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Effective Employee Education

By Phyllis Snyder and Rachel Fichtenbaum

A study highlights eight practices that promote valuable learning programs.



Phyllis Snyder Rachel Fichtenbaum

Recognizing that staff at all levels play an increasingly important role in patient care, most health care organizations offer employee learning programs. But a few organizations have implemented such effective and efficient educational programs that they are seeing results in their turnover rates and bottom line. Clarian Health Partners' vacancy rates, for example, dropped 6 percentage points in two years. The University of Pennsylvania Health System saw nurse vacancy rates drop nearly 10 percentage points and nurse turnover rates drop nearly 15 percentage points in two years. And St. Alphonsus Regional Medical Center calculated a \$90,000 cost savings from converting its classroom-based courses to e-learning formats.

A Study on Effective Educational Programs

In order to determine whether the exemplary practices it had identified in other industries applied to health care, the Council for Adult and Experiential Learning (CAEL) studied employee learning and development practices in health care organizations. CAEL recently published its findings in a report, *Employee Development: A Prescription for Better Healthcare*.

Through surveys, phone interviews and site visits of medical centers, critical care hospitals, long-term care facilities and clinics, CAEL determined that the following eight elements are particularly important in helping health care organizations meet their workforce needs:

- Leaders promote education and training.
- Employee learning and development are aligned with business goals.
- Leadership development is emphasized at all levels of the organization.

- The organization emphasizes structured, individual career development and growth.
- The organization develops internal structures for informal learning and knowledge management.
- There is strategic use of technology for meeting learning objectives.
- Alliances with external partners are central to learning strategy.
- The organization assesses the impact.

These eight practices address the obstacles that often prevent workers from progressing—or even remaining—in health care. CAEL found that each organization has its own approach to implementing these practices. The key is to use resources effectively and to build on existing programs so employees at all levels can access opportunities.

A Closer Look at Three Practices

CAEL also found that an institution can accomplish a great deal even with only a few of the exemplary practices. The experiences of a handful of health care organizations show how institutions have effectively implemented three of them:

Employee learning and development are aligned with business goals. Leading health care organizations invest in their employees to benefit the organization and expect their investments to yield a return. In organizations that intentionally link business goals with individual learning goals, learning is embedded in most, if not all, organizational activities and changes. Initiatives can be designed to address specific issues such as shortages, quality of care and staff diversity.

St. Clare Hospital and Health Services of Baraboo, Wis., links business goals to individual learning goals with a “passport” issued annually to each employee. This booklet lists the organization’s mission, core values, and strategic initiatives and measures; employees fill in personal and departmental goals and measures. In focus groups, employees reported that passports help them understand how their work relates to the organization as a whole.

Hospitals and health systems can also promote learning by involving their education staff in organizational decision-making and planning. At the University of Chicago Hospitals and Health System (UCH), the chief learning officer works with the executive team to facilitate learning strategies that address both long-term and short-term organizational goals. For example, in preparation for the opening of a new children’s hospital, the UCH Academy constructed full-sized replicas of the new patients’ rooms and nurses’ stations for employee training.

The organization emphasizes structured, individual career development and growth. Many adults, particularly those with full-time jobs, face significant barriers to learning. Health care organizations can bring employees into the learning process by addressing individual circumstances and needs, letting employees drive the learning process, offering a variety of program opportunities for employees to choose from, and rewarding new skills and credentials with better pay and/or advancement opportunities.

The University of Pennsylvania Health System (UPHS) in Philadelphia places few restrictions on the types of courses that are covered by the tuition assistance policy. In addition, the learning staff regularly ask learners how they can improve existing programs and what additional programs or services might be needed. This gives employees control over their learning choices and input into the program offerings.

Another approach is to delineate internal career ladders and connect learning to advancement opportunities. UCH has developed on-site cohort programs that help CNAs earn associate degrees in nursing and help RNs earn bachelor’s degrees. These programs are offered in partnership with local colleges and universities.

The organization assesses the impact. Health care organizations that invest heavily in employee development and use learning programs in a strategic way need to demonstrate results.

BJC HealthCare in St. Louis sets targets for vacancy rates, turnover rates, and employee and patient satisfaction levels for each manager. Managers’ individual performance evaluations reflect their progress toward these targets. In this way, BJC links organizational goals with individual

performance.

The Evangelical Lutheran Good Samaritan Society (GSS), headquartered in Sioux Falls, S.D., uses outcomes to improve and refine programs. It has used participant satisfaction data to determine scheduling times, define strategies for integrating formal learning into the workplace, develop shorter learning sessions, and make distance learning available around the clock.

Applying the Model

All health care organizations have some kind of employee education and training program that addresses mandatory training requirements. A comprehensive approach to learning and development, however, goes beyond the requirements. Such an approach recognizes the important strategic role of the programs in supporting organizational goals and in providing opportunities for employees. This approach benefits the organization in a number of ways. For example, UPHS credits its learning program with helping the organization build its way out of a bad financial position, and BJC points to its learning culture as a major factor in enabling the organization to manage multiple sites.

Chief learning officers or human resources leaders can use the exemplary practices to:

- identify issues that learning and development initiatives can address;
- link educational programs and organizational goals;
- enhance existing programs or develop comprehensive approaches;
- help design responses and building blocks for organizational culture change; and
- serve as general benchmarks to measure learning and development strengths within the organization and identify areas for improvement.

Developing a comprehensive approach to employee learning will be different for each health care organization, and organizations do not need to carry out each of the practices to the same degree to effect change. What is important is taking a strategic approach that is visibly supported by the organization's leaders and that is synchronized with other policies and change strategies in the organization. When learning and development programs evolve as part of a larger solution to organizational challenges, they can form the building blocks for establishing a dynamic and responsive learning organization.

Phyllis Snyder is vice president in the Philadelphia office of the Council for Adult and Experiential Learning (CAEL), which is headquartered in Chicago. Rachel Fichtenbaum is a program coordinator in CAEL's Philadelphia office. For a copy of Employee Development: A Prescription for Better Healthcare, please visit www.cael.org/publications_research_whitepapers.htm.

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