



**Affinity**  
Health Services

*Senior Community Management  
and Consulting Services*

# **Recruitment and Retention: Current, Past and Future State of Affairs**

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# OBJECTIVES

- Identify the trends and patterns associated with employee turnover.
- Gain an understanding of staff empowerment and the importance of peer mentoring programs.
- Identify ways to coach and develop managers to improve recruitment and retention strategies.
- Discuss the impact of conflict.
- Learn how to use tools to aid in retention including job descriptions, code of conduct and exit Interviews.

# RECRUITMENT AND RETENTION PAST 1990'S

- **Summarizing our problems of the past**
  - United States Government Accounting Office (GAO) testimony released in 2001
    - 32% of nurse aides worked in nursing facilities
    - Turnover of nurse aides was between 40 to 100%
    - Study conducted in 12 chain organizations identified a turnover rate of 94%
    - From 1988 to 1998 employed C.N.A.'s increased by 40%
    - 1996 lowest number of increased growth in RN's ever reported at 5.4%
    - Enrollments in Nurse Diploma program dropped 42%, Associates program 11%, BSN 19% and Masters level 4%

# RECRUITMENT AND RETENTION PAST

## Government Attention

- Concerns about future supply
- Nurse and nurse aide shortages throughout the County
- Specifically nurse aides who provide the majority of the care in nursing facilities

## Additional Study Statistics

- 1999 Survey identified “critical shortages”
- 26 States established wage pass thru’s
- Michigan turnover 75% improved to 68% after wage pass through
- Kansas turnover 120% only improved to 116%

# 1990'S REASONS

## **Studies identified top eight reasons leading to turnover:**

- Inadequacy of training
- Methods to manage workload
- Lack of career advancement
- Organizational recognition
- Respect from Administrators
- Staffing Levels
- Clarity of roles
- Participation in decision making

# 2007 STUDY

## Eight years later

- More than 1/3 of nurses wanted to change their job
- Schools turned down 49,498 qualified applicants in 2008 according to American Association of Colleges of Nursing
- AHCA Study 51.5% turnover in certified nursing assistants, 50% RN and 36.4% LPN
- Research indicates turnover rates less than 30% in RN's and less than 40% in Direct Care Workers is associated with better Quality



# THE NUMBERS BY INDUSTRY TURNOVER 2012

- All 15.2%
  - Utilities 6.5%
  - Mfg/Distrib 12.8%
  - Not for Profit 15.2%
  - Bank/finance 16.5%
  - Insurances 10.8%
  - Services 15.6%
  - Hospitality 33.7%
- \*Health Care 15.7%
- \*Health Care ranks 6 out of 8
  - Hospitality highest
  - Utilities lowest

# WHAT'S CHANGED 1990'S TO PRESENT

- Culture Change/Staffing Levels
- Tuition Reimbursement
- Federal Efforts/State
  - Wage pass thrus
  - Expanded training in all area's – nurse certification programs
- Expanded Nursing Assistant Training Programs – Certified Nurse Aides
- Local Funding to advance training/retention
  - Workforce Investment Initiatives
  - Tuition forgiveness programs
  - Grants for training and recognition



# WHAT'S CHANGED

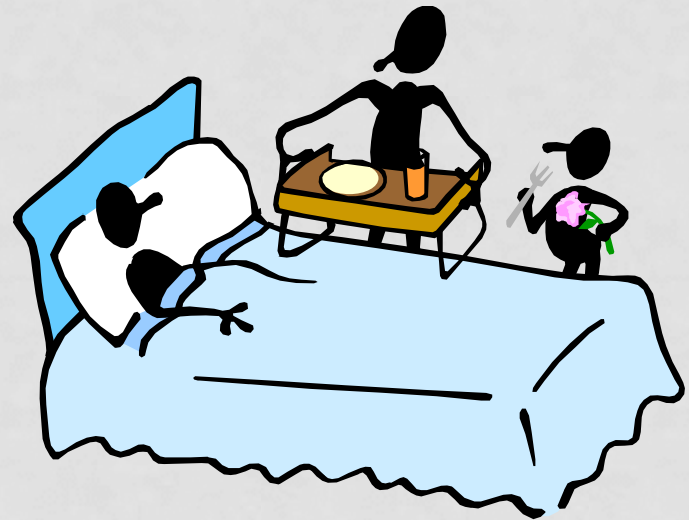
- American Health Care Association
- Nursing Hours Per Patient Day

- 2001 3.14

- 2011 3.63

100 beds – from 39.25 people per day to 45.375 per day

\$248,713 payroll only



# WHAT HASN'T

- **Studies continue to show**
  - Direct Care workers
    - Feel disrespected
    - Believe there are unrealistic expectations
    - Identify a lack of mentorship
    - Have home and personal responsibilities overshadow the job
    - Leave because employees view management as weak and they want strong leadership who give direction
    - Feel they have no opportunities for growth

# WHAT HASN'T

## 1990's why people leave

- Inadequacy of training
- Methods to manage workload
- Lack of career advancement
- Respect
- Staffing Levels
- Clarity of roles
- Participation in decision making
- Recognition

## 2012 why people leave

- Lack of mentorship
- Unrealistic expectations
- No opportunities for growth
- Feel Disrespected
- Management is weak
- Personal reasons overshadow work responsibilities

# UNDERSTANDING WHY EMPLOYEES LEAVE

## Why do people leave their jobs?

- Inadequate hiring decision
- Unclear understanding of the job
- Orientation/Mentoring
- Lack of support from senior employees
- Employer relations
- Personal Issues
- **Pay**

# HIRING DECISIONS

## **The Hiring Process**

- Who should be involved in making the hiring decision
- Be realistic about the position
- Match the person to the job requirements
- Multiple interviews
- Formulate in advance interview questions

# HIRING DECISIONS

## **Before the employment offer: Job Shadowing**

- Before the employment offer: Job Shadowing
- Help solve the “didn’t know what I signed up for” problem
  - Sign confidentiality agreement
  - No hands on care - just observation
  - Conduct another interview after the job shadowing with formulated questions



# HIRING DECISIONS

## **Behavioral Interviewing**

- Provides more objective information
- Provides insight
- More difficult to give answers that are false
- Typically structured with a set list of questions
- Many questions have multiple parts
- Guide to predicting future performance
- Assessment of employee attributes

# HIRING DECISIONS

## **Behavior Interviews Question Examples:**

- Tell me about a time when...
  - you had to deal with a difficult family
- Describe a situation when...
  - you had to witness resident abuse
- Give an example of a time when...
  - you had several staff call-offs and you couldn't replace them

# DEVELOPING BEHAVIOR QUESTIONS

<b>Weekend Nursing Supervisor Job Requirements</b>	<b>Behavior Questions</b>
Ability to respond to a physical plant emergency	Can you tell me about a time when you were in charge of a facility during a weather emergency? How did you determine the priorities? What did you learn from that experience?
Ability to effectively deal with customer service complaints	Give an example of a family complaint that you had encountered? What was the outcome? Would you have done anything differently?
Ability to supervise staff on multiple floors while overseeing that quality care is being delivered	Describe how you organize your day to be able to manage the staff and the resident care? What do you do if an unforeseen event occurs to disrupt the normal routine?

# HIRING DECISIONS

## **Performance Inventory Tests**

- Assessment instrument
- Predict performance
- Match the candidate to the position

# ORIENTATION

## First couple days

- Avoid the video tape trap
- Allow mentor to be a part of the first few days
- Meet all Department Managers if possible
- Introduce to the administrator and their direct supervisor
- Form the relationships up front
- Mentoring starts before hire date

**Let them know they have someone to talk to when having difficulties on the job**



# PEER MENTORING



- New hires are matched with experienced staff who possess the skills of a mentor
  - Leadership
  - Teaching/Coaching
  - Interpersonal
  - Communication
  - Problem solving
  - Reliability



# MENTORING SKILLS

- **Leadership**

- Motivates
- Positive attitude
- Role modeling
- Employees want strong leadership

- **Interpersonal/Communication**

- Can teach skills; hard to teach interpersonal skills
- Ability to listen and ask questions
- Listen with compassion
- Report objectively to supervisor
- Customer service oriented

# MENTORING SKILLS

- **Coaching ability**

- Assess skills and provide feedback
- Ability to complete the necessary paperwork for the employees orientation
- Patience and willingness to repeat tasks as necessary

- **Problem Solving**

- Ability to separate the emotions from the issue that needs to be addressed
- Avoid reacting
- Uses past successful experiences to find current solutions

# TRAINING THE MENTOR

- Mentor job description
- Train/review with the mentor the employee satisfaction surveys/exit interviews – why employees leave their jobs
- Gain their perspective about the strategies
- List strategies to avoid the same problems
- Develop forms for the mentor to document progress and training areas in need of further mentoring

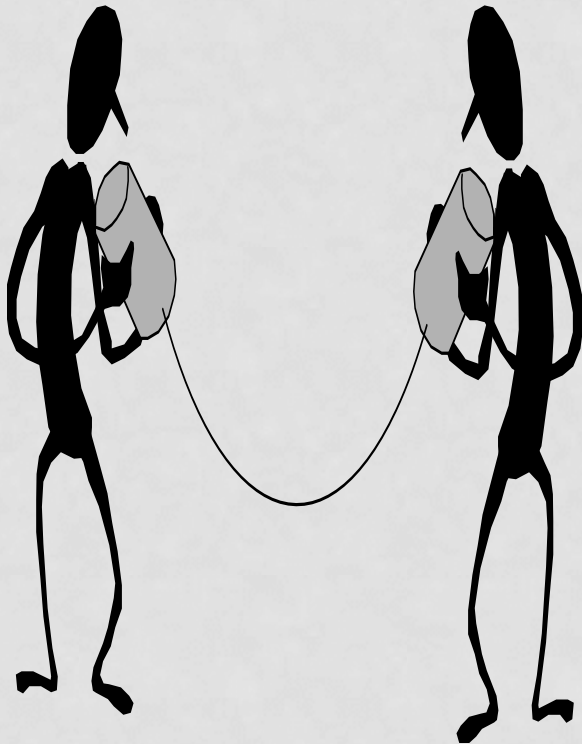
# MENTOR FOLLOW UP

- Meet with supervisor daily – continue to develop that relationship
- Document progress and area's covered
- Leave space for mentor to document items that need some additional training
- Provide time for the mentor and new employee to discuss the progress directly with supervisor
- Discuss senior employees not supporting the new hires
- Track success by keeping turnover records before and after mentoring program

# EMPLOYER RELATIONS

- Employees want strong leaders
- Build Trust – Keep promises
- The employer leadership style best practice is to avoid having to terminate good people
- Review your code of conduct in an attempt to minimize misunderstandings
- How many times do you review/train on key components of their job?
- Use of competencies
- Be honest
- Keep employees informed

# EMPLOYER RELATIONS



- Communicate Clearly
- Be involved – be out on the units
- Demonstrate support
- Respect is earned



# EMPLOYEE RELATIONS

- **Managing Conflict**
  - Don't avoid or not deal with conflict – problems fester and worsen
  - Conflict usually proceeds change
  - Conflict can result in a system or care improvements



# EMPLOYER RELATIONS

## **Provide Clarity**

- Job Description
- Employee Evaluations
- Code of Conduct
- Manage Change
- Communication/Memos
- Recognize Positive Actions and Results
- Meeting Agenda's - State of the Union

# MCKNIGHT'S THE GOOD NEWS FOR MANAGEMENT

- 82% report they look forward to coming to work
- 80% feel a strong loyalty
- 90% feel their making a difference in the world

# EVALUATE YOUR EXIT INTERVIEW DATA

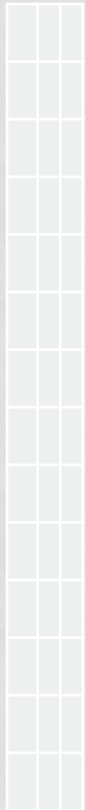
	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
Please check your level of satisfaction with each area below:				
Nature of the job				
Utilization of skill and experience				
Training and orientation				
Opportunities for advancement				
Pay				
Immediate supervisor: Name _____				
Company management				
Company policies				
Workload/Caseload				
Benefits program				
Overall facility, as a workplace				

# EXIT INTERVIEW

- If you marked dissatisfied or very dissatisfied for any of the categories, please explain: \_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_
- The main reason I am leaving this company is: \_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_
- If you are leaving to accept other employment, please list the new company's name, your position title, starting salary and any benefits you will be receiving not provided by Affinity Health Services, Inc. \_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_
- Please describe your relationship with your supervisor and how it could have been improved, if at all: \_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_
- Has our company and/or your supervisor provided enough recognition for your work achievements? If not, please describe how you would have preferred to have been recognized: \_\_\_\_\_  
• \_\_\_\_\_  
• \_\_\_\_\_
- Would you recommend this company as a place to work?  Yes  No If no, why? \_\_\_\_\_  
• \_\_\_\_\_

# PERFORMANCE EVALUATION TOOL

## JOB DESCRIPTION EVALUATION



Duties & Responsibilities	Rating	Comments
<p>General: 75%</p> <p>Assists the Director of Nursing Services in developing and establishing policies and procedures pertaining to all aspects of nursing service objectives.</p>		
<p>Reviews, revises and implements new policies and procedures.</p>		
<p>Reviews compliance with established policies and procedures by all nursing personnel and other related ancillary activities.</p>		
<p>Provides training to nursing personnel that is relevant to the current issues and latest trends to keep staff well informed and current on the latest developments</p>		





# COMPETENCY SKILLED CHECKLIST

Competency Skill List	Assessment Method					Performance	
	Education Only	Pre-Test	Post-Test	Demonstration	Return Demonstration	Satisfactory	Unsatisfactory
<b>Transfer Techniques;</b> a) 1-person assist b) 2-person assist c) Gait belts d) Assistive devices							
<b>Documentation;</b> a) ADL Books b) Intake/Output Record c) Food Intake Record d) Bowel Movement Record e) Behavior Record f) Care Tracker or ADL Coding							
<b>Communication Systems and Procedures;</b> a) Shift-to-Shift Report b) Resident Needs Communication Tools							
<b>Care of Resident in Transmission-Based Precautions;</b> a) Contact Precautions b) Droplet Precautions c) Airborne Precautions							

# REVISIT YOUR CODE OF CONDUCT

- Behavioral Guidelines and Expectations Include, but are not limited to:
- Treating all customers, visitors, family members, co-workers, and management team in a courteous manner, regardless of position or status within the organization. We will make ourselves accountable to one another for the manner in which we treat others and for the manner in which those around us are treated;
- Refraining from behavior or conduct that is offensive or undesirable and which is contrary to the organization's best interests;
- Maintain a work environment that is free from all forms of harassment, which may include but is not limited to; offensive comments, jokes, innuendos, or other verbal, graphic, or physical contact;
- Conform to the standards that govern our professions and exercise prudent judgment and objectivity in the performance of duties;
- Honor the organization's commitment to eliminating barriers to diversity, including but not limited to; age, gender, disability, race, creed, and national origin and participate in a positive way in promoting this commitment;
- Respect each other's opinions and any differences in opinion and respond to those differences in a calm and respectful manner. We will seek first to understand others' opinions and points of view in a professional and respectful manner. Report any differences in professional judgment to the appropriate management level for resolution in accordance with the organization's dispute resolution procedures;
- Exercise respectful communication with all others associated with the organization at all times. This includes but is not limited to; email communications, telephone communications, face-to-face communications, written communications, and any other type of communication that may occur during the course of your employment at our

# CODE OF CONDUCT

- Adhering to any and all work rules, policies, and procedures in place, including but not limited to: attendance, break times, meal times, smoking rules, dress code, etc.
- Refrain from offering to perform work or agreeing to perform work / service to residents or family members directly for compensation that is currently provided by the organization. This includes both during work time and non-work time. Any employee approached to perform work directly for compensation should report this to Management.
- Treat all customer information, employee information, and organizational business practices in a confidential manner. We will not disclose trade secrets or confidential information to those without a need to know regardless of employment status;
- Conduct ourselves with high ethical and moral standards, including but not limited to; honest and truthful documentation and communications without the existence of; falsification of records, reports, or information, stealing, destroying or defacing property or tools created or used within the realm of your job responsibilities, reporting to work under the influence of drugs or alcohol, engaging in any form of harassment, threats, or intimidation, etc.
- Refrain from threatening, retaliating, or intimidating residents, family members, visitors, coworkers, and/or other stakeholders for lodging complaints or grievances related to work performance.

# SUMMARY

- Regardless of the improved percentages of turnover, we still need exceptional direct care workers and we will continue that trend.
- Improvements in training is and has always been a continuous performance improvement process.
- Strong leadership is a must to aid in the retention of qualified direct care workers.
- Improvements in communication and outlining expectations can help in maintaining qualified staff.
- Monitor and analyze your exit interviews and turnover rates.



# Affinity

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