**MINUTES – November 16, 2017**

**Participants**

Melissa Aylor, Burcham Hills

Renee Beniak, MCMCFC

Ashley Benjamin, Holt Senior Care & Rehab Center

Luanne Bibbee, LCC-BCI

Chad Borodychuk, LCC-BCI

Melissa Cureton, Dimondale Nursing Care Center

Don Haney, Thornapple Manor

George Mansour, Lansing Latino Health Alliance

Morgan McKittrick, CMHA-CEI

Ronda Miller, LCC

Patricia Mowen, Regency @ Lansing

Shelly Petoskey, Medilodge of East Lansing

Lindsay Pickrell, Jackson County MCF

Jayne Sabaitis, MapleLawn MCF

Susan Schneider, LCC

Wendy Smith, CCRESA

Stacey Steiner, Eaton County Health & Rehab Services

Sibylle Thornton, Ingham County MCF

Dee Wertz, Jackson County MCF

Joe Winkiel, Capital Area Michigan Works

Chelsea Wood, Prestige Way

**Facilitated Discussion on Long Term Care**

1. Challenges
   1. Retention
   2. Attendance and Scheduling
   3. Education and Support
   4. Hiring
2. Retention
   1. Mobility within LTC community:
      1. Movement of CNAs for transportation, shift or other issues
      2. Employees dismissed from one facility often picked up by another.
   2. Leave because of ongoing issues associated with childcare, transportation or other logistics.
   3. Employee not finding a good fit with workplace or profession
   4. LPNs becoming RNs leave for other settings – hospital, ambulatory
   5. Retention Strategies and Experience
      1. Onboard a group together – at worksite or school – peer to peer interaction and support has been helpful
      2. Scheduling to meet expectations or needs of employees – 12 hour shifts with people partnered for 24-hour period
      3. Tuition payment or reimbursement with requirement that employee remain for fixed period of time after completing program.
      4. First year is crucial – those who stay on for first 12 months likely to stay.
3. Attendance and Scheduling
   1. Illness and or child’s illness often cited as reasons for not coming in.
   2. LTC facilities need to track staff and resident infections – difficult to track when staff members are not being straightforward about reasons for absence.
   3. General
   4. Employee absence is discouraging to other employees and can affect the overall morale at the workplace.
   5. Dismissal for not compliance with attendance policies necessary, but can exacerbate the shortage.
   6. Estimated cost of absenteeism at one facility - $250,000.
   7. Employees not motivated.
      1. Generational issues – millennials.
      2. Lack of work ethic.
      3. Not experienced in planning for barriers to getting to work, e.g. short-term loss of child care; weather, transportation issues.
      4. May legally be an adult, but not necessarily mature – still developing after reaching age of 18.
   8. Attendance and Scheduling Strategies:
      1. Overstaff for each shift; if extra staff, provide work for them or encourage them to go home.
      2. Use a point system to limit absenteeism.
      3. Employee Assistance, including financial support and coaching.
      4. Counseling to help employees plan for unexpected events.
4. Education
   1. Many employers providing support for CNA education or for programs to meet other areas of need, e.g. LPNs:
      1. Tuition payment.
      2. Reimbursement for some education.
      3. Pay salary for time in school or study time.
   2. Would like education programs to stress skills needed to be a reliable employee – attendance, being on time, etc.
   3. Weeding out students for whom health career might not be good fit.
   4. Offer programs teach core skills for multiple allied health positions.
   5. Strategy: hire students during gap between classroom and test to be resident assistants to do a variety of tasks, including some tasks typically assigned to a CNA.
      1. Helps load on CNAs.
      2. Provides employer opportunity to see how they work.
5. Hiring
   1. Facilities hiring out of high school for stepping stone jobs- dietary, resident assistant – then supporting education in other careers.
   2. Some non-academic programs are pushing people into MA programs, at the expense of training qualified CNAs.
   3. Reaching out to high school and elementary schools helpful in determining if someone is a good fit.
6. Apprenticeship Model for CNAs
   1. Interest in more information.
   2. What is value to employer in key areas: retention, hiring, costs.
   3. Need outline to begin discussion with organizations.