STAFFING IN THE LONG-TERM CARE WORLD

UNIVERSITY OF MISSOURI QIPMO Program

MARK FRANCIS, MS, LNHA

LEADERSHIP COACH

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AGENDA

- What was CMS thinking??!! The regulations
- Tips on recruiting staff (How to get em)
- Tips on growing staff (How to keep em)

- What did the man have for breakfast while he was vacationing on the beach in California?

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A San Diego!

A sandy Eggo!!

GET IT???

DAD JOKE

Why do fathers take an extra pair of socks when they go golfing?

DAD JOKE

- In case they get a hole in one!

DAD JOKE

WHAT DO TIGERS HAVE THAT NO OTHER ANIMALS HAVE?

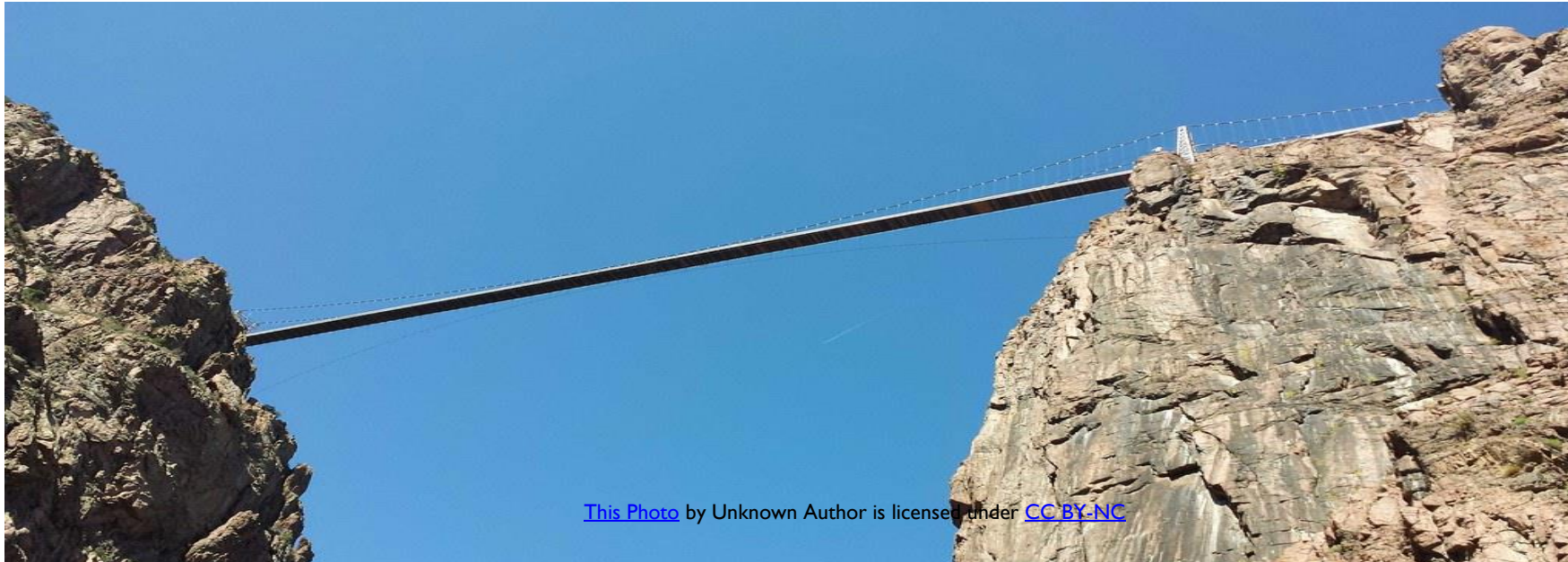# BABY TIGERS!!

REGULATIONS

Reality: Are they breathing? Yes. HIRE THEM!!!!!

Goal: Take down that help-wanted sign, we have plenty of staff.

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REGULATIONS

Staffing Requirements

- Minimum 3.48 total nurse staff HPRD
  - Can include NAs, RNs & LPNs
- Specific minimum 0.55 RN HPRD
- Specific minimum 2.45 NA HPRD
- RN onsite 24/7
- DON now counts for 24/7 & 0.55 HPRD if available to provide direct resident care

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REGULATIONS

	Urban Areas		Rural Areas	
Facility Assessment	90 Days after publication of final rule	Thursday, August 8, 2024	90 Days after publication of final rule	Thursday, August 8, 2024
3.48 HPRD and 24/7 RN requirement	2 years after publication of final rule	Sunday, May 10, 2026	3 years after publication of final rule	Monday, May 10, 2027
0.55 RN and 2.45 NA HPRD	3 years after publication of final rule	Monday, May 10, 2027	5 years after publication of final rule	Thursday, May 10, 2029

REGULATIONS

Urban/Rural

A Metro area contains a core urban area of 50,000 or more population, and a Micro area contains an urban core of at least 10,000 (but less than 50,000) population. All counties that are not part of a Metropolitan Statistical Area (MSA) are considered rural.

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REGULATIONS

2 options for 24/7 RN Requirement

- Existing statutory RN waiver for rural, subject to annual review

  - New hardship exemption requires extensive criteria. Local workforce must be 20% below national average, good faith efforts to hire, demonstrated financial commitment

  - Excluded: SFF, no PBJ submission, or certain citations within past 12 months

  - Appears that facility cannot request, requires evaluation during survey

  - Exemption relieves 8 hours per 24

  - If no RN onsite must have immediate phone access

  - Exemption expires at next standard recertification survey

  - CMS believes 25% will meet

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REGULATIONS

HPRD Requirements

– Requires facility to be found noncompliant

– Extensive eligibility and exclusion criteria

- Local workforce must be 20% below national average, good faith efforts to hire, demonstrated financial commitment

– Excluded: SFF, no PBJ submission, or certain citations within past 12 months

– Appears that facility cannot request, requires evaluation during survey

– Exemption expires at next standard recertification survey

– CMS believes 25% will meet

REGULATIONS

Facility Assessments

- Implementation date: 90 days
- Added facility must solicit and consider input from residents and family
  - Use evidence-based data driven methods
  - Active involvement of direct care staff and their representatives
  - Develop and maintain plan to maximize direct care staff recruitment and retention
  - Inform contingency plan for non-emergency events (availability of direct care nurse staffing or other resources needed for resident care)

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REGULATIONS

Compliance Assessment & Penalties

- Details not available now

- CMS will publish before implementation dates of each component

- CMS envisions using a combination of PBJ data and onsite surveys to assess compliance

REGULATIONS

Medicaid Transparency Reporting

- States must report % of Medicaid payments spent on direct care and support staff

- Apply regardless of FFS or managed care system

- Consistent with HCBS requirements

- Implementation in 4 years

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HARDSHIP EXEMPTION - CRITERIA

- The following **three criteria** must be met for a facility to qualify for an exemption:
  - The workforce is 'unavailable' - as measured by having a nursing workforce that is a *minimum of 20% below the national average* for the applicable nurse staffing type (calculated using the Bureau of Labor Statistics (BLS) and Census Bureau data).
    - Facilities may qualify for an exemption from one, two, or all three of the requirements (combined HPRD, RN HRPD, and/or NA HPRD).
  - The facility makes a good faith effort to hire and retain staff. Good faith efforts include- offering at least prevailing wages, to recruit and retain appropriate personnel. Evidence of this would be through job postings, vacant positions, and wage comparisons.
  - The facility documents its financial commitment to staffing. Facilities will need to provide information on how much they expend on nurse staffing relative to revenue.

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HARDSHIP EXEMPTIONS- NOTIFICATIONS

- The facility must *post its exemption status* in a prominent, publicly viewable location that is easy to understand, for all residents.

- The facility must *inform each current and prospective resident, along with the Office of the State Long-Term Care Ombudsman* of its exemption status and the degree to which it is not in compliance with the HPRD requirements.

- The list of facilities that are granted an exemption from this rule and the extent to which they each do not fulfill the requirements will be posted on Care Compare. Note that exemptions remain in place only until the next standard survey.
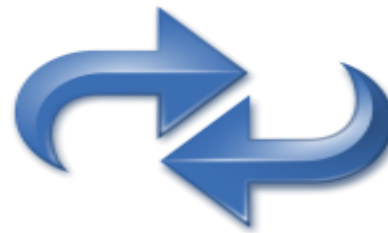
EXCEPTIONS TO THE HARDSHIP EXEMPTION

- The following facilities are **not eligible to receive an exemption**:

- (1) facilities that failed to submit PBJ data according to re-designated § 483.70(p);

- (2) facilities that have Special Focus Facility (SFF) designation;

- (3) facilities cited for widespread insufficient staffing with resultant resident actual harm or a pattern of insufficient staffing with resultant resident actual harm, as determined by CMS;

- ***OR***

- (4) facilities cited at the "immediate jeopardy" level of severity with respect to insufficient staffing in the 12 months preceding the survey where the facility's non-compliance is identified.

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"SUBJECT TO CHANGE"

Helpful Legislative Activity

- S. 3410H.R. 7513 Protecting America's Seniors' Access to Care Act

- S. 3841 Requires VA to study risks to elderly vets

- Legal action

- Bipartisan Letters Against the Proposed Staffing Mandate

- Congressional Resolution

RECRUITING

It's all about relationships!!

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RECRUITING

It's all about relationships!!

High schools:

- Recruit for entry-level positions.

- These young people often have a long-term goal of additional training for more skills/responsibility.

- Work with their existing health care career focus or help them start something.

- Utilize students for volunteer positions as well as paid staff.

Health Care Career Opportunities

RECRUITING

It's all about relationships!!

Nursing schools:

- Offer part-time employment for students.

- Offer your facility as a clinical rotation site for nursing students.

- Ask if you can make a presentation to their students about your home or long-term care in general.

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RECRUITING

It's all about relationships!!

CNA training programs:

- Similar to nursing schools, offer part-time positions and for your facility as a site to do their clinical hours.

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RECRUITING

It's all about relationships!!

Additional training for your existing staff:

- This is a great way to reward your best employees and funnel them into positions of greater responsibility. For example, some facilities pay for nursing school for existing staff who show good work ethic and leadership potential.

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RECRUITING

- Be as flexible as possible. Offer options such as shorter shifts, part-time hours and PRN positions (with no benefits but higher pay).

- Talk with your existing staff and new recruits about changes that would make them want to stay and/or be a part of your home.

- The key to all of these potential opportunities: **BUILD AND CULTIVATE LONG-TERM RELATIONSHIPS!**

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RECRUITING

Advertising:

- Use specific job search sites to advertise for applicants

- Take advantage of any/all social media to attract attention to your home and what you do. If you are not familiar with social media sites, talk with your existing staff who are and get their help in using these tools.

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RECRUITING

Job applicants:

- Allow potential employees to do their application online. Some organizations even start the interview process online.

- **Key point:** Make sure you have a designated person and process to respond to all types of electronic communication **very quickly.** If you don't respond within hours (maybe minutes), you will lose a potential hire to someone else.

RECRUITING

Key takeaways:

1. Build strong relationships with many different individuals and organizations who can send you potential staff.

2. Don't be afraid to use technology, especially social media to attract and hire. If you aren't personally knowledgeable about this, find a staff member who is and get their help.

KEY POINTS

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RETAINING STAFF

Now that you got em, how are you going to keep em?

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LEADERSHIP

- **The essential for Success is _____**

LEADERSHIP

- **The essential for Success is Improvement**

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LEADERSHIP

- The essential for Success is Improvement

- **The essential for Improvement is_____**

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LEADERSHIP

- The essential for Success is Improvement

- **The essential for Improvement is Learning**

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LEADERSHIP

- The essential for Success is Improvement
- The essential for Improvement is Learning
- **The essential for Learning is _____**

LEADERSHIP

- The essential for Success is Improvement
- The essential for Improvement is Learning
- **The essential for Learning is Curiosity**

LEADERSHIP

- The essential for Success is Improvement

- The essential for Improvement is Learning

- The essential for Learning is Curiosity

- **The essential for Curiosity is _____**

LEADERSHIP

- The essential for Success is Improvement
- The essential for Improvement is Learning
- The essential for Learning is Curiosity
- **The essential for Curiosity is Humility**

Humility

is not thinking less of yourself
but thinking of yourself less
- CS Lewis

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GROWTH/LEARNING

Agree/Disagree

Teaching someone is the same as helping them learn

GROWTH/LEARNING

LEARNING IS NOT THE PRODUCT OF TEACHING.

LEARNING IS THE PRODUCT OF THE ACTIVITY OF LEARNERS.

~ John Holt

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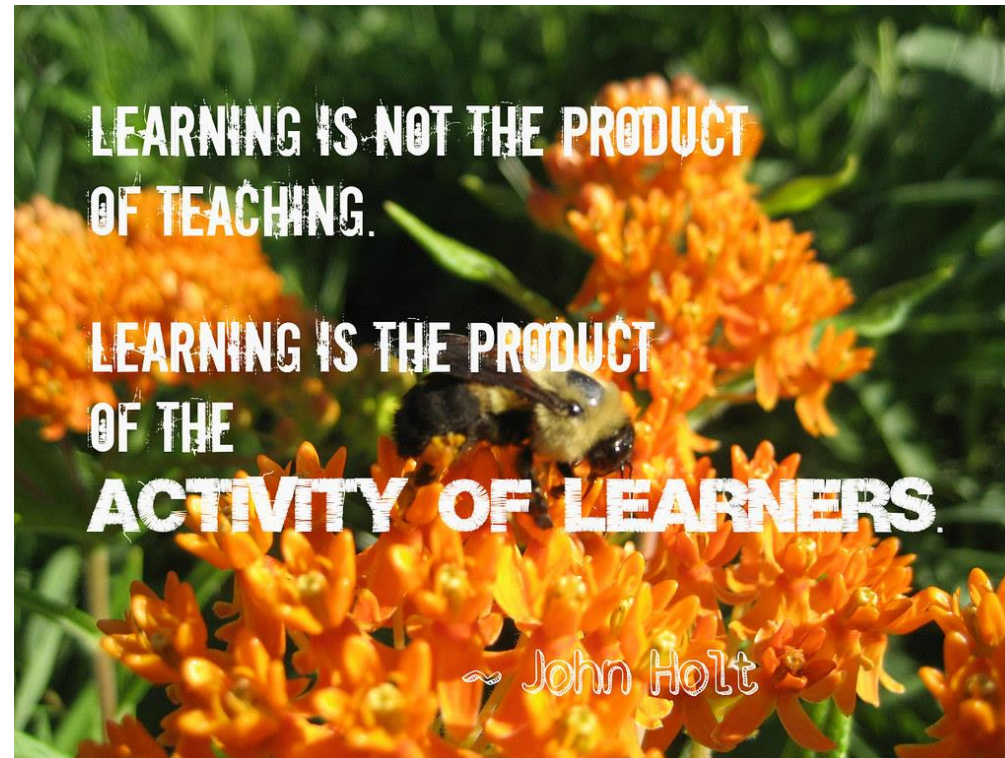
GROWTH/LEARNING

- What are you currently doing to educate/grow yourself?

- What are you currently doing to help your staff grow?

- How could you increase this? Brainstorm ways to help your staff learn

Learning Example

- https://apic.org/resources/topic-specific-infection-prevention/environmental-services

- https://www.ahe.org/designations/chest

GROWTH/LEARNING

What is the best way to learn something?

Learn More >>

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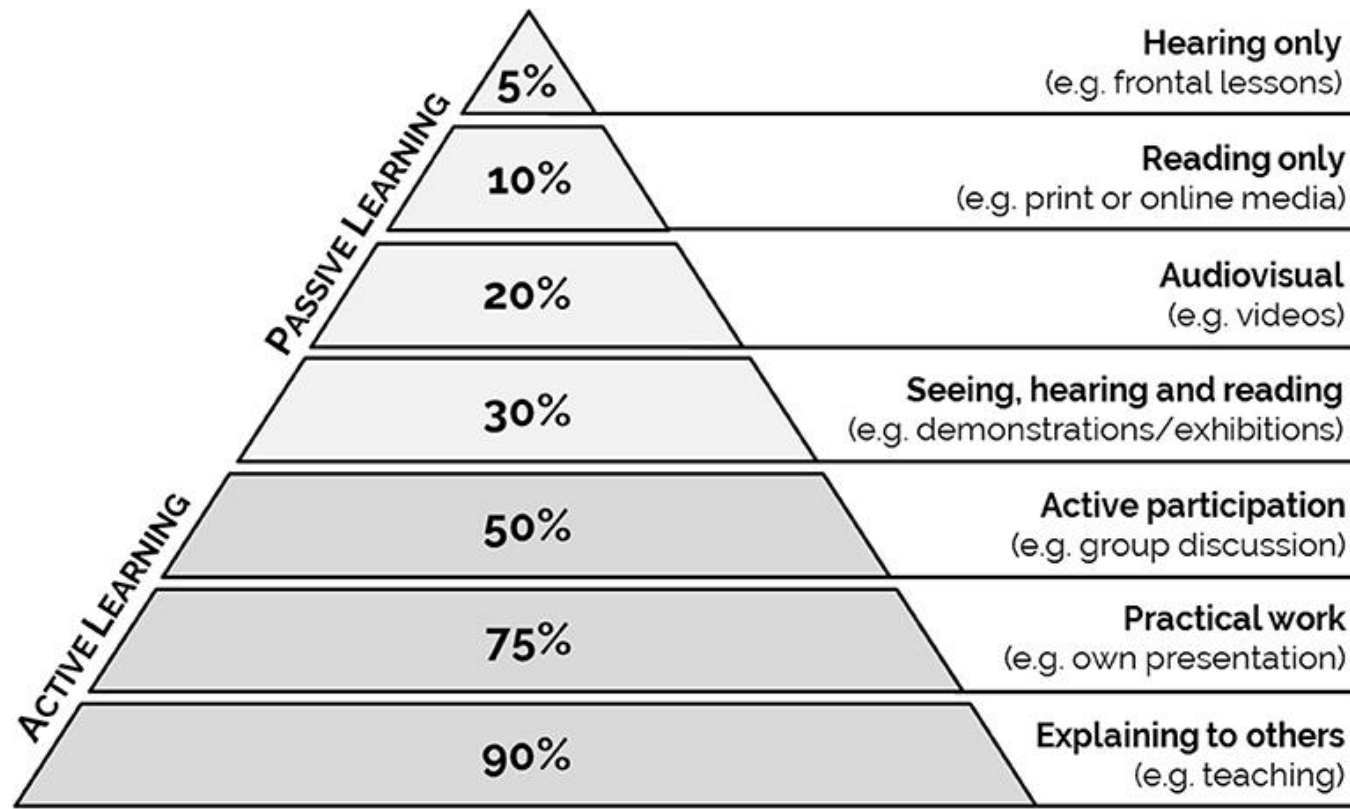
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GROWTH/LEARNING

What is the best way to learn something?

Teach someone else

GROWTH/LEARNING

What is the best way to learn something?

PASSIVE LEARNING
- 5% — Hearing only (e.g. frontal lessons)
- 10% — Reading only (e.g. print or online media)
- 20% — Audiovisual (e.g. videos)
- 30% — Seeing, hearing and reading (e.g. demonstrations/exhibitions)

ACTIVE LEARNING
- 50% — Active participation (e.g. group discussion)
- 75% — Practical work (e.g. own presentation)
- 90% — Explaining to others (e.g. teaching)

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GROWTH/LEARNING

How could you use these principles to help staff learn?
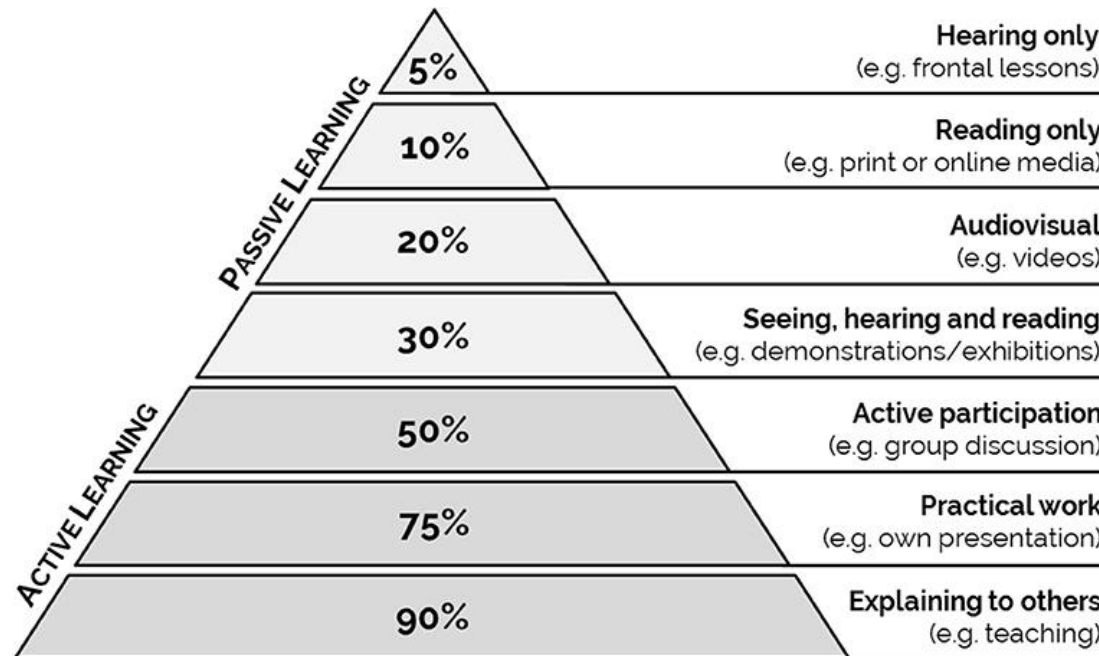
AGREE/DISAGREE

- **Mistakes are beneficial**

"Don't cling to a mistake just because you spent a lot of time making it."
-- unknown

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GROWTH/LEARNING

2 most important questions

1. **What did I do right?**

2. **What can I do differently next time?**

Describe a recent problem/challenge your facility has been through

GROWTH/LEARNING

1 most important question

- **What can I learn from this experience?**

ENGAGEMENT

- **Hives Q 12**

AGREE/DISAGREE

COACHES ARE BETTER THAN BOSSES

Coaching

Coaching: Releasing what is already there.

COACHING

What do coaches do?

– Display more curiosity (ask more, tell less)

– Show support

– Know their people

– Focus on performance, strengths and engagement

– Identify clear expectations and performance goals

FEEDBACK

POSITIVE FEEDBACK/COMPLIMENTS

Sincere

Specific

Soon

FEEDBACK

GIVE COMPLIMENTS THAT INCREASE ENGAGEMENT

Give compliment

Explain meaning/significance

FEEDBACK

One of the biggest single motivators is when people get caught in the act of doing it right and get praised for it.

STAFF THAT AMAZE

WHAT GETS REWARDED GETS REPEATED

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COACHING

2 most important coaching questions

1. What are you working on this week?

2. How can I help?

THE WEEKLY Coaching Conversation

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PROACTIVE OR REACTIVE

Proactive

- creating or controlling a situation by causing something to happen rather than responding to it after it has happened.

PROACTIVE

PROACTIVE OR REACTIVE

- If you are **proactive**, you focus on preparing, if you are **reactive,** you spend time on repairing.   John C. Maxwell

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PROACTIVE OR REACTIVE

- **Proactive** is turning the steering wheel
- **Reactive** is sitting in the back seat

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PROACTIVE OR REACTIVE

- Reactive question: What should we do to fix this problem?

- Proactive question: What could have prevented this before it happened?

WASH YOUR HANDS

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PROACTIVE OR REACTIVE

- Which is easier: Proactive or Reactive?

Proactive or Reactive

- 3 types of problems
1. Direct control
2. No control
3. Indirect control

(Read Stephen Covey *The 7 Habits of Highly Effective People*, 1989)

No control   Indirect control   Direct control

PROACTIVE OR REACTIVE

Traits of proactive leaders

- Big picture thinkers
- Calm in the storm
- Surrounded by talent
- Focused on future goal
- Deliberate listener
- Organized

I AM A LEADER

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PROACTIVE OR REACTIVE

Results of proactive leadership

- Prevents some problems entirely

- Enables other problems to be solved more quickly, with fewer resources

- Increases confidence, engagement

- Encourages more creative options/solutions

GOALS

- **What was the last goal you set?**

GOALS

Goal setting

– **S**pecific

– **M**easurable

– **A**ttainable

– **R**elevant

– **T**ime-limited

SMART Goals

Specific
Measurable
Achieveable
Realistic
Timely

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WRAP-UP

- **Questions?**

- **Thoughts?**

Resources

- https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0

- https://www.federalregister.gov/documents/2024/05/10/2024-08273/medicare-and-medicaid-programs-minimum-staffing-standards-for-long-term-care-facilities-and-medicaid

- https://www.hhs.gov/guidance/document/defining-rural-population

- https://www.huduser.gov/portal/datasets/geotools.html

- https://nursinghomehelp.org/

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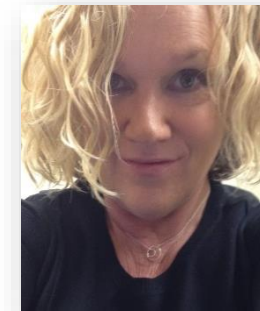martincaro@missouri.edu
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