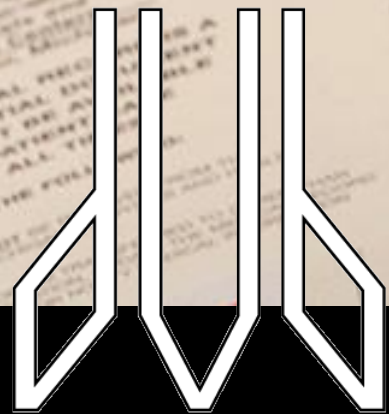




CASE STUDY:

POST COVID: CHICAGO, IL MANAGED
TALENT ACQUISITION SOLUTION



**EXECUTIVE
SOLUTIONS**

Background:

A Hospital in the Chicago, Ill market had seen clinical staff reductions over a five-year period reach a critical point as they moved back to general services in a post Covid environment. The new CEO sought a managed Talent Acquisition solution to develop, jump start and lead an outsourced internal Talent Acquisition team to augment the facilities In House Talent Acquisition team.

At the beginning of the assignment the facility had seven open director positions and numerous open unit manager positions with the roles being filled with interim management. This situation expanded during the analysis period with additional management leaving the facility. Further, entire units consisted of contract RN's and other clinical staff.

The hospital had a broken Talent Acquisition model that over the prior 18-24 months placed Talent Acquisition team members in a position of only managing contract agency staff into facility positions. During the DVB Recruitment Process Analysis almost all directors and managers communicated that they had seen no more than a handful of candidates for open full-time positions in over two years. In-house TA team members confirmed the accuracy stating that keeping the agency clinical staff needed in place took all their time and that they had not proactively recruited for candidates for open positions in over a year and a half, maybe longer. The in-house recruiters also communicated that the hires that were made into FT, PT and PRN slots who applied online to Indeed postings.

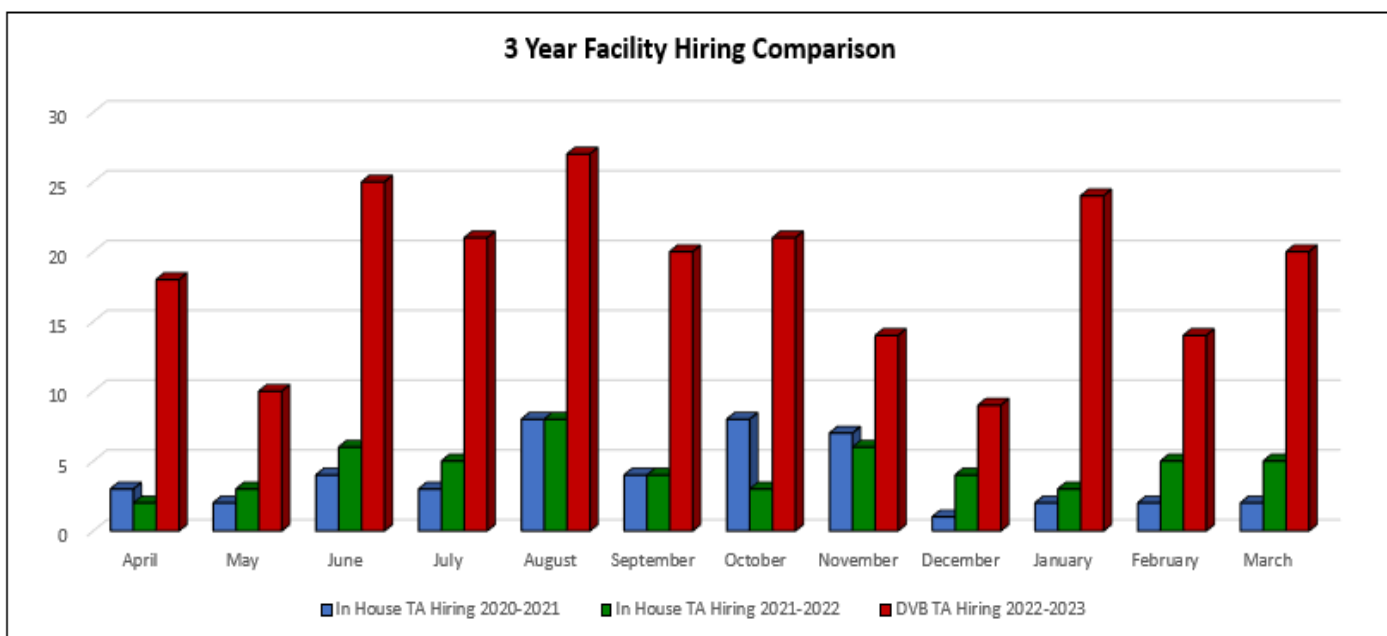
The model developed and rolled out by DVB blended both client and DVB management assets to achieve greater recruitment outcomes. The DVB model sought to changed the entire culture and processes used to hire clinical staff. This process was made more difficult and took more time than usual due to the unusual amount of interim clinical management staff. In addition to the clinical management Human Resources was without a director for the first five months and had an interim the remaining 7 months.

Program Design:

- Prior to the launch of the program, DVB management completed an indepth Recruitment Process Analysis to identify areas of opportunity for improvement by the DVB Talent Acquisition Manager.
- These included conducting an assessment of current resources, defining metrics to be used in performance standards, establishing baseline performance standards, and aligning team members with those goals and recruitment outcomes.
- Confidential one on one Key Stakeholder interviews were conducted with management from all areas of the hospital to uncover additional areas of improvement and overall market perception of the hospital.
- DVB management created a custom model that increased the pool of potential FTEs to the individual hospital areas by leveraging the resources and methods of a staffing agency at a more affordable rate.
- The DVB model removed excessive administrative functions from the realm of a recruiter's responsibility to facilitate and improve candidate flow.
- The DVB Talent Acquisition Manager also focused on the development of passive candidate sourcing methods, improving time-to-fill results, and developing partnerships with local resources to attract candidates to the client facilities.
- A key focus in delivering the results below has been relationship management with hiring managers, introducing them to the improved process, and developing a partnership with the recruitment team.
- All client processes and regulations were administered and executed through the custom model.

Program Results: 8 Month Comparison

- Increased Full Time Nursing hires by 613% compared to Y1 In-house hiring results and 470% compared to Y2 in-house hiring results
- Increased PT & PRN Nursing hires by 514% compared to Y1 In-house hiring results and 258% compared to Y2 in-house hiring results
- Increased Full Time Allied hires by 343% compared to Y1 In-house hiring results and 258% compared to Y2 in-house hiring results
- Increased PT & PRN Allied hires by 200% compared to Y1 In-house hiring results and 400% compared to Y2 in-house hiring results
- Overall Increase Enterprise Wide was +385% compared to Y1 and +313% compared to Y2
- Client was significantly below the national average cost per clinical hire at \$1,533 verses the national average of \$4,047 (AHA, 2022). This represents hiring costs at 38% of the national average using a DVB Outsourced (RPO)solution.



3 Year Hiring Comparison w/ % Increase by Clinical Classification						
	2020 - 2021 In-house -v- DVB			2021-2022 In-house -v- DVB		
	In House	DVB	% Increase	In House	DVB	% Increase
Nursing / FT	8	57	613%	10	57	470%
Nursing / PRN	7	43	514%	12	43	258%
Allied FT	21	93	343%	26	93	258%
Allied PRN	10	30	200%	6	30	400%
Total	46	223	385%	54	223	313%