Communication with physician faculty candidates and prospective hires must be frequent and direct. Engagement of the faculty hires is critical to the success of the on boarding. Basic on boarding requires a minimum of 3-4 months to a maximum of 8 months or even longer (for international medical graduates, senior physicians with lengthy requirements for primary source verification, or faculty hires not attentive to details).

- Cellular phone numbers and other contact information for faculty hires must be kept current.
- At the time of interviewing, advise faculty candidate (especially those training on GETP and out-of-state physicians) to begin the FCVS verification process immediately and the LA licensing application as soon as certain he/she is coming. (Note that LSBME renewal process begins with licensee birthday and thus renewal can occur quickly – triggering requirement to complete LSBME “orientation program”.)
- Recruitment must be moved up in time. Spring is too late to initiate a clinical hire for a July or August start date.
- With a prospective July or August start date, offers should be made no later than late December for out-of-state hires and no later than late February for in-state, licensed hires.
- Use the shortest possible response time on Letters of Offer, no longer than 15 days.
- Route LSUHN (and other applications) to faculty hire as soon as signed “Acceptance of Offer” is received. Note that many hospitals (including UMC which requires APPLICANT to formally request application) have adopted a pre-application process, each with distinctive features, that adds additional time to on-boarding
- Use checklist developed to assist faculty hires organize the materials they will need for licensing and credentialing processes.
- Set date of hire for the 1st of the month if at all possible (benefits and EHR issues) or the 15th as a second alternative.
- Plan on submitting hospital privilege forms no later than 8-10 weeks in advance of prospective date of hire (Credentials and Medical Executive Committee meetings vary amongst the provider entity). Carefully define need for hospital staff privileges at individual facilities – employment is contingent on having all hospital staff appointments. Because of FPPE and OPPE requirements applicants should request and department heads MUST sign off only on relevant privileges/procedures.
- Moderate and deep sedation privileges may require completion of specific training modules and submission of proof of other qualifications.
- Faculty hires need to select references carefully, relying primarily on those individuals who are acquainted with the importance of timely submission of the peer references.
- Use on line data resources (u drive) from LSUHN to track progress of credentialing and privileging.
- Enrollment in managed care programs typically requires separate applications to each.
- Discourage new faculty hires from personally visiting the UMC Medical Staff Office to check on application status.
- If new faculty member is willing, he/she can train in advance of date of hire on EHR at LSUHN or UMC or other facility. Departmental business office needs to coordinate EHR training for new clinical faculty at various facilities.
- New faculty members should not be placed on call schedule until all training has been completed and LSUHN credentials and all hospital appointments have been granted.
- Develop departmental expertise in clinical on boarding.

March 15, 2016