

# COOK COUNTY HEALTH (Healthcare)

ROLE – Experience Design Researcher

TIMELINE – November 2022 – January 2023

## PROBLEM

Cook County Health, like many healthcare institutions were **struggling to recruit** and **hire nurses** to keep up with their need.

Slalom was already on the ground working on increasing recruiting and hiring through HR optimization efforts as well as increase retention through the employee experience efforts.

However, given the need, nursing needs a closer look at **what nurses are looking for** when switching positions, **why they are not choosing CCH**, and what we could do to **optimize the pipeline**.

## PROPOSED SOLUTION

**Facilitate joint listening** and **co-creation sessions** with nurses who recently joined CCH and nurses on the market for a new job, to understand key decision criteria and co-create impactful recruiting efforts.

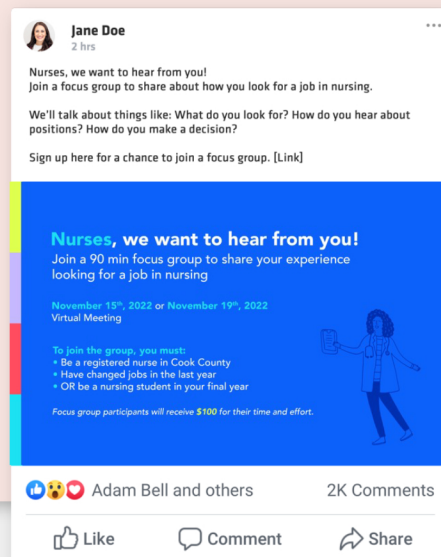
## TARGET OUTCOME

Increase the **impact** of communications and other recruiting initiatives to help CCH **boost** their **nursing talent pipeline**.

## APPROACH

**Planning + Aligning** – Align with stakeholders and prepare for focus groups

- **Stakeholder discussion** with the Chief Nursing officer to align on objectives and gather ideas to increase nursing pipeline
- Write **recruiting screener**
- Work with nursing leadership to **identify internal CCH and external nurses**
- **Facilitate co-creation session** with our internal team to identify pipeline ideas
- Write **discussion guide**
- Create **social media post flyer** and **survey** to recruit and screen potential participants
- Set up **note taking document**
- Align on **incentive process**



**Listening** – Talk with CCH and non-CCH nurses to understand what they look for in a new job, and co-create recruiting ideas

- **Schedule all focus groups**
- **Compose/ send out various communications** to participants
- **Facilitate focus groups** with internal and external nurses

**Analysis + Reporting** – Synthesize and share what we learned, to inform recruiting efforts

- **Synthesize** what was learned in focus groups
- **Report** back learnings and recommendations to CCH

**\*\*KEY DELIVERABLE** – insights report with recommendations\*\*

## SOLUTION / OUTCOME

The team gathered focus group participants by reaching out to nurse contacts – personal and professional – by creating posts and sharing via social media channels. I then conducted phone screenings to narrow down participants.

Focus groups were conducted **in-person** and **virtually** over the span on 2 weeks. We provided some guiding questions, which turned into open discussions, followed by 2 co-creation activities (*'blue sky' and a card sort*).



### How: Methodology

#### Focus groups

We conducted these groups over the span of **2 weeks**.

Started each group w/ open discussions (guiding topics varied a bit based off each group)

- Reason for switching/why nursing
- Experience w/ applying/hiring process
- Thoughts on nursing shortage
- Thoughts on agency nursing
- Ideas for retention

During each focus group, we designated time for co-creation, where nurses participated in 2 activities: **Blue Sky** and **Card Sort**.

**Blue Sky:** We had the nurses describe their ideal day as a nurse. What role/department they're in, what does/doesn't happen during a shift, big picture what does their experience look long term.



**Card Sort:** We provided nurses with cards and asked them to rank them most important to least important for what they value in a nursing role.



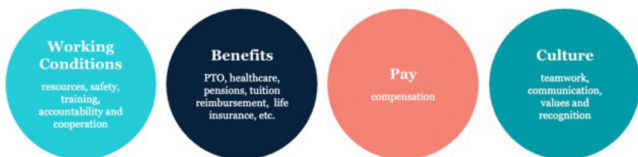
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We then synthesized what we heard to reveal key takeaways and common themes. From which, we formulated **2 different journey maps** for a nurse's experience. (*1 being the ideal nurse experience, 2 being the current nurse experience.*) Finally, we brainstormed **short** and **long term ideas** to bring to CCH as suggestions to implement in an effort to improve recruitment and retention.

#### WHAT WE FOUND

We identified 4 pillars that comprise a nurse's experience



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### Moments that matter in a nurse's career



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#### 02 FIRST NURSING JOB

New nurses are being asked to step up in roles they are not ready for

Many new graduate nurses are being put into leadership and high responsibility roles only a few months after starting. In addition, nurses who were in nursing school during the pandemic described not getting the same clinical hours or experience as their older peers. Along with lack of support, this drives new nurses to leave the workforce.

It used to be that you had to work a year before joining med/surg or the ER. There were lots of safety checks in place. Now you can be triage-trained in 2 months.

I and 2 other new grads overnighted at patients.

I didn't get full clinical hours in nursing school because of the pandemic, so that's what drove me to search for a new grad residency program.

New grads are getting appointed as preceptors, educators...

#### Ideas

**Recruit & Retain Pilot Program**

It's difficult to enact systemic change across an entire hospital system. Start small by creating a pilot program that cultivates fulfilled nurses from nursing school through the first years of their nursing careers. Test and learn with various levers to draw insights that can be applied to wider spread transformation once structures are in place.

Effort: 5/5  
Benefit: 5/5

#### Considerations

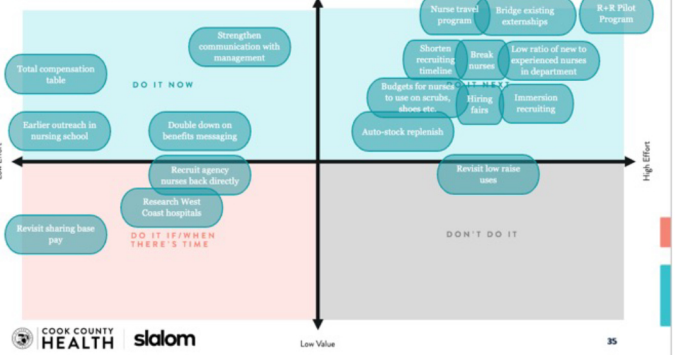
Could look like:

- Engaged participants as early as junior year of nursing school
- Nurses move through program as a cohort, gaining exposure to appropriately matched units and forming connection through shared experiences
- Proper staff and patient ratios, breaks, resourcing, etc. (see pg 30-32)
- Simulation labs to enhance learning and readiness
- Tuition reimbursement

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#### WHAT WE PROPOSE



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