FUSION

TALENT MANAGEMENT

IMPROVING PATIENT CARE THROUGH ANALYTICS

Effectively manage nurse turnover & compliance. Identify & evaluate projects to help align initiatives such as nursing, quality & hospital operations.

Given that a number of variables that impact quality of care in a healthcare setting, organizations must be able to study the impact of individual nurse efficacy, potential, staffing effectiveness in maintaining nurse-to-patient ratios, and any patterns regarding nursing unit turnover and patient safety. Greater visibility into these key areas can lead to transformational changes in patient safety, as well as improve efficiencies in areas such as the OR and ED.

Nurses provide a critical component of quality clinical care. While human capital management (HCM) is used to attract and hire potentially excellent employees, effective talent management holds employees accountable to specific goals and encourages continuous improvement and talent development. One oft-cited study suggests organizations with a low turnover rate have between a 20-28% better adjusted mortality index and a 21-24% better severity-adjusted length of stay when compared to healthcare organizations with moderate to high turnover rates (VHA, 2002).

SOLUTION BENEFITS

- Integration of HRMS, performance management, hiring and positions, progressive discipline and compliance provides for a comprehensive analytical foundation for talent management

- Ability to integrate this analytical foundation with clinical quality and operational data provides visibility to productivity, efficiency, and utilization effectiveness for better patient experience.
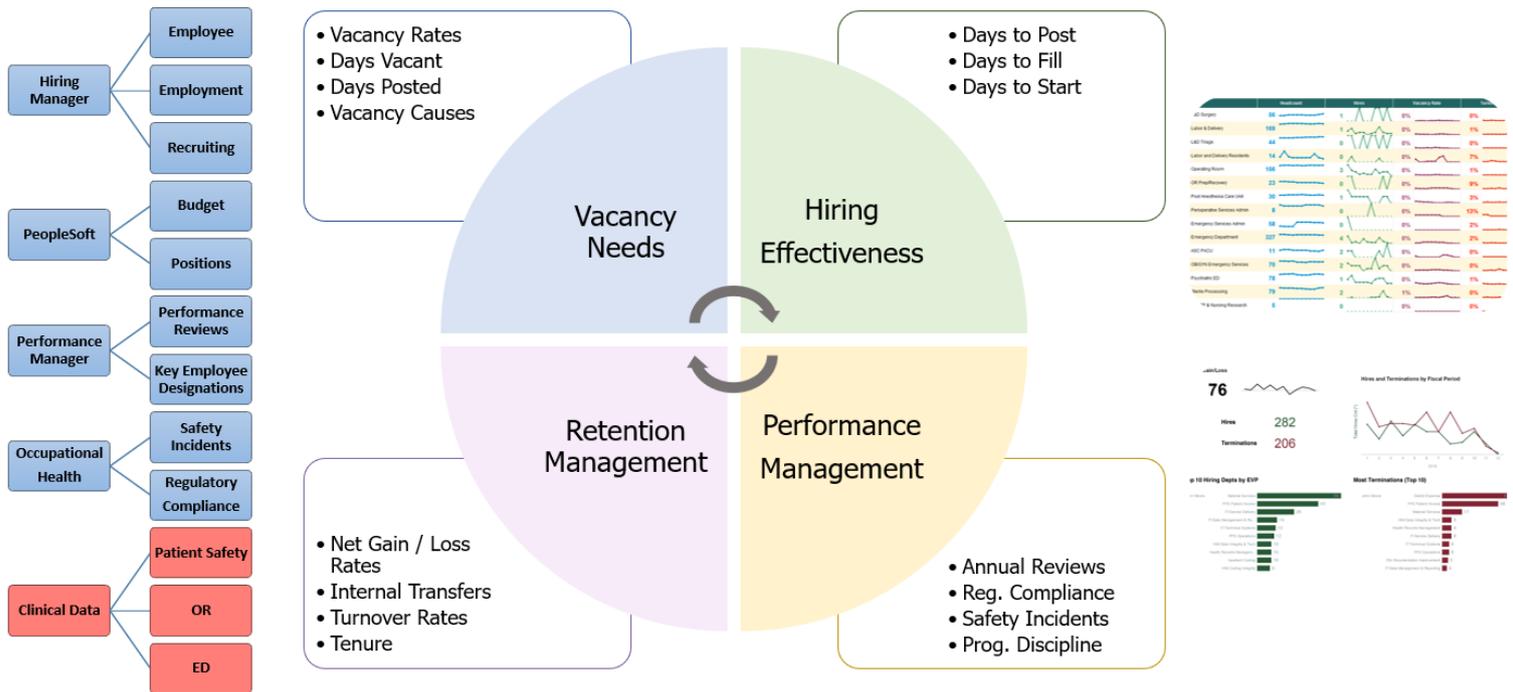

WHAT IS IT?

- Help manage nursing productivity and retention
- Cost of rehiring trained 1-3 year tenured high quality nurse is excessive and it impacts clinical quality and patient safety
- Talent management programs and their ability to retain tenure to 3 years results in a 6 year average hold
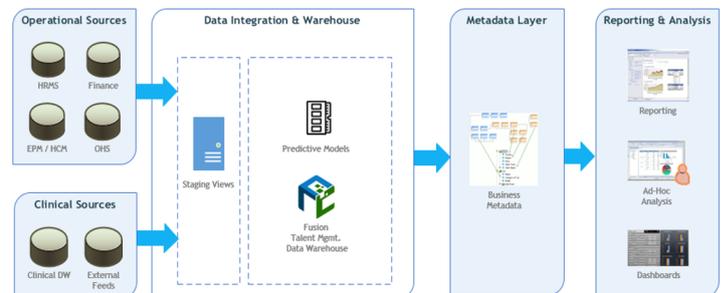
ROI

- Cost of rehiring a 1-3 year tenured nurse is approximately $130K
- Tenure average increases by 3 years, with 1-3 year tenured nurse retention programs
- Reduced length of stay

TALENT MANAGEMENT

Hiring Manager
- Employee
- Employment
- Recruiting

PeopleSoft
- Budget
- Positions

Performance Manager
- Performance Reviews
- Key Employee Designations

Occupational Health
- Safety Incidents
- Regulatory Compliance

Clinical Data
- Patient Safety
- OR
- ED

Vacancy Needs
- Vacancy Rates
- Days Vacant
- Days Posted
- Vacancy Causes

Hiring Effectiveness
- Days to Post
- Days to Fill
- Days to Start

Retention Management
- Net Gain / Loss Rates
- Internal Transfers
- Turnover Rates
- Tenure

Performance Management
- Annual Reviews
- Reg. Compliance
- Safety Incidents
- Prog. Discipline

PROVEN PROCESS OF IMPLEMENTATION

Assess — Examine — Synthesize — Optimize — Adopt

✓ Significant reduction in delivery timeline

✓ Elimination of tasks related design of and ETL for aggregate tables

✓ Minimal physical storage space needed

✓ Calculated views will deliver better performance to end-users than traditional atomic tables

REFERENCE ARCHITECTURE

Operational Sources — HRMS, Finance, EPM / HCM, OHS

Clinical Sources — Clinical DW, External Feeds

Data Integration & Warehouse — Staging Views, Predictive Models, Fusion Talent Mgmt. Data Warehouse

Metadata Layer — Business Metadata

Reporting & Analysis — Reporting, Ad-Hoc Analysis, Dashboards

Acronyms
- HRMS – Human Resources Mgmt. System
- EPM – Enterprise Performance Mgmt.
- HCM – Human Capital Mgmt.
- OHS – Occupational Health & Safety

HRMS: Position-based, with employee demographics, transaction history (hires, terminations, promotions, etc.), payroll, benefits administration, etc. used to support day-to-day human resource processes.

EPM: Performance appraisal and progressive discipline information to gauge employee productivity, efficiency, and progress.

HCM: Contains licensing, learning, recruitment, etc. information to support talent management activities and succession planning.

OHS: Vaccinations and regulatory testing (TB, respiratory fitness, etc.) compliance, and blood and bodily fluid exposure incidents.

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