

2019 Guide

**McKnight's**

# Workforce Development

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Long-Term Care News & Senior Living

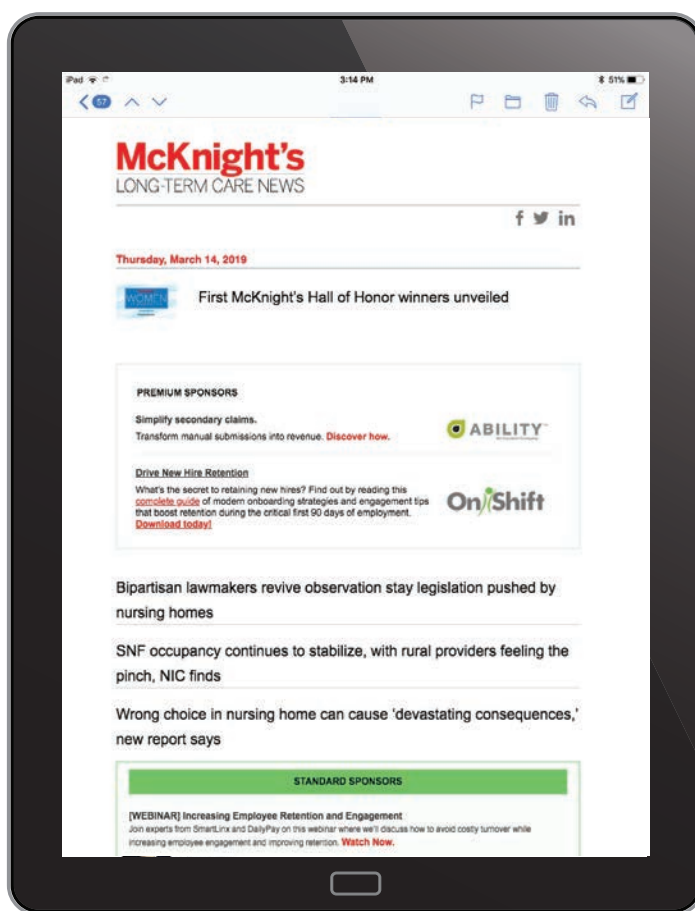
## The hunt is on for talent

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# FIRST THINGS FIRST

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# Historically low unemployment levels make it more difficult to find and keep qualified talent

By John Hall

**T**hanks to a robust economy, nearly every sector has benefitted from record low unemployment levels over the past year. The cruel irony for long-term care? While there are plenty of openings, there aren't enough qualified applicants to fill them.

The solutions are varied but the message is clear: There is a new sense of urgency to not only find people who love long-term care work, but do better at reminding them why.

Flat or declining enrollments in nursing programs over the past few years is a major culprit, according to Josh Heber, director of talent acquisition for Bronx-based Centers Health Care, which operates nearly 50 skilled nursing and rehabilitation facilities in New York, New Jersey, Rhode Island, Missouri and Kansas.

This comes at a time when there are more elderly seniors than ever to care for.

Susan Hildebrandt, vice president of Workforce Solutions for LeadingAge, attributes part of the gap to the public relations problem that continues to haunt the industry. "Aging services suffers from a general lack of awareness about the diverse opportunities that are available, as well as some negative stereotypes around employment in some care settings, particularly the nursing home," she says.

Wage pressures are another big question.

"Being able to support themselves with a living wage is a



Photo: pxeiff/E+/Getty Images Plus

Recruitment has changed, experts say, but too many providers are still relying on 'antiquated' methods.

basic need for caregivers," says Kathy Douglas, nurse leader and workforce strategist for ABILITY Network.

Hildebrandt notes the lack of "wage flexibility" in an industry controlled so tightly by Medicaid dollars is also sending qualified applicants to more attractively compensated positions in hospitals and other settings.

LeadingAge has joined other industry groups in making the issue of a living wage front and center in 2019.

"I can attest that nearly every provider is focused on coming up with solutions," Heber says. "Leadership development is also being noticed more and more as an integral piece of recruitment and, definitely, retention."

## Falling short

Experts agree it's constructive to do a little soul searching

on how effective the industry is responding to the current workforce crisis in long-term care.

"Clearly what is being done today is not working and we need to find new and innovative ways to solve this problem," Douglas says. "I think the numbers you see in the industry provide an inflection point. Are we going to just keep doing what we are doing?"

Some imply the industry is suffering a little shell shock and is overwhelmed by all of the "bad news" about the workforce.

"Associations and companies are investing a significant amount of resources to meet the challenges," Heber says. "There are a lot of positive results, but the general consensus is that this is an uphill battle with no light at the end of the tunnel just yet."

It doesn't help, for example, that regulations and red tape

are common causes for nursing homes to be disallowed from hosting their own CNA training and may inhibit schools from introducing and offering new programs, he adds.

"Collectively, challenges around workforce shortages, recruitment and retention are not being addressed as effectively as they could be," notes Lisa Fordyce, executive vice president of OnShift. "Providers often have competing priorities but addressing that most important issue could also help resolve the other challenges. If we invested as much energy into taking action and at least trying things out as we do talking about how to solve the workforce crisis, we'd be in much better shape."

For one, too many providers rely on antiquated recruitment methods, losing viable candidates because they don't follow up fast enough. Fordyce points



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to her company's Text2Hire app, which connects hiring managers with candidates using their preferred communication method while leveraging artificial intelligence engines to quickly follow up and book interviews.

"The 'post and pray' approach just isn't cutting it," Fordyce adds, urging the industry to capitalize more on new technology and social media tools available in sites like LinkedIn, Facebook and Snapchat, "which are not only great for showcasing life at your community but can be used to share job openings that reach your target audience."

Meanwhile some, such as Douglas, believe the industry should focus more on why employees are leaving in the first place.

"These are simply symptoms," she says. "We need to work on designing an environment and support system that encourages them to stay and empowers them to perform at higher levels. Employee engagement is a multipronged challenge and the most pressing challenge in long-term post-acute care today. Many organizations are only scratching the surface of how to solve it."

## What needs to happen

There's no shortage of great ideas.

"Every leader in the skilled nursing industry that I speak to has a novel idea they implemented or a unique program they are hoping to offer," says Heber. "We need to continue to come together as an industry and create and develop new ideas and solutions."

That's why organizations like LeadingAge don't subscribe to



Staff satisfaction surveys and team building are taking on new importance.

the "magic bullet" theory.

"Workforce development is complex and can be addressed with a variety of approaches," notes Robyn Stone, Ph.D., Senior Vice President of Research and co-director, LeadingAge LTSS Center @ UMass Boston. "Rather than limit ourselves to determining the 'best' solution, we are on a constant quest for resources, strategies and tactics that yield positive results."

## Ideas to consider:

*Address wage pressures head-on*  
The industry also needs to act faster on the wage issue. While a federal minimum wage hike isn't immediately apparent, there are ways to ensure nurses aides, for example, are paid faster. One approach, Fordyce says, is Instant Pay, a program now being successfully used by Walmart, McDonald's, Outback Steakhouse and Uber. Instant Pay is described as a "payment facilitator" that provides the ability to quickly process payments and deposit funds for services rendered. Fordyce says the program, and others like it, are becoming widely popular in

long-term care.

## Give the industry the facelift it deserves

Providers are still a long way from rehabilitating their image. There are powerful and compelling positives to nursing home and assisted living careers, experts argue.

The industry should "leverage our advantages, including the opportunity to make a difference in the lives of older adults," Hildebrandt says. "Our challenge is to be recognized as our own sector at the intersection of health, social care and senior living — rather than being viewed as a stepchild of the healthcare sector."

## Cast a wider net

Another recruitment approach that seems to be gaining traction: broadening the pipeline. Instead of focusing solely on full-time careers as an administrator, housekeeping supervisor, laundry tech or a bedside caregiver or nurse, providers would do well reaching out to "groups of individuals such as older workers, workers seeking part-time positions, men, vet-

erans, displaced workers, refugees, immigrants" and making them aware of these 'jobs of the future' opportunities, Hildebrandt says.

## Give employee engagement the priority it needs

For too long, long-term care providers have failed to treat employees as stakeholders. Millennials are now a dominant force and prioritize engagement. Some have said they'd accept a lower pay rate for a better experience.

"On the retention side, operators must figure out what makes their employees happy and feel valued and connected," says Fordyce, noting how employee engagement platforms with capabilities like new hire tracking, an automated points-based rewards system and staff satisfaction surveys will become increasingly important.

## Exploit new technology

Providers have to remember why employees feel called to work with seniors, Douglas adds. Yet they also must understand how automated workforce management and communication can make life better for everyone. Automating processes can ease friction.

"People are motivated to join healthcare because they want to help other people," she says. "When they are burdened with administrative challenges, weighed down by inefficient processes or unrecognized for the contributions they make, it sours them on why they chose this career. We need to build cultures that recognize and empower staff and leverage modern technology and automation." ■

# Slight pay gains for administrators, DONs

By Liza Berger

**A** red-hot economy. More competition from the acute-care sector. Higher resident acuity.

All of these factors, along with a leveling-off of salaries for leadership positions, have contributed to a situation that has allowed nurses — from staff nurses to lead certified nursing assistants — to command higher salary increases. By these and other measures, signs pointed to last year as the Year of the Nurse, according to experts reflecting on the 2018-19 “Nursing Home Salary & Benefits Report,” the largest annual survey of long-term care professionals.

The survey represents the 41st annual industry analysis from Hospital & Healthcare Compensation Services. Published by LeadingAge and supported by the American Health Care Association, the report features feedback from about 9,000 nursing homes across the United States. Responses totaled 1,494, resulting in a response rate of 16.7%.

Among all facilities that participated in the survey, administrators’ average salary grew 3.19% to \$110,000, while directors of nursing experienced a 2.34% rise to \$95,000.

But experts advise an even more accurate picture comes from looking at the same participating facilities year to year. With that data, administrators made 2.8% more in 2018 compared to 2017, rising to \$112,035.

Salaries among same-participant DONs expanded by 2.03% over a year, hitting \$93,092 in 2018.



Photo: Erik Isakson/Blend Images/Getty Images Plus

A nursing home administrator could hope to make \$110,000 in 2018, while directors of nursing saw their income rise to an average of \$95,000. That signified a \$10,000 increase for DONs over four years, the HCS report found.

## Nurse power

While there was noticeable growth among certain positions — admissions coordinators received a healthy average 3.77% increase in 2018 while directors of human resources received a 3.38% bump — the story of the past year is the salary numbers of nursing staff.

Salaries of staff nurses increased by 3.1% to \$28.36 per hour, while salaries of lead certified nurse aides climbed 3.18% to \$14.24 per hour.

It’s not surprising that nursing staff are doing well on the compensation front, says Anthony Perry, president of Executive Search Solutions, which focuses on recruitment in the senior living space. “You’re going to put the money where the pain points are to attract staff,” he says, noting that because California raised the staffing per patient day (PPD) standard overall, providers in that state

are increasing wages and offering sign-on bonuses in many cases to attract CNAs.

“At the same time, you’re seeing an increase in managed care patients, higher-acuity residents, shorter lengths of stay,” he adds. “Most centers are increasing nursing staff to address the higher acuity. All of these things create pain points for staffing for line staff.”

Don McDermott, president of D.G. McDermott Associates, a compensation firm, adds that competition continues to be fierce for low-wage workers.

“In terms of [frontline] nurses, there are just not enough of them,” he says.

At the same time, higher-level nurses are also in high demand because of their skill sets.

## Setting an example

Windsor Care Centers, a long-term care provider with 39 skilled nursing and assisted liv-

ing buildings in California and Arizona, offers nurse recruitment and retention programs that underscore the need for nursing employees. Just a few years ago, after examining its wage structure, it determined that its mean 2.3% to 2.6% wage increase “didn’t keep up with the Joneses across the street,” says Tim Lehner, chief operating officer of Windsor Care Centers.

The provider enacted a wage administration program so that employees can earn an additional wage increase each year based on the success of the facility. They can earn extra as a result of their efforts and the facility’s achievement on preset goals in main areas that include customer service, overtime, worker safety and survey. Success in each of these areas is worth a half-percentage point of their salary, and the employee can choose four of the five areas to pursue.

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Employees also can receive a quarterly bonus for coming to work on time with no unscheduled days off. To help make the program, known as the perfect attendance bonus, more attractive, the company was piloting it on a monthly basis in five facilities so that employees can be eligible for the equivalent of a day's pay every month.

The company, which also has an aggressive education and scholarship program to help employees become LVNs, RNs, CNAs and other positions, says that the programs "have not stepped up our game; they've completely changed our game," Lehner says.

"It's a tough market," points out Roy Bailey, director of talent acquisition for Windsor. "We can bring employees in, but we have to come up with programs that set ourselves apart from acute hospitals and other organizations that pay a lot more."

Windsor also has started using recruiters.

"These area recruiters will become marketers," Bailey says. "They'll be attending graduation ceremonies. They will be out in a community fostering relationships and promoting our scholarship program as well."

## Leadership strategies

The increase in demand for nurses has actually factored into the modest growth among salaries for leadership positions, such as administrators and DONs, Perry believes.

"The deterioration in margins that a lot of companies are experiencing due to increases in compensation for RNs and CNAs primarily, without the reimbursement to address it ... [has] slowed administrator and



Photo: John Merkle @ Eimhurst Park Place

**Retirement among baby boomers remains a concern for staffing leaders. Providers have to find a way to attract and mentor new talent, experts say.**

DON increases," he says. "That and the fact [administrator and DON salaries] have been on a faster clip the last couple of years, it's only natural you'd see companies take a breather and put their money where it's necessary and critical."

But as with efforts for nurses, organizations also are going out of their way to retain and attract new leadership talent, says Matt Leach, senior consultant with Total Compensation Solutions.

"I think we're seeing a lot of turnover due to retirements at the top of the houses," he notes. "What that leads to is organizations need to make sure they are offering a competitive market range in order to retain their current talent and attract new talent."

Many long-term care organizations are moving toward a formal incentive plan, he says.

"If they create a short-term incentive plan with predetermined goals and set payout amounts, they can share with executives in the success of the organization," Leach says.

Because of the competition

from the acute-care sector, long-term care has to be creative with best practices.

"They don't have the kind of money where they can compete with hospitals or some other organizations in the external market and they have to be smarter with their money," Leach says.

## Mixed turnover

Not surprisingly, turnover rates reflect trends in the C-suite and at the nursing level. Turnover among top-level executives edged up to 18.64% from 17.62% last year. Among nurses, turnover has fallen for the first time in three years.

Staff turnover for registered nurses landed at about 33.94% this year, a 1.75 percentage-point dip from last year, but up from the 29% mark in 2015. The turnover rate for licensed practical nurses also ticked down to 28.83% in nursing homes, compared to 30.77% in 2017.

Other signs of wage strength are actual and planned increases. In this area, the picture was slightly dimmer.

"One usually hopes to see a

positive increase for the upcoming year," says Rosanne Zabka, director of reports for the Hospital & Healthcare Compensation Service in late 2018. "It's not a drastic decrease, but it adds a few clouds to the otherwise sunny forecast."

Certain trends weigh on the industry. Minimum wage laws, for example, have been tough on certain areas of the country, Leach notes. This has created a compression issue where increased wages among workers are putting pressure on supervisors' pay. Minimum staffing requirements also have put pressure on providers to recruit additional workers.

Immigration reform and pay equity laws remain hot-button issues. Several states are evaluating legislation that protects employees on the basis of gender, ethnicity, race and national origin. That's worth watching, notes Paul Gavejian, managing director of Total Compensation Solutions.

"In terms of compensation of the rank and file, this is going to be an issue for quite some time now," he says. Places that have passed this type of law include California, Massachusetts, Oregon, Puerto Rico and Delaware.

Despite some of the continuing uncertainty regarding compensation in the field, there are encouraging developments. Facilities' move to implement compensation programs up and down the payroll is one of them.

Leach posits that more providers have better salary administration systems.

"They are implementing compensation policies that are able to save some money and bring many compensation features to the current century," he says. ■



# Assessing and growing the leadership team

Providers should start by evaluating staff strengths and finding different paths for improvement

By Kimberly Marselas

A change in leadership can be a pivotal moment in the life of a nursing home. But building a successful team doesn't necessarily mean replacing multiple department heads. Ideally, a new administrator or CEO will take the time to evaluate current staff strengths, set a clear path for improvements and communicate new goals through respected building champions.

"New leaders have to quickly assess where the organization is," says Lisa Thomson, chief strategy and marketing officer with Pathway Health Services. "Ask, 'Do I have the right people in the right roles?' Get down to the nitty-gritty, and look at their progress, their competencies and the programming."

This isn't a time for snap decisions. Instead, take the time to get to know employees across departments using both formal and informal strategies.

Generally, "staffing stays the same with minor tweaks," says Thomson, whose company offers a Leadership Environment and Assessment Diagnostic (LEAD) tool developed by long-term care expert Doug Olson, Ph.D. "Very rarely do we see they come in and wipe out the entire team. That's an old leadership style."

An organized evaluation will reveal areas where it might make more sense to replace or reposition an employee — especially if he or she resists new strategies.

"One bad apple spoils the whole dynamic," says Kris Mas-



Photo: skynesher/Getty Images Plus

Creating an organizational chart is one way to see if goals are being met. For example, determine if a director of nursing is wearing multiple hats, or if other staff members are being underused. Ask new hires about their skills.

trangelo, president and CEO of Harmony Healthcare International. "A highly competent team member with a negative attitude will disrupt the outcomes of the organization and drain unnecessary attention and energies."

To build a team that delivers desired results, consider these steps:

## Take time to evaluate

"Do not replace too quickly," Mastrangelo says. "Give the existing team time to adjust to the new leader and his or her style and expectations."

Her comments were echoed by Thomson, who says new leaders can lean on local provider associations, vendor partners and existing data to determine what's working and what can be improved. Ask the staff the same questions, and identify areas where professional development may be a better option

than whole-sale replacements.

"You want to know 'Where can I get the best value?'" Thomson points out.

## Look for mismatched skills

New leaders should start by taking a look at the dynamics of their team to assess roles and responsibilities, Mastrangelo says. If an organizational chart exists, examine whether on-the-ground realities align with stated goals.

For instance, is an assistant director of nursing functioning as the director? Find out why. Examine if staff members are being underused.

Talk to human resources about asking new hires — right down to CNAs and dietary staff — about any special skills and abilities they have.

As an interim operations leader, Thomson once asked her staff to take this approach. They unearthed a second-shift

maintenance worker who had been laid off from a computer engineering job. He went on to help the building design a new data strategy.

## Communicate changes

Thomson advises communication must be frequent and clear, portray the reason for any changes in staffing or strategies and help employees understand the impact those changes will have on their responsibilities.

In a building that has undergone several leadership or ownership changes, staff may be fatigued by changes due to "regulatory requirements" or the launching of new service lines. Use morning meetings to emphasize rationale, such as better serving residents.

"None of us can do it alone anymore," Thomson says. "Our department heads can help us deliver." ■

## In-house education delivers long-lasting results

By Kimberly Marselas

**T**urnover. Front-line staffing shortages. Relentless certification demands.

All skilled nursing providers face hiring challenges, but for some, on-site education and customized training programs are becoming invaluable recruitment and retention tools.

Whether creating a pool of certified nursing aides or giving nurses the knowledge they need to become savvy MDS coordinators, leaders can tap into a range of resources that let them attract the best candidates and build loyalty.

Relias partnered with Straightaway, for example, to develop a certified nursing aide training program that runs four to 12 weeks. Some entice enrollees with free tuition; others pay prospective employees to attend the training.

A powerful element of customized training is the ability to incorporate site visits, shadowing and lessons on company-specific expectations and initiatives, says Jan Wilson, director of learning design and outcomes for Relias. Broader, community college-based programs may not reveal the professional realities.

“You have some modicum of control over acclimation and culture training,” says Wilson, who has served as the education liaison to the American College of Health Care Administrators. “That lets people self-select so you don’t get new employees with stars in their eyes.”

Ramez Mikdashi, director of marketing at Straightaway, says most SNFs fill CNA vacan-



cies by giving other nurse aides overtime, hiring agency temps, recruiting from rival facilities or through community college and vocational programs.

“It is more cost-effective to run an in-house program that delivers new candidates than to pay overtime wages, agency fees, and/or expensive sign-on bonuses to new recruits,” he says. “By running in-house training courses, a SNF employer can be proactive in addressing expected shortages of nurse aides since it can now predict the number of workers it will develop for any given period.”

Straightaway’s offerings also include the ability for trainees to review classroom content online from home, leading to increased comprehension.

Creating a CNA pipeline can help with retention. Instead of watching employees leave quickly for other settings or

higher-paid nursing positions, Wilson says many providers who train are also creating incentive tracks that can be promoted during training.

While tuition reimbursement remains the golden standard for CNA and nurses who hope to advance in rank, the industry’s increasing emphasis on data is driving more providers to opt into MDS education platforms.

Training often is conducted through a third-party provider in conjunction with the American Association of Nurse Assessment Coordination. Although credentialed courses can be offered online or in classroom settings, students must typically sit for the exam on their own.

Relias offers its CMAC programming through about 30 course modules, each lasting between 35 and 40 minutes.

Friendship Village is the only continuing care retirement community in Illinois to have a comprehensive skills lab on site. It has a computer lab, classroom, and a bedroom and bathroom modeled after a residence, giving a sophisticated simulation environment for associates. To learn more, please see page 11.



Photos: Friendship Village

Students can complete work at their own pace; some companies may allow on-the-job training hours in support of an employee’s promotion.

According to Pathway Health Services, the MDS coordinator is the “most sought-after expert” in long-term care, with a 26% increase in the need for MDS-trained registered nurses through 2020.

Pathway’s Grow-Your-Own MDS program targets new nurses or those new to skilled nursing. It covers MDS basics with a five-day intensive classroom program. It sets the groundwork for Resident Assessment Coordinator certification.

“It’s a wonderful thing to be able to find someone and help them grow,” says Lisa Thomson, chief strategy and marketing officer for Pathway. ■



# Developing a succession plan takes great care

By Amy Novotney

A 2018 survey by Ziegler indicates an urgent need for succession planning within long-term care. Approximately 73% of senior living CEOs whose organizations were represented in the specialty investment bank's survey could be retiring within the next 10 years. Yet 65% of the organizations in the survey don't have formal, written succession plans in place for the CEO position.

Ziegler polled almost 145 senior living chief financial officers and financial professionals, 62% of whom were from single-site organizations and 38% of whom worked at multi-site organizations.

Having a succession plan is essential in the long-term care industry, given its care-oriented nature, management experts note. Having strong, solid leadership in place can be essential in an organization's efforts to maintain trust with residents and their families.

Dependability is a priority when caring for seniors, says Jon Sammons, director of Leader-Stat Premier.

"Any time a transition occurs at any level, there is always a potential for a loss in transfer of information," Sammons says. "The impact of this loss can have a major impact on the quality, service and experience for residents, so it is critical that leaders plan and partner with the new leader so the organization will continue to thrive."

The first step is communicating retirement plans early, allowing time for the organization,



Photo: <http://www.fotogestoeber.de/Stock/Getty Images Plus>

As executives consider leaving or possibly retiring, part of their legacy to the organization is handing over institutional knowledge. But they also must continue to develop relationships to help the transition remain smooth.

especially the board of directors, to prepare, he says.

"Depending on the level of the role, letting your company know sometimes even a year in advance of your impending retirement is a good guide," Sammons says.

Others suggest that good leaders should always have their departure in mind, keeping an eye out for talented employees who might be suited to take over when the time comes.

"One of the most important roles of a leader is to enable others to lead," says Mario McKenzie, a Charlotte, NC-based partner of CliftonLarsonAllen who specializes in succession planning for senior living executives. While executive hiring searches should always include outside candidates, passing the torch to someone internal can be an important step in maintaining an organization's culture.

"Taking the time to create

opportunities for different experiences in the organization will help people get out of their current mold and prepare them for bigger roles in the workplace," McKenzie says.

It's also important that executives and boards understand that the skill sets of the current leader may not be the ones needed by the person who will be leading the organization five years down the line.

"The future of healthcare indicates that we will need a much stronger link between operations and finances, and providers need to keep this in mind when making the investment in their leadership transitions," McKenzie says.

Once succession decisions have been made, preparing a proper handoff is another important element in retirement planning.

Leaders should start to take inventory of their roles, whether clinical or operational, and com-

pile the institutional knowledge that they have gained over the years.

"This information can be some of the most invaluable for a new leader coming in as a replacement," Sammons explains. If a leader is in the middle of survey preparations or planning for a new service line expansion, their bosses must manage more closely to understand what needs to be shared with other leaders and future replacements.

In preparation for the leadership change, clinicians should continue to strengthen their partnerships with fellow clinical leaders and physicians, including local hospitals. Administrators must assure their staff that the transition will be a smooth one, notes Sammons.

"Making sure that the organization is well-positioned from a leadership and process level is critical for a departing administrator," he says. ■

## ‘Ghosting’ emerges as latest labor challenge

By Amy Novotney

It used to be that “ghosting” was when a romantic prospect vanished after a few dates. But now ghosting has entered the job market, referring to applicants who blow off scheduled interviews or new hires who turn into no-shows.

Ghosting also may refer to employees, either newly hired or long-term, who simply never return to work, ignoring voice-mails, texts and emails and providing no reason for their absenteeism, says Kendra Nicastro, director of business development at LeaderStat.

National data on job ghosting is lacking, but companies around the world, including those in long-term care, say the behavior is on the rise. In fact, the Federal Reserve Bank of Chicago even included “job ghosting” in its latest Beige Book, which tracks employment trends.

The nation’s low unemployment rate is the cause of more ghosting, believes Donna Cutting, CEO and founder of Red Carpet Learning.

“People today are looking at jobs as a commodity — there are plenty available, so they’re not taking them seriously,” she says.

It’s a candidate’s job market, says Tommy Marzella, portfolio marketing manager at OnShift. He notes there are currently more than 65,000 open certified nursing assistant jobs on Indeed.com right now.

“Employees have more options and competition than ever before,” he says. “And employee expectations are on the rise, as they expect a quick,



Photo: mediaphotos/Stock/Getty Images Plus

Interviewing can feel like dating, especially when job applicants seem to be interested and then vanish into the ether.

simple application process. If the process takes too long, applicants could abandon the application, or if they do finish it, they might think your organization is outdated and inefficient.”

To avoid being ghosted, Cutting suggests that long-term care employers first establish what type of employee they want working in their facilities.

Write compelling job descriptions that sell the organization and the position, Marzella says. Communicate perks, and include employee testimonials. Companies should include a special section on their website for potential employees, providing information about the company’s mission, values and culture, Cutting adds.

“That’s going to attract a different caliber of candidates than just those looking to be in a job for now until the next best thing comes along,” Cutting says.

Nicastro recommends having an open and honest dialogue with candidates during the interview process, and discussing the candidate’s long-term career goals.

“Ask them to keep you updated on the other jobs they’re interviewing for, especially if they decide to go with another organization,” she advises.

Employers should be upfront with candidates about their hiring timeline and not “ghost” the candidate by never following up after the interview, even if they don’t plan to extend a job offer, Cutting adds.

It’s also important to make the interview, hiring and onboarding process efficient.

“If candidates are expected to meet with multiple people from several divisions, schedule the interviews in one or two visits, rather than spreading them out,” Nicastro says.

Once a candidate is hired,

agree on a quick start date if possible. The longer they wait to start, the more likely they may have second thoughts.

Nicastro also encourages employers to send new hires a “Welcome to the Team” note prior to their start date, and having their name badge and onboarding schedule ready for them when they arrive on the first day. If you have some company swag, such as a T-shirt or water bottle, create a welcome gift bag, Nicastro suggests.

In the end, it costs employers an average of \$4,425 and takes 35 days to hire a new employee, per a recent Society for Human Resource Management report.

“If a company is investing that much money to recruit new talent, taking some extra steps to make candidates — and even current employees — feel welcomed can drastically reduce the chance of being ghosted,”

Nicastro says. ■

# Better trained workforce may be key to field's biggest labor headache: retaining employees

By John Hall

**T**wo pieces of pending legislation target the issue of training and education in the long-term care sector.

The Nursing Home Workforce Quality Act (HR 1265) would give the Centers for Medicare & Medicaid Services greater flexibility in reinstating providers' certified nursing assistant training programs suspended by a 1987 OBRA rule. LeadingAge asserts that the decades-old lock-out provision runs counter to a nursing home's need to train key staff — something critical to building and maintaining a workforce pipeline.

Nate Glendening, administrator of LeadingAge member Prairie Wind Phillips County Retirement Center in Phillipsburg, KS, says 85% of the CNAs his facility has relied on have come from Prairie Wind's training program, which only recently was rebooted after a two-year ban.

"We've been paying overtime, and we've been dealing with burned-out staff," Glendening says.

The Geriatric Workforce Improvement Act (S. 299), meanwhile, provides grants to geriatric education centers to educate and train doctors, nurses, social workers and other healthcare professionals.

According to LeadingAge's Robyn Stone, Ph.D., the funding is "miniscule" relative to the growing demand and lack of supply across all professions and



Photo: asiseet/E+/Getty Images Plus

**Reinstating certified nursing assistant training programs and increasing grants to train physicians and nurses could go a long way toward solving the long-term care industry's labor crisis, many experts maintain.**

settings. While the bill focuses on the geriatric workforce, investments that are targeted specifically at the post-acute and long-term services and supports sectors are "crucial."

Bronx, NY-based Centers Health Care, which includes nearly 50 skilled nursing and rehabilitation facilities in New York, New Jersey, Rhode Island, Missouri and Kansas, hosts a free nurse aide training program on its campus to those interested in entering the nursing profession. There also are various states, regions and associations that provide scholarships to people willing to pursue a CNA certification or nursing degree.

Centers Health Care also was only one of 18 companies named as a "Best Places to Work" for 2019 by the Business Intelligence Group, an industry

awards program for businesses.

"We've had cases where a CNA employee who wanted to pursue their LPN was unable to because the local vocational school didn't have enough interest to fill a class," says Josh Heber, director of talent acquisition. "Then they have to wait for another program cycle or possibly travel an hour or more to another school. The chances of students pursuing a specific degree go down dramatically with each hurdle they face."

At Friendship Village, a continuing care retirement community in Schaumburg, IL, associates in early February opened their first skills lab. It is the only Illinois CCRC to have a comprehensive skills lab onsite, according to spokeswoman Wendy Foster. The lab is funded by Friendship Senior Options Foundation. It offers

a simulation environment for associates who provide hands-on care to residents, allowing the associates to be evaluated while they learn new skills, practice and review.

"We strive to promote life-long learning for both residents and associates," says manager Kate Garbarek. "The skills lab enhances the opportunities for associates to learn and improve different skills in order to always provide best practices."

Chris Petrik, manager of training and development, says the skills lab is also "an excellent" recruiting tool.

"People want to work here because they know that we are invested in their future," he explains. "The skills lab, which promotes continuing education, is proof that we're invested in the long-term future of the associates." ■





## MANAGER'S TOOLBOX: EMPLOYEE SCHEDULING

# Automating scheduling can increase satisfaction

By John Hall

**A**mid the dozens of culprits communities blame for sagging retention are ill-conceived and clunky employee scheduling systems and processes. But going beyond the scheduling basics with technology-enhanced employee engagement approaches is one of the more effective fixes to make, according to Mark Woodka, CEO of OnShift.

There are plenty of warning signs that a provider's scheduling is in need of repair, and spotting them can expose related issues as serious as poor resident care.

These include low employee satisfaction from being forced to work undesirable and unplanned shifts, increasing turnover, inefficiencies from time-wasting manual processes and rising labor costs.

Poor scheduling practices also can hurt a provider's Five-Star Rating.

"Many senior care organizations use paper schedules to manage their largest operating expense — labor," Woodka says. "Others use basic, generic scheduling systems that are sometimes packaged with a time-and-attendance system. These approaches are from the dinosaur era."

Woodka believes such practices present a myriad of challenges, one of which is the inability to consistently fill shifts. This leads to schedule gaps and sometimes "dangerous" understaffing situations that could put residents



By giving employees predictable and accessible schedules, performance improves, along with staff satisfaction.

at risk.

Paper-based processes also lead to inefficiency, overtime and staff burnout. These outdated practices can lead to greater reliance on agency workers and higher labor costs, further risking the quality of care.

Inconsistent schedules, limited visibility and ongoing chaos from shift-to-shift all frustrate employees. They rely on predictable, accessible schedules to make their lives as efficient as possible. When things go awry due to poor processes, the result is simple: employees quit.

### Automation boosts results

Today's staff want schedules that work for them, not the other way around, Woodka notes. Plus, scheduling demands are more assertive than ever.

One study of millennials found 74% want flexible work schedules and 88% want work-life balance.

"Giving staff the ability to easily pick-up shifts, manage their

work preferences and check their schedules from their phones are table stakes," Woodka says.

"The most effective solutions go beyond the scheduling basics. Not only are they purpose-built for senior care, but they also meet the needs of today's workers by focusing on engagement, feedback and recognition, which are critical to attracting and retaining today's workers."

Some solutions include:

- Consistently reward staff with an automated points-based system that tracks shift-based behaviors and other actions so they can be recognized — and incentivized — for working consistently and clocking in and out on time, for example. Many OnShift clients offer gift cards or days off in exchange for points, Woodka says.
- Automatically capture staff feedback and satisfaction while clearly communicating schedule changes, openings and updates with employee-

preferred methods, including text and mobile push notification.

By leveraging automation and artificial intelligence to help fill shifts, administrative burden is reduced. This means dramatically decreased costs and increased staff satisfaction.

One OnShift client reduced overtime 46% within four months while another nearly eliminated the use of expensive agency workers. What's more, employees are happier because they get instant gratification from their requested shifts.

"Many of our clients are boosting satisfaction, reducing turnover and controlling labor costs with our solutions," notes Woodka, highlighting how one senior care organization reduced turnover by 33%. "The key to their success was improved communication between managers and staff, greater staff satisfaction through rewards and feedback, and more flexible schedules." ■

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## MANAGER'S TOOLBOX: ENGAGING EMPLOYEES

# Engaging all systems: How providers can excel

By John Hall

**W**hat motivates most eldercare workers today is no different from those in other sectors of the economy. Unfortunately, their bosses are sometimes less responsive than others in sealing the deal. It is not an easily solved problem, but providers who master the art of engagement could slow or reverse turnover woes down the road, as one expert asserts.

There are warning signs aplenty when engagement efforts are weak or non-existent: Overall morale is down. Staff respond adversely to scheduling changes. Participation in training, staff meetings or facility events wanes. Worst of all — turnover rates increase.

Because the 21- to 37-year old millennial generation comprises the lion's share of the long-term care workforce today, lackluster engagement efforts — particularly around mobile technology — can wreak a host of problems.

“Engagement issues are exacerbated with millennials because they expect that technology will be in-place where they work,” says Kathy Douglas, nurse leader, workforce strategist for ABILITY Network. “They expect to be able to do work and communicate from their mobile phone.”

Douglas believes there's no more delaying new technology.

“In the past, providers could put off investments in technology,” she says. “Today, employees are



By focusing on the employee experience and upgrading technology, operators can gain more engaged employees.

demanding it. Adopting these kinds of new technologies not only addresses the expectations of millennials, it helps build a culture that supports engagement, collaboration and empowerment, which in turn drives staff satisfaction and decreases turnover.”

Why is it so difficult for facilities to get a better handle on staff engagement?

“More often than not, health-care leaders are overwhelmed with the demands of daily operations and fiscal responsibilities,” Douglas notes. “Lacking time to study and address systems and processes that are dragging them down, they can become trapped in old ways of doing things. Making the time to become informed about new tools and technologies available today can shed new light on ways to improve operations, drive employee engagement and better manage expenses.”

Ultimately, poor and misguided

efforts to engage with employees in a meaningful, productive way will result in increasingly poor morale, escalating scheduling difficulties, even poor quality resident care. The most devastating endgame is high turnover and, because of social media, greater difficulty recruiting new staff to fill the void.

### Best practices

Douglas believes employee engagement is the most pressing industry challenge today. Two steps to improve engagement:

*Upgrade and update all of your facility's technology.* Douglas believes automated workforce management and communication are at the heart of it all. This includes communication with managers and employees, empowering staff to be active participants in managing their work and life balance and being respectful of schedules.

“Automation eases the friction created by cumbersome, intrusive processes, such as after-hours calls to pick up shifts, that can feed resentment and fuel low engagement,” she says

*Focus on “the employee experience.”* A holistic approach examines how each employee can feel positive by the end of a work day or shift. This includes deliberate efforts around employee recognition, such as honoring those who go above and beyond for residents. It's also about respect and empowerment, she adds.

“By putting the employee at the center of your model of care alongside the patient, you are elevating the importance of the employee experience and in turn, the patient experience,” Douglas explains. “By unlocking the power of the employee experience, we may be well on our way to solving many of the challenges that long-term care faces today.” ■

MANAGER'S TOOLBOX:  
ENGAGING EMPLOYEES



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## MANAGER'S TOOLBOX: OPTIMIZING EMPLOYEE TRAINING

# Online courses can be short, sweet and effective in retaining eager employees who want to grow

By Amy Novotney

**M**ore than any other generation, members of the 21- to 37-year old millennial labor pool — which comprises the largest share of the long-term care workforce today — say opportunities to learn and grow are extremely important to them when applying for a job, according to a recent Gallup poll.

Taking steps to ensure that effective continuous employee learning is in place can be one of a long-term care employer's most effective tools for reducing turnover, explains Chief Nursing Officer of Medline Industries Martie Moore, RN, MAOM, CPHQ.

“Knowledge-creating companies are attractive to today's workforce,” says Moore, who has helped develop courses for Medline University, which provides online education and training for long-term care and other healthcare employers. “Employees today feel that if an employer is willing to invest in them by helping them grow and learn, then they care about them, and the employee is more likely to stay, as opposed to being enticed away.”

Professional development can be gained through online employee learning systems. Digital learning allows busy nurses and other healthcare staff to stay on top of industry trends, the newest evidence-based practices, and com-



Photos: Hero Images/Getty Images Plus

Digital learning can let nurses, administrators and others stay up-to-date on regulations and best practices.

plete professional requirements.

In addition, because e-learning allows users to work at their own pace, online courses can be completed in only 40% to 60% of the time that a traditional class would require, according to a study by the Brandon-Hall Group, a human resources firm.

The best online learning platforms are based on the latest evidence on the most effective ways to adapt teaching for adult learners, Moore says. That means the lessons are interactive and include short sound bites that people will remember and apply in their daily practice. They also include a pre-screen and a post-test to ascertain knowledge gaps and assess learning gained. Being able to automatically track employee progress through a course, map the training against skill improvement and generate workforce training

reports are also tools for today's employee learning management systems.

“A good chunk of online healthcare courses are designed to support competencies and the determination of competencies, so you have to be able to show individual knowledge gained,” she says.

Many of Medline University's courses are broken down into shorter learning components that build upon one another, to take advantage of the fact research that suggests the attention span for an online learning courses is 20 to 30 minutes, Moore notes.

For example, the platform's skin health online learning courses are designed for unlicensed and licensed long-term care professionals, as well as administrators. They include short modules on the anatomy and physiology of the

skin; how nutrition, malnutrition and hydration all play a role in the skin's health, and what to do when the skin becomes unhealthy. Each module builds on knowledge gained in the previous lessons. They are designed to be completed over the course of several weeks as an employee's time allows, as opposed to all at once, Moore says.

Medline University's leadership development courses are popular among post-acute care administrators, as a way to help them keep updated.

“Our leadership courses are really focused on helping post-acute leaders gain the skills, tools and abilities that they need at their fingertips to be adaptive and nimble in understanding what lies ahead of their organizations as we move fast into value-based reimbursement,” Moore says. ■

**MANAGER'S TOOLBOX:  
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# Guardian Pharmacy Services

## Company Profile

Guardian Pharmacy Services is one of the fastest-growing long-term care pharmacy companies in the U.S., providing a wide range of services to assisted living communities, skilled nursing homes, CCRCs and behavioral health groups through our national network of pharmacies.

We conduct business according to the Golden Rule, treating our customers, residents and each other fairly and honestly. Guardian's commitment to excellence and to provide outstanding customer service defines our corporate character and inspires us every day.

## What We Do

Guardian pharmacies work hard to understand each customer and the specific needs of their community. We develop meaningful relationships with community staff, residents and families to create fine-tuned, customized pharmacy solutions that ensure safety, accuracy and resident satisfaction.

## Our Mission

Guardian aims to personally empower our customers with the resources they need to provide the best service to their residents. We maintain the highest level of service and sensitivity required to meet the individualized needs of each community.

## The Guardian Way

Guardian Pharmacy Services has a unique business model that allows us to offer both the personalized services of a local pharmacy and the resources of a large corporation.

Each Guardian Pharmacy is vested with ownership and the authority to make day-to-day decisions at the local level. Assisting our pharmacies is the corporate Guardian Pharmacy Services team in Atlanta, who provide support in areas such as Accounting, IT, Recruiting, etc. This support allows the local pharmacy team to focus on customers and the specific needs of their market.

We believe this business approach leads to better customer service, greater accuracy, and efficiency of medication distribution.

## FastFacts



**Website:** [www.guardianpharmacy.net](http://www.guardianpharmacy.net)

**Phone:** (888) 535-4779

**Email:** [answers@guardianpharmacy.net](mailto:answers@guardianpharmacy.net)

**Address:** 171 17th Street, Suite 1400, Atlanta, GA 30309

**Date founded:** 2004

**Presence:** Guardian Pharmacy Services is based out of Atlanta, GA and currently has 29 pharmacy locations that serve nearly 90,000 patients across 20 states.

## What We Offer

### Clinical Support

Guardian streamlines processes and helps integrate multiple eMAR/eHAR technologies to make sure medication management is efficient and error-free.

Our pharmacies regularly meet with community staff through on-site visits, and host continuing education and training courses to help lower the risk of medication error and enhance the level of resident care.

### Simplified Billing

Medication billing can be challenging for any long-term care provider, but it doesn't have to be. All billing, dispensing, consulting and customer service are handled by the local pharmacy, not from a remote hub — no frustrating 800 numbers.

We educate residents and families on Medicare Part D plans that best fit their needs and help reduce costs. From pre-authorizations and noncovered medications to the "donut hole," our local experts take the extra steps and make the extra time to ensure there are no billing issues or questions.

### Seamless Pharmacy Transition

Guardian offers hands-on support to new customers making a pharmacy switch. We work hard to ease the transition process by coordinating timelines that reduce burden on the community and save staff time.



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