

PREFACE

Healthcare is undergoing major changes as a result of a multitude of factors, including rapidly changing technology, cost pressures and value-based payment models, unprecedented consumer access to information, globalization and global changes, changing demographics, and new levels and forms of competition among healthcare organizations. Whereas some changes have been somewhat predictable, others have occurred abruptly, with little warning. The COVID-19 pandemic is the most notable of these changes, affecting every aspect of healthcare delivery. Change is a staple in healthcare: a Google search for “health care change” generates close to eight million results. Human resources—that is, people—represent the bedrock of US healthcare organizations. As of this writing, the healthcare industry employs more than 22 million workers, or 14 percent of all US workers (Laughlin et al. 2021). Even with these astronomical numbers, we face severe staffing shortages with the confluence of the aging of the population and of the healthcare workforce. For many years, healthcare workforce data have shown that many communities experience chronic shortages among a wide range of healthcare workers, and there are widespread disparities in the geographic distribution of the healthcare workforce. For those unconvinced by the data, workforce shortages resulting from the pandemic unequivocally sent the message that healthcare workers are a scarce resource that we should nurture, develop, and treat with the utmost care. Yet if we speak with a random group of workers in the healthcare workforce, it is doubtful that we would find the sentiment reflected that they are treated with the respect and care required of a scarce resource. It’s not that we don’t know how to manage healthcare workers; rather, it is a question of how well healthcare managers understand the fundamental principles of effective human resources management.

Anybody who has worked in any type of organization—whether a hospital, a sports team, the military, or an educational institution—knows that planning is the easy part. A soccer team prepares to meet its opposition by understanding its own strengths and weaknesses and those of the opposition. However, putting this plan into practice—implementation—is fraught with all kinds of obstacles. These obstacles are particularly intense in healthcare organizations, and the possibility of failed implementation can be catastrophic. When implementation fails in a sports team, a team loses and fans feel disappointed for a day or two. In a healthcare organization, patients may die, employees may be injured, and the organization's very survival can be put at risk.

This book is about putting plans into practice. Specifically, we address what is indisputably the most important part of implementation: the workforce. All too often, managers become so enraptured and self-satisfied with their plans that they ignore the people who are responsible for putting plans into practice. If we value employees who are patient oriented and empathetic, are we considering these qualities when we hire people? If we want to retain our employees (and not have them leave if they are offered an additional dollar per hour by another organization), do we know the factors that are related to employee turnover and retention? If we want our managers to help employees improve, do we train our managers in how to conduct performance reviews and coach employees toward success? As this book illustrates, solutions to workforce challenges are complex, and managers need to be cognizant of a multitude of factors that affect the quality and sustainability of the workforce. These factors include the manner in which we select and supervise employees, perceptions of fairness and equity in compensation, and the way we work with diverse populations of workers and patients.

The challenges encountered in motivating and managing the workforce are not lost on entrepreneurs, consultants, and “pop business” writers (if you are in doubt, visit an airport's bookstore or google “books on managing people”). What we frequently find are books that are billed as the *latest* solution to workforce challenges; all too often, they are put forward as commonsense cure-alls. Books that present the topic as complex don't sell; simplicity sells.

The fact is, managing the workforce *is* complex—and uncertain. There is no magic single solution. If there were, we would not have a flourishing market for management cure-alls. This book is in many ways a back-to-basics approach. Managers frequently rely on common sense in managing people, but common sense is not always correct, and situations do not present themselves neatly tailored to our theories and expectations.

This book sets forth fundamental concepts that will help healthcare managers do the most important and most difficult part of their job: managing the people. Having a strong knowledge base in what works is fundamental to good management, and that is what we offer in this book. We acknowledge the complexity of managing people. Needless to say, you will not find simple answers in this book; that would be a recipe for failure. What we do offer in this book is information, best practices, ways to analyze workforce problems,

evidence about what works and under what circumstances, and tangible evidence-based strategies for successfully working with employees so that our carefully laid-out plans are effectively implemented.

This book is intended for current and aspiring managers, and not solely for people employed in human resources departments in organizations. Our philosophy is that everyone manages relationships with others, whether one is a supervisor or an employee who must manage relationships with coworkers and with one or more bosses. In sum, *we are all human resource managers*.

CHAPTER OVERVIEWS

Workforce management requires an understanding of multiple disciplines and functions, such as employee motivation, compensation, and training strategies. A successful manager will understand the multitude of disciplines required for managing the workforce. However, they must also be able to synthesize these areas of knowledge and recognize that organizations are systems, and as in systems, changes in one part of an organization affect other parts of the organization. For example, if we change the way we pay employees, how will it affect employee motivation, productivity, and turnover? Although this book is divided in a disciplinary manner for ease of presentation, it should be understood that effective managers will master these areas and also develop the ability to view management and organizations systemically.

Chapter 1, by Carla Jackie Sampson, introduces the concept of strategic human resources management. For many years, human resources management has had an often well-deserved reputation for playing a passive role in organizations. In contrast to such functions as marketing and research and development, which were seen as contributing to organizational growth and performance, the personnel department did not appear to support the organization but instead appeared to keep it from flourishing. Rather than finding ways to promote progress in the organization, the personnel department was often perceived as standing in the way of innovation and change.

In this first chapter, Sampson sets the stage for this entire volume. The approach stresses the need to ensure that the way in which we manage people supports the organization's mission, strategies, and goals. The chapter emphasizes the importance of positive employee outcomes, particularly inclusion, belonging, and well-being for positive organizational outcomes. It presents a vision for human resources in which the responsibility for managing people is not restricted to a particular department but is the responsibility of everyone in the organization. The remainder of this book expands on this simple framework: aligning our human resources management practices with the interests of the organization.

Chapter 2, by Patrick D. Shay and Dolores G. Clement provide the reader with an understanding of the variety of professionals working in healthcare organizations. Highlighting the major health professionals, the authors describe the unique characteristics of

these professions, paying particular attention to their functions in healthcare, educational requirements, licensure, changing roles, and future prospects for professional groups. They also address issues such as academic progression for nurses and advanced practice nurses, the supply challenges facing nursing, and some emerging and evolving roles.

Like much of healthcare management, effective human resources management requires an understanding of an enormous body of laws and regulations. Written by Drake Maynard, chapter 3 provides an overview of laws related to such topics as employee rights, discipline and privacy, sexual harassment, discrimination, equal employment opportunity, and the protections for LGBTQ+ persons. A later chapter addresses the specific laws related to unionization and union–management relations.

In chapter 4, Sean N. Newman and Paige N. Ocker discuss job analysis and job design, which form an essential foundation for virtually every other human resources management function. Effective job analysis provides managers with an understanding of the purpose and content of jobs, which in turn allows us to create job descriptions and identify the qualifications for particular jobs. Such goals as effective recruitment and fair compensation depend on having a clear understanding of the requirements of a job. The authors discuss the increasing application of analytics and algorithms and other tools to job analysis, and they explore workgroup redesign, telecommuting, and other workplace developments. Newman and Ocker contend that the deliberate structuring of work can lead to improved individual, group, and organizational performance.

Staffing and keeping competent employees pose an increasing challenge for healthcare organizations. In chapter 5, Gabriela “Gabbi” J. Maris and Bruce J. Fried address the interrelated topics of recruitment, selection, and retention. Reasons that employees choose to accept jobs, strategies for successful selection of employees, and evidence about why healthcare employees stay with or leave organizations are the focus of this chapter. The authors also look at staffing from a global perspective and address such controversial topics as the global migration of healthcare workers and the ethics of foreign recruitment of physicians and nurses. This chapter also examines the role of technology on recruitment and selection, including social media screening, and discusses the impact of the COVID-19 pandemic on retention.

With the rapid changes in healthcare, employees and organizations require continual renewal. Organizational and employee development is a characteristic of all successful organizations, yet many healthcare organizations pay scant attention to the link between these initiatives and the organizational culture. In chapter 6, Carla Jackie Sampson and Julene Campion provide insights on the link between employee engagement and organizational effectiveness. They discuss employee engagement interventions, onboarding, succession planning, coaching, and mentoring. They explore trends for the future of organizational and employee development, such as microlearning and on-demand training.

Performance measurement and improvement have become central features of healthcare organizations. In many instances, healthcare organizations are financially rewarded

for excellent performance. However, excellent organizations depend on high-performing employees. Performance management seeks to improve employee performance by accurately evaluating employee performance, providing feedback to employees, coaching, designing strategies for improvement, and evaluating the effectiveness of improvement efforts. In chapter 7, Bruce J. Fried offers a variety of approaches to performance management. He argues that effective performance management often requires a change in the organizational mind-set because performance evaluation is often viewed as a punitive and judgmental process, rather than a positive and collaborative experience.

In chapter 8, Bruce J. Fried, Brigid K. Grabert, and John Cashion discuss the complex topic of compensation in healthcare organizations. Compensation is anything but a routine function. This chapter addresses the organizational challenge of balancing internal equity and external competitiveness in compensation policy, and the role of labor market conditions in determining compensation. The chapter also discusses physician pay-for-performance compensation and the changing relationship between physicians and organizations, which affects how physicians are compensated.

Organizational reward systems are not limited to compensation. A significant portion of staff costs in organizations is related to employee benefits. In chapter 9, Melissa G. McCraw and Dolores G. Clement bring their collective knowledge and experience to the topic and provide a highly readable and comprehensive review of employee benefits, including history, current practices and issues, budgetary implications, and benefits administration. They also discuss new directions in benefits, such as including mental health, wellness, and fitness programs.

The role of labor unions in healthcare organizations continues to evolve, along with the legal landscape of unionization and union–management relations. Healthcare and the public sector remain the two major targets for unionization in the United States. Carla Jackie Sampson, Bruce J. Fried, and Donna Malvey bring their expertise to this topic in chapter 10, where they examine legislative and judicial rulings that affect management of organized labor in healthcare settings. They also address the role played by social media in union organizing, collective bargaining, and contract administration, as well as the implications of the COVID-19 pandemic on labor relations and organizing activity.

With an increasingly diverse US population, American healthcare organizations must understand diversity, inclusion, and belonging to retain diverse employees and reflect the populations they serve. In chapter 11, Carla Jackie Sampson, Bruce J. Fried, and Jeffrey Simms stress the importance of inclusive leadership to shape the culture of the organization. They champion concrete actions to move the organization toward greater inclusivity for the many dimensions of diversity. The chapter emphasizes that diversity is the result of belonging and has expanded content on the culture change necessary to support these sustained activities.

Quality improvement is now a mainstay of healthcare organizations. While much attention has been focused on quality improvement methods, relatively little has been given

to the workforce aspects of developing and implementing quality improvement initiatives in healthcare organizations. In chapter 12, Hilary K. Hecht and Bruce J. Fried address quality improvement and implementation science from the perspective of the healthcare workforce. They illustrate the role of implementation science for successful quality and patient safety improvements and compare the differences and complementarity of implementation science and quality improvement methodologies. They examine the role of teams in this crucial work and explain how to engage and motivate team members.

Finally, in our response to the COVID-19 pandemic, we were forced to reckon with the scarcity of healthcare workers. Stress and burnout became part of the layperson's vocabulary, and healthcare managers prioritized strategies to help ensure positive outcomes for their employees. Thus, employee well-being is the focus of a new chapter 13 in this third edition. Written by Amanda Raffenaud and Tina Yeung, the chapter outlines burnout concepts in the health professions and describes specific concerns for physicians, nurses, medical students and residents, and healthcare executives. This timely addition provides strategies to address stress and burnout in healthcare organizations and foster employee well-being.

A NOTE ABOUT LANGUAGE

So that all people of Latin descent may see themselves represented in this book, the editors have specifically selected *Latine* over *Latino/a/x*. We understand that words ending in the letter *X* are difficult for native Spanish speakers to pronounce. Thus, using the gender-inclusive term *Latinx* may unintentionally erase a spectrum of Latine diversity not represented in the feminine and masculine *Latina* or *Latino*, respectively. For more information, see Chery (2022). Health Administration Press also recognizes the use of *they*, *them*, *their*, and *theirs* as gender-neutral singular pronouns.

REFERENCES

- Chery, S. 2022. "A Guide to How Words Like Latinx and Hispanic Came About." *Washington Post*. Published October 1. www.washingtonpost.com/lifestyle/2022/10/01/hispanic-latino-latinx-latine-words-history/.
- Laughlin, L., A. Anderson, A. Martinez, and A. Gayfield. 2021. "Who Are Our Health Care Workers?" US Census Bureau. Published April 5. www.census.gov/library/stories/2021/04/who-are-our-health-care-workers.html.

INSTRUCTOR RESOURCES

This book's Instructor Resources include an Instructor's Manual and test bank.

For the most up-to-date information about this book and its Instructor Resources, go to ache.org/HAP and search for the book's order code (2484l).

This book's instructor resources are available to instructors who adopt this book for use in their course. For access information, please email hapbooks@ache.org.