

# 2009 McKnight's



# Career Guide

In these uncertain times, managing your career is more important than ever. The following pages offer insight and analysis that can help you get a step ahead

## Opportunities await

While other sectors may be languishing, eldercare pros are in hot demand

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## It pays to be the boss

New compensation figures show why it helps to be near or at the top

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## The CNA mystique

The latest research discovers surprising answers

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## Company profiles

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# CareerGuide

## From the editor

These are strange times. It seems that hardly a day goes by without a major firm announcing a new round of layoffs. Yet the situation is almost the complete opposite in the eldercare field. A recent study by the American Health Care Association found that the current nursing shortage exceeds 100,000 people nationwide. And the overwhelming evidence shows that the gap is only going to get larger in the years ahead. But it's not just nursing. From the C-suite to entry-level positions, this is a field in desperate need of dedicated, enthusiastic professionals. The 2009 *McKnight's Career Guide* examines why eldercare is a meaningful career choice that offers significant rewards. Regardless of where you are today, the pages ahead can help improve your tomorrows.

*John O'Connor, Editorial Director, McKnight's*

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**McKnight's**

# Facing the future

Providers need to head off potentially dire worker shortages ahead



Photo: Newscom

By John Andrews

There are those who have seen the future and they insist it won't be pretty. Depending on who's doing the research, the long-term forecast for a long-term care worker drought ranges from severe to catastrophic. Arguments over the degree of severity aside, this much is clear: As the senior citizen population explodes and healthcare labor pool shrinks, the gulf between the volume of geriatric patients needing services and the number of caregivers available is growing drastically wider.

The report "Retooling for an Aging America: Building the Health Care Workforce" from the Institute of Medicine's Committee on the Future Health Care Workforce for Older Americans states "the health care workforce that is too small and critically unprepared" to serve the upcoming generation of seniors. Study authors call for "bold initiatives" by the healthcare industry to handle the overload, including broadening the scope of workers' duties, training "informal" family caregivers and developing new models of healthcare delivery and payment to replace "ineffective and inefficient" programs in place today.

Figures from the U.S. Bureau of Labor Statistics offer a more vivid scenario by contrasting the situation at the turn of the 21st century with 40 years later. For instance, in the year 2000, the bureau determined a ratio of 16.1 women aged 20 to 54 to care for each person over age 85. By 2040, the bureau predicts the number of available caregivers will shrink to 5.7. When men enter the equation, the results aren't much better, as the number of available caregivers shrinks from 39.5 to 14.8, labor department officials say.

Given the urgency of the impending worker-to-resident ratio disparity, the American Health Care Association is calling on Congress and the incoming Obama Administration to develop healthcare reform plans that strengthen the long-term care workforce required to meet the care needs of Americans now and in the future.

"Our national long-term care workforce is facing a shortage crisis, which must be remedied to ensure that our community is able to provide high quality care to the millions of frail, elderly and disabled Americans we care for," said Bruce Yarwood, AHCA president and CEO. "We urge Congress to initiate reforms that have the resources to bolster this labor force and allow our profession to build a pipeline of qualified workers to meet the needs of an aging America."

A 2007 AHCA study, Nursing Position Vacancy and Turnover, found that nearly 110,000 full-time equivalent healthcare personnel were needed to fill vacant nursing positions in facilities nationwide, a shortage exacerbated by challenges in finding enough nurse educators to train a skilled workforce.

"Funding and expanding training programs to ensure a large, well-trained labor pool is essential to



**"Long-term care employers will be challenged to create programs that not only attract but retain workers."**

*Marianna Kern Grachek, president and CEO, American College of Health Care Administrators*

growing our workforce," Yarwood added. "Significant steps must be taken to ensure that the increasingly complex levels of care provided in nursing homes are maintained by a workforce that is qualified to meet the needs of our nation's most vulnerable population, especially as 77 million baby boomers move towards retirement."

## Culture change needed

Experts agree that the mushrooming number of jobless caused by a decaying economy could prove advantageous to the chronically labor-starved long-term care industry. But at the same time, provider organizations need to take a hard look at why potential employees have historically avoided the sector and make the appropriate changes, said Marianna Kern Grachek, president and CEO of the American College of Health Care Administrators.

"Long-term care employers will be challenged to create programs that not only attract but retain workers," she said. "Creating a culture that supports employee satisfaction is critical to retaining highly sought-after staff. Providers need to be creative in recruiting people who are looking for second careers and package education programs that support and reward experience in other fields."

David J. Farrell, director of organizational development for West Hollywood, CA-based SnF Management is adamant in telling long-term care facility managers that they must improve their working environment, saying "If they want to keep the workforce they attract, they will have to change their approaches on how they deal with workforce."

In particular, Farrell recommends that administrators consider expanding the duties of non-nursing workers.

"They should be in tune with how valuable non-nursing staff can be if used wisely," he said. "The should

## Nurses needed

The American Health Care Association reports "a significant lack of registered nurse positions," specifically that one in six RN positions were vacant in 2007 – nearly 6,000 more than in 2002. States with the highest RN vacancy rates were:

Indiana	26%
Maryland	21%
Nevada	20%
New Mexico	20%
West Virginia	20%
Louisiana	19%
New Hampshire	19%
New York	18%
Washington, DC	18%
Virginia	17%

Source: AHCA, 2008

# Market conditions

understand that a talented ward clerk can take pressure off RNs, allowing them to focus on more specific nursing duties.”

Farrell says instead of fixating on hours spent per patient, per day, facilities should come up with ways to creatively deploy workers – both salaried staff and volunteers.

“You can see the link of how important staff satisfaction and empowerment are,” he said. “The best performing facilities have that and have engaged their workforce as opposed to hours per patient, per day. It doesn’t take a license to prevent a fall or to ask residents what they want and make it happen for them.”

Newton, MA-based Five Star Quality Care has been exploring the uses of “universal” workers, notes Maryann Hughes, vice president for human resources.

“A ‘universal’ worker is a staff member who is able to fulfill a variety of functions, such as resident assistance, housekeeping/laundry and food service. Building in this flexibility is very helpful as an employer and can also be more satisfying to the resident as there are special relationships that can be developed.”

Five Star is also building career ladders for CNAs,

**“With the increasing unemployment rates, this is a prime opportunity for individuals to consider a new type of career and working with seniors.”**

*Patti Mirallegro,  
senior director of  
human resources,  
Sunrise Senior Living*

resident assistants and dietary staff, Hughes said.

“This approach allows staff to grow within that one career path and be recognized for that growth with different responsibilities, different titles and a small compensation differential as recognition for that achievement,” she said.

Patti Mirallegro, senior director of human resources for McLean, VA-based Sunrise Senior Living, believes the current job market gives providers across the elder-care continuum a chance to shine while serving as a safety net for many being downsized. Moreover, she maintains that an influx of workers from other fields could energize the industry.

“With the increasing unemployment rates, this is a prime opportunity for individuals to consider a new type of career and working with seniors,” she said. “In fact, this may be an opportunity for the long-term care and assisted living fields to infuse some new perspectives, skills and talents into our workforce.”

To maximize the growing pool of fresh talent, she said administrators should take the time to analyze the core components of key positions and prioritize the most important ones. ■

## Avoid these mistakes when you are trying to fill open positions

Here are nine most common hiring mistakes employers make, according to the HR Chally Group:

### 1. Relying only on interviews to evaluate a candidate

A study conducted by the International Personnel Management Association in February 1999 analyzed how well job interviews accurately predict success on the job. The surprising finding: The typical interview increases your chances of choosing the best candidate by less than 2%, according to the HR Chally Group.

### 2. Using successful people as models

Duplicating success may seem like a good idea, but the reasons people succeed are not clear from just measuring the characteristics of top performers. More important are the differences between top performers and low achievers. For example, a comprehensive study of more than 1,000 sales superstars from 70 companies showed that the top three characteristics shared by high achievers were (1) the belief that salesmanship required strong objection-answering skills, (2) good grooming habits, and (3) conservative dress—especially black shoes. Oddly, a study of the weakest performers at those same companies revealed that the same three characteristics were their most common traits as well.

### 3. Too many criteria

Only through a method called “validation” can you make more effective hiring decisions. The government originally used validation research to prove that employment selection practices predicted job success and weren’t discriminatory. Not only does it identify critical job success factors, it weighs each factor’s importance.

### 4. Evaluating “personality” instead of job skills

Certain personality traits—high energy, honesty, a solid work ethic—seem to practically guarantee success, but surprisingly don’t. Solid statistical research from many objective sources shows little correlation between any personality factor and any specific job.

### 5. Using yourself as an example

Your own sales success might lead you to believe you can spot candidates

with potential, but don’t count on it. Many managers who reached their position by virtue of their sales success believe they can instinctively recognize a good candidate, when they are subconsciously just using themselves as a template. When you use yourself as a model, your ego often gets in the way—and that bias can skew your objectivity when judging others, resulting in a fatal hiring flaw.

### 6. Failing to use statistically validated testing to predict job skills most critical to success

In some companies, committees use deductive reasoning or brainstorming to identify criteria for candidate selection. Unfortunately, they focus on attitude and experience rather than ability and skills. The latter, in particular, are a much more significant and consistent indicator of potential. Incentives can motivate a skilled person, but motivation and good intentions won’t improve the prospects of an unskilled candidate.

### 7. Not researching the reasons that people fail

Research consistently shows that people fail in a job due to factors different from the criteria used to select them. Though most managers can list the most common reasons why people have failed, they seldom make that information part of the process of choosing selection criteria for new candidates. Managers who identify these “failure points” and build them into the selection process can reduce hiring mistakes by as much as 25%.

### 8. Relying on general “good guy” criteria

Everyone wants to hire good people, but being a good person does not ensure success on the job. Success skills are now so specialized that you need specialized hiring criteria as well.

### 9. Bypassing the reference check

As many as 20% of job applicants try to hide some dark chapter in their lives. For some positions, one out of three resumes contain false information. To find out who’s trying to pull the wool over your eyes, verify the information applicants provide.

# In their shoes...

An eldercare career has its challenges. But it also has its rewards, as these caregivers show.  
By Liza Berger



## Sandy Wagner, Director of Nursing Services

Working at Community Healthcare Center can be trying, but the caring atmosphere keeps it upbeat.

"We feel like a family and we feel that way about our residents and about each other," says Sandy Wagner, director of nursing services at the 110-bed skilled nursing facility in Marion, OH.

Wagner, who has been at the facility for about five years, is proud of her nursing staff of about 80 because they go out of their way to help residents, even shopping for them during their off-time.

Wagner, whose days are "pure craziness" most of the time, makes it a department priority to stay on top of falls and skin care. As of this writing, the facility had only three residents with pressure ulcers. Wagner said one of the highlights of her tenure at Community Healthcare was her two deficiency-free surveys in 2006 and 2007.

Back in the 1980s, she joined the National Guard to pay for nursing school and wound up falling into long-term care when there was a lack of full-time hospital positions. Ironically, her first position was at Community Healthcare.

"I started here, left and came back," says the mother of two, who is planning to marry for the second time.

She said if she had to grouse about anything job-related, it would probably be her administrative responsibilities.

"I hate paperwork," she says.



## Amy Johnson, Administrator

Entering any nursing facility, Amy Johnson is used to shocked looks from residents and peers. Being a 31-year-old administrator, she tends to catch people off guard.

"When I come into a facility being so young, it's a surprise to everybody, but it takes a little time for

people to say, 'Yeah, she knows what she's doing,'" says Johnson, who has worked at Amberwood Convalescent Hospital, a 107-bed facility, in Highland Park, CA, for three years.

Her age belies her experience and expertise. Among the changes she has implemented at Amberwood: hiring a full-time hydration nurse; putting in place a wound care team that includes a full-time resident "turner"; and recruiting Scylla, a black Labrador retriever, for pet therapy.

It's all about heart, says Johnson, who has worked in the field for 10 years.

"If you don't love it, you're going to burn out fast and won't care about making changes for the future," she says. As proof of her passion, she willingly gives her cell phone number to residents and family members.

Her love for long-term care can be found outside of work, as well. Because of her near-perfect score on the administrator's exam (she missed one question, she says) she tutors test takers. It is not uncommon to receive funny looks from this group who see her and think, "What's this little girl going to teach me?" she says lightheartedly.



## Sheryl McComas, administrator

Sheryl McComas has worked at one, and only one, long-term care facility: Cordell Christian Home in Cordell, OK.

"After just a few months (as administrator), I realized this was my calling," said McComas, 46. She has worked

at the 110-bed nursing home for 10 years, starting in the accounting department. "I love my staff. I love my residents. It's just so fulfilling."

Her path to her current position happened by accident. About eight years ago, the administrator suggested she get her license. She did, and when the administrator left, she found the job "dropped in my lap."

"It's so far from anything I ever thought I would do," said McComas, who is only the facility's third administrator since it opened 46 years ago.

Today, the mother of two finds herself in charge of a staff of 100. She considers a typical day "a personal relations" day where she keeps track of the needs of her staff, residents and families. (As part of this mission, she keeps a bowl filled with chocolates outside her office as a pick-me-up for staff.)

These days, she is busy with preparations for a multimillion-dollar renovation that will transform wings into culture change "neighborhoods" and private rooms.

While McComas never thought she'd end up in long-term care, she does note a couple interesting coincidences: Not only is she the same age as her facility, but her birthday, May 16, fell during Nursing Home Week this year.



## Georgia Schnor, Director of Nursing

After working at Northwoods Care Centre for 28 years, 66-year-old Georgia Schnor couldn't imagine doing anything else.

"The people I work with, we're a family," says Schnor, who has been director of nursing at the 114-bed skilled nursing facility for almost all of her time there. "Our kids grew up and got married and we have grandkids. Everybody's got longevity here. That's what made it nice."

Family can be taken literally, as she has two daughters who work at the facility in Belvidere, IL. She is also a "mom" to other members of the staff, helping nursing aides when family problems arise. A sense of family extends to families of residents, as well. A room with a microwave oven and a refrigerator filled with soda are at their disposal, and they also can sleep overnight to be closer to their loved ones.

While she does not offer too many sources of discontent, she acknowledges that staffing can be a headache, particularly when employees call in sick. It's also a challenge to keep up with the quick turnover among the short-stay rehab residents.

Schnor has had to adjust to a lot of changes in the industry, including the rise of short-stay rehab patients. Residents are also sicker than they used to be. But she says she finds the acuity level of the residents a welcome challenge because it forces her to use her nursing skills.

# Pay hikes

Top administrators and clinical leaders saw salaries reach a new plateau, according to a new study. For those in or near the C-suite, increases were even more substantial



Photo: iStockphoto



## By Brett Bakshis

It was a respectable year for the long-term care industry, with many managers' salaries growing at or above standard market rates, according to a recently released survey of nursing home personnel.

The national median for administrators saw a 3.6% pay bump; their assistants gained 4.3%. Directors of nursing experienced a 3.9% rate increase over the previous year. Assistant DONs weren't so fortunate, dropping 0.03% from last year's high-water mark.

National median salaries for administrators topped out at \$85,464, up from \$82,400 last year. Assistant administrators, falling short of last year's incredible



**“Nursing home managers fared better than most.”**

*Paul Gavejian,  
Total Compensation  
Solutions*

10.8% leap, still mustered a median raise of \$2,643, bringing them to an even \$62,000 per annum.

Directors of nursing reached the \$75,000 mark, while their assistants actually lost ground, losing a median average of \$22 from last year, and lowering them to \$60,000.

The report comes courtesy of the Hospital & Healthcare Compensation Service, in partnership with the American Association of Homes and Services for the Aging, and the American Healthcare Association. For 31 years, HHCS has collected information from a wide array of nursing homes across the nation. This year, 2,135 homes responded to the survey.

More nonprofit facilities participated in the survey

### Nursing home administrator (salary medians by region)

(Fewer than 100 beds)

Region	Low	Median	High
1	79,783	86,091	94,000
2	77,110	84,444	92,164
3	70,808	76,482	85,005
4	67,001	77,344	84,750
5	71,500	79,499	86,850
6	53,044	60,000	67,874
7	68,766	73,000	79,000
8	63,689	77,636	84,742
9	85,000	90,875	102,787
<b>National</b>	<b>64,042</b>	<b>75,021</b>	<b>85,845</b>

(100 or more beds)

Region	Low	Median	High
1	91,843	97,830	108,517
2	83,722	92,974	103,900
3	87,500	95,014	109,000
4	78,103	85,852	94,926
5	79,879	86,199	93,598
6	70,643	76,298	85,000
7	74,080	80,934	87,410
8	82,080	88,482	95,758
9	94,474	103,544	115,000
<b>National</b>	<b>81,250</b>	<b>90,022</b>	<b>100,000</b>

(All bed sizes)

Region	Low	Median	High
1	86,116	94,245	103,250
2	82,000	91,520	101,352
3	82,526	92,600	104,250
4	75,775	83,561	92,400
5	75,875	83,561	90,000
6	55,301	65,000	73,284
7	72,352	78,680	86,025
8	77,153	86,179	92,808
9	89,222	97,001	108,727
<b>National</b>	<b>75,000</b>	<b>85,464</b>	<b>95,948</b>

### Director of nurses (salary medians by region)

(Fewer than 100 beds)

Region	Low	Median	High
1	70,360	77,480	85,010
2	71,652	78,784	84,813
3	63,606	69,383	78,000
4	62,211	67,470	77,220
5	60,251	65,000	69,344
6	52,000	55,701	60,774
7	63,654	68,619	72,800
8	63,892	68,000	71,589
9	79,992	85,010	95,019
<b>National</b>	<b>57,907</b>	<b>66,104</b>	<b>77,286</b>

(100 or more beds)

Region	Low	Median	High
1	80,233	88,513	93,920
2	75,496	82,250	90,588
3	74,996	81,568	93,069
4	69,964	74,980	80,713
5	66,233	71,090	79,269
6	60,000	66,862	75,107
7	67,795	72,500	80,393
8	70,444	76,991	80,245
9	85,007	95,000	103,115
<b>National</b>	<b>70,720</b>	<b>78,510</b>	<b>86,699</b>

(All bed sizes)

Region	Low	Median	High
1	77,255	85,000	90,646
2	75,000	80,777	89,708
3	72,035	80,000	89,861
4	66,669	73,713	80,001
5	63,001	68,078	76,000
6	52,946	57,432	64,146
7	66,955	71,245	79,152
8	67,600	73,500	79,999
9	81,792	90,000	99,927
<b>National</b>	<b>65,572</b>	<b>75,000</b>	<b>84,178</b>

Source: 2008-2009 AAHSA Nursing Home Salary & Benefits Report, published by the Hospital & Healthcare Compensation Service in cooperation with the American Association of Homes and Services for the Aging and supported by the American Health Care Association

this year than last year, though they were greatly overshadowed by for-profits by a ratio of four to one.

### Who's up, who's down?

Nursing home managers fared slightly better than most of their co-workers in the healthcare industry, according to Paul Gavejian, managing director at Total Compensation Solutions.

"When you look at the administrator, their pay is up by 3.6% from 2007 to 2008," he said. That percentage "is marginally higher than the average that you see in most healthcare organizations," which Gavejian said is about 3.0% to 3.4%.

We see the same thing with directors of nursing, he says, and for good reason.

"They're at 3.9%, and that's because this is one of those life-blood positions, where if you don't have good people in those management positions at the facility level, you're going to be hurting," he says. "So what you're seeing here is a lot of merit increase, a lot of keeping up with the market."

In fact, a higher percentage of management workers—58.8%—received a pay hike based on merit than did any other subset of nursing home workers.

Nursing supervisors—both registered nurses and licensed practical nurses—didn't make out as well as

some of their bosses this year, dropping almost 1%. But Gavejian said it isn't necessarily a bad sign.

"In other words, someone didn't come in and say, 'By the way, your pay is going down about 1%,'" he explains.

Instead, he sees it as the impact of fewer hours on the job or the work being more spread out. Managers mindful of costly overtime might have taken tighter control.

"I think there are more people out there right now in the nurse supervisor roles," he says. "Their hourly rate doesn't go down; it's just that they're working fewer hours."

The slight drop in nurses' salaries surprised Phillip B. Wilson, president of the Labor Relations Institute in Broken Arrow, OK.

"I don't think, generally speaking, that nursing salaries are that soft, so maybe it's just in long-term care they're getting hurt a little bit more," he suggests.

### The big gains

Some salaries of non-clinical nursing home positions rose the most. Chief financial officers across the country saw a median pay rise of nearly 9.9%, to a survey high of \$104,258. Controllers' jump was even greater at 10.6% (to \$74,070), and directors of development

### Salaries by facility revenue (national averages)

\$ amount (in millions)	Administrator	DON
<3	62,677	58,182
3-5	75,616	67,612
5-10	88,703	77,410
10-15	98,922	84,663
>15	105,519	89,723
<b>All</b>	<b>86,354</b>	<b>75,444</b>

### Administrator national median salaries

Facility type	Salary
For-profit <100 beds	78,021
Nonprofit <100 beds	64,234
All <100 beds	75,021
For-profit >100 beds	90,012
Nonprofit >100 beds	91,811
All >100 beds	90,022
<b>All types, sizes</b>	<b>85,464</b>

### Average length of time to fill a position

Position	Number of days
Dept. Heads	42.93
Therapy	48.96
RNs	42.93
Dining	19.35
LPNs	38.35
Enviro. Services	21.00
CNAs	25.95

### States' region key

- 1—CT, ME, MA, NH, RI, VT
- 2—NY, NJ, PA
- 3—DE, DC, FL, GA, MD, NC, SC, VA, WV
- 4—IL, IN, MI, OH, WI
- 5—AL, KY, MS, TN
- 6—IA, KS, MN, MO, NE, ND, SD
- 7—AR, LA, OK, TX
- 8—AZ, CO, ID, MT, NV, NM, UT, WY
- 9—AK, CA, HI, OR, WA

### Recent salaries and increases (by percentage)

Title	2004	+	2005	+	2006	+	2007	+	2008	+
Administrator	72,761	3.94	76,454	5.08	80,000	4.64	82,400	3.00	85,464	3.59
Asst. administrator	54,579	(0.77)	58,633	7.43	53,591	(8.60)	59,357	10.76	62,000	4.26
DON	62,500	3.61	66,917	7.07	68,959	3.05	72,515	5.16	75,000	3.31
Asst. DON	52,193	2.34	54,815	5.02	57,232	4.41	60,022	4.87	60,000	(0.03)

squeaked ahead of them with a 10.9% hike (to \$87,322). But directors of marketing trumped them all, receiving a median pay increase of 14.9% (to \$63,604).

“I think there’s a lot more work in those areas in terms of compliance and in terms of regulation, specifically for the financial positions,” Gavejian theorized about the huge pay hikes. “But for development and marketing, I think those people are working a lot harder and going out there and demonstrating what the local facility offers to the community.”

Wilson agrees, but is skeptical of the data. “There’s lies, damn lies and statistics. You have to look at ‘where did you start from,’” he says.

“When the economy starts to struggle, the most important thing that a long-term care facility can do to shore up its finances is to make sure its census is high. So you have to invest in filling beds. If they’re not full, you need to have good people out there filling those beds.

“That may explain why the marketing people jumped,” he says. But he added that some marketing positions might have started the year at a lower comparative pay rate than some other positions. If that’s the case, this could merely be a correction to a statistical sampling quirk.

## Crystal ball time

There’s a lot of potential room for expansion in the long-term care field, says Gavejian, but he’s not sure if skilled nursing facilities will reap those benefits.

“With continuing care, with home care, with a variety of other services offered, there’s expansion in care offered on a long-term basis, but it’s not necessarily in a skilled nursing facility,” he explains. “So there might be some minor retraction of employment in this industry, but the jury’s still out on that.”

As treatments improve, there’s a lot of uncertainty for nursing homes, he says. Hospitals can take care of a lot of acute matters, he notes, but other societal factors also come into play, including the rise in obesity.

“Are these people who are going to need continuing care or long-term care ... will these people be checking into skilled nursing facilities?” he wonders.

**“For development and marketing, I think those people are working a lot harder and going out there and demonstrating what the local facility offers to the community.”**

*Paul Gavejian,  
Total Compensation  
Solutions*

One thing Wilson says he knows for sure: The 2008 presidential election is going to significantly influence the future of salaries in the long-term care field.

The Employee Free Choice Act, a new piece of legislation backed by unions and democrats—including President-elect Barack Obama—could provide unions with a door into more nursing homes than ever. And because Obama has won the White House, it’s almost guaranteed the legislation will pass, Wilson says.

“Once a union is recognized under the current law, a nursing home facility or long-term care facility is not required to enter into a contract with a union if they can’t come to some agreement,” he explains.

“The Free Choice Act flips that on its head and says that if you do not have a contract within 90 days, then a federal mediator will look at what’s going on and try to get the parties to settle. If the parties won’t settle under those circumstances, then an arbitration panel comes in and imposes a collective bargaining agreement on the facility for two years.”

And while arbitrators generally try to appeal to both sides in an argument, it would be almost unheard of for them to cut wages.

“I think that you could anticipate, with respect to wages, that if this Free Choice Act were to go into place, organizing in healthcare would increase massively,” Gavejian says. “So I think that wage pressure to whatever extent it is driven by [union] organizing... will go up.”

In the short term, Gavejian says that nursing home wages likely would go up if the bill passes into law. But, he adds, even if that happens, it probably wouldn’t go into effect until the second half of the year. ■

## Criteria for granting wage increases

(Note: Some facilities reported using both cost-of-living-adjustment [COLA] and merit increases.)

Management	
Criteria	Percent of total
Merit	58.8
COLA	19.7
Step	3.4
Other	18.0

Registered nurses	
Criteria	Percent of total
Merit	52.3
COLA	22.4
Step	8.4
Other	16.9

CNAs	
Criteria	Percent of total
Merit	51.5
COLA	22.0
Step	7.8
Other	18.6

## Bonus payments as percentage of salary

(All bed sizes, types)

Region	Administrator	DON
1	20.23	11.33
2	9.16	6.73
3	13.92	10.17
4	22.61	13.04
5	21.61	13.48
6	13.54	8.86
7	14.88	14.36
8	16.98	11.80
9	19.78	11.41
<b>National</b>	<b>17.09</b>	<b>11.18</b>

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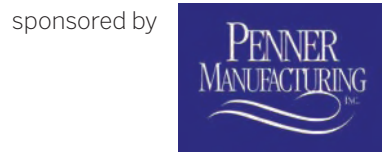


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 Presenter: Donna Sardina, President, Wound Care Education Institute

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## Industry Vendors with Online Booths (as of press time)



# The industry's

## Nursing home employers

Rank/Chain	Chief officer	Beds/units	Address	City	Zip	Phone
1. HCR Manor Care	Paul Ormond	38,372	333 N. Summit St.	Toledo, OH	43604	(419) 252-5500
2. Golden Living	Neil Kurtz, M.D.	33,757	1000 Fianna Way	Fort Smith, AR	72919	(479) 201-2000
3. Life Care Services of America	Beecher Hunter	31,244	3570 Keith St.	Cleveland, TN	37312	(423) 472-9585
4. Kindred Healthcare	Paul Diaz	29,106	680 S. 4th St.	Louisville, KY	40202	(800) 354-0749
5. Sun Healthcare Group	Richard Matros	24,002	101 Sun Ave. N.E.	Albuquerque, NM	87109	(949) 255-7100
6. Genesis Healthcare	George Hager, Jr.	23,195	101 E. State St.	Kennett Square, PA	19348	(610) 444-6350
7. Sava Senior Care	Tony Oglesby	22,948	1 Ravinia Dr., Ste. 1500	Atlanta	30346	(770) 829-5100
8. Extendicare Health Services	Philip Small	18,711	111 W. Michigan St.	Milwaukee	53203	(800) 395-5000
9. Evangelical Lutheran GSS	David Horazdovsky	13,710	4800 W. 57th St.	Sioux Falls, SD	57117	(605) 362-3100
10. Skilled Healthcare Group	Boyd Hendrickson	9,183	27442 Portola Pkwy., Ste. 200	Foothill Ranch, CA	92610	(949) 282-5800
11. National HealthCare Corp.	Robert Adams	9,153	100 Vine St.	Murfreesboro, TN	37130	(615) 890-2020
12. Daybreak Venture	Robert Idzi	8,258	401 N. Elm	Denton, TX	76201	(800) 345-5603
13. Signature HealthCare	E. Joseph Steier	7,613	2979 PGA Blvd.	Palm Beach Gardens, FL	33410	(561) 273-6239
14. Complete HealthCare Resources	Peter Licari	7,353	200 Dryden Rd., Ste. 2000	Dresher, PA	19025	(215) 441-7700
15. Peterson Healthcare	Mark Petersen	6,850	830 W. Trailcreek Dr.	Peoria, IL	61614	(309) 691-8113
16. UHS-Pruitt	Neil Pruitt, Jr.	6,639	1626 Jeurgens Ct.	Norcross, GA	30093	(770) 279-6200
17. Five Star Quality Care	Evrett Benton	6,056	400 Centre St.	Newton, MA	02458	(617) 332-3990
18. Advocat	William Council III	5,773	1621 Galleria Blvd.	Brentwood, TN	37027	(615) 771-7575
19. American Senior Communities	James Burkhart	5,123	6900 S. Gray Rd.	Indianapolis	46237	(317) 788-2500
20. Covenant Care	Robert Levin	5,031	27071 Aliso Creek Rd., Ste. 100	Aliso Viejo, CA	92656	(949) 349-1200
21. Alden Management Services	Floyd Schlossberg	4,436	4200 W. Peterson Ave., Ste. 140	Chicago	60646	(773) 286-3883
22. Nexion Health	Francis Kirley	4,372	6937 Warfield Ave.	Sykesville, MD	21784	(410) 552-4800
23. Life Care Services	Ed Kenny	4,332	400 Locust St., Ste. 820	Des Moines, IA	50309	(515) 875-4500
24. Benedictine Health System	Dale Thompson	3,960	503 Third St., Ste. 400	Duluth, MN	55805	(218) 786-2370
25. Encore Healthcare	Timothy Nicholson	3,618	7150 Columbia Gtwy Dr., Ste. J	Columbia, MD	21046	(443) 539-2350

Source: American Health Care Association, 2008

# top employers

## Assisted living employers

Rank/Chain	Chief officer	Capacity	Address	City	Zip	Phone
1. Sunrise Senior Living	Mark S. Ordan	36,500	7902 Westpark Dr.	McLean, VA	22102	(703) 273-7500
2. Emeritus Corp.	Granger Cobb/Dan Baty	29,522	3131 Elliott Ave. Ste. 500	Seattle	98121	(206) 298-2909
3. Brookdale Assisted Living	M. Schulte/W.E. Sheriff	21,087	111 Westwood Plaza, Ste. 200	Brentwood, TN	37027	(615) 221-2250
4. Atria Senior Living	John Moore	14,928	401 S. 4th St., Ste. 1900	Louisville, KY	40202	(877) 719-1600
5. Assisted Living Concepts	Laurie Bebo	8,535	W140 N898 1 Lilly Rd.	Menomonee Falls, WI	53051	(262) 257-8888
6. Merrill Gardens	William Petit	6,770	1938 Fairview Ave. E, Ste. 300	Seattle	98102	(206) 676-5300
7. Five Star Quality Care	Evrett Benton	6,330	400 Centre St.	Newton, MA	02458	(617) 796-8387
8. HCR Manor Care	Paul Ormond	5,080	333 N. Summit St.	Toledo, OH	43604	(419) 252-5500
9. Benchmark Assisted Living	Thomas Grape	4,004	40 William St., Ste. 350	Wilmington, MA	02481	(781) 489-7100
10. Hearthstone Senior Services	Tim Hekker	3,796	9595 Six Pines Dr., Ste. 6300	The Woodlands, TX	77380	(281) 362-3500
11. Life Care Services	Ed Kenny	3,598	400 Locust St., Ste. 820	Des Moines, IA	50309	(515) 875-4500
12. Americare Systems	Clay Crosson	2,716	214 N. Scott St.	Sikeston, MO	63801	(573) 471-1113
13. Genesis Healthcare Corp.	George Hager Jr.	2,696	101 E. State St.	Kennett Square, PA	19348	(610) 444-6350
14. Belmont Village Senior Living	Patricia Will	2,334	8554 Katy Freeway, Ste. 200	Houston, TX	77024	(713) 463-1700
15. Capital Senior Living	Larry Cohen	2,332	14160 Dallas Pkwy., Ste. 300	Dallas	75254	(972) 770-5600
16. Country Meadows Ret. Com.	G. Michael Leader	2,137	830 Cherry Dr.	Hershey, PA	17033	(717) 533-2474
17. The Evangelical Good Sam.	David Horazdovsky	2,081	4800 W. 57th St.	Sioux Falls, SD	57117	(605) 362-3100
18. Aegis Living	Dwayne Clark	2,026	17602 N.E. Union Hill Road	Redmond, WA	98052	(425) 861-9993
19. Brandywine Senior Living	Brenda Bacon	1,816	525 Fellowship Rd., Ste. 360	Mt. Laurel, NJ	08054	(856) 813-2000
20. Prestige Care	Harold Delamarter	1,602	7700 N.E. Pkwy Dr. Ste. 300	Vancouver, WA	98662	(360) 735-7155
21. Ecumen	Kathryn Roberts	1,392	3530 Lexington Ave. N.	Shoreview, MN	55126	(651) 766-4300
22. DePaul Adult Care Communities	Mark Fuller	1,370	1931 Buffalo Rd.	Rochester, NY	14624	(585) 426-8000
23. Chelsea Senior Living	Roger Bernier	1,362	316 South Ave.	Fanwood, NJ	07023	(908) 889-4200
24. Encore Senior Living	Peter Muhlbach	1,315	6400 SE Lake Rd.	Milwauke, OR	97222	(503) 905-3300
25. Trilogy Health Services	Randal Bufford	1,285	1650 Lyndon Farm Ct., Ste. 201	Louisville, KY	40223	(502) 412-5847

Source: American Health Care Association, 2008

# Quality before quantity

LTC workforce expert says employers should set bar high

By John Andrews

**W**hile it may sound crass, job losses in other sectors may be a gain for long-term care. And since opportunities to fill a chronic worker void have historically been few and far between, employers need to make the most of the labor surplus now at its disposal, says Robyn Stone, Ph.D., executive director of the Institute for the Future of Aging Services.

“The issue is the current situation does change the need for quality, well-trained people instead of just warm bodies to fill positions,” she said. “When the economy is prosperous, the long-term care worker shortage issue rises to the forefront. When it’s in less good shape, like it is now, the issue goes away. I want to underscore for long-term care providers that there is a difference between a shortage of workers and a lack of quality workers. It may be easier to find workers in the short term, but that doesn’t change the underlying problem.”

Employers need to formulate an effective strategy for capturing the cream of the crop and it starts by setting the bar high, Stone said. She adds that employers should also address valued competencies of job candidates and create a work environment that entices the best people to stay.

In essence, long-term care facilities need to break with the past and start operating for a 21st century workforce, Stone said. That means doing a lot of creative thinking, not just on improving the work culture, but also for finding, attracting, training and retaining staff.

Stone assures employers that they don’t need expensive professional assistance with the recruitment effort – just some initiative, resourcefulness and determination.

“Don’t hire a bunch of consultants to help – you don’t need them,” Stone said. “It’s about knowing your community, connecting with the local chamber of commerce,



Photo: iStockphoto



investment boards, nursing schools, community colleges and all the places where you can attract the right people. It's not rocket science, it's just good job design along with hiring and supporting the right people."

### Self-promotion

Because the demand for eldercare services will continue to grow despite consumer purchasing reluctance in other sectors, provider organizations should promote themselves as an economic stimulus for their communities, Stone said.

"When the Ethan Allen furniture plant in Vermont closed down, many of those laid-off workers were retrained as direct care workers," she said. "There is an opportunity to work with other sectors on shifting their workers into long-term care. Workforce investment boards through the U.S. Department of Labor can provide training dollars. Get to the table and partner with colleges and vocational schools to retrain displaced workers."

Another area where the economy's loss is long-term care's gain is in a growing number of older workers who remain in the labor force despite retirement plans as recently as six months ago.

Though these workers can make solid contributions, they need "really good training programs and new creative ways for work design, like flexibility in scheduling," Stone said.

### Reducing turnover

The Better Jobs Better Care Coalition recently announced three new resources for long-term care organizations designed to reduce workforce turnover. The new tools – a byproduct of four years of investigation – can also help providers find new employees and create a better work environment for the staff they already have, coalition representatives say.

BJBC, a four-year, \$15 million research and demonstration program, was implemented in five states: Iowa, North Carolina, Oregon, Pennsylvania and Vermont. The effort was underwritten by the Robert Wood Johnson Foundation and The Atlantic Philanthropies and is managed by the Institute for the Future of Aging Services.

The program's mission is to achieve changes in long-term care policy and practice that help to reduce high vacancy and turnover rates among direct care staff across the spectrum of long-term care settings and contribute to enhanced workforce quality

"It's no secret that quality in long-term care cannot be achieved without a quality workforce," Stone said. "These resources make it easy for providers to take lessons from evidence-based research and use them to transform their organizations." A catalogue of the group's research shows the benefits of job training programs on staff retention, while a short accompanying video highlights real-world examples of the effectiveness of the programs. A "News You Can Use" fact sheet



**"It's no secret that quality in long-term care cannot be achieved without a quality workforce."**

*Robyn Stone, Ph.D., executive director, Institute for the Future of Aging Services*

shows providers where to find new pools of potential employees.

### Extensive research

BJBC team members have kept themselves very busy over the past four years, studying various long-term care workforce issues and writing articles for *The Gerontologist*, published by the Gerontological Society of America. One project, led by Peter Kemper, Ph.D., of Penn State University's Department of Health Policy and Administration, examined which changes in management practices would most improve the jobs of frontline workers.

Pivoting off the question, "What is the single most important thing your employer could do to improve your job as a direct care worker?", the team compared the percentages of workers recommending changes in these categories across settings and interpreted them in the context of previous conceptual frameworks.

As a result, workers across all settings called for "more pay and better work relationships, including communication, supervision, being appreciated, listened to and treated with respect."

After analyzing these findings, BJBC issued the following recommendation: "To increase retention of frontline workers, policymakers should design public policies and management practices to increase pay and to improve work relationships. However, specific strategies should differ across settings."

### BJBC retrospective

Kemper and his research staff recently recapped the program implementation process for the Robert Wood Johnson Foundation. In all, BJBC successfully launched five demonstration plans and made some significant findings from its efforts, team members say.

The researchers used every means at their disposal to gather qualitative data, including project work plans, progress reports and interviews with project staff, coalition stakeholders and state policy experts.

"Successful implementation of BJBC across sites entailed factors such as having necessary resources for the demonstration, strong and consistent leadership, and stakeholder collaboration," team members wrote. "Other factors involved in bringing about 'culture change' were neutral lead agencies, a state history and context conducive to the work.

Goals from different sites included development of a training curriculum for direct care workers and expansion of direct care worker credentialing. All projects also worked on increasing public awareness and policy advocacy on direct care workforce issues."

Future projects focused on the long-term care workforce, BJBC researchers said, "should be aware of the time and effort needed to implement changes in policies and practices. Approaches to implementing change will need to address areas such as adequate funding and stakeholder collaboration." ■



Photo: iStockphoto

Recruiting the best and the brightest is just part of the equation. Early meetings with new hires can offer valuable insight about how well things are really going

# Early inte

By Dottie DeHart

**Y**ou've spent months remedying a major staff shortage. After reviewing countless applications, conducting interviews, assessing performance skills, and completing all the other necessary processes, you've finally hired the "cream of the crop" for your department.

Now you can finally breathe a sigh of relief that it's all behind you. Not so fast, says Quint Studer, an acclaimed healthcare management educator and author of *Hardwiring Excellence: Purpose, Worthwhile Work, Making a Difference* (Fire Starter Publishing).

Attracting the best and the brightest is only part of the equation. Now that you have them, what will you do to keep them? Studer says you must hit the ground running by opening up the lines of communication.

"More than 25 percent of employees who leave healthcare positions do so in the first 90 days of employment," says Studer. "This first 90-day period is critical. You have to do more than pass these people in the hall and ask how things are going. It's very important that you schedule several one-on-one meetings during the 'honeymoon phase' to find out what is really on the minds of your new employees. Do this successfully and you can cut your new employee turnover by 66 percent."

He suggests you schedule these meetings at the 30- and 90-day marks. Somewhere in this timeframe, the honeymoon ends and reality starts to set in. Again, these meetings are more than casual conversations about how things are going. Studer suggests going in with a structured list designed to discover not only what's not going well, but also what is going well. The following is an outline leaders can use for both 30- and 90-day meetings. Start by letting the new hire know that you are glad she is part of the team. Let her know that you care about her and that you value her input and ideas. Then ask:

**1. How do we compare to what we said we would be like?** When expectations aren't being met, employees may feel as though you have misrepresented the situation. They may even feel lied to. This question will open a dialogue for clarifying the new hire's expectation level and will give you a good perspective on

**"More than 25 percent of employees who leave healthcare positions do so in the first 90 days of employment."**

*Quint Studer,  
Healthcare management educator and author*

whether you are delivering what you promised.

**2. Tell me what you like.** What is going well? In healthcare, we often are trained to focus on what is going wrong. By asking what is going well, you give the new hire a chance to focus on the positive aspects of the job. As a manager, you will gain a unique perspective on what matters to people.

**3. What employees have been helpful to you in your first 30 days?** By asking this question, you can discover which employees are valuable in the retention process and recognize and reward them for helping new hires learn the ropes. Once other employees see that the employees are being rewarded, they too will become involved in the process. Employee turnover affects everyone and everyone should have a stake in tackling the problem.

**4. I noticed you came to us from \_\_\_\_\_. Are there things you did there that might be helpful to us?** Asking this is a great way to harvest intellectual capital. Current employees may not be good at taking input from new employees, even if the advice is sound. Plus, new hires may be reluctant to offer input for fear of alienating co-workers. By asking the question, you create a win-win situation. You get great new ideas for process improvement, and the new employee feels as though she has made a valuable contribution.

**5. Is there anyone you know who might be a valuable addition to our team?** At this point, your new employee is likely still in touch with former co-workers. If he is having a good experience with your organization, encourage him to let former co-workers know. This is a very effective recruiting measure. One healthcare CEO even provides phone cards to new hires specifically for this purpose. "Getting people on board during the first 90 days is critical to their long-term tenure with your organization," says Studer. "These 30- and 90-day meetings, which are designed to ask very specific and relevant questions, really do work to keep more employees."

Studer adds that not only do the meetings go a long way toward securing long-term relationships with your hard-won new talent, they also can serve as a vehicle for gaining insight into your organization. ■  
*Dottie DeHart is an industry consultant.*

# Retention

# The CNA mystique

While they do the heavy lifting at most communities, CNAs are often misunderstood. New research is unearthing what they like about their jobs—and why they leave

By Dr. Jules Rosen

A study of direct care workers in Pennsylvania has revealed some surprising results about what makes certified nursing aides tick. The positive aspects of the CNA job perceptions are striking, with 82% reporting looking forward to coming to work most days, 80% endorsing strong loyalty toward their job, and more than 90% feeling their work makes the world a better place

With this level of job satisfaction, it is surprising that the turnover rate is so high. The main reason people leave is described as management's "disrespect." This means not simply being impolite; it is management having unrealistic expectations of the direct care worker in completing his or her daily work.



These results come from the first wave of data collection of a survey from the Center for Health and Care Work (CHCW) at the University of Pittsburgh that will encompass 1,400 direct-care workers. They will be surveyed at nine-month intervals over 24 months to determine why workers stay, why workers leave and where they go after leaving. There has not been any previous study that has examined these outcomes.

We are starting with the assumption that different forces drive retention and turnover, and that understanding the dynamics will lead to interventions that can help stabilize this workforce.

The problem of staff retention and turnover is well-known to administrators and directors of nursing in facilities across the United States. This issue now has emerged as a significant concern within the national agenda. The Institute of Medicine Report, "Retooling for an Aging America: Building the Health Care Workforce," released in 2008, addresses a looming crisis in healthcare for U.S. elders. The report serves as a call to action and typically receive attention from the White House, on down.

As a geriatric psychiatrist, educator and researcher with a focus on improving the quality of nursing home care, I concluded several years ago that the success of quality improvement processes depends on business models in concert with medical and clinical practice decisions. The best medical practices imaginable are rendered worthless in the hands of an inexperienced or inadequately trained worker.

Several important national initiatives, including Better Jobs Better Care, are addressing the connection between workforce stability and quality of care (Stone & Dawson, 2008). To contribute to this important workforce issue, we have recently created the Center for Health and Care Work (CHCW) as a joint initiative at the Katz Graduate School of Business at the University of Pittsburgh, and the University of Pittsburgh School of Medicine. The CHCW has a primary aim of addressing the unique interactions of the business environment, direct-care workforce and clinical outcomes.

## The myths (or what we think we know)

One of the initial challenges to the CHCW is to address the myths that permeate the long-term care industry, as well as academia. The first myth we need to address is that we have a good grasp of why the staff turnover rate is as high as it is. I have heard administrators claim that the CNA staff will go work at McDonald's for five cents per hour more. Recent data suggest that higher satisfaction with the workplace support, work schedule, work content and training is associated with lower turnover after one year (Castle, Engberg, Anderson, & Men, 2007). Pay is rarely a driving force in turnover

However, what's noteworthy is these data do not tell us why people actually leave or where they go. The truth of the matter is that we really do NOT know why CNAs leave their jobs.

The other side of this question that also has been inadequately addressed is, "Why do they stay?" If the work is so difficult and pay is so poor, why do some CNAs remain either at their job or within this profession for decades? We are systematically evaluating the positive and negative aspects of direct-care work. In addition, we are assessing the impact of personal and family factors on tenure and turnover.

## Study of direct-care workers

We are now conducting a two-year study designed to follow 1,400 direct care workers in Pennsylvania. As workers decide to leave or stay on a job, they will be interviewed at regular intervals to evaluate what factors contributed to their decision to stay or to leave. We also will learn if they leave the profession, or simply go to another job within the direct-care worker field.

As in earlier studies, we are interested in the key elements of job satisfaction. However, in contrast to earlier studies, we have learned from work in other caregiving arenas, such as childcare, that non-job related factors contribute significantly to turnover. Childcare or eldercare needs at home, marital changes, and health changes all may contribute to job instability among these workers. Therefore, on-the-job and off-the-job factors will be assessed in each interview.

## What have we learned so far?

Initial findings:

### Here are positive aspects of work, according to respondents:

1. As a whole, CNAs derive emotional satisfaction from their jobs and feel they are providing a much-needed service to those under their care.
2. Factors that supported CNAs' feeling successful at work include perceiving themselves as being a residents' advocate, establishing personal relationships

**"The first myth we need to address is that we have a good grasp of why the staff turnover rate is as high as it is."**

with residents and their families, feeling "called" to the work, and being able to "leave work at the door."

3. Successfully handling difficult situations at work is supported by a strong sense of spirituality and religion. Solid family, work and social supports are also described as important to helping them handle difficult work situations that help them get through the toughest days.

4. CNAs reported numerous positive examples of "crafting" their jobs to make them more personal or manageable to the individual CNA. Positive examples of crafting include developing personal and supportive relationships with residents, praying with patients, accessing extra resources in an effort to make patients more comfortable, and helping residents die with dignity by doing something "extra."

### Here are negative aspects of work, according to respondents:

1. CNAs reported leaving jobs if they felt disrespected by management or if they perceived management as incompetent.

2. CNAs described unrealistic expectations by management. Specifically, the ability to do their job effectively is hampered by management's persistent tolerance of understaffing, lack of mentorship, and inadequate education.

3. Few opportunities for career advancement within the CNA profession contribute to high turnover.

4. Negative examples of "crafting" include not washing their hands for the required amount of time between patients, as well as lifting bed-bound patients without the appropriate support in order to save time. These time-saving efforts lead to disciplinary action or injury.

5. Home life and personal responsibilities, such as child or elder care, financial problems, or difficult/conflicting obligations, have an impact on the CNAs' ability to consistently report for work.

## Stability needed

Quality care requires a stable workforce. These focus group findings provide an initial window into understanding how the CNAs view the positive and the negative aspects of their jobs. We now are in the process of collecting the data for our study that we look forward to sharing with the long-term care community. To learn more about the CHCW and the work we are doing, please visit our Web site at: [www.business.pitt.edu/cbcw](http://www.business.pitt.edu/cbcw). ■

*Jules Rosen, M.D., is a professor in the Department of Psychiatry and the Katz Graduate School of Business at the University of Pittsburgh Medical Center. He also is the Chief of Geriatric Medical Services at the University of Pittsburgh School of Medicine.*

# Nobody else comes close!

# McKnight's

McKnight's Long-Term Care News

McKnight's Assisted Living

McKnight's Daily Updates

[www.mcknights.com](http://www.mcknights.com)

## McKnight's in the ASHPE\* Awards

2008

### GOLD AWARDS

*Best Online News Section*

*Best Single News Article— "Homicide verdict hinged on caregiving"*

### BRONZE AWARDS

*Best Single Issue — Magazine*

*Best Regular Column/Staff Written — John O'Connor*

2007

### SILVER AWARD

*Best Online News Section*

### BRONZE AWARDS

*Best News Section*

*Best Regular Column/Staff Written — John O'Connor*

2006

### GOLD AWARD

*Best News Section*

### SILVER AWARDS

*Best Online News Section*

*Best Publication Redesign*

### BRONZE AWARDS

*Best Special Supplement — Industry Directory*

*Best Regular Column/Contributed — Resident Care*

2005

### GOLD AWARDS

*Best News Section*

*Best New Publication Design — McKnight's Assisted Living*

### SILVER AWARDS

*Best Online News Section*

*Best Special Supplement — McKnight's LTC Medicine*

### BRONZE AWARD

*Best Single News Article — "When Disaster Blows In"*

2004

### GOLD AWARD

*Best Regular Column/Staff Written — John O'Connor*

### SILVER AWARDS

*Best News Section*

*Best Signed Editorial — James M. Berklan*

### BRONZE AWARD

*Best Special Supplement — McKnight's Senior Care Pharmacy*

2003

### SILVER AWARD

*Best News Section*

### BRONZE AWARD

*Best Cover Photo*

2002

### SILVER AWARD

*Best News Section*

\*American Society of Healthcare Publication Editors

## McKnight's in the APEX\* Awards

2008

### GRAND AWARD

*Magazines & Journals — McKnight's Long-Term Care News (For-profit/small office)*

### AWARDS OF EXCELLENCE

*Most Improved Web Site — [www.mcknights.com](http://www.mcknights.com)*

*Editorial & Advocacy Writing — John O'Connor*

*News Writing — James M. Berklan*

2007

### AWARDS OF EXCELLENCE

*Newsletters — Web & Electronic*

*News Writing — James M. Berklan*

\*Awards for Publication Excellence

# McKnight's



## Professional Development Zone

The Professional Development Zone is a resource guide containing profiles of leading firms that will help you advance in your career. Firms appear in alphabetical order.

These profiles provide insight into each organization's history, a mission statement, its range of eldercare services, states served, beds/units (where relevant), notable achievements and what attracts employees to their firm.

The Professional Development Zone offers just what an eldercare professional needs to gain a fuller understanding of the benefits of working with any of these organizations.



# Immediate Solutions, Lasting Results

## INTERIM SERVICES

LeaderStat offers an extended network of experienced long term care professionals who will help you make a smooth transition through a change in a key management position. Our interim professionals are skillful, experienced and can “hit the ground running”.

## RECRUITING SERVICES

Dynamic leadership is a critical element of an organization's success, and our recruiters know what it takes to be successful in long term care. We have helped many organizations find the unique leader they were searching for to complement their management team.

## CONSULTING SERVICES

Our services range from comprehensive facility management to specific projects in all areas of facility operations. LeaderStat helps you maintain a financially healthy organization, bounce back from a difficult survey, improve the quality of your clinical systems, plan and implement culture change in your facility, and much more.

**LeaderStat**  
*Long Term Care Management Resources*

[www.LeaderStat.com](http://www.LeaderStat.com) • Ph: (877) 699-7828 • Fax: (614) 839-7827



# LeaderStat

---

## Company Profile

We are your single source for long-term care management staffing and consulting solutions.



Whether you choose one or all of our services, you'll benefit from the three qualities that distinguish us as your partner of choice:

**Experienced** – We know your day to day challenges. That's because we have worked firsthand as leaders in long term care organizations of every size, nationwide.

**Connected** – For over 25 years, we have been an integral part of the long term care profession. By continually nurturing our vast network of connections, we have compiled a database with thousands of first-class candidates for every type of management position.

**Responsive** – Just as our name implies, LeaderStat specializes in rapidly delivering top-level solutions to skilled nursing facilities, assisted living and retirement communities.

Consider LeaderStat part of your own team—flexible, motivated and always here to help enhance your efforts with energy and expertise.

---

## Executive Search

We specialize in placing experienced leaders in key management positions. Our clients call us when they are searching for exceptional corporate, regional and facility level staff.

We realize that dynamic leadership is a critical element of success in any organization but it is especially important in the challenging environment of long term care. We understand the desire to find talented management at all levels who are knowledgeable, experienced and committed to your organization's mission and values. Our recruiters know what it takes to be successful in long term care. Through our profiling process, we match candidates to fit your specific needs and culture.

---

## Consulting Services

LeaderStat provides a full range of consulting services to long term care providers nationally. Our services range from comprehensive facility management to specific projects in all areas of facility operations. We have experience with a variety of facilities and services including home health and hospice programs, retirement communities, assisted living, skilled nursing and sub-acute centers.

Our capabilities include:

- Culture change
- Operational analysis

---

## Fast Facts

### Address:

Ohio Office  
8181 Worthington Rd.  
Westerville, OH 43082  
(877) 699-7828

Arizona Office  
8181 E. Evans Rd, #D8  
Scottsdale, AZ 85260  
(888) 781-0882

**E-mail:** jobs@LeaderStat.com

**Web site:** www.LeaderStat.com and  
www.LeaderStatRehab.com

**Presence:** Nationally networked in long-term care

**Employees:** Eleanor Alvarez – President/Owner  
Beth Anne Wilson – VP of Business Development/  
Rehab Director

Anna Dodge – Director of Consulting Services

Devon Underwood – Director of Recruitment

**Company type:** Private

**Tax status:** For-profit

- Revenue maximization
- MDS training & support
- Survey turnaround
- Management transition

Let LeaderStat work with your team to enhance your systems and bring your operation to its peak performance level.

---

## Interim Placement

Whether sudden or planned, a change in a key leadership position can disrupt an otherwise smooth operation. LeaderStat will quickly and seamlessly fill your vacancies to keep your systems running at full strength.

Let LeaderStat fill interim vacancies for:

- Administrators
- Directors of Nursing
- Assistant Directors of Nursing
- MDS Coordinators
- Unit Managers

---

## Therapy Recruitment

LeaderStat Rehab's experienced recruiters connect healthcare organizations with therapists from all disciplines. We source top-notch rehabilitative staff for permanent placement in the country's most challenging regions, such as:

- Rehab Directors
- Occupational Therapists
- Physical Therapists
- Speech Therapists
- Therapy Assistants (COTA, PTA)

TIRED of **WEEDING** through **RESUMES**  
of candidates with **NO SENIOR LIVING**  
experience?



Looking for **better results** from your recruiting efforts? Tired of the huge piles of useless resumes you get when you advertise on those big job boards?

**IMPROVE**  
the way you  
**HIRE**




Put away the weed wacker. Stop advertising on the big boards and head on over to **where your target audience hangs out.**

Since 2003 **seniorhousingjobs.com** has become the favorite career site for active & passive job seekers in senior housing. **seniorhousingjobs.com** is the premier job site for senior housing, ltc & assisted living.

It's a proven fact that **niche job sites produce better results** than large, general career sites. **seniorhousingjobs.com** is the industry's most cost-effective solution for attracting senior living professionals. Whether you seek a VP of Sales to sell emergency response systems, or an Executive Director for your CCRC, **seniorhousingjobs.com** targets the talent you seek.

seniorhousingjobs  .com

**HIRESMARTER**  
Go Niche

-  Advertise Jobs
-  Search Resumes
-  Promote your Employment Brand

**877.745.6272**

**info@seniorhousingjobs.com**

# Senior Housing Jobs

## Profile

Senior Housing Jobs is a niche career site dedicated to Senior Housing, Long-Term Care and Assisted Living. We are the industry's premier Internet destination for connecting active and passive job seekers with employers and recruiters.



Founded in 2003, Senior Housing Jobs has become a market leader in the online recruitment marketplace. Our unique job board offers a cost-effective recruitment option for Senior Housing employers and recruiters by incorporating cutting-edge technology with a strong, industry-focused marketing and advertising presence.

Senior Housing Jobs' mission is to create a virtual community that connects retirement housing recruiters and employers with qualified, industry-specific job seekers through our recruitment website, job fairs and unique technology advancements.

## Benefits of a Niche Job Site

Tired of sifting through the tons of unqualified resumes you get from large job boards? To ensure your job postings have the best possible chance of success, post them on Senior Housing Jobs.

Advertising where your target audience hangs out just makes sense! Posting your jobs on Senior Housing Jobs allows you to reach active and passive job seekers that are already knowledgeable in retirement housing, long-term care and assisted living.

For the best Employment Branding we offer a variety of services including job postings, resume database search, job upgrades, banner advertisements and more.

## Recruiters/Employers

Want Better Results from Your Recruiting Efforts? Get Started with Senior Housing Jobs Today.

It's a known fact that niche job sites produce better results than large generic career sites. IMPROVE THE WAY YOU HIRE today with Senior Housing Jobs. We offer access to thousands of senior living job seekers and a host of tools to make online recruiting quick, effortless, and successful. By posting jobs on Senior Housing Jobs you will:

- Attract active and passive job seekers to your job postings
- Save your time and money. Less response than the big boards means less time shuffling through the useless resumes.
- Promote your employment brand by exposing your company name/logo to thousands of eldercare professionals.
- Drive web traffic to your career site. 79% of job seekers will check out a company's website before responding to a job posting. That means that each posting on Senior Housing Jobs drives web traffic to your site. If they don't see your job posting, they may never visit your site. Advertising on Senior Housing Jobs is like a magnet for future employees.

## FastFacts

**Address:** PO Box 2790,  
North Conway, NH 03860  
**Telephone:** 877-745-6272  
**Fax:** 603-356-8244  
**E-mail:** Info@SeniorHousingJobs.com  
**Web site:** www.SeniorHousingJobs.com  
**Presence:** USA, Canada  
**Average hits per month:** 301,000  
**Company type:** Private  
**Tax status:** For-profit  
**Date founded:** 2003  
**Services for Job Seekers:** Resume Posting, Job Search  
**Services for Employers & Recruiters:** Job Posting, Resume Search, Employment Branding

## Job seekers

Job Seekers can post a **resume, search jobs** and sign up for our **automated job agent** for FREE. All resumes are viewed as anonymous candidates so you won't jeopardize your current position. Want more exposure to your resume? Purchase a "Positions Wanted" ad to have your talents stand out from the crowd.

## Job postings

**A sampling of jobs posted:** SNF Administrator, Executive Director, Sales/Marketing Director, Regional Director, Vice President, CEO, DON, CFO, Sales Manager, VP of Sales

**Most prevalent job specialties posted:** CCRC, Alz/Memory Care, Architecture/Design, Financial, Construction, Home Health, ALF, ILF, SNF/ Nursing Home, Marketing/PR Firm, Medical Products, Pharmacy Services, Software/Technology, Safety/Security.

**Distribution:** USA, Canada

**Fee to post a job:** \$199/posting, purchase in bulk for discount

**Posting period:** 45 days

**Source of postings:** Eldercare Employers, Owners, Operators, and Recruitment Agencies

**Job Upgrades and Resumes Search Available:** YES

**Number of Resumes in database:** 1,900

**Fee To View Resumes:** NONE

**Fee To Purchase Resumes:** \$45

**Automated Resume Agent:** YES

## Other services

- Company Videos and Pod Casting - brings employment opportunities to life
- The Senior Housing Career News - FREE sign up
- Job Seer Career Advice Center
- Banner advertising: YES
- Status report on ads: YES
- More to come!



*Do you love making  
a difference?*

*Do you recognize  
the “whole” person?*



*Be a part of the Silverado magic!*

At Silverado Senior Living, we take pride in our operating philosophy: *Love is greater than fear.* Our philosophy is embodied by every Silverado associate. We know that how we treat one another extends to how we serve our community residents, home care clients and hospice patients. It allows us to raise the standard of care for people with memory-impairing diseases such as Alzheimer's and others.



*Offering great benefits and work environment:*

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& Training

*Join our Silverado Team!*

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Call 888.328.5400 – Fax resume to: 888.328.2003

Email resume to: [recruiting@silveradosenior.com](mailto:recruiting@silveradosenior.com)

# Silverado Senior Living

---

## Profile

**Vision:** To give life to those affected by Alzheimer's and other memory impairing diseases.



**Mission:** To maximize the quality of life for our residents, clients and their families.

**Core Purpose:** To care for people afflicted with chronic disease, by maximizing their quality of life at all stages and helping their family and loved ones understand and transition through the disease and the grieving process to be one with their loved ones.

**Core Values:** To recognize value and build the human spirit in all we do.

---

## Company History

In 1996 the business plan for Silverado Senior Living was adopted by its three cofounders, Loren Shook, James P. Smith and Steve Winner. They each brought their own optimism and expertise, and between them began their mission of changing the way the world views and treats Alzheimer's and other memory impairing diseases. In 1997, the doors first opened at the Silverado assisted living community in Escondido, CA.

- **Range of eldercare services:** Silverado Senior Living, Silverado Hospice, Silverado At Home
- **States served:** California, Utah, Texas and Arizona
- **Beds:** 10 to 150 beds
- **Notable achievements:** Best Places to work in Texas
  - Orange County 10 Best Companies to Work For
  - ALFA Staff Hero of the Year
  - Hospice Caregiver of the Year
  - NALNA Nurse of the Year
  - ALFA Nurse Hero of the Year
  - APA National Psychologically Healthy Workplace
  - Orange County Entrepreneur of the Year

### What attracts employees to your company?

- Great Pay and Benefits
- Award-winning Employer
- Advancement Opportunities
- Flexibility
- Leadership Development & Training

---

## Learning and Development

Silverado is proud to support opportunities for training and development to its associates. An Educational Assistance Policy is available to full time associates in good standing.

---

## FastFacts

**Address:** 27123 Calle Arroyo  
San Juan Capistrano, CA 92675

**Telephone:** (949) 240-7200

**Fax:** (949) 240-7278

**E-mail:** recruiting@silveradosenior.com

**Web site:** www.silveradosenior.com

**Presence:** 36 communities and offices

**Employees:** 2,500, Employee Titles Currently In High Demand: Director of Nursing, Executive

Director/Administrator

**Company type:** Private

**Tax status:** For-profit

**What percent of facilities does your firm own:** 100 %

**What percent of facilities does your**

**firm manage:** 100%

**Date founded:** 1997

---

## Culture

The operating philosophy of Silverado Senior Living is "Love is greater than fear." It is founded on the principles of servicing the needs of residents, their families, the staff and the referral parties in a values driven organizational structure, utilizing state-of-the-art caregiving treatment techniques, organization and management and knowledge of our population's needs.

At Silverado, we will provide the staff a well organized, positive and motivating work environment, which promotes independence and decision making at the point of service, values input and provides extensive staff training and a competitive compensation package.

---

## Employee Benefits

We sincerely appreciate our associates. Silverado Senior Living offers competitive pay paired with comprehensive benefits including medical, dental, vision and life insurance, 401(k) with an employer match, as well as generous paid vacation and sick time. We also offer pet insurance, long term care insurance and tuition reimbursement.

---

## Unique Offerings

Silverado encourages all associates to bring both their pets and kids into work with them.

# WE ARE AGING



## THE UNIVERSITY OF SOUTHERN CALIFORNIA DAVIS SCHOOL OF GERONTOLOGY

- By 2050, more than 80 million Americans will be over the age of 65.
- Opportunities in the aging sector are expected to increase over 36% in the next eight years.
- Our graduate degree level courses are offered residually or through the internet. Perfect for busy professionals.
- Due to our small class sizes all students, even those attending online, benefit from the personal attention of our world-renowned faculty.
- Alumni from the USC Davis School occupy leadership positions across the nation.
- With over half a million dollars in scholarships available for qualified applicants, most graduate students receive some form of financial support.



# USC Davis School of Gerontology

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## School Profile

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The University of Southern California Davis School of Gerontology is devoted entirely to the study of lifespan issues and aging. Our primary goals are to create new opportunities for older people; to conduct research on the issues affecting the minds, bodies and spirits of older adults; to build a wealth of knowledge about the aging process; and to educate and train dedicated men and women to provide the field of aging with leadership in the 21st century. We were the world's first school of gerontology and offer the first online Master of Arts in Gerontology degree in the nation. The USC Davis School remains the leader in aging education with a world-class faculty from a variety of disciplines, including biology, psychology, sociology, policy, economics, urban planning and medicine, offering students an in-depth and interdisciplinary approach to higher education.

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## Learning and Development

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Graduate degrees offered include a Master of Science in Gerontology (M.S.G.), Graduate Level Certificate in Gerontology, online Master of Arts in Gerontology (M.A.G.), online Master of Long Term Care Administration (M.L.T.C.A.), online Graduate Level Certificate in Gerontology and Doctor of Philosophy in Gerontology.

These programs prepare graduates to assume professional leadership positions in the delivery of services to older people and their families, the planning and evaluation of elder services and the administration of programs for older people.

Dual graduate degrees also are offered in gerontology and business administration, dentistry, law, public administration, health administration, planning, social work, pharmacy and Jewish communal services.

---

## Fast Facts

---

**Address:** 3715 S. McClintock Ave.,  
University Park Campus  
Los Angeles, CA 90089-0191  
**Telephone:** (213) 740-5156  
**Fax:** (213) 740-0792  
**E-mail:** [ldsgero@usc.edu](mailto:ldsgero@usc.edu)  
**Web site:** [www.usc.edu/gero](http://www.usc.edu/gero)  
**Date founded:** 1975

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## Culture

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The University of Southern California provides a unique backdrop for gerontology students. With a global reputation for excellence, USC enrolls more international students than any other academic institution in the United States, and its unique demographic makeup enables USC students to learn about cultures from around the world. The USC Davis School provides unmatched breadth and specialization in its graduate programs, offering online degrees and dual degrees that will help meet future needs of the increasing elder population.

---

## Student Benefits

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Students are provided a wide array of degree options and can attend classes on campus or enroll in a variety of online programs. All courses in our residential master's level graduate program are now available over the Internet. Students are instructed by acclaimed faculty members and benefit from aging career opportunities unmatched by other institutions.

---

## Unique Offerings

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The online Master of Arts in Gerontology (M.A.G.) program was the first of its kind and its alumni can be found in leadership positions in aging throughout the state and nation. The online Master of Long Term Care Administration (M.L.T.C.A.) program offers the latest management principles of long-term care organizations, accounting and financial reporting for healthcare professionals.

# Windsor Executive Search

## Senior Housing Recruitment

www.WindsorES.com

### For Profit

assisted living  
senior housing

### Not-For-Profit

home health  
independent living

### Eldercare

CCRC  
sales

### Products

emergency response  
software

### Services

food service  
marketing



*your recruiters*  
**your partners**

**Windsor Executive Search** is a leading provider of national recruitment services for Senior Housing. Whether you run a CCRC, own a med cart manufacturing firm, or manage an Architectural Firm specializing in the design of senior communities; **Windsor Executive Search** can help you with your hiring needs.

Since 2000, Windsor Executive Search has placed over 250 senior living professionals in a wide range of positions:

- \* **Operations**
- \* **Food Service**
- \* **Sales & Marketing**
- \* **Technology**
- \* **Finance**

**Referrals are how we have built our business**, and we would love the opportunity to earn yours. Call us today to find out how we can deliver top talent to your organization.

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Professional

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Specialists in Eldercare Recruitment



# Windsor Executive Search

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## Profile

Windsor Executive Search is a boutique search firm that provides the highest professional standards in executive search within Senior Living. We provide companies with the means to achieve their missions by bringing them the leaders of today, so that together they will build better tomorrows.



Our clients are both for-profit and not-for-profit organizations dedicated to providing products or services to the Eldercare industry. As a client of Windsor Executive Search you will benefit from our experience, industry focus, and extreme professionalism.

---

## Executive Search

Since 2000, our recruiters have placed over 250 top-level executive and middle management professionals in a variety of disciplines throughout the US. Our clients range from a stand-alone CCRC, to a medium-sized company that manufactures and sells emergency response systems, to a large company that owns and operates hundreds of retirement communities.

- Operations
- Sales/Marketing
- Consulting
- Financial Services
- Food service
- Technology
- and more

Our recruiters specialize in the leadership, relationship and results business. Clients know that what sets Windsor Executive Search apart is our integrity and our exacting attention to detail. We work one-on-one with clients to develop mutually satisfying, lasting partnerships. This enables us to better anticipate their needs in the future.

We adhere to a time-proven process to ensure each hiring decision is a win-win solution for all parties involved. Acting as Talent Scouts for our clients enables us to find ideal candidates in a timely manner, while ensuring they do not spend their valuable time and resources sifting through a mountain of résumés.

---

## FastFacts

**Address:** PO Box 2790  
North Conway, NH 03860  
**Telephone:** (866) 383-8211  
**E-mail:** Steffani@WindsorES.com  
**Web site:** www.WindsorES.com  
**Presence:** National executive search of Senior Living professionals  
**Employees:** Approximate number of Recruiting Partners/Employees: 4  
**Company type:** Private  
**Tax status:** For-profit  
**Date founded:** 2000  
**Services for operators:** Recruitment and Recruitment Consulting services for Senior Living/Retirement Housing

---

## Consulting Services

Perhaps you don't need to hire a search firm for the entire hiring process. Windsor Executive Search offers a variety of consulting services to help connect you with the right employee. Our consulting services range from limited to comprehensive.

Consulting Services:

- Resume sourcing
- Candidate pre-qualifying
- Reference checks
- Recruitment advertising
- On-site recruitment
- On-site recruitment training and support services

Windsor Executive Search will work with your staffing team to enhance your recruitment systems and bring your staffing functions to its ultimate performance level.

---

## A Search Firm Above the Ordinary

Because Windsor Executive Search is a small, boutique search firm, we offer the personal touch and the flexibility you will not find in a large search firm. Call us today to discuss your hiring needs.

### Our clients know

It's about people...  
It's about relationships...  
It's about solutions.

Referrals are how we have built our business, and we would love the opportunity to earn yours.

## Companies at a glance

**Bellevue University**  
1000 Galvin Road South  
Bellevue, NE 68005  
(800) 756-7920  
www.bellevue.edu/info/  
healthcare

**Career Strategies**  
3435 Wilshire Blvd, Suite 1700  
Los Angeles, CA 90010  
(800) 959-5950  
www.csi4jobs.com

**LeaderStat**  
(Ohio Office)  
8181 Worthington Road  
Westerville, OH 43082  
(877) 699-7828  
www.leaderstat.com

**LeaderStat**  
(Arizona Office)  
8151 E. Evans Road, Suite D8  
Scottsdale, AZ 85260  
(888) 781-0882  
www.leaderstat.com

**Senior Housing Jobs**  
PO Box 2790  
North Conway, NH 03860  
(877) 745-6272  
www.SeniorHousingJobs.com

**Silverchair Learning Systems**  
107 Edinburgh South  
Suite 206  
Cary, NC 27511  
(866) 805-7575  
www.silverchairlearning.com

**Silverado Senior Living**  
Corporate Office  
27123 Calle Arroyo  
San Juan Capistrano, CA 92675  
(949) 240-7200  
www.silveradosenior.com

**University of  
Southern California  
Davis School of Gerontology**  
3715 S. McClintock Ave  
University Park Campus  
Los Angeles, CA 90089  
(213)740-5156  
www.usc.edu/gero

**Windsor Executive Search**  
PO Box 2790  
North Conway, NH 03860  
(866) 383-8211  
www.WindsorES.com

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# Finding that right fit



## McKnight's



**GOLD AWARD**  
Best Online News Section 2008  
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Whether you're looking to fill a position or your next career move, McKnight's can help.

Simply go to [www.mcknights.com](http://www.mcknights.com).

There you can see what positions are available. You can also post your resume for employers to consider. If it's time to aim higher, McKnight's can help you get there.

**Best of all, it's all free.**



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Find out why over 246,000 users in 3,500 facilities in 48 states use Silverchair—we can help you provide more effective orientation and annual training, delivered consistently across your organization, with testing to prove competency and record keeping to manage compliance.

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*"The staff love doing their Silverchair in-services... They like the interaction and simplicity of the program. It is great to see how well they retain the information."*

- Jen Prickett, RN  
Classic Residence by Hyatt



# CAREER STRATEGIES INC

## LONG TERM CARE

### NATIONWIDE RECRUITING

#### LONG TERM CARE RECRUITING PARTNERSHIP

The Long Term Care Division of Career Strategies, an Executive Search Firm, is headed by a team of seasoned professionals. Our specialty is uncovering and developing relationships with dynamic leaders throughout the United States in Long Term Care who are currently making an impact in the industry.

#### CAREER STRATEGIES' LONG TERM CARE SERVICES DIVISION

#### THE RIGHT PEOPLE-RIGHT NOW

#### PROFESSIONALS WHO RECOGNIZE YOUR NEEDS AND GOALS

Our professional consultants are specialists who have in-depth experience working with health care professionals.

By understanding your company's philosophy and goals, we will only bring to you those people who can make a difference in your organization.

As we talk to professionals, we match their passion with a company whose vision will be enhanced by a person with similar goals. We search for excellence.

#### THE BEST PROFESSIONAL TALENT

ADMINISTRATOR/ EXECUTIVE DIRECTOR	MEDICARE SPECIALIST	QA/NURSE CONSULTANT	CONTROLLER/CFO
DIRECTOR OF NURSING	REGISTERED DIETICIAN	CASE MANAGER	REGIONAL DIRECTOR OF OPERATIONS
ASSISTANT DIRECTOR OF NURSING	SOCIAL SERVICE DIRECTOR	DIRECTOR OF MARKETING	VP OF OPERATIONS
DIRECTOR OF REHABILITATION SERVICES	EDUCATOR/ IN-SERVICE DIRECTOR	DIRECTOR OF ADMISSIONS	SENIOR VP OF OPERATIONS
SUBACUTE UNIT DIRECTOR	STAFF DEVELOPMENT COORDINATOR	BUSINESS OFFICE MANAGER	CEO/COO
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		FINANCIAL ANALYST	MDS / CASE MIX
		DIRECTOR OF FINANCE	

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