



BENCHMARK REPORT

CISIVE INSIGHTS: TALENT SCREENING TRENDS IN HEALTHCARE



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INTRODUCTION

After more than two years spent in a global pandemic, healthcare employers have had to adapt how they attract, hire, screen, and onboard new talent. Many employers had to quickly pivot in the early days of the pandemic to support a newly dispersed workforce, some of whom were working remotely from home for the first time in their careers. Companies that may have previously had no work from home policies had to establish them quickly, while also facing a steep learning curve for how to translate in-person processes like interviewing, hiring, and onboarding into virtual communication.

But healthcare workers, who cannot all work remotely, have been on the frontlines facing COVID-19. The healthcare industry was facing staffing shortages before COVID-19. According to the U.S. Bureau of Labor Statistics, approximately 1.1 million Registered Nurses (RNs) are needed to replace retiring nurses and overcome the nursing shortage.¹ The nursing shortage has been caused by:

- higher demand due to an aging general population;²
- an aging nursing population reaching retirement;
- an aging educator population leading to staffing shortages for nursing programs; and
- stresses of the job, exacerbated by the pandemic.³

Cisive conducted an industry benchmark study that asked human resources, talent acquisition, compliance, and recruitment, and operations professionals in the healthcare industry how their policies and procedures changed as a result of the global pandemic. The 51-question survey asked more than 150 organizations about how their workforce practices have changed, how they handle background checks and screenings, the systems they have in place, and what challenges they expect in the coming months. The survey covers the time period between January 2020 and January 2021.

This white paper shares the results of that survey, providing context for what we learned and offering recommendations for organizations who want to build the safest and most effective workforce possible.

METHODOLOGY

Cisive compiled the results of the healthcare industry respondents from our 2021 survey. Of those surveyed, 85% are in the United States, 5% are in Canada, 8% in Asia-Pacific, and 2% in Europe, the Middle East, and Africa. The respondents' roles at their organization include Director, Manager or Supervisor (40%), Specialist or Administrator (28%), Staff, Assistant, Support, or Other (17%), and C-Level or Executive (14%). Just over 80% of respondents are involved in talent acquisition for their companies.

IMPACT OF COVID-19 PANDEMIC ON HEALTHCARE

The pandemic has impacted every aspect of the healthcare industry since spring of 2020. Hospitals report operating in "survival mode." According to a report by the Department of Health and Human Services' Office of Inspector General (DHHS-OIG), hospitals are experiencing difficulty managing "the complex and resource-intensive care needed for COVID-19 patients with efforts to resume routine hospital care."⁴ Staffing shortages, staff mental health, access to care, and financial instability are just some of the issues exacerbated by COVID-19.

While the healthcare industry is recuperating, there is still a long way to go. There are many factors affecting this journey to recovery.

Economic Outlook

The pandemic hit the economy hard in 2020. In fact, economic growth in the United States was at its worst since



1946, just after World War II.⁵ In contrast, 2021's economy came back strong, with a Bloomberg study of economists estimating 6% growth, the highest since 1984.⁶ Forecasting for 2022 currently points toward continued economic growth in the U.S., although slower growth than 2021 at an average rate of 3.7%. Another indicator of economic growth is the housing market, which in 2021 saw its best year since 2006, at 1.1 million new homes.

Fortunately, the healthcare industry is part of this economic recovery. National health spending for all of 2021 grew by 3.4%, largely thanks to federal support. In December 2021, health spending represented 18.8% of the Gross Domestic Product (GDP) including federal support, or 17.8% of the GDP without federal support.⁷ However, according to an early 2021 report by Kaufman Hall & Associates, health systems are still operating at an 11% margin below pre-pandemic levels.⁸

Employment

Although not back to pre-pandemic levels, healthcare employment recently topped 16 million, which is the most since early 2020. When broken down by sector, ambulatory care has recovered and exceeded pre-pandemic employment levels. Hospitals and nursing/residential care facilities, however, are still operating on a deficit of employees. The nursing shortage continues as demand grows, and according to the Mercer Labor Report,⁹ the industry will need 1.1 million nurses by 2026. The same report suggests that approximately 23,000 physicians will leave the industry by 2026; however, this backlog may be filled by the 40,000 Physicians Assistants (PAs) and Nurse Practitioners (NPs) entering the field annually.⁹

Turnover

The pandemic has resulted in higher turnover in all industries. Unfortunately for healthcare, turnover is currently higher than the national average for all jobs, at almost 40%.¹⁰ The pandemic has caused burnout across the industry, resulting in a wave of early retirement for registered nurses. A survey by Nurse.org¹¹ revealed that 87% of nurses feel burned out, and 83% feel their mental health has suffered. Also, according to the "2021 NSI National Health Care Retention & RN Staffing Report,"¹² this is the first time retirement has been among the top reasons for RNs resigning.

Travel Nurses, Foreign Recruitment, and NLCs

The demand for nurses has grown exponentially amid the pandemic. In just one example, Avant Healthcare Professionals, an organization that recruits nurses from other countries for placement in the United States, would typically

see a need to place 800 nurses. The number of placement requests is now more than 4,000.¹³

Travel nurses have become very important to hospitals across the nation seeking to improve access to care. They are registered nurses who work in short-term roles across the globe, at hospitals, clinics, and other healthcare facilities. This practice grew 35 percent during the pandemic, and is expected to continue to grow.¹⁴

The use of the Nurse Licensure Compact (NLC) is also expanding as one solution to the nursing shortage crisis.¹⁵ The NLC allows a nurse in an NLC state to hold a multistate license, with the ability to travel and practice in-person, or via telehealth, in any of the 33 participating NLC states.

Telehealth

The use of telehealth services (remote care) rose dramatically at the beginning of the pandemic. Over 17 million telehealth visits occurred in April 2020, the month after the COVID-19 National Emergency Declaration. The first COVID-19 vaccine was administered in December 2020, and since, telehealth visits have declined to approximately 7 million per month.¹⁶ According to a report by Doximity, however, 73% of all patients plan to use telehealth after the pandemic,¹⁷ meaning telehealth is here to stay.

Surgical Procedures

After the March 2020 National Emergency Declaration, and a subsequent recommendation by the Centers for Medicare and Medicaid Services (CMS)¹⁸ to minimize, postpone, or cancel elective surgical procedures, there was a 48% drop in surgical procedures.¹⁹ However, by July 2020, surgeries in every category had returned back to pre-pandemic norms with the exception of ear, nose, and throat (ENT) procedures. The restriction in elective procedures was timely in allowing more critical care resources to be diverted to COVID-19 related needs.²⁰

Deferred Care

When the pandemic began, many patients chose to defer care during the spring and summer of 2020. Service use decreased markedly, including preventive services,²¹ physician visits,²² and non-COVID-19 hospital admissions.²³ According to research by the Healthcare Care Cost Institute, patients have not returned for these services compared to pre-pandemic levels. Even when it appeared that widespread vaccination would finally end the COVID-19 isolation, there was no rush to the ambulatory surgery center.

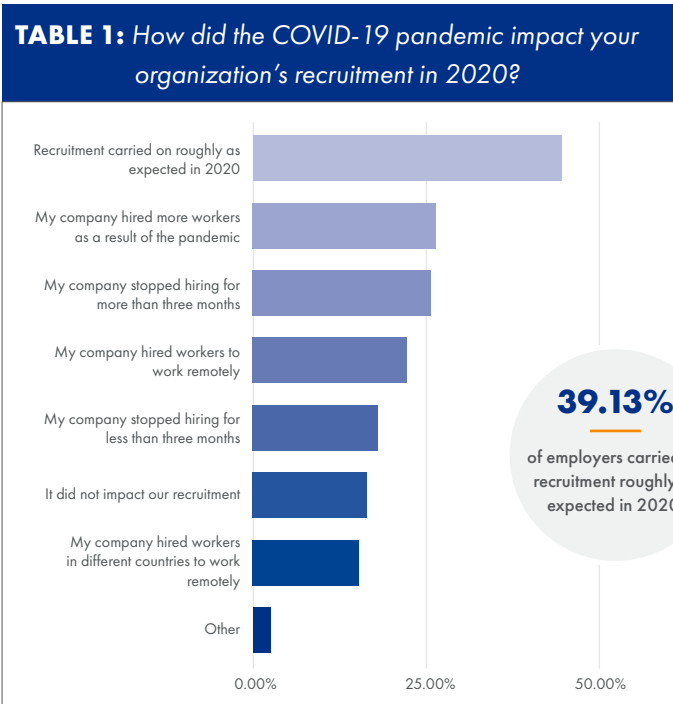
Vaccine Mandates

The Occupational Safety and Health Administration’s vaccine mandate was recently rejected by the U.S. Supreme Court. Currently, only the Centers for Medicare and Medicaid Services (CMS) mandate²⁴ is in effect, except in Texas. Covered facilities must be 100% compliant with the CMS standard by April 14, 2022, including developing policies and procedures to ensure that all staff have been vaccinated or have received a qualifying exemption. Exemptions remain a battleground, with CMS specifically cautioning against providing exemptions requested by a staff member “solely to evade vaccination.”

TARGETED & FOCUSED GROWTH DURING A GLOBAL PANDEMIC

In the earliest days of the pandemic, many companies anticipated a reduction in force; however, when asked about how their workforce changed between January of 2020 to January of 2021, the data show that just 25% of healthcare organizations reported a decrease in staff and 37% said it stayed approximately the same. The slim majority of respondents (38%) reported that their company’s staff grew during this time period.

As far as recruitment goes, some healthcare employers stopped hiring for more or less than three months, but the majority either carried on as expected pre-pandemic, hired more workers, or hired workers to work remotely²⁵ (see Table 1).



Without data, we could speculate that the majority of survey respondents reporting growth during 2020 are likely to be larger and potentially in sectors experiencing the highest demand during the shutdown, such as ambulatory care. However, the respondents work at companies with between 101-500 employees (34%), less than 100 employees (30%), 501-999 employees (12%), 1,000-2,499 employees (13%), more than 5,000 employees (8%), and 2,500-4,999 employees (3%). The vast majority (64%) of healthcare organizations surveyed could be considered small- to mid-sized businesses with 500 or fewer employees (see Table 2).

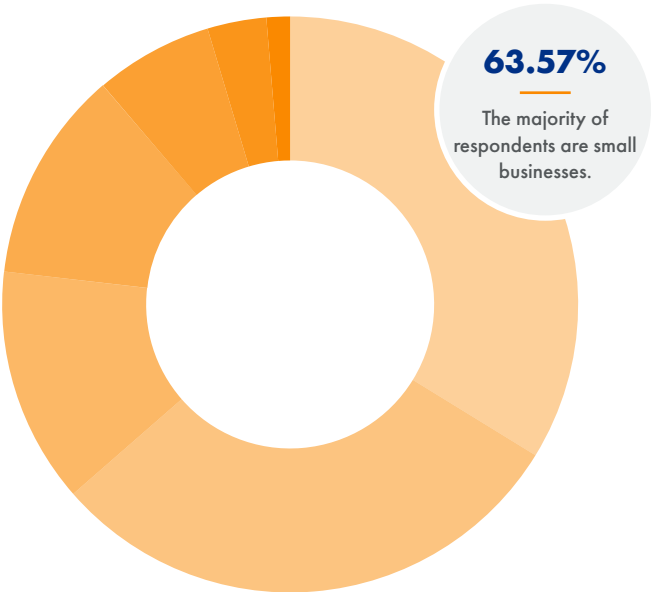
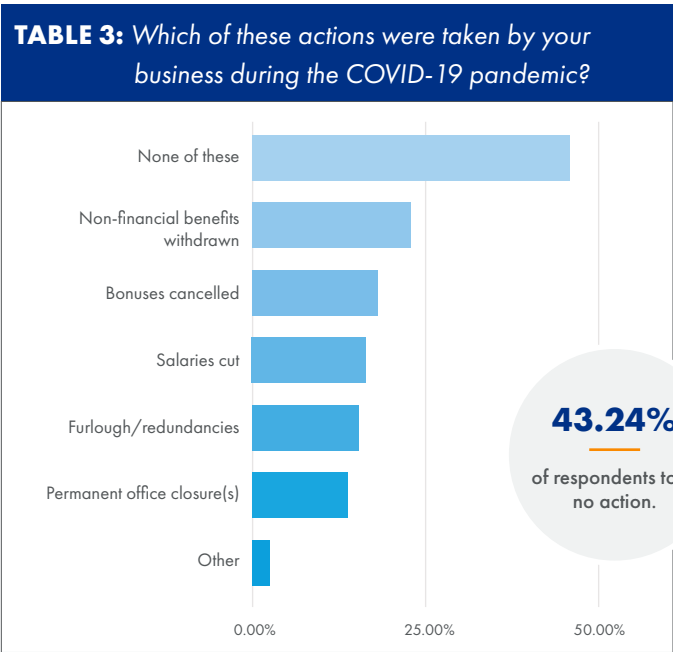


TABLE 2: What is your organization’s total workforce size, including employees and non-employees?		
33.77%	101 to 500	
29.80%	Less than 100	
13.25%	1,000 to 2,499	
11.92%	501 to 999	
6.62%	15,000 or more	
3.31%	2,500 to 4,999	
1.32%	5,000 to 14,999	

The expectations early in the pandemic were dire for small business. For instance, the National Federation of Independent Business²⁶ found in a July 2020 survey²⁷ that 23% of small businesses expected to be closed within six months unless economic conditions changed. A Fed study²⁸ released in April of 2021 found that the pandemic has resulted in an additional 200,000 permanent closures of businesses over pre-pandemic levels—or about a quarter to a third above normal.

Cisive’s survey asked respondents if they had to take measures to reduce overhead, salaries, staffing levels, bonuses and perks, or if they experienced permanent office closures (see Table 3). The highest percentage (43%) said they took no action. Of the remaining respondents, 23% reported that they withdrew non-financial benefits, 20% said they canceled bonuses, 18% said they cut salaries, 17% reported staff furloughs or redundancies, and 16% said they closed offices permanently.



Many small businesses took advantage of support with a Paycheck Protection Program (PPP)²⁹ loan, an SBA-backed loan that helps businesses keep their workforce employed during the COVID-19 crisis. PPP is a loan designed to provide a direct incentive for small businesses to keep their workers on payroll. PPP loans can be used to help fund payroll costs, including benefits, and may also be used to pay for mortgage interest, rent, utilities, worker protection costs related to COVID-19, uninsured property damage costs caused by looting or vandalism during 2020, and certain supplier costs and expenses for operations. While the program ended on May 31, 2021, the SBA will forgive loans³⁰ if all employee retention criteria are met, and the funds are used for eligible expenses.

TECH & SYSTEM INTEGRATION ARE KEYS TO SUPPORTING GROWTH

The abrupt closure of many offices and workplaces starting in March of 2020 ushered in a new era of remote work for millions of employed Americans and may portend a significant shift in the way a large segment of the workforce operates in the future. While working from home is not a possibility for many in the healthcare industry who need to treat patients face-to-face, it may be a long-term option for some positions. Most workers who say their job responsibilities can mainly be done from home say that, before the pandemic, they rarely or never worked from home, according to an October 2020 Pew Research Center study.³¹ At the height of the pandemic, approximately 70% of corporate workers shifted to remote work swiftly, which left a lot of HR and company leadership teams scrambling to support communication for suddenly dispersed workforces.

“Doing work remotely is not new, but more intense than ever with the health crisis. Virtual work changes the boundaries of work from a focus on the ‘place’ to a shared set of values. Employees are ‘at work’ when they are creating value for customers regardless of their physical location. A customer value work boundary means that each day an employee should be able to articulate why today’s work will impact a customer either today or in the future,” said Dave Ulrich, speaker, author, professor, and HR thought leader.

The same Pew study³¹ reported that 81% of employed adults who are working from home all or most of the time say they use video calling or online conferencing services like Zoom or Webex at least some of the time (59% use these often). And 57% use instant messaging platforms such as Slack or Google Chat (43% use these often). Among those who use

video conferencing services often, 63% say they are fine with the amount of time they spend on video calls; 37% say they are worn out by it. In general, teleworkers view video conferencing and instant messaging platforms as a good substitute for in-person contact – 65% feel this way, while 35% say they are not a good substitute.

HR teams began seeking different ways to mirror in-person processes like interviewing, all hands meetings, onboarding, performance reviews, and so on – with many employers relying on technology and system integration to accomplish what had formerly been face-to-face interactions. HR technologies became critical during this time, particularly for segments experiencing growth during the earliest days of the pandemic so they could continue to meet increased demand for goods and services.

But it isn’t just communication technology and all-hands meetings that HR leaders need. Technology should support and enhance HR processes and systems that enhance the different areas of the employee life cycle. As companies ramp up their hiring and recruiting efforts, recruitment is one key area that employers are focusing on to quickly scale their hiring to support their changing business needs.

One critical piece of HR technology for the hiring process is the applicant tracking system or ATS. The ATS is a technology component for effective and efficient hiring to support business objectives. The Cative survey asked whether or not participants use or integrate with ATS technology (see Table 4). The majority of respondents (40%) reported that they do not use an ATS, nor do they plan to use one, 29% reported they use an ATS but do not plan to integrate, 27% reported use of and integration with an ATS, and 5% reported they plan to integrate in the next 12 months.



WHY INTEGRATE BACKGROUND SCREENING WITH YOUR ATS?

Integrating background screening with your ATS has many benefits for recruiting and human resource teams, including a better candidate experience, improved productivity, metrics and analytics, and better accuracy and compliance. Here are the five primary areas that can be improved by integrating your background screening with your ATS.

1. Improve candidate experience.
2. Fewer hiring bottlenecks and improved productivity.
3. Fewer errors, improved accuracy and compliance.
4. The recruiter experience.
5. Improved hiring metrics and analytics.

HR and hiring managers are now pivoting to scaling up hiring efforts in a post-COVID economy. We're faced with recruiting and hiring in a very different landscape, meaning that we have to use technology to help us find the best candidates, engage them, build relationships, and perform outreach digitally. For positions that are remote, companies must assess how they can bring employees into their company culture and get them up to speed so they can be productive as quickly as possible.

Being able to move from attracting talent to candidate application to offer to hire quickly is crucial to keeping your talent pipeline stocked and your hiring funnel robust. When considering which areas to target for improving productivity, your recruiting technology should be front and center.

Technology integrations at every stage of the employee lifecycle are key to being able to hire in a tight talent marketplace, from recruitment to selection to onboarding and career development. These can be as simple as an interview scheduling tool that integrates with your HRIS to a multi-functional integration to speed up new hire paperwork, background screening, document verification; accelerating time-to-hire has never been more important.

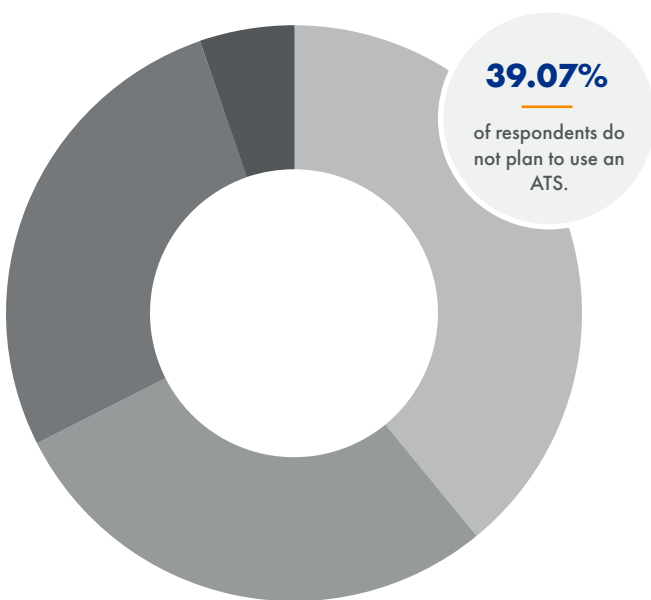


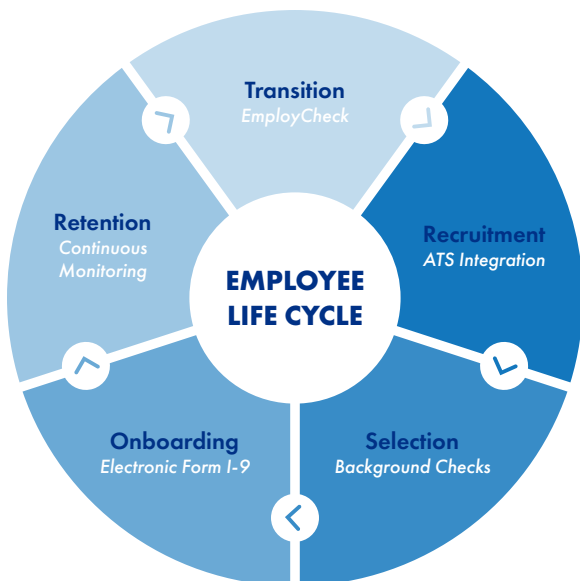
TABLE 4: Does your company use or integrate with an Applicant Tracking System (ATS)?

●	39.07%	No, and we do not plan to use one
●	28.48%	Yes, but we do not plan to integrate
●	27.15%	Yes, and it is integrated
●	5.30%	No, but we plan to in the next 12 months



Integration of HR technology can be key to streamlining processes like applicant tracking, screening, sourcing, reporting, onboarding, and more. When asked if their ATS is integrated with a background screening provider, the majority of respondents (81%) reported that their ATS is integrated, 8% reported that it did not integrate with a background screening provider, and 11% report that they did not know whether or not their ATS integrates with a background check provider. Integrations with HRIS technologies are a smarter way to remove bottlenecks from your recruiting and hiring processes.

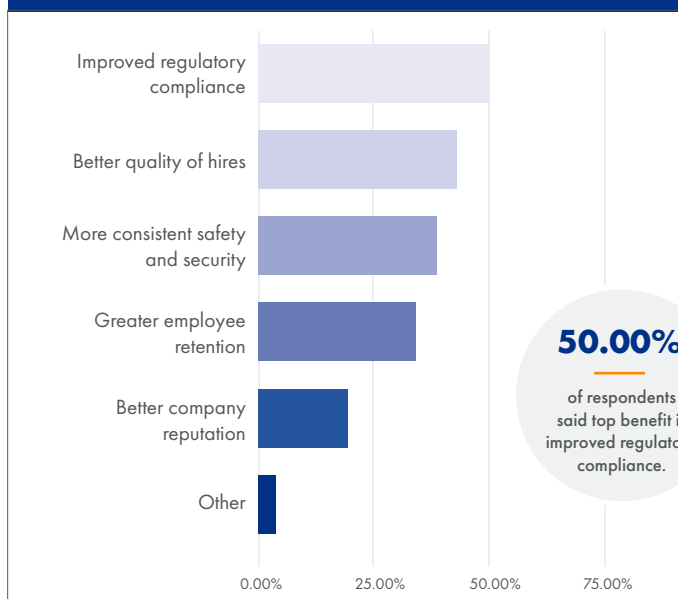
Ben Eubanks, HR Analyst and Principle at Lighthouse Research and Advisory, said, "talent leaders today do not have the time or patience for doing busy work or duplicate efforts to accomplish their tasks. Technology integrations allow them to not only solve those problems, but also creates an accurate picture of what's happening within their data. Forward-thinking business leaders rely on integrations to make them more effective and efficient at critical tasks like hiring and onboarding."



BACKGROUND SCREENING IN A COMPETITIVE TALENT MARKET

Cisive asked survey participants about the top benefits their organizations experience from an employment screening program (see Table 5). Improved regulatory compliance is at the top of the list (50%), followed by better quality of hires (44%) and more consistent safety and security (39%).

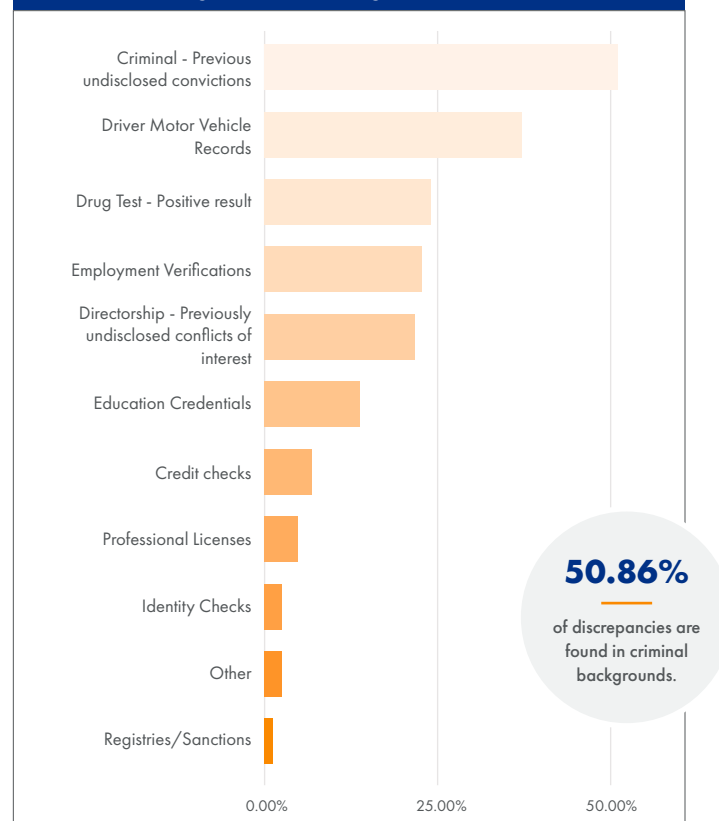
TABLE 5: What are the top benefits your organization experiences from employment screening?



By focusing on hiring quality talent, organizations can implement tactics such as pre-employment background screening programs that can help them improve retention rates and minimize staff turnover. A highly regulated industry such as healthcare is subject to industry and even job-specific screening requirements. More than one-third of survey respondents associate background screening with improved regulatory compliance. Regardless of the industry, however, employers must comply with the federal Fair Credit Reporting Act (FCRA) as well as the growing number of state and local "Fair Chance" ordinances, also known as "Ban the Box."

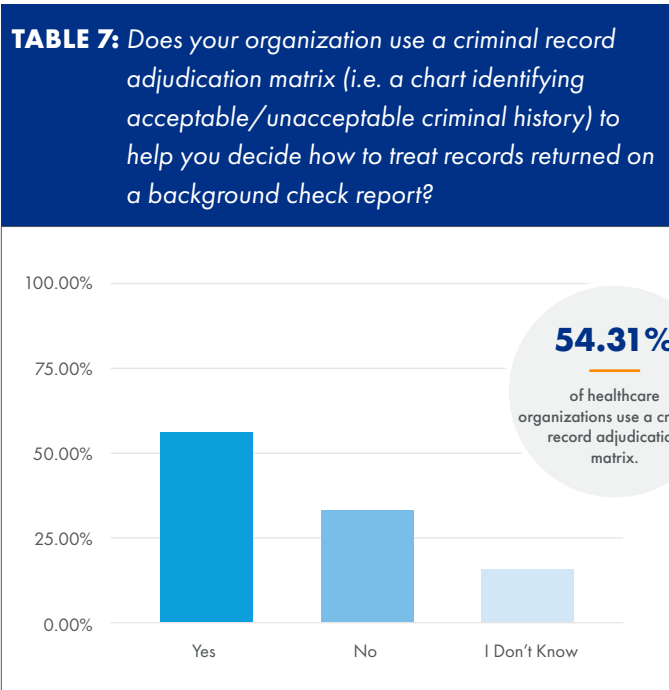
Cisive asked participants which background screening components uncovered the most discrepancies with job candidates (see Table 6). Previously undisclosed criminal convictions were the most common (51%), followed by driver motor vehicle records (34.5%). Positive drug test results (24%), employment verifications (22%), and previously undisclosed conflicts of interest (21.5%) were also among the most common discrepancies reported by participants.

TABLE 6: In which areas have you uncovered the most discrepancies with job candidates as a result of background screening?

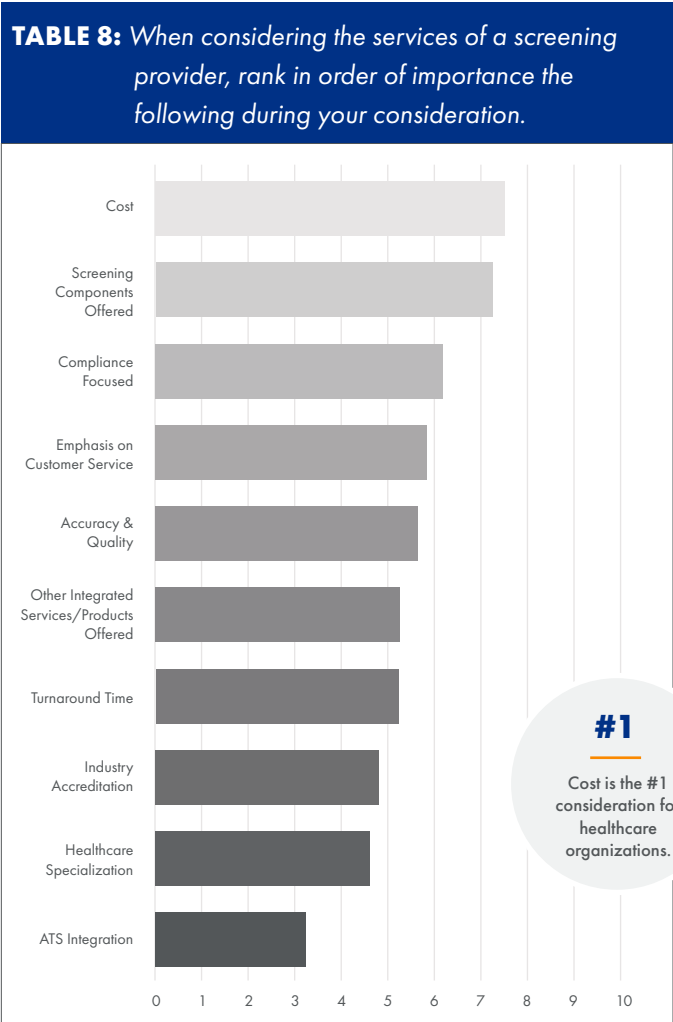


The frequency of undisclosed criminal conviction discrepancies emphasizes the significance of a thorough and effective background screening program. Positive drug test results, however, are also a common discrepancy among survey participants. This coincides with the latest workplace drug positivity research that indicates historically high records. In the general U.S. workforce, positivity increased 3.8 percent (5.3% in 2019 versus 5.5% in 2020), according to the 2021 Quest Diagnostics Drug Testing Index.³² The study is the first large-scale analysis of laboratory workforce drug tests performed during the COVID-19 pandemic.

Cisive asked participants if their organization uses a criminal record adjudication matrix when deciding how to treat records from background checks (see Table 7). The majority of employers indicated that they do (54%), while almost one-third (30%) do not, and less than one-fifth (15.5%) did not know. “Employers should set the criteria for adjudication matrix to be job-specific and be mindful of not violating any federal, state, or local equal employment laws,” states Chad Ascar, Director of Compliance and Product Training at IntelliCorp, a sister Cisive company.



Survey participants were also asked to rank what matters most when considering the services of a screening provider. Cost was selected as the most important factor, closely followed by screening components offered as second. Compliance-focused, emphasis on customer service, and accuracy & quality were the next three most important factors (see Table 8).





For an industry that was shaken by the COVID-19 pandemic, it is understandable that employers have placed a heavier emphasis on cost than in other conditions. When safeguarding their organizations, however, healthcare employers should consider other factors besides program costs. Screening components offered also ranked high on participants' considerations. Incorporating the appropriate screening components can mean the difference between a compliant program and one that misses the mark. "Not conducting regular exclusion screening, for example, can result in higher risk for civil monetary penalties," says Bryan Barajas, Senior Director of Marketing at Cisive.

When building an employment screening program, selecting a vendor that has integrated services can help organizations streamline processes and maximize efficiencies. Customer service, however, was also highlighted as an important factor. Not only is the customer experience important for employers as they interact with their screening partner, but it can also impact the candidate experience, which is an emerging area of focus for companies across the globe.

Candidate experience is defined as how job seekers perceive and react to employers' sourcing, recruiting, interviewing, hiring, and onboarding processes. If a job seeker had a poor experience during an interview a decade ago, he or she would be less likely to apply again in the future, accept a job offer, or buy that company's products or services. They would also probably tell their inner circle about the poor experience.

Workplace change agent, author, and consultant Jessica Miller-Merrell states: "This is even more critical in a post-COVID talent marketplace for both candidates and employees. The response your company had to the pandemic, with regard to employee safety and wellness, remote working policies, and so on, really matters to employees - and they will remember it and you'll see it on employer review websites. If you have been focusing on things like psychological wellness and offering resources for your employees, this should be front and center as you work to recruit candidates and treat them with empathy."

The ubiquitousness of social media and employer review sites have dramatically expanded the dynamic and size of our inner circles. As a consequence, news of a poor employee or candidate experience can travel much faster and further. Research shows that candidates who had a poor candidate experience are far more likely to tell others not to apply to a company and write a negative review.

Cisive also asked survey participants what their top employment screening challenges are (see Table 9). Minimizing turnaround time is at the top of the list (59%), followed by managing program costs at 40.5%.

TABLE 9: What are the top employment screening challenges your organization experiences?

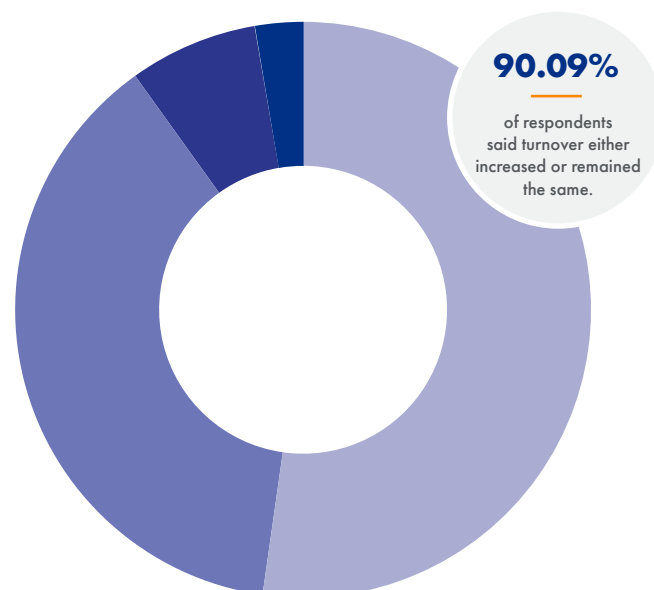
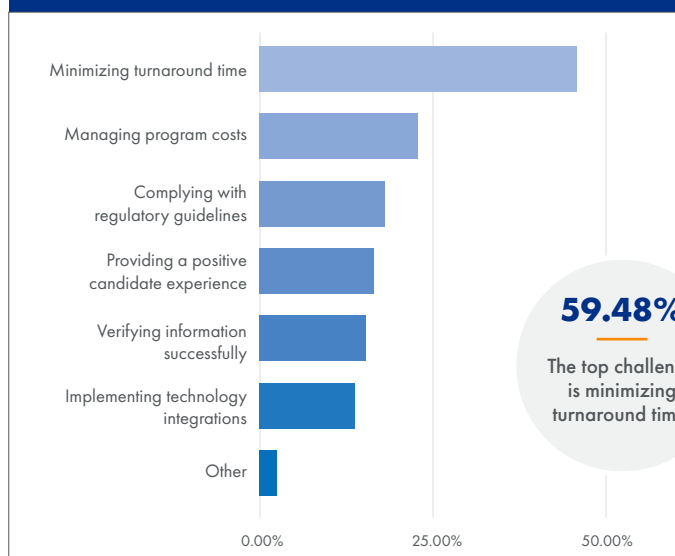


TABLE 10: How was your organization's turnover impacted by the pandemic?

52.25%	Our turnover remained about the same
37.84%	Our turnover increased compared to before COVID-19
7.21%	Our turnover decreased compared to before COVID-19
2.70%	Other



Cisive asked survey respondents about how their organization's turnover was impacted by the COVID-19 pandemic (Table 10). Just over half (52%) reported that their turnover was about the same, but 38% reported that turnover increased.



Time is always a crucial factor in recruiting. According to the 2020 NA Talent Board CandE Benchmark Research Report,³³ if employers make the offer within one week of the final interview, the candidates' great experience and willingness to increase their relationship with the employer increased 67% for all employers. More employers are investing more in communication and engagement with new hires before their start date. The more engagement prior to their start date, the better a retention starter it becomes. For candidates who were given multiple options to communicate goals, meet team members, and get questions answered prior to their start date, their great experience increased 83%. When they completed all their new hire forms online in an onboarding system, their great experience increased 68%. And if they get a call from the hiring manager, their great experience and willingness to increase their relationship with the employer increased 68%.

Turnaround time can also be affected by legislation. Two states, California and Michigan, have attempted to enact Personal Identifiable Information (PII) redaction legislation. This would negatively impact background screening organizations' abilities to conduct background checks in these states. In Michigan, legislation has been amended to allow "authorized users" to access PII in order for organizations to continue to screen individuals as needed.³⁴

California is redacting dates of birth, social security numbers, and driver's license numbers from public court records.³⁵ Employers in California can voice their concerns with this legislation by contacting their state representatives, the Governor, and the California Supreme Court.

Throughout most of 2020, COVID-19 forced many state, county and federal courthouses to temporarily close, operate remotely, and oftentimes with a limited number of on-site employees. Additionally, laboratories that provide drug testing may not have been available for in-person visits and candidates may have been reluctant to visit a lab due to risk of exposure. So what does this mean for companies that need fast and reliable employment screening in order to vet candidates?

Despite the challenges presented by the pandemic, drug testing continues to be a valuable risk mitigation tool for employers. The stress and pressures from the pandemic have elevated the opioid epidemic to new heights. The Centers for Disease Control and Prevention's (CDC) National Vital Statistics System (NVSS) data show that total drug overdose deaths spiked to record levels in March 2020 after the pandemic hit, according to a report by The Commonwealth Fund.³⁶ Our research shows that most healthcare employers

understand the value of drug testing and have a program in place (see Table 11). Only 22% of respondents indicated they do not conduct pre-employment drug testing.

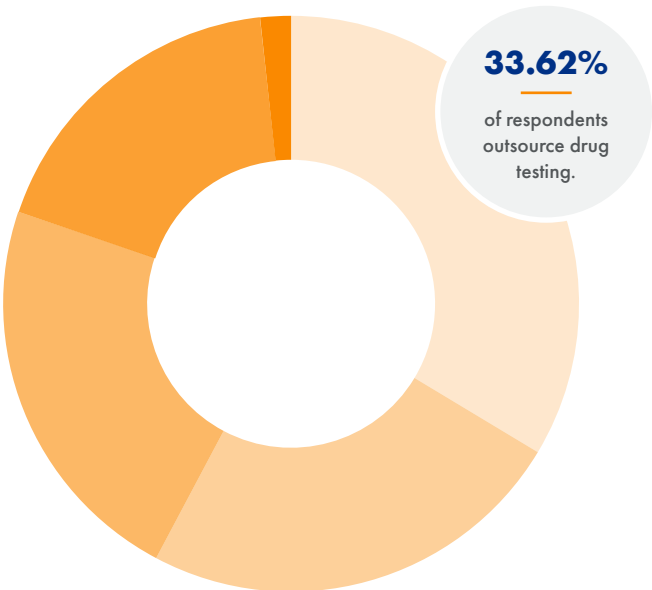
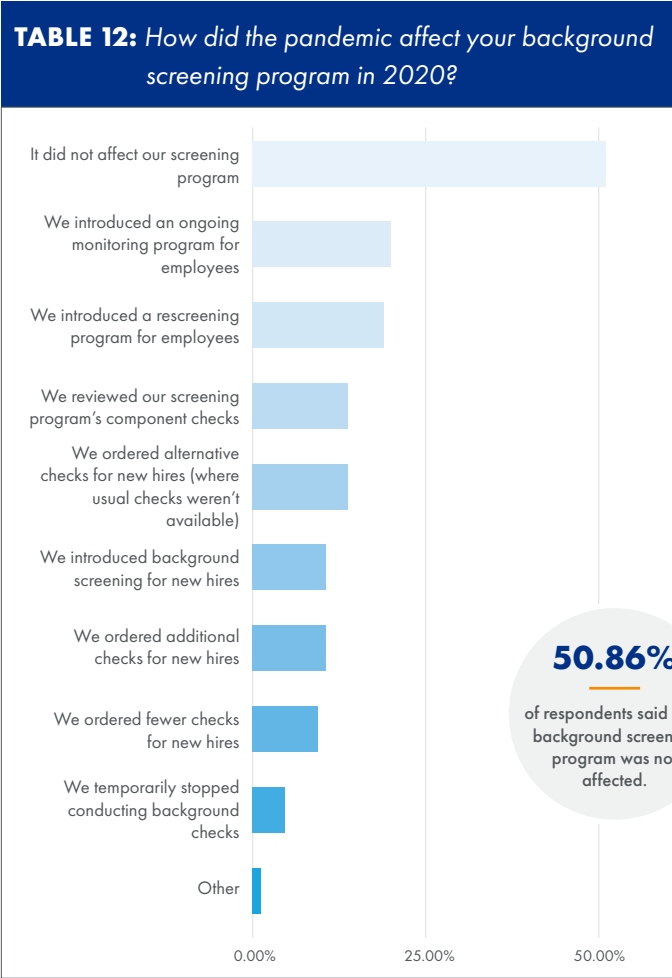


TABLE 11: Do you perform pre-employment drug testing?		
33.62%	Yes, and we outsource pre-employment drug testing	
24.14%	Yes, and we perform some pre-employment drug testing ourselves and outsource some pre-employment drug testing	
22.41%	No, we do not perform pre-employment drug testing	
18.10%	Yes, and we perform our own pre-employment drug testing	
1.72%	Other	



The latest pre-employment drug testing research suggests the pandemic has not reduced the amount of drug tests conducted by the majority of employers. Half of employers (50%) reported the same pre-employment drug testing volume as past years while more than one-fourth (28%) even increased the amount of drug tests, according to the Current Consulting Group's 2021 Employer Drug Testing Survey.³⁷ The same study found that more than four-fifths (82%) of employers did not alter their drug testing practices as a result of the pandemic and 86% did not suspend any type of drug testing.

Cisive asked how the pandemic affected participants' background screening programs (see Table 12). A majority said the pandemic did not affect their screening program. Slightly under 20% of respondents said they introduced an ongoing monitoring (continuous screening) program for employees, and nearly 19% introduced a rescreening program. Just over 16% reviewed the component checks of their current screening program and ordered alternative checks for new hires where usual checks weren't available. Only 7% temporarily stopped conducting background checks.



Cisive's study also asked participants how often employees at their organization are subject to background checks (see Table 13). Time of hire was the most common among our healthcare respondents (40%), with every two years coming in second (29%). Only 15.5% of companies surveyed conduct background screening on an annual basis.

Cisive asked participants how often they reviewed their background screening policy (see Table 14). The majority of respondents indicated they review their background screening policy annually (40%), and one-third review their policy every 2-5 years (33%).

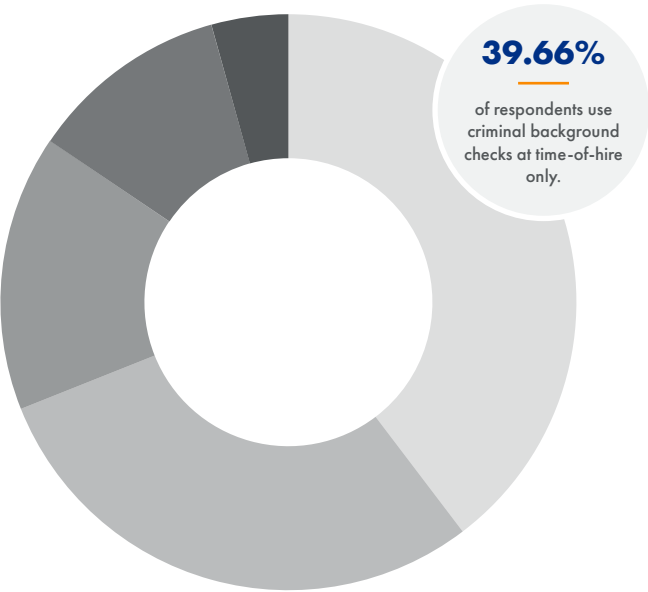


TABLE 13: How often are employees at your organization subject to employment criminal background checks?

39.66%	Time of hire only
29.31%	Every two years
15.52%	Annually
11.21%	Other
4.31%	I don't know



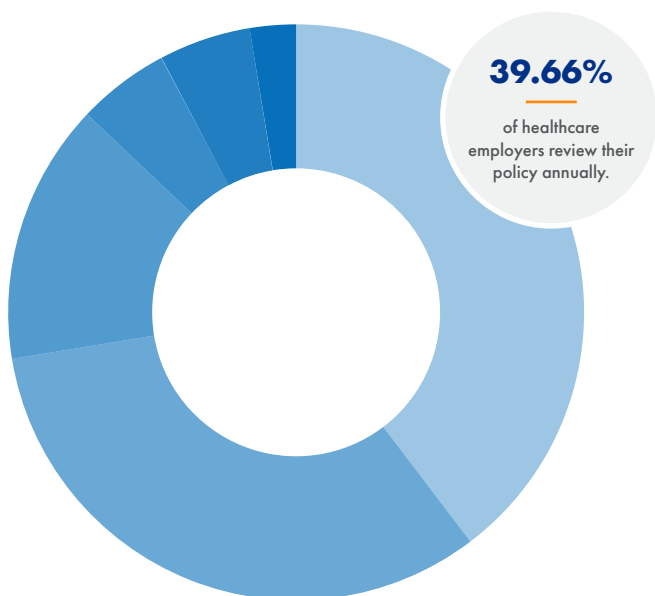


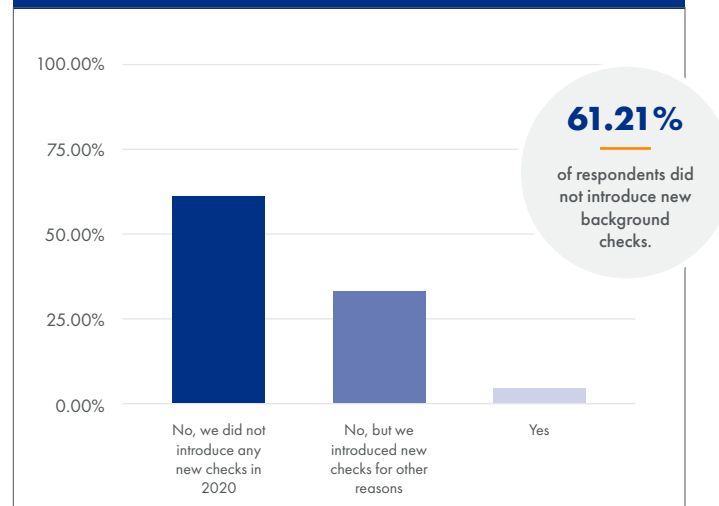
TABLE 14: How often does your organization review its background screening policy for changes?

●	39.66%	Annually
●	32.76%	Every 2-5 years
●	14.66%	Every 5-10 years
●	5.17%	Never
●	5.17%	I don't know
●	2.59%	Other



introduced new checks for other reasons. Our results indicate that 39% of organizations introduced an ongoing monitoring or rescreening program for employees in 2020, and companies have adopted other measures such as COVID-19 attestation tools to safeguard employees during the pandemic.

TABLE 15: Did you introduce any new background checks in 2020 specifically to help mitigate the risks of remote work/hiring?



Just under 13% of participants indicated their organizations do not review their background screening policy more frequently than 5 years, they did not know, or selected "other."

While 2020 was an unprecedented year, it is a reminder of how rapidly change can affect the workplace. "With the proliferation of Ban the Box/Fair Chance regulations, employers should review their screening process at a minimum annually," says Chad Ascar, Director of Compliance and Product Training at IntelliCorp. "Staying abreast of these regulations can help organizations ensure they are following the law."

Cisive asked whether participants introduced any new background checks in 2020 specifically to help mitigate the risks of remote hiring (see Table 15). While less than 4% of respondents introduced new checks such as fingerprinting as a response to remote work, over a third of respondents (35%)



HEALTHCARE SPECIFIC BACKGROUND
SCREENING

We asked participants how often their organization conducts exclusionary checks. Annually and Time-of-Hire-Only were tied for first at 18%, followed closely by Monthly at 17% and Quarterly at 15.5% (see Table 16). The Office of Inspector General’s (OIG) 2013 Special Advisory Bulletin on Exclusion Screening, however, recommends monthly exclusion screening as a best practice in the industry for minimizing risk.³⁸

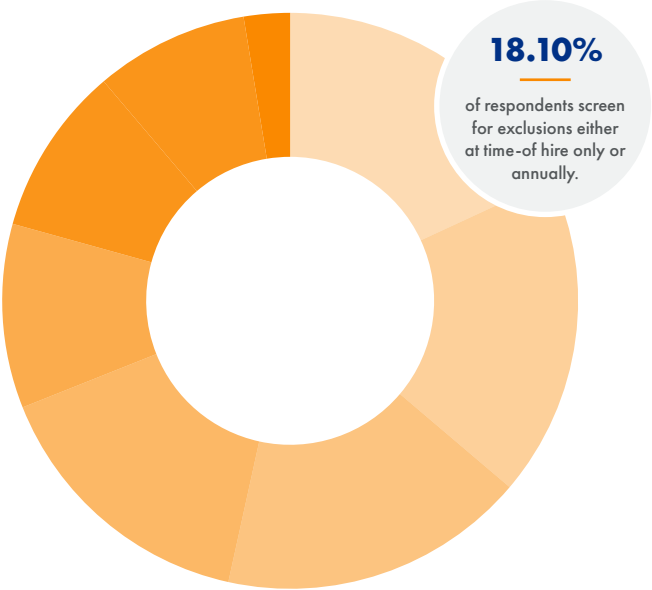
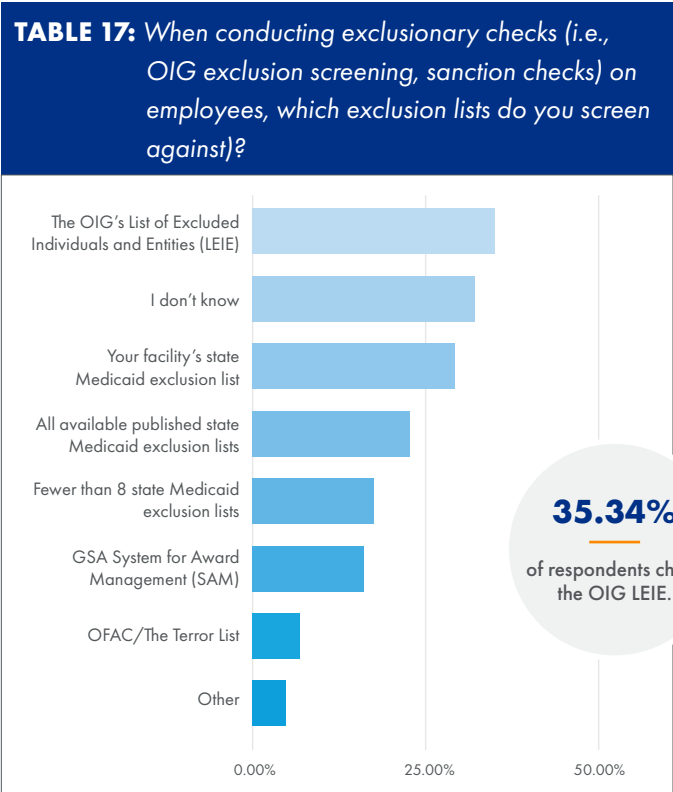


TABLE 16: How often does your organization conduct exclusionary checks (i.e., OIG exclusion screening, sanction checks) on staff?		
18.10%	Time of hire only	
18.10%	Annually	
17.24%	Monthly	
15.52%	Semi-annually	
10.34%	Quarterly	
9.48%	I don't know	
8.62%	Never	
2.59%	Other	



We also asked participants which exclusion lists they screen against while conducting exclusion screening. The majority (35%) check the OIG’s List of Excluded Individuals and Entities (LEIE). Just more than one-quarter said they check their facility’s state Medicaid exclusion list, and just less than one-quarter said they check all available published state Medicaid exclusion lists. Almost one-third said they did not know (see Table 17).



We were curious how our participants manage and monitor their licensed staff’s professional licenses and certifications that are required for the job for expirations and disciplinary actions. One-third of all respondents said they use enterprise software such as Enterprise Resource Planning (ERP), Payroll, or HR Management, followed closely by spreadsheets and paper processes (see Table 18A). In organizations employing more than 1,000 people, however, our results indicated a stronger preference for enterprise software and spreadsheets (see Table 18B).

The use of technology to manage and monitor professional licenses and certifications continues to increase over time. In many cases, the method of management may overlap within any given organization. For example, most enterprise software solutions allow queries to be run that can be exported to spreadsheets and other formats. In other cases,

third-party credentialing organizations leverage the data stored within enterprise software systems as a data source for the solutions offered. Monitoring methods may also overlap as the delegation of responsibility is dispersed among multiple departments within an organization.

TABLE 18A: *How do you manage and monitor your licensed staff’s professional licenses and certifications that are required for the job for expirations and disciplinary actions?*

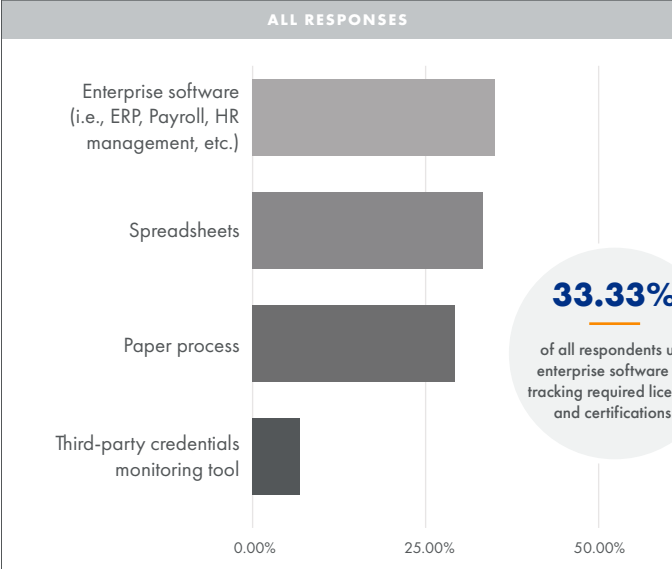
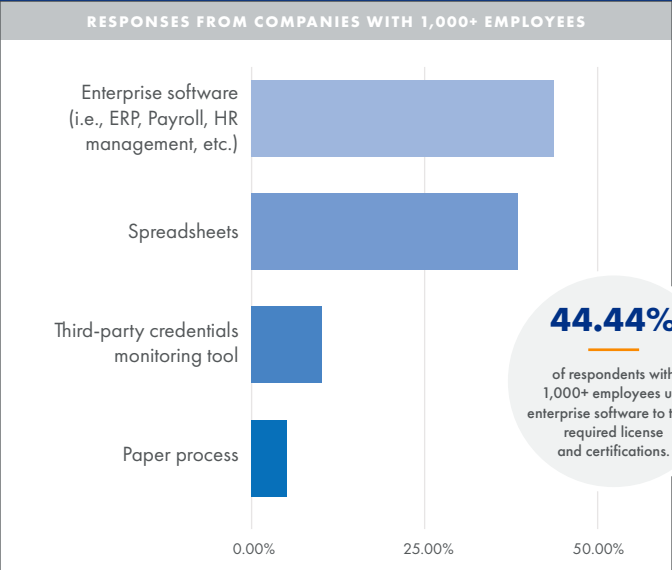


TABLE 18B: *How do you manage and monitor your licensed staff’s professional licenses and certifications that are required for the job for expirations and disciplinary actions?*



Tracking of preferred licenses and certifications, not required according to the job description, are sometimes tracked only at the department level. Our survey results show that almost half of our respondents rely on paper or spreadsheets, but the majority use enterprise software solutions (see Table 19A).

However, among healthcare organizations that employ more than 1,000 people, the heavy majority lean on their enterprise software to store them (See Table 19B). In many cases, the preferred licenses and certifications are stored in those systems, but not monitored for renewal.

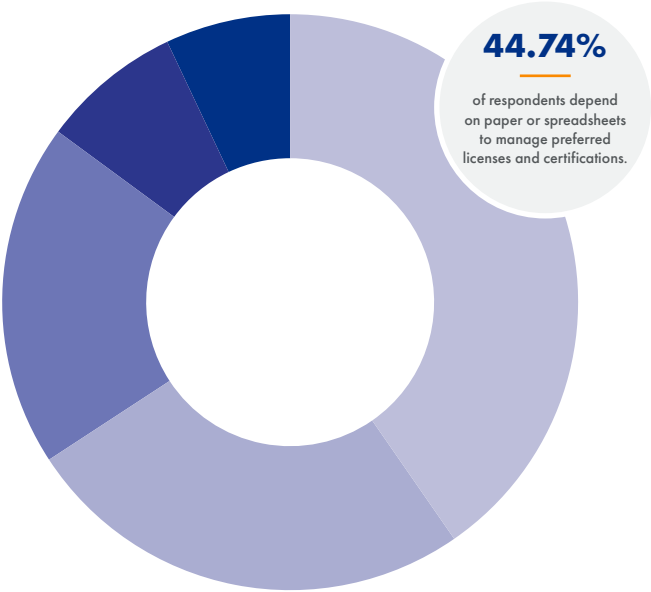


TABLE 19A: How do you manage and monitor your licensed staff’s professional licenses and certifications that are preferred but not required for the job for expirations and disciplinary actions?		
ALL RESPONSES		
Enterprise software (i.e., ERP, Payroll, HR management, etc.)	40.35%	
Paper process	25.44%	
Spreadsheets	19.30%	
Third-party credentials monitoring tool	7.89%	
Other	7.02%	

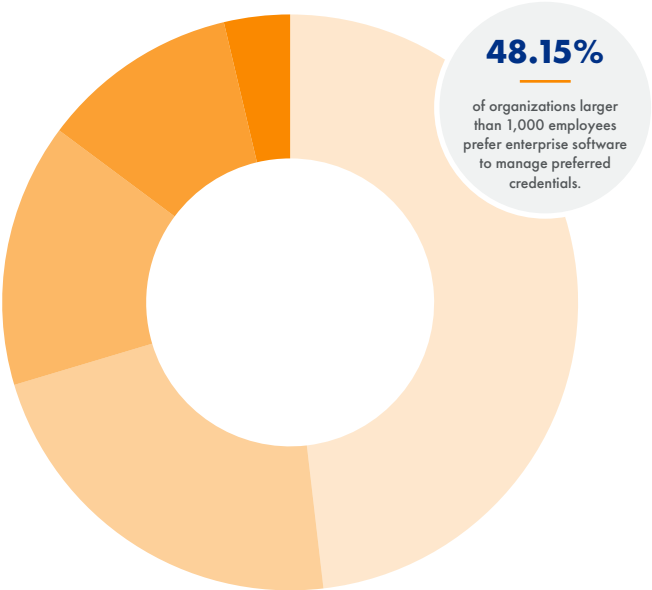
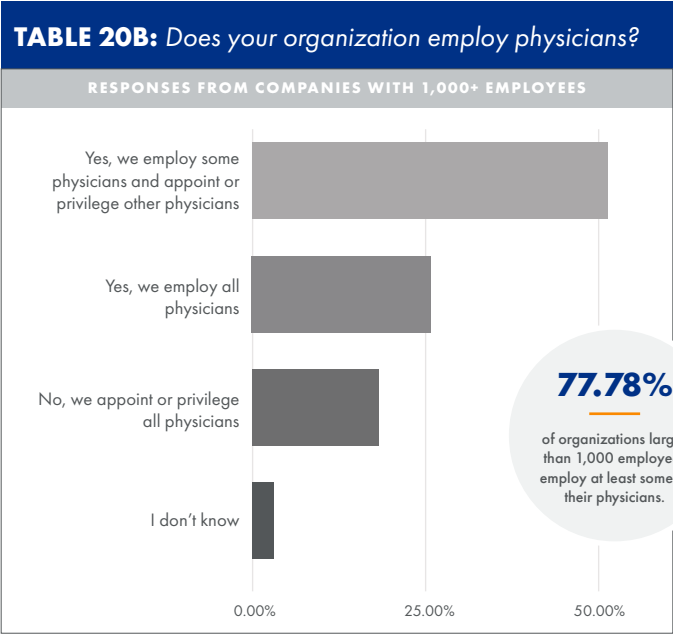
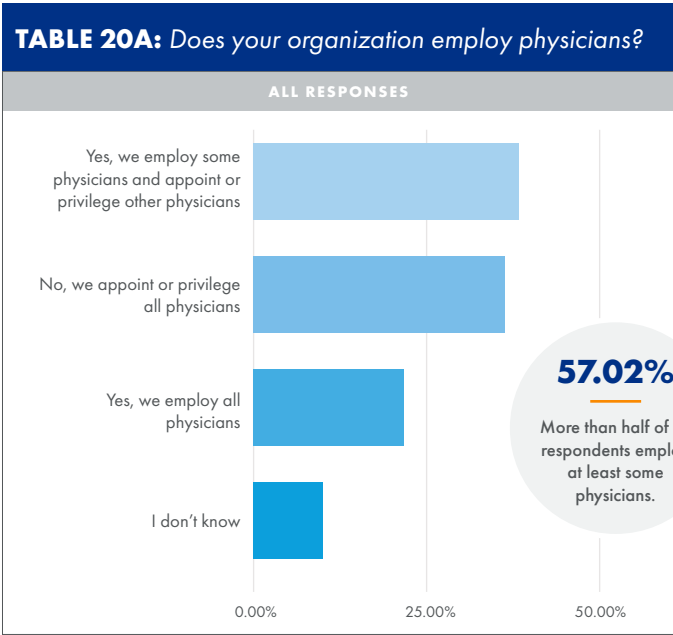


TABLE 19B: How do you manage and monitor your licensed staff’s professional licenses and certifications that are preferred but not required for the job for expirations and disciplinary actions?		
RESPONSES FROM COMPANIES WITH 1,000+ EMPLOYEES		
Enterprise software (i.e., ERP, Payroll, HR management, etc.)	48.15%	
Spreadsheets	22.22%	
Third-party credentials monitoring tool	14.81%	
Paper process	11.11%	
Other	3.70%	

We asked our participants if they employ physicians, and if so, conduct background screens on them. Over half of our respondents indicated that they employ at least some physicians, and one-third said they appoint or privilege their physicians (see Table 20A).

When looking at responses from companies who employ more than 1,000 people, three-fourths of our respondents said they employ at least some physicians, which is consistent with data from 2016 (see Table 20B).



Regarding background screening physicians, our data show a pretty even split between those organizations that conduct background checks on employed and appointed/privileged physicians, those that conduct checks on employed physicians only, and those that do not conduct background checks on physicians at all (see Table 21).

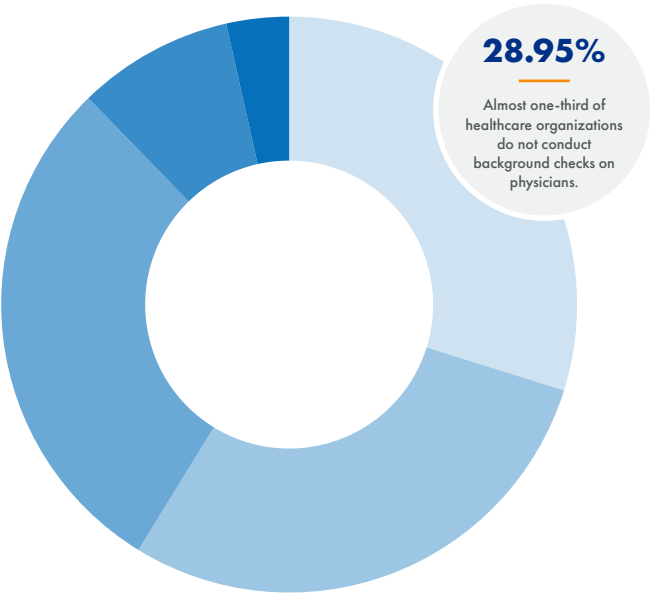
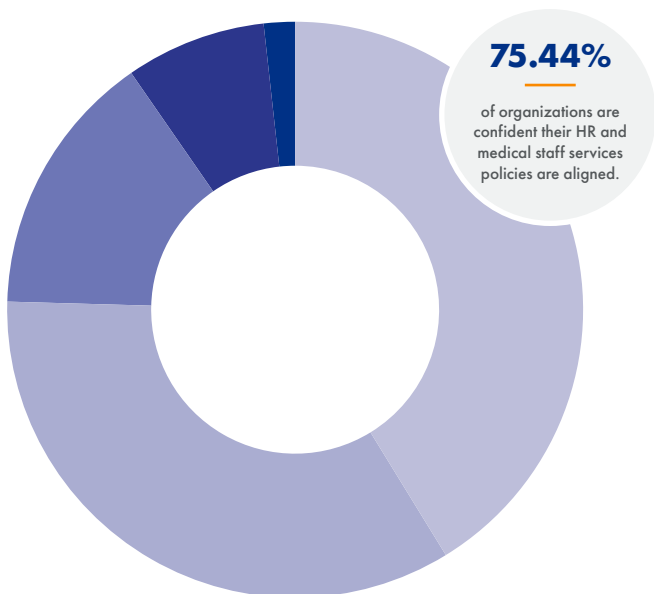


TABLE 21: Does your organization conduct background checks on physicians?

29.82%	Yes, we conduct background checks on employed physicians only
28.95%	Yes, we conduct background checks on both employed and appointed/privileged physicians
28.95%	No, we do not conduct background checks on physicians
8.77%	I don't know
3.51%	Yes, we conduct background checks on appointed/privileged physicians only

We asked participants how confident they are, and how important it is, that their HR and medical staff services background screening policies are aligned. Three-fourths of respondents are very or somewhat confident that their policies are aligned, and 83% felt it was very or somewhat important that their policies be aligned (see Tables 22 and 23).



- **Improve Patient Safety:** By effectively sharing information and working closely together, patients benefit from a safer environment. Neglecting to share information can lead to increased patient harm.

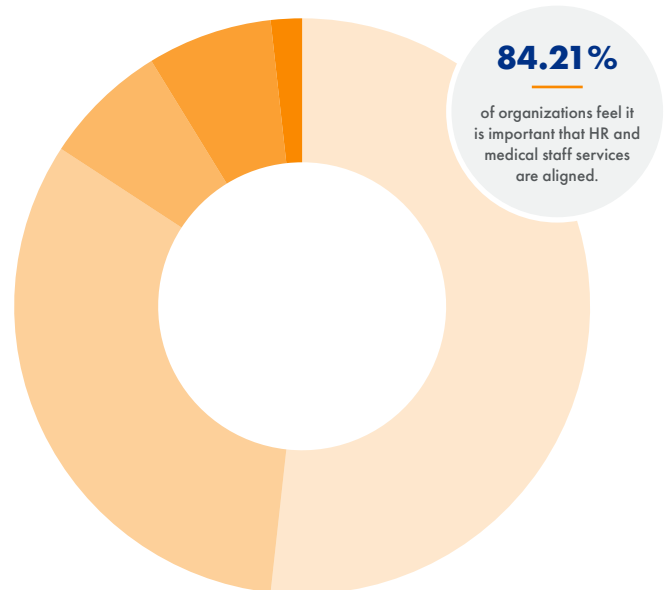


TABLE 22: How confident are you that your HR and medical staff services background screening policies are aligned?

41.23%	Very confident
34.21%	Somewhat confident
14.91%	Not so confident
7.89%	Other
1.75%	Not at all confident



TABLE 23: How important is it to your organization that HR and medical staff services are aligned?

51.75%	Very important
32.46%	Somewhat important
7.02%	Not so important
7.02%	Other
1.75%	Not at all important

There are multiple benefits to ensuring your medical staff and HR processes are aligned, including:

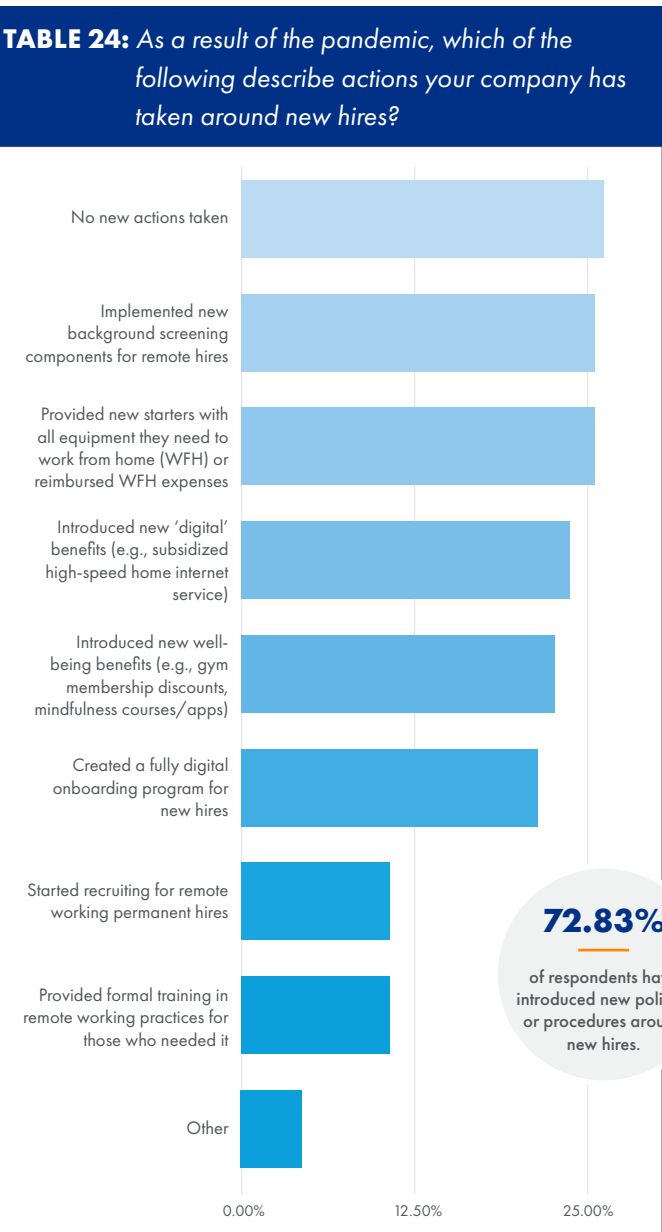
- **Ensure Consistent Results:** Proper alignment between HR and the medical staff can ensure consistent decisions. By design, the medical staff bylaws and the HR policies are different; which means employees can be treated differently if an ad hoc approach is followed when handling practitioner issues.
- **Minimize Redundancies:** Increased collaboration between HR and the medical staff can help eliminate redundancies in several areas when each department is running on separate tracks. The most efficient approach takes advantage of the strengths of both of these processes.



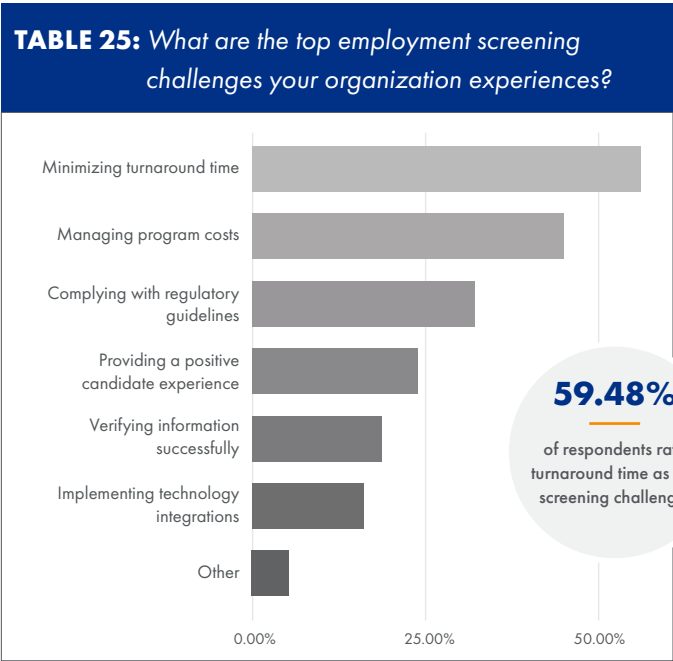
HOW COVID-19 CHANGED PRIORITIES OF HR LEADERS

The COVID-19 crisis was unprecedented and many company and HR leaders have had to quickly pivot to incorporate remote and hybrid work models that require companies to assess how they can bring remote employees into their company culture and get them up to speed so they can be productive as quickly as possible.

Cisive asked survey participants what actions they have taken around new hires as a result of the pandemic (see Table 24). Just over 26% said they have implemented new background screening components for remote hires and provided them with all equipment needed to work from home (WFH) or reimbursed WFH expenses. Almost 24% said they introduced new 'digital' benefits, such as subsidizing high-speed internet services, and 23% introduced well-being benefits like gym membership discounts or mindfulness courses. Additionally, 21% created a fully digital program for onboarding new hires.



As time to hire becomes one of our most important HR metrics, organizations are focused on speeding current processes and eliminating bottlenecks, especially around screening talent. Survey respondents (see Table 25) reported that minimizing turnaround time was a top challenge (59.5%), followed by managing program costs (40.5%). These are followed by complying with regulatory requirements (29%), providing a positive candidate experience (24%), verifying information successfully (21.5%), and implementing technology integrations (17%).



Turnaround time, or the direct impact of turnaround time on time to hire, correlates with candidate experience. In fact, a 2021 Candidate Expectations Survey³⁹ from Cronfy reports that responsiveness during the hiring process came out on top as the thing that matters most to candidates in the U.S. In fact, 64% of US candidates said that the process of interview scheduling directly impacts their perceptions of an employer, and even more so with those applying for senior roles.

Global markets are also a priority, partially due to the prevalence of remote and hybrid work environments as well as a means of addressing the ongoing talent shortages healthcare organizations face.¹³ Cisive asked survey participants if their organization recruits internationally, and the majority (almost 58%) do (see Table 26).

Global background check programs are necessary for both international organizations as well as US organizations that hire a diverse set of candidates. With remote employment



broadening your talent pool from your immediate geographical location to nearly everywhere in the world, global background checks are expected to be more common. This can present a challenge for organizations not equipped to handle international background checks.

For example, if an employer has made the decision to keep a portion of its workforce working remotely for good and employees move out of the immediate vicinity to another country, domestic background screening isn't sufficient for continuous background checks. Employers will need to abide by the laws of their employee's country of residence and be able to access information in that country. Additionally, more employers are taking advantage of a productive remote workforce to expand talent pools so they can recruit and hire citizens of other countries and will need to be able to conduct background screening in their candidate's countries of origin.

Global background screening isn't just for organizations that have offices or locations in other countries—it also refers to performing background checks on domestic-based candidates who have lived, worked, or studied in another country. With the sharp rise in remote working and the number of companies choosing to retain a dispersed workforce, a segment of your formerly US-based employees could relocate anywhere in the world. This complicates a number of things for employers (including payroll), but especially for continuous screening on a global scale.

The three most important areas to focus on when developing a policy for background screening are verification, consistency, and legal compliance.

Verify candidate experience and education. Employers should know who they are hiring by verifying the candidate's educational background, employment history and other licensing credentials. Employment verification is done in the US and globally. This includes both long term and short term work history. It also includes start and end times and reasons for leaving employment. Employment verification can be one of the hardest things to pre-screen, as sometimes past employers may not be easy to reach or they might have closed operations.

Consistency in hiring practices. Your company policy around new hires or continuous background checks should have a consistent set of requirements and standards supported across the organization, and should be developed with an understanding of all the regions in which they will be implemented and supported. Not verifying applicants' foreign experience creates an inconsistency in your hiring process and may lead to claims of discriminatory hiring practices. For example, if you run a domestic background check on two applicants for the same position and one of them claims to have a degree from a foreign institution, you will end up checking the educational claim of only one of the candidates, potentially exposing your company to litigation. Additionally, negligent hiring claims can arise when an employee causes harm to another employee and your company cannot demonstrate that it exercised due diligence when evaluating that worker's fitness for the job.

Ensure legal compliance. The legal implications of international background screening involve the intersection of U.S. and foreign laws and they can be extraordinarily complex. It is important to understand both the laws that apply in both the U.S. and the relevant foreign country. For example, in healthcare, it's important to conduct exclusion screening⁴⁰ to avoid not only risk to the organization, but also potential civil monetary penalties of up to \$10,000 per instance.

The obligations of the Fair Credit Reporting Act (FCRA) still apply for international screening. If you're working with a vendor partner to outsource international screening, the vendor has an FCRA obligation to take reasonable procedures to ensure accuracy. If there is a negative public record, such as a criminal-record "hit," then the firm must make sure the information is correct and up-to-date and supplied in a way that does not violate any data- or privacy-protection rules.

It's also important to know and understand the country's data-privacy regulations, such as the EU's General Data Protection Regulations (GDPR), because the background screening

process involves collecting and transferring personally identifiable data. These complexities are the primary reason many companies choose to work with a third-party vendor that has particular expertise with international background checks and hiring employees globally.

"Cisive has embraced remote work to thrive in the new normal," said James Owens, Cisive's CEO. "The pandemic has catalyzed innovation for our company. As a founding member of the Velocity Network Foundation,⁴¹ Cisive and PreCheck are at the forefront of an exciting paradigm shift in self-sovereignty of career credentials that will transform the world of talent acquisition. It is more important than ever to have a global strategy when it comes to talent acquisition and background screening, and leveraging the best technology and global-capable platforms such as Cisive and PreCheck's solutions can help companies succeed in the workplace of the future."





CONCLUSION

Through the pandemic, healthcare organizations mostly continued to recruit as normal. However, top challenges moving forward are minimizing turnaround time, managing program costs, complying with regulatory requirements, and providing a positive candidate experience. Two years into the pandemic, staffing issues are especially challenging with a growing percentage of nurses feeling burnt out and that their mental health has suffered.

In order to remain competitive, healthcare organizations need to strike a balance between speed and quality throughout every part of the employee life cycle. By creating processes and systems that prioritize these updates and changes, companies can gain a competitive advantage in effective recruitment, onboarding, and ultimately retention in a post-COVID workplace.

For companies who are looking to hire quickly, recruitment and onboarding are the biggest areas of opportunity. This is in part because of the competitive recruitment and hiring markets combined with the business need to train and acclimate employees quickly in order to drive productivity and maximize revenue within the employee's first six months of hire. Organizations should lean on vendor partnerships and technology integrations with HR, including background check screening companies like Cisive and PreCheck, allowing organizations to scale and pivot quickly to meet the rapidly changing needs.

If the pandemic has taught us anything, it is to expect the unexpected and that organizations who can quickly scale, adapt, and pivot will reap the benefits this changing environment brings. The ability to find talent is a key component, and even more important is the ability to quickly adjust to the market conditions whatever the future might bring.

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ABOUT CISIVE

At Cisive, we are experts in the specific risks and regulations that apply to the financial services and other highly regulated industries. For many years, we have provided tailored solutions to meet the unique requirements of our enterprise clients.

Cisive's service model provides a single, integrated system throughout the globe using complete applicant information and country-specific forms. Cisive returns information to our clients through a centralized system for analysis, quality control, presentation, and billing.

With over 4 decades of experience and expertise in working with many of the world's largest financial services institutions, Cisive's deep insight into employment screening practices and industry knowhow, is unlike any other background screening provider in the industry.

Your business will not only get a background screening provider, but a lifelong partner – a company that stands by their work; protects their clients and provides the consultation and guidance world class act organizations are looking for.

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ABOUT PRECHECK

Founded in 1983, PreCheck has focused exclusively on serving the healthcare industry's background screening and employment qualification needs since 1993.

PreCheck serves over 5,000 hospitals, long-term care facilities, clinics, educational institutions, and other ancillary healthcare organizations, across the U.S. PreCheck has evolved over time from a background screening provider into a turnkey outsourcing solutions provider, offering a full suite of background screening, compliance monitoring, and credentialing solutions all designed to help its clients adhere to the extensive regulations governing the healthcare industry.

Based in Houston, PreCheck is a five-time Inc. 5000 honoree and has achieved Background Screening Credentialing Council Accreditation by the Professional Background Screening Association (PBSA).

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