

Putting the PDN Workforce Capacity Study to Good Use

Skilled Home Health Nursing Workgroup

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A business of Marsh McLennan



Background

In 2020, DMMA contracted with the University of Delaware and the Center for Research in Education and Social Policy to create a study

The purpose of the study was to examine the capacity of the Delaware private duty nursing (PDN) workforce to support children with medical complexity and their families

The study was comprised of five targeted areas:

- PDN Provider Agency Study
- COVID Telehealth Study
- Family Caregiver PDN Study
- Non-PDN Study
- PDN Study

The Skilled Home Health Nursing (SHHN) Workgroup provided input on the study design

Study results were provided to DMMA in December 2021 and were presented to the CMCAC

Applying the PDN Capacity Study to SHHN

Supporting the calendar year 2023 (CY23) SHHN workgroup priority to identify and implement solutions to improve the PDN workforce shortage in Delaware, results were extracted from the 2021 Capacity Study for:

- PDN Provider Agency
- Non-PDN Study
- PDN Study



General Nurse Results

Offer and advertise that on-the-job training is provided to all recruits

Offer longer-term preceptorship programs to train nurses to become PDNs

Disseminate information about the jobs available, as well as the value and impact of PDNs who provide hourly shift work

Address PDN low pay, limited benefits, and unpredictable take-home pay

Authentic messaging that work culture and environment of PDN in-home care is critical

Investigate collaborations with nursing schools

Consider improving agency human resource practices and programs

PDN Results

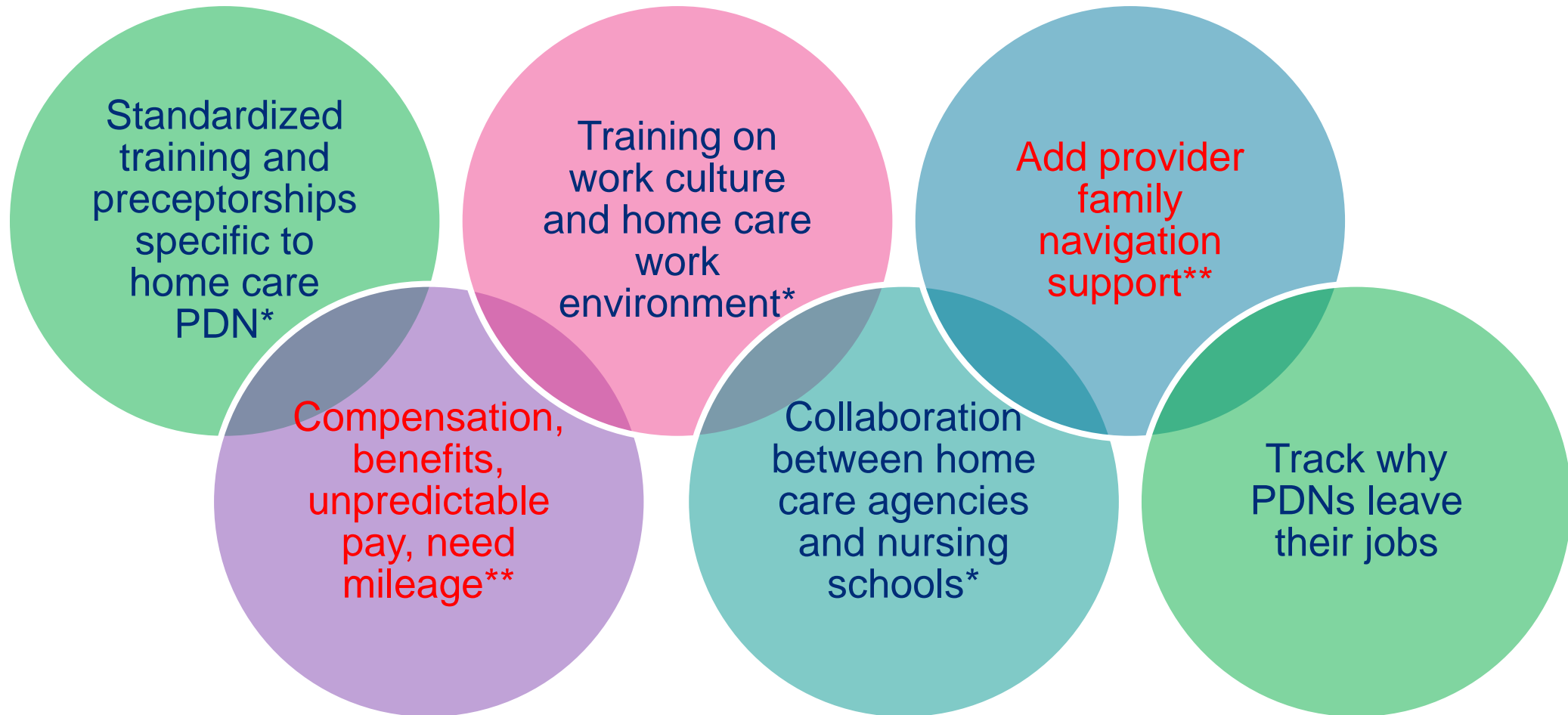
- Offer competitive monetary compensation
- Implement innovative recruitment and retention programs (e.g., career ladder)
- Recruit new graduates to work as PDNs (and provide training)
- Collaborate with nursing schools to introduce students to PDN
- PDNs suggest that agencies ensure nurses are appropriately trained
- Work with parents to identify the right PDN to family match
- Offer provider family navigation support
- Offer mileage reimbursement
- Ensure appropriate equipment is present to deliver care needed
- Track why PDNs leave the field
- Get input from managed care organizations and provider agencies



PDN Agency Representative Results

- Agencies compete for the same human resource pool
- Agencies believe total number of CMC needs is growing
- Home care is not competitive with other nursing opportunities
- Some nurses perceive working in home environments as a liability; particularly when there are gaps in care
- More LPNs assigned to CMC than RNs; shortage of skilled nurses for high-acuity cases
- Lengthy process for fingerprint processing for background check slows hiring
- Direct and indirect compensation varies widely across home care agencies
- Low wages, poor benefits, and unpredictable pay lead to workforce instability
- Training is not standardized, including orientation and preceptorship opportunities
- Not enough revenue in reimbursement to conduct competitive recruitment
- Home settings feel unsafe to provide appropriate clinical care
- Home settings require workforce to be more culturally competent than other settings

Recurring Themes Across All Three Response Groups



*Within scope for new SHHN workgroup

**Within scope for DMMA Medicaid workgroup



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