

# The National Core Indicators 2015 Staff Stability Survey Report





#### **Agenda**



- What is NCI?
- DSP Workforce Trends and the importance of this data
- How we collected the Data
- What does the 2015 Staff Stability Survey Report tell us?
- How can providers and states use these data?

#### NATIONAL CORE INDICATORS (NCI)?

- NASDDDS HSRI Collaboration
  - Multi-state collaboration of state DD agencies
  - Launched in 1997 in 13 participating states now in 47 states (including DC) and 22 sub-state areas
- Goal: Measure performance of public systems for people with intellectual and developmental disabilities
  - Help state DD systems assess performance by benchmarking, comparing to other states
- Assesses performance in several areas, including:
  - employment, community inclusion, choice, rights, and health and safety
  - Now includes benchmark data on the stability of front line staff– Staff Stability Survey



#### How Does NCI Collect Data?

- Adult Consumer Survey
  - ✓ In-person conversation with a sample of adults receiving services to gather information about their experiences
  - ✓ Keyed to important person-centered outcomes that measure system-level indicators related to: employment, choice, relationships, case management, inclusion, health, etc.
- Adult Family, Child Family, and Family/Guardian Surveys Mail surveys – separate sample from Adult Consumer Survey
- Other NCI state level data: Staff Stability



The Purpose of Staff **Stability** Survey: Why **These Data** Matter





Report: http://bit.ly/2jetNaO

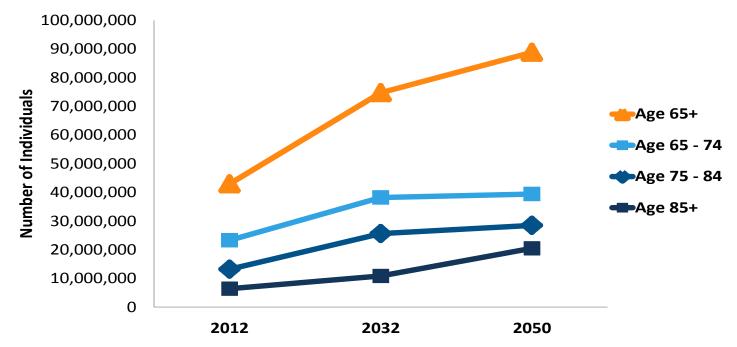
# Purpose of Staff Stability Survey Reports

- To provide state Developmental Disability
   Program Offices with reliable data which can
   help inform their decisions on policy or
   practice within their statewide programs
- To offer providers of service within a state's developmental disability system an opportunity to contribute factual information to the discussion of workforce challenges impacting their service delivery capabilities.



# Demographics: Escalating LTSS Demand

The 65 and Over Population Will More Than Double and the 85 and Over Population Will More Than Triple by 2050



SOURCE: A. Houser, W. Fox-Grage, and K. Ujvari. *Across the States 2013: Profiles of Long-Term Services and Supports* (Washington, DC: AARP Public Policy Institute, September 2012), <a href="http://www.aarp.org/content/dam/aarp/research/public\_policy\_institute/ltc/2012/across-the-states-2012-full-report-AARP-ppi-ltc.pdf">http://www.aarp.org/content/dam/aarp/research/public\_policy\_institute/ltc/2012/across-the-states-2012-full-report-AARP-ppi-ltc.pdf</a>.

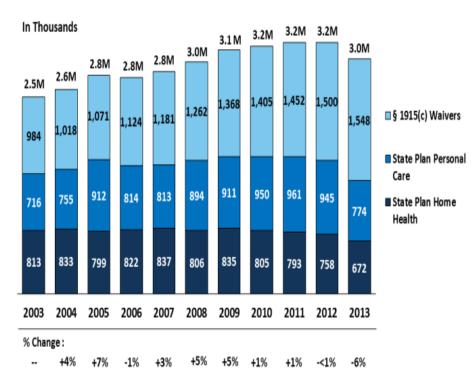




#### **Both HCBS Enrollees and Spending are Increasing**

Figure 1

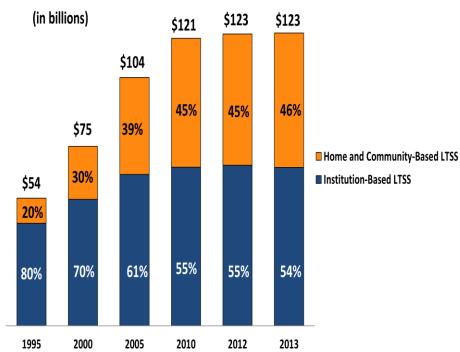
### Growth in Medicaid HCBS Participants, by Program, 2003-2013



NOTE: Figures updated annually and may not correspond with previous reports. Data exclude enrollment in Community First Choice, Section 1915 (i) HCBS, and Section 1115 waivers that include HCBS. SOURCES: KCMU and UCSF analysis of CMS Form 372 data and program surveys.

#### Figure 1

#### Medicaid LTSS Spending is Increasingly Devoted to HCBS as Opposed to Institutional Care





NOTES: Home and community-based care includes state plan home health, state plan personal care services and § 1915(c) HCBS waivers. Institutional care includes intermediate care facilities for individuals with intellectual/developmental disabilities, nursing facilities, and mental health facilities.

SOURCE: KCMU and Urban Institute analysis of CMS-64 data.





#### **Growing demand between 2014-2024**

- **Personal care aides:** expected to see a **26% increase** (458,100 new positions).
- Home health aides expected to see a 38% increase (348,400 new jobs)
- Nursing assistants are expected to need an additional 18%
   (262,000 new jobs)
- In the next eight years there will be a need for nearly1.1 million more caregivers of the same skill level



https://www.bls.gov/news.release/ecopro.t05.htm



#### **Workforce Impact**

- Wages below Federal Poverty Levels result in DSPs working several jobs
  - Poverty level for a family of 4: \$13.43/hour



Sources: Mean hourly wage for "All Workers" for "Home Health Services" and for "Residential IDD" (i.e. group homes, other private facilities) for May 2016 (Bureau of Labor Statistics, May 2016) "Poverty level" for family of four (Assistant Secretary for Planning and Evaluation, 2016)

NCI Staff Stability Survey reported a NCI average hourly wage of \$11.11 per hour

There's a good chance they are receiving some public benefits (e.g., food stamps, Medicaid)

#### **Workforce Impact**

- Reduced training contributes to DSP skill stagnation
- High vacancy rates/turnover rates impact service delivery – staffing ratios and access
- High turnover rates: extra incurred costs to providers
  - Overtime for workers to cover
  - Recruitment costs
  - Onboarding and Pre-Service Training

### **Provider Challenges**

- The average time to fill empty full and part time DSP positions: **3.5 weeks**
- Direct costs of hiring per employee: \$3,186.76
   as of 2015
  - includes recruitment, selection/orientation/training, payroll costs—NOT inclusive of overtime.

Hewitt, A., Taylor, M., Kramme, J., Pettingel, S. and Sedlezky, L. (2015). Implementing Direct Support Professional Credentialing in New York: Technical Report. Research and Training Center on Community Living, University of Minnesota.

### Importance of Staff Stability Data

- Research demonstrates that <u>stability of workforce</u> and relationships has direct impact on the lives of the people supported
- Service Quality is related to Workforce Stability
- Legislatures more frequently request data before approving increases based on the need for a competent, skilled workforce
- Encourage perspective that DSP is a career, beyond simply a job.
- Until recently, anecdotal evidence of DSP workforce issues at best



NCI Staff Stability Survey Documents:

# How we collected the Data

#### **Process of Data Collection**

- States created email list of all service providers registered.
  - Some states included State Op
- HSRI created State Portal. Email with unique links to online tool (ODESA).
  - Bounces were sent to state contact.
  - In portal, State could see WHO had responded, but could not see specific responses.
- In survey tool, NO identifying information was requested
- Secure data system (ODESA)



### **Data Analysis and Reporting**

- Data Cleaned
  - Eliminated cases that were reported to
    - provide none of the services specified
    - Employ 0 DSPs
- Evaluated using SPSS

Reports sent to states for additional quality check

# What does the NCI Staff Stability Survey Tell Us

Report: http://bit.ly/2jetNaO



#### 2015

- **AL**
- **AZ**
- DC
- **GA**
- IN
- KY
- MN
- MO

- OH
- **OR**
- **PA**
- SC
- SD
- TN
- TX
- UT
- **VT**

For this data cycle, we worked with OH to set up system to separately examine DSPs within HCBS Waiver Supports and those from ICF/IID supports.

Therefore, throughout this report, the two groups are treated as separate entities (OH\_ICF and OH\_HCBS)

17 states

#### **NOTE:** Provider Type

- The topography of provider types varies over states
  - Extensive use of host homes, personal care homes
  - Group homes
  - Prevalence of ICF facilities\*
  - Ratio public : private
  - Non-residential varies
    - Community-based habilitation, etc.
- The mix of provider-types will affect the data



#### Response rates

- Response rates varied
  - Some states did not include ALL providers in the list they sent—margin of error was not calculated
  - Some states had more robust follow-up protocols to encourage participation
  - Some states made mandatory
- Email survey: may not be random
  - Difference in the population who chose to participate and those who didn't—we don't know.
- Important to keep in mind when looking at results
  - Comparing with other states
  - Assessing your state's DSP workforce



#### Sample Sizes

	Valid responses	Total # of providers who received the survey	Response rate	# Responses needed to reach 95% confidence interval and 5% margin of error^	Meets 95% confidence interval and 5% margin of error?	Margin of error for sample size based on valid responses
AL	25	148	17%	108	ciioi.	17.93%
AZ	102	322	32%	176		8.03%
DC	36	82	44%	68		12.31%
GA	105	364	29%	188		8.08%
IN	88	184	48%	125		7.57%
KY	172	195	88%	130	Υ	2.57%
MN*	270	830	33%			
MO*	145	254	57%			
OH_HCBS	861	1108	78%	286	Υ	1.58%
OH_ICF	66	79	87%	66	Υ	4.92%
OR	111	142	78%	104	Υ	4.36%
PA	115	655	18%	243		8.30%
sc	43	61	70%	53		8.19%
SD	20	20	100%	20	Υ	0.00%
TN*	53	66	80%			
TX*	126	689	18%			
UT	72	94	77%	76		5.62%
VT	15	15	100%	15	Υ	0.00%



### Average of Averages and N

ALL STATE

AVERAGES.

ors (NCI)

#### Size of Provider Agencies (Based on Number of DSPs)

	Small (1-20 DSPs)	Medium (21-40 DSPs)	Large (41-60 DSPs)	Extra Large (61+ DSPs)	N
AL	44.0%	12.0%	16.0%	28.0%	25
AZ	38.2%	15.7%	10.8%	35.3%	102
DC	38.9%	16.7%	8.3%	36.1%	36
GA	51.4%	20.0%	4.8%	23.8%	105
IN	18.2%	10.2%	5.7%	65.9%	88
KY	43.0%	23.3%	14.0%	19.8%	172
MN	44.1%	15.2%	10.4%	30.4%	270
МО	31.7%	17.2%	9.7%	41.4%	145
OH_HCBS	63.5%	15.2%	4.6%	16.6%	861
OH_ICF	15.2%	19.7%	15.2%	50.0%	66
OR	32.4%	19.8%	10.8%	36.9%	111
PA	45.2%	8.7%	4.3%	41.7%	115
sc	14.0%	9.3%	4.7%	72.1%	43
SD	5.0%	0.0%	20.0%	75.0%	20
TN	13.2%	13.2%	1.9%	71.7%	53
TX	46.8%	20.6%	6.3%	26.29	126
UT	58.3%	9.7%	9.7%		72
The "average"	0.0%	20.0%	"M" ix	ndicates the nu	mbor
is the	3.5%	14.8%			
AVERAGE OF			of res	spondents: Not	every

of respondents: Not every agency responded to every question

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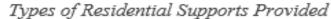
#### Size of Provider Agencies in State A

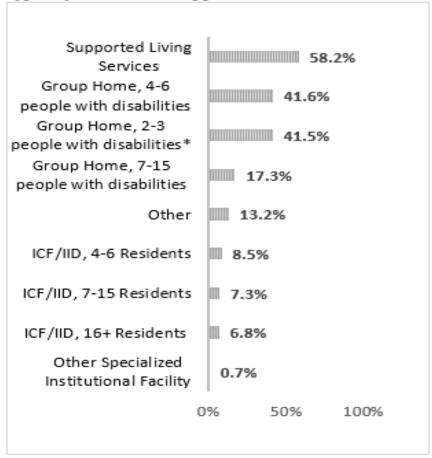
	Small (1-20 DSPs)	Medium (21-40 DSPs)	Large (41-60 DSPs)	Extra Large (61+ DSPs)	N
State A	43.0%	23.3%	14.0%	19.8%	172
NCI Average	33.5%	14.8%	9.5%	42.2%	2,425



### Types of supports: 1) Residential

- Residential supports
  - living accommodations, services, and supports provided to a person outside of the family home.
- Residential supports: 75% of responding agencies





<sup>\*</sup>Or agency-operated apartment

#### **Residential Supports**

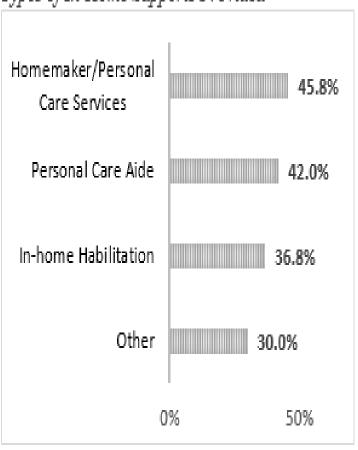
State A	Group Home 2- 3* or agency- operated apartme nt 47.0%	Group Home 4-6* <b>7.8</b> %	Group Home 7-15* <b>2.6</b> %	Supporte d Living Services 37.4%	ICF/II D, 4-6*	ICF/IID, 7-15* 0.0%	ICF/IID, 16+* 7.0%	Other Specializ ed Instituti onal Facility 0.0%	Other <b>25.2%</b>	N 115
State A	47.0%	7.0/0	2.076	37.4/0	0.076	0.076	7.076	0.076	25.2%	115
NCI Average	41.5%	41.6%	17.3%	58.2%	8.5%	7.3%	6.8%	0.7%	13.2%	1,586

#### **Types of supports:**

### 2) In-home

- In-Home Supports
  - supports provided to a person in the family home
- In-home supports:
   50% of responding agencies

Types of In-Home Supports Provided



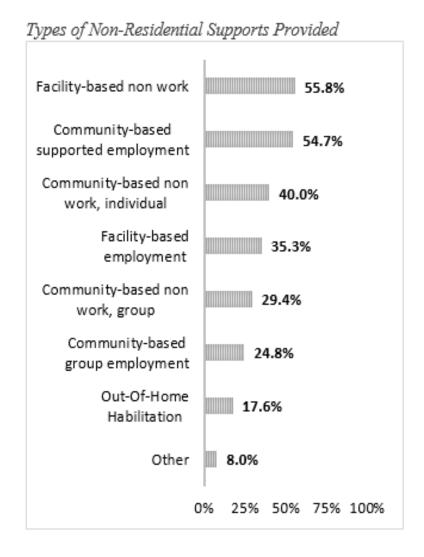
<sup>\*</sup>We have refined the definition of each in-home support for the 2016 survey.

#### **In-Home Supports**

	Homemaker/ Personal Care Services	Personal	In-Home Habilitation	Other	N
State A	54.3%	40.0%	2.9%	38.6%	70
NCI Average	45.8%	42.0%	36.8%	30.0%	1,284

#### Types of supports: 3) Non-residential

- Non-residential supports and services are supports provided outside an individual's home
  - such as adult day program services and community supports; supports to help people while at a paid job, or people seeking a jobfor example, work related support.
- Non-residential supports:
   71% of responding agencies



#### **Non-residential Supports**

	CB Suppor ted employ ment	CB Group employ ment	CB Non work, individ ual	CB Non work, group	Facility- based employ ment	Facility- based non work	Out-Of- Home Habilitati on	Other	N
State A	34.4%	1.3%	33.1%	14.3%	18.8%	48.1%	5.8%	15.6%	154
NCI Avera ge	54.7%	24.8%	40.0%	29.4%	35.3%	55.8%	17.6%	8.0%	1481

**CB= Community Based** 



#### **Numbers of Adults with IDD Served**

Residential Supports	1-10 Adults	11-20 Adults	21-50 Adults	51-99 Adults	100+ Adults	Total Adults Served	N
State A	24.1%	17.0%	37.5%	16.1%	5.4%	4,004	112
NCI Average	28.1%	12.0%	25.5%	16.1%	18.2%	73,415	1,521
In Home Sup	<u>ports</u>						
State A	64.2%	13.4%	16.4%	4.5%	1.5%	970	67
NCI Average	54.2%	13.5%	16.6%	6.3%	9.4%	36,221	1,195
Non-residen							
State A	19.6%	16.2%	31.8%	16.9%	15.5%	8,474	148
NCI Average	15.3%	11.3%	22.9%	20.8%	29.7%	125,213	1,394

Total number served by responding providers per state



#### **Agency Characteristics**

- In State A
  - 5.8% of agencies are public/government
  - 62.0% are private forprofit
  - 32.2% are private nonprofit

- NCI Average
  - 10.1% are public/government
  - 37.4% are private for-profit
  - 52.6% are private nonprofit

#### **TENURE**

9) How many direct support staff were on your payroll as of [December 31, 2015]?

This figure represents your

Total number of current direct support staff providing supports to adults with ID/DD.

10) As of [December 31, 2015], how many of your current direct support staff had been continuously employed in a direct support capacity for:

Less than 6 months

Between 6 and 12 months

More than 12 months

## TENURE (as of Dec. 31, 2015) Employed DSPs

STATE A: Total DSPs employed

7,754

NCI AVERAGE: Total DSPs employed

187,635

Employed less than 6 months: 17.0%

Employed 6-12 months: 16.2%

Employed 12+ months: 56.7%

Employed less than 6 months: 17.5%

Employed 6-12 months: 14.6%

Employed 12+ months: 56.9%

#### **TENURE Separated DSPs**

STATE A: Total DSPs separated between Jan 1-Dec 31 2015

3,496

NCI AVERAGE: Total DSPs separated between Jan 1-Dec 31 2015

85,004

Employed less than 6 months: 41.0%

Employed less than 6 months: 34.7%

Employed 6-12 months: 20.1%

Employed 6-12 months: 21.6%

Employed 12+ months: 31.1%

Employed 12+ months: 35.5%

#### **Turnover Rate**

Turnover rate =

Number of DSPs separated in last 12 months



Number of DSPs on payroll as of December 31, 2015.

STATE A	NCI Average
<b>45.1%</b> (N=172)	<b>44.8%</b> (N=2425)

#### **Vacancy Rates**

Vacancy rate =

Vacant positions ÷

Total number of full-time direct support positions (which is FT employees + FT position vacancies)

Full Time	STATE A	NCI Average
Vacancy Rate	<b>7.8%</b> (N=144)	<b>9.4%</b> (N=2027)

Part Time	STATE A	NCI Average	
Vacancy Rate	<b>13.2%</b> (N=144)	<b>14.6%</b> (N=2027)	



# Wages



- Include wages over \$4/hour and under \$30/hour
- Data INCLUDING \$30/hour+ are included in Appendix D

#### AVERAGE:

 The sum of a list of numbers divided by the number of numbers. Averages are affected by outliers and there is not an equal probability of falling above or below the average

#### MEDIAN

The value lying at the midpoint of a frequency. It is a value that has been reported by an agency/multiple agencies around which there is an equal probability of falling above and below.



# State Minimum Wages and Cost of Living

- We took into account state minimum wage and presented a state minimum wage comparison
  - Page 22 in report.
  - Range from \$7.25/hour \$10.50/hour
- Take into consideration the cost of living in your state.
  - For example, in places such as San Francisco and Seattle, cost of living has a large impact.

## **WAGES**

What was the <u>average starting hourly wage</u> and <u>average hourly wage</u> paid to all full-time or part-time Direct Support Professionals in each of the following types of services or settings? Please exclude overtime rates from your calculations. <u>Please refer to the period between January 1, 2015 and December 31, 2015</u>

Service Type		Average Starting Hourly Wage	Average Hourly Wage	
a)	Residential services	\$ (per hour)	\$ (per hour)	
b)	In-home supports	\$ (per hour)	\$ (per hour)	
c)	Non-residential supports and services outside the home	\$ (per hour)	\$ (per hour)	

Current wage across all services and settings

\$\_\_\_\_.\_\_ (per hour)

\$\_\_\_\_.\_\_ (per hour)

	Avg.		Median	
	<u>Starting</u>		<b>Starting</b>	
	Hourly		Hourly	
	Wage	Std. Dev.	Wage	N
State A	\$9.81	2.587	\$9.00	80
NCI				1100
Average	\$10.23		\$9.96	

Wages
Across
Settings

	Avg. Hourly Wage	Std. Dev.	Median Hourly Wage	N	2015 Minimum Hourly Wage
State A	\$10.67	3.103	\$10.00	93	State A: \$7.25
NCI Average	\$11.11		\$10.72	1262	Federal: \$7.25

# **Wages By Setting**

State A:	NCI Average:
Residential Supports:	Residential Supports
Average Hourly Wage: \$9.68/hr	Average Hourly Wage: \$10.84/hr
Median Hourly Wage:	Median Hourly Wage:
\$9.35/hr	\$10.60/hr
N=93	N=1332

# **Wages By Setting**

State A:	NCI Average:
In-Home Supports	In-Home Supports
Average Hourly Wage: \$10.97/hr	Average Hourly Wage: \$11.12/hr
Median Hourly Wage:	Median Hourly Wage:
\$10.26/hr	\$10.72/hr
N=54	N=957

# **Wages By Setting**

State A: Non-Residential Supports:	NCI Average: Non-Residential Supports
Average Hourly Wage: \$11.13/hr	Average Hourly Wage: \$11.36/hr
Median Hourly Wage: \$10.10/hr	Median Hourly Wage: \$10.91/hr
N=113	N=1331

# **Benefits**

3)	Which of the following Direct Support Professionals are eligible to earn and use paid time off at your agency?  "Paid time off" is defined as a bank of hours in which the employer pools sick days, vacation days
	and personal days together.
	☐ All Direct Support Professionals
	☐ Only Full-time Direct Support Professionals
	☐ Only Part-time Direct Support Professionals
	☐ No Direct Support Professionals are eligible for paid time off
	□ I am not sure/don't know
	If your anamay provides poid time off you do not need to respond to
	If your agency provides paid time off, you do not need to respond to
	Questions 24-26.

### **Benefits: Pooled Paid Time Off**

		To FT	To PT			
	To All	DSPs	DSPs	Do Not	Don't	
	DSPs	Only	Only	Offer	Know	N
State A	27.8%	56.9%	0.0%	13.9%	1.4%	144
NCI Average	26.3%	43.8%	0.4%	26.9%	2.5%	1,952



### **Benefits: Paid Sick Time**

		To FT	To PT			
	To All	DSPs	DSPs	Do Not	Don't	
	DSPs	Only	Only	Offer	Know	N
State A	3.7%	55.6%	0.0%	37.0%	3.7%	81
NCI Average	13.8%	51.8%	0.7%	31.1%	2.5%	1,139

Agencies providing 'paid time off' to **all DSPs** were excluded from this calculation.





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#### **Benefits: Paid Vacation Time**

		To FT	To PT			
	To All	DSPs	DSPs	Do Not	Don't	
	DSPs	Only	Only	Offer	Know	N
State A	2.4%	70.7%	0.0%	25.6%	1.2%	82
NCI Average	10.4%	60.8%	0.6%	26.4%	1.9%	1,127

Agencies providing 'paid time off' to **all DSPs** were excluded from this calculation.



#### **Benefits: Paid Personal Time**

		To FT	To PT			
	To All	DSPs	DSPs	Do Not	Don't	
	DSPs	Only	Only	Offer	Know	N
State A	1.3%	48.1%	0.0%	46.8%	3.8%	79
NCI Average	5.7%	38.5%	0.1%	52.4%	3.3%	1,105

Agencies providing 'paid time off' to **all DSPs** were excluded from this calculation.



## **Additional Benefits**

- In addition to asking about time off:
  - Health insurance
    - Covers family members/dependents?
  - Dental/vision
  - Other benefits:
- Post-secondary education support
- Unpaid time off
- Employer paid job-related training
- Employer sponsored retirement plan

- Employer sponsored disability insurance
- Flexible spending accounts
- Health incentive programs
- Life insurance



## **Recruitment and Retention**

	Pay incentive or referral bonus program	Realistic job preview	Train on and sign Code of Ethics	DSP ladder to retain highly skilled workers
State A	23.8%	78.4%	84.0%	41.5%
NCI Average	38.5%	76.4%	83.7%	43.3%



#### **Appendix B: Sampling**

- Details how each state's sample was constructed
- Important for making comparisons.
- Also important when assessing your own state's data

#### Appendix B: Sampling Methods as Reported by States

- AL AL maintains, on an ongoing basis, an email list of all current providers and newly approved providers. This is the list that was included in the Staff Stability sample.
- AZ's central office was given the parameters of the survey. They ran a report that identified just those agencies providing those services. As survey emails bounced, more in-depth investigation was done to identify the contact person at each agency.
- DC ollects the provider's email when they develop the provider profile in their consumer database. For the Staff Stability survey, day and residential providers (unduplicated) were included.
- GA GA used the email list from the Provider Network Management Unit. It included all providers enrolled for DD services.
- IN listed all providers that serve individuals in specified funding sources (e.g., waiver and ICF/IID) throughout the state.
- KY KY sampled all providers in the state from an online provider directory hosted by state.
- MN Although many people with IDD receive home care services, there were other efforts attempting to address similar questions in late 2015. Home care providers were therefore excluded from this particular survey.

Over 4,500 providers potentially met the criteria for inclusion in the survey. A notice to each was sent through the MN-ITS mailbox describing the survey and its purpose and requesting email contact information for a person who could answer questions regarding DSP staffing. A number of the providers have a parent organization with any number of direct service locations. Those providers were encouraged to submit only one email address if that entity would be responding on behalf of the entire organization. MN received the requested information from 1,318 providers. After duplicate email addresses were removed, there were 847 providers for the survey.

Via email, providers received a cover letter with a link to the survey in early January 2016. They had until March 1, 2016 to complete the survey for inclusion in the initial analysis. A total of 436 providers completed the survey.

- MO gave all providers the opportunity to participate in the survey through numerous outreach efforts (i.e., the Director promoting the survey at face-to-face meetings with provider organizations and through email outreach to leaders and members of provider organizations. Additionally, email "dings" were sent several times to the Division's listserv to which members of provider organizations subscribe). Participation was voluntary, but MO encouraged all providers to participate and asked that they provide their contact information via Survey Monkey by a certain date if they were interested.
- OH OH sent a newsletter to all eligible providers with the email addresses on file at DODD asking

## **Appendix C: Comparable Wage Charts**

- Residential Advisors
- Personal Care Aides
- Home Health Aides
- Psychiatric Aides
- Nursing Assistants

#### Personal Care Aides

Assist the elderly, convalescents, or persons with disabilities with daily living activities at the person's home or in a care facility. Duties performed at a place of residence may include keeping house (making beds, doing laundry, washing dishes) and preparing meals. May provide assistance at non-residential care facilities. May advise families, the elderly, convalescents, and persons with disabilities regarding such things as nutrition, cleanliness, and household activities.

Mean Hourly Wage Estimate: \$10.48

Percentile	10%	25%	50% (Median)	75%	90%
Hourly Wage	\$8.13	\$8.93	\$10.09	\$11.52	\$13.76

http://www.bls.gov/oes/current/oes399021.htm

# Challenges encountered

- Accuracy and completeness of list of email addresses varied by state
  - Affected the "sampling."
  - Affected ability to assess "representativeness" of data
- Email filters catching email with survey
- Terminology differences
- Lack of standardized method for follow up with providers
  - Confidential nature of survey complicated data validation efforts



# Changes in 2016 survey

- Terminology clarifications
- More states making responses mandatory
- ODESA able to track if provider has responded or not – allows for targeted emails
- Overtime and bonus questions
- Some questions on frontline supervisors
- Working on process to allow for data validation



# How Can States Use the NCI Staff Stability Data?

- Compare state workforce data with those of other states.
  - Evaluate all of the data
  - Benchmark your own state
- Work with stakeholder groups to identify Quality Improvement efforts.
  - Inform policy and program development regarding direct support workforce improvement initiatives
  - Monitor and evaluate the impact of workforce initiatives
- Provide context for consumer and family outcomes
- Consider performance measure links to other quality indicator data



# **Using the Data**

- Reports to legislatures in several states
- Track the impact of wage or benefit changes
- Comparison data between service sectors (Home Health, Behavioral Health, Aging)
- Analysis of factors impacting turnoversetting size, agency size, wage/benefit package, geographic location
- Comparison to state medians



# My state didn't participate

- States that are members of NCI can opt into participation in the Staff Stability Survey
- There is no additional cost to states
- If you're curious as to why your state didn't participate:
  - Email Dorothy at <a href="mailto:dhiersteiner@hsri.org">dhiersteiner@hsri.org</a>
  - Email your NCI state contact to ask
    - Contact available on the NCI website at www.nationalcoreindicators.org



Questions? **Email:** Mary Lou Bourne mlbourne@nasddds.org **Dorothy Hiersteiner** dhiersteiner@hsri.org

