Leadership Development

Reducing the new employee learning curve to improve productivity

By Krishna Lynch, RN, BSN, MJ, CPHRM, and Gia Buckner-Hayden, MPH, MA

Effective onboarding is essential to the acclimation and socialization of new healthcare risk management professionals within their new organizations. This acclimation process is a natural extension of employee orientation training. Benefits of effective onboarding include maximizing new employees’ full productivity in core functions, thereby recouping the organization’s return on investment, and positioning them for enduring success.

INTRODUCTION

It is your first day on the job. You spent six hours in an employee orientation program reviewing HIPAA privacy and security compliance, fire safety, risk management, infection control, emergency management, and other administrative procedures.

You arrive at your office following several informal introductions of new colleagues. On your desk sits an employee manual, an operational policy and procedure manual, and a healthcare risk management department manual. Your time and energy are focused on learning the ropes and surviving in your new organization. Although you promised to revisit them, all three manuals eventually find themselves on a shelf in your office, where they collect dust.

Does this experience sound familiar? Seventy-six percent of companies either do or plan to implement a process for new employees,(1) although many programs simply give information.(2) Twenty hours of information are squeezed into an intense half-day training program.(3)

Rex Castel, senior vice president of human resources of State National Bank of Lubbock, Texas, articulates a fairly common new employee orientation experience:

“You come in and sit down in monumentally uncomfortable chairs and are bombarded with papers, rules, policies . . . you know those “this is how you get fired” sort of comments. If it’s a big employer and a big group of new hires, someone stands in front of a PowerPoint slide show and reads the slides to you.”(4)

Given these common practices, new employees generally perform functionally at the three-month period: they understand their organization’s rules, regulations, processes, and governance. However, according to Anderson, Cunningham-Snell,
and Haigh, they are not yet fully equipped for enduring success.(5) Moreover, their knowledge about rules, regulations, and processes does not position them to be fully functional by the sixth-month point, the end of a typical probationary period.(6)

If new employees do not acclimate socially, even if they are experienced professionals, the probability of their reaching full productivity within their organization declines dramatically, according to Anderson, Cunningham-Snell, and Haigh.(7) Socialization is a key component of an onboarding program.(8) It bridges the potential of a new employee’s talent with the fulfillment of his or her potential as he or she begins to actualize full productivity.(9) Unless organizations are proactive and intentional in this respect, many new professionals will not develop the personal connections required to be successful in their role.

Hunter Douglas found that the primary reason for 70% of its turnover within the first six months was that new employees never felt connected to or engaged at their new company.(10) Employees who are not socialized are more likely to leave an organization. This is especially critical during their first 30 to 180 days. New employees decide within their first 30 days whether they feel welcomed in an organization(11) and within the first six months whether they will stay.(12)

**Healthcare risk management professionals’ role**

Healthcare risk management professionals face unique challenges as well as opportunities as new employees in a healthcare organization.

Their role is critical given the increase in legal and regulatory mandates, greater emphasis on transparency and performance improvement, and healthcare reform efforts. The healthcare risk manager’s role in fact is critical to the enduring success of healthcare organizations.

When a professional serving in an essential role does not reach full productivity, the organization risks a reduction in its return on investment(13) and the benefit of creativity and new ideas that are often generated by new employees.(14) For this reason, healthcare risk management professionals require an organizational commitment to their onboarding process as new employees, as well as their overall professional development. That level of support will position them to learn the culture of the organization, develop and foster relationships early, and become an expert on risk management and patient safety issues.

Given the human capital risk exposure, there is a significant business case for acclimating new employees quickly and appropriately. Human capital risks may include employee selection, retention and turnover, absenteeism, and compensation.(15) If employees leave, they take with them the human capital the organization has invested in recruiting and training them. Not only is a critical role now vacant, the organization must reinvest resources in recruiting and training a new employee.

According to Rollag, Parise, and Cross, new employees “are typically a net drain on productivity, drawing a salary, incurring training and orientation expenses, and consuming co-workers’ time without providing much in return.”(16) This net loss is inherent in the new employee process, as an organization can expect to see a return on its investment by means of productivity from that employee. Unfortunately, many organizations do not see that return because an employee either fails to reach full productivity or leaves the organization before he or she has an opportunity to contribute in a way that affects the organization’s performance outcomes. The literature suggests that the culprit is a lack of socialization during the acclimation process.(17)

In addition, when healthcare risk management professionals do not achieve full productivity or leave their organization within a short time frame, healthcare organizations may be vulnerable to risks in the legal and regulatory, strategic, human capital, and operational and clinical domains. (18) Such risks may include medical malpractice and liability, brand and reputation risks, non-compliance with laws and regulations, inefficiency, and employment practices issues, to name just a few.(19)

According to the American Society for Healthcare Risk Management (ASHRM) 2008 Member Survey, healthcare risk management professionals perform risk identification and evaluation (62%), patient safety (48%), claims management (31%), and loss prevention (21%) in a variety of healthcare settings.(20) More specifically, they are responsible for identifying organizational risks and exposures, managing those risks, administering a comprehensive risk management program, monitoring the effectiveness of that program, and promoting quality and safety for patients through loss-control activities.(21)

Given their contributions and opportunities for significant financial benefit to organizations, it is vital that those organizations provide a framework to reduce the new risk managers’ learning curve.(22)

Finally, new talent generally comes with new ideas, processes, strategies, and leadership potential. However, new employees generally don’t have enough influence to move their ideas into the mainstream of their organization’s...
culture. By the time they are fully acclimated, they often have either forgotten or traded in their new ideas for groupthink,(23) a type of thought exhibited by group members who try to minimize conflict and reach consensus without critically testing, analyzing, and evaluating ideas.

A comprehensive onboarding process will allow employees an opportunity to share new ideas early before they are lost due to a time lapse or groupthink.

Consider a few case studies:

• Employees who participated in a structured onboarding program were 69% more likely to stay with their company after three years than those who did not go through a program.(24)

• Hunter Douglas discovered that upgrading the onboarding process reduced turnover at six months by 54%. Other results were better attendance and greater productivity.(25)

• Hunter Douglas’s new onboarding process resulted in a 192% reduction in turnover rate and in the recruiting budget by $28,000.(26)

• A 2003 Hewitt Associates study revealed that companies that invested the most in onboarding new employees experience the greatest levels of employee engagement.(27)

Professional status of healthcare risk management professionals

The commitment to the development of healthcare risk management professionals becomes even more important considering that their role is vast and varied. There is neither a defined career path nor a traditional or universal educational path, aside from the contributions of ASHRM.(28)

Healthcare risk management professionals come from diverse experiential and educational backgrounds.(29) In addition, their role has not been subject to the same level of scientific research or professional literature, with the exception of the contributions of ASHRM.(30) Hence, the healthcare risk management professional’s areas of responsibility are often driven by his or her respective organization’s needs, culture, philosophy of risk, and demands of the external healthcare environment.(31) Consequently healthcare risk management professionals often do not have the advantage of the natural support systems that evolve from clearly defined educational programs and career structures.

Understanding the unique position of healthcare risk management professionals emphasizes the need for a comprehensive onboarding program with a focus on socialization.

Average tenure and turnover rates

Between the ages of 18 and 37, the average American changes employers approximately 10 times.(32) According to a 2003 Mellon Learning Curve Research Study, on average it takes 20 weeks for professional staff and 26 weeks for executive staff to reach full productivity.(33)

The U.S. Department of Labor in 2002 reported that over 33% of employees have been with their organizations for less than two years and over 25% have been with their organizations for less than one year.(34) These findings match the experiences of healthcare risk management professionals. According to ASHRM’s 2009 Compensation Survey,(35) 25% of respondents reported that they have been in their current position for one year in the following professional levels:

- Risk Manager Level 1 (N = 55)
- Risk Manager Level 2 (N = 81)
- Chief Risk Officer (N = 25)
- Twenty-five percent of Risk Manager Level 3 (N = 79) professionals reported that they have been in their current position for 1.8 years.(36)

Recommendations for onboarding

Considerable debate has ensued regarding best practices and efforts to measure an organization’s return on investment for acclimating new employees. Onboarding processes can be time-consuming and require significant resources, and the healthcare industry is no exception. However, given the business case for a comprehensive onboarding process, the real question is: Can organizations afford not to invest in a comprehensive program?

The goal of the onboarding process is to reduce the learning curve of healthcare risk management professionals and jump-start their productivity. These benefits allow organizations to reduce their exposure to human capital risks and take advantage of their expertise and new ideas. In addition, an effective program may position healthcare risk management professionals for enduring success within their organizations while increasing their credibility and marketability. (See Exhibit 1.)

How do organizations cultivate healthcare risk management rapid onboarders? Rollag, Parise, and Cross defined rapid onboarders as “newcomers who are able to weave themselves into the social fabric of an organization much
faster than their colleagues.”(37) Their recommendation is simple: a relational approach, not an informational and resource-awareness approach, leads to rapid onboarders. Thus, they will be able to influence decision making and improve patient safety outcomes if they are socialized properly. They will also have the courage to share ideas.

**Importance of socialization**

Rollag, Parise, and Cross identified the following myths that many organizations have adopted as assumptions for onboarding new employees:(38)

- The best newcomers can fend for themselves.
- A massive information session allows newcomers to obtain what they need.
- Cursory introductions are all that new employees need.
- Initial assignments should be small, compact, and quickly achievable.
- Mentors are best for helping newcomers integrate themselves into the organization.

They recommend that organizations abandon the traditional approach of identifying what a new employee needs to know. This means supplementing the six-hour orientation training with a process that includes those they need to know. This will help healthcare risk management professionals become a part of the organizational culture and of the team.

Chang, Ehrlich, and Millen used a social networking approach to examine the relationship components of onboarding among interns and their mentors. Their results revealed that most employees are performing functionally at the three-month period; they understand rules, regulations, processes, and governance. However, if they have not developed a personal connection, intellectual and social, they will not experience continued productivity in their work.(39)

According to the research, socialization is integral to the success of an effective onboarding program. Bauer and Green investigated the influence of a newcomer’s involvement on socialization.(40) They found that socialization resulted in more engagement, less conflict, a feeling of acceptance, and greater productivity.(41) They recommend that organizations consider formal and informal socialization programs as the primary component of onboarding programs.(42)

Moreover, Johnson ascertained that new managers who were rapidly onboarded generated value faster than their counterparts who participated in only traditional orientation training.(43) New managers need initial support, a framework for learning, and connections to new colleagues.(44) Johnson identified the following rapid-onboarding practices to support new managers in identifying early contacts they can later build on:(45)

- Provide early coaching.
- Establish a network web.
- Use social bonds to ignite collaborations.

---

**Exhibit 1:**

**Best Onboarding Practices**

- Integrate onboarding within the overall hiring and talent management process.
- Extend onboarding to at least the first six months, the amount of time it takes an employee to decide if he or she is going to stay with a company.
- Automate processes and use technology to centralize information for employees.
- Map out the new manager’s network.
- Put out the welcome mat, and inspire pride.
- Partner with human resources to provide tools, training, and feedback.
- Use a transition coach to act as a sounding board and assist with diagnosing new situations, assessing skills, and achieving alignment with the boss and organizational strategy.
- Always design onboarding activities from the new manager’s perspective.(2)
- The Aberdeen Group adds the following practices:
  - Define the onboarding process.
  - Create an onboarding road map that supports the organization’s long-term strategic plan.
  - Measure short-term retention rates and time to productivity.
  - Improve the new hire experience.(1)
• Follow up to reinforce relationships.
• Use technology to support the onboarding process.

Finally, Lee identified the cost of inadequate onboarding of critical employees as increased turnover, reduced engagement, reduced respect for the management team and organization, and reduced pride in company.(46)

Lee recommended using the following checklist of questions organizations should ask themselves to ensure that they have a comprehensive onboarding program:(47)

• Do you make your newly hired employees feel welcome?
• Do you inspire pride?
• Do you help newly hired employees see the big picture?
• Do you show how employees matter to the organization?
• Do you collect and share stories that reiterate critical concepts?
• Do you make your orientation program interesting and interactive?
• Are you designing it from the new employee’s perspective?
• Have you broken your program down into digestible, bite-sized chunks?
• Are you putting as much information as possible on your intranet?
• Do you have a mentoring program?
• Are you making it easy for new employees to tell you how they're doing?
• Do you help your supervisors and manager do their part well?

**CONCLUSION**

It is critical that companies invest in an effective onboarding process for healthcare risk management professionals. These professionals’ responsibilities are vast, varied, and essential to the provision of quality and safe care across healthcare organizations. Ensuring that they are productive as quickly as possible can provide tremendous returns on the investment in the acclimation process.

Effective onboarding programs often have a focus on socialization that allows employees to interact informally or formally with experienced members of the organization—in effect, creating professional communities to ease the transition.

Effective programs focus on socialization, which connects inexperienced employees with other essential roles. The socialization often creates a stronger commitment to the organization and gives newer employees a vehicle by which to better understand organizational culture and present new ideas.

Focusing on these common best practices will allow the organizations to better attract and retain employees, be more productive, obtain a greater return on their employee and program investment, and, most important, allow the organization to achieve the substantial benefits of fully functioning healthcare risk management professionals.

**REFERENCES**


4. Ibid.


19. Ibid.


26. Ibid.


29. Ibid.

30. Ibid.

31. Ibid.


33. Ibid.

34. Ibid.


36. Ibid.


38. Ibid.


41. Ibid.

42. Ibid.


44. Ibid.

45. Ibid.


47. Ibid.

**ABOUT THE AUTHORS**