Author: Wright, Samuel, J. Title: A Pilot Study Evaluating New Employee Onboarding at the XYZ Medical Center The accompanying research report is submitted to the University of Wisconsin-Stout, Graduate School in partial completion of the requirements for the Graduate Degree/ Major: MS Training & Development Research Adviser: Jeanette Kersten, EdD Submission Term/Year: Spring, 2012 **Number of Pages:** Style Manual Used: American Psychological Association, 6th edition X I understand that this research report must be officially approved by the Graduate School and that an electronic copy of the approved version will be made available through the University Library website X I attest that the research report is my original work (that any copyrightable materials have been used with the permission of the original authors), and as such, it is automatically protected by the laws, rules, and regulations of the U.S. Copyright Office. X My research adviser has approved the content and quality of this paper. STUDENT: NAME: Samuel Wright DATE: 05/08/2012 ADVISER: (Committee Chair if MS Plan A or EdS Thesis or Field Project/Problem): NAMEZ Jeanette Kersten DATE: 05/08/2012 This section for MS Plan A Thesis or EdS Thesis/Field Project papers only Committee members (other than your adviser who is listed in the section above)

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Wright, Samuel. A Pilot Study Evaluating New Employee Onboarding at the XYZ Medical
Center

Abstract

An onboarding strategy can help healthcare organizations improve new employee productivity, engagement, and retention. A formal plan is essential to ensure onboarding processes are aligned and support for new employees is provided. Recent literature justifies the business case for effective new employee integration by the impact it has on organizational performance. A survey conducted within the XYZ Medical Center's health system provided information regarding onboarding initiatives in similar facilities. This pilot study presents information for the XYZ Medical Center to assess how it approaches new employee onboarding.

Acknowledgments

To my wife, Luz. Thank you for your continual support and encouragement.

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Chapter I: Introduction

Most firms have standardized processes in place for hiring and over 90% use some type of new employee orientation program (Anderson, Cunningham-Snell, & Haigh, 1996). While initial orientation events help new employees get started, this represents only a piece of the onboarding process. Recent research has shown that having a carefully thought out plan for guiding new employees through their first year of employment translates to quicker acculturation to the organization and increased time to productivity (Partnership for Public Service & Booz Allen Hamilton, 2008).

Onboarding has become widely recognized in Human Resources circles as a discipline that organizations can use to generate positive results (Stein & Christiansen, 2010). Firms that have embraced onboarding look beyond initial orientation and view integration of new employees as a strategic means to improve organizational performance. Successful onboarding result in several functions working together in a coordinated fashion and a formal onboarding plan refers to the coordinated policies and procedures the organization uses to proactively integrate new employees (Bauer, 2011).

The XYZ Medical Center has been serving the community in eastern Wisconsin for over 45 years. As a teaching hospital, it is affiliated with a medical school and a number associated health training colleges. Along with over 400 students that receive training annually, the medical center hires more than 300 new employees each year. The stakeholders involved in bringing people into the organization include those typically found in health care; Human Resources, Employee Health Service, and Information Technology Services.

There are several processes that serve to facilitate the needs of the XYZ Medical Center in hiring, orientating, and putting new employees to work. These processes, most of them

informal agreements between departments, exist to permit completion of workflows without regard to a broader view of new employee engagement, productivity, and retention. This business case for onboarding will ensure support for new employees with a goal to improve organizational performance.

Statement of the Problem

Feedback from new employees and input from stakeholders at the XYZ Medical Center indicate there is opportunity for improvement in regard to onboarding activities. The inconsistency in hiring processes, orientation, training, and follow-on support for new employees demonstrates the need is significant as it can have an impact on clinical outcomes (Broom, 2010). Organizational documents at the XYZ Medical Center reveal there is not a strategic onboarding plan in place or written guidelines that address how departments could work together to facilitate onboarding and integration of new employees. The result is duplication of effort, rework for stakeholders, frustration for new employees and hiring managers, and potentially a decline in organizational commitment (Kammeyer-Mueller & Wanberg, 2003).

Purpose of the Study

The primary goal of this pilot study is to provide information for the XYZ Medical Center that will lead to aligned and purposeful integration of new employees. A review of onboarding in healthcare and a survey of onboarding approaches at medical facilities within the same health system as the XYZ Medical Center will be conducted. The intention is to evaluate the pilot study results and make recommendations that will assist the organization in improving performance.

Assumptions of the Study

The assumptions of this study are:

- All attempts will be made to protect the identity of the organization and those of its employees.
- Work centers named in the study are commonplace in most healthcare facilities.
 Identifying specific departments, such as Human Resources, will not entail disclosure of the organization or individuals.
- 3. Respondents to the survey instrument will provide honest opinions.
- 4. Leaders in the organization support process improvement.

Definition of Terms

2-Tailed Test. A statistical test in which the critical area of a distribution is two sided and tests whether a sample is either greater than or less than a certain range of values (McDonald, 2008).

Attrition. A term used to describe voluntary and involuntary terminations, deaths and employee retirements that result in a reduction to the employer's physical workforce (SHRM Glossary of HR Terms, 2012,

http://www.shrm.org/TemplatesTools/Glossaries/HRTerms/Pages/default.aspx).

Employee Engagement. Being actively involved, caring about your job and organization (Bradt & Vonnegut, 2009).

Fisher's Exact Test. A statistical test used for two nominal variables when expected sample numbers are small (McDonald, 2008).

Healthcare System. The complete network of agencies, facilities, and all providers of health care in a specified geographic area (Mosby's Medical Dictionary, 2009).

Length of Stay. The period of time a patient remains in the hospital or other healthcare facility as an inpatient (Mosby's Medical Dictionary, 2009).

New Employee. A label or status applied to individuals who have recently joined an organization (Rollag, 2007).

Onboarding. The process of integrating new employees into an organization and equipping them to become successful and productive (Partnership for Public Service & Booz Allen Hamilton, 2008).

Onboarding Plan. A formal document, or roadmap, that outlines the specific timeline, goals, responsibilities, and support available to new hires (Bauer, 2010).

Organizational Performance. Performance outcomes normally associated with more efficient or effective operations and other external measures that relate to considerations that are broader than those simply associated with economic valuation (Richard, Devinney, Yip, & Johnson, 2009).

Productivity. Rate of output per worker (Collin, 2001).

Risk-Adjusted Mortality. The number of deaths per 1000 people of a specified population during 1 year. This rate is adjusted to prevent distortion by the age composition of the population (Mosby's Medical Dictionary, 2009).

Employee Retention. Organizational policies and practices designed to meet the diverse needs of employees and create an environment that encourages employees to remain employed (SHRM Glossary of HR Terms, 2012,

http://www.shrm.org/TemplatesTools/Glossaries/HRTerms/Pages/default.aspx).

Strategic Onboarding Model. A model that addresses all of the attributes that constitute a comprehensive way to integrate and acculturate new employees (Partnership for Public Service & Booz Allen Hamilton, 2008).

Turnover. Changes in the work force resulting from voluntary or involuntary resignations (SHRM Glossary of HR Terms, 2012

http://www.shrm.org/TemplatesTools/Glossaries/HRTerms/Pages/default.aspx).

Limitations of the Pilot Study

In order to protect the identity of the XYZ Medical Center, its employees, and facilities within the parent health system certain information is excluded from this pilot study. Key areas for improvement will not be addressed due to privacy concerns of the participants. This limits the scope of the study by generalizing onboarding efforts in the organization rather than identifying specific departments that would benefit from process improvement.

Methodology

This pilot study will collect information for the XYZ Medical Center that provides for internal discovery and external benchmarking of onboarding programs within the same health system. A survey instrument will be developed by the researcher and provided to individuals from each medical facility who were identified as the most progressive in regard to hiring processes, orientation, and follow-on support for new employees. The online survey will gather data for baseline evaluation of existing onboarding efforts at the XYZ Medical Center and for comparative analysis among medical facilities in the system.

Summary

At the time of this pilot study, the XYZ Medical Center does not have a written plan that serves as a guide for new employee onboarding. Feedback from new employees, as well as stakeholders involved with new hire processes, have provided the impetus to evaluate how the medical center supports onboarding in the organization. This pilot study will assist the XYZ

Medical Center in identifying areas for improvement that may lead to successful integration of new employees.

Chapter 1 provided an introduction to onboarding, the statement of the problem, purpose of the pilot study, assumptions of the study, definition of terms, limitations of the pilot study, and methodology. Chapter 2 will consist of a review of onboarding literature. Chapter 3 will introduce the methodology for the pilot study, subject selection and description, instrument design, data analysis, and limitations. Chapter 4 will discuss the results of the survey and item analysis. Chapter 5 will discuss the pilot study limitations, analysis of survey results, conclusions, and recommendations.

Chapter II: Literature Review

The review of the literature examined how firms have impacted their bottom line by applying effective onboarding strategies. The implications onboarding had in healthcare was a key focus. Three areas were used to serve as the basis for this research: 1) the case for onboarding 2) onboarding trends in healthcare and 3) onboarding best practices.

The Case for Onboarding

The term onboarding has become popular in recent years and is described as an approach for managing new hires through their first year of employment (Partnership for Public Service & Booz Allen Hamilton, 2008). Stein and Christiansen (2010) contended this included every experience during that first year, not just the initial interactions with hiring and orientation functions. This meant that careful consideration needed to be made of the organizational processes that involved new employees.

There were many reasons firms looked at refining their new employee integration processes. Rollag, Parise, and Rob (2005) stated these include company growth, restructuring, or dealing with attrition resulting from retirement and turnover. The authors contended, "More and more employees are newcomers to work groups, departments, or organizations" (p. 35). This was substantiated in a January 2010 report from the Bureau for Labor Statistics (BLS) which stated the median number of years employees had been with their current employer was 4.4 and that 19% of all employees had been in their current jobs less than one year (BLS, 2010). Findings from the National Longitudinal Survey of Youth 1979, a study that followed respondents from 1979-2009, showed the average person from age 18 to age 44 has held 11 jobs. "These baby boomers continued to have large numbers of short-duration jobs even at middle age. Jobs started by 39- to 44-year-olds, 33% ended in less than a year, and 68% ended in fewer than

5 years" (BLS, 2010, p. 1).

In the healthcare industry the impact was more profound. According to Gruzd (2011), "20.4% of health care employees (one in five) quit their jobs every year" (p. 1). Shortages of key health care professionals and increasing demand for service due to the aging United States population has compounded the problem (Peltier, Dahl, & Mulhern, 2009). Healthcare organizations provided a better chance for continuity of care by purposefully guiding new hires while they acclimated to their work environment. Bradt and Vonnegut (2009) have asserted, "Effective onboarding drives new employee productivity, accelerates delivery of results, and significantly improves talent retention", (p. 10).

Retention of new employees has been identified as the top pressure that drives organizations toward adopting an onboarding strategy (Martin & Saba, 2008). Up to 25% of new employees decided to leave within 3 to 12 months after hire (Stein & Christiansen, 2010). When employees left before they have reached full productivity, organizations were not able to recoup their investment in terms of staffing, compensation, and training (O'Connell & Kung, 2007). Jones and Gates (2007) estimated the replacement costs for a registered nurse was 1.3 times the salary of a departing nurse. In addition, nurses in their first year were found more likely to leave an organization than the overall nursing population (Broom, 2010). According to Stein and Christiansen (2010), robust onboarding strategies would have improved healthcare attrition rates by 3%, an industry wide savings of \$2.8 billion dollars.

Disruptions associated with employee turnover affected service quality, safety, and morale. Loss of momentum was experienced as remaining employees compensated for the vacancy and readjusted to a new hire (Rollag, et al., 2005). According to Ulrich, Krozek, Early, Ashlock, Africa, and Carman (2010) turnover created instability that had an adverse effect on patient care.

"Excessive turnover and the resulting number of newly hired staff, part-time staff, and temporary (agency) staff has been identified as a detriment to organizations and patients" (p. 6). A study by VHA Inc. found a correlation between key healthcare quality measures and employee turnover rates. Organizations with turnover rates less than 12% had the lowest risk-adjusted mortality and lower patient lengths of stay than those with turnover rates above 22% (VHA, 2002).

In healthcare the cycle of repeatedly hiring, orientating, and training new employees has been found to be expensive while diminishing quality of care. Organizations that have implemented effective onboarding strategies have seen return on investment (Snell, 2006). Stein and Christiansen (2010) highlighted the success of The Sisters of Charity Providence Hospitals in Columbia, South Carolina. The organization standardized onboarding processes and in two years improved nurse retention rates. Retention of new nurses rose 7.9% and retention of new nurse graduates rose 34% (p. 25).

The case for onboarding encompassed a firm's desire to get the most out of their new employees and retain them as contributing members of the organization. Research conducted by Bauer, et. al (2007) showed organizations that implemented formal, step-by-step onboarding programs were more effective. Successful onboarding provided resources to new employees that created in them a sense of commitment to the organization and helped them to become productive (Partnership for Public Service & Booz Allen Hamilton, 2008).

Onboarding Trends in Healthcare

While onboarding strategy was found to benefit healthcare organizations, a 2011 survey conducted by HealthLeaders Media indicated it is was low on the list of priorities for healthcare executives. When asked to rank their organizations' top priorities for the next three years, Nurse/Staff Recruitment and Retention placed 18th out of the top 20. Only 2% of the 490

respondents ranked it as a number one priority (HealthLeaders Media Industry Survey, 2011). The highest ranked healthcare industry pressures of cutting costs, patient safety, and quality remained in the forefront ahead of onboarding initiatives.

Healthcare organizations continued to measure employee satisfaction and retention with the intent of keeping their employees (HealthLeaders Media Industry Survey, 2011). A 10-year longitudinal study in hospitals across the United States of new graduate nurses found that higher levels of satisfaction significantly correlated with lower attrition (Ulrich, et al., 2010). Nursing Solutions, Inc. (NSI) reported in their 2011 National Healthcare & RN Retention Report 91.2% of healthcare organizations regarded managing retention as a crucial element to their business, but only 38.2% had a strategy to address the problem (NSI Nursing Solutions, Inc., 2011). In addition, a survey conducted by the Society for Human Resource Management (SHRM) asked organizations what prevented them from offering formal onboarding programs. More than one-half of the respondents reported that time constraints and insufficient Human Resources staffing were the top barriers (SHRM Survey Findings: Onboarding Practices, 2011). This meant that onboarding had the attention of healthcare leaders, but was not widely implemented throughout the industry.

Even though onboarding has not reached its full potential in healthcare, it has been determined as a driver of business strategy. The Veterans Health Administration (VHA) showed that efforts were underway to standardize and implement system wide onboarding to improve new employee engagement, productivity, retention, and "maintain mission readiness throughout the system" (New Employee Experience and Retention Pilot Workgroup, 2011, p. 3). Data collected from previous VHA onboarding endeavors and recent pilot programs have guided the organization to recommend changes to their human capital strategy. A report to the VHA

Succession and Workforce Development Management Subcommittee recommended a system wide directive be created to set standards and requirements for onboarding at VHA facilities. These included development of new employee internet portals to leverage technology and enhanced pre-hire engagement, implementation of new employee mentor programs, identification of an onboarding process owner at each facility, and reporting of onboarding metrics to evaluate facility effectiveness (New Employee Experience and Retention Pilot Workgroup, 2011, p 5).

Onboarding Best Practice.

It is clear organizational performance is improved by a work environment that produces engaged and productive new employees. Successful onboarding programs had a systems thinking approach and focused on new employee cultural mastery, interpersonal network development, early career support, and immersion in organizational strategy (Stein & Christiansen, 2010, p. 64). The following section provides the rational for and examples of onboarding best practice.

Successful onboarding programs began with senior leadership commitment and a clear vision of what onboarding would achieve. Leaders who were able to articulate the value of onboarding and link it to the strategic direction of the organization actively engaged stakeholders (Paarlberg & Lavigna, 2010). A formal strategic onboarding plan sent the message that everyone in the organization was responsible for the success of new employees (Reese, 2005). Active stakeholder engagement and organization wide commitment were found to be key elements for successful onboarding outcomes (Ulrich, et al., 2010). Bauer (2010) contended there must be ownership of the onboarding process which stakeholders control.

According to the Partnership for Public Service and Booz Allen Hamilton (2008) a well

established onboarding model provided focus for processes and a roadmap for new employee integration. Adoption of a strategic onboarding model served as the foundation for acculturation of new employees. Such models were found to have core principles that aligned with the organization's mission, vision, and culture, connected to goals and priorities, were integrated across processes owners, and applied to all employees (p. 6).

In developing an onboarding program it was crucial to have baseline information that related to the organization's unique hiring and orientation processes. A diagnostic was essential to understand the current state and the problems that onboarding solutions hoped to address. Stein and Christiansen (2010) asserted that a rush to implement other organizations' onboarding best practices without conducting a diagnostic was a waste of resources. "A best practice only helps if it matches your company's unique circumstances and objectives" (p. 227).

A value-added element of conducting a diagnostic was that organizations made adjustments to current practices and realized short term gains before full implementation. Basic principles of onboarding included use of a systems thinking approach that enabled work centers to communicate and understand how activities contributed to the process as a whole (Skarzauskiene, 2010). Bradt and Vonnegut (2009) stated that a primary cause of new employee disengagement was "the way most organizations split up recruitment, orientation, training, and management efforts. In many cases, multiple uncoordinated players oversee discrete pieces of the onboarding process and make poor handoffs across those parts" (p. 2). Often, alignment of workflows resulted in improved organizational performance by minimizing waste (Stein & Christiansen, 2010). Snell (2006) contended that onboarding processes were not altogether separate from other organizational workflows and if integrated properly yielded great returns in productivity from both existing and new employees.

Processes that involved new hires were particularly significant because attitudes regarding the organization were found to be formed in the first few weeks of employment and influenced employee satisfaction and retention (Messmer, 2000). The hiring and orientation phases of organizational entry identified the tone for future performance of new employees (Kammeyer-Mueller & Wanberg, 2003). Thus, careful administration of first impressions was a large part of onboarding because of the impact on subsequent employment decisions and job satisfaction (Yamamura, Birk, & Cossitt, 2011).

Dorago (2008) emphasized that organizations manage the cognitive load placed on new employees during the initial orientation period. "Many times, orientation is so content rich that it puts the new hire on overload" (Dorado, 2008, p 4). Stein and Christiansen (2010) further illustrated why follow-on support is necessary beyond initial orientation as new hires initially did not have the context required to make sense of organizational content (p. 58). Assignment of a mentor for each new employee was found to be helpful for accessing information unique to their particular job role (Kane-Urrabazo, 2006).

New employees were also found to need extra attention and guidance as they progressed through their first year on the job. Bauer (2010) stated that this supported the need for a written onboarding plan that spells out what new hires should do and the assistance they can expect (p. 10). Successful onboarding programs included touch points, such as meetings with key stakeholders, during the first year of employment that reviewed the information the employee received in orientation (Dorado, 2008). Organizations that provided the opportunity for relationship building in regularly scheduled meetings with important stakeholders experienced better results in productivity from their new employees (Bauer & Erdogan, 2011).

Best practice for any onboarding initiative included ongoing evaluation to ensure program effectiveness and validity. Onboarding metrics helped to increase stakeholder and new employee accountability and identify areas for improvement (Sims, 2011). The authors recommended that metrics include both operational and strategic measures (Partnership for Public Service & Booz Allen Hamilton, 2008). The authors also stated that all metrics evaluating the effectiveness of the onboarding initiative be aligned to business objectives and outcomes (Morgan & Jardin, 2010). This relates to the XYZ Medical Center in that the information provided can help the organization achieve purposeful integration of new employees.

Summary

Chapter 2 provided a review of the literature that explored the impact onboarding had on new employee engagement and retention. The information in this chapter examined the case for onboarding, onboarding trends in healthcare, and onboarding best practices. Chapter 3 will introduce the methodology for the pilot study, subject selection and description, instrument design, data analysis, and limitations. Chapter 4 will discuss the results of the survey and item analysis. Chapter 5 will discuss the pilot study limitations, analysis of survey results, conclusions, and recommendations.

Chapter III: Methodology

Introduction

The purpose of this pilot study is to provide information for the XYZ Medical Center to assess performance in regard to new employee onboarding. The intention is that the organization will use the results to identify areas for improvement or further review. A survey was developed to find out if facilities in the XYZ Medical Center health system utilize onboarding practices. This chapter defined the research design process and factors related to data analysis.

Subject Selection and Description

The XYZ Medical Center is part of a health system that has over 20 freestanding medical facilities. To protect the identity of the XYZ Medical Center and the parent health system the number of facilities was not divulged. These facilities varied in size, scope of services provided, and number of employees on staff. The population for this study consisted of an individual from each facility who was considered the most progressive in regard to current hiring processes, orientation, and follow-on support for new employees.

Approval to conduct the pilot study was requested from the University of Wisconsin-Stout Institutional Review Board (IRB). Participants in the pilot study were asked to complete an online survey using QualtricsTM. Participation was voluntary. Implied Consent was included in the survey instructions (see Appendix A). The projected sample size was 20 with an estimated 30% response rate.

Instrument Design

An online survey was developed using QualtricsTM. Qualtrics is a licensed survey software program available through the University of Wisconsin System. Survey questions were developed to ascertain whether the participant's facility utilized basic tenets of onboarding. The

survey contained 12 baseline "Yes" or "No" questions. "Yes" answers to 11 of the baseline onboarding questions branched to another question that asked for more detail. The maximum number of questions possible was 23. Demographic data was not obtained in an effort to preserve the identity of participants, their facility, and the health system. The contents of the online survey are listed in Appendix B.

Data Collection

Participants from each facility in the health system were identified for inclusion in the study. An invitation to participate in the online survey was emailed to each participant (see Appendix C). The invitation included the purpose of the pilot study, how the data was to be used, how long the survey would take to complete, and statements that the survey was voluntary and anonymous. The survey instrument was provided as a link on the invitation email.

Data Analysis

Statistical analysis was performed to measure the frequencies of onboarding efforts in the health system. Comparisons were made between answers to survey questions to evaluate approaches toward onboarding strategy. Results from the data analysis is discussed in Chapter 4.

Limitations

To protect the identities of the participants and their individual facilities demographic data was not collected. This lack of demographic data limited the ability to perform a higher level of analysis and impacted the depth of the pilot study. Involvement in the survey was voluntary and this factor limited the number of participants and subsequent data analysis. This also limited the scope of the study by generalizing onboarding efforts in the organization rather than identifying specific areas that would benefit from process improvement.

Summary

Chapter 3 introduced the pilot study methodology in regard to evaluating onboarding for the XYZ Medical Center. Factors related to the study subjects, online survey instrument design, data collection and analysis, as well as limitations were presented. Chapter 4 will discuss the pilot study results. Chapter 5 will discuss the pilot study limitations, analysis of survey results, conclusions, and recommendations.

Chapter IV: Results

The purpose of this pilot study is to assist the XYZ Medical Center in assessing its new employee integration processes. This chapter reports the results of the online survey that was conducted within the XYZ Medical Center health system. Through analysis of the survey findings, the XYZ Medical Center may identify areas for improvement or further study in regard to new employee onboarding.

The online survey, titled New Employee Onboarding, was offered to selected individuals from each healthcare facility within the XYZ Medical Center health system. The survey questions were developed to ascertain whether the participant's facility utilized basic tenets of onboarding. This provides baseline information for the XYZ Medical Center that can be used for benchmarking and comparative analysis of onboarding initiatives (see Appendix B for the list of survey questions). Demographic data was not obtained in an effort to preserve the identity of participants, their facility, and the health system.

Item Analysis

The survey contained 12 baseline "Yes" or "No" questions. If a participant answered "Yes" to 11 of the baseline onboarding questions the survey branched to another question that asked for more detail. The baseline questions were quantitative in nature. The branching questions allowed respondents to enter information that provided for qualitative analysis. The maximum number of questions possible was 23. A total of 14 respondents participated in the survey. The response rate was 70%.

Quantitative results. Survey responses were examined to measure frequencies of onboarding efforts in the health system. Comparison and discussion of responses will be

presented in Chapter 5. The results of the baseline survey "Yes" or "No" questions are shown in Table 1.

Table 1
Results of "Yes" or "No" baseline questions

Question		Response	
	Yes	No	
Does your facility have a formal onboarding strategy?	8 (57%)	6 (43%)	
Does your facility assist supervisors with onboarding of new employees?	7 (50%)	7 (50%)	
^a Is feedback collected from supervisors for the purpose of evaluating your facility onboarding processes?	0 (0%)	6 (100%)	
Does your facility have a "New Employee Portal" or other kind of web resource that new hires can use to access information about the organization prior to their first day?	2 (14%)	12 (86%)	
Does your facility conduct a regularly scheduled new employee orientation event?	14 (100%)	0 (0%)	
Are all new employees required to attend new employee orientation?	6 (43%)	8 (57%)	
Are new employees given the opportunity to provide feedback upon completion of new employee orientation?	13 (93%)	1 (7%)	
Are new employees given a guide that provides them with a time line of actions that take place after new employee orientation?	2 (14%)	12 (86%)	
Does your organization hold facility-wide activities or events after orientation that are specifically designed to engage new employees?	1 (7%)	13 (93%)	
Are supervisors required to document orientation of new employees?	14 (100%)	0 (0%)	
Is a single department or function designated as the process owner for new employee onboarding?	6 (43%)	8 (57%)	
Does your facility have written guidelines or policies that address how departments should collaborate to facilitate onboarding of new employees?	4 (29%)	10 (71%)	

^aThere were only six responses to this question.

Statistical analysis was performed to compare responses from the first survey question, "Does your facility have a formal onboarding strategy?" with responses to other questions that relate to evidence of an organizational onboarding strategy. Due to the sample size, the Fisher's Exact Test was use to compare data. There were no statistically significant results noted. The outcomes are shown in Table 2.

Table 2

Results of survey questions using Fisher's Exact Test when compared to Does your facility have a formal onboarding strategy?

Question	p-value	p-value
	(2-sided)	(1-sided)
Does your facility have a "New Employee Portal" or other kind of web resource that new hires can use to access information about the	.473	.308
organization prior to their first day?		
Are new employees given a guide that provides them with a time line of actions that take place after new employee orientation?	1.000	.692
Does your organization hold facility-wide activities or events after orientation that are specifically designed to engage new employees?	1.000	.571
Is a single department or function designated as the process owner for new employee onboarding?		.471
Does your facility have written guidelines or policies that address how departments should collaborate to facilitate onboarding of new employees?		.070

Note. Percentages were not statistically different at the 5% level using a 2-tailed test.

Qualitative results. The branching questions allowed respondents to provide additional information that correlates with the baseline "Yes" or "No" onboarding questions. Responses were analyzed to determine whether facilities were utilizing common components of onboarding that would be associated with a formal onboarding strategy. Table 3 lists the qualitative questions, number of responses, and the related component of onboarding.

Table 3

Qualitative survey questions, number of responses, and related component of onboarding

Question	Number of	Component of Onboarding
In what ways is new employee feedback used?	Responses 11	New employee engagement and retention
What types of facility-wide activities or events does your organization use after new employee orientation to engage new employees?	1	New employee engagement and retention
In what ways does your facility assist supervisors with new employee onboarding?	6	Supervisor support
What type of feedback is collected from supervisors?	0	Supervisor support
How is orientation of new employees documented?	13	Supervisor support
What department or function is the process owner for new employee onboarding?	6	Organizational strategy
What types of new employees are normally not required to attend new employee orientation?	6	Organizational strategy

The qualitative responses also identified four central themes for this pilot study:

- An opportunity to assist supervisors with new employee development
 The respondents' input was helpful in identifying the need to improve support for supervisors.
 - 2) Participant feedback is used for continuous improvement and reporting activities

Respondents indicated feedback is only collected from new employees for initial orientation.

Mechanisms for ongoing communication and evaluation can be explored.

3) Documentation is kept in a variety of formats

The health system has the opportunity to address standards for documentation of new employee orientation and competency assessment.

4) Physicians and contract workers currently do not attend orientation

This is an unintended and unique finding to this study. Respondents identified an area for improvement that may have a significant impact on the quality of patient care.

The data obtained from the survey provided both quantitative and qualitative data for analysis. Four central themes from the analysis of the qualitative data were identified for further discussion. There were no reported difficulties or questions from respondents regarding the online survey instrument.

Summary

This chapter reported the results from the New Employee Onboarding survey that was conducted within the XYZ Medical Center health system. The data analysis identified areas for discussion and possible opportunities for improvement. Chapter 5 will discuss the pilot study limitations, analysis of survey results, conclusions, and recommendations.

Chapter V: Discussion

The purpose of this pilot study is to provide information to assist the XYZ Medical Center in considering a strategy for new employee onboarding. A problem was identified that the organization did not have written guidelines to direct stakeholders with integration of new employees. Multiple processes exist in the medical center for facilitating new hires, but few are aligned. This served as the impetus to put forth a pilot study and set in motion organizational discussion of onboarding.

A review of the literature verified the relevancy onboarding has for healthcare. Three interrelated areas were discussed; the case for onboarding, onboarding trends in healthcare, and onboarding best practices. The research surrounding these areas provides the framework for introducing onboarding concepts to the XYZ Medical Center. Understanding the effect onboarding has on new employee engagement, productivity, and retention is basis for further review. The inability to recoup costs involved with employee turnover (O'Connell & Kung, 2007) may well be the primary driver for the XYZ Medical Center to adopt an onboarding strategy.

A survey that assessed onboarding efforts within the XYZ Medical Center health system looked to find out if facilities were practicing basic onboarding components such as organizational oversight, supervisor support and guidance, and new employee engagement activities. Results of the survey indicate use of onboarding practices in the health system are not well incorporated. This highlights the need for assessment of current methods at the XYZ Medical Center to evaluate their value in regard to support for new employees.

Limitations

A number of limitations may have impacted this pilot study. The effort to protect the identities of survey participants, their facilities, the health system, and the XYZ Medical Center limited the depth of the research. Demographic data was not collected and would have allowed for richer information and further analysis. Participation in the online survey was voluntary which may have limited the number of participants. The sample size was small which had an influence on the scope of the study and statistical analysis of the survey results.

Analysis of Survey Results

Comparison of responses to survey questions provides insight to the respondents' understanding of onboarding principles and to their respective facilities' use of onboarding as a means to improve performance. Key areas for analysis are organizational approaches toward onboarding, support for supervisors in onboarding of new employees, and an indication that deliberate effort has been put forth to engage and retain new employees. According to Stein and Christiansen (2010), consistency across these basic components are central to successful onboarding. The following are inferences drawn from the quantitative and qualitative results of the New Employee Onboarding survey.

Analysis of quantitative results. The first survey question asked participants if their facility has a formal onboarding strategy. This question gauged how many organizations in the XYZ Medical Center health system had initiated a plan for new employee onboarding. This is the cornerstone for new employee integration because a formal plan tells the organization how to operate (Reese, 2005). The majority of respondents, 57%, indicated that their facility does have such a strategy. When asked if their facility has written guidelines or policies that address how to onboard new employees, only 29% of respondents said "Yes". Further, when asked if a single department or function is designated as the process owner for new employee onboarding, 57%

replied "No". This indicates that there may be disparity in how respondents understand the concept of onboarding. Data from the survey suggests that there is not significance when these factors are compared. However, the onboarding literature implies a direct correlation.

Organizations that have implemented an onboarding strategy will have written guidelines for stakeholders and designated owners of onboarding processes (Bauer, 2010).

In evaluating the support that supervisors in the health system receive with onboarding of new employees, 50% of respondents answered that it is provided by their organization. All of the respondents indicated that supervisors are required to document orientation of new employees, but when asked to describe how documentation is accomplished none of the respondents provided the same answer. It is interesting to note that none of the respondents answered "Yes" when asked if their organizations solicited feedback from supervisors for the purpose of evaluating onboarding processes. Supervisor involvement with new employees is a vital component of onboarding. Organizational guidance and support is necessary to help supervisors onboard new employees (Partnership for Public Service & Booz Allen Hamilton, 2008). It is apparent that supervisors in the XYZ Medical Center health system are required to perform certain actions with new employees, but there are no formal processes for performance of these responsibilities or for making suggestions for improvement.

In regard to the efforts that facilities engage and retain new employees, only two of the 14 respondents reported that their facilities have a web based resource dedicated for new employees. When asked if new employees are given a guide that provides them with a time line of actions that take place after new employee orientation, 86% of respondents replied that their organization did not offer this for new employees. Only one of the 14 respondents said that their organization holds facility-wide activities or events after orientation that were specifically

designed to engage new employees. The literature provides clear examples of onboarding best practices that are intended to motivate new employees and keep them from leaving. These include web portals for pre-hire information, handouts that provide a list what to expect during the first year, and events after orientation that help new employees build social relationships within the organization (New Employee Experience and Retention Pilot Workgroup, 2011).

Analysis of qualitative results. The branching questions from the New Employee

Onboarding survey allowed respondents to enter information that provided for qualitative
analysis. Four central themes emerged when the responses were analyzed. These themes relate
to the respondents' general onboarding knowledge and current state of onboarding specific to
their organization. The following is discussion of the four central themes:

1) An opportunity to assist supervisors with new employee development

Bauer & Erdogan (2011) contend the information supervisors provide for new employees is key for learning about the work environment. This has an impact on the new employee's time in regard to productivity, engagement, and retention; thus making organizational support for supervisors a crucial element in onboarding. The opportunity exists for each facility in the XYZ Medical Center health system to explore how supervisors are assisted in this regard. There is potential for development of guidelines, checklists, or leadership training that provides supervisors with the resources needed to effectively develop new employees.

2) Participant feedback is used for continuous improvement and reporting activities New employee satisfaction and feedback should be tracked over the course of their first year to ensure onboarding program effectiveness and validity (Stein & Christiansen, 2010).Facilities in the health system can explore a variety of metrics to gauge performance of their onboarding programs. Participant feedback provides the opportunity to make enhancements and refine processes that affect multiple stakeholders in the organization.

3) Documentation is kept in a variety of formats

Documentation of orientation helps to ensure that relevant job information has been presented to the new employee and provides an opportunity for supervisors to convey expectations of performance. In the healthcare industry, documentation is necessary for accreditation purposes and ensures that organizations address the initial training and competence of their workforce (McAdams & Montgomery2003). The XYZ Medical center and facilities within its associated health system should ensure requirements are being met for documentation of new employee orientation and competency assessment.

4) Physicians and contract workers currently do not attend orientation

The most significant opportunity to utilize onboarding as means for improved organizational performance may be including physicians and contract workers in formal orientation. This applies to onboarding in that a culture of communication and patient safety can be established from the time new staff enter the organization. According to Leonard, Graham, and Bonacum (2004) communication failures among healthcare staff are the leading cause of inadvertent harm to patients. The authors add, "Effective communication and teamwork is aimed at creating a common mental model" (p. 86). Including all staff in the same type of initial orientation with an extended onboarding program ensures consistent organizational messages presented to all individuals. Utilizing onboarding to set the stage for a collaborative team environment is suggested as an area for further research.

Conclusions

Survey input indicates the majority of respondents associate the term "onboarding" to the transactional processes involved with initial orientation events rather than the broader implications it has over a period of time. This is evident in comparison of three questions. For the question, "In what ways does your facility assist supervisors with new employee onboarding?" most responses referred to activities that occur during the first few days of employment. The same results were depicted for the question that asked how new employee feedback is used. The majority of responses conveyed feedback was used to improve only the initial orientation event. When the question was asked, "What department or function is the owner for new employee onboarding?" 83% of the responses indicated the education service was in charge of orientation.

A learning opportunity exists within the XYZ Medical Center health system for understanding that onboarding extends beyond initial hiring and orientation functions and includes all interactions throughout the first year of employment (Dorado, 2008). All new employees have a series of first experiences that each organization has the potential to plan for and influence (Stein & Christiansen, 2010). The survey results indicate most of the respondents had not yet been exposed to basic concepts of new employee onboarding. Involvement in the New Employee Onboarding survey has hopefully initiated questions for participants about onboarding in their facility. The XYZ Medical Center and its health system may benefit from further exploration of onboarding and the impact it can have on organizational performance.

Recommendations

Based on the review of the literature and the insight gained from the survey, the following are recommendations for the XYZ Medical Center in regard to new employee onboarding:

- Perform an analysis of current practices. Consider process mapping to provide a visual picture of how functions interact and conduct business.
- Improve current practices. Leverage technology to streamline processes and reduce waste. Define process owners for onboarding activities and clearly list their responsibilities.
- Develop standard procedures and support systems for supervisors. Utilize checklists and
 web resources to provide guidance for supervisors. Provide a forum for supervisor
 feedback so new employee processes can continually improve.
- Implement support systems for new employees that start the moment they accept the offer to join the organization. Create a link on the medical center's web site that provides essential information to ensure the new hire is prepared for a productive first day. Start a mentor or buddy program and assign someone to each new employee to guide them through the first 30 days. Hold events for new employees throughout their first year that promote socialization and organizational learning.
- Consider an integrated approach to onboarding that includes executive levels, physicians, independent contractors, etc. to ensure consistent, measurable, and sustainable onboarding messages that will promote high quality patient care.
- Make the success of new employees a goal for the organization. Set performance standards to hold the organization accountable.

Summary

The intent of this pilot study was to provide information for the XYZ Medical Center to assess new employee onboarding. The findings of the research indicate healthcare organizations can benefit from employing an onboarding strategy. The XYZ Medical Center can enhance healthcare sustainability through improved performance in regard to new employee productivity, engagement, and retention.

Chapter 1 provided an introduction to onboarding, the statement of the problem, purpose of the pilot study, assumptions of the study, definition of terms, limitations of the pilot study, and methodology. Chapter 2 consisted of a review of onboarding literature. Chapter 3 introduced the methodology for the pilot study, subject selection and description, instrument design, data analysis, and limitations. Chapter 4 discussed the results of the survey and item analysis. Chapter 5 discussed the pilot study limitations, analysis of survey results, conclusions, and recommendations.

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Appendix A: Consent to Participate In UW-Stout Approved Research

Consent to Participate In UW-Stout Approved Research

Title: A Pilot Study Evaluating New Employee Onboarding at the XYZ Medical Center

Investigator:

Samuel Wright UW-Stout Racine, WI 53402 (262) 902-4439 wrights@uwstout.edu **Research Sponsor:**

Dr. Jeanette Kersten UW-Stout Menomonie, WI 54751-0790 (715) 232-5229 kerstenj@uwstout.edu

Description:

The purpose of the pilot study is to collect information for the XYZ Medical Center that provides for internal discovery and external benchmarking of onboarding efforts within the same health system. The pilot study will utilize an online survey developed using Qualtrics, a licensed program available through the University of Wisconsin.

Risks and Benefits:

There is minimal risk that may occur through participation in this survey. By participating in the survey you may gain insight to onboarding efforts in your facility and identify areas for improvement or further study.

Time Commitment and Payment:

The online survey should take approximately 10 minutes to complete. Questions will be asked that pertain to onboarding efforts at your facility. You will not be paid for participating in the survey or study.

Confidentiality:

No demographic data or personally identifiable information will be collected. The researcher will protect your identity and the identity of your facility. Your name will not be included on any documents. The email to used to deliver the online survey is part of the survey program and will not track identifying information.

Right to Withdraw:

Your participation in this study is entirely voluntary. You may choose not to participate without any adverse consequences to you. You have the right to stop the survey at any time. However, if you do participate in the anonymous online survey, once you submit your response, the data cannot be linked to you and cannot be withdrawn.

IRB Approval:

This study has been reviewed and approved by The University of Wisconsin-Stout's Institutional Review Board (IRB). The IRB has determined that this study meets the ethical obligations required by federal law and University policies. If you have questions or concerns regarding this

study please contact the Investigator or Advisor. If you have any questions, concerns, or reports regarding your rights as a research subject, please contact the IRB Administrator.

Investigator:

Samuel Wright (262) 902-4439 wrights@my.uwstout.edu

IRB Administrator

Sue Foxwell, Director, Research Services 152 Vocational Rehabilitation Bldg. UW-Stout, Menomonie, WI 54751 (715) 232-2477 foxwells@uwstout.edu

Advisor:

Dr. Jeanette Kersten (715) 232-5229 kerstenj@uwstout.edu

Statement of Consent:

By completing the following survey you agree to participate in the project entitled, A Pilot	: Study
Evaluating New Employee Onboarding at the XYZ Medical Center.	

Appendix B: Online Survey

New Employee Onboarding Survey

I have read the Implied Consent and agree to participate in this survey.
O Yes (Yes answer proceeds to question 1)
O No (No answer ends survey)
Does your facility have a formal onboarding strategy?
O Yes (Yes answer branches to question 1a)
O No (No answer skips to question 2)
Is there a performance measure associated with your facility's onboarding strategy?
O Yes
O No
Does your facility assist supervisors with onboarding of new employees?
O Yes (Yes answer branches to question 2a)
O No (No answer skips to question 3)
In what ways does your facility assist supervisors with new employee onboarding?
Is feedback collected from supervisors for the purpose of evaluating your facility onboarding processes?
O Yes (Yes answer branches to question 3a)
O No (No answer skips to question 4)
What type of feedback is collected from supervisors?

4.	Does your facility have a "New Employee Portal" or other kind of web resource that new hires can use to access information about the organization prior to their first day?
	O Yes (Yes answer branches to question 4a)
	O No (No answer skips to question 5)
4a.	Does your facility require new hires to complete forms on the "New Employee Portal" or other web resource prior to their first day of orientation?
	O Yes
	O No
5.	Does your facility conduct a regularly scheduled new employee orientation event?
	O Yes (Yes answer branches to question 5a)
	O No (No answer skips to question 6)
5a.	How many days does your new employee orientation event last? (Please only enter a number, such as 2.5, 3, 4, etc.)
6.	Are all new employees required to attend new employee orientation?
	O Yes (Yes answer skips to question 7)
	O No (No answer branches to question 6a)
6a.	What types of new employees are normally NOT required to attend new employee orientation?
7.	Are new employees given the opportunity to provide feedback upon completion of new employee orientation?
	O Yes (Yes answer branches to question 7a)
	O No (No answer skips to question 8)

Ba)
ough? (Please only enter a number, suc
activities or events after orientation that byces?
ents does your organization use after
ntation of new employees?

10a.	How is the orientation of new employees documented?
11.	Is a single department or function designated as the process owner for new employee onboarding?
	O Yes (Yes answer branches to question 11a)
	O No (No answer skips to question 12)
11a.	What department or function is the process owner for new employee onboarding?
12.	Does your facility have written guidelines or policies that address how departments should collaborate to facilitate onboarding of new employees?
	O Yes
	O No

We thank you for your time spent taking this survey. Your response has been recorded.

Appendix C: Invitation to Participate in the Online Survey

From: Samuel Wright

Reply-to Email Address: wrights@my.uwstout.edu

Subject: New Employee Onboarding Survey

Message:

Hello and thank you for volunteering to participate in the New Employee Onboarding Survey.

Purpose of the Survey: The data collected from this survey will be used in a pilot study that will evaluate onboarding efforts at my facility.

Time Commitment: The online survey should take less than 10 minutes to complete.

Confidentiality: No demographic data or personally identifiable information will be collected. All responses are completely anonymous.

Right to Withdraw: Your participation in this study is entirely voluntary. You may choose not to participate without any adverse consequences to you. You have the right to stop the survey at any time. However, if you do participate in the anonymous online survey, once you submit your response, the data cannot be linked to you and cannot be withdrawn.

Survey Instrument: The survey was developed using Qualtrics, a licensed survey program available through the University of Wisconsin. Questions will be asked that pertain to onboarding efforts at your facility.

Instructions: Read the consent form by clicking this link: (Link to Implied Consent document) then the click the link below to take the survey.

Thank you again for your participation and feel free to contact me if you have any questions.

Sam Wright

Follow this link to the Survey: (Link when active)

Or copy and paste the URL below into your internet browser:

(URL when active)