

New healthcare employees are an important source of talent for the industry. And when they join your organization, you need to remember while they're new to the job, they're often also new to the workforce, too.

Luckily, human resources can do its part to get these new employees up to speed and acclimated to their roles in the organization. It all starts with a robust onboarding program.

Here are 10 tips you can use in your healthcare organization's new hire orientation and onboarding procedures to build and get your new employees off to a great start.

1. Begin with an Open, Welcoming Atmosphere

The first step in a stellar onboarding process for new employees is likely something you already do with all hires. Introducing your new hires to key people around the organization and demonstrating how excited you are that they are part of the team is always an important first-day activity. This can be even more important for who tend to desire recognition and social support.

2. Review the Job Description and Expected Performance Goals

This step may seem unnecessary — after all, your new hires should know the job they were hired to do,

right? Reviewing job duties and expected performance at the very beginning of employment can help improve ongoing communication, set benchmarks for success, and establish parameters to recognize employees who meet their responsibilities.

3. Get Paperwork Out of the Way Early

No one likes mountains of paperwork on the first day of their new job, and technology-friendly millennials like it even less than older workers. Consider using an with onboarding functionality. Besides making your recruitment process easier, these systems allow new hires to complete documents like HIPAA acknowledgments and tax forms prior to their first day.

4. Leverage Technology in the Onboarding Process

New hires are used to learning through technology such as video, and incorporating technology into your onboarding process can be an efficient and comfortable way to provide your new hires with key information about your organization. For example, use short videos they can refer to as needed to complement in-person training.

10 Tips for Onboarding (from page 1)

5. Provide Opportunities for Accomplishment Early

Millennials have a different perspective on their career path and advancement opportunities than older generations. According to a survey conducted by Addison Group and Kelton, 40 percent of millennials envision a promotion every year or two. While this is probably not a possibility for every new employee you hire, you can help foster employer loyalty by focusing on and providing short-term growth opportunities that acknowledge employees' accomplishments early on. Be sure to include the details of any recognition program in your onboarding information.

6. Emphasize Social and Emotional Support Networks

Particularly within the healthcare industry, many employers focus their attention on building recent graduates' technical and clinical skills. These skills are certainly key to long-term success, but millennial employees often require additional support from a social and emotional perspective. for your employees and encourage new healthcare grads to become part of your organization's community.

7. Establish a Formal Mentorship Program

One great way to provide employees with the social, emotional, and technical support that they need in their first months on the job is through a mentorship program. To illustrate this, a study in the Journal of Continuing Education in Nursing found that boosted young nurses' competency and integration into their organization's practice. Moreover, a highly structured mentorship program for new healthcare grads has been demonstrated to lower turnover and increase employee engagement.

8. Make It Easy to Ask Questions and Receive Answers

Here again, technology is key. While you should certainly make yourself and key member of your organization available to new hires, new employees who you bring on will likely want to take advantage of any technological solutions available. An online portal with videos, documents, and the ability to chat with other employees is a useful tool.

9. Schedule Regular Check-Ins over the First Few Months

The of employment are crucial for building employee engagement. Regular one-on-one checkin meetings give you the opportunity to supply new hires with important feedback, as well as recognition that can motivate and engage. Such meetings can also provide important support for the employee and demonstrate your investment.

10. Keep an Eye Out for Early Signs of Unhappiness

Knowing that millennials are more likely than older generations to leave for a new position early on in their tenure can help you prepare to intervene before your new hire accepts another job offer. As part of regular one-on-one meetings, be open in discussing job satisfaction, and train supervisors to be aware of potential as well.

Remember that the steps you take to welcome new employees into your organization can pay dividends in terms of their ongoing engagement, dedication, and loyalty. Because healthcare can be such a taxing environment, building engagement early can help you ensure that your new healthcare grads stay committed to providing high-quality care.





Missouri Association of Nursing Home Administrators

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Breaking Compliance News Blog

Phase III: Do SNFs Need a Compliance Officer? Absolutely.

by Margaret C. Scavotto, JD, CHC

In July 2019, CMS published a proposed rule that would modify the Compliance and Ethics program aspects of the Phase III Long-Term Care Facilities Requirements for Participation (the "Proposed Rule").

Some of these proposed modifications removed requirements to assign compliance roles to nursing home personnel. For example, CMS proposes eliminating the following requirements:

- All nursing homes must designate "an appropriate compliance and ethics program contact to which individuals may report suspected violations."
- Chains of five or more nursing homes must designate a compliance officer for whom the compliance program "is a major responsibility."
- Chains of five or more nursing homes must designate compliance liaisons at each facility.

If made final, the changes will go into effect one year after the rule goes into effect.

CMS' proposed removal of the compliance officer, compliance liaison, and compliance reports contact requirements might have some nursing homes jumping for joy. After all, fewer regulatory requirements likely means fewer F-tags on your state survey. While we can likely all agree that fewer F-tags are a good thing, nursing homes would be wise to designate someone as compliance officer.

Keep in mind that the Proposed Rule has not yet been made final, and, as of November 28, 2019, SNFs are expected to comply with the original Phase 3 compliance requirements at 42 CFR 483.85. But, what if the Proposed Rule becomes final?



Why you still need a compliance officer

If the Proposed Rule is made final, CMS will not require nursing homes to have a compliance officer, and you cannot be penalized in state survey for not having one.

But the OIG still expects all nursing homes to have a compliance officer:

- The OIG Compliance Program Guidance for Nursing Facilities lists "The designation of a compliance officer and other appropriate bodies (e.g. a corporate compliance committee)..." as one of the seven elements of an effective compliance program.
- This guidance also states: "Every nursing home provider should designate a compliance officer to serve as the focal point for compliance activities... Designating a compliance officer with the appropriate authority is **critical to the success of the program...** (emphasis added)

Nursing homes who decide not to designate a compliance officer would be acting contrary to long-standing OIG guidance and expectations.

Designating a Compliance Officer (from page 4)

The good news is, the OIG does **not** expect nursing homes to hire a full-time compliance officer if that is beyond their means:

- "This responsibility may be the individual's sole duty or added to other management responsibilities, depending upon the size and resources of the nursing facility and the complexity of the task."
- "A small nursing facility may not have the resources to hire or appoint a full time compliance officer... In any event, each facility should have a person in its organization (this person may have other functional responsibilities) who can oversee the nursing facility's compliance with applicable statutes, rules, regulations, and policies. The structure and comprehensiveness of the facility's compliance program will help determine the responsibilities of each individual compliance officer."

In other words, nursing homes may designate an existing employee, who has other duties, to perform the role of compliance officer. **Effective training, software tools, and use of consultants** can help support this person and help them succeed.

What about compliance liaisons?

CMS' Proposed Rule removes the compliance liaison requirement and replaces it with a requirement that chains of five or more nursing homes "have a more formal program that includes established written policies defining the standards and procedures to be followed by its employees" and "develop a compliance and ethics program that is appropriate for the complexity of the operating organization and its facilities."

It probably does not surprise you that the OIG guidance for nursing homes recommended "compliance liaisons" in 2000:

- "For multi-facility organizations, the OIG encourages coordination with each facility owned by the corporation through the use of a headquarters compliance officer, communicating with parallel positions or compliance liaison in each facility or regional office, as appropriate."
- "Multi-facility providers also may consider appointing one compliance officer at the

corporate level and designating compliance liaisons at each facility. In any event, each facility should have a person in its organization (this person may have other functional responsibilities) who can oversee the nursing facility's compliance with applicable statutes, rules, regulations, and policies."

Just like compliance officers, the compliance liaisons can also have other job duties.

The OIG views compliance officers (and liaisons) as necessary for effective compliance programs. Appointing a compliance officer is also, simply, a good idea. A compliance program without a compliance officer is like a drive-through restaurant with nobody at the window to take your order. Can you do that? Sure. Will it work? No. Do you technically have a drive through window? Yes! How is it going to go? What is the point of investing in a compliance program — and not setting it up to succeed?

I hope the OIG never shows up at your organization to investigate false claims, kickbacks, overpayments, or a whistleblower complaint. But if they do, they are likely to ask the first employee they see: "Who is your compliance officer?" And this single response could mean a lot for your future.



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Partnering for Quality

Health Quality Innovators (HQI) is the new federally-designated Quality Improvement Organization (QIO) for Missouri. HQI recently launched the Health Quality Innovation Network (HQIN) to provide no-cost access to personalized quality data reports, educational resources, and long-term care experts on topics related to quality measures, HAIs, averse drug events, dementia care, opioid prescribing practices, readmissions, avoidable ED visits and quality improvement.

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