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The article by a seasoned professor and practitioner in health education and training Professor Eileen M Coughlin focuses on innovative practical strategies in the orientation and training programs for new health care employees. Based on her practical experience of reengineering the New Employee Orientation program, the author develops a three phase onboarding process, focusing on specific features of healthcare. The ideas and best practices described in the article will be of great interest to healthcare managers, scholars and practitioners in Ukraine.

У статті досвідченого професора і практика у сфері освіти для галузі охорони здоров'я професора Ейлін М Кофлін увага зосереджена на інноваційних практичних стратегіях програм орієнтування на робочих місцях нових працівників охорони здоров'я. Грунтуючись на власному практичному досвіді розробки програм орієнтування нових працівників, автор розробляє трифазний процес адаптування нових працівників, орієнтований на особливості сфери охорони здоров'я. Ідеї та передовий досвід, описані в статті, становитимуть значний інтерес для керівників закладів охорони здоров'я, науковців та практиків в Україні.
A PRACTICAL, INNOVATIVE APPROACH TO EFFECTIVE NEW EMPLOYEE ORIENTATIONS IN HEALTHCARE ORGANIZATIONS

New Employee Orientation – Key to Success

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There is a need for innovative, yet, practical, cost conscious strategies in the orientation and training programs for new health care organization employees (Brown, 2014). This discussion will point out how to acclimatize newcomers into the established communities of departments and suggest novel, inventive ways that will help the new talent collaborate quickly with seasoned staff. New Employee Orientation (NEO) is the foundation of the socialization and transition to new positions by health care organizations professionals. The main objective of NEO is high employee engagement.

Starting a new job can be stressful. This can be addressed with proper onboarding of employees that includes the instillation of clear job expectations and a basis for understanding entire organizational requirements and processes. Onboarding is the overall process of providing support for new hires as they are integrated into the entire organization and to their individual departments. NEO is one part of that practice and the best opportunity for new staff to internalize the vision and values of the health care organization. An effective initial training for new staff can be cost-effective and reap dividends in retention by providing specific job-based applications that ease the transition to daily work and clinical practice by employees (Shih, Lee, Liu & Mills, 2013).
Onboarding can be said to have three phases, a compilation of pre-orientation tasks, actual NEO activities and follow-up stratagems for each employee. Pre-orientation can include Human Resources paperwork, computer access, online course completion for mandatory compliance proficiencies, and assigning a mentor for each new employee. Mentor programs can enhance the integration, engagement and success of new employees. The goal of developing resilience and adaptability can be reached by having supervisors and managers aligned with the process and held accountable for individual employee development planning. Succession management begins in NEO.

While onboarding is a continuous process, the heart of it lies with a formal orientation for newly hired staff. Often deployed in multifaceted formats, this includes familiarization with the institution, tours, policy and procedure recitations, plus copious introductions to the executive team. The program defines shared goals of the organization, outlines the emergent employee’s role in the organization, and lays out specific expectations. The orientation may include a section on specific benefits and an explanation of the Employee Assistance Program (EAP). NEO can also provide an opportunity for new employees to provide input to the company from a fresh perspective.

**Why is Health Care Different?**

Health care organization employees have a different core focus from many other businesses and require distinctive personal and program accountabilities. The health care work environment is distinguished by the need to balance the ideals of patient-centered care with employee engagement and satisfaction. Onboarding new employees in health care settings must also reflect the recent trends of increased technology as evidenced by electronic medical records, a constantly reforming regulatory environment, and the transactional shift to serving an aging population. Research shows that hiring health care providers with diverse ethnic and racial backgrounds can be
linked to enhanced access and better-quality care for patients who are marginalized or part of a minority (Bristow, Butler, & Smedley, 2004).

Customarily, many health care organizations are tradition bound and bureaucratic by nature; yet, it is wise to embrace change and the current diverse generation of workers to include elements of fun, innovation and creativity into newly hired staff orientation programs (Rizzo, 2016).

**Best Practices for Effective Health Care Orientations and Onboarding**

Key questions need to be answered to deliver an effective orientation as part of the complete onboarding process. A collection of best practices can provide substantial jumping off points for the revamping of the current program. Orienting health care organization employees involves strategic planning, preparation, integration, engagement and an evaluation of the process for continuous improvement purposes. Adult learning theory applies to NEO, particularly in healthcare, as the participants prior experience and goals for self-advancement need to be taken into account when designing the training (Taylor, & Hamdy, 2013). The following are specific ideas that have been used successfully in various settings.

Competency-based orientation segments can facilitate demonstrating skills (such as different types of fire extinguisher use) and ensure quality care through feedback and evaluation loops. Knowledge and skills can be transmitted innovatively using enterprising education components that are integrated throughout the orientation period, for example: reader's theater, jeopardy type games, video games, and even an escape room (Freudig, Tiggelaar, Richardson, Gardner, & Boyle, 2019).

Health care staff training requires leveraging technology to scale resources and break up the mandatory subject requirements into smaller modules. The use of shorter tutorials and possibly YouTube video content is a demonstration of this concept. Using patient
experience simulations (blindfolds, ear plugs, use of wheelchair, crutches or canes) can enhance the connection to empathy and clinical care.

Splitting the onboarding program into various components and locations can aid education and skill development. Department orientation can cover work place specific topics such as emergency exits, location of the Automated External Defibrillators (AED) and fire extinguishers. The Employee Handbook can be online and searchable. Technological advances allow creation of an iBook (Apple software) which can be downloaded on the iPhone to provide instant training opportunities.

A dedicated new employee portal website can contain concise links to the appropriate site on internet or intranet. There can be links to the 30, 60, and 90-day evaluations along with other new staff acclimatizing communications. The information on interpreting benefits and union information can be uploaded and access restricted to the appropriate audience. Interactions, announcement and specific topic channels can be arranged on a collaboration software such as Slack. This can also provide a historical database for later reference.

In order to substantiate evidence-based training goals during onboarding, the use of online certification and tracking can assist with transcripts for Joint Commission audits. For example, RN licenses can be entered into a Learning Management System (LMS) like HealthStream and easily traced, ready for Joint Commission audits. The use of a 90-day checklist that carries through an employee’s first three months can be very helpful to track progress. After 30 days of learning, the new person should advance at 60 days to building competency and then on to demonstrating expertise after 90 days. Surveying new employees at the 30, 60, and 90 days thresholds can garner helpful feedback for program improvements. A schedule of short and long-term activities that culminate in a celebration at one year can increase the new employee’s self-confidence, reinforce learning and enhance patient safety.
A Look Ahead

Despite the many challenges of guiding new employees through the tangle of organizational life, there are many advantages of a properly planned and executed onboarding. When a re-engineered orientation emphasizes mission critical content, focusses on creating a lasting impression that remains with new employees, the results are profound and cost effective. Cultivating the initial investment in a brand-new employee extends their average tenure and their productivity. Above all – patient safety and satisfaction can become an accomplished goal when employee engagement is high, and the new hires are welcomed into the fold supported by a robust New Employee Orientation and onboarding program.

REFERENCES

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