

Home Care, Hospice & Palliative Care Alliance of NH Workforce Survey Results

Patrick B. Miller, MPH

Principal

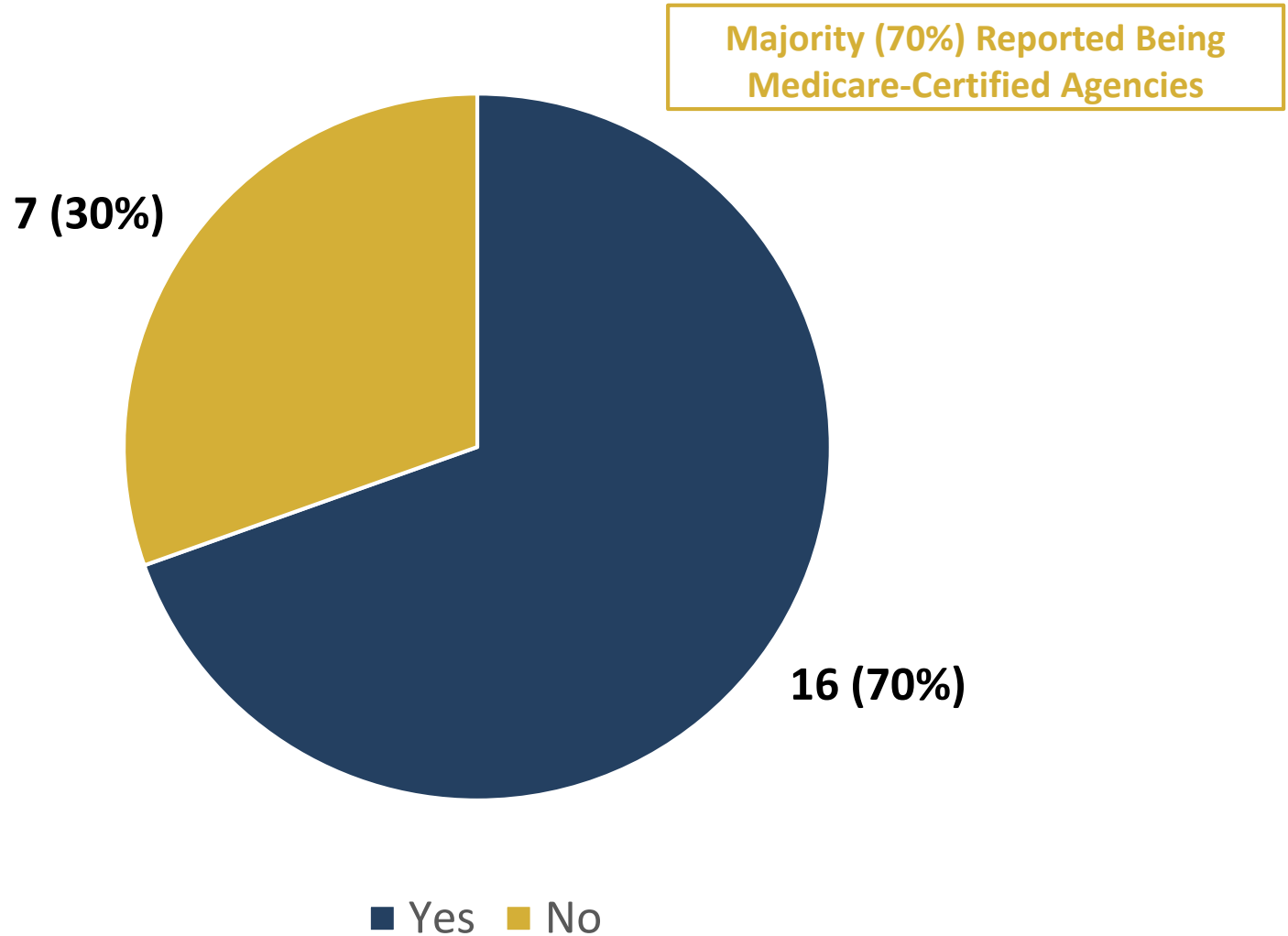
Revised February 4, 2019

Methodology and Notes

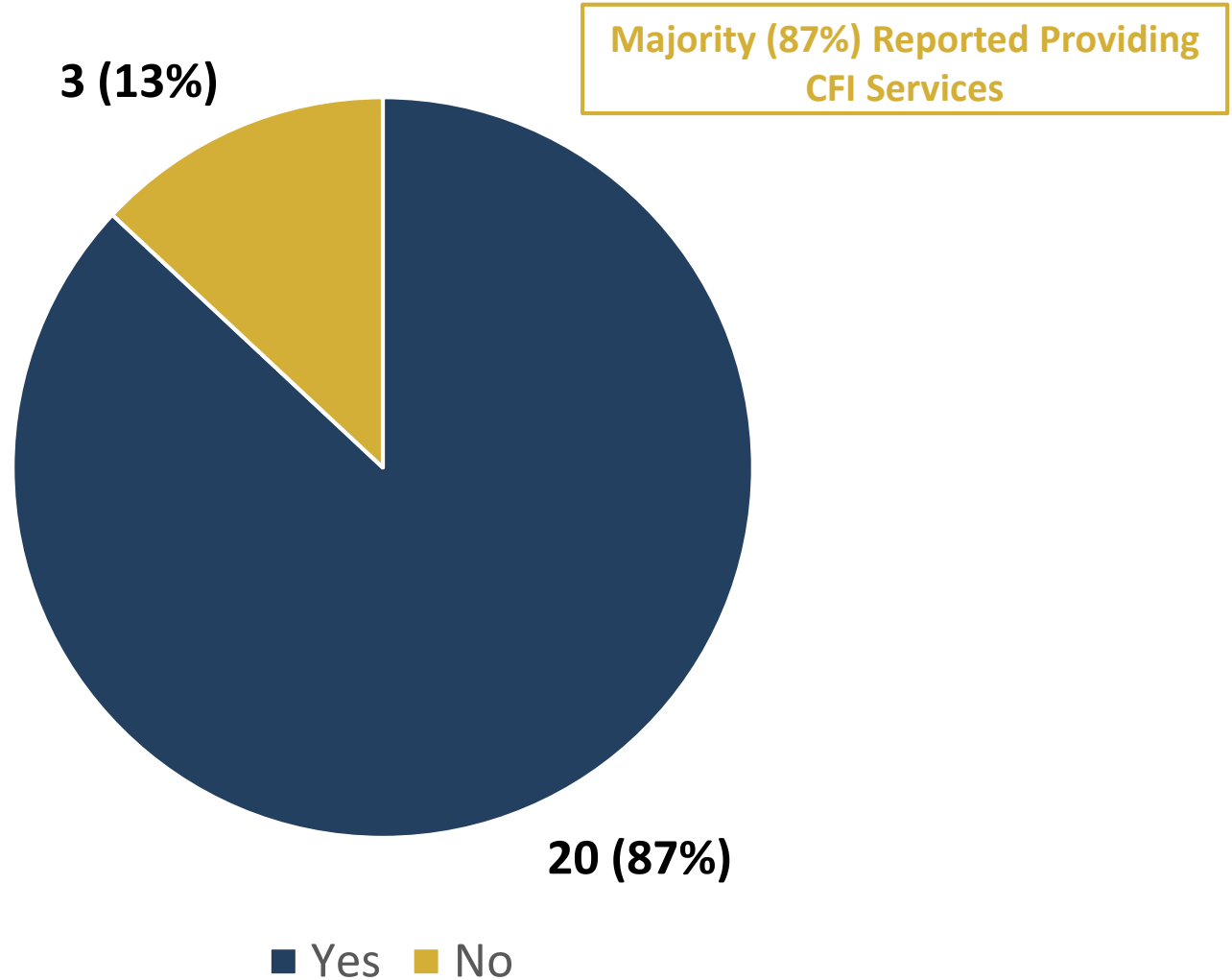
- Methodology
 - Survey placed in field: 01.10.2019
 - Survey closed: 01.28.2019
 - Final n=23
 - All data analyzed are self-reported
- Notes
 - Slides 12-17 are summarized from the qualitative text responses.
 - A “(#)” next to a response indicates that number of people had the same response.
 - A few, distinct, direct comments have been shown in quotations. No comments are directly attributable.



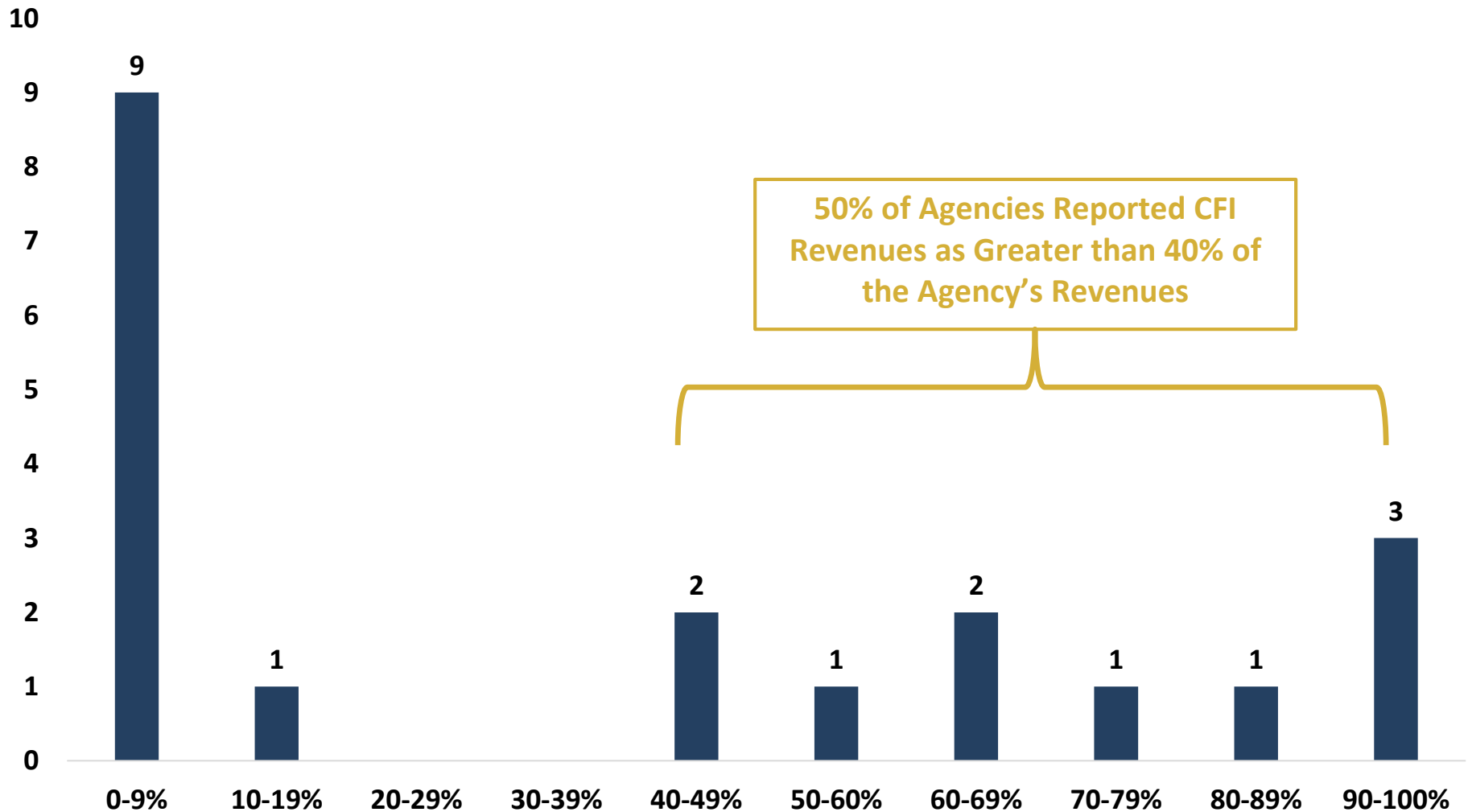
Q2. Medicare-certified Agency? (n=23)



Q3. Provide CFI services? (n=23)

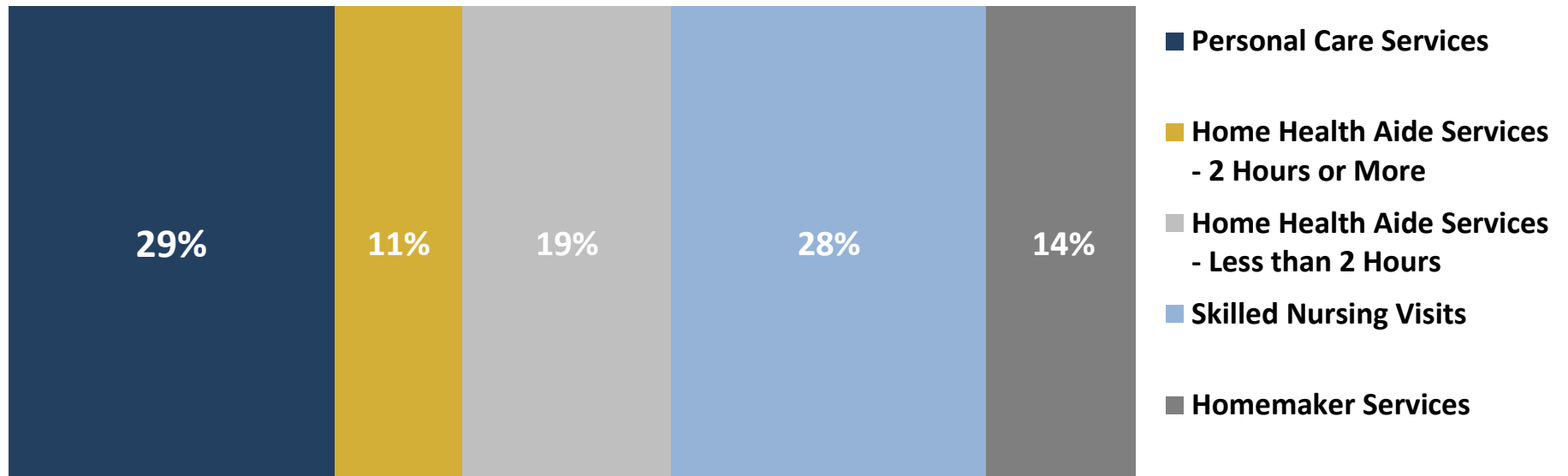


Q4. Percentage of Agency revenues that are CFI (n=20)



Q5. Percentage of CFI revenues by service (n=20)

Personal Care Services (29%) and
Homemaker Services (14%)
Equaled 43% of CFI Revenues

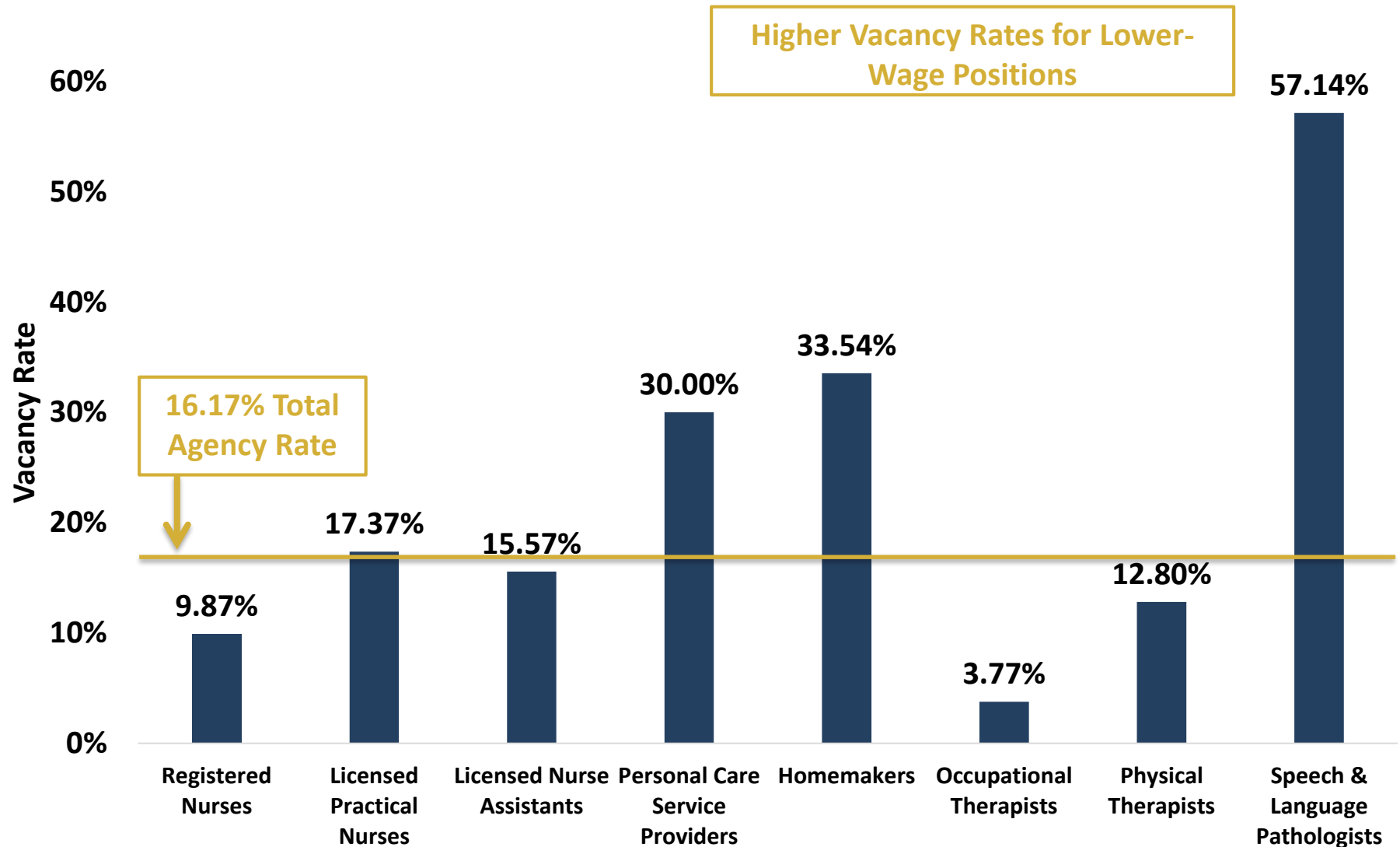


Vacancy Rates Summary (slides 8-9)

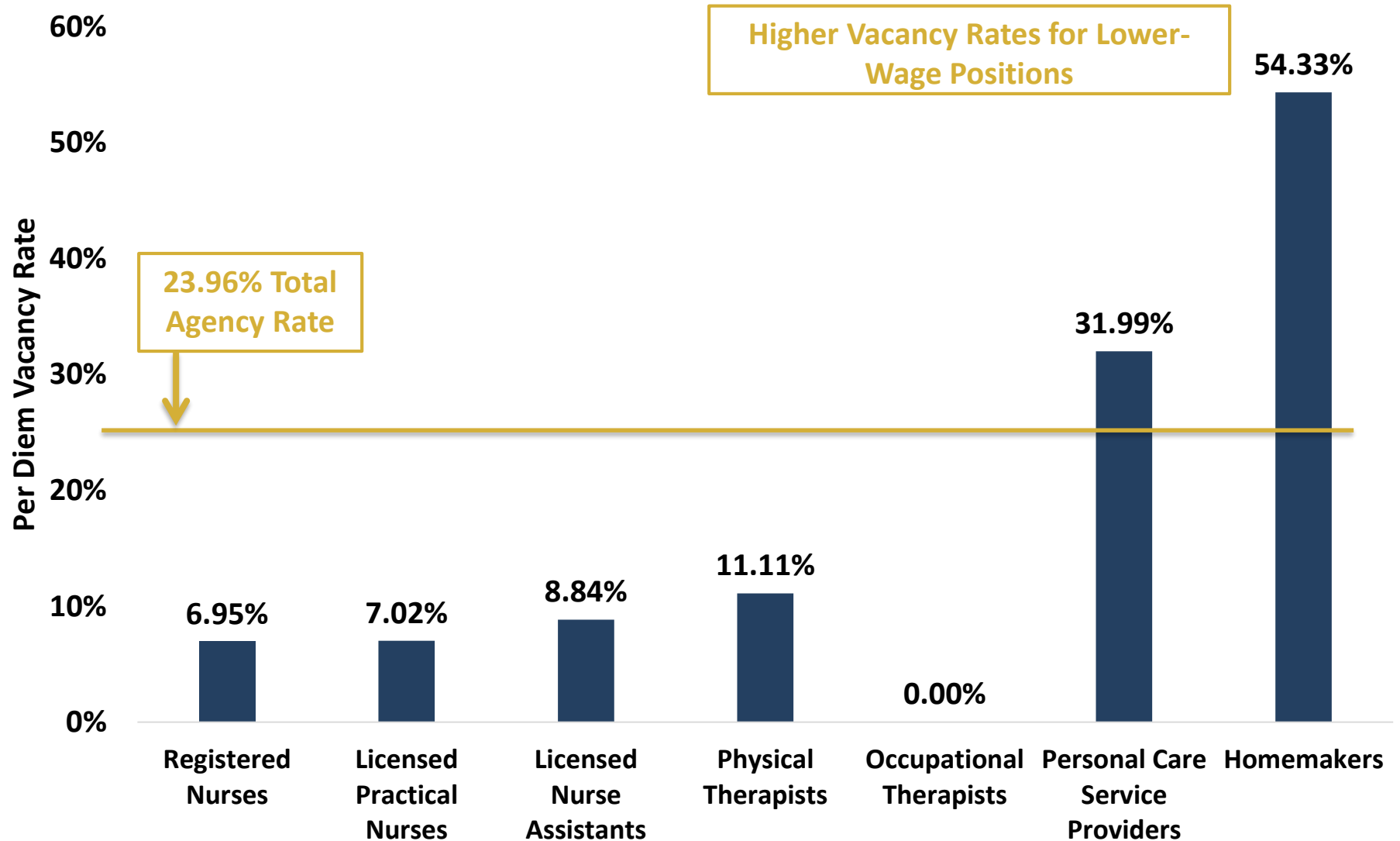
- Non-Per Diem Vacancies: 201 FTE Vacancies and 1,243 Budgeted FTEs = 16.17% Rate
- Per Diem Vacancies: 230 FTE Vacancies and 960 Budgeted FTEs = 23.96% Rate
- Combined Vacancies: 431 FTE Vacancies and 2,203 Budgeted FTEs = 19.56% Rate



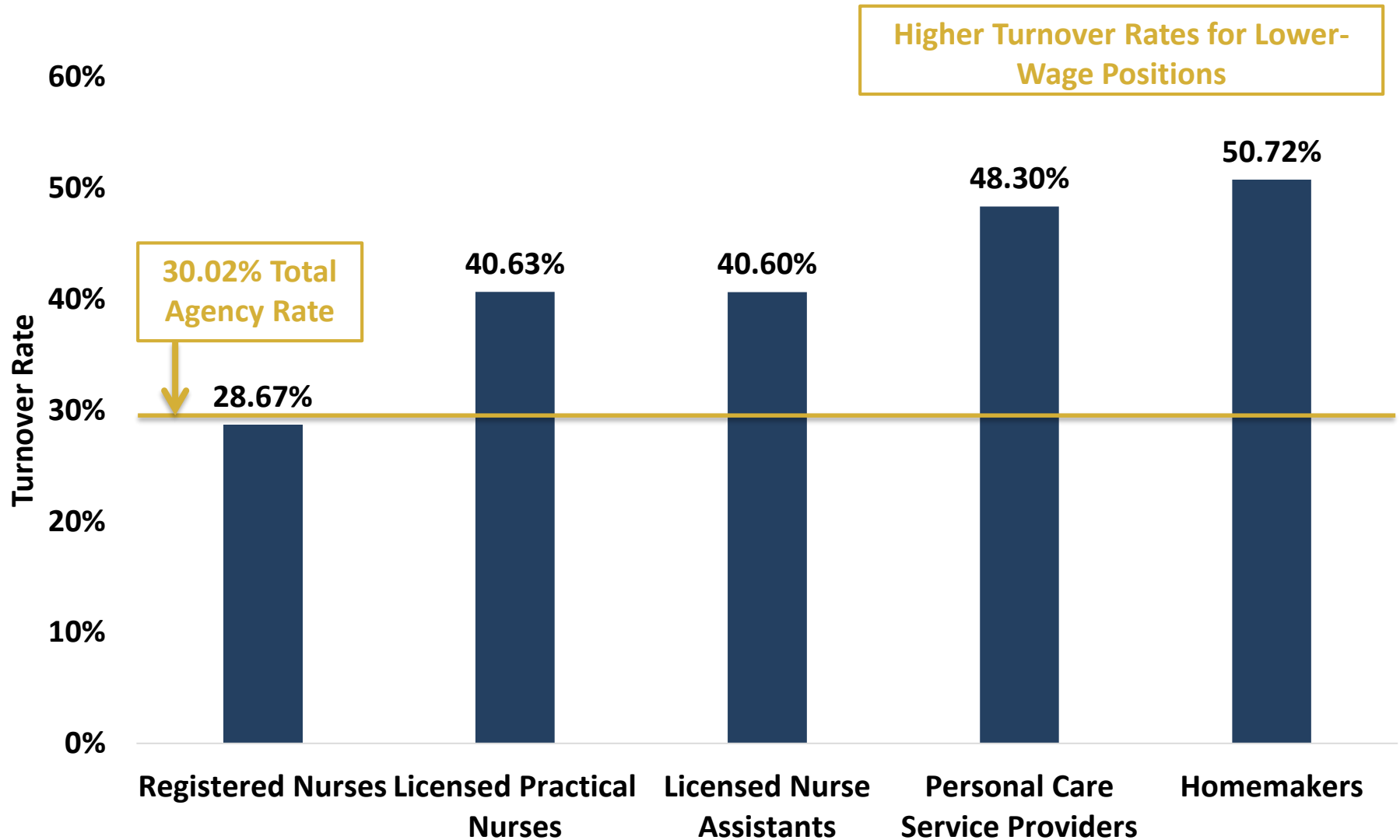
Q6-Q11. Non-per diem vacancy rates by employee type (n=22)



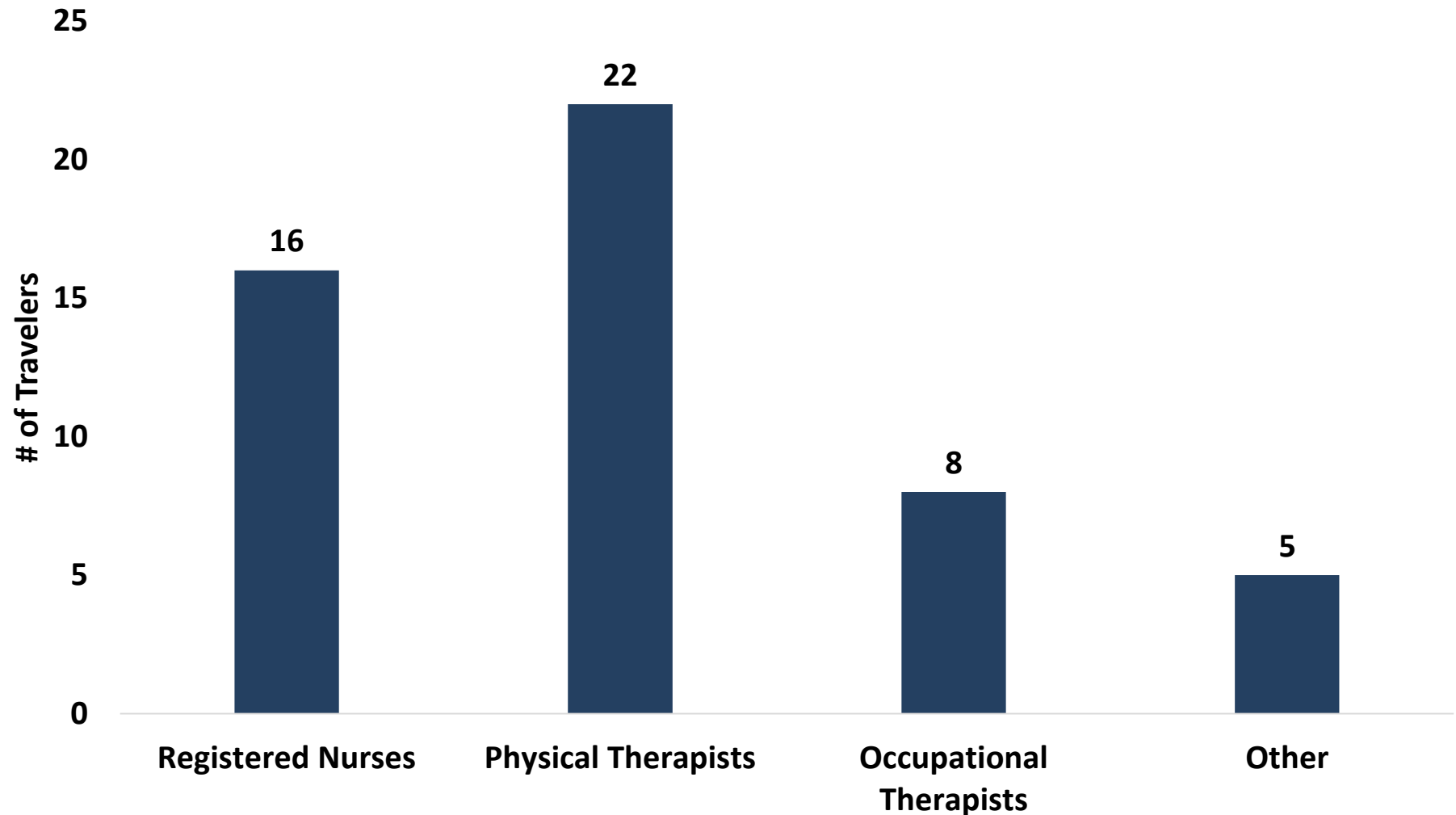
Q13. Per diem vacancy rates by employee type (n=22)



Q14. Turnover rates by employee type CY2018 (n=23)



Q12. Number of contracted travelers by employee type across Agencies (n=21)



Q15. Forced to decline services due to staffing? (n=22)

21 respondents said “Yes” and one said “No”. For those who said “Yes”, they had these additional comments:

- Cannot accept clients unless there are adequate staff (20)
 - Low wages
 - Staff desire work at skilled facilities
 - Cannot hire enough Case Managers
 - Homemaking staff a challenge / wait lists (3)
 - Nursing staff a challenge (2)
 - Speech therapy staff a challenge
 - 24-hour care staffing a challenge
 - Holidays and peak times are issues (2)
 - Private pay cases turned down (2)
 - CFI cases turned down (2)
 - “we turn away 30-35 cases per month”
 - “we have had to discharge clients due to staffing”
- “staff scheduling takes about 45% of our time and worries”
- Some clients receive partial services due to staffing shortages (5)
- Balance between new referrals and existing clients
- Culture shift has resulted in increased employee referrals
- Maintain a Title XX client waiting list approximately 10 months long
 - Inadequate Title XX reimbursement results in rationing staff among clients
- Many staff on overtime
- No waiting list for CFI clients due to other providers
- Not cost effective to pay time and mileage to employees to go to remote areas
- PCSP can earn more with private duty clients than CFI clients

Q16. Recruitment strategies (n=22)

- Applicant Tracking System Implemented (2)
- **Advertising - Traditional (14)**
 - Church Bulletins
 - Community Centers
 - Direct Mail
 - Flyers (2)
 - Local Newspapers
 - Newspapers (2)
 - Posters
 - Sandwich Boards (2)
 - Senior Beacon
- **Advertising - Online (27)**
 - Career Builder
 - Craigslist
 - Facebook (4)
 - Indeed.com (4)
 - Job Boards
 - National Liquid Compass
 - NH Job Board
 - Social Media Platforms (7)
 - Website (agency) (3)
- Website Home Care Association (2)
- ZipRecruiter (2)
- **Bonuses (10)**
 - Client Bonus for Referrals
 - Recruitment Bonuses
 - Referral Bonuses (7)
 - Retention Bonuses
- Changed Policy to Allow Hiring of Family Members
- College Internships
- Colleges and Universities (3)
- Company Clothing/Branded Items
- Flexible Scheduling (Promotion of) (3)
- Foreign Travel Nurses
- Gas Cards
- High Schools
- **Job Fairs - External and Internal (13)**
- Job Shadowing
- NH Employment Security /
- Unemployment Offices (2)
- Paid Time Off
- Paid Training / Scholarships (2)
 - For PCSPs
 - To Become LNAs
- Recruiting Firms / Hired a Recruiter (3)
- RN Residency Program
- Shared Employees with Hospitals
- Sign on Bonus (3)
- Staffing Agencies (2)
 - CORE, MAS Medical, Medworks, CompHealth, AP Staffing, Aquity
- VNA Health Systems of Northern New England Program for new Graduate Nurses
- Wage Increases (3)
 - CFI clients at \$13.40 per hour
 - Private pay clients \$15 per hour
- Word of Mouth (4)

Q17. Retention strategies (n=23)

- Added More Full Time Positions
- Benefits Package (18)
 - Cell Phones
 - Day Off With Pay Quarterly
 - Dental Insurance
 - Education
 - Extended Illness
 - Health Insurance
 - Leased Vehicles
 - LNA Tuition
 - Matching 401(k)
 - Paid Holidays
 - Paid Time Off (2)
 - Sick
 - Vacation
 - Voluntary
- Bonuses (11)
 - End of Year Performance (2)
 - Incentive (3)
 - New Hire
 - Productivity
- Referral
- Retention for RNs
- Training
 - Clinical Support Infrastructure / Reduced Administrative Burden (7)
 - Employee Recognition Programs (3)
 - Flexible Scheduling (4)
 - Gas Cards / Gift Cards (3)
 - Geographic teams minimize miles per visit
 - Gifts (2)
 - New Leadership Team
 - Community Building/Culture (13)
 - Annual Appreciation Event for PCSs
 - Holiday Party
 - Keep Agency Small
 - Mentorship Program
 - New Hire Breakfasts
 - Open Door Policy
 - Orientations
- Positive Team Environment (3)
- Pot Lucks
- Stay Interviews
- Succession Planning for Direct Care Staff
- Surveys (3)
 - Benefits and Wages
- Team-Based Care Model
- Training / Education / Skill Development (15)
 - CPR
 - Orientation
 - Professional Development
 - Support Groups
 - Training & Compliance Manager
- Transparency of Financials and Strategic Planning
- Wages (11)
 - Annual Market Review
 - Competitive (5)
- Work Life Balance (2)

Q18. One thing to improve recruitment and retention? (n=22)

- Ability to Hire New Nursing Graduates w/out Work Experience
- Benefits (6)
- Better Licensure Process
- Flexible Scheduling / Full Time Hours (2)
- Increase State Reimbursement (4)
- Reduce Documentation Burden
- Technology/EMR
- Wage Differentials
- Wages (10)
- Wages (Livable)
- Wages Competitive with Massachusetts
- Workforce Availability (2)

One, Direct Comment:

- “A 16 year old can get a job @ Hannafords in the produce department paying OVER a dollar more a hour than we can pay our homemakers.”

Q19. Description of hiring pool (n=23)

The Pool We Draw From:

- Assisted Living Facilities (3)
- Coffee Shops
- Craft Stores
- For Profit Agencies
- Home Health and Hospice Agencies (5)
- Hospitals (8)
- LTC / Nursing Homes (4)
- Massachusetts/Boston (5)
- Maine
- RN Graduates
- Physician Offices
- Private Duty Agencies (3)
- Schools
- Skilled Nursing
- Therapy Clinics
- VNAs (2)

Other Factors Cited:

- Benefits (2)
- Criminal backgrounds and the unemployable
- Entry Level Jobs (e.g., retail and food service) Pay Higher Wages (4)
- Lack of Affordable Housing for Staff
- Larger Providers can Provide Better Wages, Salaries, Incentives and Benefits (4)
- Low Unemployment
- Organizations with No Weekend Requirements Have Advantage (3)
- Private Care Clients Can Pay Higher Wages (2)
- Struggles with Work Ethic
- Rural Environments Not Attractive
- Work Life Balance
- “The pool is non-existent.”



Q20. Where employees go after separation with Agency (n=23)

- Assisted Living (2)
- Bayada (3)
- Care of kids/parents/own serious health condition
- Change of Careers
- Concord VNA
- Dartmouth College
- Food service
- Genesis
- Home Instead
- **Hospitals (23)**
 - Alice Peck Day (2)
 - Cheshire Medical Center
- Concord Hospital
- DHMC (2)
- Gifford Hospital
- SNHHS
- St Joe's
- VA Hospital
- Insurance Companies
- Leave Homecare Completely (2)
- MAS Staffing and Home Care
- Moved
- NA (2)
- **Nursing Homes / LTC Facilities (5)**
- Other home care agencies / other VNAs (8)
- PCP / Physician Office (3)
- **Private Duty (5)**
- Regency
- Retail (2)
- Retirement (3)
- Skilled Nursing Facilities (2)
- Unemployment
- Unknown
- Visiting Angels

Two, Direct Comments:

- “We are also forced to keep employees under 30 hours a week due to the affordable care act. I currently have 14 employees begging to work more hours with us and we can't use them due to the cost of full-time benefits.”
- “Professional employees leave for hospital-based care or skilled nursing care environments, OR other home health and hospice agencies. Paraprofessional employees leave for skilled nursing or assisted living facilities with no driving requirement OR private duty organizations.”

Contact:

Patrick B. Miller, MPH
603.344.8931 | mobile
603.225.6633 | office
pmiller@helmsco.com

