-type: none"> Seattle Children's Hospital Southwest Washington Medical Center Spectrum Health St. John Health System (OK) St. Joseph's Hospital Health Center Susquehanna Health The Johns Hopkins Hospital University of Arkansas for Medical Sciences University of California, San Diego Health System University of Kansas University of Pennsylvania Health System University of Washington Medical Center - UW Medicine
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Staffing Supply Chain Management




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Staffing Supply Chain Management





GEN Y
BABY BOOMERS
GEN X
ACTIVE PASSIVE UNEMPLOYED


WASTE!

Sourcing Strategy

	35 to 1	65,807
	SOURCING TIME	???
	RECRUITER PRE-SCREENS	15,805
	CANDIDATES ROUTED FOR CONSIDERATION	8,535
49%	HIRING MANAGER VIEWS	4,182
50%	OFFERS	2,091
90%	HIRES	1,882

Hiring Process

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Process Efficiency – Benchmark Analysis

2009 Analysis

Overall	2010 - EMH	2009 - EMH	AVG	Median	25% Lower Quartile	75% Upper Quartile
Applicant to Hire	31 to 1	34 to 1	35	29	47	15
Route to Hire	2.76	2.17	7.4	5.6	7.9	3.6
Pre-Screen to Route	NA	70.0%	54.1%	50.3%	49.6%	64.2%
Route to HM Interview	NA	70.0%	49.1%	43.2%	28.1%	70.7%
HM Interview to Offer	NA	71.0%	49.8%	50.3%	37.3%	59.9%
Offer to Hire	98%	92.0%	90.2%	91.0%	87.7%	95.2%

RN's	2010 - EMH	EMH	AVG	Median	25% Lower Quartile	75% Upper Quartile
Applicant to Hire	31 to 1	15 to 1	21	14	28	8
Route to Hire	1.55	1.33	4.9	4.3	5.6	2.6
Pre-Screen to Route	NA	50.0%	57.2%	57.0%	50.0%	67.7%
Route to HM Interview	NA	95.0%	54.4%	49.5%	36.9%	75.0%
HM Interview to Offer	NA	94.0%	58.0%	55.9%	46.8%	70.1%
Offer to Hire	90%	83.0%	87.8%	90.7%	85.2%	95.2%

- Pre-screen & candidates interviewed our estimates.
- External Hires only.

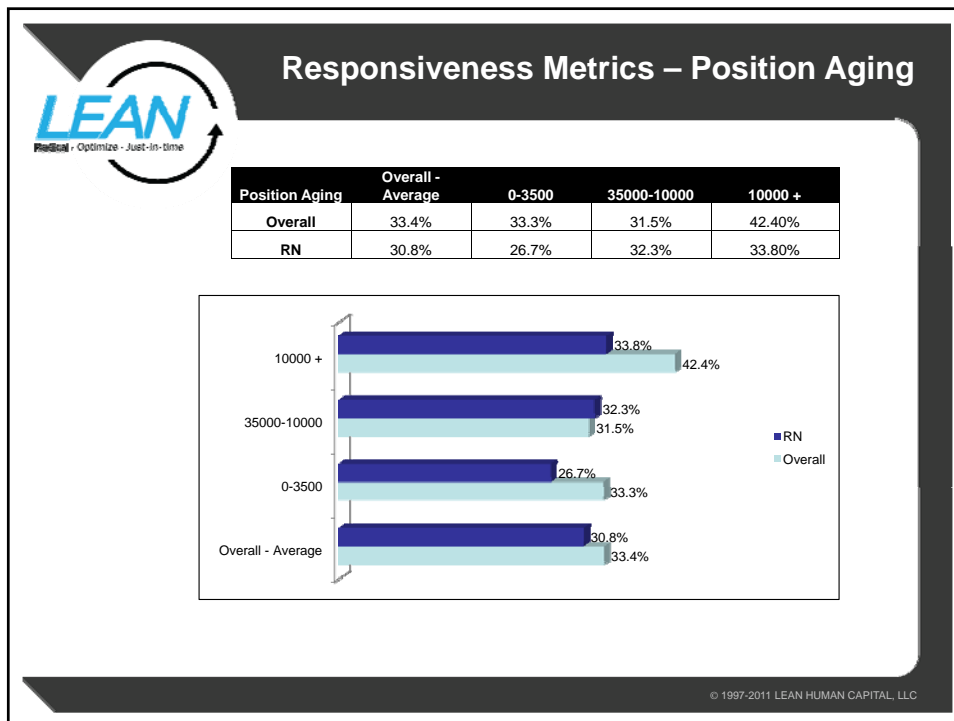
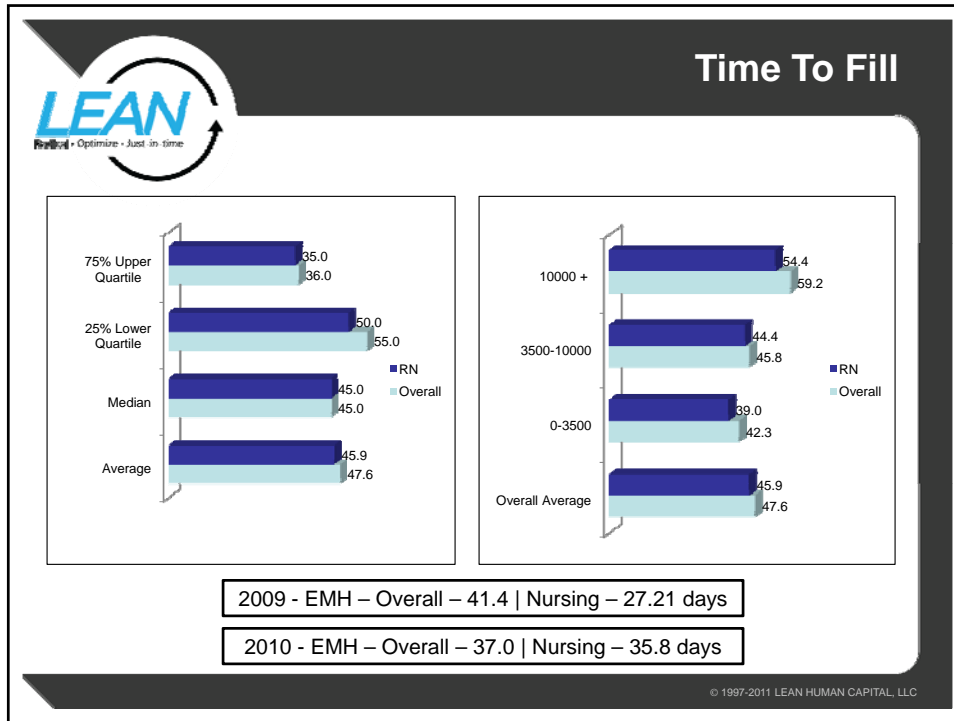
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Time to Fill | Cost of Vacancy




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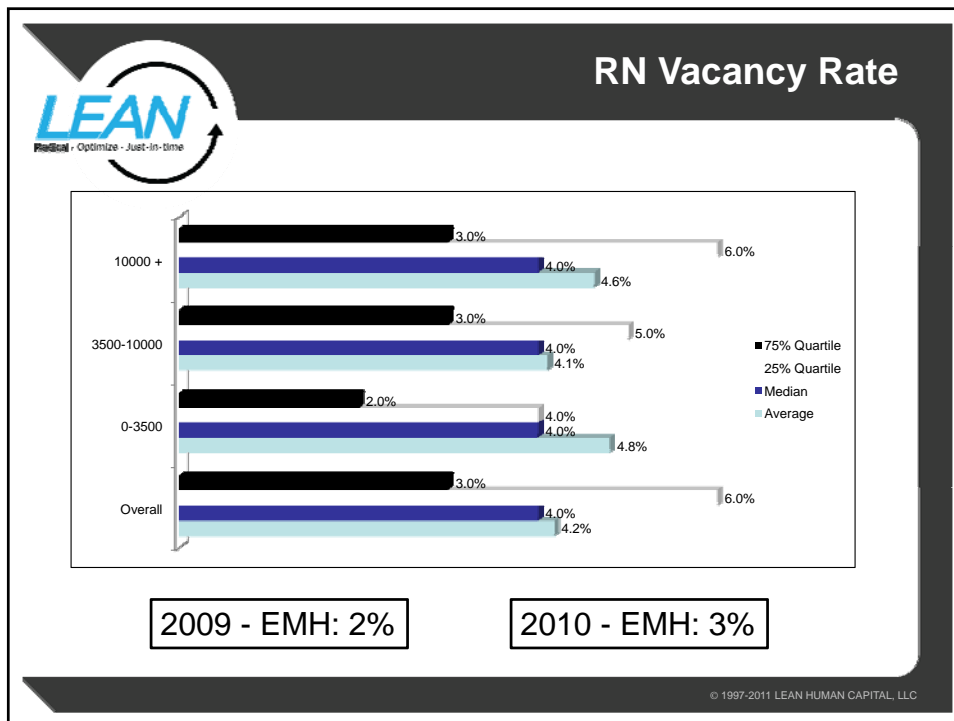



TTF/Aging Positions

2010

Type of Unit	Filled Positions 2010	TTF 2010	Positions filled in Over 40 days	TTF for Positions Over 40 days	Position filled in Under 40 days	TTF for Positions Under 40 days
Med/Surg/Telemetry	44	50.8	9	163.11	35.00	17.25
Ortho/Neuro/Oncology	24	41.6	7	105.00	17.00	12.11
Med/Surg/Pediatrics	25	31	6	78.50	19.00	17.88
EMH ER Services	59	21.4	13	55.69	46.00	11.15
PCC/MS Resource Pool*	30	41.2	8	109.00	22.00	16.50
Cardiovascular Unit	22	29.5	5	85.60	17.00	13.05
Critical Care/ MICU/SICU	35	34.5	9	96.77	26.00	13.00
Amherst Hospital	14	45.2	6	84.33	8.00	15.87
Total/Average	253	35.56	63	96.43	190.00	14.27

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Cost of Vacancy Analysis

Total OT Spend - 2010		\$ 943,292
OT Hours (43.50/OT hour)		21,684
OT Shifts (12 hour)		1807
# of FTE (Avg FTE works 156 shifts/year)		11.58
Call off hours - 2010		52,000
Total Spend - Contractor - 2010		110,421
Total Hours (54.45/rate)		2,027
# of FTE (Avg FTE works 1872/year)		1.08

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Cost of Vacancy Analysis

Critical to Fill/Difficult to Fill Position	Hard Costs	Productivity Costs	Total Cost of Vacancy
	Total Daily Hard Cost of Vacancy	Total Daily Lost Productivity Cost	
RN - OT	\$ 224	\$ 104	\$328
RN – Agency Contractor	\$ 204	\$ 157	\$361

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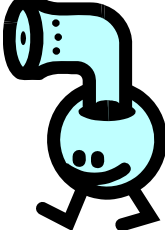

LEAN
Respect • Optimize • Just-in-time

The Journey . . .

“Metrics are Meaningless what you do with them is priceless”

Innovation through observation!

Innovative solutions are often brilliantly SIMPLE!



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LEAN
Respect • Optimize • Just-in-time

Who are we?

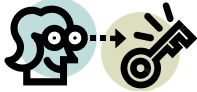
EMH HEALTHCARE
Expert care. Exceptional caring.

- Located near Cleveland, Ohio
- 2400 Employees; multiple campuses
- Two person recruitment team
- Fill approximately 425 positions per year
- Challenged with organizational growth and a small HR staff


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Area's for Opportunity (based on the study results)




- Applicant Sourcing Categories (Top two source of hire categories: EMH Career Site or 'Other')
- Implemented Pre-Assessment tools to Reduce Unqualified Applicants (15,000 applicants | manual processing)
- Focus on Position Aging Statistics
- Define/Separate processes for BAU and CDV positions



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Redefine Applicant Sourcing Categories



- More detailed selections in ATS
 - Evaluate Applicants per Source IN ADDITION TO Hires per Source.
 - Deleted "Other" and "EMH Career-Site" as selections!
- Reallocation of Recruitment Budget based on Analysis
 - Deletion of newspaper print advertising in 2010.
 - Allocation of dollars to online presence.
 - New data provided me the ability to justify recruitment advertising decisions.


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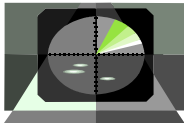
Let's put a stop to the belief that if we are not running print advertisements, then we must not be recruiting!



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Implemented Pre-Assessment Tools to Reduce Unqualified Applicants



Solution 1: Implemented ATS (Position Manager) tool; Pre-Qualification option

- Pre-Qualification Q's added to positions to better screen/source applicants (15k applicants in 2010)
- Applicant are asked “pre-qualifying questions” **prior** to being permitted to apply for a position.
 - i.e. *Do you have current CPR?*

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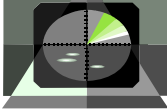


Implemented Pre-Assessment Tools to Reduce Unqualified Applicants

Solution 2: Implemented Healthcare Selection Inventory Assessment Testing (TestSource)

- Behavioral Assessment tool specific to the healthcare industry.
- Focus Quality Time with **ONLY** Quality Applicants!
- Referring **ONLY** the applicants that are the truest “fit” to the EMH Healthcare culture.
- Less interview time required for Recruiters AND Hiring Managers.

NOTE: Launched in March - 2011



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Implemented Pre-Assessment Tools to Reduce Unqualified Applicants

Anticipated Results: Efficient Sourcing and Routing **ONLY** Quality candidates to hiring managers to Interviews should:

- **Decrease** # of candidates Interviewed (vs. manual process)
- **Decrease** in # of candidates Routed to Manager per hire
- **LESS** Turnover!

Our philosophy is that any termination less than 90 days is typically an error in the recruitment/assessment process.


Goal is to have a meaningful decrease in our “termination less than 90 day” category.

Quality Processes = Quality Hires






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Focus on Position Aging Statistics

- Initial Focus - Nursing Division
 - Registered Nurse & Patient Care Technician positions.
 - Positions that were trending over 60 days and /or where avg. TTF was too high!



Goal to fill positions on a more timely basis!

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Focus on Position Aging Statistics

Solution | Implement Service Agreements: Hold Hiring Managers accountable!

- 40-day target for TTF - Implemented 2010
- We are benchmarking against ourselves not against survey averages!


- Recommendation is to add Service Level Agreement to Hiring Manager Performance Evaluation for 2011!

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Focus on Position Aging Statistics

The Reality




- Of a Nurse Manager job at EMH Healthcare is the list of competing demands that include - interviewing, orienting, staffing, payroll, meetings/committees, patient rounding, patient complaints, physician satisfaction.
- We determined that we needed to take a hard look at this job title and determine what needed to be reallocated.
- How do you hold Managers accountable for DTF without offering them the support that they need to be successful?

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Focus on Position Aging Statistics




In Process:

- Re-Established the Patient Care Support Office to handle scheduling and staffing.
- Implementation of Healthcare Selection Inventory to only provide quality applicants to Manager.
 - Less time spent with applicants that are not “a fit”.
- Formalizing Staff Interview teams to assist with Nurse Manager Interviews.



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Where are we now? – Some Interesting data

While overall TTF is 35.76 . . .


RN & Patient Care Tech Positions	Time To Fill	Time To Fill	Time To Fill
	2009	2010	2011 (Jan-Mar)
Med/Surg/Telemetry	23.3	50.8	97
Ortho/Neuro/Oncology	47.5	41.6	45.33
Med/Surg/Pediatrics	33.4	31	18.9
EMH ER Services	22.5	21.4	69.67
Progressive Cardiac Care	44.1	41.2	33.8
Cardiovascular Unit	23.4	29.5	28
Critical Care/ MICU/SICU	21.2	34.5	33.65
Amherst Hospital	68.6	45.2	17

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Where are we now? – Some Interesting data

- Our early 2011 DTF statistics are a mix of improvements AND needs improvements.
- Our 'Push' to fill positions that had been "out there" open over 40 days resulting in high DTF for the beginning of the year.
- On the flip side . . . some Managers just "don't get it" and are being addressed as we provide the information to the CNO.
- We will continue to look at the recruitment processes to determine improvements.




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Define/Separate processes for BAU vs. CDV positions

The “Old Way” of handling CDV positions **doesn’t work**:


- Requisition gets approved
- Position posted
- You wait to see if anyone applies; maybe you advertise and “see what happens”
- You determine after X amount of time that what your doing isn’t working
- Now what?
- Maybe you call a search firm and start the process all over again....






You get the picture.....

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Define/Separate processes for BAU vs. CDV positions

- Eliminating the time and cost associated with the “wait and see” part of the process.
- Support from organization to treat CDV requisitions as CDV requisitions!
 - Authority/Approval to use a retained search firm (at a very reasonable cost ☺).
- Relationship formed with a search firm partner. They are an extension of my recruitment team that I delegate CDV positions to!
 - OT Search Example: Filled position in **13 days!!!**



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What is next in our journey?

- Measure the results of the solutions we have implemented!
- 2nd year participant in the LEAN Human Capital Benchmark Survey.
- Use this data to evaluate processes and to develop future performance improvement initiatives.
- Remember that Continuous Improvement is a journey – not a one time event!

EMBRACE THE JOURNEY!




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Lean Human Capital/NAHCR – Benchmark Study | Benefits of Participation

- It is easy to participate! ☺
- You will receive:
 - Free benchmark analysis of your current staffing process and organizational structure.
 - Identification/recommendations to remove 10+% of waste from your current process.
 - Proposed solution (if relevant) to help migrate to “Best in Class” industry performance.
 - Free access to our 2010 Benchmarking Study.
- You will also have free access to our Lean, JIT Community.
 - Free educational resources, articles, webinars, etc.
 - Opportunity to network with community members to share best practices, ask question, etc.



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