

4B-Workforce Solutions for Careers in Aging Services



Augustana Mercy
Health Care Center

LeadingAge[™]
Minnesota

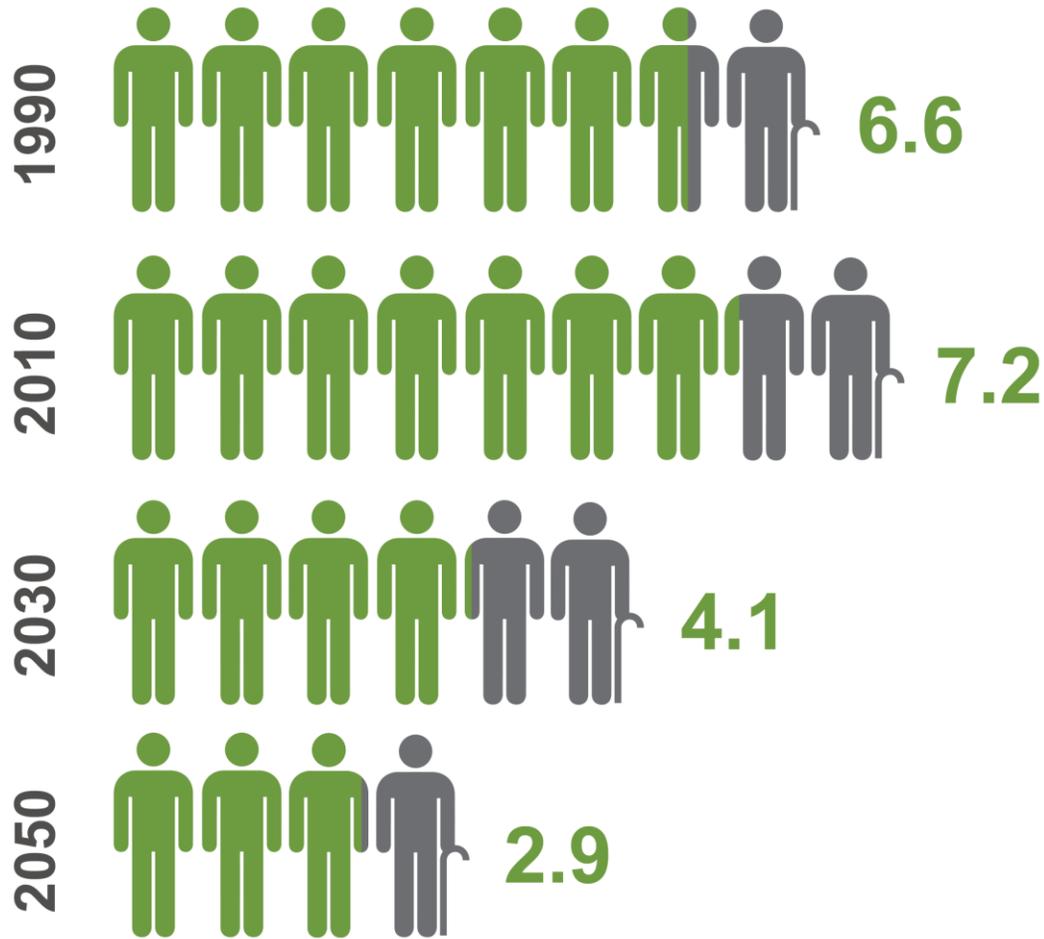
“The next two decades will be unlike any in recorded history. By the 2030’s... the economy and society will be fundamentally altered.”



WORKFORCE!



The Caregiver Dilemma



1/2
as many
caregivers
will be
available in
2050

Ratio of Potential Caregivers to Those Needing Care¹

1. Ratio of # people in most common caregiving age (45-64) to those at most risk for needing care (80+)

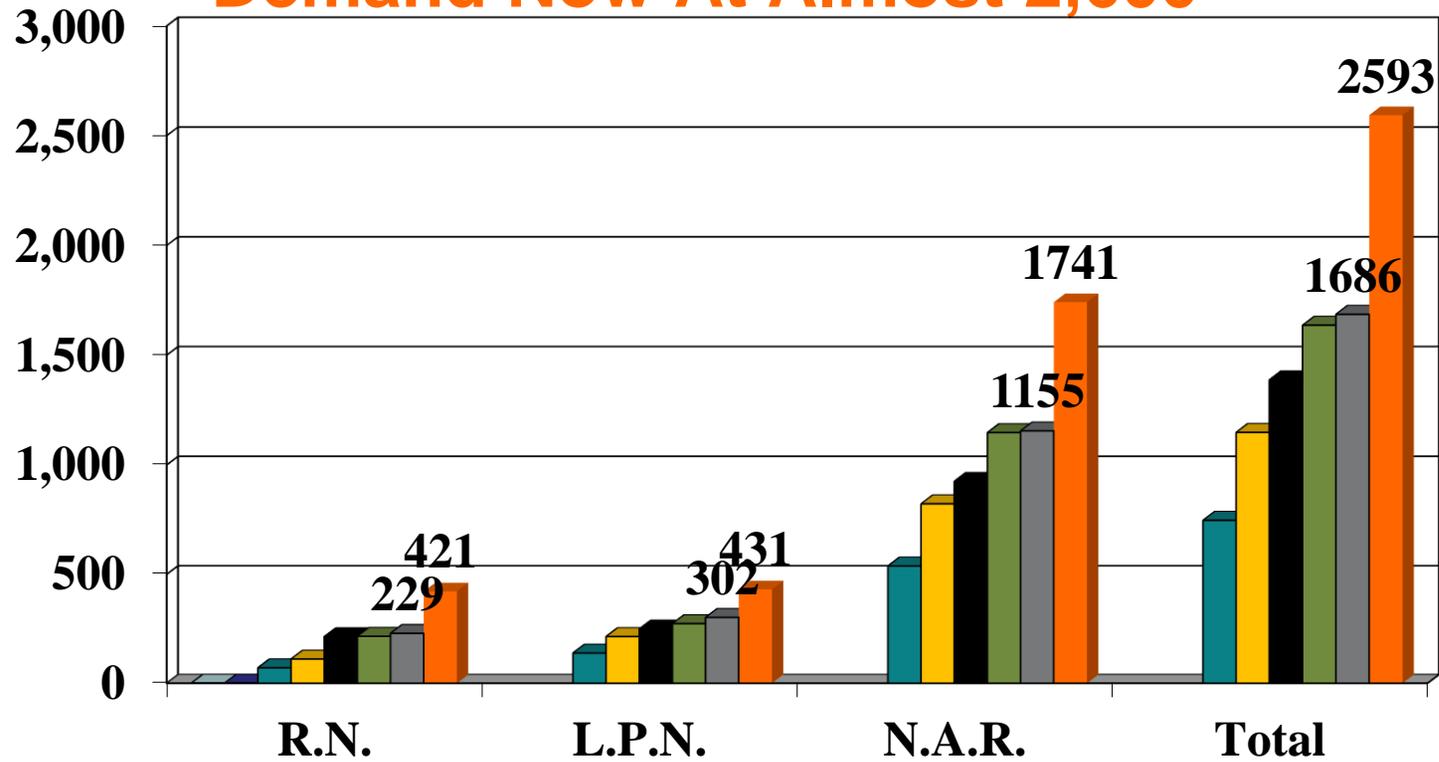
2,593

**Open nursing and nursing
assistant positions in
Minnesota care centers**



Open Positions in Minnesota Care Centers Continue to Grow

**1,000 More Jobs in Just a Year
Demand Now At Almost 2,600**



■ 2009

■ 2010

■ 2011

■ 2012

■ 2013

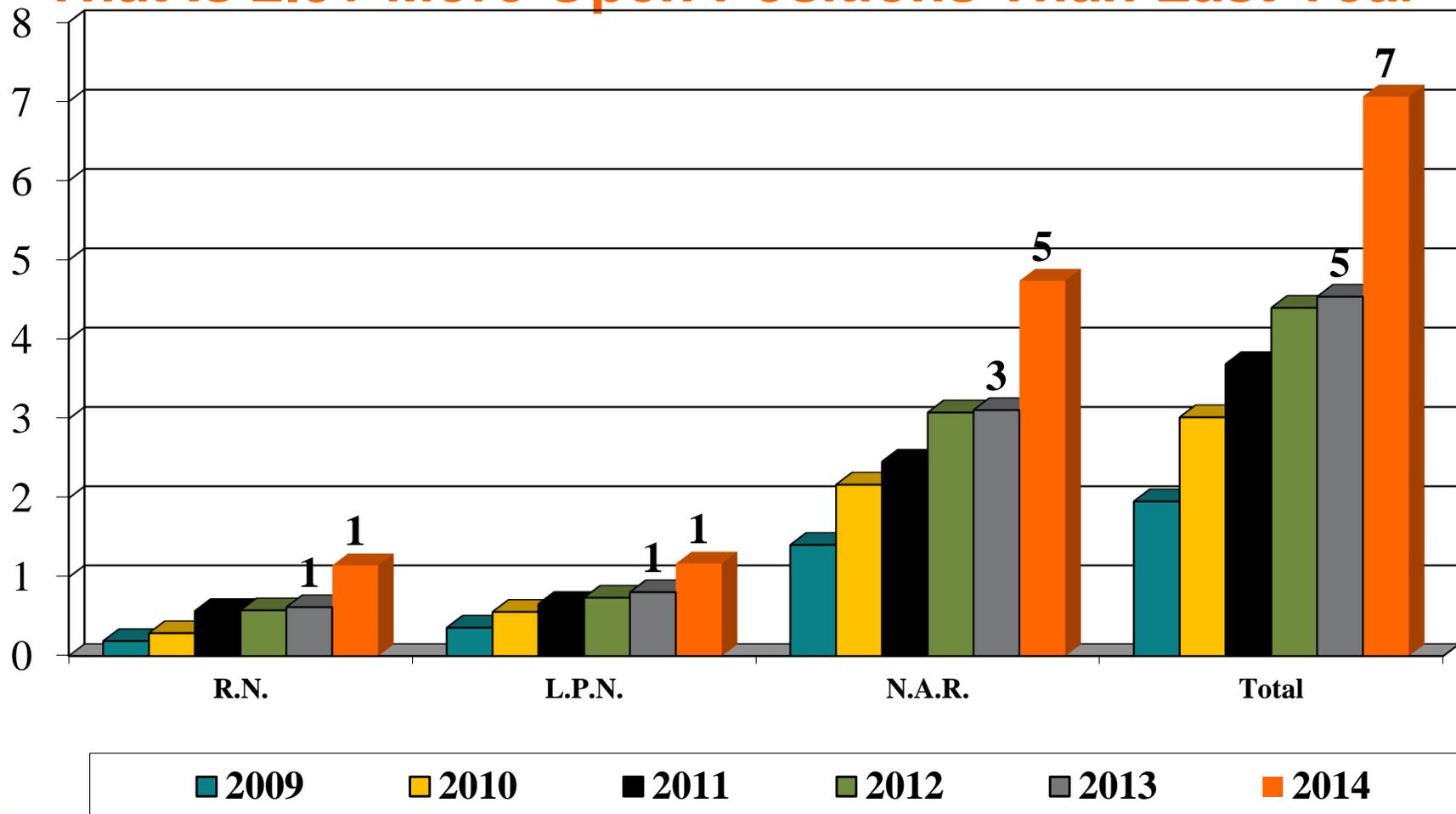
■ 2014

Source: Long Term Care Imperative 2015 Legislative Survey



Minnesota's Average Care Center Wants to Hire 7+ More Caregivers

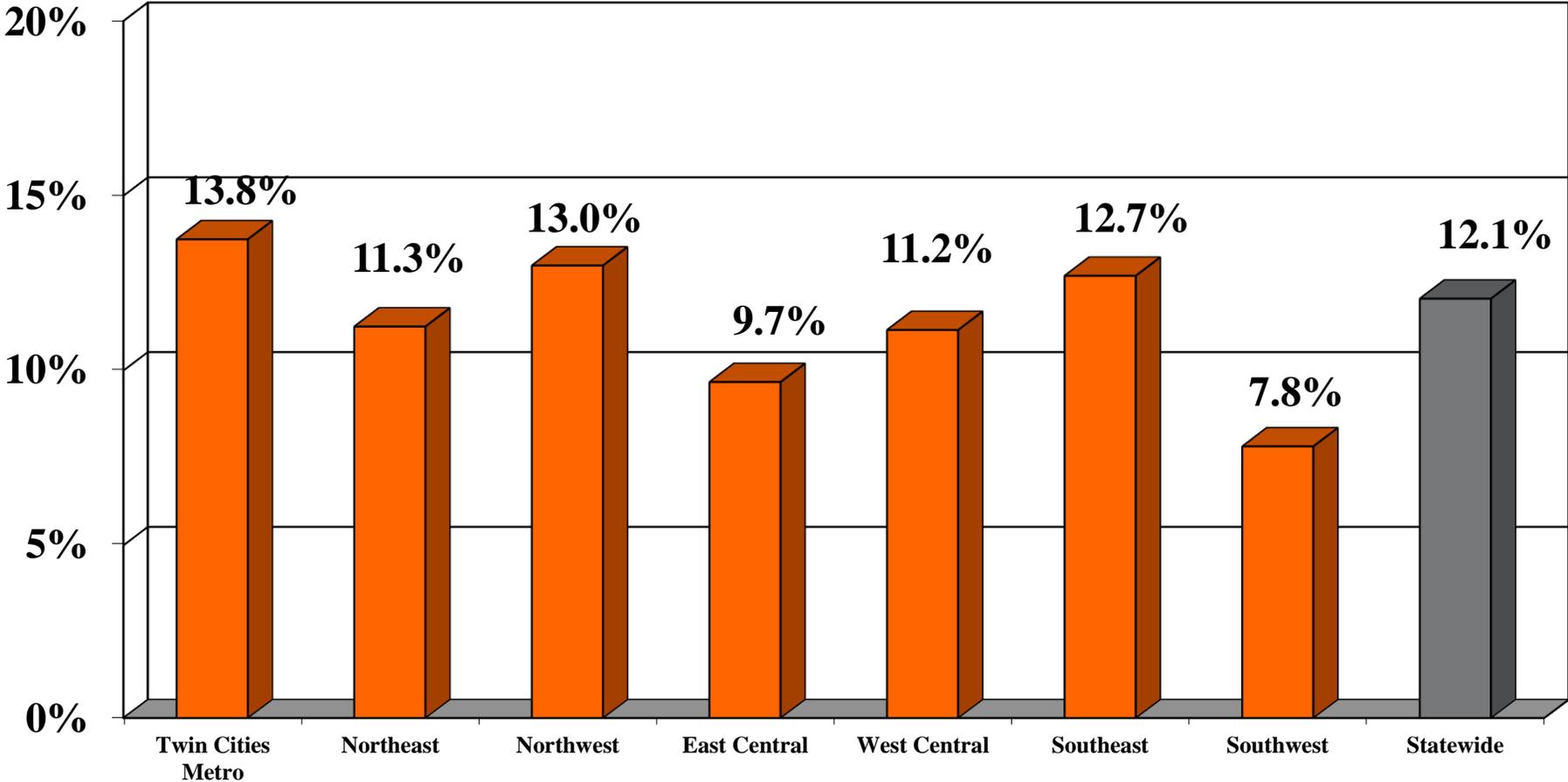
That Is 2.5+ More Open Positions Than Last Year



Source: Long Term Care Imperative 2015 Legislative Survey

Care Center RN Vacancy Rate

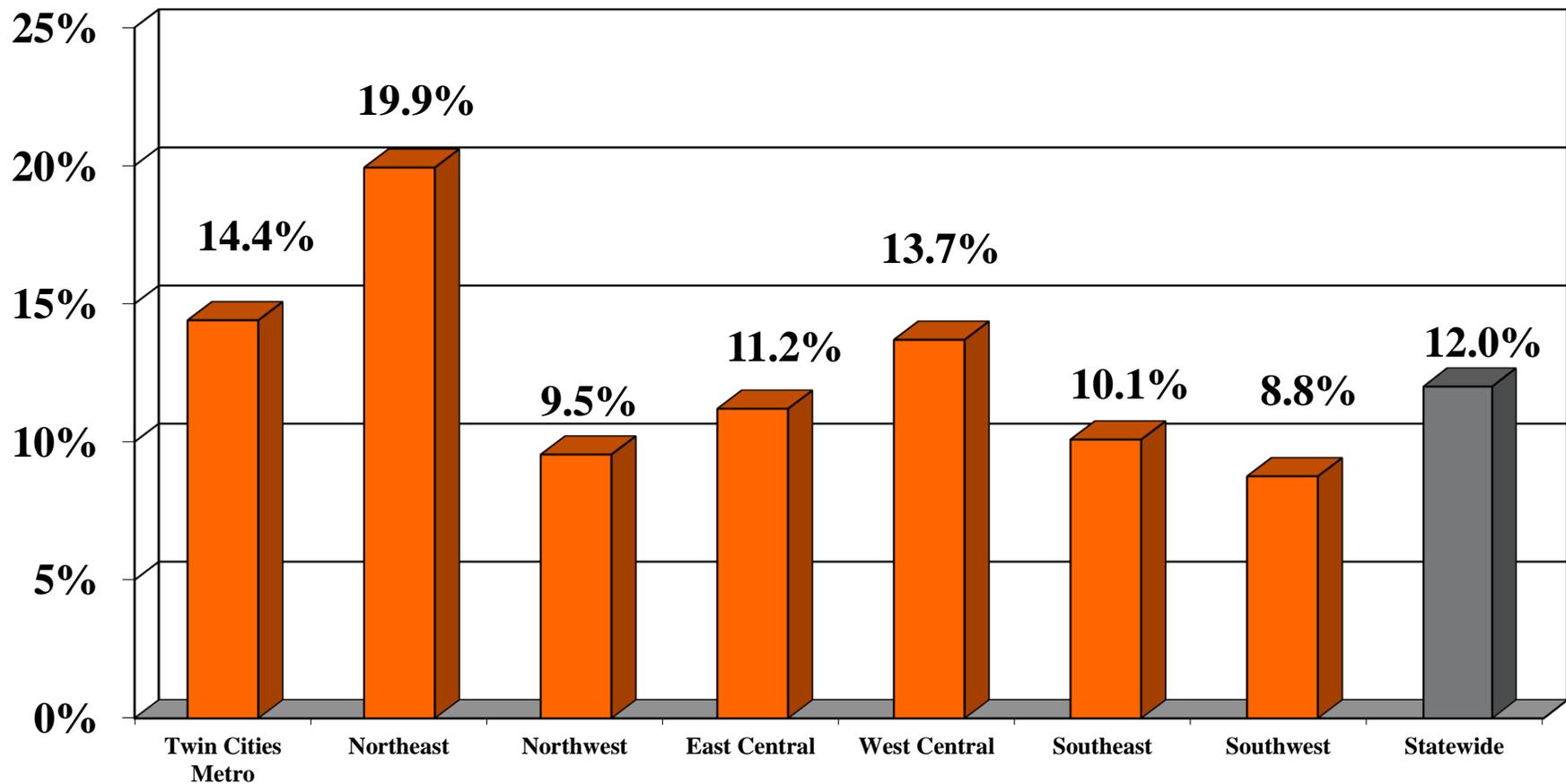
Highest in Metro Area in 2014



Source: Long Term Care Imperative 2015 Legislative Survey

Care Center LPN Vacancy Rate

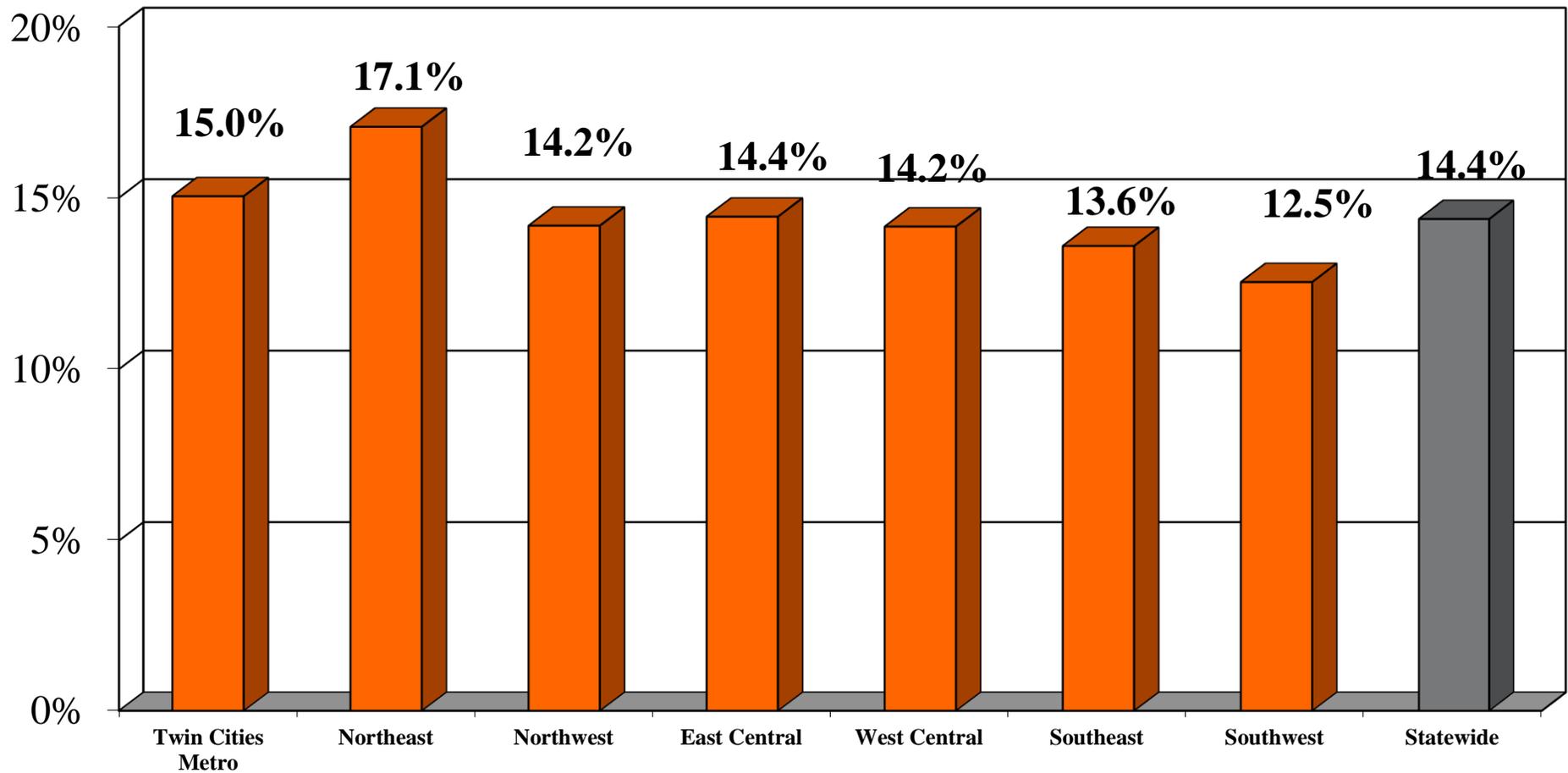
Highest in Northeast in 2014



Source: Long Term Care Imperative 2015 Legislative Survey

Care Center NAR Vacancy Rate

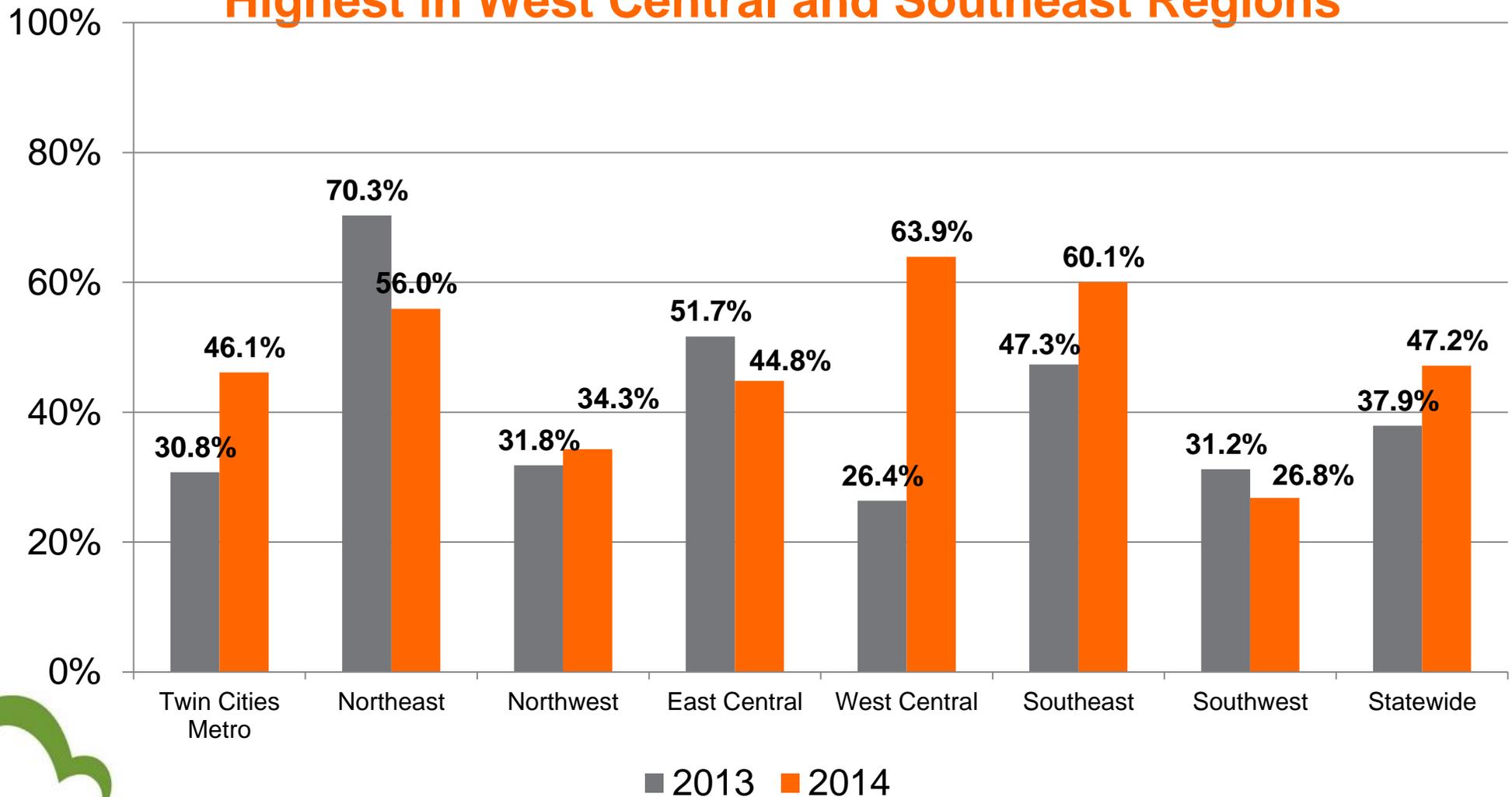
Highest in Northeast in 2014



Source: Long Term Care Imperative 2015 Legislative Survey

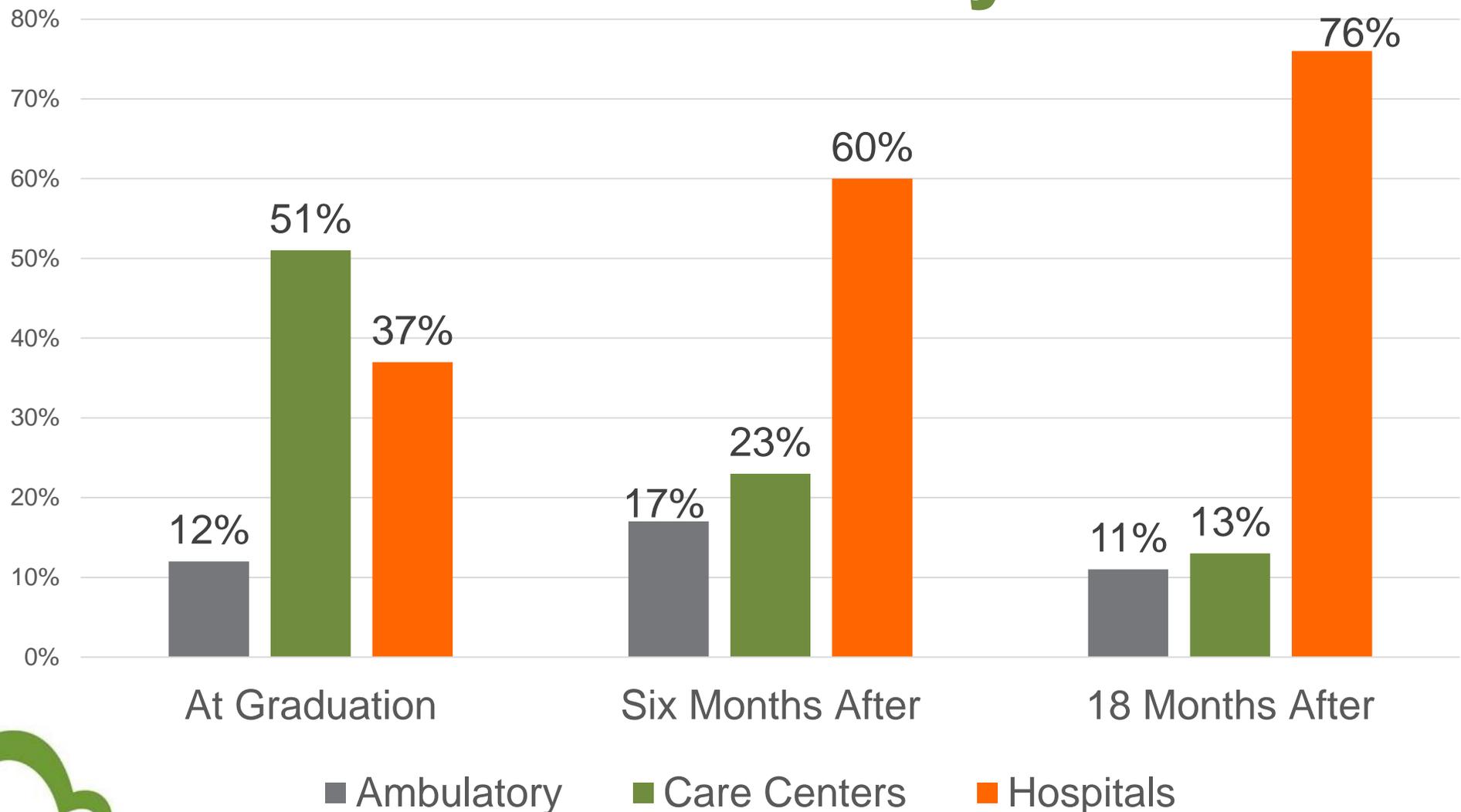
Care Center RN Turnover Rate Increases Dramatically in 2014

Highest in West Central and Southeast Regions



Source: Long Term Care Imperative 2015 Legislative Survey

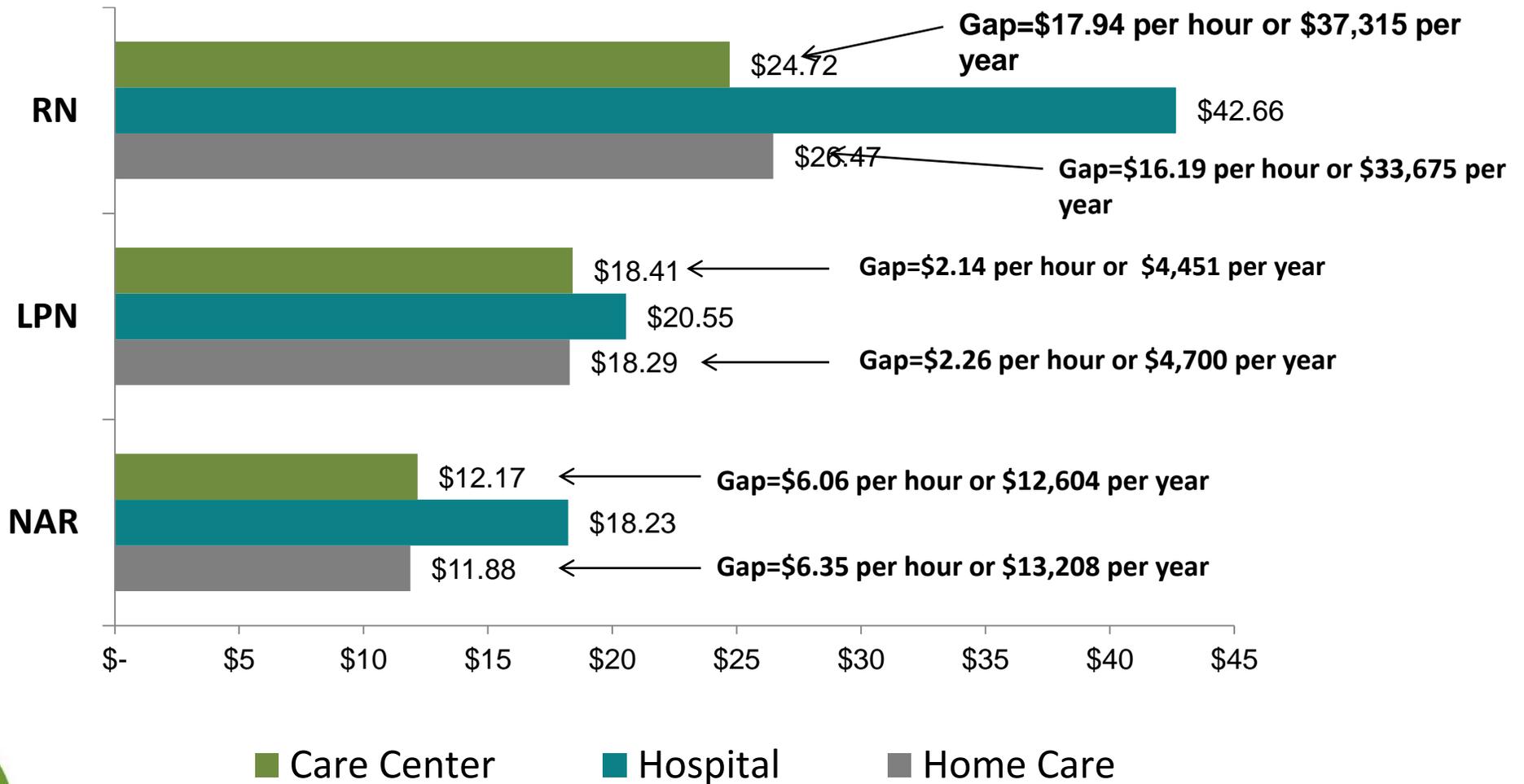
New Nurses Start With Us But Don't Stay...



Source: Registered Nurses with Bachelor Degrees, Minnesota Employment Review January 2014

The Wage Gap

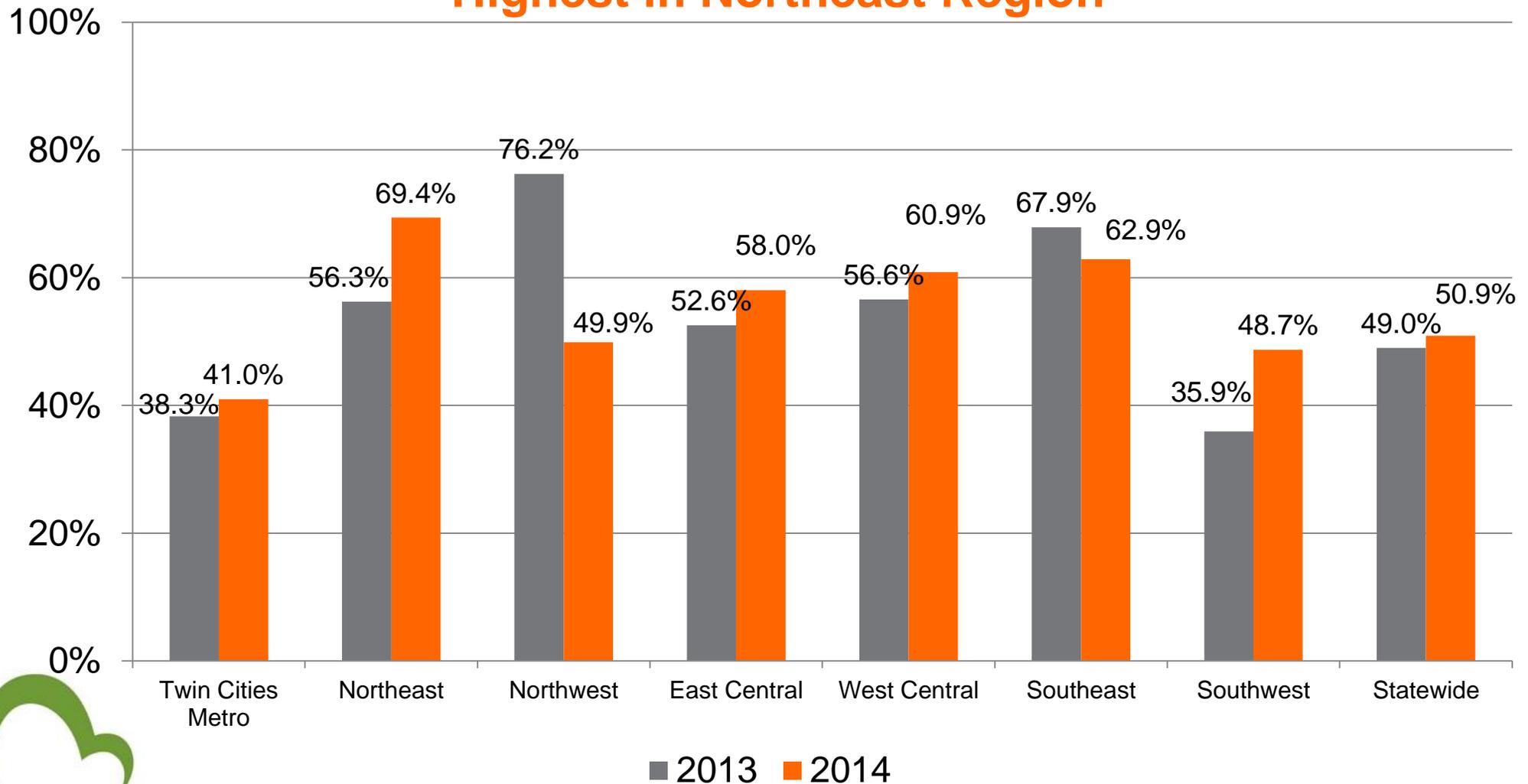
Senior Living Workers Underpaid in the Marketplace



Sources: 2013 LTC Imperative Salary Survey and 2013 MN Health Care Cost Information Service Hospital Salary Data

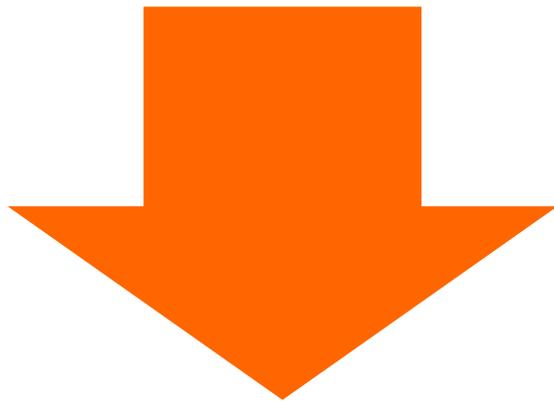
Care Center Direct Care Staff Turnover Rate Over 50% in 2014

Highest in Northeast Region



Source: Long Term Care Imperative 2015 Legislative Survey

Without Essential Staff in 2014 1,500+ Admissions Were Denied



As available
caregivers decline
so does access...

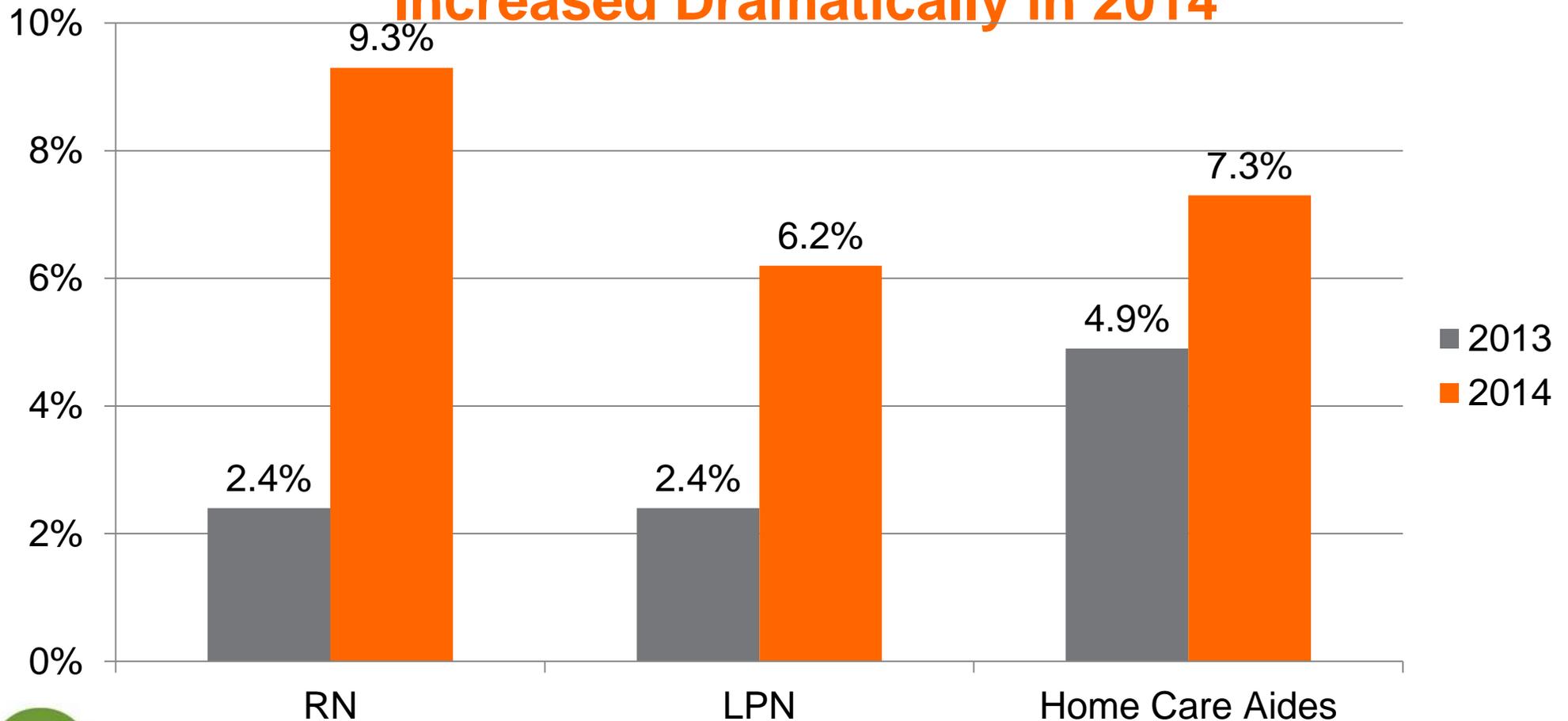


45% of care centers now
report suspending
admissions due to staff



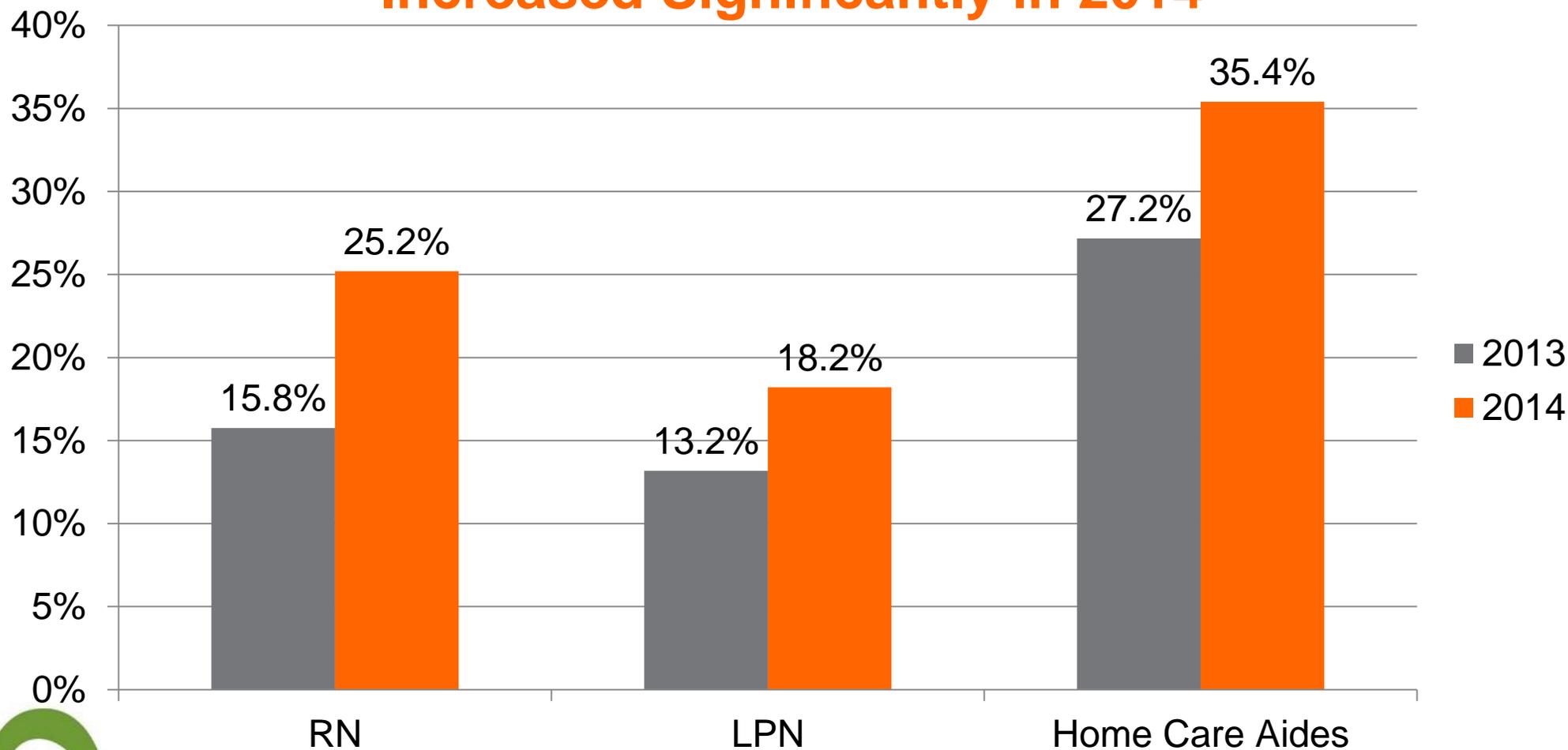
Staff Vacancy Rates in Minnesota Senior Housing

Increased Dramatically in 2014



Staff Turnover in Minnesota Senior Housing

Increased Significantly in 2014



***“Knowing is not enough;
we must apply.
Willing is not enough;
we must do.”***



- Goethe



POLICY SOLUTIONS

#1



Payment Reform: \$138 million

Eliminate

- Eliminate gap between care center costs and rates

Establish

- Establish permanent, prediction funding solution to address cost of care today – and in the future

Improve

- Improve wages and benefits to recruit and retain quality, experienced staff

Incent

- Incent innovation in care delivery and reward quality improvement



HCBS Funding and Workforce

Ensure Parity

- Re-establish links between the care center rates and waiver caps

Waiver Eligibility

- Increase income and asset level spenddown standards for seniors

Scholarships

- Improve care center program; create a new \$2 million HCBS program

Incentives

- Created a new innovation funding pool of \$1.425 million for HCBS providers



When Staff Can't Afford to Work More.



RECOGNITION STRATEGIES

#2

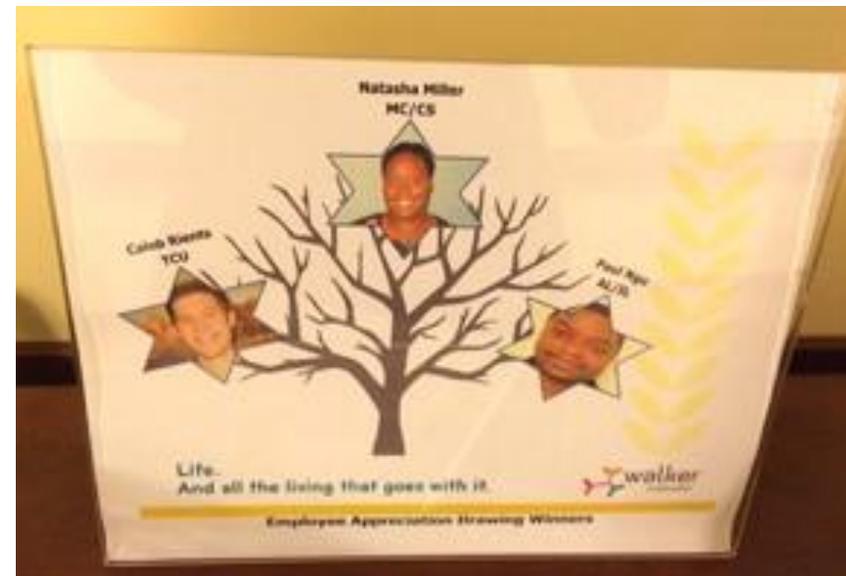


The 4 Principles of Customer Service at WALKER METHODIST

The Acorn Program at Oak Terrace Retirement Community



Oak Terrace proudly displays Acorn Award recipient award photos above their nomination ballot box



In this section

- Workforce Center
- Stars Among Us Recognition Center
 - For Team Leaders
 - For Team Members
- Boards/Trustees
- Quality Improvement Center
- Ebola

Stars Among Us Recognition Center

Recognition is essential to a healthy workplace.

A career in older adult services isn't just a job - it's a calling - and LeadingAge Minnesota is pleased to dedicate this resource center to the remarkable women and men called to serve older adults in their communities.



Related Links

Stars Among Us Awards

Need Help?

We're here to help you! Contact us



Jennifer Mims
 Director of Publications & Creative Services
 651.659.1407
 800.462.5368
 Email

select the path that best fits your role in our field today.

For Team Leaders

Learn about the benefits of recognizing your team and the tools to assist in your efforts.



Connect

- Facebook
- Twitter
- LinkedIn
- YouTube
- RSS
- Connect with other members
- Membership directory »
- Want to talk? Contact us »
- Find a job »

Stars Among Us RECOGNITION WORKS!
 A quarterly recognition newsletter from Aging Services of Minnesota featuring recognition ideas, quick tips, best practices and more

September, 2014 - In This Issue:

- BEST PRACTICE: LOVE ONE ANOTHER**
- STAR LIGHT, STAR BRIGHT - NOMINATE THE NEXT STAR AT YOUR SITE**
- DECISIONS, DECISIONS - WON'T YOU HELP US DECIDE?**
- URNS OUT CARROTS ARE GOOD FOR YOUR EYES AND FOR RECOGNITION**

Best Practice: Love One Another Program
 Second in our series - featuring recognition best practices and ideas developed by members for their team members.

Guest Editor
 Aging Services would like to thank **Dustin Lee**, Chief Operating Officer, Prairie Senior Cottages, LLC

Discounts/Coupons

Help us build a list of great websites that team members can use to find discounts, coupons or freebies.

Here's a couple to get started:

- DealCatcher** - printable store coupons
- GoldStar** - discounts on live entertainment, like theater, comedy, sports, music, performing arts and even things like wine tastings, sushi making classes and rodeos.

Suggestion Box

Do you have suggestions for other website links to add to our list? Drop us a line and share sites that you've found to be of value.



BUSINESS PARTNERS

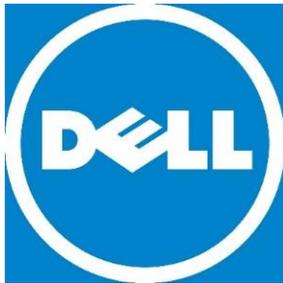
#3



LeadingAgeTM MN
Savings & Solutions Center



Team Member Discounts



Business Partner Solutions

encompass

Better care starts
with safety and comfort.



INSURANCE SOLUTIONS

#4

INSURANCE CLAIM

1a. INSURED'S I.D. NUMBER

4. INSURED'S NAME (Last N

ADDRESS (

CITY

CODE

DATE

FECA
BLK LUNG
(SSN) (ID)

SEX
M F

ONSHIP TO INSURED
 Child

OTHER





The table below shows what you may qualify for depending on household size and annual income

People in household	Annual Income (up to)	Annual Income* (up to)	Annual Income (up to)	Annual Income* (up to)	Annual Income (above)
1	\$15,521	\$23,340	\$32,092	\$46,680	\$46,680
2	\$20,920	\$31,460	\$43,257	\$62,920	\$62,920
3	\$26,320	\$39,580	\$54,422	\$79,160	\$79,160
4	\$31,720	\$47,700	\$65,587	\$95,400	\$95,400
5	\$37,120	\$55,820	\$76,752	\$111,640	\$111,640
6	\$42,520	\$63,940	\$87,917	\$127,880	\$127,880
7	\$47,919	\$72,060	\$99,082	\$144,120	\$144,120
8	\$53,319	\$80,180	\$110,247	\$160,360	\$160,360
For each additional person add	\$5,399	\$8,120	\$11,165	\$16,240	
*Slightly lower income limits apply to MinnesotaCare and tax credit eligibility for coverage starting before January 1, 2015.	Medical Assistance for adults: \$0/month premium	MinnesotaCare for adults: up to \$50/month premium	Tax credits for private coverage for some adults. Monthly premium as low as \$0 after tax credits.		Private coverage with monthly premiums that vary depending on plan. Not eligible for tax credits.
	Medical Assistance for children ages 0 to 18 and pregnant women: \$0/month premium. Slightly higher income limits apply for infants under age 2 and pregnant women.			Tax credits for private coverage for some children	

8/2014



MNsureSM

Where you choose health coverage

HEALTHY WORKPLACE

#5



“A healthy work organization is one whose culture, climate and organizational practices create an environment which promotes employee mental and physical health, as well as productivity and organizational effectiveness.”

- L.R. Murphy



Healthy Workplaces

- Team member meals
- Day care services
- Ergonomic assessments
- Flexibility...



Healthy Workplaces

- Staff Satisfaction Survey *with action plans*

Staff Satisfaction Surveys

Question 1, "My supervisor at [organization name] recognizes my good work."

Question 2, "My supervisor at [organization name] cares about me on a personal level."

Question 3, "At least one of my co-workers at [organization name] cares about me on a personal level."

Question 4, "My supervisor values my input."

Question 5, "I am proud to work for this organization."

Question 6, "I would recommend [organization name] to a loved one for their care."

LeadingAge
Minnesota

Minnesota Satisfaction Survey Questions
You will be asked your opinion on a scale from 1 (strongly disagree) to 4 (strongly agree). Your responses will be reported back to us as the average of all responses.

Organization name: _____
and preferences: _____

Organization name: _____
and preferences: _____
name: _____

Question 1, "My supervisor at [organization name] recognizes my good work."
Question 2, "My supervisor at [organization name] cares about me on a personal level."
Question 3, "At least one of my co-workers at [organization name] cares about me on a personal level."
Question 4, "My supervisor values my input."
Question 5, "I am proud to work for this organization."
Question 6, "I would recommend [organization name] to a loved one for their care."



CAREER INVESTMENTS

#6



Health Support Specialist
REGISTERED APPRENTICESHIP PROGRAM

- HOME
- ABOUT
- BE AN APPRENTICE
- BE A SPONSOR SITE
- NEWS & EVENTS
- CONTACT
- LOGIN

Health Support Specialist

REGISTERED APPRENTICESHIP PROGRAM

Driving a new standard of excellence.

[Learn More](#)



www.healthsupportspecialist.org

Health Support Specialist

REGISTERED APPRENTICESHIP PROGRAM



A NEW CAREER

- A person-directed living catalyst
- Built upon lessons from pioneers
- Designed around a model of home

THE CHANGE WE SEEK

- Increase ability to recruit, retain and inspire talent
- Reduce costly turnover
- Increase satisfaction and outcomes



THE BASICS



COLLEGE CLASSES

- 7 online courses (9 credits/145 hours)



REGISTERED APPRENTICESHIP

- 2,500 hours of on-the-job training



ELIGIBILITY

- 18 years or older
- High school diploma or GED
- Nursing Assistant, Registered
- Support from employer



CLASSES



Introduction to the Health Support Specialist (3 credits) orients new students to online learning and the history of the aging services field, including key concepts of person-directed living, leadership, communication and life skills.

Meaningful Activities (1 credit) teaches fundamental skills, information and resources for engaging residents in meaningful life activities during daily caregiving routines.

Culinary Care (1 credit) provides students with culinary information that helps them purchase, plan, prepare and deliver a nutritional and enjoyable diet for each resident.

Environmental Services (1 credit) covers fundamentals and regulatory compliance in ensuring clean and safe spaces, including housekeeping and laundering procedures.

Memory Care (1 credit) explores the aging process related to various dementia-related diagnosis, introducing methods for involving residents and family in purposeful living.

Psychosocial Care (1 credit) examines the emotional, social and spiritual dimensions of holistic care and how each can be influenced by life transitions and loss.

Physiological Care (1 credit) introduces the structure and functions of the aging body, identifying strategies for managing healthy aging and common physiological alternations.



INVESTMENTS

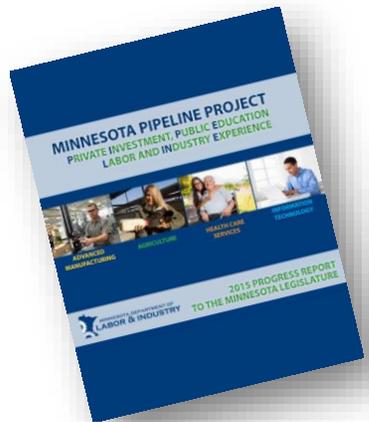


WHAT TO BUDGET

- \$1,710 tuition cost (\$190 per credit)
- \$20 application fee to college
- All expenses are reimbursable through the DHS *Nursing Facility Employee Scholarship Program*

WAGES

- Identify community-specific Wage Matrix
- Starting wage, “journey worker” wage and at least one step
- Technical assistance is available from the Dept. of Labor



_____ months-hours	_____ %	_____	_____ months-hours	_____ %	_____
_____ months-hours	_____ %	_____	_____ months-hours	_____ %	_____
_____ months-hours	_____ %	_____	_____ months-hours	_____ %	_____
_____ months-hours	_____ %	_____	_____ months-hours	_____ %	_____
_____ months-hours	_____ %	_____	_____ months-hours	_____ %	_____

Health Support Specialist (journeyworker) wage rate on

_____ was \$ _____
(date)





COMPREHENSIVE SUPPORT

- HSS Coordinator Manual
- Customized Implantation Plan
- Learning Labs and Network

NEXT STEPS

- Leadership Team Meeting
- Online Community Evaluation



Site Visit with Transformation Coach and Department of Labor (optional)

- Sign *Standards of Apprenticeship*
- Register Apprentices



WORKFORCE PARTNERSHIPS

#7



FIND A WORKFORCE CENTER

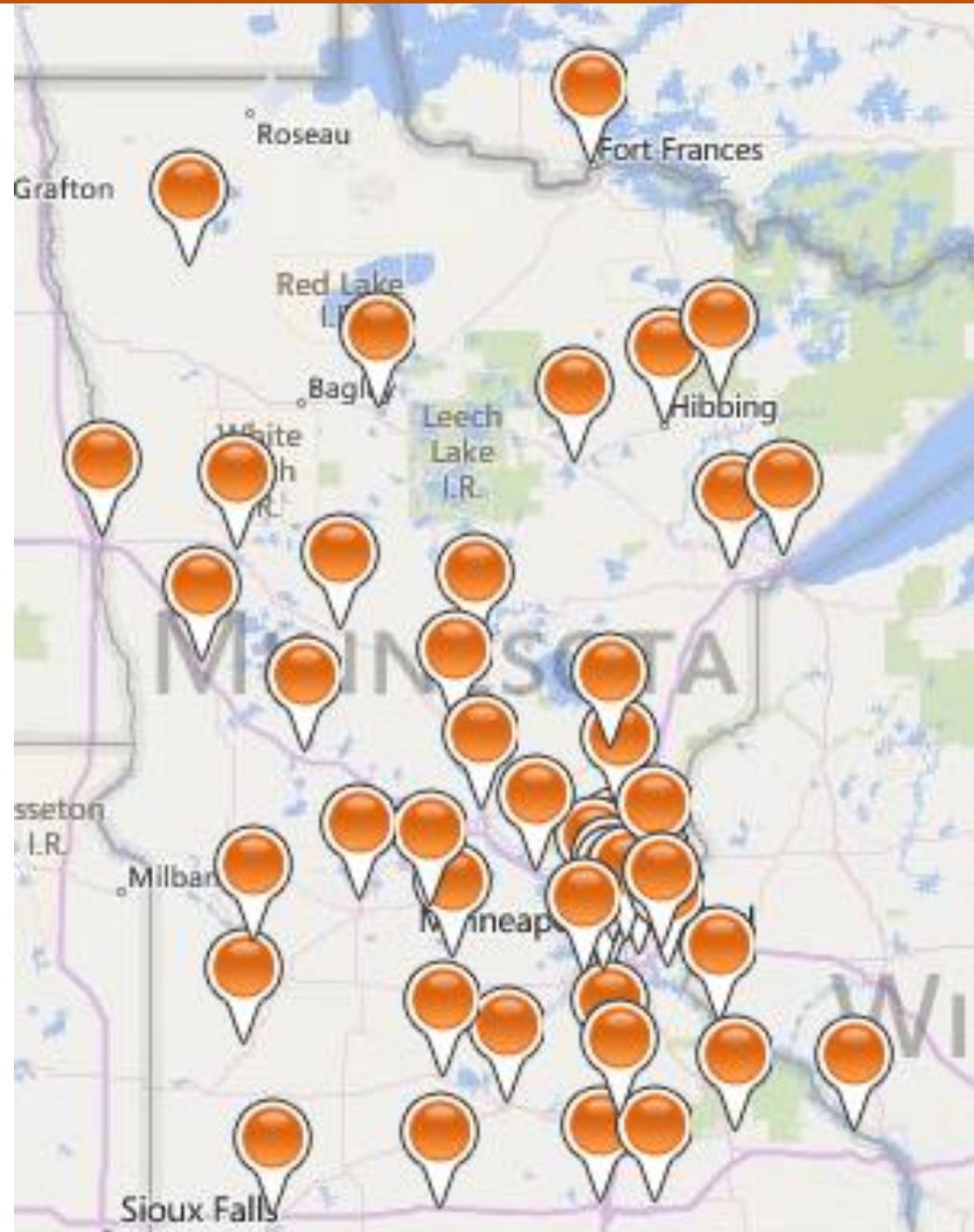


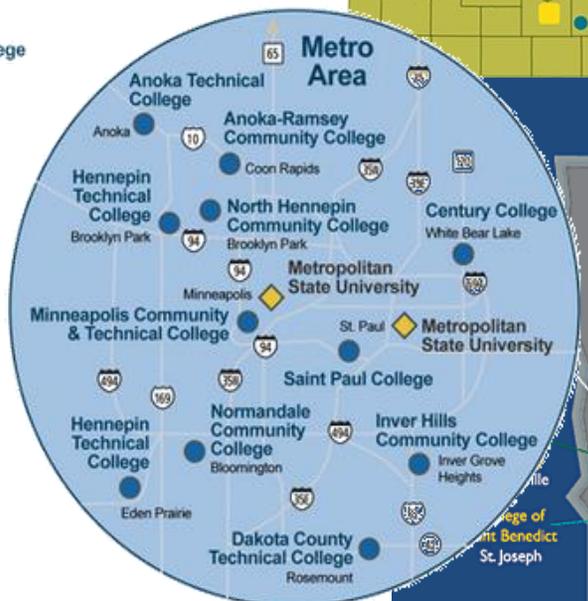
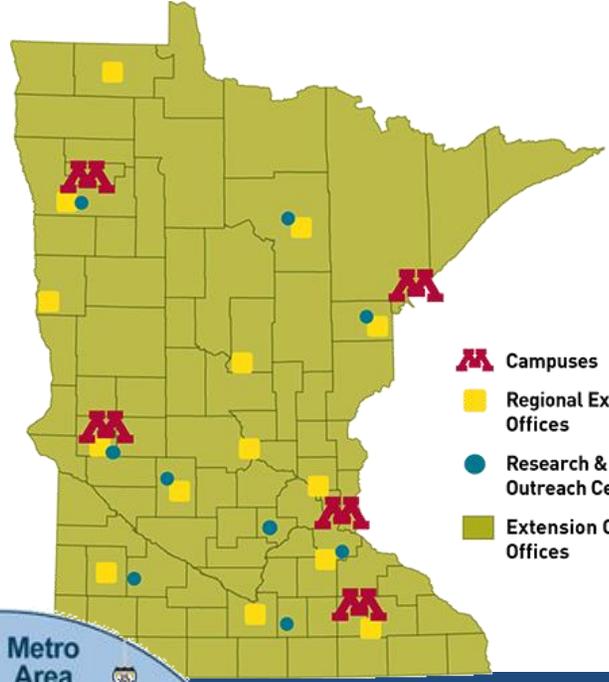
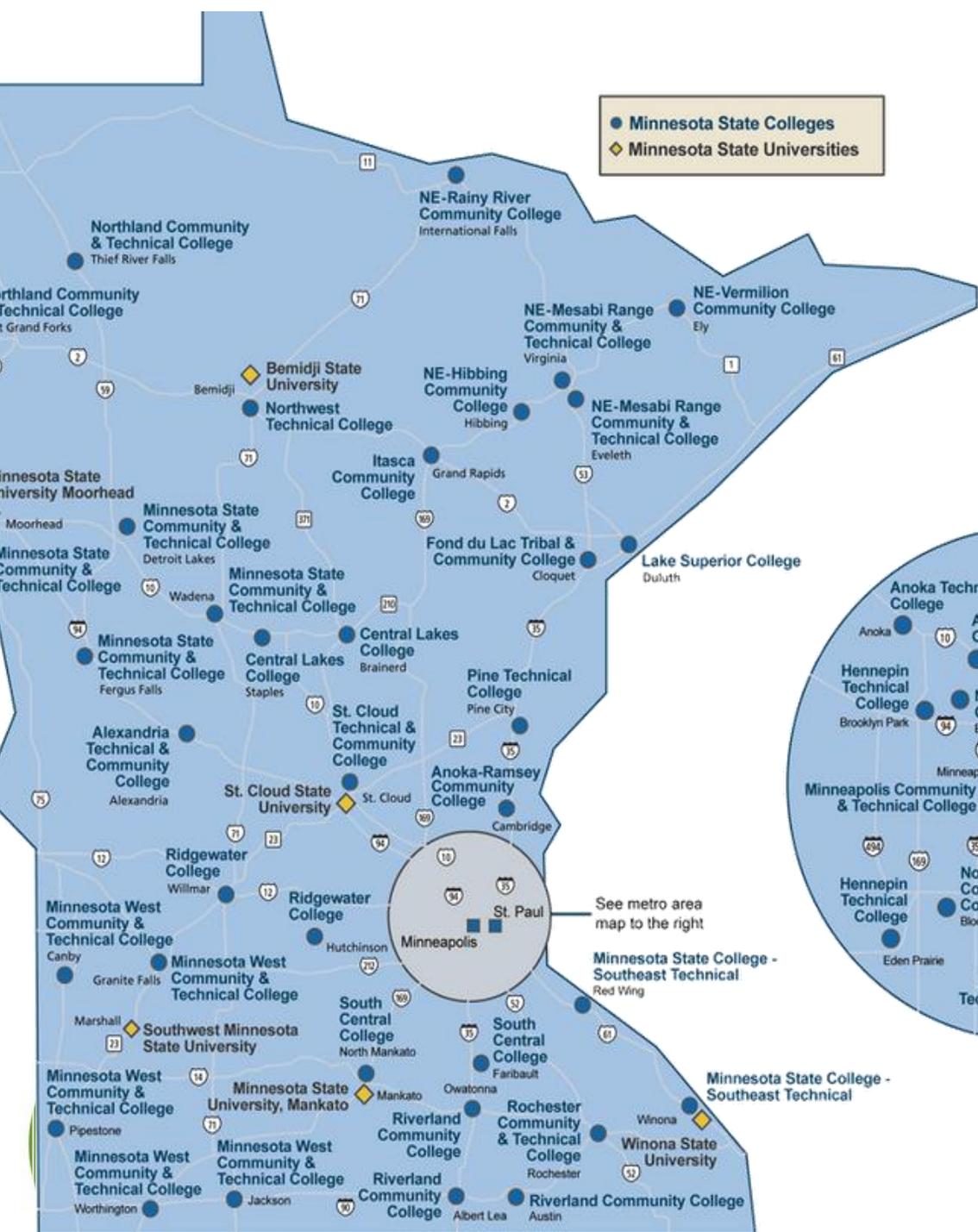
FIND A MINNESOTA WORKFORCE CENTER NEAR YOU

*“I challenge us to have
a LeadingAge
Minnesota member on
every Workforce
Council by the next
Annual Meeting.”*

- Shirley Barnes

*CEO, Crest View Senior Communities
Chair, Anoka County Workforce Council*





Shared Staffing Models?

Working together.



WORKFORCE FUNDING

#8



Scholarships++



Minnesota Department of **Human Services**

- Nursing Facility Scholarship Program

MDH Minnesota
Department of
Health

- Nursing Loan Forgiveness Program
- Summer Health Care Internship Program

got philanthropy?



If you had between \$50,000 and \$500,000+ to test a workforce strategy, what might you try?

*LeadingAge*TM **MN**
FOUNDATION

You've Got Funding!



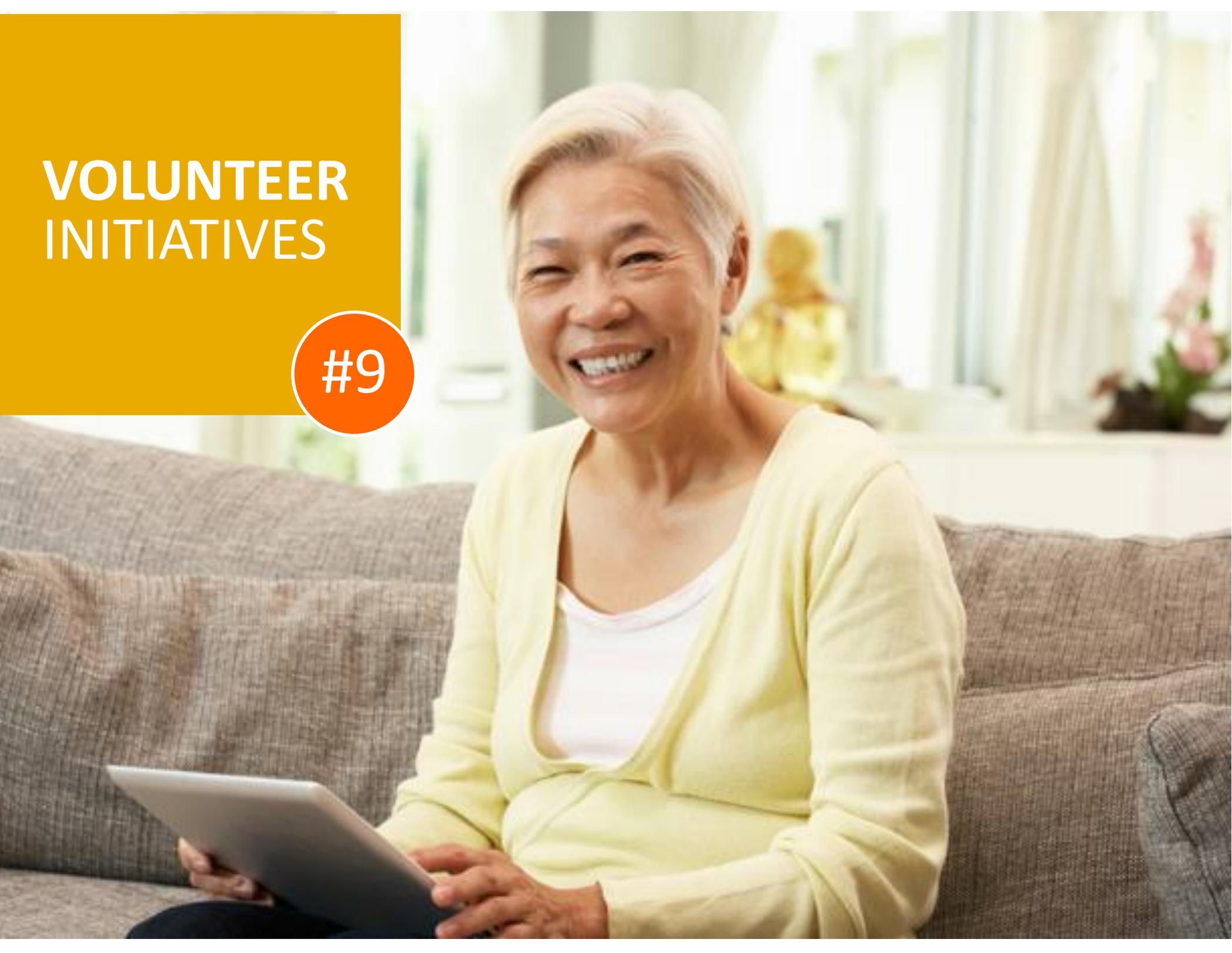
Key Themes...

- Better Jobs
 - Staff training
 - Staff supports
- Service Delivery Changes
 - Health Support Specialist
 - Innovative, flexible, changing the model
- Pipeline Enhancements
 - Youth engagement (K-12, career campaigns)
 - Volunteerism



VOLUNTEER INITIATIVES

#9



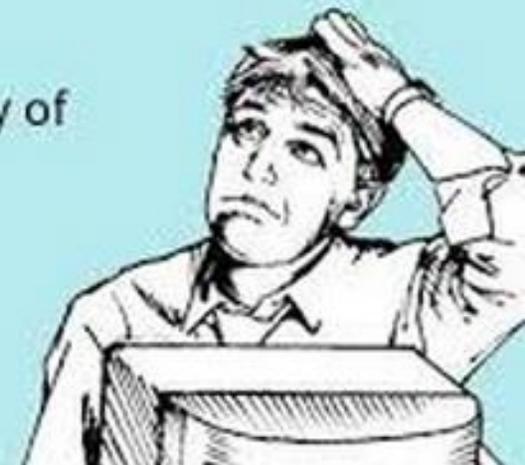
A Culture of Volunteerism

- Volunteer Directors?
- Who are your target markets?
 - Retired staff (mentors, trainers, coaches)
 - Retirees generally!
 - Faith communities
 - High schools
 - Colleges

Do you know what HCAM means?

Health Care Auxiliary of
Minnesota

Hcam
Health Care Auxiliary of Minnesota



RECRUITMENT STRATEGIES

#10

Post Jobs – Members Only

AgingServices**JOBS.org**



Effective Outreach Strategies

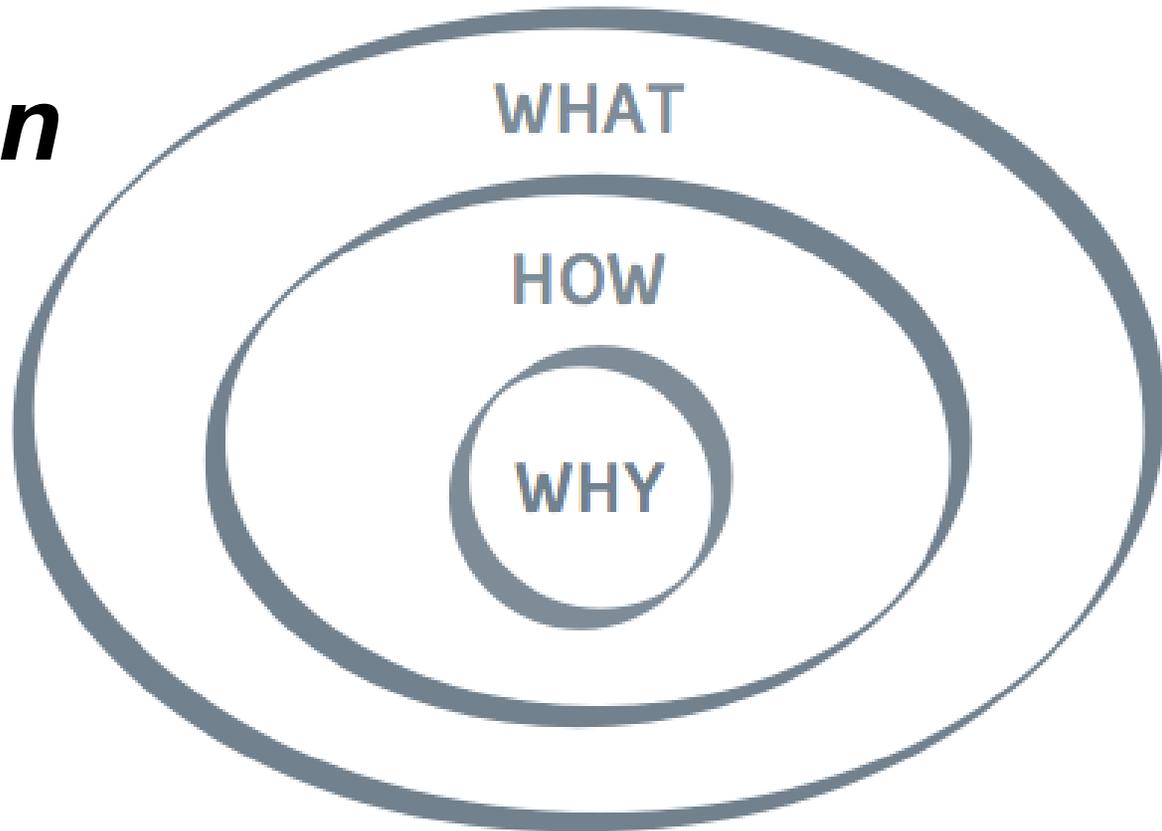
- Expanding our marketplace
 - Be opportunistic
 - Former family caregivers, retirees
 - “People creation” i.e. immigrants
- Marketing tailored to demographics
- Fostering friend/family referrals
- Increased, dedicated recruitment efforts
- Metrics/tracking





Simon Sinek's

Golden Circle



Why = The Purpose

What is your cause? What do you believe?

How = The Process

Specific actions taken to realize the Why.

What = The Result

What do you do? The result of Why. Proof.

TED
Talks

Key Themes...

- Retention is key...
- Bold new thinking is needed...
- We're part of something big here...
- Partnerships matter...
- Early connections with education will be essential!
- We need a blend of short-term and long-range efforts



IF YOU
CHANGE
NOTHING,
NOTHING
WILL
CHANGE



Key Themes...

- **SHORT-TERM:**

Career promotion activities, a changed narrative/marketing message, tools, data

- **LONG-TERM:**

Healthy workplace practices, new job descriptions, education partnerships and partnerships for pipeline development



We are all faced with a series of great opportunities brilliantly disguised as impossible situations.

- Charles Swindoll



Workforce Analysis and Strategic Plan



Augustana Mercy
Health Care Center

Workforce Planning Analysis

- Is a systematic process and analysis of the organization's labor needs in terms of the size, type, experience, knowledge, skills and quality to achieve its business objectives.
- The process is used to generate business intelligence to enlighten and direct the organization as it relates to the efforts that will be needed to attract and retain a suitable workforce in the future. Moreover the process and data gathering is directed at analyzing and developing a workforce planning strategy. [2]
- The analysis looks out three to five years and is aligned with business needs and outcomes. The analysis identifies the demographic trends and its implications related to current and future needs to successfully carry out objectives.
- The resulting plan covered the next 12-18 months and is aligned with the near future business needs and plans.

Workforce Analysis Used

- ◎ Local, Regional and State Demographic Data
- ◎ Employee and Community Focus Groups
- ◎ Reasons for Staff Terminations
- ◎ Other Research on Similar Workforce Characteristics
- ◎ A Steering Committee

Essential CNA and Nurse Success Characteristics

● Dependability	Positive Attitude	Compassion
● Reliable Upbeat	Not a complainer	Caring
● Conscientious	Flexible with change	Kind
● Good attendance	Cooperative/does extra	Patient
● Follows instruction	Eager to learn/improve	Thoughtful
● Initiative	Loyalty	Efficiency
● Self starting	Truthful	Thorough
● Enthusiastic	Supportive	Safe
● Resourceful	Honest	Timely
● Creative	Trustworthy	Not wasteful

**In other words, the workforce
we want others want as well.**

What attracted you to a AMHCC (CNA) job?

- Inexpensive or reimbursed training costs
- Short training period – and good starting pay compared to other entry level jobs
- Needed a job – close to home /Kids to care for/ laid off
- Family member worked here (usually mother)
- Family member (or personally) a resident
- Loved residents/elderly
- Good fit for my personality (caring)

AMHCC CNA's responses closely reflected those of a national study

Summary: Most took the job because they needed it to support themselves and/or family, and this position required little training (with costs reimbursed) and a starting pay better than other entry level positions (fast food or retail)

Why Staff Leave

Why you would leave your job as ranked by participating CNAs.

- 1) Working conditions/ policies (this included scheduling practices)**
- 2) Too many residents to care for**
- 3) Poor pay**
- 4) Problem with supervision**
- 5) A better job**
- 6) Poor benefits**

Who's leaving?

The longer employees have been with an organization, the less likely they are to leave. Thus in organizations with high turnover, the problem is often attributable to an inability to retain the newest employees.²²

- Do you know where your turnover exists? Is it your inability to retain the newest employees? What are your recruitment strategies to drive this number down:
 - Where and to whom do you advertise? Older workers, those with prior care giving experience.
 - Increasing the flow of applicants – what are you doing and experimenting with?
 - Create better screening processes for applicants
 - Onboarding - reduce barriers to employment, adequate training, adjusting expectations downward, mentoring programs, support systems.

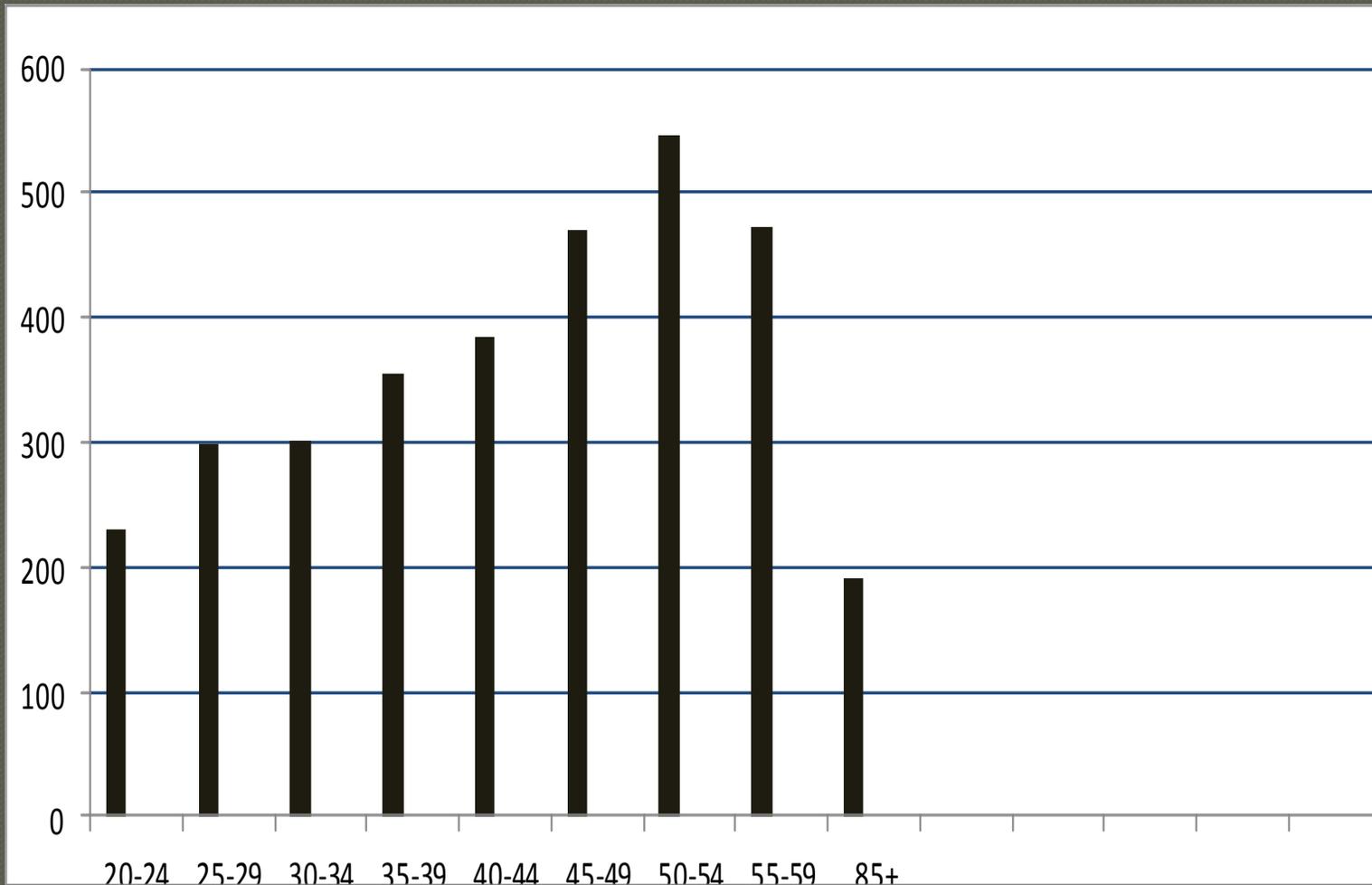
Stayers vs Leavers

Analytic Assistance

- MN Department of Employment and Economic Development
- MN State Demographers Office
- US Census Bureau



Chart of Total Female Population by Age 20-59 in six Target Zip Codes



Health Care and Social Assistance Industry Statistics, Carlton and Pine County Annual Average, 2013

NAICS	Sub-Sector	Establish - ments	Employ- ment	Avg. Weekly Wage
62	<i>Total Health Care and Social Assistance</i>	121	3,351	\$686
623	Nursing and Residential Care Facilities	36	950	\$409
621	Ambulatory Health Care Services	27	256	\$983
624	Social Assistance	17	290	\$500

Eliminate

- Men
- Out of workforce
- Unemployed
- % Choosing not to work
- Disabled
- Below 9th Grade Ed.
- Incomes above \$25,000
- Households w/ inc. above \$45,000

Total Area Workforce

Moose Lake, Askov,
Barnum, Kettle River
Sturgeon Lake, Willow River

14,032

Female Workforce

Target Age 20-70

4,197

172

**Total
Estimated
Direct
Caregivers in
Market or
Seeking Work**



**Table 6. EDR
3 Nursing
Assistant
Labor Market
Occupation
Composition,
2014 Q2**

Occupation	Total Employment	% of EDR Workforce	Hourly Median Wage	% Part-time	Ave. Wage Offer
EDR 3 Total	141,020	100%	\$16.34	42%	\$9.99
Retail Salespersons	5,000	3.5%	\$10.04	89%	\$7.89
Combined Food Preparation and Serving Workers	3,440	2.4%	\$8.61	89%	\$7.14
Personal and Home Care Aides	3,140	2.2%	\$10.41	64%	\$11.32
Home Health Aides	2,870	2.0%	\$10.66	53%	\$11.00
Social and Human Service Assistants	2,240	1.6%	\$13.89	93%	\$8.24
Nursing Assistants	1,890	1.3%	\$12.95	79%	\$11.72
Teacher Assistants	1,510	1.1%	\$13.51	66%	\$13.42
Medical Assistants	560	0.4%	\$16.22	71%	\$12.72
Child Care Workers	480	0.3%	\$9.68	74%	\$10.34
Recreation Workers	350	0.2%	\$10.80	51%	\$9.96
Emergency Medical Technicians and Paramedics	220	0.2%	\$14.57	56%	\$17.27
Nonfarm Animal	130	0.1%	\$9.23	n/a	n/a

Occupation	2010 Estimated Employment	2020 Projected Employment	% Change	Total Change	Replace- ment Hires	Total Hires
Home Health Aides	4,389	7,068	61%	2,679	570	3,250
Retail Salespersons	4,255	4,885	15%	630	1,250	1,880
Combined Food Preparation and Serving Workers	3,299	3,691	12%	392	920	1,310
Nursing Aides, Orderlies, and Attendants*	3,183	3,995	26%	812	410	1,220
Childcare Workers	1,908	2,494	31%	586	600	1,190
Personal Care Aides	1,790	2,805	57%	1,015	140	1,160
Social and Human Service Assistants	2,333	2,928	26%	595	500	1,100
Emergency Medical Technicians and Paramedics	327	425	30%	98	70	170
Recreation Workers	438	522	19%	84	70	150
Medical Assistants	299	356	19%	57	50	110
Physical Therapists	228	284	24.6%	56	30	90
Animal Care and Service Workers	147	188	28%	41	30	70
Nonfarm Animal Caretakers	135	174	29%	39	30	70
Occupational Health and Safety Specialists	127	125	-1.6%	-2	40	40

DEED Conclustions

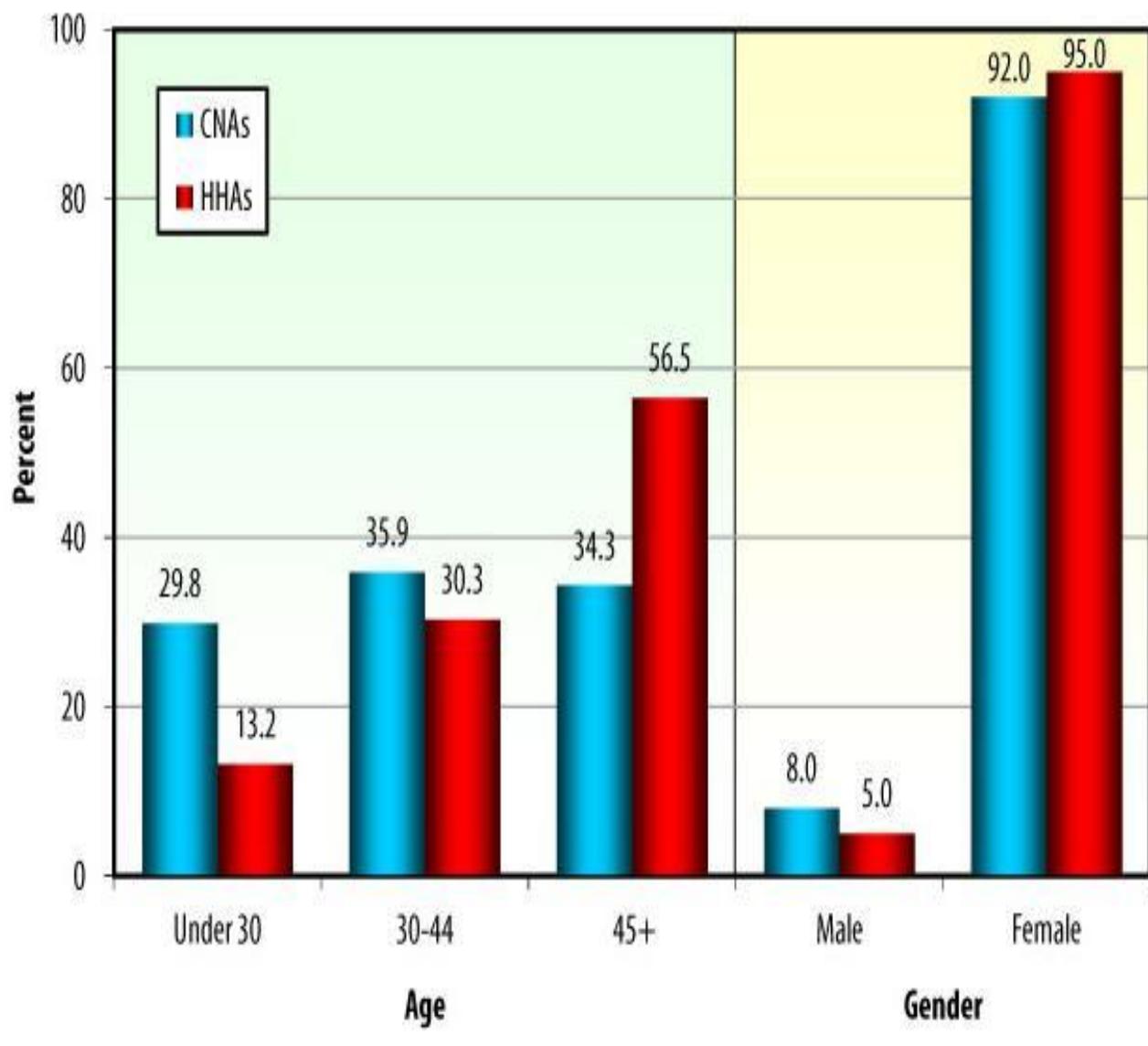
- **Salary:** *On a positive note, CNA positions pay relatively well compared to other entry-level positions with little or no post-secondary training requirements; i.e. Retail, Food Prep, Child Care Workers, and Home Health Aides. Conversely, CNA pay is lower than Medical Assistants and Community Health Workers. (Table 5)*
- **Job Growth/Competition:** *Competition for entry-level care givers is high and will be even greater over the next 5 to 10 years. There are 121 Health Care and Social Assistance firms in Carlton and Pine Counties alone. These are the types of firms that potential CNAs (with an interest in care-giving) would apply to work for. Nursing and Residential Facility Job growth between 2010-2020 is projected at 41% (Table 3). There is a projected growth rate of 26% for Nursing Assts. However, growth of related positions that could draw away potential CNAs will increase at an even greater rate, i.e. Home Health Aides- 61%, PCAs – 57%, Child Care Workers- 31%, EMTs – 30%. (Table 7) On a positive note, Social Assistance positions have declined significantly over the past 5 years, which could free up more potential workers to be CNAs. (Table 2)*

DEED Conclusions

- **Declining workforce population:** *While job growth in Health Care positions will rapidly expand with an aging population, the available workforce to fill those positions will slightly decline or remain stagnant. According to a DEED formula in the report, there is a potential pool of 297 CNAs in the area.*
- **Need to look outside of traditional labor pool:** *Given the above, employers in the health care industry, especially those serving our older residents, will need to be more creative in who they look to fill those positions, and provide more flexibility in order to meet labor force demands. This might include reduced physical labor for older or disabled workers, schedule flexibility for those working multiple part-time jobs or with family concerns, and looking at alternative populations, i.e., older, male, or disabled as a source of potential workers. See the SDO slide below re: the trend of older adults staying in the workforce for longer periods, making that age group a potential source of care-givers.*

Related Research

- The following slides come from: RTI analysis of the 2007 National Home Health Aide Survey and the 2004 National Nursing Assistant Survey, 2009.
- <http://aspe.hhs.gov/daltcp/reports/2011/cnachart.htm>



More than in any other health care occupation, direct care workers are disproportionately female. In fact, over 90% of these workers are women. The average age of CNAs is 39 years and the average age of HHAs is 46 years.* HHAs tend to be older than CNAs. Almost 57% of HHAs are aged 45 and older compared to 34% of CNAs.

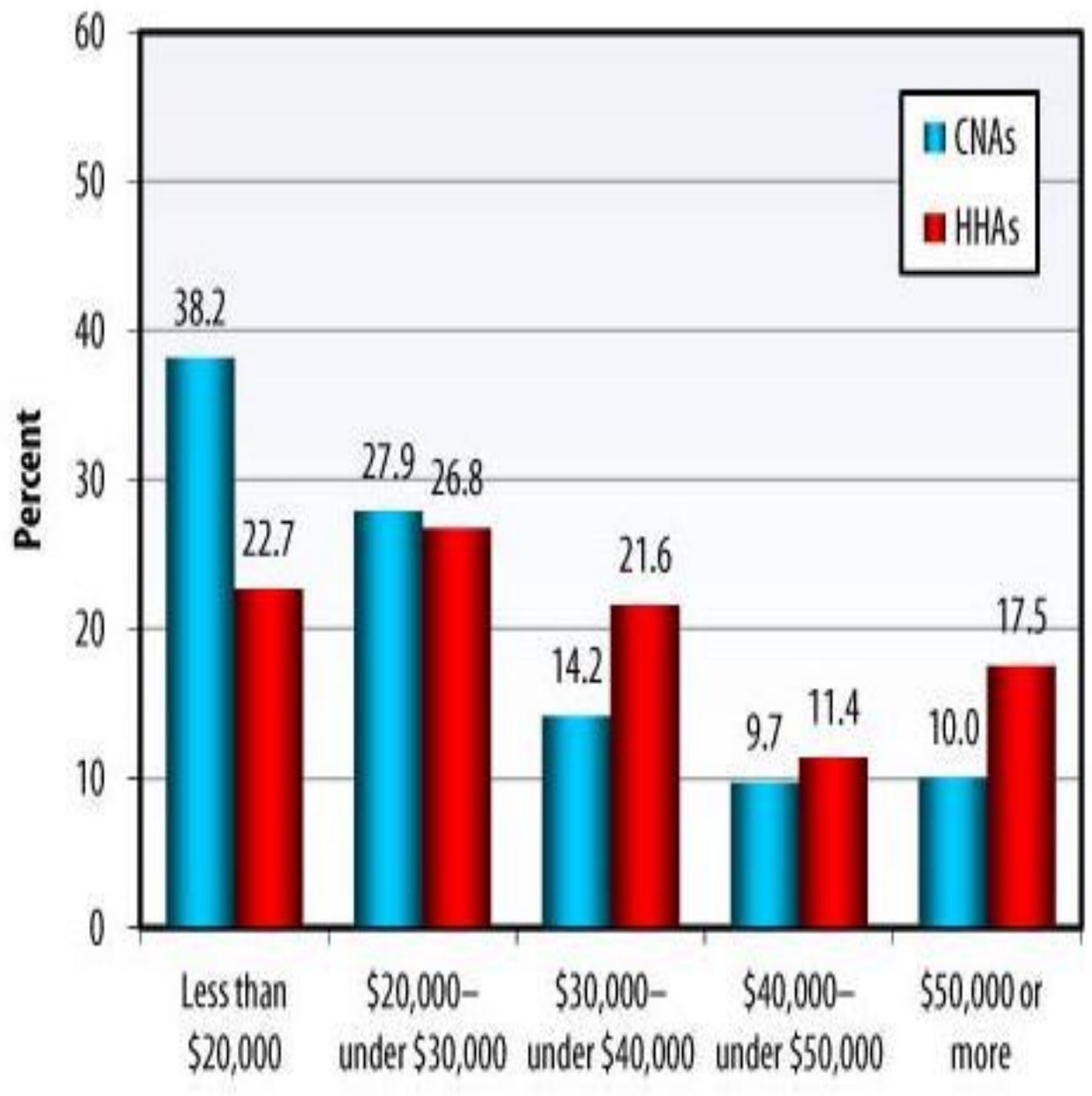
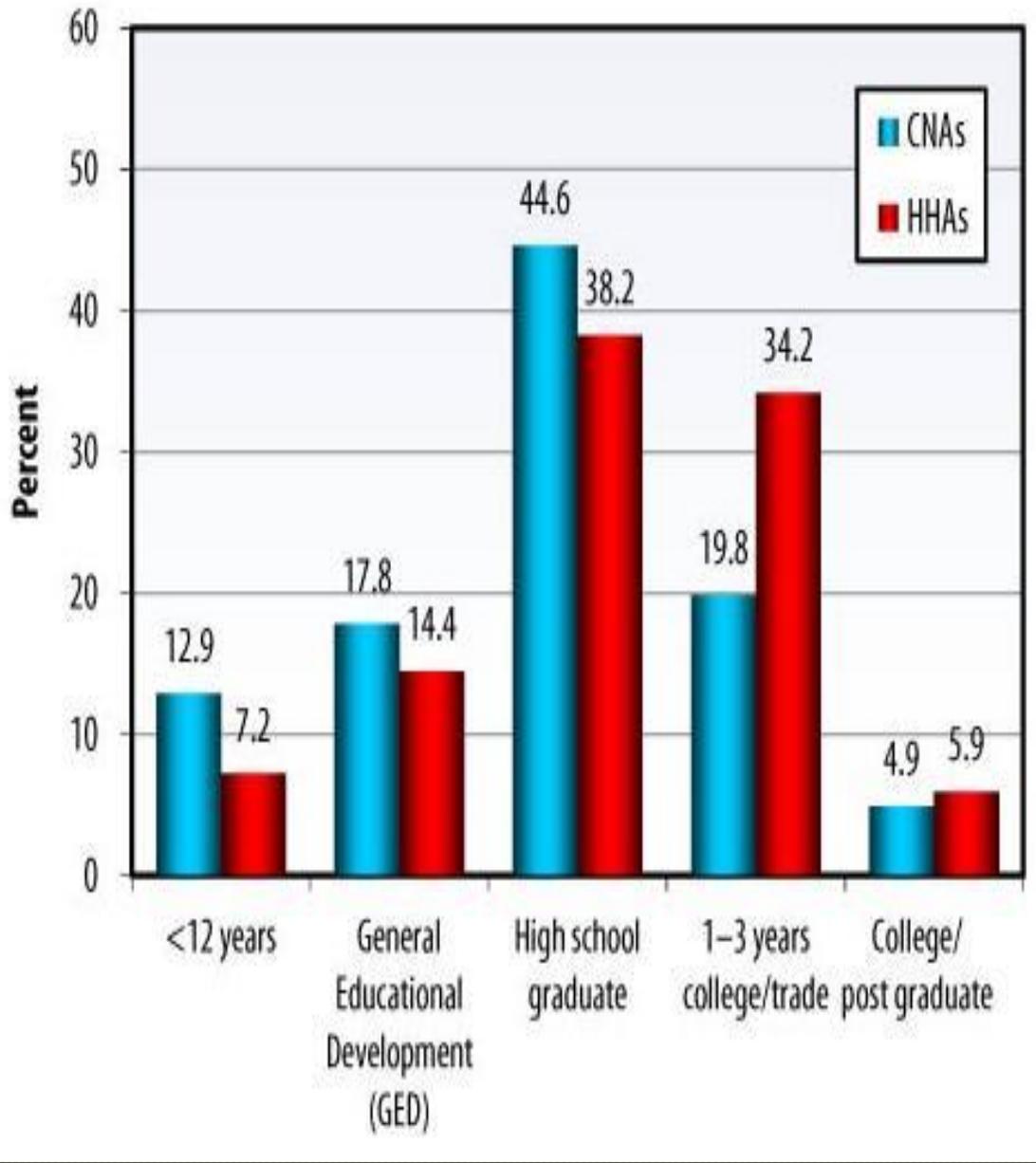


FIGURE 1-3. Household Income

Compared with CNAs, HHAs have higher household incomes: more than 50% of HHAs report family income over \$30,000, compared with one-third of CNAs.



More than 75% of CNAs and 60% of HHAs have only a high school education or less. Overall, HHAs have somewhat higher levels of education.

CNAs=certified nursing assistants; HHAs=home health aides.

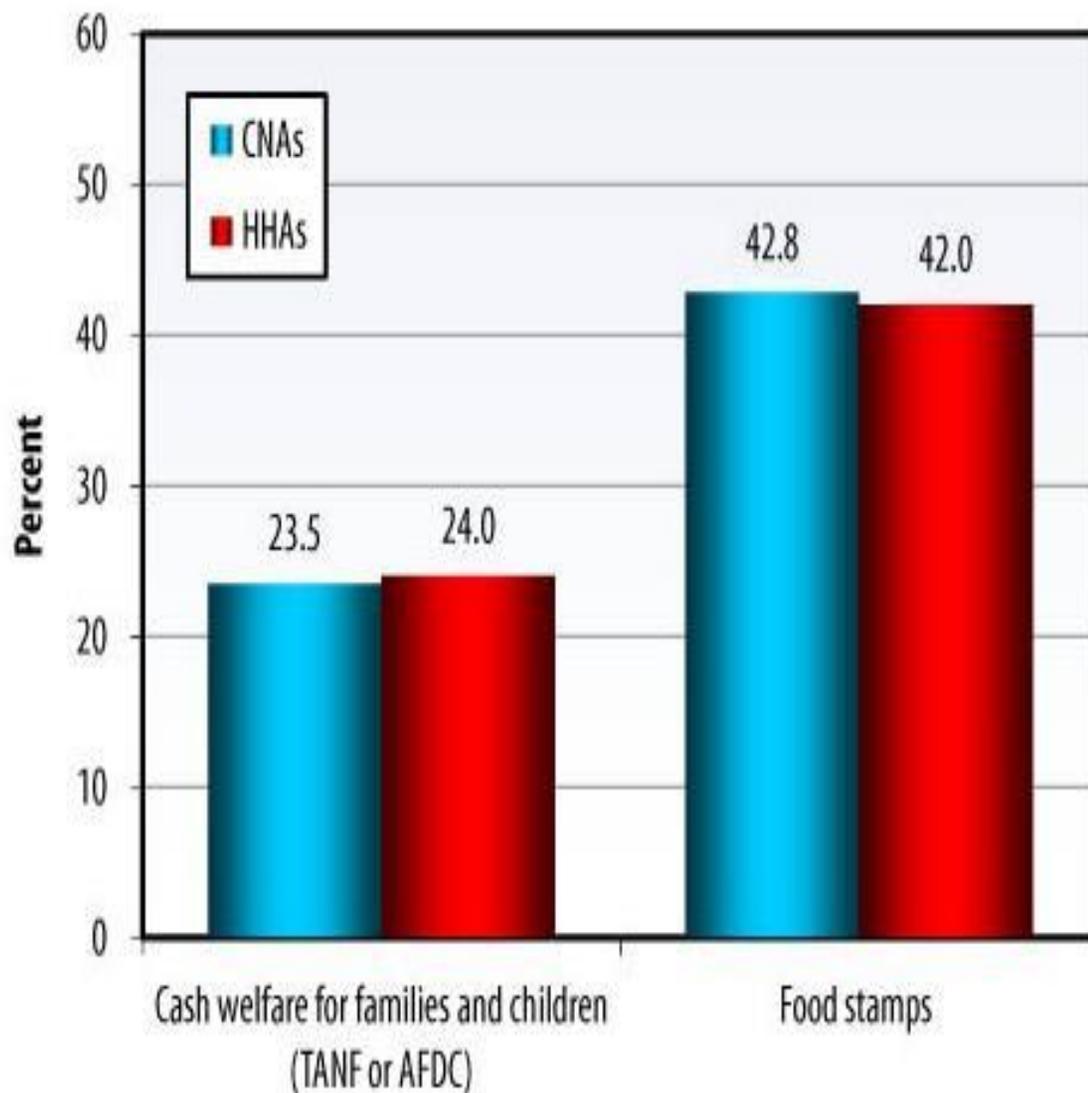
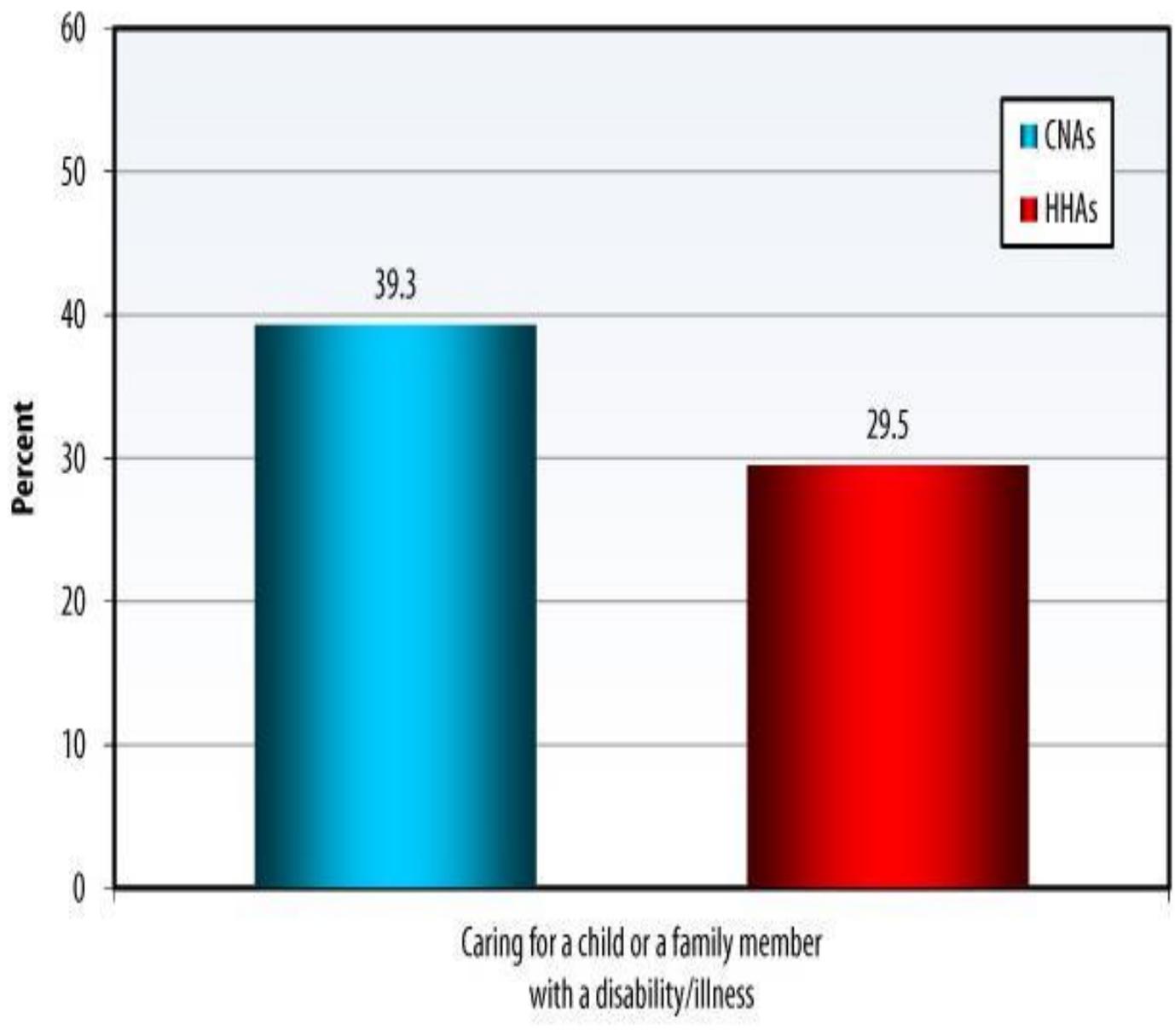
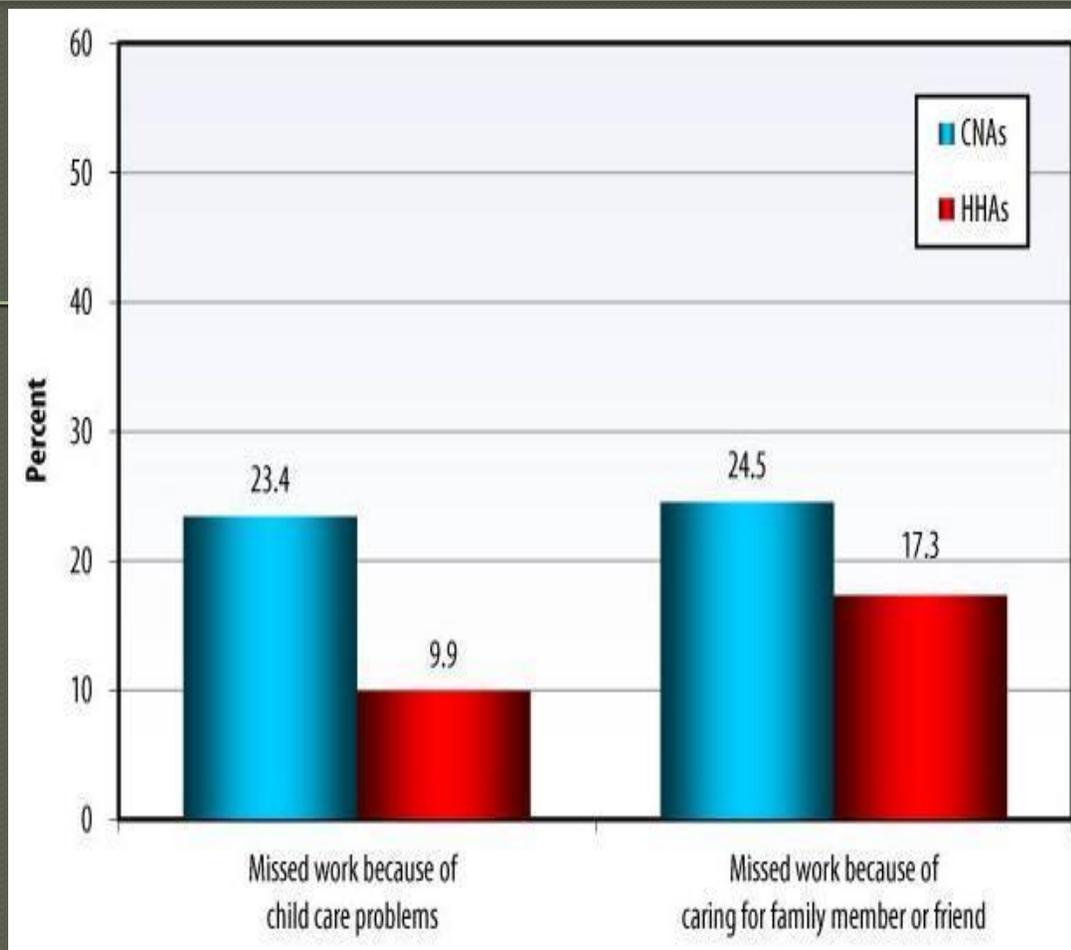


FIGURE 1-4. Prior Receipt of Public Assistance

Receipt of public assistance is another way to assess household financial status. Past participation levels are high for both types of workers. CNAs and HHAs have similar patterns of prior public assistance program use: almost a quarter report having received cash welfare benefits for families and children (TANF or AFDC), and about 42% have been on food stamps in the past.



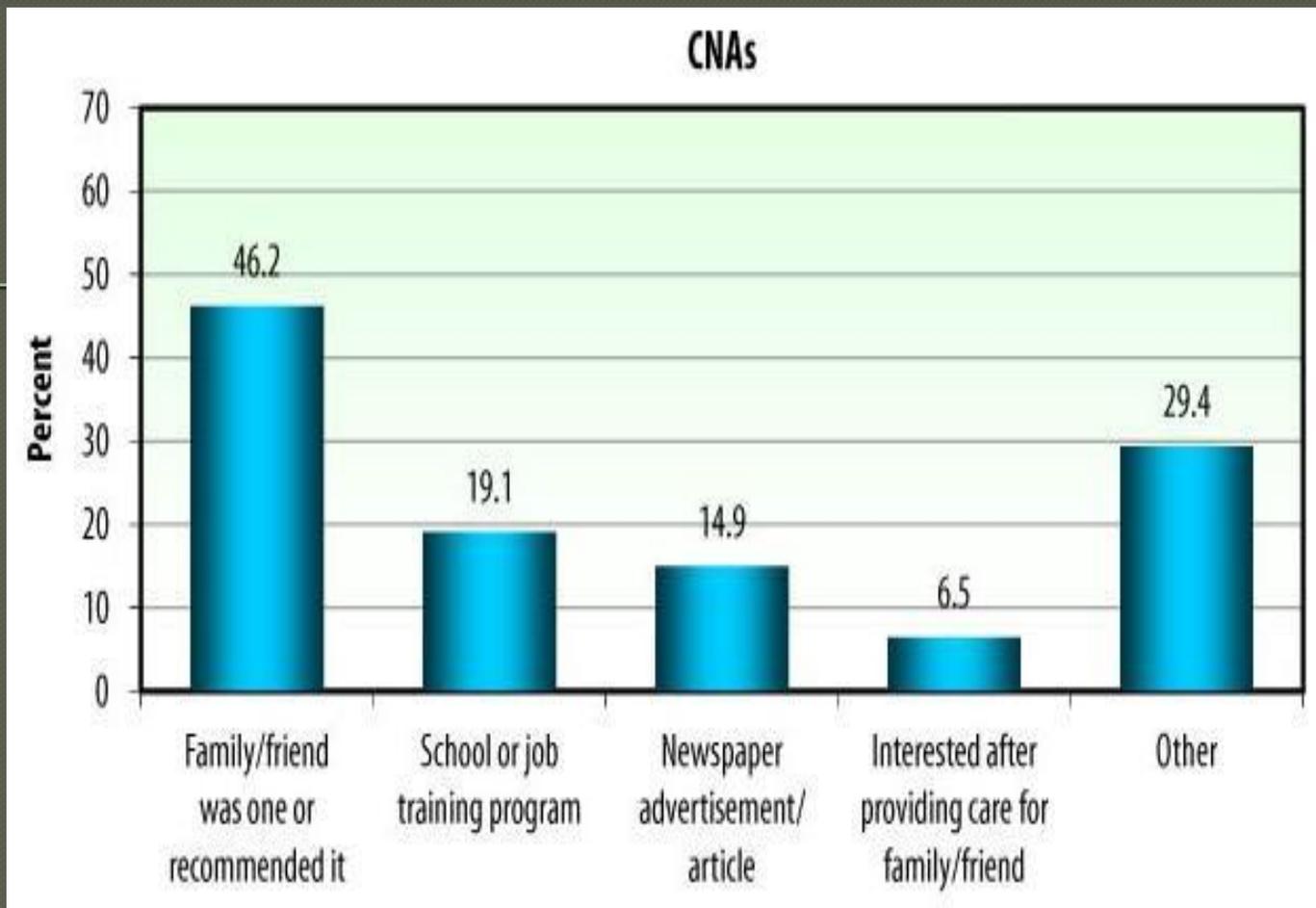
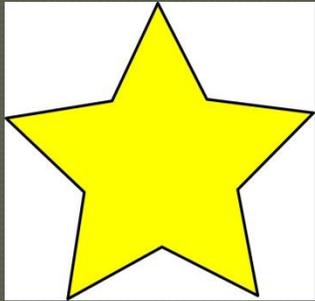
Competing non-work-related demands, such as providing care to children or sick family members, play a major role in direct care workers' lives. About 39% of CNAs and 30% of HHAs have either child care or family care obligations.



Direct care workers must balance employment with substantial family caregiving obligations, potentially adding additional stress to the job. Care provided at home includes child care and help for family members or friends with a disability or health problems.

Over 23% of CNAs and almost 10% of HHAs report missing work due to child care problems.

Almost 25% of CNAs and 17% of HHAs report missing work because of caring for a family member with disabilities.

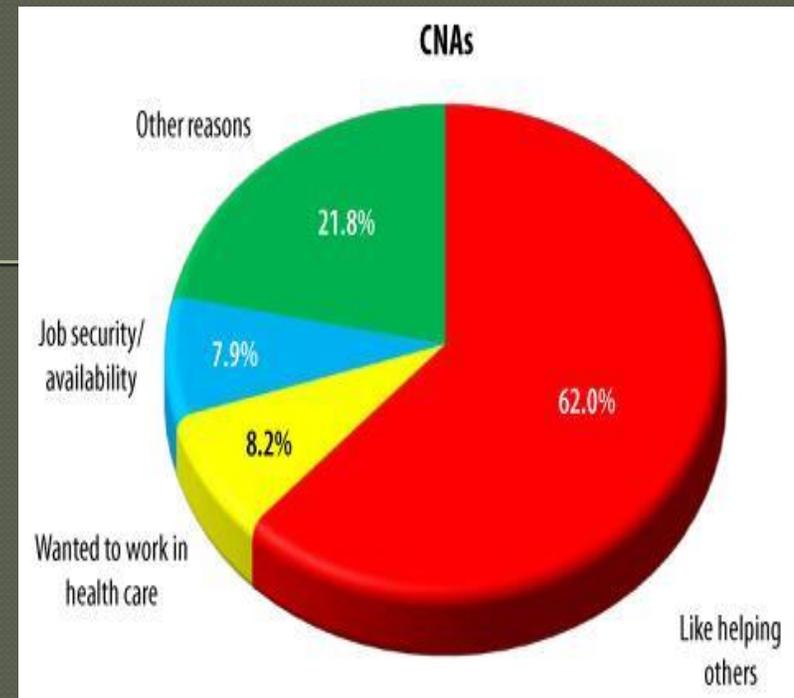
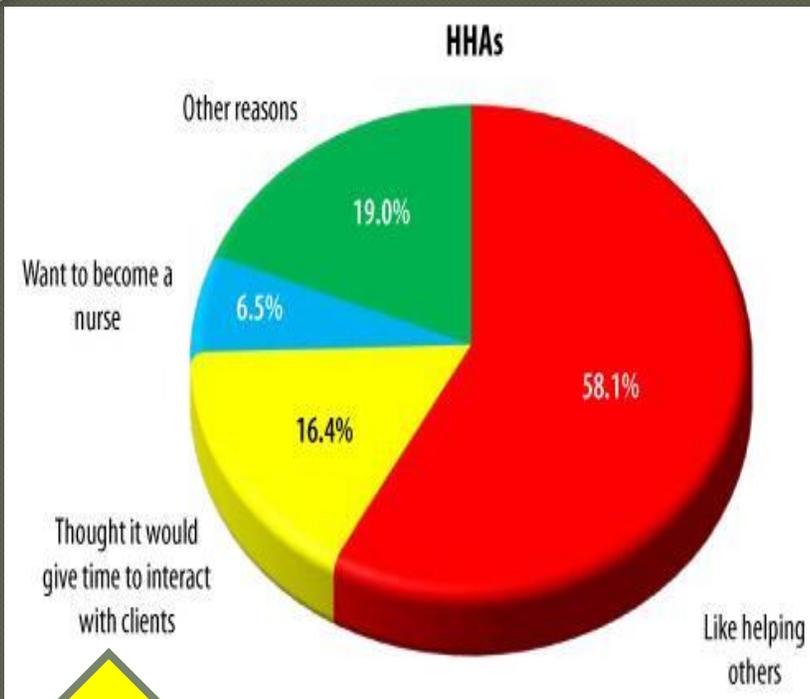


Increasing the number of qualified applicants for the growing number of positions is one strategy to reduce the long-term care workforce shortage. Effective recruitment strategies are important components of increasing the number of direct care workers. Up until now, little was known about how potential applicants learn about direct care jobs and what attracts workers to the long-term care field.

- **Direct care workers learn about becoming a CNA or HHA and find their jobs through family and friends, working in another health care setting, newspaper advertisements and articles, and school or job training.**

- The great majority of CNAs and HHAs become direct care workers because they want to help others, suggesting that these workers are not interchangeable with other low-wage workers.

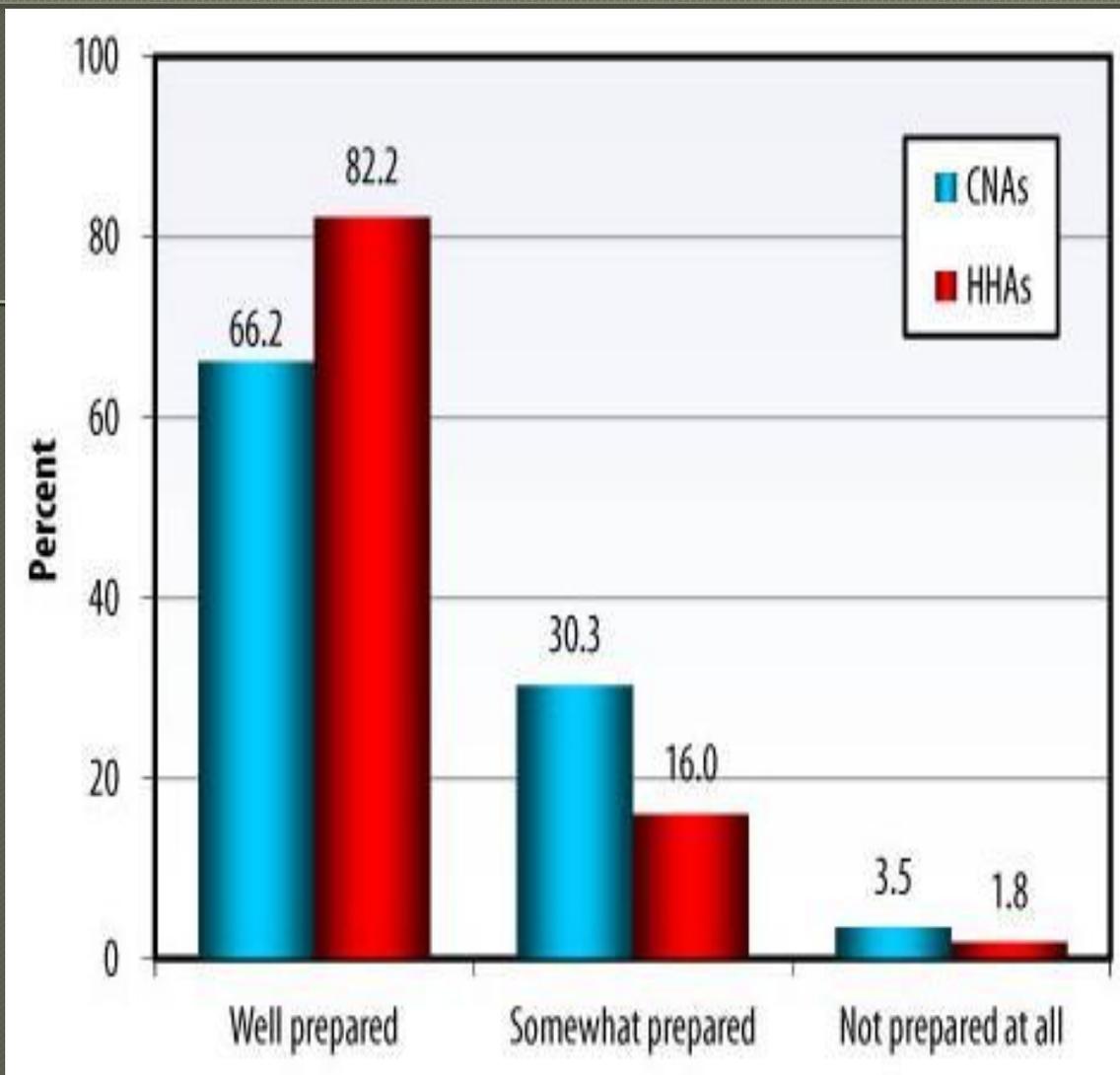
- In their recruitment efforts, providers and policymakers need to recognize the importance of local family connections and community ties..



- Desire to help others is the most important reason for becoming a direct care worker in both nursing homes and community settings.
- For CNAs, important reasons also include desire to work in health care and job security and availability.
 - HHAs report that time to interact with clients, and their desire to pursue a nursing career, are important factors.

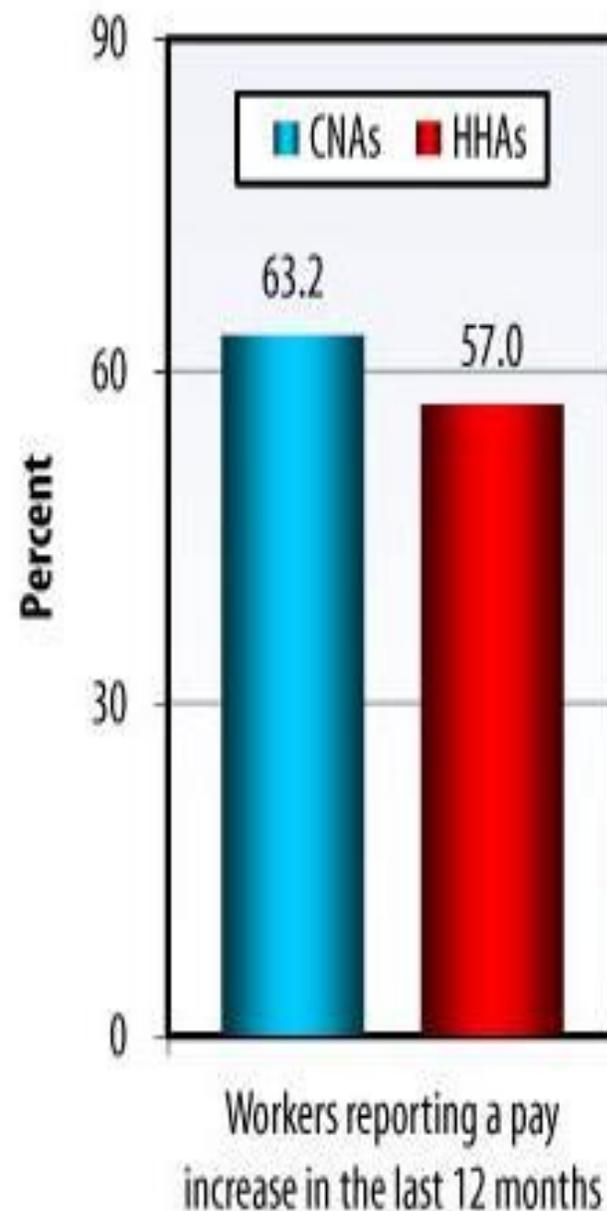
Training and Orientation

- Inadequate training may lead to poor job performance and quality of care, which in turn may result in low levels of job satisfaction and high turnover rates. The need for better training was recognized by the *Patient Protection and Affordable Care Act of 2010*, which establishes a new three-year program to provide infrastructure support for the development, evaluation, and demonstration of a competency-based curriculum to train qualified nursing assistants and home health aides (*Pub.L. 111-148, Affordable Care Act*).
- A great majority of all direct care workers report being well prepared for the job by their initial training. Workers feel better prepared for direct care work when they receive hands-on training or when their training is evenly split between hands-on and classroom training.
- Training costs and time constraints represent a substantial barrier to becoming a direct care worker
- Career advancement opportunities are very important to direct care workers. They often cite this as a reason to stay on the current job and value supervisors who are supportive of their career advancement



Overall, 66% of CNAs report that they were well prepared for their work in nursing facilities, 30% say they were somewhat prepared, and 4% report that they were not prepared at all.

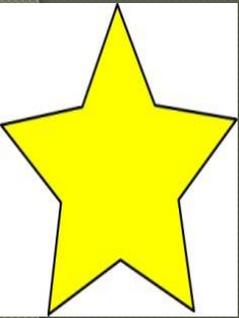
In contrast, 82% of HHAs report being well prepared for their work in home care, 16% say they were somewhat prepared, and 2% report that they were not prepared at all.



Note: Wage data are in 2007 dollars. Wage data from the 2004 NNAS were adjusted to 2007 using U.S. Bureau of Labor Statistics data on percentage increase in CNA wages over the time period.

Turnover in Nursing Homes

- Turnover exists in all sectors of the labor force at rates of 13-18% but service industries report average turnover rates of 20% a year.² As part of the service sector, nursing homes have higher turnover rates for all staff categories and nurse aides are the highest.
- This is a 74% gap between average service industry turnover and nurse aide turnover, yet the picture is not quite this bleak. Staff who leave after a short tenure contribute most to the high turnover rates.⁴ That is, these positions turnover many times in one year. Methods used to determine turnover varies. **Facilities need to identify the drop-out point before putting interventions in place to control turnover.**^{5, 6}
- Stable nurse aides stay in their jobs for several years. Stability rates may be more important than turnover rates,⁷ although the research to date has focused on turnover.



W/A Key Conclustions

- ◉ **There is and will be a shortage of workers, and especially caregivers.**
 - Demand is increasing and Supply Decreasing
 - Competition for workers will be fierce.
- ◉ **Get very creative in employee recruiting.**
 - Plan for it, Use expertise for it, Budget for it.
 - Target older workers. Younger workers are and will be scarce and are much more likely to leave after a short time.
 - Identify the characteristics of those who do stay on this job and fit the role.
 - Look in places where people's values/interests may pair with those of good caregivers.
- ◉ **Be honest with applicants** about the difficulty of the job. Develop a Realistic Job Preview (RJP) Scrapbook (See LSS Case Study.)

W/A Key Conclusions

- Since the majority of staff turnover happens with new and 1st year recruits, put significant effort into hiring the right people and the on-boarding experience.
- **Create incentives to stay** - i.e. “retention pool” for new entry-level caregivers who stay on the job a year. Look where those resources might come from: shift from administration (salaries, travel); capital outlays, savings in training..
- Long term employee satisfaction is in large part related to staff relationships on the job. **Conduct an extensive supervisory training around leadership, staff retention: use of praise and positive reinforcement, how to deliver constructive criticism, knowing when to “pitch in”.** Evaluate and reward it.

Developing our strategic plan

- Recruitment
- On-boarding
- Retention

Silo 1 - Recruitment

Objective: *Increase the quality and quantity of applicants through the use of a strategic recruitment plan that addresses marketing efforts needed to attract the desired workforce now and in the future.*

Marketing Information:

- .Demographic Analysis – by State Demographers Office, DEED and Workforce Centers*
- .Surveys and Focus Groups*
- .Prior Studies*

Recruitment Planning

- ◎ Who do we want to recruit?
- ◎ Who are the target candidates?
- ◎ Where are these people?
- ◎ How many are there in our workforce market area?
- ◎ How many in any given location?
- ◎ What do recruits want?
- ◎ What is our marketing plan?

Recruitment Strategies

◎ New Positions?

- TMA's
- Unit Helpers
- Universal Workers

◎ Eliminate Barriers & Obstacles

- Provide On-site Training
- Offer Paid Training

◎ Recruitment Bonuses

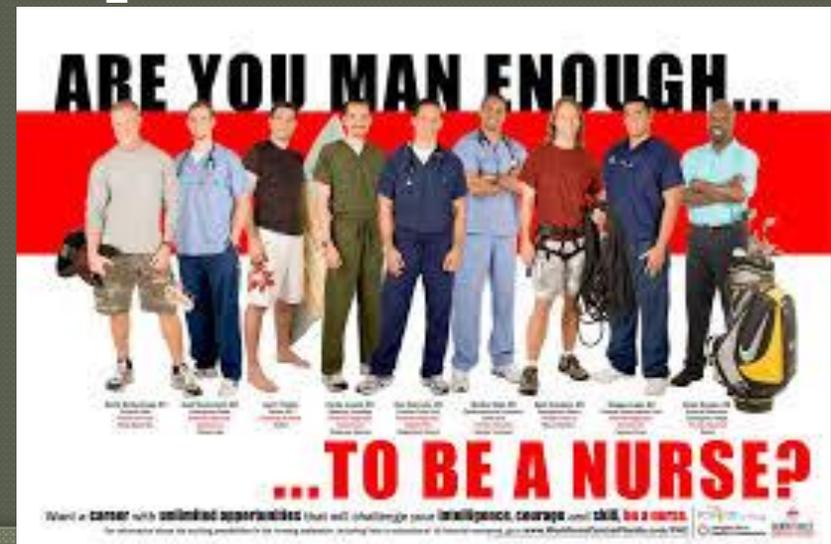
◎ Target Non-traditional Groups

Recruitment Strategies

- ◉ Realistic Job Preview
- ◉ Better Ccreen Applicants
- ◉ Improve our Image
- ◉ Be more creative
 - Kiosk Development
 - Posters/Ads/Brochures
 - Positive News Articles
- ◉ Hold a Job Fairs
- ◉ Connect General and Workforce Marketing
- ◉ Establish Presence
 - Community Events
 - Local Businesses
 - Churches
 - Community Colleges
 - Local Workforce Center
 - Community Clubs

Market Campaign

- ◎ Don't just market a job..
 - Meaningful careers /work
 - A career path
 - Your caregivers
 - You value caregivers
 - Working with a quality organization
 - Working with a quality people
- ◎ Develop a plan
- ◎ Budget for it, staff it
- ◎ Hire expertise



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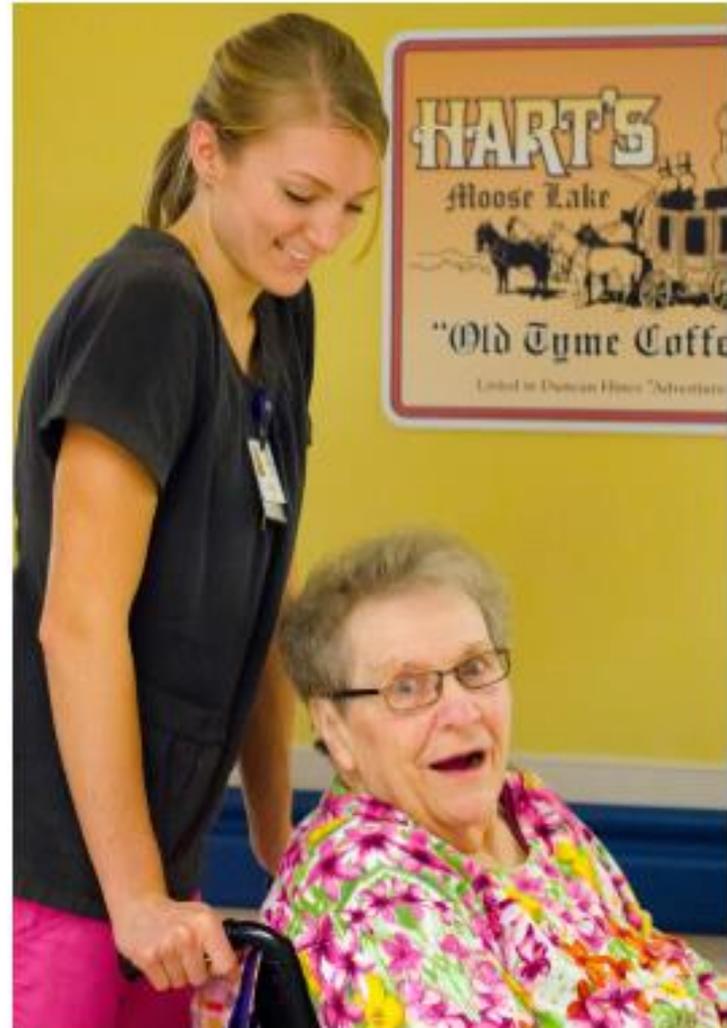
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Look for
Caregiver
Experience
Personality

Provide a
Realistic
Job Preview

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Nurses and nursing assistants value their roles and relationships of the individuals they serve. Together they provide the special care that helps people recover to go home or live with respect and dignity.

Testimonial of a AMHCC care giver:

I didn't know what I was getting into when I took the course. After all this time, I can't begin to tell you how rewarding it is. These wonderful people that I help every day bring great joy in my life. This isn't just a job, it's an extended Family. Our senior citizens have so much to offer, wisdom, humor, and most of all, they teach us to keep going even when things get tough.

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Silo 2 On-Boarding

Objective: To improve the experience, retention and growth of first year employees.

Like student education, an employee's life outside and personal attributes have a significant impact on their success. The following factors were identified as key determinates of a new employees continuing beyond one year.

- Interpersonal skills*
- Experience as a caregiver*
- Values*
- Prior work history*
- Transportation*

- Compensation needs met*
- Hours needs met*
- Physical ability*
- Education*

- Orientation positive and engaging.*
- Home Support*
- Position in life and likelihood to remain stable*
- On the job support, friends , social opportunities*

On-Boarding Strategies

- ◎ On-boarding Specialist will:
 - Provide On- site Training
 - Mentor and Build Relationships
 - 1st Year Support Program
 - Recognize Growth and Achievement
 - Identify and Develop Supervisor Relationships

Silo 3 - Staff Retention

Objective: To create a positive more satisfying work environment that engages and involves staff in a resident centered community.

Study: What actions are needed to develop a largely satisfied staff. What do selected staff need and want in a work environment to be satisfied, successful, more long-tem in their role.

Retention Strategies

- ◉ Supervisor and leadership training
- ◉ Management incentives for demonstrated leadership and positive staff relations activities
- ◉ Develop staff recognition programs
- ◉ Create an enjoyable and fun culture
- ◉ Celebrate successes
- ◉ Provide staff incentives for objective quality performance measures
 - Extra shift work
 - Performance in quality audits
 - Demonstrated Understanding of P&P's

Creating a Winning Workplace

- ◎ <http://greenleaf.org/winning-workplaces/>