Strategies to Address Human Resources Staffing Challenges
Recruiting, Training and Retaining

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Peggy Lavin, LCSW
Senior Associate Director

Provider Faculty
To continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel, in providing safe and effective care of the highest quality and value.
The Joint Commission’s Vision

“All people experience the safest, highest quality, best-value health care across all settings”
What is Accreditation?

Accreditation is the process of inviting outside experts to conduct a review of your organization to validate and/or improve the safety and quality of care, treatment or services.

Joint Commission accredits entire organization.
“Human resources are the most valuable asset of mental health services. Such a service relies on the competence and motivation of its personnel to promote mental health and provide care for people…”

* Mental Health Policy and Service Guidance Package
Human Resources/Staffing Challenges

All individuals served have the right to receive care, treatment or services from competent staff

- Legal Issues
- Risk Management
- Clinical Outcomes
Joint Commission Accreditation Requirements

Guidance for Good Practices to Address Staffing Challenges
Competent Staff Begins with Leadership

LD. 03.06.01 EP 4: Those who work in the organization are competent...

LD. 03.06.01 EP 6: Leaders evaluate the effectiveness of those who work in the organization...

LD. 04.01.05: Programs/Services are directed by qualified professionals...
Human Resource Management

Revised Chapter

- Effective January 1, 2015
- New Name
- Streamlined and updated to be more applicable to today’s behavioral health care settings.
Framework for Human Resource Management

- Governance Role
- Job Descriptions
- Verification of Qualifications
- Orientation
- Supervision
- Education/Training
- Competency
- Evaluation
Challenge: Ensuring Staff Competency

1. Verification of Qualifications
2. Staff are competent to perform their duties and responsibilities

* Cited about 14% during on-site surveys.
* The Source – Ensuring Staff Competency (January 2014)
Jared Balmer, PhD
Executive Director
WayPoint Academy
jbalmer@waypointacademy.com
Cell # : 801 698 7702
(Residential Treatment Center for Adolescent Boys Suffering from Anxiety and Related Issues)
The Administrator's Nightmare

- I quit
- I’m giving you my notice
- I found another opportunity
- I’ve accepted another offer
- Can we talk?
Why Employees Stay at a Job

1. Exciting work and challenge
2. Career growth, learning, and development
3. Working with great people
4. Fair pay
5. Supportive management/good boss
6. Benefits
7. Inspiring leadership
Recruiting

- Often, the best employees are found via HAPPY, current employees.
- Why are they happy?
- Training, Training, Training.
- Training fosters an environment of exiting work, challenge. It communicates that the leadership is invested in YOU.
The Joint Commission Provides a Framework for Training Through:

- Delineation of Competencies as a condition for employment and post employment training.
- Individual, group, and facility-wide training needs surveys.
- Standardized (and strategic) performance appraisals.
- Through a system-wide Staff Growth and development Policy and Procedure.
Training needs surveys

- The most important thing you can do as a leader/supervisor is: “What keeps you?”
- Top answers will always center around communication.
The Art of Retaining Staff

- Stop guessing what will keep your best employee home and happy. Ask them. (But we know from HR research what the top 5 answers are). Ask them anyway!!!!

- Asking them will make talented people feel valued and provides a map to retain them.

- Exit survey. Aggregate survey.
Patti Juliana, LCSW
Administrative Director, MMTP
Beth Israel Medical Center
Focus on:

STAFF COMPETENCE

With special thanks to David Wilson Kraft
Staff Competence

The competence of staff members is:

- defined by position
- screened in the recruitment and selection process
- assessed initially during the orientation process/probationary period
- evaluated each calendar year in the performance appraisal process
- maintained through annual training updates
- improved through ongoing education based on needs assessments, quality improvement findings and patient care needs

A comparable process is in place for contracted employees (temporary agency or contracted staff).
Staff Competence Review Process

- Position description
- Pre-hire screening
- Orientation
- Initial Assessment of Competency
- Probationary Performance Appraisal
- Yearly Performance Appraisal
- Assessment of Competencies/Skills Checklist
- Licenses/Registrations/Certifications
- Education/Training/Professional Development
Position Description

- Required for all positions
- Competency-based; delineates position duties, responsibilities and required qualifications
- Position descriptions should be reviewed with staff during orientation to the department and as part of the performance management process
- Leadership is responsible for periodically reviewing job descriptions to ensure they are accurate
Pre-hire Screening

- Human Resources Talent Acquisition screens all potential employees to ensure that they meet the minimum licensure, certification, education and experience requirements defined by the position description.

- Pre-Employment Background Investigation

- Pre-Employment Drug Testing

- Department heads/clinic managers/designees interview candidates to assess their ability to meet the position requirements.
Orientation:

- Required for all newly hired associates
- Associates attend hospital-wide orientation on their first day of work, prior to beginning work in the department.
- Departmental orientation is specific to OTP topics and program operations/clinical functions.

Initial Assessment

- Initial assessment of competence is an integral part of department-specific orientation and is completed within the first 10 days.
- Is documented on the Orientation Checklist
**Performance Appraisals: Probationary and Yearly**

- Probationary period varies depending on the position.
- Probationary appraisals are completed prior to the completion of the probationary period for any associate (union and non-union) in a new position (new hire, transfer, promotion).
- Union staff appraisals: evaluated in month of date of hire using paper format.
- Copy of appraisal kept in department file and original sent to Human Resources.
- Non-union appraisals: completed, using iPerformance during first quarter of the calendar year for performance during the previous calendar year.
- Exceptional or unsatisfactory performance requires explanation and remediation plan (and re-assessment), as appropriate.
- Timeliness of appraisals is essential.
Assessment of Competencies/Skills Checklists

- Part of performance evaluation for all positions involved in patient care

- Completed as initial assessment of new hires and transfers prior to the associate providing patient care and also done at least once each calendar year

- Assessment of Competencies/Skills Checklists are created by the department and are position-specific

- Skills being assessed should be reviewed and revised as needed
Education/Training/Professional Development

- The department maintains records of staff educational activities (such as completion of yearly Core Competencies, in-services, extra-departmental training, conferences, etc.)
- The information is updated throughout the year, incorporated in the performance appraisal process, and placed in the associate’s department file.
Staff Competence Documentation Audits

- **Job Description:**
  - In every file; correct and current
  - Ensure that **required** licenses/registrations/certifications are correct

- **Performance Appraisal**
  - Have current and those since last survey available
  - Timeliness
  - Completeness: fill in all required sections; signatures; dates
  - Appropriate appraiser
  - Exceeds/Needs Improvement requires explanation and remediation (reassessment)
Staff Competence Documentation Audits (Cont’d)

- **Probationary Evaluation (Timeliness)**

- **License/Registration/Certification**
  - Primary Source Verification (online or via telephone)
  - Print out at time of renewal and prior to expiration; no gaps in documentation
  - If missing, print out PSV immediately
  - “Original seen” with signature and date
2014 Upcoming Webinars

**July 9:** An Orientation to the Accreditation Requirements

**August 13:** Overcoming Challenges to Person-Centered Care, Treatment or Service Planning

**September 17:** Roadmap to Accreditation: The Path to Success

**November 5:** Strategies for a Successful Survey

**Note:** Register for webinars or view already conducted webinars at jointcommission.org/BHCS
The Revised Human Resource Management Chapter will be thoroughly discussed with opportunity for all your questions to be answered by our standards interpretation expert.

Joint Commission
Behavioral Health Care Accreditation

The Joint Commission’s Gold Seal of Approval™ means your organization has reached for and achieved the highest level of performance recognition available in the behavioral health field.
Behavioral Health Care Accreditation Team

Tracy Griffin Collander, LCSW  
Executive Director  
tcollander@jointcommission.org  
630/792-5790

Peggy Lavin, LCSW  
Senior Associate Director  
plavin@jointcommission.org  
630/792-5411

Diana Murray, RN, MSN  
Regional Account Manager  
dmurray@jointcommission.org  
630-792-5295

Megan Marx, MPA  
Associate Director  
mmarx@jointcommission.org  
630-792-5131

Darrell Anderson  
Senior Specialist  
danderson@jointcommission.org  
630/792-5866

Peter Vance, LCPC  
Field Director  
pvance@jointcommission.org  
630/792-5788

Merlin Wessels, LCSW  
Standards Interpretation Group  
630/792-5899