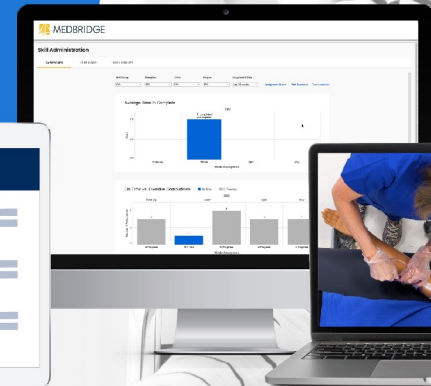


HOME HEALTH AND HOSPICE

Skills and Competency Manager

Streamline onboarding, address knowledge gaps, and get new staff trained and providing patient care faster.

www.medbridgeed.com/skills



Attracting and Onboarding Clinical Talent in Home Care: A Customer Story

*Joseph Brence, PT, DPT, MBA, FAAOMPT
Charles McDonough, MHA*



MEDBRIDGE

Meet Your Presenters

- **Joseph Brence, PT,
DPT, MBA, FAAOMPT**
 - Head of Clinical Strategy, MedBridge
 - Professor, NYU
- **Charles McDonough,
MHA**
 - CEO, Interim Healthcare of the Upstate



Learning Objectives

Following this presentation, learners will be able to

- List actions they can take to attract clinical talent
- Determine steps to operationalize a best-in-class onboarding plan for new hires
- Understand how to shift from classroom-based onboarding to a technology-powered approach that supports the clinician onboarding experience
- Quantify cost savings and clinician impact by standardizing and streamlining onboarding

The Problem: Nursing Workforce Shortage

- **Demand**
 - In 2021, registered nurse was the fifth most in-demand job in the American workforce
 - 73% increase in population 65 and over from 2011 to 2019 (41 million to 71 million people) and continuing to rise
- **Retirement**
 - Half of all registered nurses are over 50 years old, and a projected 1 million will retire between now and 2030
- **Regional impacts**
 - Rural communities have less than 16% of the nursing workforce to cover 52 million patients. Certain states are predicted to be impacted more than others.
- **School capacity**
 - 80,000 nursing school applicants turned away due to nursing school capacity
- **Heightened stressors and burnout**
 - COVID-19 compounded the difficulty in nursing practice, leading to increased burnout and churn

The Problem: Nursing Workforce Shortage

(cont.)

- **Talent competition**
 - HHAs are competing against hospitals and other settings for the same talent. Hospitals are often more encouraged by educational institutions and have the ability to provide better pay/benefits.
- **Operational challenges**
 - HHAs are challenged to continue to function. In Pennsylvania, for example, 93% of home health and hospice agencies indicated they had to refuse referrals in 2021 due to the shortage.
- **Patient safety and mortality**
 - In a review by Tourangeau, Cranley, and Jeffs (2006), seven studies demonstrated that higher staffing ratios of RNs was predictive of lower patient mortality

Point to Consider

- Once you are successful in recruiting a new nurse, do you ensure they have an optimal *onboarding* experience leading to successful skill mastery and, ultimately, retention?

Did you know? The estimated cost of losing and replacing a nurse is 2x annual salary.

What Does “Onboarding” Mean in Home Health and Hospice?

Most organizations incorporate these four items

- **Synchronous learning**
- **Asynchronous learning**
 - Compliance
 - Mix of topics
- **Assessment**
 - Knowledge-based
 - Skills checklists
 - Joint visits
- **Preceptorship/mentorship**

This is where most organizations have variability/vulnerability



Steps to Implementing Best-Practice Onboarding

1. Identify your goals and how you will measure the success of your onboarding program
2. Identify the people, processes, and technology necessary to achieve the goals above
3. Develop a workback plan on how to blend people, processes, and technology into a curriculum that includes synchronous learning, asynchronous learning, assessments, and precepting/mentoring

Step 1: Setting Metrics/KPIs

Measuring success of your onboarding program is critical for understanding the impact it is having for your agency, employees, and patients

- **Business impact metrics**

- Time-to-productivity
- New hire retention

- **Quality-based metrics**

- Employee satisfaction
- Knowledge
- Clinical skills
- OASIS/HIS accuracy

- Set goals against each of these, launch initiatives, and measure on a regular cadence to understand if program is meeting goals
- Example: the organization will reduce new hire time to productivity from 9 days to 6.5 days by xx/xx/202x, demonstrating a cost savings of \$1,100 per clinician per day to productivity saved

Step 1: Setting Onboarding Metrics/KPIs

| Metrics | Why? | How to Measure |
|-----------------------|---|---|
| Time-to-productivity | Relates to cost to onboard; forecasts opening territory/ patient acceptance | MedBridge Skills & Competency Manager |
| New hire retention | Relates to organizational costs | Turnover reports (90-day, 1-year) |
| Employee satisfaction | Predictive of employee turnover | NPS or other satisfaction survey instrument |
| Knowledge | Impacts patient care delivery, HHVBP | (MedBridge/LMS) posttest grades |
| Skills | Impacts patient care delivery, HHVBP | MedBridge Skills & Competency Manager |
| OASIS/HIS accuracy | Impacts direct revenue (in HH) | OASIS/HIS scrubbing error reports |

Step 1: Setting Onboarding Metrics/KPIs

(cont.)

Exercise: Do you know the benchmark metrics for your agency?

| Metrics | Benchmark | Goal | How Does Our Org Measure? |
|-----------------------|-----------|------|---------------------------|
| Time-to-Productivity | | | |
| New Hire Retention | | | |
| Employee Satisfaction | | | |
| Knowledge | | | |
| Skills | | | |
| OASIS/HIS Accuracy | | | |

Step 2: People, Processes, and Technology

Who and what will drive you to achieve your organizational goals?

- **People**
 - Educational administrator
 - Educator
 - Preceptor
 - New hire
 - **Processes**
 - Curriculum assignment
 - Preceptor–new hire matching
 - Onboarding calendar
 - **Technology**
 - LMS
 - Skills & Competency Manager
- Identify the impact each of these has on the metrics you recently identified

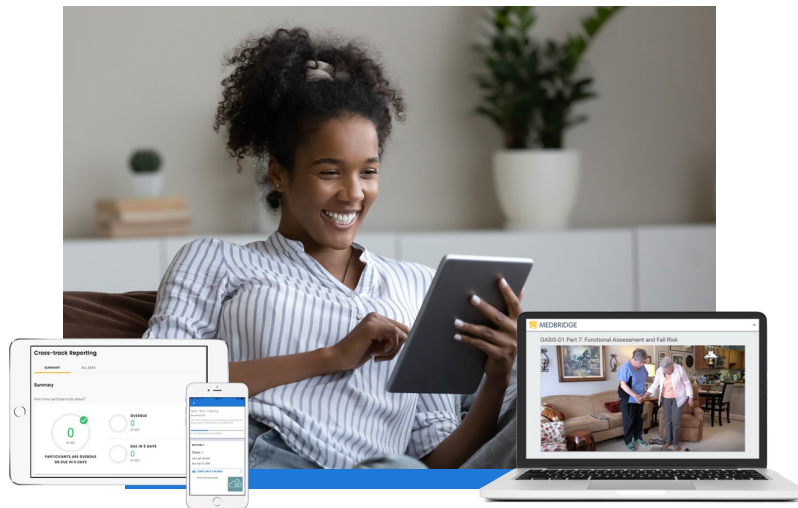


Step 3: Workback Plan to Implement

- **Develop a workback plan that includes**
 - Curriculum and calendar that is standardized, meets all requirements, and is repeatable
 - Expectations for “people” in associated roles and how you will assess their success
 - How you will leverage the best technology to support and streamline the process
 - Can you afford not to invest?

Implement the Best Technology to Support the Process

 MEDBRIDGE The official educational partner for HCHB



Staff Retention & Onboarding Solution

saves \$2.2M by improving time to productivity and staff retention

Based on 100 Clinical FTE

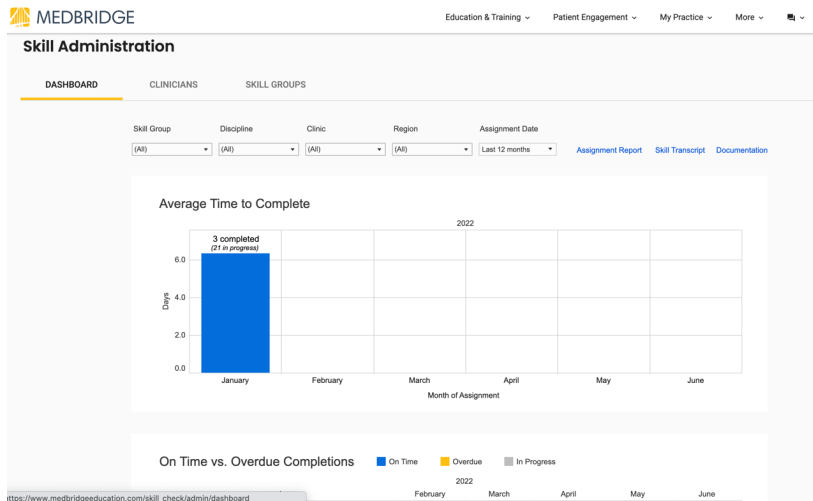
- **How we do it**
 - Build your curriculum
 - Auto-assign curriculum and skills checklists
 - Monitor progress, track, and report
- **Areas of focus**
 - Home health and hospice
 - Compliance
 - OASIS accuracy
 - Quality improvement
 - HHVBP

**Skills & Competency Manager
launching on July 1**

Skills & Competency Manager: Admin

Understand your average time-to-productivity and other key onboarding metrics

Match preceptors to new hires, understand onboarding progress, and assign skills checklists



The screenshot shows the MEDBRIDGE Skill Administration dashboard with the 'CLINICIANS' tab selected. It displays a list of clinicians and their assigned skills checklists. The table below shows the details of the assigned checklists.

| CLINICIAN | SKILL GROUP | % COMPLETED | DUE DATE | DAYS UNTIL DUE | ASSIGN DATE | PRIMARY PRECEPTOR |
|---------------|------------------------------|-------------|------------|------------------|-------------|-------------------|
| Amanda Correa | Demo Nurse Checklist | 100% | 02/03/2022 | -- | 01/26/2022 | Bob Thompson |
| Amanda Correa | Radick Skills Checklist Demo | 8% | 02/03/2022 | Overdue 125 days | 01/26/2022 | Bob Thompson |

Skills & Competency Manager: New Hire

Once assigned, new hires will complete a self-assessment so you understand what skills they are bringing into the organization

New hires can drill down into individual procedures and understand their progression and expectation for completion

The screenshot shows the 'Self Assessment' page for a 'Demo Nurse Checklist'. The page title is 'Demo Nurse Checklist' with '14' total skills. A message asks the user to assess their expertise for each skill. The assessment is divided into two sections: '1. Behavioral Assessment' and '2. Pain Assessment & Management'. Each section contains a table of skills with 'EXPERIENCED?' and 'ABLE TO PERFORM?' columns, each with 'Yes' and 'No' radio button options.

| SKILL | EXPERIENCED? | ABLE TO PERFORM? |
|--------------------------------|---|---|
| Dementia or Delirium Screening | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Psychosocial Assessment | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |

| SKILL | EXPERIENCED? | ABLE TO PERFORM? |
|--|---|---|
| Conducts pain evaluation | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Knowledgeable about drug therapies | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Knowledgeable about types of pain | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Non-pharmacologic methods | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Utilizes a pain rating scale to collect data | <input checked="" type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No |

The screenshot shows the dashboard for a 'Demo Nurse Checklist'. It displays a progress bar for '% Completed' at 0%, a 'Due Date' of 06/30/2022, and 'Days Until Due' of 22. The 'Assign Date' is 06/08/2022 and the 'Preceptor(s)' is Amanda Correa. A search bar and a 'Status' dropdown are visible. The main content area shows a drill-down view of the '1. Behavioral Assessment' section, displaying a table of skills and their status. A resource card for 'Functional Assessment Staging Tool (FAST) for Dementia MedBridge Course' is also shown.

| SKILL | STATUS |
|--------------------------------|--------|
| Dementia or Delirium Screening | |

Self Assessment
Experience: **YES** Ability to Perform: **YES**

Resources
Functional Assessment Staging Tool (FAST) for Dementia
MedBridge Course

Skills & Competency Manager: Preceptor

Understand the skills and progress of your new hire. Are they ahead, behind, or on schedule to ramp up as expected?

Complete competency sign-off for each skill, which gets time-stamped into the employee's record






The screenshot shows the MedBridge Skills & Competency Manager dashboard. At the top, there's a navigation bar with 'MEDBRIDGE' logo and menu items: 'Education & Training', 'Patient Engagement', 'My Practice', and 'More'. Below the navigation, there's a breadcrumb trail: 'BACK TO MY CLINICIANS' > 'Amy Updated Demo'. The main content area displays a checklist for 'Radick Skills Checklist Demo'. The checklist has columns for '% Completed' (8%), 'Due Date' (04/29/2022), 'Days Until Due' (Overdue 40 days), 'Assign Date' (04/21/2022), and 'Preceptor(s)' (Amanda Correa (Primary)). The checklist is divided into two sections: '1. Behavioral Assessment' and '2. Central Venous Access Device'. Under '1. Behavioral Assessment', there are three skills: 'Dementia or Delirium Screening' (Completed) and 'Depression Scale' (Remediation Needed). Under '2. Central Venous Access Device', there are three skills: 'Cap Change' (Remediation Needed), 'Cathflow' (Remediation Needed), and 'Drawing Blood' (Remediation Needed). A sidebar on the right lists the assessment categories: 'Behavioral Assessment' (1), 'Central Venous Access Device' (2), 'Infection Control' (3), and 'Patient Admission' (4).

The screenshot shows the evaluation form for a skill. At the top, there's a navigation bar with 'MEDBRIDGE' logo and menu items: 'Education & Training', 'Patient Engagement', 'My Practice', and 'More'. Below the navigation, there's a breadcrumb trail: 'BACK TO DETAIL PAGE' > 'Submit Evaluation'. The main content area displays the evaluation form for the skill 'Central Venous Access Device' (Skill Name: Cathflow). The form has a 'Status' section with three radio buttons: 'Completed' (selected), 'Remediation Needed', and 'Reviewed'. Below this, there's a 'Self Assessment' section with two fields: 'Experience: NO' and 'Ability to Perform: NO'. The 'Evaluation Method (Performed)' section has three radio buttons: 'Written' (selected), 'Observed on a patient', and 'Demonstrated in a classroom'. The 'Evaluation Note' section has a text input field with the placeholder 'Add evaluation note'. At the bottom, there's a 'SUBMIT' button.

Case Study: MedBridge + Interim of the Upstate

Scope and Timeline

- **Problem**
 - Interim identified that a classroom-based onboarding program is unsustainable as the organization grows
- **Proposed solution**
 - Leverage innovative technology, powered by MedBridge, to support onboarding training (Knowledge Tracks + Skills Checklist)
- **Cohort**
 - Home health and hospice onboarding team (RN and LPN new hires at Upstate and Midlands SC clinics)

| | | |
|---|--|---|
|  | Interim adopts MB and integrates onboarding content | <ul style="list-style-type: none">• Nov–Dec '21• Pre-pilot launch |
|  | Onboarding pilot scoped and launched | <ul style="list-style-type: none">• Dec '21• Launch |
|  | Skills Checklist scoped and launched to pilot | <ul style="list-style-type: none">• Feb '22• 9 weeks post launch |
|  | Preliminary results and analysis | <ul style="list-style-type: none">• Apr–May '22• 17–20 weeks post launch |
|  | Final results and summary* | <ul style="list-style-type: none">• May '22• 20–24 weeks post launch |

*survey feedback and 90-day retention data pending

Define Pilot Success

Success criteria

- 1. Cost savings (time-to-productivity)**
 - Baseline: 8 weeks
 - Goal: 6 weeks
- 2. Employee satisfaction (survey data)**
 - Baseline
 - Home health: 4.3/5
 - Hospice: 5/5
 - Goal: 5/5
- 3. Staff retention (90-day retention rate)**
 - Baseline*
 - Home health: 78%
 - Hospice: 82%
 - Goal 85%

**baseline retention data represents YTD*



Pilot Methodology

- Interim onboarding content integrated to MB platform and distributed to users
 1. Market Orientation KT
 2. 2022 Compliance Training KT
 3. Skills Checklist



Dec '21 New Hires

- Market Orientation KT



Jan '22 New Hires

- Market Orientation KT
- 2022 Compliance Training

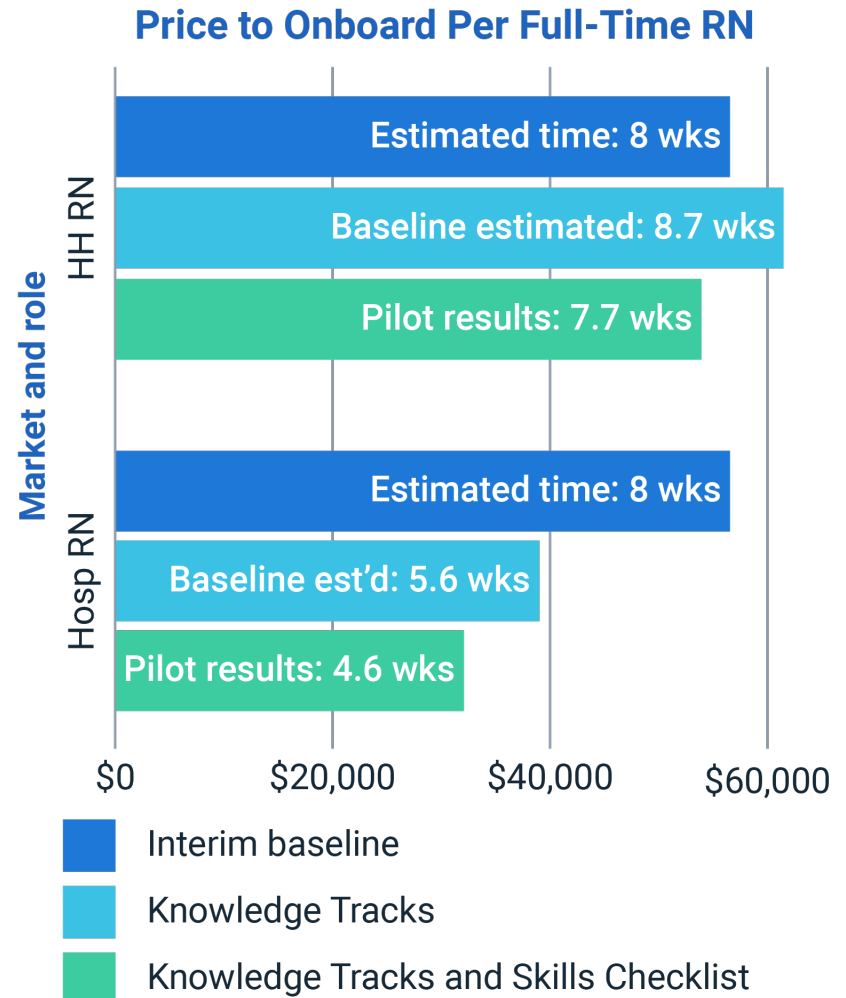


Feb '22 New Hires

- Market Orientation KT
- 2022 Compliance Training
- Skills Checklist

Pilot Results: Cost Savings

- New RNs supported by Skill Checklist and KT reached peak productivity one week earlier*
 - *Compared to RNs who received only KT on MB (Skill Competency Administered through traditional Interim process)



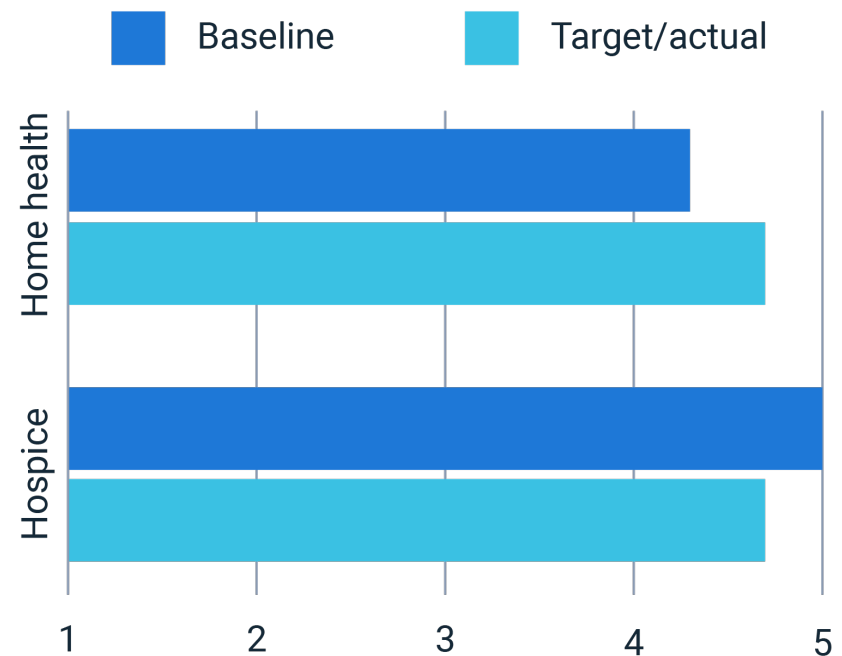
Pilot Results: Classroom Experience Survey

Please rate overall understanding

1. Home health/hospice setting
2. Regulatory skills
3. Clinical skills
4. Wound assessment and treatment
5. Value of resource materials/manuals

- Rating scale: 1–5
- HH baseline = 4.3; HH actual = 4.7
- HSP baseline* = 5.0; HSP actual = 4.7

Classroom Survey Average: Pre vs. Post MedBridge (Scale: 1–5)



*Hospice baseline had two months of data that only included four new hires

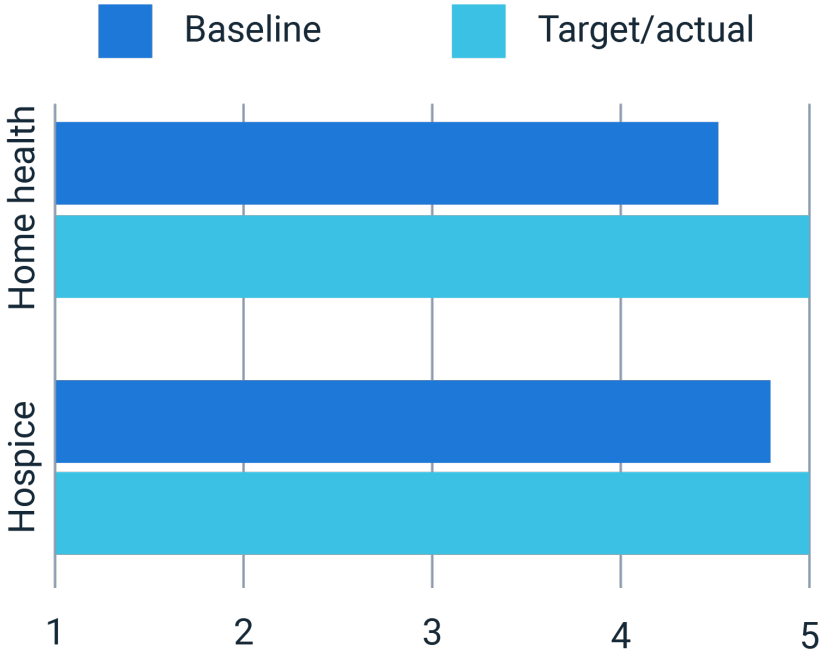
Pilot Results: Preceptor Experience Survey

Please rate

1. Job understanding as result of training with your preceptor
2. Visit processes
3. SOC processes
4. Standards of care/chronic disease management
5. Clinical skills
6. Infection control

- Rating Scale: 1–5
- HH baseline = 4.5; HH actual = 5.0
- HSP baseline = 4.8; HSP actual = 5.0

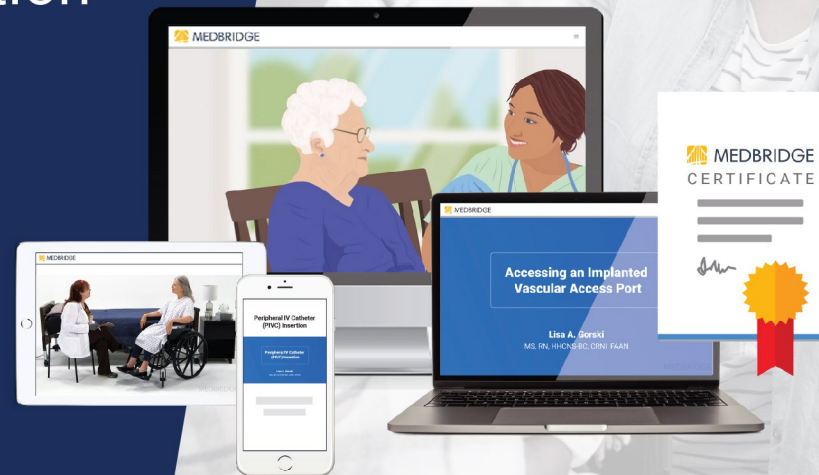
Preceptor Survey Average:
Pre vs. Post MedBridge (Scale: 1–5)



We Help Home Care Teams Improve Lives

Drive higher quality care and better staff retention with effective education and engagement solutions.

www.medbridgeed.com/home-care



Bibliography

MedBridge

Attracting and Onboarding Clinical Talent in Home Care: A Customer Story
Joseph Brence, PT, DPT, MBA, FAAOMPT and Charles McDonough, MHA, Chief Executive
Officer at Interim HealthCare of the Upstate

- American Association of Colleges of Nursing. (2021, April 1). *Student enrollment surged in U.S. schools of nursing in 2020 despite challenges presented by the pandemic*. <https://www.aacnnursing.org/News-Information/Press-Releases/View/ArticleId/24802/2020-survey-data-student-enrollment>
- Auerbach, D. I., Buerhaus, P. I., & Staiger, D. O. (2015). Will the RN workforce weather the retirement of the baby boomers? *Medical Care*, 53(10), 850–856. https://journals.lww.com/lww-medicalcare/Abstract/2015/10000/Will_the_RN_Workforce_Weather_the_Retirement_of.3.aspx
- Famakinwa, J. (2021, March 21). *Hospitals are fishing in the same pool for nursing talent*. Home Health Care News. <https://homehealthcarenews.com/2021/03/home-health-providers-hospitals-are-fishing-in-the-same-pool-for-nursing-talent/>
- Haddad, L. M., Annamaraju, P., & Toney-Butler, T. J. (2022). Nursing shortage. In *StatPearls*. StatPearls Publishing. <https://www.ncbi.nlm.nih.gov/books/NBK493175/>
- Health Resources and Services Administration. (2013, April). *The U.S. nursing workforce: Trends in supply and education*. U.S. Department of Health and Human Services. <https://www.ruralhealthinfo.org/assets/1206-4974/nursing-workforce-nchwa-report-april-2013.pdf>
- Lewis, G. (2022, April 28). The most in-demand jobs right now. *LinkedIn Talent Blog*. <https://business.linkedin.com/talent-solutions/blog/trends-and-research/2020/most-in-demand-jobs>
- Tourangeau, A. E., Cranley, L. A., & Jeffs, L. (2006). Impact of nursing on hospital patient mortality: A focused review and related policy implications. *Quality & Safety in Health Care*, 15(1), 4–8. <https://doi.org/10.1136/qshc.2005.014514>