Challenges in Home Health Staffing

Gina Balkus, CEO
Home Care Association of NH
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Governor’s Commission on Healthcare Workforce Shortages
New Hampshire’s Home Care Agencies Provide a Wide Range of Services

- **Skilled Nursing** and **Rehabilitative Care** to people recovering from an illness or injury, or who have a chronic disease.
- **Complex Care** to people with critical and continuing medical needs.
- **Hospice Care** to people who are near the end of life.
- **Long Term Services and Supports** to people who need assistance to live independently in their homes or who are at risk.
  - Medical care
  - Personal Care: bathing, grooming, medication reminders, homemaking services
- **Private Duty Care** to people who need non-medical assistance or companionship to live independently in their homes.
A Quick Look at Home Care in NH

- HCANH = 38 member agencies
- 4,400 employees
- 1,081,006 Care Visits
- 46,586 Clients Served
- 18,567,314 Miles Logged

- Home Care Agencies Employ
  - RNs and LPNs
  - Physical Therapists
  - Occupational Therapists
  - Speech/Language Pathologists
  - Social Workers
  - Licensed Nursing Assistants
  - Personal Care Service Providers
  - Homemakers
Who Pays for Home Care?

• Over 80% of home care services are covered by Medicare or Medicaid.

• Fees are set by the federal or state government and, in many instances, do cover the cost of care.

• Inadequate reimbursement impacts salaries and wages.

• Medicare
  • Intermittent skilled care
  • Hospice care

• Medicaid
  • Intermittent skilled care
  • Critical Care (aka “Medicaid Private Duty Nursing”)
  • Hospice care
  • Long Term Care – Choices for Independence (CFI); Adult In-Home Care

• VA
  • Range of services based on geography

• Commercial Health Insurance
  • Intermittent skilled care

• Self-Pay & Long Term Care Insurance
  • “Private Duty” Assistance/Companionship
# Home Care Hourly Wage Ranges

February 2016

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Wage Range</th>
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<tbody>
<tr>
<td>RN (BSN)</td>
<td>$25.69 - $32.20</td>
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<tr>
<td>LPN</td>
<td>$18.68 - $24.27</td>
</tr>
<tr>
<td>PT</td>
<td>$31.78 - $40.45</td>
</tr>
<tr>
<td>OT</td>
<td>$31.75 - $40.30</td>
</tr>
<tr>
<td>ST</td>
<td>$33.20 - $42.71</td>
</tr>
<tr>
<td>LNA</td>
<td>$11.41 - $16.07</td>
</tr>
<tr>
<td>PCSP</td>
<td>$ 9.59 - $12.02</td>
</tr>
</tbody>
</table>
Staffing Challenges

- Home Care clinicians must have:
  - the confidence and competence to work independently
  - exceptional clinical skills
  - strong computer and documentation skills
  - a willingness to travel long distances to unpredictable settings in all weather conditions

- Highly regulated industry

- Unpredictable census fluctuations; need for “per diem” staff

- Aging workforce
Home Health Vacancy Rates
July 11 – 17, 2016 -- Responses from 25 agencies

• **Staffed Positions**
  - RNs 9% vacancy – 73 vacant positions (1825 missed visits/week)
  - LPNs 10% vacancy
  - PTs 12% vacancy – 25 vacant positions
  - OTs 8% vacancy
  - STs 42% vacancy – 6 vacant positions
  - LNAs 7% vacancy
  - PCSPs 10% vacancy
Home Health Staff Needed
July 11 – 17, 2016

• Per Diem Positions
  • RNs – 63 FTEs needed – 49% more than current staffing
  • PTs – 26 FTEs needed – 59% more
  • OTs – 17 FTEs needed – 65% more
  • LNAs – 159 FTEs needed – 22% more
  • PCSPs – 104 FTs needed -- 21%
Home Health Staff Turnover Rates
July 1, 2015 – June 30, 2016

• All employees – 13%
• RNs – 20%
• LNAs – 18%

• Home health agencies are constantly recruiting
• RNs are attracted by higher pay, better benefits, settings with greater clinical support
• LNAs and PCSPs will often change jobs for small increases in wages
• Retention strategies: better training, longer orientation period, effective preceptor programs
Workforce Challenges for New Hampshire

• The aging population will require more home-based services.
• Without an adequate workforce, care may not be delivered in a timely manner, or at the level of services desired.
• Some fragile people may require longer stays in hospitals and SNFs due to insufficient home health capacity.
• Family caregivers may have negative impacts on their own jobs.
• As agencies strive to pay competitive wages, the cost of care increases. Government reimbursement needs to keep pace.
• Academic institutions need to better prepare students for home and community-based settings.
Questions?

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