Recruiting & Retaining CNAs in a Changing Labor Market
About PHI—Quality Care Through Quality Jobs

PHI works with all LTSS stakeholders to improve the lives of people who need home or residential care by improving the lives of the workers who provide that care.
Public Policies & Workplace Practices

- Home Care
- Residential services
- PHI Quality Care through Quality Jobs
- Consumers and their families
- Gov’t agencies
- Direct care workers
- Provider associations
What is Your Annual CNA Turnover Rate?

Total # of CNAs employed in 2015 - # of CNA positions

# of CNA positions

- 0-15%
- 15-25%
- 25-50%
- >50%
What to Expect in this Session....

#1

You will have an understanding of the impact of current CNA demographic data on quality of care and quality of jobs.
What to Expect in this Session

#2 Learn how one Michigan nursing home is systemically addressing recruitment and retention
What to Expect in this Session

#3

Learn about evidence-based interventions that improve retention rates by building a culture of “quality care through quality jobs”
#1: The Demographics
Who are Michigan DCWs?

• 53% have some college or a degree
• 87% are women
• 27% are African-Americans
• 7% are foreign-born
• 47% rely on some form of public benefits—Medicaid, food stamps, Medicare, child care subsidies

Source: PHI Michigan, www.PHInational.org
Current MI CNA Registry Data

• 52,541 active CNAs are in the registry, lapsed CNAs on the registry 161,950
• Number who took the MI CNA test—10,036
• Number who passed the MI CNA test—8,450
• 28,929 CNAs needed to recertify last year
• 18,424 CNAs actually did recertify last year
• 63% retention rate of those eligible to be a CNA in Michigan at recertification

- All Occupations: 11%
- Nursing Assistant: 21%
- Home Health Aide: 48%
- Personal Care Aide: 21%
WalMart’s Compensation

- All entry jobs start at $10 an hour as of 2/2016
- All staff (full and part-time) earn paid time off, no waiting period to use
- Average current full-time wage for this retailer is $13.38 an hour; for part-time is $10.58 per hour.
- Carryover PTO both sick and vacation; pays out amounts over carryover in February
- Company contributes to 401K for all staff
## MI CNA Turnover: HCAM Surveys

<table>
<thead>
<tr>
<th>Year</th>
<th>Turnover</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>29.6%</td>
</tr>
<tr>
<td>2010</td>
<td>23.8%</td>
</tr>
<tr>
<td>2012</td>
<td>29.3%</td>
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<tr>
<td>2015</td>
<td>32.3%</td>
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</tbody>
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For full copy of the HCAM Wage and Turnover Survey Report of September 2016, contact Pat Anderson at HCAM or email info@HCAM.org
Making the Case for Quality Jobs

Lowest areas of CNA satisfaction are comparison of pay, assistance alleviating job stress, and care/concern of management

– National Research Corporation, 2012
Top Drivers of Nursing Home Employee Satisfaction...

• Wages and Benefits
• Job Demands (measured by ratio of nursing assistant hours per resident day)
• Feeling Respected
• Feeling Valued
• Relationship with Supervisor

http://gerontologist.oxfordjournals.org/content/49/5/611.long
Why Staff Satisfaction Matters

High Employee Satisfaction is linked to:

• Higher 5 star rating
• Higher resident and family satisfaction
• Improved care outcomes
• Fewer deficiencies
• Higher occupancy rates

Making the Case for Quality Jobs

When staff satisfaction is high
• Fewer resident falls
• Fewer pressure ulcers
• Lower use of catheters
• Reduced staff turnover
• Reduced absenteeism

— Nicholas Castle, 2007
#3: Evidence-based strategies

**Train supervisors**
- Skills to be learned
- Relationships with accountability
- Addresses why people leave

**Peer Mentors**
- A clear, defined purpose
- Specific skills training
- Monetary recognition

**Retention Specialist**
- Linkages to services
- Building skills
- The investment saves money
#3: Evidence-based strategies

**Wages and Benefits**
- Competition is no longer limited to health care
- You have to be competitive

**Recruiting Strategies**
- Fix your turnover FIRST
- Advertise for the what you want
- Change where and how you recruit
#3: Evidence Based Practices
IOM on Supervision

• Positive Supervision can greatly increase DCWs sense of value, job satisfaction, and intent to stay

• RNs and LPNs supervise CNAs yet few nurses have been afforded adequate supervisory training
WHY PEOPLE CHANGE JOBS

75% of workers who voluntarily left their jobs did so because of their bosses and not the position itself.

People don’t quit jobs, they quit bosses.

Coaching Supervision is a RELATIONAL approach
| S | O | L | E | M | P | R | O | B | L | E | M | S | K | I | L | D | D | E | V | E | L | O | P | E | M | E | N | T |
Coaching Supervision Outcomes

• Improved employee satisfaction
• Improved employee retention
• Improved clinical outcomes
• Decreased time spent managing complaints
• Decreased employee absenteeism
• Greater decision making between the resident and his/her CNA
Peer Mentoring: Compensation, Opportunity and Support
Relationships Are Complex

New Employee

Dietary  Social Work  Rehab
Housekeeping  Physicians
Nursing  Maintenance
Activities  Administration  Chaplain
Peer Mentoring Program

- New employee is paired with experienced, trained mentor
- Mentor builds immediate and ongoing relationship
- Mentor provides support, guidance, and sense of safety
- This strategy improves CNA retention by as much as 50%
Why Mentoring

Types of Issues Mentees Presented to Mentors:

• Working relationships
• Relieving Stress/Burnout
• Care
• Working Conditions
• Communication

## Mentoring Do’s and Don’ts

<table>
<thead>
<tr>
<th>DO</th>
<th>DO NOT DO THIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Openly post defined position</td>
<td>×  Hand pick mentors</td>
</tr>
<tr>
<td>✓ Provide mentor with training</td>
<td>×  Assume experience is adequate prep for role OR that buy in is automatic</td>
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<tr>
<td>and train the rest of the</td>
<td></td>
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<tr>
<td>organization</td>
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<tr>
<td>✓ Provide mentors support</td>
<td>×  Underestimate program supports</td>
</tr>
<tr>
<td>✓ Give pay increase</td>
<td>×  Expect to “do more for same pay”</td>
</tr>
<tr>
<td>✓ Mentor on the assignment</td>
<td>×  Teach employee the mentor’s assignment</td>
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<tr>
<td>the employee will have</td>
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Retention Specialist: How Do We Help Employees to Stay Employed?

With known supports and connection to community resources

OPEN
Mission and Vision of OPEN

**Mission**: To support the collaborative approach to enhancing the retention, recruitment and growth of entry-level employees in the health field.

**Vision**: To have a diverse, qualified and stable healthcare workforce where employees reach their full potential.
Reasons Why Employees Came to OPEN Retention Specialist

- attendance
- transportation
- housing
- finances
- depression
- family
- disability
- counseling
- time management
Statistics for Year 1 of OPEN
April 2004 – March 2005

• Employees Served for Support: 64

• Employees Trained: 132

• Total Served: 196
OPEN Year 1 Cost savings

• Training Cost: 
  $100.00-$1564.00 per person $66,589.00 total

• Interventions: 
  $3,000.00 per person $159,000.00 total 
*based on 83% retention rate

Total $225,589.00

• Employers Contributions: 
  $42,250.00/year

• Saved: 
  $183,339.00

• Grand Total Savings per employer : 
  $36,667.80
OPEN Year 2 Cost Savings

• Training Cost: $100.00-$1599.00 per person $56,124.96 total

• Interventions: $3,000.00 per person $378,000.00 total
  *Based on 83% retention rate

Total $434,124.96

• Employers Contributions: $48,250.00/year

• Saved: $385,874.96

• Grand Total Savings per employer : $48,234.37
Essential Element: Better Compensation

Higher wages leads to Higher retention

Lower wages leads to Lower retention
Recruit NEW People—the Last Step

• Plug the leaking bucket—improve your retention **FIRST**
• We have to stop sharing the same pool of workers within your community; your new hire is someone else’s turnover!
• Change your outreach to attract new people to CNA work
Be Intentional and Look for New CNAs When You are Served
Questions
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