ANEW PARADIGN FOR HRING 101



We all know the right people can make the team, project or company wildly successful, while the wrong people can impede success at best, and create a contagious, toxic environment at worst. Despite this, in healthcare, traditional thinking about hiring, recruiting & selecting people is often oldfashioned, out of date, & ineffective.





Old paradigm: One person has the power

Either the hirer has the power & the applicant is doing the audition (hiring receptionists)



Or the applicant has the power & the hirer is doing the wooing (as in physicians)



POWER IMBALANCES impede honest self-disclosure, making genuine conversations impossible.

When we try to woo someone, we don't share the true stresses of the organization, or difficulties of the job; when we have power over an applicant, they don't share their true concerns, desires, strengths or limitations. In both cases, both sides personhoods are neutralized; the hiring activities become transactional only.





This is the same things as what happens in healthcare interactions if the patient-provider relationship is power-based, not partnership based.

New paradigm: Everyone comes to the hiring table as equal partners

Regardless of the perception or reality of supply & demand. The goal is to connect as people, shoulder to shoulder, and to consider together whether it is the right fit for both parties.



Old Paradigm: Hiring fast, or warm-body hiring

Those of us in healthcare, especially in the safety net, are used to scarcity: scarcity of time, money, and staff.



This scarcity, coupled with beliefs that delivering healthcare is mostly transactional, often causes quick hiring of anyone who can carry out the transaction.





New Paradigm: Hire Slow.





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Old Paradigm: Take what we can get with medical providers

Because: there is a HUGE physician shortage in the US; particularly of primary care providers.

New Paradigm: The US has the most physicians per capita of any country in the world. Whole person care means we can think differently than we have in the past, about healthcare delivery.



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Old Paradigm: Clinical staff need more skills & need to be hired more cautiously than 'non-clinical' staff.

#4

New Paradigm: All staff that touch or talk to patients are clinical staff. We know that patient experience is directly related to patient adherence & health outcomes.



Receptionists, referral staff and medical assistants have an enormous impact on patient experience, significantly influencing patient self-disclosures about important health information, no-shows, adherence to recommendations, & ultimately, health outcomes.

Hiring the right fit for these positions is as important or more so than hiring the right provider.



Old Paradigm: Anyone can be hired to be a receptionist.

New Paradigm: Receptionists spend the most time with patients, oversee the only public space in the clinic, manage the room that has the **biggest impact on patient** experience, and are the first & last impression of the organization.



They greatly impact patient experience, and hiring well for these positions is arguably more important than for any other.



(0) Consider the radical idea of making this one of the higher paid positions in your organization.



Old Paradigm: Work is work, leave your personal life at home.

Often interviews are characterized by the rigid roles that each side plays, and the limited areas of conversation allowed.



This mimics an old patriarchal split between work and home, that didn't work that well in the 50's, and certainly doesn't work now.



New Paradigm: We can't do whole person care without whole person employees.

Accepting and inviting people to bring their whole selves to work means purposely working to connect at the beginning of interviews, allowing for vulnerability, sharing personally about ourselves if we feel comfortable, and encouraging our partner who we are interviewing to do the same.



Old Paradigm: Hire for experience & technical skill

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New Paradigm: Hire for interpersonal relationship skills.

Hire for: a beliefs that relationships are of primary importance; an understanding that healthcare team relationships deeply impact patient safety and health outcomes; ability to tolerate and resolve conflict; willingness and ability to build and maintain genuine relationships, tolerance for ambiguity, fit/match with the organizations cultural norms.

Technical skills can always be taught.



Old Paradigm: Hire when a position is vacated.



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Reactive hiring is when we wait until a position is open, then post a recruitment notice for that position.

WE NEED YOU



New Paradigm: Continuous, open recruitment, for as many positions as possible.

Progressive organizations engage in general open recruitment, sharing their values & company culture, and inviting people who are interested in them to apply. With this strategy, there is consistent seeding & relationship building with the community, & an opportunity to develop a pool of possible applicants, as hiring becomes possible. It is also an opportunity to share about the organization with others, whether or not the outcome is hiring.





Old paradigm: Leaders make hiring decisions.

New Paradigm: Those who are going to be working closely with the new hire are the most important people to engage in the fit/match assessment process & in decision making.

They are also the ones the potential new person should shadow & otherwise spend time in conversations to hear what the job is really like.

Humanizing Health Care Includes Humanizing the Hiring Process: every phone call or interview can be an opportunity to connect as humans, regardless of the outcome.

For more useful resources please visit:

www.emorrisonconsulting.com

