

The purpose of the VAHC Home Care Recruitment and Retention Survey is to gather information about the challenges and strategies of Virginia home care agencies in finding and keeping staff. This survey will help VAHC collect information that will be shared with policymakers and other stakeholders, as well as begin to gather successful strategies in recruitment and retention. In appreciation for participating in this survey, we have assembled some resources in recruitment and retention that you may find helpful.

Vermont Assembly of Home Health Agencies Gold Star: Excellence in Home Care Award 2009 Workbook

<http://www.vnavt.com/Gold%20Star%20Wookbook%20Revised%205-4-09.pdf>

Sponsored by the Vermont Assembly of Home Health Agencies (VAHHA) and Better Jobs Better Care Community of Vermont Elders (COVE)

Prepared for VAHHA by Donna Reback, MSW and Joy Livingston, Ph.D., Flint Springs Associates

The Gold Star program was developed by the Vermont Assembly of Home Health Agencies (VAHHA), the Better Care Better Jobs project at the Community of Vermont Elders (COVE), and several Vermont home health agencies. The Gold Star Program is designed to recognize home health agencies that employ Best Practices for recruitment and retention of caregivers, particularly direct care staff. *Best Practices* were identified in seven different areas:

1. Staff recruitment
2. Orientation
3. Staffing levels and work hours
4. Professional development and advancement
5. Supervision: training and practices
6. Team approaches
7. Staff recognition and support

Although the program is specific to Vermont home health agencies, the workbook includes a number of resources you might find helpful in your own organization. These include a Self-Assessment Tool of your recruitment and retention practices, as well as a template for a “Gold Star Plan” that guides you in establishing priority goals for developing a recruitment and retention strategy.

Employee Satisfaction Survey Template (see Appendix A)

Developed by the National Association for Home Care and Hospice (NAHC)

Employee satisfaction is closely tied to workforce retention. NAHC offers the following survey template for agencies to use to assess areas of satisfaction and dissatisfaction for their employees.

Training Quality Home Care Workers: A PHI Technical Series Publication (2003)

http://www.directcareclearinghouse.org/l_art_det.jsp?res_id=61810

Developed by the Paraprofessional Healthcare Institute (PHI)

The Paraprofessional Healthcare Institute (PHI) is a nonprofit organization that works to improve the lives of people who need home or residential care—by improving the lives of the workers who provide that care. PHI has found that one way to improve retention is by providing a high-quality employer-based educational program. This publication, while not a curriculum, offers PHI's overall approach to educating and supporting new home care workers. The document also includes a list of other resources that you might find helpful, most of which are available free of charge from the PHI website or its sister website, the *National Clearinghouse on the Direct Care Workforce* (www.directcareclearinghouse.org).

The Home Health Aide Partnering Collaborative: Implementation Manual (2007)

<http://aspe.hhs.gov/daltcp/reports/2007/HHAPartmnl.htm>

Developed for the US Department of Health and Human Services by Miriam Ryvicker, Ph.D., Theresa Schwartz, B.A., Sally Sobolewski, M.S.N., Terese Acampora, M.A., R.N., Marki Flannery, M.A., Elizabeth Buff, R.N., B.S.N., M.S., Ann Marie Hess, M.S.N., M.S., Robert Rosati, Ph.D., and Penny Feldman, Ph.D. (Visiting Nurse Service of New York Center for Home Care Policy and Research)

The HHA Partnering Collaborative is a quality improvement (QI) project developed and implemented at the Visiting Nurse Service of New York. The primary purpose of the Collaborative was to enhance the quality of work life for home health aides while improving outcomes for home health patients. The Collaborative model seeks to enhance teamwork in home care agencies, particularly to promote the inclusion of home health aides. The HHA Partnering Collaborative was developed in recognition that not integrating home health aides into the team can lead to job dissatisfaction and problems with retention. The section on improving support to home health aides may be particularly helpful.

Literature Review: Recent Research on Home Care Recruitment and Retention (See Appendix B)

Prepared by the Virginia Association for Home Care and Hospice

Appendix A: Home Health and Hospice Employee Satisfaction Survey

Home Health and Hospice Employee Satisfaction Survey

Circle One: Home Health Aide LPN RN Therapy
 Office/Clerical Administration/Management

Circle One: Home Health Hospice

Rate the areas below by marking the category that is closest to correct about your job.

| Categories | Very Dissatisfied | Dissatisfied | Neutral | Satisfied | Very Satisfied |
|---|-------------------|--------------|---------|-----------|----------------|
| Your Job | | | | | |
| Opportunities to use your skills and abilities | | | | | |
| Opportunities for interesting, challenging work | | | | | |
| Recognition for work well done | | | | | |
| Amount of responsibility given to you | | | | | |
| Pay in relation to job duties | | | | | |
| Patient Care | | | | | |
| Your daily work load | | | | | |
| Effectiveness of team approach | | | | | |
| Effectiveness of team leaders | | | | | |
| Rotation of areas | | | | | |
| Daily scheduling process | | | | | |
| Accessibility of medical supplies | | | | | |
| Distribution of medical supplies | | | | | |
| Number of miles driven each day | | | | | |
| Frequency of after-hours visits | | | | | |
| Compensation for after hours visits | | | | | |

Appendix A: Home Health and Hospice Employee Satisfaction Survey

| Categories | Very Dissatisfied | Dissatisfied | Neutral | Satisfied | Very Satisfied |
|--|-------------------|--------------|---------|-----------|----------------|
| Communication | | | | | |
| Opportunities to talk with administration | | | | | |
| Responses from administration | | | | | |
| Amount and quality of information received re: daily personal performance | | | | | |
| Amount and quality of information received re: annual evaluation and salary review | | | | | |
| Amount and quality of information received re: changes in personnel policies | | | | | |
| Amount and quality of information received re: Medicare regulations-changes and effect on your job | | | | | |
| Amount and quality of information received re: agency financial issues | | | | | |
| Response from administration re: suggestions/concerns | | | | | |
| Amount and quality of information received re: employee benefits (vacation, sick leave, mileage reimbursement, educational opportunities, health insurance, retirement plan) | | | | | |
| Working Conditions and Benefits | | | | | |
| Physical working conditions within your work area | | | | | |
| Mileage reimbursement | | | | | |
| Number of Agency in-services | | | | | |
| Quality of Agency in-services | | | | | |

Appendix A: Home Health and Hospice Employee Satisfaction Survey

| Categories | Very Dissatisfied | Dissatisfied | Neutral | Satisfied | Very Satisfied |
|---|-------------------|--------------|---------|-----------|----------------|
| Communication (continued) | | | | | |
| Number of educational opportunities outside the Agency | | | | | |
| Quality of educational opportunities outside the Agency | | | | | |
| Employee suggestion/concerns procedure | | | | | |
| On Call System | | | | | |
| Scheduling procedure | | | | | |
| Pager system | | | | | |
| Backup system | | | | | |
| Timeframe for being on call (length) | | | | | |
| Compensation for accepting "call" | | | | | |
| Available of other staff to make visits | | | | | |

Would you be interested in additional health insurance coverage for dental/vision/disability?

Yes No

Would you be interested if the premiums for this additional coverage were your responsibility?

Yes No

Do you feel that an employee Suggestion Box would be beneficial for the Agency?

Yes No

Additional Comments:

Signature (optional)

Date

Appendix B: Literature Review: Current Research in Home Care Recruitment and Retention

Anthony A, Milone-Nuzzo P. (2005). Factors attracting and keeping nurses in home care. *Home Healthcare Nurse* 23(6), 372, 377.

From the abstract: "The nursing shortage relates not only to recruiting nurses into the profession but also retaining nurses in practice. Although several studies have examined nurse retention in general, few have addressed retention as a home care issue. This descriptive study identifies factors that attracted nurses to home care and factors that contributed to job satisfaction and dissatisfaction in the state of Connecticut. These findings provide insights to home care agencies on issues that should be addressed to reduce turnover and improve retention in home care."

Brown, J. & Gershman, P. (2008). Recruitment and retention of speech-language pathologists: Putting home healthcare on the radar. *Home Healthcare Nurse* 26(3), 147-150.

From the abstract: "The problems that home health managers experience in hiring speech-language pathologists (SLPs) are not surprising. The surveys of the profession show that insufficient numbers of SLPs exist in the workforce to fill all the available positions. In competing with schools and other healthcare settings, home health recruiters also must overcome SLPs' lack of exposure to home health during their formative student experiences. This article provides some tips about where to find SLPs and how to excite them about home healthcare—and once having hired them, how to keep them."

Coogle, C., Parham, I., Jablonski, R., & Rachel, J. 2007. Enhanced care assistant training to address the workforce crisis in home care: Changes related to job satisfaction and career commitment. *Care Management Journals: The Journal of Long Term Home Health Care*, 8(2), 71-81.

From the abstract: "This article reports on the outcomes of a skills development training program offered to personal care attendants in home care. Research found that training increased the likelihood that workers would stay in their jobs, while changes to job satisfaction varied depending on the age group. Intrinsic job satisfaction for younger workers increased and that of older workers decreased."

Ellenbecker, C. (2004). A theoretical model of job retention for home health care nurses. *Journal of Advanced Nursing*, 47(3), 303-310.

From the abstract: "Predicted severe nursing shortages and an increasing demand for home health care services have made the retention of experienced, qualified nursing staff a priority for health care organizations. The purpose of this paper is to describe a theoretical model of job retention for home health care nurses. The theoretical model is an integration of the findings of empirical research related to intent to stay and retention, components of Neal's theory of home health care nursing practice and findings from earlier work to develop an instrument to measure home health care nurses' job satisfaction. The theoretical model identifies antecedents to job satisfaction of home health care nurses. The antecedents are intrinsic and

Appendix B: Literature Review: Current Research in Home Care Recruitment and Retention

extrinsic job characteristics. The model also proposes that job satisfaction is directly related to retention and indirectly related to retention through intent to stay. Individual nurse characteristics are indirectly related to retention through intent to stay. The individual characteristic of tenure is indirectly related to retention through autonomy, as an intrinsic characteristic of job satisfaction, and intent to stay. The proposed model can be used to guide research that explores gaps in knowledge about intent to stay and retention among home health care nurses.”

Ellenbecker, C., & Bylecke, J. (2005). Agencies make a difference in home healthcare nurses' job satisfaction. *Home Healthcare Nurse, 23(12), 777-786.*

From the abstract: “The purpose of this study was to explore the factors that contribute to variability in home healthcare nurses' job satisfaction. Nurses completed the 30-item Home Healthcare Nurses Job Satisfaction Scale specifically designed to measure job satisfaction of home healthcare nurses. Results suggest that the greatest amount of variability in satisfaction for home healthcare nurses are salary and benefits, stress and workload, and organizational factors, that is, factors over which organizations and management have the most control.”

Ellenbecker, C.H., Samia, L., Cushman, M.J. & Porell, F.W. (2007). Employer retention strategies and their effect on nurses' job satisfaction and intent to stay. *Home Health Care Services Quarterly, 26(1), 43 – 58*

From the abstract: “Faced with a nursing shortage and anticipated increase in demand, home care agencies are implementing retention strategies with little knowledge of their effectiveness. The purpose of this study is to describe the strategies implemented and their effect on nurse job satisfaction and intention to leave. Data were collected from a random sample of 123 New England agencies during in-person interviews. Most agencies reported implementing multiple recruitment and retention strategies. Regression results suggest that the effects of employer retention strategy on nurses' intent to stay are the indirect result of its effects on job satisfaction. The only retention intervention that made a statistically significant difference in job satisfaction was shared governance, and no retention strategy directly affected nurses' intention to stay in their jobs.”

Flynn, L. (2003). Agency characteristics most valued by home care nurses. *Home Healthcare Nurse, 21(12), 812-817.*

From the abstract: “The demand for home health services is expected to rise well into the 21st century as the population ages and the emphasis on community-based care increases. To satisfy future demand, the home care nursing workforce will have to double by 2020. This is a challenging prospect as the country is currently facing a nursing shortage of unprecedented proportions. One promising strategy for recruiting and retaining nurses is the magnet hospital approach, which focuses on creating a professional practice environment for nurses. This strategy has proven to increase hospital-based nurses' job satisfaction and retention as well as

Appendix B: Literature Review: Current Research in Home Care Recruitment and Retention

patient satisfaction and quality of care. To determine if a similar approach could benefit home care nurses, this mailed survey of 403 home care nurses (response rate 61 percent) asked respondents to list characteristics of home care organizations that they considered most important to their professional practice and satisfaction. Nurses responded with ten important traits including support for education, a knowledgeable and supportive manager and dedication to quality care. These traits, similar to those reported by hospital-based nurses in the magnet hospital studies, reflect many recognized components of a professional practice environment. These results may help home care administrators to build evidence-based strategies that are critical to improving home care nurse retention and meeting future demand.”

Froymovich, E. (2007). How managers can retain qualified in-home caregivers in a competitive job market. *Home Health Care Management & Practice, 19(3), 169-173.*

From the abstract: “This article addresses how home health care managers can improve employee retention at their respective agencies. The author’s recommendations include creating positive relationships and improving job satisfaction by giving clear guidance, fostering a team environment, rewarding achievement, responding to grievances, offering stress-relieving activities, and providing better wages, benefits, and opportunities for interaction and career advancement. “

Hayashi J., DeCherrie L., Ratner E., & Boling P.A. (2009). Workforce development in geriatric home care. *Clinics in Geriatric Medicine, 25(1), 109-120.*

From the abstract: “With the rapidly aging population, it is anticipated that within two decades several million more individuals in the United States with functional impairment and serious ill health will need home health care. This article discusses workforce development, which is a critical issue for future planning, as recently highlighted by the Institute of Medicine (IOM). Key aspects of recruitment, training, and retention of home care workers are discussed, including those who provide basic support for activities of daily living as well as a variety of skilled professionals: therapists, nurses, pharmacists, and physicians. Although the geriatric workforce shortage affects all care settings, it is especially critical in home health care, in part because we are starting with far too few clinicians to meet the medical needs of homebound elderly. A combination of actions is needed, including educational programs, such as those developed by the American Academy of Home Care Physicians (AAHCP), changes in financial incentives, and changes in the culture and practice of health care, to make the home the primary focus of care for these vulnerable, underserved individuals rather than an afterthought.”

Howes, C. (2005). Living wages and of retention of homecare workers in San Francisco. *Industrial Relations, 44(1), 139-163.*

Appendix B: Literature Review: Current Research in Home Care Recruitment and Retention

From the abstract: “This study records the impact on workforce retention of the nearly doubling of wages for homecare workers in San Francisco County over a 52-month period. Using descriptive statistics and logistic regression analysis the author finds that the annual retention rate of new providers rose from 39 percent to 74 percent following significant wage and benefit increases and that a \$1 increase in the wage rate from \$8 an hour—the national average wage for homecare—would increase retention by 17 percentage points. The author also shows that adding health insurance increases the retention rate by 21 percentage points.”

Morris, L. (2009). Quits and job changes among home care workers in Maine: The role of wages, hours, and benefits. *The Gerontologist*, Advance Access published on July 2, 2009.

From the abstract: “Figuring out how to make home care jobs more attractive has become a top policy priority. This study investigates the impact of wages, hours, and benefits on the retention of home care workers. Using a 2-wave survey design and a sample of home care workers from Maine, the factors associated with turnover intentions, actual turnover, and job-to-job transitions are examined. The analysis uses actual data on hours, wages, and benefits at current and subsequent jobs and controls for perceived rewards and work conditions, personal characteristics, and local labor market conditions. Although the analysis finds that improved work conditions and non-pecuniary rewards of home-based direct care work have significant negative effects on turnover intentions, compensation accounts for more actual job turnover. Higher wages, more hours, and travel cost reimbursement are found to be significantly associated with reduced turnover. Although wages and hours appear to have stronger effects, health benefits do appear to have some significance in predicting job-to-job transitions. Although improving compensation presents budgetary challenges to home care agencies, for this low-income workforce, the ability to earn higher wages and work more hours may be more of an imperative than improved work conditions.”

Smith-Stoner, M. & Markley, J. (2007). Home healthcare nurse recruitment and retention: Tips for retaining nurses: One state's experience. *Home Healthcare Nurse*. 25(3), 198-205.

From the abstract: “During March 2006, a series of statewide conferences was held to discuss home care outcomes, with a special emphasis on strategies for retaining home care nurses. Administrators and owners of home care agencies in one state with high staff retention and a low rate of turnover participated in four panel discussions to share best practices. The discussions were sponsored by TMF Health Quality Institute, the Quality Improvement Organization (QIO). In addition to practitioner panels, a review of the home care research literature on recruitment and retention was presented. This article is derived from the combined evidence shared during those meetings. The three most common strategies for retaining nursing staff were the use of case management or primary nursing, management participation in direct patient care, and open lines of communication.”