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Hire for success: Best practices and mistakes to avoid for adding a great surgeon to your team

Successfully recruiting a surgeon to a hospital, health system or surgery center requires effective planning and execution, especially if the employer has a specific timetable. It also involves avoiding common pitfalls and mistakes in the recruiting process. *Becker's Hospital Review* recently spoke with Judy Rosman about best practices in the recruiting process for hiring a surgeon. Ms. Rosman is the founder of RosmanSearch, an executive recruiting firm focused on neurosurgery and neurology recruiting.

Hiring a surgeon starts with a clear, well-organized plan

Before an organization initiates a recruiting process, Ms. Rosman recommends that there be consensus among all the key people in the organization about the hire. Ms. Rosman said, "Having everybody on board with the purpose of the new hire and the person's responsibilities is very important." One of the biggest mistakes Ms. Rosman sees is when disagreements about a position are not resolved before recruiting starts.

In addition to agreement about the purpose of the hire, a cohesive message is important for how the organization's leaders envision the role. Ms. Rosman explained that when candidates "hear different things from different people about the role, it causes confusion," which raises concerns about the opportunity. Along with a cohesive message, consistent communication is essential. As part of this message, an organization should be realistic, but optimistic, about its vision.

Organizations should anticipate that a search for a surgeon can take six to nine months. A well-organized process and a responsive recruitment team can speed it up. Most important, in addition to being well prepared, is responding quickly to candidates. Ms. Rosman said, "If there is one thing that makes a recruitment more successful, it's responding right away when a candidate submits their CV." Determine in advance who will review CVs and who will lead follow-up. And make sure to respond within 48 hours. "If you have a committee weigh in on every CV before reaching out to candidates, it's not going to work," Ms. Rosman said.

It is common for surgeon recruitment to involve two site visits. Organizations need to carefully plan and orchestrate both visits. Ms. Rosman suggested appointing a point person for each visit and ensuring that candidates can meet with other physicians relevant to the recruitment as well as any ancillary staff. Send the itinerary to the candidate well ahead of time and ask if there is anyone else the candidate would like to meet while visiting. Also, give the candidate (and spouse or partner) a view of what their life would be like through a real estate tour and meetings that are personalized to the interests of the surgeon and any family relocating with the candidate. Include a social component, such as a well-attended dinner, to get to know candidates and observe them socially.

With only a small number of candidates being brought in for a second visit, organizations should be prepared to move quickly with a decision and offer if this visit goes well. If it takes a long time for an offer letter or contract to go out after the second visit, a candidate may lose confidence in the practice or worry that the

offer may not be forthcoming after all. Having a draft offer letter or contract prepared in advance can prevent you from losing a great candidate.

While the recruiting process can be intensive, savvy organizations pursue multiple candidates simultaneously. Failing to have a backup plan is a frequent mistake that leads to delays if a first choice doesn't work out.

Don't overlook the importance of reference checks

A frequent hold-up in the recruiting process is reference checks. Since reference checks can take time, organizations should initiate them as soon as possible after the first visit. In advance of a second visit, have reference checks completed so that you can be ready with an offer letter or draft contract to send to the candidate if your team decides the candidate is a good fit.

In light of confidentiality requirements, vetting potential candidates can be challenging. But failing to conduct comprehensive reference checks is one of the biggest potential pitfalls in hiring a surgeon. There are some proven methods to assess a surgeon's reputation that still meet confidentiality requirements, according to Ms. Rosman. You should start by searching online to see patient reviews and to learn about potential lawsuits. Social media searches may unearth unprofessional or undesirable behaviors.

An organization can also ask a surgeon to share a self-query of their NPDB record, which protects confidentiality, and can ask for references who won't violate confidentiality, such as contacts a surgeon trained with.

A common mistake is to rely only on written references, which are necessary but not sufficient. An organization should attempt to get at least some verbal references, while also looking closely at written references to examine what was not said.

Successful hiring processes don't end when an offer is accepted

An effective hiring process doesn't end when a surgeon signs their contract. A positive onboarding experience is key to ensuring a surgeon hits the ground running, whereas a poor onboarding experience is often the first step towards turnover in the position. Licensure and credentialing are areas where an unanticipated delay can affect the start date. An administrator should set expectations and ensure that a newly hired surgeon is prepared to apply for licensure and credentialing immediately. In some states even waiting until the contract is signed is too late.

In the end, the human touch matters during onboarding. Ms. Rosman recommends staying in contact with the new hire while waiting for the start date and remaining in contact throughout the new surgeon's first few months with the organization. First impressions matter. "The onboarding experience can color the whole way a physician feels about his or her new practice, and impacts how well things go as the honeymoon phase passes and the imperfections of the practice become more apparent," stressed Ms. Rosman. ■

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