Schedule F.1

Health and Human Services System
Strategic Staffing Analysis and Workforce Plan

for the Planning Period 2017–2021
Executive Summary

The Health and Human Services (HHS) System Strategic Staffing Analysis and Workforce Plan is an integral part of HHS’ staffing plan. Workforce planning is a business necessity due to a number of factors, including:

♦ constraints on funding;
♦ increasing demand for HHS services;
♦ increasing number of current employees reaching retirement age resulting in fewer, less experienced workers available as replacements; and
♦ increasing competition for highly skilled employees.

HHS agencies are proactively addressing this challenge by preparing for the future and reducing risks. Designed for flexibility, the HHS System Strategic Staffing Analysis and Workforce Plan allows HHS executive management to make staffing adjustments according to the changing needs of HHS agencies.

State leaders in Texas recognize the importance of workforce planning. As part of their strategic plans, state agencies are required under the Texas Government Code, Section 2056.0021, to develop a workforce plan in accordance with the guidelines developed by the State Auditor’s Office (SAO). To meet these requirements, this Schedule attachment to the HHS System Strategic Plan for the Fiscal Years 2017–2021 analyzes the following key elements for the entire HHS System:

♦ Current Workforce Demographics – Describes how many employees work for the HHS System and HHS agencies, where they work, what they are paid, how many of them are return-to-work retirees, how many have left HHS, how many may retire, and whether or not minority groups are underutilized when compared to the state Civilian Labor Force (CLF) for Equal Employment Opportunity (EEO) job categories. The workforce is examined by gender, race, age and length of state service.

♦ Expected Workforce Challenges – Describes anticipated staffing needs based on population trends, projected job growth and other demographic trends. A detailed examination of each identified shortage occupation was conducted to identify and understand retention and recruitment problems.

♦ Strategies to Meet Workforce Needs – Describes recruitment and retention strategies that address expected workforce challenges for shortage occupation jobs.

The following is the detailed HHS System Strategic Staffing Analysis and Workforce Plan.
HEALTH AND HUMAN SERVICES SYSTEM STRATEGIC STAFFING ANALYSIS AND WORKFORCE PLAN

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<th>Page</th>
</tr>
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<tbody>
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<td>F.1-49</td>
</tr>
<tr>
<td>Licensed Vocational Nurses (LVNs)</td>
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<td>F.1-57</td>
</tr>
<tr>
<td>Dentists</td>
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</tr>
<tr>
<td>Physicians</td>
<td>F.1-61</td>
</tr>
<tr>
<td>Psychiatrists</td>
<td>F.1-65</td>
</tr>
<tr>
<td>Psychologists</td>
<td>F.1-68</td>
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<tr>
<td>Epidemiologists</td>
<td>F.1-69</td>
</tr>
<tr>
<td>Sanitarians</td>
<td>F.1-71</td>
</tr>
<tr>
<td>Laboratory Staff</td>
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</tbody>
</table>

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*Prepared by: System Support Services
Human Resources Office*
HEALTH AND HUMAN SERVICES SYSTEM

OVERVIEW

The 78th Legislature Transformation

The 78th Legislature (Regular Session, 2003) transformed the Health and Human Services (HHS) agencies listed in Article II of the General Appropriations Act by creating an integrated, effective and accessible HHS System that protects public health and brings high-quality services and support to Texans in need.

The HHS System consists of the following five agencies:

♦ Health and Human Services Commission (HHSC). Includes providing leadership to all HHS agencies, administering programs previously administered by the Texas Department of Human Services and oversight of HHS agencies. Began services in 1991.

♦ Department of Family and Protective Services (DFPS). Includes all programs previously administered by the Department of Protective and Regulatory Services. Began services on February 1, 2004.


♦ Department of Aging and Disability Services (DADS). Includes intellectual and developmental disability and state supported living center programs previously administered by the Department of Mental Health and Mental Retardation, community care and nursing home services and long-term care regulatory programs of the Department of Human Services and aging services programs of the Texas Department of Aging. Began services on September 1, 2004.

♦ Department of State Health Services (DSHS). Includes programs previously administered by the Texas Department of Health, the Texas Commission on Alcohol and Drug Abuse, the Health Care Information Council and mental-health community services and state hospital programs from the Department of Mental Health and Mental Retardation. Began services on September 1, 2004.

The 84th Legislature Transformation

In 2013, the Sunset Commission began its almost two-year analysis, the first formal review of the previous consolidation. The findings and recommendations of the Sunset review formed the basis for the 84th Texas Legislature’s directive to transform the HHS system. With the passage of that legislation, HHS was given an opportunity to develop a more fully streamlined, efficient system that more effectively
provides services and benefits. Senate Bill 200 outlined a phased approach to this restructuring.

The first phase transfers the following programs and functions to HHSC by September 1, 2016:
♦ select functions at DARS,
♦ client services at DADS and DSHS, and
♦ administrative services that support those respective HHS core services.

As a result of this transfer and the transfer of other programs to the Texas Workforce Commission (TWC), DARS will be abolished on September 1, 2016. Additionally, the Nurse Family Partnership and Texas Home Visiting programs transfer from HHSC to the DFPS, which will continue its focus on protective services.

In the second phase, regulatory programs as well as management of the operations of the state supported living centers and state hospitals will transfer to HHSC by September 1, 2017, and DADS will be abolished. After these transfers, DSHS’ streamlined structure will focus on its core public health functions.

HHS MISSION
Improving the health, safety and well-being of Texans through good stewardship of public resources.

HHS VISION
Making a difference in the lives of the people we serve.

HHS VALUES
♦ Accountability. We operate in a manner that reflects honesty, integrity and reliability.
♦ Collaboration. We work with clients, stakeholders, public and private partners, elected officials and our employees to make informed decisions and achieve excellence in service design and delivery.
♦ Client-focused. We exist because people have needs, and we respect each and every person.
♦ Independence. Our services and supports allow clients to reach their full potential.
♦ Stewardship. We are focused on the appropriate use of resources entrusted to our care and use them efficiently, effectively and in a manner that builds public trust.
♦ Transparency. We build confidence in our operations by being open, inclusive and holding ourselves accountable.
♦ Diversity. We offer programs and services that value and respect the diversity of the State of Texas.
WORKFORCE DEMOGRAPHICS

With a total of 54,018 full-time and part-time employees, the HHS workforce has increased by about one percent (545 employees) in the period from August 31, 2013 to August 31, 2015.¹

Figure 1: HHS System Workforce for FY 13 - FY 15

Figure 2: HHS System Workforce for FY 15

¹HHSAS Database, as of 8/31/15.
Job Families

Approximately 91 percent of HHS employees (49,219 employees) work in 20 job families.²

<table>
<thead>
<tr>
<th>Job Family</th>
<th>Number of Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Care Workers³</td>
<td>9,115</td>
</tr>
<tr>
<td>Human Services Specialists</td>
<td>7,003</td>
</tr>
<tr>
<td>Protective Services Workers⁴</td>
<td>6,596</td>
</tr>
<tr>
<td>Eligibility Workers⁵</td>
<td>5,995</td>
</tr>
<tr>
<td>Clerical Workers</td>
<td>5,399</td>
</tr>
<tr>
<td>Program Specialists</td>
<td>2,969</td>
</tr>
<tr>
<td>Registered Nurses (RNs)⁶</td>
<td>1,967</td>
</tr>
<tr>
<td>Manager</td>
<td>1,249</td>
</tr>
<tr>
<td>Licensed Vocational Nurse (LVNs)</td>
<td>1,028</td>
</tr>
<tr>
<td>Rehabilitation Technicians</td>
<td>1,010</td>
</tr>
<tr>
<td>CPS Supervisors</td>
<td>1,009</td>
</tr>
<tr>
<td>Food Service Workers⁷</td>
<td>925</td>
</tr>
<tr>
<td>System Analysts</td>
<td>883</td>
</tr>
<tr>
<td>Human Services Technicians</td>
<td>735</td>
</tr>
<tr>
<td>Custodians</td>
<td>707</td>
</tr>
<tr>
<td>Maintenance Workers</td>
<td>581</td>
</tr>
<tr>
<td>Program Supervisors</td>
<td>576</td>
</tr>
<tr>
<td>Inspectors</td>
<td>569</td>
</tr>
<tr>
<td>Claims Examiners</td>
<td>460</td>
</tr>
<tr>
<td>Accountants</td>
<td>443</td>
</tr>
</tbody>
</table>

Gender

Most HHS employees are female, making up about 75 percent of the HHS workforce.⁸ This breakdown is consistent across all HHS agencies.⁹

² HHSAS Database, as of 8/31/15.
³ Direct care workers include direct support professionals and psychiatric nursing assistants.
⁴ Protective service workers include child protective service (CPS) specialists, CPS investigators, adult protective service (APS) specialists, state wide intake (SWI) specialists, Child Care Licensing (CCL) and residential licensing services (RCCL) specialists.
⁵ Eligibility workers include Texas works advisors, hospital based workers and medical eligibility specialists.
⁶ RNs include public health nurses.
⁷ Food service workers include food service workers, managers and cooks.
⁸ HHSAS Database, as of 8/31/15.
⁹ Ibid.
### Table 2: HHS System Workforce Gender for FY 13 – FY 15

<table>
<thead>
<tr>
<th>Gender</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>25.1%</td>
<td>24.9%</td>
<td>24.9%</td>
</tr>
<tr>
<td>Female</td>
<td>74.9%</td>
<td>75.1%</td>
<td>75.1%</td>
</tr>
</tbody>
</table>

### Figure 3: HHS System Workforce by Gender for FY 15

- Male: 25%
- Female: 75%

### Table 3: HHS Agencies by Gender

<table>
<thead>
<tr>
<th>Agency</th>
<th>Percentage Male</th>
<th>Percentage Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHSC</td>
<td>21.2%</td>
<td>78.8%</td>
</tr>
<tr>
<td>DFPS</td>
<td>15.8%</td>
<td>84.2%</td>
</tr>
<tr>
<td>DSHS</td>
<td>36.0%</td>
<td>64.0%</td>
</tr>
<tr>
<td>DARS</td>
<td>24.4%</td>
<td>75.6%</td>
</tr>
<tr>
<td>DADS</td>
<td>26.2%</td>
<td>73.8%</td>
</tr>
</tbody>
</table>

### Race

The workforce is diverse, with approximately 39 percent White, 30 percent Hispanic, 28 percent Black, and three percent Asian and Native American. This breakdown is consistent across all HHS agencies.\(^{10}\)

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\(^{10}\) HHSAS Database, as of 8/31/15.
Table 4: HHS System Workforce Race for FY 13 – FY 15\textsuperscript{11}

<table>
<thead>
<tr>
<th>Race</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>40.6%</td>
<td>39.9%</td>
<td>39.4%</td>
</tr>
<tr>
<td>Black</td>
<td>27.4%</td>
<td>27.9%</td>
<td>28.1%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>29.3%</td>
<td>29.3%</td>
<td>29.6%</td>
</tr>
<tr>
<td>Native American</td>
<td>0.6%</td>
<td>0.6%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Asian</td>
<td>2.1%</td>
<td>2.3%</td>
<td>2.3%</td>
</tr>
</tbody>
</table>

Figure 4: HHS System Workforce by Race for FY 15

Table 5: HHS Agencies by Race\textsuperscript{12}

<table>
<thead>
<tr>
<th>Agency</th>
<th>Percentage White</th>
<th>Percentage Black</th>
<th>Percentage Hispanic</th>
<th>Percentage Native American</th>
<th>Percentage Asian</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHSC</td>
<td>30.6%</td>
<td>28.3%</td>
<td>38.6%</td>
<td>0.6%</td>
<td>1.9%</td>
</tr>
<tr>
<td>DFPS</td>
<td>39.7%</td>
<td>29.2%</td>
<td>29.1%</td>
<td>0.6%</td>
<td>1.3%</td>
</tr>
<tr>
<td>DSHS</td>
<td>48.8%</td>
<td>19.0%</td>
<td>28.4%</td>
<td>0.6%</td>
<td>3.3%</td>
</tr>
<tr>
<td>DARS</td>
<td>46.4%</td>
<td>22.7%</td>
<td>28.1%</td>
<td>0.7%</td>
<td>2.2%</td>
</tr>
<tr>
<td>DADS</td>
<td>37.5%</td>
<td>35.4%</td>
<td>24.0%</td>
<td>0.4%</td>
<td>2.7%</td>
</tr>
</tbody>
</table>

**Age**

The average age of an HHS worker is 43 years. This breakdown is consistent across all HHS agencies.\textsuperscript{13}

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\textsuperscript{11} Totals may not equal 100% due to rounding.
\textsuperscript{12} Ibid.
\textsuperscript{13} HHSAS Database, as of 8/31/15.
Table 6: HHS System Workforce Age for FY 13 – FY 15

<table>
<thead>
<tr>
<th>Age</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 30</td>
<td>16.3%</td>
<td>16.8%</td>
<td>16.4%</td>
</tr>
<tr>
<td>30-39</td>
<td>22.9%</td>
<td>23.5%</td>
<td>23.8%</td>
</tr>
<tr>
<td>40-49</td>
<td>26.1%</td>
<td>25.5%</td>
<td>25.1%</td>
</tr>
<tr>
<td>50-59</td>
<td>24.8%</td>
<td>24.2%</td>
<td>24.1%</td>
</tr>
<tr>
<td>Over 60</td>
<td>9.9%</td>
<td>10.1%</td>
<td>10.4%</td>
</tr>
</tbody>
</table>

Figure 5: HHS System Workforce by Age for FY 15

Average age: 43 yrs

Table 7: HHS Agencies by Age

<table>
<thead>
<tr>
<th>Agency</th>
<th>Percentage Under 30</th>
<th>Percentage 30-39</th>
<th>Percentage 40-49</th>
<th>Percentage 50-59</th>
<th>Percentage 60 and over</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHSC</td>
<td>10.6%</td>
<td>24.8%</td>
<td>29.7%</td>
<td>25.5%</td>
<td>9.4%</td>
</tr>
<tr>
<td>DFPS</td>
<td>20.5%</td>
<td>32.4%</td>
<td>24.8%</td>
<td>16.2%</td>
<td>6.2%</td>
</tr>
<tr>
<td>DSHS</td>
<td>16.0%</td>
<td>20.0%</td>
<td>22.9%</td>
<td>27.4%</td>
<td>13.7%</td>
</tr>
<tr>
<td>DARS</td>
<td>6.6%</td>
<td>20.0%</td>
<td>27.5%</td>
<td>30.6%</td>
<td>15.3%</td>
</tr>
<tr>
<td>DADS</td>
<td>20.1%</td>
<td>20.4%</td>
<td>23.2%</td>
<td>25.3%</td>
<td>11.0%</td>
</tr>
</tbody>
</table>

Utilization Analysis

Texas law requires that each state agency analyze its workforce and compare the number of Blacks, Hispanics and females employed by the agency to the available state Civilian Labor Force (CLF) for each job category.

14 Totals may not equal 100% due to rounding.
The utilization analysis was conducted for each HHS agency using the 80% Rule. This rule compares the actual number of employees to the expected number of employees based on the available state CLF for Black, Hispanic and female employees. For purposes of this analysis, a group is considered underutilized when the actual representation in the workforce is less than 80% of what the expected number would be based on the CLF.

The HHS Civil Rights Office (CRO) reviewed and conducted analyses for each individual agency’s workforce to determine where underutilization was identified.

The utilization analysis of the HHS agencies for fiscal year 2015 indicated underutilization in the DADS and DSHS workforce. The following table summarizes the results of the utilization analysis for the agencies of the HHS System.

<table>
<thead>
<tr>
<th>Job Category</th>
<th>HHS System</th>
<th>HHSC A</th>
<th>DFPS A</th>
<th>DARS</th>
<th>DADS</th>
<th>DSHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officials/Administrators</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Black Hispanic</td>
<td>No</td>
</tr>
<tr>
<td>Professionals</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Technicians</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>N/A</td>
<td>Hispanic</td>
<td>No</td>
</tr>
<tr>
<td>Protective Service</td>
<td>No</td>
<td>N/A</td>
<td>No</td>
<td>N/A</td>
<td>No</td>
<td>Hispanic Female</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Skilled Craft</td>
<td>Black Hispanic</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>Hispanic</td>
<td>Hispanic</td>
</tr>
<tr>
<td>Service Maintenance</td>
<td>Hispanic</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>Hispanic</td>
<td>Hispanic</td>
</tr>
</tbody>
</table>

Although underutilization was identified in the Skilled Craft job category, it should be noted that this job category comprises only 1.2 percent of the HHS System workforce.

The other job categories showing underutilization are Officials/Administrators, Technicians, Protective Service, and Service Maintenance.

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15 HHSAS Database, as of 8/31/15.
16 Data for underutilization percentages comes from Civilian Labor Force (CLF) Equal Employment Opportunity and Minority Hiring Practices Report Fiscal Years 2013-2014 published by Texas Workforce Commission, January 2015. Note: CLF data from TWC did not include Para-Professionals as a job category and did not indicate if members of that category were counted as part of any other categories - as a result, it is not included in the above chart.
17 “N/A” indicates the number of employees in these categories was too small (less than 30) to test any differences for statistical significance.
State Service

Approximately 38 percent of the workforce has 10 or more years of state service. Less than a quarter of the workforce have been with the state for less than two years. This breakdown is consistent across all HHS agencies.\(^\text{18}\)

<table>
<thead>
<tr>
<th>State Service</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>less than 2 years</td>
<td>20.9%</td>
<td>22.7%</td>
<td>21.1%</td>
</tr>
<tr>
<td>2-4 years</td>
<td>18.8%</td>
<td>17.9%</td>
<td>17.9%</td>
</tr>
<tr>
<td>5-9 years</td>
<td>20.4%</td>
<td>21.5%</td>
<td>22.5%</td>
</tr>
<tr>
<td>10 years or more</td>
<td>39.8%</td>
<td>37.9%</td>
<td>37.5%</td>
</tr>
</tbody>
</table>

\(^{18}\) HHSAS Database, as of 8/31/15.
\(^{19}\) Totals may not equal 100% due to rounding.
Table 10: HHS Agencies by Length of State Service

<table>
<thead>
<tr>
<th>Agency</th>
<th>Percentage</th>
<th>Percentage</th>
<th>Percentage</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Less than 2 yrs</td>
<td>2-4 yrs</td>
<td>5-9 yrs</td>
<td>10 yrs or more</td>
</tr>
<tr>
<td>HHSC</td>
<td>18.1%</td>
<td>16.7%</td>
<td>25.0%</td>
<td>40.2%</td>
</tr>
<tr>
<td>DFPS</td>
<td>24.7%</td>
<td>17.7%</td>
<td>25.2%</td>
<td>32.5%</td>
</tr>
<tr>
<td>DSHS</td>
<td>22.3%</td>
<td>17.9%</td>
<td>19.9%</td>
<td>39.9%</td>
</tr>
<tr>
<td>DARS</td>
<td>11.4%</td>
<td>10.9%</td>
<td>21.2%</td>
<td>56.5%</td>
</tr>
<tr>
<td>DADS</td>
<td>25.2%</td>
<td>20.5%</td>
<td>20.6%</td>
<td>33.8%</td>
</tr>
</tbody>
</table>

Average Annual Employee Salary

On average, the annual salary for an HHS System employee is $39,743. DARS has the highest average annual salary at $50,700 and DADS has the lowest at $35,100.\(^{21}\)\(^{22}\)

\(^{20}\) Totals may not equal 100% due to rounding.

\(^{21}\) HHSAS Database, as of 8/31/15.

\(^{22}\) DFPS average salary includes CPS Stipend pay (CPI).
Return-to-Work Retirees

HHS agencies routinely hire retirees to support both ongoing operational needs and to assist in implementing new initiatives. When recruiting for shortage occupations, special skill required positions or for special projects, retirees provide a good source of relevant program-specific knowledge. Rehired retirees constitute about four percent of the total HHS workforce. ²³

²³ HHSAS Database, as of 8/31/15.
HHS management understands that demographic trends over the next decade will increasingly impact recruitment from typical sources. Retired workers who have institutional knowledge will be needed to pass their expertise to others.

Dealing with this aging workforce will require HHS agencies to attract more people to apply for work, encourage them to work longer and help make them more productive. Creative strategies will need to be devised to keep older workers on the job, such as hiring retirees as temps; letting employees phase into retirement by working part time; having experienced workers mentor younger employees; promoting telecommuting, flexible hours and job-sharing; urging retirement-ready workers to take sabbaticals instead of stepping down; and/or offering bonuses to forestall retirement.

Legislative changes have posed additional challenges for recruiting these retired workers. Beginning September 1, 2009, the amount of time a retired employee must wait before returning to state employment increased from 30 to 90 days. In addition, state agencies that hire return-to-work retirees must pay the Employees Retirement System of Texas (ERS) a surcharge that is equal to the amount of the State’s retirement contribution for an active employee.

Of special concern to HHS is the possibility that the current practice of rehiring retirees may inhibit talented staff from moving into management or other senior positions. To address this problem and ensure that HHS considers and documents the selection of retirees, the System has adopted a requirement that before offering a supervisory position to a retiree, the hiring authority must document that:

♦ the retiree is the only candidate qualified to occupy the position; or is the best qualified candidate for the position; and
♦ the agency or program efficiency, quality, or effectiveness will improve if the retiree is selected, or deteriorate unless the retiree is selected.
TURNOVER

The Article II (HHS agencies) employee turnover rate during fiscal year 2015 was 21.2 percent, as identified by the State Auditor’s Office (SAO). When compared to the turnover rates of other General Appropriations Act articles, HHS agencies had the highest turnover rate.24

![Figure 10: Turnover Rate by Article for FY 15 (excludes inter-HHS agency transfers)](image)

Note: The SAO does not consider it a loss when employees transfer between HHS agencies.

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHS System</td>
<td>20.8%</td>
<td>20.5%</td>
<td>21.2%</td>
</tr>
</tbody>
</table>

DADS experienced the highest turnover rate (32.2 percent), with the lowest turnover rate at DARS (12.8 percent).25

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25 Ibid.
The SAO does not consider transfers between agencies as a loss to the state and therefore does not include this turnover in their calculations. However, when transfers between HHS agencies are taken into account, the HHS turnover rate increases from 21.2 percent to 23.3 percent. This additional turnover is significant because replacement costs are incurred by the agencies to process terminations and hires, to train new staff for different jobs and to recruit staff to replace those who have moved to another agency.26

Table 12: Turnover by HHS Agency for FY 15
(includes inter-HHS agency transfers)

<table>
<thead>
<tr>
<th>Agency</th>
<th>Average Annual Headcount</th>
<th>Total Separations</th>
<th>Turnover Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHSC</td>
<td>12,518</td>
<td>2,207</td>
<td>17.6%</td>
</tr>
<tr>
<td>DFPS</td>
<td>12,278</td>
<td>2,382</td>
<td>19.4%</td>
</tr>
<tr>
<td>DSHS</td>
<td>12,615</td>
<td>2,944</td>
<td>23.3%</td>
</tr>
<tr>
<td>DARS</td>
<td>2,967</td>
<td>380</td>
<td>12.8%</td>
</tr>
<tr>
<td>DADS</td>
<td>16,688</td>
<td>5,379</td>
<td>32.2%</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>57,066</strong></td>
<td><strong>13,292</strong></td>
<td><strong>23.3%</strong></td>
</tr>
</tbody>
</table>

Of the total losses during fiscal year 2015, approximately 79 percent were voluntary separations and 21 percent were involuntary separations.27 28 Voluntary includes resignation, transfer to another agency and retirement. Involuntary includes dismissal for cause, resignation in lieu of separation, reduction in force and separation at will.29

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27 Death accounted for .7% of separations.
28 State Auditor’s Office (SAO) FY 2015 Turnover Statistics.
### Table 13: Reason for Separation

<table>
<thead>
<tr>
<th>Reason</th>
<th>Separations</th>
<th>Percentage&lt;sup&gt;30&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Voluntary Separations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal reasons</td>
<td>7,840</td>
<td>59.0%</td>
</tr>
<tr>
<td>Transfer to another agency</td>
<td>1,203</td>
<td>9.0%</td>
</tr>
<tr>
<td>Retirement</td>
<td>1,396</td>
<td>10.5%</td>
</tr>
<tr>
<td><strong>Involuntary Separations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Termination at Will</td>
<td>51</td>
<td>0.4%</td>
</tr>
<tr>
<td>Resignation in Lieu</td>
<td>319</td>
<td>2.4%</td>
</tr>
<tr>
<td>Dismissal for Cause</td>
<td>2,400</td>
<td>18.1%</td>
</tr>
<tr>
<td>Reduction in Force</td>
<td>9</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

Certain job families have significantly higher turnover than other occupational series, including direct care workers<sup>31</sup> at 42.5 percent, licensed vocational nurses (LVNs) at 35.0 percent, food service workers<sup>32</sup> at 34.6 percent, dentists at 32.3 percent, and registered nurses<sup>33</sup> (RNs) at 26.7 percent.<sup>34</sup>

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<sup>30</sup> Death accounted for 0.6% of separations (76 separations).

<sup>31</sup> Direct care workers include DADS direct support professionals and DSHS psychiatric nursing assistants.

<sup>32</sup> Food service workers include food service workers, managers and cooks.

<sup>33</sup> RNs include public health nurses.

<sup>34</sup> HHSAS Database for FY 2015.
## Table 14: FY 15 Turnover for Significant Job Families

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Average Annual Headcount</th>
<th>Separations</th>
<th>Turnover Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Care Workers</td>
<td>10,252</td>
<td>4,353</td>
<td>42.5%</td>
</tr>
<tr>
<td>Licensed Vocational Nurses (LVNs)</td>
<td>1,148</td>
<td>402</td>
<td>35.0%</td>
</tr>
<tr>
<td>Food Service Workers</td>
<td>1,032</td>
<td>357</td>
<td>34.6%</td>
</tr>
<tr>
<td>Dentists</td>
<td>31</td>
<td>10</td>
<td>32.3%</td>
</tr>
<tr>
<td>Registered Nurses (RNs)</td>
<td>2,131</td>
<td>570</td>
<td>26.7%</td>
</tr>
<tr>
<td>Protective Services Workers</td>
<td>7,078</td>
<td>1,768</td>
<td>25.0%</td>
</tr>
<tr>
<td>Psychologists</td>
<td>258</td>
<td>64</td>
<td>24.8%</td>
</tr>
<tr>
<td>Epidemiologists</td>
<td>94</td>
<td>23</td>
<td>24.5%</td>
</tr>
<tr>
<td>Social Workers</td>
<td>204</td>
<td>47</td>
<td>23.0%</td>
</tr>
<tr>
<td>Physicians</td>
<td>95</td>
<td>21</td>
<td>22.1%</td>
</tr>
<tr>
<td>Psychiatrists</td>
<td>141</td>
<td>31</td>
<td>22.0%</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>100</td>
<td>20</td>
<td>20.0%</td>
</tr>
<tr>
<td>Eligibility Workers</td>
<td>6,348</td>
<td>1,262</td>
<td>19.9%</td>
</tr>
<tr>
<td>Laboratory Technicians</td>
<td>55</td>
<td>9</td>
<td>16.4%</td>
</tr>
<tr>
<td>IG Investigators</td>
<td>247</td>
<td>39</td>
<td>15.8%</td>
</tr>
<tr>
<td>Medical Technologists</td>
<td>70</td>
<td>11</td>
<td>15.7%</td>
</tr>
<tr>
<td>Inspector General's Office (IG) Auditors</td>
<td>105</td>
<td>15</td>
<td>14.3%</td>
</tr>
<tr>
<td>Microbiologists</td>
<td>137</td>
<td>19</td>
<td>13.9%</td>
</tr>
<tr>
<td>Claims Examiners</td>
<td>478</td>
<td>65</td>
<td>13.6%</td>
</tr>
<tr>
<td>Registered Therapists</td>
<td>275</td>
<td>36</td>
<td>13.1%</td>
</tr>
<tr>
<td>Nurse Practitioners and Physician Assistants</td>
<td>50</td>
<td>6</td>
<td>12.0%</td>
</tr>
<tr>
<td>Sanitarians</td>
<td>125</td>
<td>13</td>
<td>10.4%</td>
</tr>
<tr>
<td>Chemists</td>
<td>61</td>
<td>6</td>
<td>9.8%</td>
</tr>
</tbody>
</table>

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35 Turnover is calculated as follows: The total number of employees who terminated during the period divided by the average number of employees on the last day of each quarter in the period plus the employees that terminated during the quarter times 100 to produce a percentage.

36 Direct care workers include direct support professionals and psychiatric nursing assistants.

37 Food service workers include food service workers, managers and cooks.

38 RNs include public health nurses.

39 Protective service workers include child protective service (CPS) specialists, CPS investigators, adult protective service (APS) specialists, state wide intake (SWI) specialists, Child Care Licensing (CCL) and residential licensing services (RCCL) specialists.

40 Includes psychologists, behavioral health specialists, and behavioral analysts.
RETIREEMENT PROJECTIONS

Currently, about 12 percent of the HHS workforce is eligible to retire and leave state employment. About two percent of the eligible employees retire each fiscal year. If this trend continues, approximately 10 percent of the current workforce is expected to retire in the next five years.41

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Retirement Losses</th>
<th>Retirement Turnover Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>1,301</td>
<td>2.2%</td>
</tr>
<tr>
<td>2012</td>
<td>1,346</td>
<td>2.4%</td>
</tr>
<tr>
<td>2013</td>
<td>1,444</td>
<td>2.6%</td>
</tr>
<tr>
<td>2014</td>
<td>1,390</td>
<td>2.4%</td>
</tr>
<tr>
<td>2015</td>
<td>1,396</td>
<td>2.4%</td>
</tr>
</tbody>
</table>

The loss of this significant portion of the workforce means the HHS agencies will lose some of their most knowledgeable workers, including many employees in key positions. Effective succession planning and employee development will be critical in ensuring there are qualified individuals who can replace those leaving state service.
CRITICAL WORKFORCE SKILLS

The current climate of the information age, advances in technology, increasing population for the state, consolidation of services, right-sizing and outsourcing will continue to place increased emphasis on the demand for well-trained and skilled staff.

The outsourcing and self-service automation of major HR functions, such as employee selection, have made it critical for HHS managers and employees to improve and commit to a continual learning of human resource policy, employee development, conflict resolution, time management, project management and automation skills.

It is important for HHS to employ professionals who have the skills necessary for the development, implementation and evaluation of the health and human services programs. These skills include:
- Analytic/assessment skills;
- Policy development/program planning skills;
- Communication skills;
- Cultural competency skills;
- Basic public health sciences skills;
- Financial planning and management skills;
- Contract management skills; and
- Leadership and systems-thinking skills.

As the Spanish speaking population in Texas increases, there will be an increased need for employees with bilingual skills, especially Spanish-English proficiency.

In addition, most management positions require program knowledge and the majority of these jobs are filled through the promotion of current employees. As HHS continues to lose tenured staff, effective training will be needed to ensure that current employees develop the skills necessary to transfer into management positions.

To promote this staff development, HHS must continue to grow the skills and talents of managers as part of a plan for succession. HHS has demonstrated this belief by establishing a HHS Leadership Academy, a formalized interagency training and mentoring program that provides opportunities to enhance the growth of high-potential managers as they take on greater responsibility in positions of leadership. The primary goals of the academy are to:
- prepare managers to take on higher and broader roles and responsibilities;
- provide opportunities for managers to better understand critical management issues;
- provide opportunities for managers to participate and contribute while learning; and
♦ create a culture of collaborative leaders across the HHS system.

Through this planned development of management skills and the careful selection of qualified staff, HHS will continue to meet the challenges posed by increased retirements.
ENVIRONMENTAL ASSESSMENT

The Texas Economy
In 2011, the Texas economy emerged from the worldwide recession. Pre-recession Texas employment peaked at 10,639,900 jobs in 2008, a level that was surpassed by November of 2011. By January 2016, Texas added an additional 1,322,600 jobs.42

The Comptroller’s office reported that in 2014, the Texas’ real gross domestic product grew by 5.2 percent (compared to 2.4 percent for the U.S.). This continued economic recovery could have a profound impact on the recruitment and retention challenges facing HHS.43

Poverty in Texas
As the number of families living in poverty increases for the state, the demand for services provided by the HHS System will also increase.

The U.S. Department of Health and Human Services defined the poverty level for 2015 according to household/family size as follows:
♦ $24,250 or less for a family of four;
♦ $20,090 or less for a family of three;
♦ $15,930 or less for a family of two; and
♦ $11,770 or less for individuals.44

It is estimated that 17.2 percent of Texas residents live in families with annual incomes below the poverty level. This rate is slightly higher than the national poverty rate of 14.8 percent.45 46

Unemployment
Another factor that directly impacts the demand for HHS System services is unemployment. In Texas, the August 2015 statewide unemployment rate was 4.4 percent, below the national rate of 5.1 percent.47 48

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43 Ibid.
45 U.S. Census Bureau: State and County Quickfacts, webpage http://quickfacts.census.gov/qfd/states/48000.html, last accessed on 4/20/16.
46 U.S. Census Bureau: State and County Quickfacts, webpage http://www.census.gov/quickfacts/table/PST045215/00, last accessed on 4/20/16.
Other Significant Factors

With over 27 million residents, Texas is one of the faster growing states in the nation. In just one period, April 1, 2010 to July 1, 2015, the population of Texas increased by more than two million, a 9.2 percent increase. The Texas population is expected to continue to increase. By 2020, the Texas population is expected to reach nearly 30 million residents.

As the overall percentage of Whites continues to decline, the Texas population will become increasingly diverse over the next five years. By the year 2020, the Hispanic population is expected to surpass the White population and become the majority of the Texas population by 2042.

The distribution of age groups in Texas closely mirrors that of the nation, with the largest percentage of Texas residents (60 percent) being between ages 19 to 64, followed by those 18 and under (28 percent) and those 65 and over (12 percent).

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50 Office of the State Demographer, Texas State Data Center.
Long term population projections by the Texas State Data Center estimate that by 2050, the number of persons older than age 65 will triple in size (from 2010-2050), approaching 7.9 million.\textsuperscript{53} This projected aging of the Texas labor force may have a major impact on growth of the labor force by dramatically lowering the overall labor force participation rate.

EXPECTED WORKFORCE CHALLENGES

HHS will need to continue to recruit and retain health and human services professionals, such as psychiatrists, physicians, psychologists, nurse practitioners, physician assistants, registered nurses, licensed vocational nurses, registered therapists, pharmacists, dentists, epidemiologists, sanitarians and laboratory staff. Additionally, certain jobs will continue to be essential to the delivery of services throughout the HHS System. Many of the jobs are low paying, highly stressful and experience higher than normal turnover, such as Eligibility Services staff, protective services workers (adult and children), Inspector General's Office staff, claims examiners, direct care workers (direct support professionals and psychiatric nursing assistants) and food service workers.

Direct Care Workers (Direct Support Professionals and Psychiatric Nursing Assistants)

There are about 9,115 direct care workers employed in HHS state hospitals and state supported living centers. These positions require no formal education to perform the work, but employees are required to develop people skills to effectively interact with consumers. The physical requirements of the position are difficult and challenging due to the nature of the work.

The pay is low, with an average hourly rate of $11.95.\textsuperscript{54}

The overall turnover rate for employees in this group is very high, at about 43 percent annually.\textsuperscript{55} Taking into account these factors, state hospitals and state supported living centers have historically experienced difficulty in both recruiting and retaining these workers. Little change is expected.

Direct Support Professionals

There are 6,187 direct support professionals in state supported living centers across Texas, representing approximately 11 percent of the System's total workforce.\textsuperscript{56} These employees provide 24-hour direct care to over 4,000 people who reside in state supported living centers. They directly support these individuals by providing services including basic hygiene needs, dressing and bathing, general health care, and dining assistance. They support life-sustaining medical care such as external feeding and lifting individuals with physical challenges. A trained and experienced direct care staff is essential to ensure consumer safety, health and well-being.

There are no formal education requirements to apply for a job in this series; however, extensive on-the-job training is required. It takes six to nine months for a

\begin{itemize}
  \item \textsuperscript{54} HHSAS Database, as of 8/31/15.
  \item \textsuperscript{55} HHSAS Database, FY 2015 data.
  \item \textsuperscript{56} HHSAS Database, as of 8/31/15.
\end{itemize}
new direct support professional to become proficient in the basic skills necessary to carry out routine job duties.

Employees who perform this work must interact with consumers on a daily basis. The work is performed in shifts throughout the day and night. The pay is low and the work is difficult and physically demanding.

A typical HHS direct support professional is 38 years old and has about six years of state service.\(^57\)

Turnover for direct support professionals is very high, at about 46 percent. This is one of the highest turnover rates of any job category in the System, reflecting the loss of about 3,265 workers during fiscal year 2015. Within this job family, entry-level Direct Support Professional I is experienced the highest turnover at 56 percent. Turnover rates by location ranged from 28 percent at the El Paso State Supported Living Center to 76 percent at the San Angelo State Supported Living Center.\(^58\)

The average hourly salary rate for these employees is $11.92 per hour.\(^59\) The State Auditor’s Office 2014 market index analysis found the average state salary for Direct Support Professional IIs to be three percent behind the market rate.\(^60\)

To deal with these retention difficulties, several state supported living centers have used contract staff to provide required coverage. Aside from being costly, HHS has experienced other challenges and problems with contracted staff, since these staff do not work consistently with the consumers and are therefore not able to carry out program plans fully. Contract staff are often placed for a very short time and do not always work with the same consumers. This situation can result in disruptions to consumer’s lives and the suspension of progress toward development goals.

To address these difficulties, a two percent salary increase was approved by the 84\(^{th}\) Legislature. In addition, HHS has plans to increase entry-level salaries for new direct support professionals and for currently employed direct support professionals during fiscal years 2018 and 2019.

Retention of these workers remains a major challenge for the System. Maintaining required staffing levels of direct support professionals in state supported living centers is critical in meeting Intermediate Care Facilities for Persons with Intellectual Disability (ICF/ID) certification requirements.

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\(^{57}\) HHSAS Database, as of 8/31/15.  
\(^{58}\) HHSAS Database, FY 2015 data.  
\(^{59}\) HHSAS Database, as of 8/31/15.  
Psychiatric Nursing Assistants
There are approximately 2,930 psychiatric nursing assistants employed in HHS state hospitals. These positions require high school education or equivalency to perform the work; however, there is extensive on-the-job training.

Workers are assigned many routine basic care tasks in the state hospitals that do not require a license to perform, such as taking vital signs, and assisting with bathing, hygiene and transportation. These employees are required to interact with patients on a daily basis. They are likely to be the first to intervene during crisis situations, and are the frontline staff most likely to de-escalate situations to avoid the need for behavioral restraints. They also have a higher potential for on-the-job injuries, both from lifting requirements and intervention during crisis situations. Further complicating this situation, many of the applicants for these entry-level positions lack the experience needed to work with patients and often lack the physical ability necessary to carry out their job duties.

The work is performed in shifts throughout the day and night. The work is difficult and the pay is low. Psychiatric nursing assistants earn an average hourly wage of $12.01 per hour. The State Auditor’s Office 2014 market index analysis found the average state salary for psychiatric nursing assistants ranged from eight to 11 percent behind the market rate.

The average psychiatric nursing assistant is about 39 years old and has an average of seven years of state service.

Turnover for psychiatric nursing assistants is very high at about 34 percent, reflecting the loss of 3,196 workers during fiscal year 2015. Within this job family, entry-level Psychiatric Nursing Assistant Is experienced the highest turnover at 43 percent. Turnover rates by location ranged from 27 percent at the Austin State Hospital to nearly 60 percent at the Big Spring State Hospital.

HHS is currently experiencing difficulty filling vacant psychiatric nursing assistant positions. Vacant positions are going unfilled for many months. Positions at the Austin State Hospital are remaining vacant, on average, for about five months, and vacant positions at the Rio Grande State Center remain vacant, on average, for more than six months.

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61 HHSAS Database, as of 8/31/15.
62 Ibid.
64 HHSAS Database, as of 8/31/15.
65 HHSAS Database, FY 2015 data.
66 HHSAS Database, as of 8/31/15.
To address these difficulties, HHS may request an increase to all classifications in this job family based on market data. In addition, HHS has plans to increase entry-level salaries for new psychiatric nursing assistants and for currently employed direct support professionals during fiscal years 2018 and 2019.

Recruitment and retention of these employees remains a major challenge for the System.

**Food Service Workers**

HHS employs approximately 925 food service workers, with the majority (99 percent) working in state supported living centers and state hospitals across Texas.\(^{67}\)

The physical requirements are very demanding and there are no formal education requirements. Since meals are prepared seven days a week, some of these employees are required to work on night and weekend shifts.

The average hourly rate paid to food service workers is $10.81. Turnover in food service worker positions is high, at 35 percent during fiscal year 2015.\(^{68}\) The State Auditor’s Office 2014 market index analysis found the average state salary for Cook IIs to be eight percent behind the market rate, and food service managers ranged from four to eight percent behind the market rate.\(^{69}\)

Retention and recruitment of these workers remains a major challenge for the System.

**Food Service Workers at State Supported Living Center**

There are 585 food service workers employed in HHS state supported living centers throughout Texas.\(^{70}\)

The typical food service worker is about 45 years of age and has an average of approximately nine years of state service.\(^{71}\)

Turnover in these food service worker positions is very high, at 37 percent. Turnover is at nearly 50 percent at the Corpus Christi and Lufkin state supported living centers.\(^{72}\)

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\(^{67}\) HHSAS Database, as of 8/31/15. Note: Food service workers include food service workers, managers and cooks.

\(^{68}\) Ibid.


\(^{70}\) HHSAS Database, as of 8/31/15.

\(^{71}\) Ibid.
Food Service Workers at State Hospitals
There are 333 food service workers employed at HHS state hospitals and centers throughout Texas.\textsuperscript{73}

The typical food service worker is about 43 years of age and has an average of about eight years of state service.\textsuperscript{74}

Turnover in these food service worker positions is high, at 30 percent. Turnover was at over 50 percent at the Big Spring State Hospital and 45 percent at the Rusk State Hospital.\textsuperscript{75}

Protective Services Workers
In 2014, there were 305,200 protective service worker jobs in the U.S., with a projected job growth of 6.2 percent by 2024.\textsuperscript{76,77}

There are approximately 6,600 protective services workers employed by HHS as child protective service (CPS) specialists, CPS investigators, adult protective service (APS) specialists, state wide intake (SWI) specialists, Child Care Licensing (CCL) and Residential Licensing Services (RCCL) Specialists, making up about 12 percent of the HHS System workforce.\textsuperscript{78,79} The average annual salary for these workers is $40,425.60, a salary below both the national and state average annual salary. Nationally, protective services workers earn $46,610 annually, while in Texas, the average annual salary is $41,760.\textsuperscript{80}

The 84\textsuperscript{th} Legislature (Regular Session, 2015) continued its support of ongoing improvements by authorizing funds to allow HHS to continue to provide the salary retention supplement of $5,000 established by the 79\textsuperscript{th} Legislature (Regular Session, 2005) for CPS investigation caseworkers and supervisors. As a means for increasing worker retention, the 84\textsuperscript{th} Legislature (Regular Session, 2015) also authorized the payment of up to $300 per month for experienced employees to mentor new workers.

\textsuperscript{72} HHSAS Database, FY 2015 data.
\textsuperscript{73} HHSAS Database, as of 8/31/15.
\textsuperscript{74} Ibid.
\textsuperscript{75} HHSAS Database, FY 2015 data.
\textsuperscript{76} Occupational title used is child, family and school social workers.
\textsuperscript{78} HHSAS Database, as of 8/31/15.
\textsuperscript{79} Protective Service Worker total does not include CCL and RCCL inspectors.
To retain trained, competent staff while providing the highest quality services for consumers over the next five years, HHS must:

♦ competitively recruit, retain and train quality staff to adequately manage increasing caseloads and provide quality services to clients;

♦ meet the training demands of new staff, explore innovative ways to improve skills and provide policy refresher training for supervisors and caseworkers; and

♦ maintain hiring efforts to fill protective services worker positions and Child Care Licensing (CCL) and Residential Licensing Services (RCCL) specialist positions that are experiencing high turnover.

**Child Protective Services (CPS) Workers**

Within the System, there are 5,485 filled CPS worker positions (1,906 CPS investigators and 3,579 CPS specialists). CPS workers are young (nearly 70 percent are under 40 years of age), with an average age of approximately 36 years and an average of about five years of state service. About 39 percent of these workers have less than two years of state service.\(^8^1\)

Turnover with this group of employees is considered high, at about 26 percent. Turnover is highest for CPS Worker I positions, reaching 43 percent (representing the loss of 641 employees in fiscal year 2015).\(^8^2\)

HHS is currently experiencing difficulty filling CPS worker positions. Vacant positions are going unfilled for an average of more than three months due to a shortage of qualified applicants available for work. Positions in the El Paso area remaining vacant, on average, for more than five months.\(^8^3\)

As caseloads continue to increase, recruitment and retention of employees with an aptitude for CPS casework continues to be a challenge for HHS.

**Statewide Intake Specialists (SWIs)**

There are approximately 320 SWI specialists with HHS. With an average age of about 39, approximately 63 percent of these specialists are under 40 years of age. SWI specialists have an average of about eight years of state service, with about 23 percent having less than two years of state service.\(^8^4\) \(^8^5\)

While overall turnover for SWI specialists at 19 percent is only slightly above the state average rate of 18 percent, entry-level Protective Service Intake Specialist Is are experiencing much higher turnover at 42 percent.\(^8^6\) \(^8^7\)

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\(^8^1\) HHSAS Database, as of 8/31/15.
\(^8^2\) HHSAS Database, FY 2015 data.
\(^8^3\) HHSAS Database, as of 8/31/15.
\(^8^4\) SWI specialists include Protective Services Intake Specialists I-V.
\(^8^5\) HHSAS Database, as of 8/31/15.
\(^8^6\) HHSAS Database, FY 2015 data.
HHS is currently experiencing difficulty filling vacant SWI specialist positions. Vacant positions are going unfilled, on average, for nearly five months due to a shortage of qualified applicants available for work.\(^{88}\)

**Adult Protective Services (APS) Specialists**

HHS employs about 670 APS specialists. The typical APS specialist is 40 years of age and has an average of eight years of state service. About 47 percent of these employees have less than five years of state service.\(^{89}\)\(^{90}\)

APS specialist turnover is considered high at 23 percent. Certain regions of Texas experienced higher turnover than others, including Midland area at 37 percent and the San Antonio area at 32 percent. Entry-level APS Specialist Is experienced the highest turnover at 40 percent.\(^{91}\)

With the aging of the Texas population, the HHS anticipates an increasing demand for adult protective services.

**Child Care Licensing (CCL) and Residential Licensing Services (RCCL) Specialists**

There are 411 CCL and RCCL specialists employed within the System who monitor, investigate and inspect child day-care facilities and homes, residential child care facilities, child-placing agencies and foster homes.\(^{92}\) In addition, they conduct child abuse/ neglect investigations of children placed in 24-hour childcare facilities and child placing agencies licensed or certified by Residential Child Care Licensing.

The typical specialist is 38 years of age and has an average of eight years of state service. About 44 percent of these employees have less than five years of state service.\(^{93}\)\(^{94}\)

CCL and RCCL specialist turnover is high at 23 percent.\(^{95}\)

In addition, HHS experienced difficulty filling vacant positions. With a high vacancy rate of 16 percent, vacant positions go unfilled for months.\(^{96}\)

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\(^{87}\) State Auditor’s Office (SAO) FY 2015 Turnover Statistics.

\(^{88}\) HHSAS Database, as of 8/31/15.

\(^{89}\) Ibid.

\(^{90}\) Ibid.

\(^{91}\) HHSAS Database, FY 2015 data.

\(^{92}\) CCL and RCCL specialists include CCL inspectors and specialists and RCCL inspectors and investigators.

\(^{93}\) HHSAS Database, as of 8/31/15.

\(^{94}\) Ibid.

\(^{95}\) HHSAS Database, FY 2015 data.

\(^{96}\) HHSAS Database, as of 8/31/15.
Considering these factors, retention of these employees is an ongoing challenge.

**Eligibility Services Staff**

Across the state, there are about 8,470 employees supporting eligibility determinations within the System, accounting for about 16 percent of the HHS System workforce.\(^97\)

The majority of these individuals (7,968 employees or 94 percent) are employed as Texas works advisors, medical eligibility specialists, hospital based workers, eligibility clerks and eligibility supervisors.\(^98\)

While overall turnover for Eligibility Services Staff is the same as the state average rate (at 18 percent), Texas works advisors and medical eligibility specialists are experiencing higher turnover (both at a rate of about 20 percent).\(^99\)\(^100\)

**Texas Works Advisors**

There are over 4,900 Texas works advisors within HHS that make eligibility determinations for SNAP, TANF, CHIP and Medicaid for children, families and pregnant women. The typical Texas works advisor is 41 years of age and has an average of about eight years of service.\(^101\)

Turnover for these employees is high at about 20 percent, representing a loss of 1,048 workers in fiscal year 2015. Certain regions of Texas experienced higher turnover than others, including the Texas Panhandle at 30 percent and South Central Texas at 33 percent. Entry-level Texas Works Advisor Is experienced the highest turnover at 43 percent.\(^102\)

In addition, HHS has experienced difficulty finding qualified candidates for new worker positions. Due to this shortage of qualified applicants, vacant positions go unfilled for an average of almost three months, with vacant positions in Southeast Texas remaining unfilled for an average of a little more than five months.\(^103\)

Salary is one factor that may be contributing to the System’s difficulty recruiting and retaining eligibility workers. A 2010 Texas State Auditor’s survey of the salary

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\(^97\) HHSAS Database, as of 8/31/15.
\(^98\) Ibid.
\(^99\) HHSAS Database, FY 2015 data.
\(^100\) State Auditor’s Office (SAO) FY 2015 Turnover Statistics.
\(^101\) HHSAS Database, as of 8/31/15.
\(^102\) HHSAS Database, FY 2015 data.
\(^103\) HHSAS Database, as of 8/31/15.
earned by tenured eligibility workers in 11 states indicated that Texas ranked near the bottom.\textsuperscript{104}

\textbf{Figure 12: Average Salaries for Tenured Eligibility Workers}

Recruitment and retention of these employees remain a continuing challenge for HHS.

\textbf{Medical Eligibility Specialists}

Within HHS, there are 750 medical eligibility specialists determining financial eligibility for Medicaid for Elderly and People with Disabilities (MEPD). Medical eligibility specialists have, on average, about nine years of state service, with an average age of 42.\textsuperscript{105}

Turnover for these employees is high at about 20 percent, representing the loss of 158 employees in fiscal year 2015. Entry-level Medical Eligibility Specialist Is experienced the highest turnover, at 37 percent.\textsuperscript{106}

Retention of these specialists is an ongoing challenge.

\textbf{Hospital Based Workers}

HHS has about 300 hospital based workers stationed in nursing facilities, hospitals, and clinics rather than in eligibility offices to determine eligibility for the SNAP.


\textsuperscript{105} HHSAS Database, as of 8/31/15.

\textsuperscript{106} HHSAS Database, FY 2015 data.
TANF, CHIP and Medicaid programs. These highly-tenured workers have an average of about 15 years of state service (about 56 percent of these employees have 10 or more years of state service), with an average age of 46.\textsuperscript{107}

Turnover for these employees is currently below the state average (of 18 percent) at about 16 percent.\textsuperscript{108, 109}

**Eligibility Clerks**

HHS employs about 1,445 eligibility clerks in various clerical, administrative assistant and customer service representative positions. The typical eligibility clerk is 46 years of age and has an average of 10 years of state service.\textsuperscript{110}

The turnover rate for eligibility clerks is high at about 18 percent, representing the loss of about 280 employees (a three percent lower rate than reported for fiscal year 2013).\textsuperscript{111, 112} Eligibility Specialist Clerk IIs made up the majority of these losses at about 75 percent, with these positions often remaining unfilled for an average of six months.\textsuperscript{113, 114}

Recruitment and retention for these jobs are ongoing challenges.

**Eligibility Supervisors**

Approximately 530 eligibility supervisors are employed within HHS. These highly-tenured supervisors have an average of 19 years of state service (75 percent of these employees have 10 or more years of state service), with an average age of 48.\textsuperscript{115}

Though turnover for these employees is well managed at about 10 percent, 22 percent of these employees are currently eligible to retire from state employment. Within the next five years, nearly half of these employees will be eligible to retire.\textsuperscript{116}

HHS will need to develop effective succession plans and creative recruitment strategies to replace these highly skilled and tenured employees.

\textsuperscript{107} HHSAS Database, as of 8/31/15.  
\textsuperscript{108} State Auditor’s Office (SAO) FY 2015 Turnover Statistics.  
\textsuperscript{109} HHSAS Database, FY 2015 data.  
\textsuperscript{110} HHSAS Database, as of 8/31/15.  
\textsuperscript{111} HHSAS Database, FY 2013 data.  
\textsuperscript{112} HHSAS Database, FY 2015 data.  
\textsuperscript{113} State Auditor’s Office (SAO) FY 2015 Turnover Statistics.  
\textsuperscript{114} HHSAS Database, as of 8/31/15.  
\textsuperscript{115} Ibid.  
\textsuperscript{116} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
Inspector General's Office (IG) Staff

Across the state, there are about 680 IG employees within HHS. The majority of these individuals (424 employees or 62 percent) are employed as auditors, investigators, and registered nurses (RNs).\textsuperscript{117 118}

Auditors

There are about 150 auditor positions within HHS, with about 65 percent working in IG.\textsuperscript{119} Of these staff, about 73 percent work in Audit Consolidated, and the remaining 27 percent are divided among numerous units within OIG, including Medicaid/CHIP Audit, WIC Vendor Monitoring, Hospital Audits and OIG Managed Care Operations.

IG auditors perform operational and performance audits of programs, processes and systems across HHS agencies. IG auditors are responsible for performing contractor and medical provider audits and reviews to help ensure compliance with state and federal laws, rules and regulations and to identify potential overpayments. Employees in these classifications prepare audit reports that make recommendations for increasing operational efficiency, strengthening management controls, mitigating business risks and improving compliance.

The typical IG auditor is about 51 years old and has an average of 14 years of state service.\textsuperscript{120}

IG auditors earn an average annual salary of $53,323, which is below both the state and national average.\textsuperscript{121} The average annual earnings for accountants and auditors in 2015 was $75,280 nationally, and $78,490 in Texas.\textsuperscript{122 123} In addition, the State Auditor’s Office 2014 market index analysis found the average state salary for auditors ranged from seven to eight percent behind the market rate.\textsuperscript{124}

Though turnover for all IG auditors is below the state average of 18 percent (at 14 percent), turnover for Auditor IIIs is high at about 19 percent.\textsuperscript{125 126}

\textsuperscript{117} HHSAS Database, as of 8/31/15.
\textsuperscript{118} IG RNs are discussed under the Registered Nurses subsection.
\textsuperscript{119} HHSAS Database, as of 8/31/15.
\textsuperscript{120} Ibid.
\textsuperscript{121} Ibid.
\textsuperscript{122} Ibid.
\textsuperscript{123} Ibid.
\textsuperscript{125} State Auditor’s Office, “A Biennial Report on the State’s Position Classification Plan,” September 2014, Report No. 15-701, web page \url{http://www.sao.state.tx.us/reports/main/15-701.pdf}, last accessed 4/21/16. Note: Since there were no Auditor IIs in IG, data on the market rate for this classification were not included.
\textsuperscript{126} State Auditor’s Office (SAO) FY 2015 Turnover Statistics.
\textsuperscript{127} HHSAS Database, FY 2013 data.
In addition, HHS may face significant recruitment challenges in the next few years to replace those employees who are eligible for retirement. More than a quarter of IG auditors are currently eligible to retire. In the next five years, this rate will increase to over 40 percent.\textsuperscript{127}

To address these difficulties, HHS may create a career ladder for IG auditors, provide a salary equity adjustment, and increase entry-level salaries for new IG auditors and for currently employed IG auditors during fiscal years 2018 and 2019.

\textbf{Investigators}

Of the 367 investigators working for HHS agencies, 247 of them (67 percent) work within IG.\textsuperscript{128} Nearly half of these employees work in the General Investigations section of the Enforcement Division, with the rest divided among numerous units within IG, including Criminal History Checks, Internal Affairs Consolidations, Medical Provider Integrity, and Sanctions.

The typical investigator is about 46 years old and has an average of 13 years of state service. More than half of these employees have 10 or more years of state service.\textsuperscript{129}

IG investigators earn an average annual salary of $48,859, which is below both the state and national average.\textsuperscript{130} The average annual earnings for investigators in 2015 was $69,180 nationally and $71,750 in Texas.\textsuperscript{131,132}

Though turnover for these highly-tenured employees is slightly below the state average of 18 percent (at 16 percent), Investigator VIs are experiencing high turnover at 24 percent.\textsuperscript{133}

In addition, about 13 percent of these employees are currently eligible to retire from state employment. Within the next five years, 32 percent of these highly skilled and tenured employees will be eligible to retire.\textsuperscript{134}

Recruitment and retention for these jobs will continue to be ongoing challenges.

To address these difficulties, HHS may create a career ladder for IG investigators, provide a salary equity adjustment, and increase entry-level salaries for new and currently employed IG investigators.

\textsuperscript{127} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.  
\textsuperscript{128} HHSAS Database, as of 8/31/15. 
\textsuperscript{129} Ibid. 
\textsuperscript{130} HHSAS Database, as of 8/31/15. 
\textsuperscript{132} Occupational title used is Compliance Officers. 
\textsuperscript{133} HHSAS Database, FY 2013 data. 
\textsuperscript{134} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
Claims Examiners

HHS employs 460 claims examiners, with the majority (99 percent) employed in the Division for Disability Determination Services (DDS). These claims examiners have, on average, about 11 years of state service, with an average age of about 43 years.

Entry-level DDS claims examiners must have a bachelor’s degree and complete a two year training program before they are considered fully trained and able to work the various types of Social Security disability claims. Generally, it takes a minimum of two years for a DDS claims examiner to be fully competent in their knowledge of the complicated Social Security disability program.

Though DDS claims examiners are separating from employment at an annual rate of only 14 percent, the vacancy rate for claims examiners is currently high at about 24 percent, with vacant positions often going unfilled for an average of seven months due to a shortage of qualified applicants available for work. These vacancy problems are expected to worsen as employees approach retirement. Over 20 percent of these tenured and highly skilled employees will be eligible to retire in the next five years.

Due to cost of this extensive training that newly hired examiners must take to become fully competent in their job, continuous monitoring of retention of these employees will remain a priority for System management. In addition, as the Social Security Administration (SSA) allows for the filling of new approved vacancies, DDS will need to coordinate the timing of filling the new positions with the SSA to determine if DDS has the necessary resources (e.g. trainers, facility needs, etc.) to ensure all employees receive the required training and ongoing professional development.

Social Workers

There are 206 social workers employed by HHS, with the majority (99 percent) housed in state supported living centers and state hospitals across the state.

Turnover for these social workers is high at 23 percent.

One reason for this high turnover is the large disparity between private sector and HHS salaries. System social workers earn an average annual salary of $42,010.

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135 HHSAS Database, as of 8/31/15.
136 Ibid.
137 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
138 HHSAS Database, FY 2015 data.
139 HHSAS Database, as of 8/31/15.
140 HHSAS Database, FY 2015 data.
141 HHSAS Database, FY 2015 data.
This salary falls significantly below the market rate. The average annual salary for social workers nationally is $54,020 and $55,510 in Texas.\textsuperscript{142} The State Auditor’s Office 2014 market index analysis found the average state salary for Social Worker IIs and IIIs was seven percent behind the market rate.\textsuperscript{143}

These problems are expected to worsen as employees approach retirement. While 14 percent of these employees are currently eligible to retire, this number increases to nearly 25 percent in the next five years.\textsuperscript{144}

**Social Workers at State Supported Living Centers**

About 16 percent of HHS social workers (33 employees) work at state supported living centers across the state.\textsuperscript{145} These employees serve as a liaison between the individual, legally authorized representative and others to assure ongoing care, treatment and support through the use of person-centered practices. They gather information to assess an individual's support systems and service needs, support the assessment of the individual's rights and capacity to make decisions, and assist with the coordination of admissions, transfers, transitions and discharges.

The typical social worker at these facilities is about 44 years old and has an average of nine years of state service.\textsuperscript{146}

While the overall turnover for these social workers is less than the state average of 18 percent (at 15 percent), positions often remaining unfilled for an average of five months before being filled. At the Abilene State Supported Living Center, social worker positions remain vacant for about seven months.\textsuperscript{147 148 149}

HHS may face significant recruitment challenges in the next few years to replace these employees who will be eligible for retirement. About 18 percent of these employees will be eligible to retire in the next five years.\textsuperscript{150}

**Social Workers at State Hospitals**

There are 171 social workers at HHS state hospitals.\textsuperscript{151} These employees are critical to managing patient flow in state hospitals and taking the lead role in

\begin{footnotesize}
\begin{itemize}
\item[141] HHSAS Database, as of 8/31/15.
\item[144] Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\item[145] HHSAS Database, as of 8/31/15.
\item[146] Ibid.
\item[147] State Auditor’s Office (SAO) FY 2015 Turnover Statistics.
\item[148] HHSAS Database, FY 2015 data.
\item[149] HHSAS Database, as of 8/31/15.
\item[150] Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\end{itemize}
\end{footnotesize}
communicating with patient families and community resources. Social workers provide essential functions within state hospitals that include conducting psychosocial assessments, therapeutic treatment and case coordination for individuals receiving services from HHS in-patient psychiatric hospitals and the Waco Center for Youth.

State hospital social workers are about 42 years old and have an average of 10 years of state service.\textsuperscript{152}

The overall turnover rate for these social workers is high at around 24 percent, with the Austin State Hospital and Big Spring State Hospital experiencing turnover of more than 30 percent.\textsuperscript{153}

In addition, about 15 percent of these employees are currently eligible to retire. Within the next five years, 25 percent of these employees will be eligible to retire.\textsuperscript{154}

Factors impacting recruitment include non-competitive salaries, credentialing requirements and increased need for individuals with Spanish-English bilingual skills. HHS competes with both federal and local governments, as well as the military and the private sector employers for social worker applicants. Many times the competitors are able to offer a higher starting salary.

Considering these factors, recruitment and retention for these jobs are ongoing challenges. To address these difficulties, HHS may consider increasing entry-level salaries for these social workers and for currently employed state hospital social workers during fiscal years 2018 and 2019.

**Registered Therapists**

HHS employs 274 registered therapists, with the majority (98 percent) working in state supported living centers and state hospitals across Texas.\textsuperscript{155} HHS therapists are employed in a variety of specializations, including speech-language pathologists, audiologists, occupational therapists and physical therapists. Full staffing of these positions is critical to direct-care services.

These highly skilled employees have, on average, about eight years of state service, with an average age of 45.\textsuperscript{156}

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\textsuperscript{151} HHSAS Database, as of 8/31/15.
\textsuperscript{152} Ibid.
\textsuperscript{153} HHSAS Database, FY 2015 data.
\textsuperscript{154} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\textsuperscript{155} HHSAS Database, as of 8/31/15.
\textsuperscript{156} HHSAS Database, as of 8/31/15.
System registered therapists earn an average annual salary of $72,788.\textsuperscript{157} The average annual salary for registered therapists nationally is $82,072 and $89,043 in Texas.\textsuperscript{158} In addition, the State Auditor’s Office 2014 market index analysis found the average state salary for registered therapists ranged from one to 26 percent behind the market rate.\textsuperscript{159}

Though turnover for registered therapists is currently below the state average (at 13 percent), positions are remaining vacant for an average of about nine months.\textsuperscript{160} 161

About 22 percent of System registered therapists will be eligible to retire within the next five years. HHS will need to develop creative recruitment strategies to replace these highly skilled employees.\textsuperscript{162}

**Registered Therapists at State Supported Living Centers**

About 78 percent for HHS registered therapists work at state supported living centers. These employees have, on average, about eight years of state service, with an average age of 45.\textsuperscript{163}

Though turnover for these registered therapists is below the state average at 13 percent, HHS is experiencing difficulty filling vacant positions. Positions at the Abilene, Brenham, Mexia and San Angelo State Supported Living Centers remain unfilled for over 300 days.\textsuperscript{164} 165 166

HHS may face significant recruitment challenges in the next few years to replace these highly skilled employees who will be eligible for retirement. Though only 10 percent of these employees are currently eligible to retire, over 20 percent of them will be eligible in the next five years.\textsuperscript{167} HHS will need to develop creative recruitment strategies to replace these highly skilled and tenured employees.

\textsuperscript{157} Ibid.  
\textsuperscript{160} HHSAS Database, FY 2015 data. 
\textsuperscript{161} Ibid. 
\textsuperscript{162} Includes return-to-work retirees. HHSAS Database, as of 8/31/15. 
\textsuperscript{163} HHSAS Database, as of 8/31/15. 
\textsuperscript{164} State Auditor’s Office (SAO) FY 2015 Turnover Statistics. 
\textsuperscript{165} HHSAS Database, FY 2015 data. 
\textsuperscript{166} HHSAS Database, as of 8/31/15. 
\textsuperscript{167} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
Registered Therapists at State Hospitals
HHS employs 57 registered therapists at state hospitals across Texas.\textsuperscript{168}

These highly skilled employees have, on average, about 12 years of state service, with an average age of 46.\textsuperscript{169}

Though turnover for these employees is currently below the state average of 18 percent (at 15 percent), the San Antonio State Hospital is experiencing high turnover for these employees at 26 percent.\textsuperscript{170} In addition, positions at the North Texas State Hospital often remaining unfilled for over six months.\textsuperscript{171}

Though only 12 percent of these highly skilled employees are currently eligible to retire, this number will increase to 26 percent in the next five years, making recruitment and retention for these jobs an ongoing challenge for the System.\textsuperscript{172}

Registered Nurses (RNs)
The nation and Texas continue to face a shortage of RNs, which is predicted to worsen over the next twenty years as baby boomers age and the need for health care grows. With state nursing schools facing budget cuts, they may be less able to hire enough faculty members to train new nurses to meet projected needs.\textsuperscript{173}

RNs constitute one of the largest healthcare occupations. With 2.7 million jobs in the U.S., job opportunities for RNs are expected to grow faster than the average for all occupations. It is projected that there will be a need for 439,300 new RN jobs by 2024. With this level of job growth, it is projected that there will not be enough qualified applicants to meet the increased demand.\textsuperscript{174, 175, 176}

Texas is also experiencing a critical shortage in RNs. It is projected that between 2005 and 2020, the demand for nurses in Texas will increase by 86 percent, while

\textsuperscript{168} HHSAS Database, as of 8/31/15.
\textsuperscript{169} Ibid.
\textsuperscript{170} HHSAS Database, FY 2015 data.
\textsuperscript{171} HHSAS Database, as of 8/31/15.
\textsuperscript{172} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\textsuperscript{176} Ibid.
the supply will grow by only 53 percent.\textsuperscript{177} Although numbers vary from study to study, most concur that the nursing shortage is the most severe health workforce shortage currently facing both the nation and Texas.\textsuperscript{178} The Texas nurse-to-population ratio is below the national average of 921 nurses per 100,000 people, with the state ratio being only 753 nurses per 100,000 people.\textsuperscript{179, 180}

Although there are 115 nursing school programs across the state, most of them have more applicants than room for new students and only about two-thirds of enrolled students actually graduate.\textsuperscript{181, 182} The shortage of trained instructors limits both the number of accepted students and the number of available classes offered. Other factors contributing to the current shortage include the steep population growth (resulting in a growing need for health care services), an aging nursing workforce, an overall aging and service-demanding population and an increased need for specialized nursing skills. This crisis is emerging just as skilled nurses are retiring and job opportunities in health care are expanding. The projected rates of growth in the youth, elderly and minority populations in Texas will result in an increased demand for health services from HHS System agencies.

HHS employs approximately 1,967 RNs across the state, in state supported living centers, state hospitals, in Health Service Regions, and within the Inspector General's Office (IG).\textsuperscript{183, 184} As the demand for nursing services increases and the supply decreases, the recruitment and retention of nurses becomes more difficult and the need for competitive salaries will become more critical.

Currently, the average annual salary for RNs is $57,738.\textsuperscript{185} This salary falls below both national and state averages for these occupations. Nationally, the average


\textsuperscript{181} Texas Board of Nursing, web page http://www.bne.state.tx.us/pdfs/education_pdfs/education_programs/ApprovedRNschools.pdf, last accessed on 5/9/14.


\textsuperscript{183} HHSAS Database, as of 8/31/15.

\textsuperscript{184} RNs include public health nurses.

\textsuperscript{185} HHSAS Database, as of 8/31/15.
annual earnings for RNs in 2015 was $71,000.\textsuperscript{186} In Texas, the average annual earnings for RNs in 2015 was $69,890.\textsuperscript{187} In addition, the State Auditor’s Office 2014 market index analysis found the average state salary for RNs ranged from five to 16 percent behind the market rate.\textsuperscript{188} Many private hospitals are further widening the salary gap by offering signing bonuses. The non-competitive salaries offered by HHS agencies are directly contributing to the HHS System’s difficulties recruiting qualified applicants. Posted vacant positions are currently taking about five months to fill. The System is also losing existing staff to higher paying private health care jobs at an alarming rate (turnover of 27 percent for fiscal year 2015).\textsuperscript{189}

It is expected that recruitment and retention of nurses will continue to be a problem for the System, as the nursing workforce shortage continues and as a significant portion of System nurses approach retirement.

To address these difficulties, the 84\textsuperscript{th} Legislature approved a targeted wage increase for RNs in localities with the highest turnover rates. In addition, HHS may consider increasing entry-level salaries for RNs and for currently employed RNs during fiscal years 2018 and 2019 and providing a salary equity adjustment for IG RNs.

\textbf{RN\textsuperscript{s} at State Supported Living Centers}

About 35 percent of System RNs (690 RNs) work at HHS state supported living centers across Texas.\textsuperscript{190}

The typical state supported living center RN is about 47 years old and has an average of approximately seven years of state service.\textsuperscript{191}

The turnover rate for these RNs is considered high at about 29 percent. Turnover is especially high at the Lubbock State Supported Living Center (at 42 percent) and the El Paso State Supported Living Center (at 52 percent).\textsuperscript{192}

In addition, HHS finds it difficult to fill these vacant nurse positions. At these facilities, there are always vacant nursing positions that need to be filled. With a high vacancy rate for these positions (at approximately 11 percent), RN positions often remain open for more than five months before being filled. Some facilities are experiencing even longer vacancy durations. At the Brenham State Supported Living Center it takes about seven months to fill a position, while at the Austin State

\begin{flushleft}
\textsuperscript{187} Ibid.  \\
\textsuperscript{189} HHSAS Database, FY 2015 data.  \\
\textsuperscript{190} HHSAS Database, FY 2015 data.  \\
\textsuperscript{191} Ibid.  \\
\textsuperscript{192} HHSAS Database, as of 8/31/15.  
\end{flushleft}
Supported Living Center, it takes nearly eight months.\textsuperscript{193} In order to provide quality nursing care for consumers, it is essential that HHS maintain the lowest vacancy rate.

**RNs at State Hospitals**

About 42 percent of System RNs (817 RNs) work at state hospitals across the Texas, providing frontline medical care of patients. They provide medications, primary health care and oversee psychiatric treatment.\textsuperscript{194}

System nurses at state hospitals are generally required to work shifts and weekends. The work is demanding, requires special skills and staff often work long hours with minimal staffing. The work is also physically demanding, making it increasingly more difficult for the aging nursing workforce to keep up with these work demands. All of these job factors contribute to higher than average turnover rates.

The typical RN at a System state hospital is about 48 years old and has an average of approximately 10 years of state service.\textsuperscript{195}

The turnover rate for these RNs is considered high at about 28 percent. Turnover is especially high at the Rusk State Hospital, at 47 percent and within the Texas Center for Infectious Disease (at 42 percent).\textsuperscript{196}

At these state hospitals, there are always vacant nursing positions that need to be filled. These RN positions often remain open for about five months before being filled. Some hospitals are experiencing even longer vacancy durations. At the North Texas State Hospital, it takes about seven months to fill a position, while at the Big Spring State Hospital, it takes nearly nine months.\textsuperscript{197}

**Public Health RNs**

About 10 percent of System RNs (193 RNs) provide direct care and population-based services in the many counties in Texas that have no local health department, or where state support is needed.\textsuperscript{198} These RNs are often the individuals who are on the frontline in the delivery of public health services to rural communities throughout the state, serving as consultants and advisors to county, local and stakeholder groups, and educating community partners. They assist in communicable disease investigation, control and prevention, and are critical to successful public health preparedness and response throughout the state.

\textsuperscript{193} HHSAS Database, as of 8/31/15.
\textsuperscript{194} Ibid.
\textsuperscript{195} Ibid.
\textsuperscript{196} HHSAS Database, FY 2015 data.
\textsuperscript{197} HHSAS Database, as of 8/31/15.
\textsuperscript{198} Includes RN II - Vs in public health roles and public health nurses. Note: Public health nurses are also registered nurses.
Public Health RNs have, on average, about eight years of state service, with an average age of about 50 years.\(^{199}\)

While overall turnover for these RNs at 18 percent is at the same level as the state average rate, certain areas of Texas experienced higher turnover than others, including Health Service Regions the Lubbock area at about 30 percent and the Houston area at 35 percent.\(^{200}\)\(^{201}\)

These RN positions often remain open for about five months before being filled.\(^{202}\)

**Inspector General's Office (IG) Registered Nurses (RNs)**

There are 80 RNs employed as Nurse IVs and Nurse Vs (about four percent of System RNs) within IG.\(^{203}\)

These IG nurses conduct hospital and nursing facility medical investigations and reviews to determine the accuracy of data. They conduct investigations and examinations of alleged violations of laws, rules and regulations regarding fraud in Medicaid coding, and perform utilization reviews on Medicaid recipients in Medicaid approved hospitals to determine necessity of admission and the accuracy of diagnosis and procedural coding. Employees in this classification also conduct Long Term Care Minimum Data Set (MDS) assessment reviews in Medicaid approved nursing facilities to determine the accuracy of assessment data provided by the nursing facility to ensure accurate payment.

IG nurse reviewers require at least one full year of training to be independent to conduct both hospital and nursing facility reviews.

The typical IG nurse is about 53 years old and has an average of approximately seven years of state service.\(^{204}\)

The turnover rate for IG nurses is considered high at about 20 percent.\(^{205}\)

Recruitment and retention of these RNs remains one of the most critical issues for IG due to extensive travel requirements and salary constraints.

The high turnover of most qualified staff has shown an increasing tendency to leave HHS to accept higher paying jobs in the public and private sector. This situation is

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\(^{199}\) HHSAS Database, as of 8/31/15.

\(^{200}\) HHSAS Database, FY 2015 data.

\(^{201}\) State Auditor’s Office (SAO) FY 2015 Turnover Statistics.

\(^{202}\) HHSAS Database, as of 8/31/15.

\(^{203}\) Ibid.

\(^{204}\) Ibid.

\(^{205}\) HHSAS Database, FY 2015 data.
expected become more urgent over time, since 35 percent of these highly skilled employees will be eligible to retire from state employment in the next five years.206

**Licensed Vocational Nurses (LVNs)**

There are about 1,024 direct care workers employed by HHS. The majority of these employees (about 99 percent) work at state hospitals and state supported living centers across Texas.207

About one percent work in Health Services Regions and central office program support, assisting in communicable disease prevention and control and the delivery of population-based services to individuals, families, and communities.

On average, a System LVN is 45 years old and has eight years of state service.208

As with RNs, the nursing shortage is also impacting the HHS’ ability to attract and retain LVNs. Turnover for LVNs is currently very high at about 35 percent.209

Currently, the average annual salary for System LVNs during fiscal year 2015 was $36,766.210 This salary falls below both national and state averages for this occupation. Nationally, the average annual earnings for licensed practical nurses and LVNs was $44,030, and $45,130 in Texas.211 The State Auditor’s Office 2014 market index analysis found the average state salary for LVN IIs was 10 percent behind the market rate.212

To address these difficulties, the 84th Legislature approved a targeted wage increase for LVNs in localities with the highest turnover rates. In addition, HHS may consider increasing entry-level salaries for new LVNs and for currently employed staff during fiscal years 2018 and 2019.

**LVNs at State Supported Living Centers**

There are 534 LVNs employed at HHS state supported living centers across Texas. These LVNs are, on average, 45 years old and have an average of approximately eight years of state service.213

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206 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
207 Includes Licensed Vocational Nurse II and III.
208 HHSAS Database, as of 8/31/15.
209 HHSAS Database, FY 2015 data.
210 HHSAS Database, as of 8/31/15.
213 HHSAS Database, as of 8/31/15.
Turnover for LVNs at state supported living centers is one of the highest in the System at about 40 percent. Centers experienced the loss of 250 LVNs last fiscal year. Turnover is extremely high at the San Angelo State Supported Living Center (at 62 percent) and the El Paso State Supported Living Center (at 52 percent).  

With a very high vacancy rate of about 27 percent, vacant positions often go unfilled nearly six months. Some centers are experiencing even longer vacancy durations. At the Lufkin State Supported Living Center it takes about seven months to fill a position, while at the San Angelo State Supported Living Center, it takes over nine months.

LVNs at State Hospitals

There are approximately 480 LVNs employed at HHS state hospitals and centers across Texas.

On average, a state hospital LVN is about 44 years old and has eight years of state service.

Turnover for these LVNs is currently very high at about 30 percent. Turnover is especially high at the Waco Center for Youth, at 67 percent and the San Antonio State Hospital (at 44 percent).

Many LVNs come into the state hospital system with limited training in caring for psychiatric patients. HHS state hospitals invest in employee training to ensure the highest quality of nursing care. The high turnover for LVN positions has a direct impact on the training resources dedicated to this occupational group. Decreasing turnover levels will significantly reduce the amount of time spent on training new employees.

LVNs in Public Health Roles

About one percent of System LVNs (10 LVNs) work in Health Services Regions across Texas. They have, on average, about 10 years of state service, with an average age of about 48 years.

The overall turnover for these LVNs is high at 20 percent. Retention is expected to remain an issue as these employees approach retirement. Twenty percent of these tenured and skilled employees will be eligible to retire in the next five years.

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214 HHSAS Database, FY 2015 data.
215 HHSAS Database, as of 8/31/15.
216 Ibid.
217 Ibid.
218 HHSAS Database, FY 2015 data.
219 HHSAS Database, as of 8/31/15.
220 Ibid.
221 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
Nurse Practitioners and Physician Assistants

Under the supervision of a physician, 49 System nurse practitioners and physician assistants are responsible for providing advanced medical services and clinical care to individuals at state hospitals and those who reside in state supported living centers across Texas.222

These highly skilled employees have, on average, about 11 years of state service, with an average age of 52. Over 40 percent of these employees have more than 10 years of state service.223

System nurse practitioners and physician assistants earn an average annual salary of $106,250.224 This salary falls slightly below the market rate. The State Auditor’s Office 2014 market index analysis found the average state salary for Nurse Practitioners to be eight percent behind the market rate and Physician Assistants were four percent behind the market rate.225

Though the turnover for nurse practitioners and physician assistants is currently well managed at about 12 percent, the vacancy rate is high at 14 percent, with positions remaining vacant for an average of about five months.226 227

Over 20 percent of nurse practitioners and physician assistants are currently eligible to retire, with this number increasing to 33 percent in the next five years. HHS will need to develop creative recruitment strategies to replace these highly skilled and tenured employees.228

Nurse Practitioners and Physician Assistants at State Supported Living Centers

HHS employs 13 nurse practitioners and physician assistants at state supported living centers across Texas, while the majority of the employees (85 percent) are nurse practitioners.229

These highly skilled employees have, on average, about eight years of state service, with an average age of 54.230

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222 Ibid.
223 Ibid.
224 HHSAS Database, as of 8/31/15.
226 HHSAS Database, FY 2015 data.
227 HHSAS Database, as of 8/31/15.
228 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
229 HHSAS Database, as of 8/31/15.
Turnover for these nurse practitioners and physician assistants is slightly below the state average of 18 percent at 15 percent.\textsuperscript{231, 232}

With a high vacancy rate of 24 percent, vacant positions at state supported living centers go unfilled for months.\textsuperscript{233}

Due to the continuing short supply and high demand for these professionals, HHS will need to develop creative recruitment strategies to replace these employees.

**Nurse Practitioners and Physician Assistants at State Hospitals**

HHS employs 36 nurse practitioners and physician assistants at state hospitals across Texas. The majority of these individuals (83 percent) are employed as nurse practitioners.\textsuperscript{234}

These highly skilled employees have, on average, about 13 years of state service, with an average age of 51.\textsuperscript{235}

Though turnover for these state hospital employees is currently low at about 11 percent, positions are often remaining unfilled for over four months before being filled.\textsuperscript{236, 237}

About 22 percent of these highly skilled employees are currently eligible to retire. This number will increase to 33 percent in the next five years, making recruitment and retention for these jobs an ongoing challenge for the System.\textsuperscript{238}

**Pharmacists**

With about 297,000 active pharmacists as of May 2014, pharmacists represent one of the largest health professional groups in the U.S. While the overall supply of pharmacists has increased in the past decade, there has been an unprecedented demand for pharmacists and for pharmaceutical care services. Employment of pharmacists is projected to grow three percent from 2014 to 2024, slower than the

\textsuperscript{230} Ibid.
\textsuperscript{231} HHSAS Database, FY 2015 data.
\textsuperscript{232} State Auditor’s Office (SAO) FY 2015 Turnover Statistics.
\textsuperscript{233} HHSAS Database, as of 8/31/15.
\textsuperscript{234} Ibid.
\textsuperscript{235} Ibid.
\textsuperscript{236} HHSAS Database, FY 2015 data.
\textsuperscript{237} HHSAS Database, as of 8/31/15.
\textsuperscript{238} Ibid.
average for all occupations. Increased demand for prescription medications is expected to lead to more demand for pharmaceutical services.\textsuperscript{239}

HHS employs 95 pharmacists, with an average annual salary of $102,979.\textsuperscript{240} This salary falls significantly below the market rate. The average annual salary for pharmacists nationally is $119,270 and $120,480 in Texas.\textsuperscript{241} In addition, the State Auditor’s Office 2014 market index analysis found the average state salary for Pharmacist Is to be 14 percent behind the market rate.\textsuperscript{242} This disparity is affecting the System’s ability to recruit qualified applicants for open positions. Pharmacist positions often remain unfilled for over six months.\textsuperscript{243}

With pharmacist turnover high at about 20 percent, HHS has often contracted with pharmacists to meet program needs.\textsuperscript{244} These contracted pharmacists are paid at rates that are well above the amount it would cost to hire pharmacists at state salaries. With a significant number of pharmacists nearing retirement age (or have already retired and returned to work), recruitment and retention will continue to be a problem for the System.

**Pharmacists at State Supported Living Centers**

About half of System pharmacists (40 employees) work at HHS state supported living centers. The typical pharmacist at these facilities is about 45 years old and has an average of seven years of state service.\textsuperscript{245}

Turnover for these pharmacists is currently high at about 23 percent, with pharmacist positions often remaining unfilled for about six months before being filled. Some of these facilities are experiencing even longer vacancy durations. At the Abilene State Supported Living Center a pharmacist position has remained vacant for over a year, while at the Corpus Christi State Supported Living Center, positions remain vacant for nearly six months.\textsuperscript{246}

HHS may face significant recruitment challenges in the next few years to replace these highly skilled employees who will be eligible for retirement. Though only five

\textsuperscript{240} HHSAS Database, as of 8/31/15.
\textsuperscript{243} HHSAS Database, as of 8/31/15.
\textsuperscript{244} HHSAS Database, FY 2015 data.
\textsuperscript{245} HHSAS Database, as of 8/31/15.
\textsuperscript{246} HHSAS Database, as of 8/31/15.
percent of these employees are currently eligible to retire, a quarter of them will be eligible in the next five years.\textsuperscript{247}

\textbf{Pharmacists at State Hospitals}

There are 32 System pharmacists working in state hospitals across Texas. These highly skilled employees are essential to the timely filling of prescribed medications for patients in state hospitals. The majority of these employees are in Pharmacist II positions (28 employees or 88 percent).\textsuperscript{248}

These pharmacists play a key role in the monitoring of costs and inventory of medications, and in the ongoing monitoring of in-patients’ medication histories, needs and potential adverse drug issues. They provide important clinical consultation to psychiatrists and physicians regarding complex medical and psychiatric conditions that may be intractable to traditional medication treatment interventions.

The typical pharmacist at a state hospital is about 48 years old and has an average of 12 years of state service. About 44 percent of these employees have 10 or more years of service.\textsuperscript{249}

Though turnover for these pharmacists is currently low at about 12 percent, positions are often remaining unfilled for nearly eight months before being filled. Some state hospitals are experiencing even longer vacancy durations. At the San Antonio State Hospital, a pharmacist position has remained vacant for over a year, while at the Terrell State Hospital, positions remain vacant for nearly six months.\textsuperscript{250, 251}

With 22 percent of these pharmacists currently eligible to retire, and 38 percent eligible to retire in the next five years, HHS will need to develop creative recruitment strategies to replace these skilled and highly tenured employees.\textsuperscript{252} To address these difficulties, HHS may consider increasing entry-level salaries for pharmacists and for currently employed state hospital pharmacists during fiscal years 2018 and 2019.

\textbf{Dentists}

The demand for dentists nationwide is expected to increase as the overall population grows. Employment of dentists is projected to grow by 18 percent through 2024.\textsuperscript{253}

\begin{footnotesize}
\begin{itemize}
\item \textsuperscript{247} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\item \textsuperscript{248} HHSAS Database, as of 8/31/15.
\item \textsuperscript{249} Ibid.
\item \textsuperscript{250} HHSAS Database, FY 2015 data.
\item \textsuperscript{251} HHSAS Database, as of 8/31/15.
\item \textsuperscript{252} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\item \textsuperscript{253} U.S. Department of Labor, Bureau of Labor Statistics, Occupational Outlook Handbook, web page \url{http://www.bls.gov/ooh/healthcare/dentists.htm}, last accessed on 5/2/16.
\end{itemize}
\end{footnotesize}
There are 28 dentists employed in HHS state supported living centers, state hospitals, and across the state in public health roles.\textsuperscript{254} Turnover for System dentists is very high, at 32 percent.\textsuperscript{255}

One reason for this high turnover is the large disparity between private sector and HHS salaries. System dentists earn an average annual salary of $126,846.\textsuperscript{256} This salary falls significantly below the market rate. The average annual salary for dentists nationally is $172,350 and $171,870 in Texas.\textsuperscript{257} This disparity is also affecting the System’s ability to recruit qualified applicants for open positions. Dentist positions often remain unfilled for several months.\textsuperscript{258}

In addition, since most dentists do not have the experience or interest to work with the challenging special patient populations, HHS continues to experience difficulty recruiting and attracting qualified dentists at the starting salary levels offered.

These problems are expected to worsen as employees approach retirement. While 14 percent of these highly skilled employees are currently eligible to retire, this number will increase to 32 percent in the next five years.\textsuperscript{259}

**Dentists at State Supported Living Centers**

Over half of System dentists (61 percent) provide advanced dental care and treatment for individuals living at the HHS supported living centers across Texas. The typical pharmacist at these facilities is about 53 years old and has an average of nine years of state service.\textsuperscript{260}

Turnover for these dentists is currently high at about 23 percent, with dentist positions often remaining unfilled for an average of four months before being filled. At the Brenham State Supported Living Center, dentist positions remain vacant for over six months.\textsuperscript{261,262}

HHS may face significant recruitment challenges in the next few years to replace these highly skilled employees who will be eligible for retirement. About 18 percent

\textsuperscript{254} HHSAS Database, as of 8/31/15.  
\textsuperscript{255} HHSAS Database, FY 2015 data.  
\textsuperscript{256} HHSAS Database, as of 8/31/15.  
\textsuperscript{258} HHSAS Database, as of 8/31/15.  
\textsuperscript{259} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.  
\textsuperscript{260} HHSAS Database, as of 8/31/15.  
\textsuperscript{261} HHSAS Database, FY 2015 data.  
\textsuperscript{262} HHSAS Database, as of 8/31/15.  

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of these employees are currently eligible to retire, and this number will increase to nearly 30 percent in the next five years.\textsuperscript{263}

**Dentists at State Hospitals and in Public Health Roles**

HHS employs three dentists in state hospitals, providing preventive care, emergency dental interventions and other treatment services to patients. Another five dentists perform public health roles are Central Office staff or members of five regional dental teams who conduct dental surveillance, data collection and reporting and provide preventive oral health services. Services are provided primarily to low-income, pre-school and school-age children in rural areas with limited or no access to these services.\textsuperscript{264}

These dentists are, on average, about 46 years old, with an average of about seven years of state service.\textsuperscript{265}

Turnover for these dentist positions is very high at about 46 percent.\textsuperscript{266}

Though only 13 percent of these dentists are currently eligible to retire, 38 percent will be eligible to retire in the next five years. HHS will need to develop creative recruitment strategies to replace these highly skilled employees.\textsuperscript{267}

**Physicians**

There are currently about 347,200 active physicians and surgeons across the country. Due to the increased demand for healthcare services by the growing and aging population, employment of physicians is projected to grow about 15 percent from 2014 to 2024, faster than the average for all occupations.\textsuperscript{268,269}

HHS employs 86 physicians, with majority (93 percent) employed in HHS state supported living centers, state hospitals and in Health Service Regions.\textsuperscript{270}

These highly skilled employees have, on average, about 12 years of state service, with an average age of 59. Over 40 percent of these employees have more than 10 years of state service.\textsuperscript{271}

\textsuperscript{263} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\textsuperscript{264} HHSAS Database, as of 8/31/15.
\textsuperscript{265} Ibid.
\textsuperscript{266} HHSAS Database, FY 2015 data.
\textsuperscript{267} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\textsuperscript{270} HHSAS Database, as of 8/31/15.
\textsuperscript{271} HHSAS Database, as of 8/31/15.
System physicians are currently earning an average annual salary of $180,529.\textsuperscript{272} This salary is below the average wage paid nationally ($197,700), and also lower than the Texas average of $197,410.\textsuperscript{273}

Turnover for these physicians is currently high at 22 percent. In addition, the vacancy rate is very high at 19 percent, with positions remaining vacant for an average of about seven months.\textsuperscript{274,275}

About 38 percent of these highly skilled and tenured employees are currently eligible to retire, with this number increasing to 52 percent in the next five years.\textsuperscript{276}

To address these difficulties, HHS may consider increasing entry-level salaries for physicians and for currently employed physicians during fiscal years 2018 and 2019.

**Physicians at State Supported Living Centers**

There are 39 physicians working at state supported living centers across Texas.\textsuperscript{277} Full staffing of these positions is critical to direct-care services.

These physicians have, on average, about nine years of state service, with an average age of 57. Local physicians who have established long term private practices often apply as a staff physician at state supported living centers late in their working career to secure retirement and insurance benefits, thus explaining the reason for the high average age. Only two full-time physicians are under 40 years of age.\textsuperscript{278}

Turnover for these physicians is considered high at 24 percent.\textsuperscript{279}

To deal with these recruitment and retention difficulties, HHS has often used contract physicians to provide required coverage. These contracted physicians are paid at rates that are well above the amount it would cost to hire physicians at state salaries (costing in excess of $200 per hour, compared to the hourly rate of about $94 paid to physicians at state supported living centers).\textsuperscript{280} Aside from being more costly, the System has experienced other problems with contracted physicians, including a lengthy learning curve, difficulty in obtaining long-term commitments,

\textsuperscript{272} HHSAS Database, as of 8/31/15.
\textsuperscript{274} HHSAS Database, FY 2015 data.
\textsuperscript{275} HHSAS Database, as of 8/31/15.
\textsuperscript{276} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\textsuperscript{277} HHSAS Database, as of 8/31/15.
\textsuperscript{278} Ibid.
\textsuperscript{279} HHSAS Database, FY 2015 data.
\textsuperscript{280} HHSAS Database, as of 8/31/15.
excessive staff time spent procuring their services, difficulty in obtaining coverage, dependability and inconsistency of services due to their short-term commitment.

To meet the health needs of individuals residing in state supported living centers, it is critical that HHS recruit and retain qualified physicians. However, due to the short supply and large demand, state supported living centers are experiencing difficulty hiring physicians. With a high vacancy rate of 17 percent, positions are remaining unfilled for an average of five months.\textsuperscript{281}

**Physicians at State Hospitals**

There are currently 30 physicians at HHS who are providing essential medical care in state hospitals.\textsuperscript{282} They take the lead role in diagnosing, determining a course of treatment, making referrals to outside medical hospitals, prescribing medications and monitoring the patients' progress toward discharge. Physician services in state hospitals are essential to the ongoing monitoring and management of an increasing number of complex chronic medical conditions, such as diabetes, seizure disorders, hypertension and chronic obstructive pulmonary disease (COPD). These employees are critical to the System's preparedness and response to medical services provided by the state and to major public health initiatives, such as obesity prevention, diabetes, disease outbreak control and others.

These physicians have, on average, about 16 years of state service, with an average age of about 63. Local physicians who have established long term private practices often apply as physicians at state hospitals late in their working career to secure retirement and insurance benefits, contributing to the high overall age. Only 12 full-time physicians are under 50 years of age.\textsuperscript{283}

Turnover for these physicians is currently high at 23 percent.\textsuperscript{284}

With a very high vacancy rate of about 27 percent, it takes about nine months to fill a state hospital physician position with someone who has appropriate skills and expertise.\textsuperscript{285}

In addition, HHS may face significant challenges in the next few years to replace those employees who are eligible for retirement. About 57 percent of these highly skilled and tenured employees are currently eligible to retire. Within five years, nearly 67 percent will be eligible to retire. If these employees choose to retire, the HHS would lose some of the most experienced medical personnel – those with

\textsuperscript{281} Ibid.
\textsuperscript{282} HHSAS Database, FY 2015 data.
\textsuperscript{283} HHSAS Database, as of 8/31/15.
\textsuperscript{284} HHSAS Database, FY 2015 data.
\textsuperscript{285} Ibid.
institutional knowledge and skills that will be difficult to match and even harder to recruit.286

Recruitment of qualified candidates, as well as retention of these highly skilled and knowledgeable employees, continues to be a challenge for the System.

Compensation levels will need to be increased to effectively compete in a market where qualified applicants are in short supply and healthcare competitors offer a higher starting salary. The cost of obtaining clinical staff through a placement service or contract far exceeds the cost of hiring and retaining an agency physician. Attracting and keeping clinical staff that are trained in the use of HHS electronic equipment and clinical practices, as well as familiarity with the consumer population, is more productive and cost-effective.

Physicians in Public Health Roles
There are 11 HHS physicians performing public health services.287 Physicians serving in public health roles in Health Service Regions and Central Office act as state and regional consultants and advisors to county, local, hospital, and stakeholder groups, and provide subject matter expertise on programs and services. These physicians provide public health services that are essential to the provision of direct clinical services in areas of the state where local jurisdictions do not provide services in communicable disease control and prevention and population-based services.

Physicians serving in Health Service Regions initiate treatment of communicable diseases; refer, prescribe medication, and monitor treatment. They oversee infectious disease investigation, control, and prevention efforts regionally, and provide direction for public health preparedness and response centrally and in the Health Service Regions. Some of the physicians who serve as Regional Directors are required by statute to also serve as the Local Health Authority (LHA) in counties that do not have a designated LHA. As such, they enforce laws relating to public health; establish, maintain and enforce quarantines; and report the presence of contagious, infectious, and dangerous epidemic diseases in the health authority’s jurisdiction. As Regional Medical Directors, physicians in Health Service Regions serve as community leaders and conveyors of health-related organizations and individuals for the purpose of improving the health of all Texans.

These physicians are, on average, about 52 years old, with an average of about 11 years of state service.288

Turnover for these positions is high at about 24 percent.289

286 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
287 HHSAS Database, as of 8/31/15.
288 Ibid.
289 HHSAS Database, FY 2015 data.
Vacancies in Regional Medical Director (RMD) positions are extremely difficult to fill, especially in major metropolitan and border regions. One RMD vacancy in the Houston area took over three years to fill. RMD positions in the Tyler and Harlingen area have been vacant for 15 months.

Currently, 27 percent of these physicians are eligible to retire, with the number employees eligible to retire increasing to over 60 percent in the next five years. HHS will need to develop creative recruitment strategies to replace these highly skilled employees.290

**Psychiatrists**

There are currently about 28,000 psychiatrists nationwide. Increased demand for healthcare services by the growing and aging population is expected to result in a 15 percent rate of growth from 2014 to 2024.291

HHS employs 130 psychiatrists in HHS state supported living centers and state hospitals, with the majority of these psychiatrists (about 88 percent) employed in state hospitals across Texas.292

These highly skilled and tenured employees have, on average, about 12 years of state service, with an average age of 54.293

System psychiatrists currently earn an average annual salary of $218,777.294 The State Auditor’s Office 2014 market index analysis found the average state salary for Psychiatrist IIs to be six percent behind the market rate.295

Turnover for System psychiatrists is currently high at about 22 percent. In addition, the vacancy rate is very high at about 18 percent, with positions remaining vacant for an average of about eight months.296 297

About 30 percent of these highly skilled and tenured employees are currently eligible to retire, with this number increasing to 44 percent in the next five years.298

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290 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
292 HHSAS Database, as of 8/31/15.
293 Ibid.
294 Ibid.
296 HHSAS Database, FY 2015 data.
297 HHSAS Database, as of 8/31/15.
298 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
To address these difficulties, HHS may consider increasing entry-level salaries for psychiatrists and for currently employed psychiatrists during fiscal years 2018 and 2019.

**Psychiatrists at State Supported Living Centers**

The 15 psychiatrists assigned to state supported living centers are in senior-level Psychiatrist III positions. Full staffing of these positions is critical to providing psychiatric services needed by residents.\(^{299}\)

These psychiatrists have, on average, about eight years of state service, with an average age of 56.\(^{300}\)

Turnover for these psychiatrists is very high at 39 percent.\(^{301}\)

With a very high vacancy rate of 40 percent, vacant positions in state supported living centers go unfilled for over 10 months.\(^{302}\) In fact, many of the postings and advertisements for these positions result in no responses from qualified applicants.

To deal with these recruitment and retention difficulties, HHS has often used contract psychiatrists to provide required coverage. These contracted psychiatrists are paid at rates that are well above the amount it would cost to hire psychiatrists at state salaries (costing in excess of $200 per hour, compared to the hourly rate of about $105 paid to System psychiatrists at state supported living centers).\(^{303}\) Aside from being more costly, HHS has experienced other problems with contracted psychiatrists, including a lengthy learning curve, difficulty in obtaining long-term commitments, excessive staff time spent procuring their services, difficulty in obtaining coverage, dependability and inconsistency of services due to their short-term commitment.

To meet the health needs of individuals residing in state supported living centers, it is critical that HHS fill all budgeted psychiatrist positions and effectively recruit and retain qualified psychiatrists.

**Psychiatrists at State Hospitals**

There are currently 115 System psychiatrists providing essential medical and psychiatric care in state hospitals.\(^{304}\) These highly skilled employees take the lead role in diagnosing, determining a course of treatment, prescribing medications and monitoring patient progress.

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\(^{299}\) HHSAS Database, as of 8/31/15.
\(^{300}\) Ibid.
\(^{301}\) HHSAS Database, FY 2015 data.
\(^{302}\) HHSAS Database, as of 8/31/15.
\(^{303}\) Ibid.
\(^{304}\) HHSAS Database, as of 8/31/15.
These psychiatrists have, on average, about 13 years of state service, with an average age of 53. About 53 percent of these employees have 10 or more years of service.\textsuperscript{305}

Annual turnover for these psychiatrists is currently high at about 20 percent. Big Springs State Hospital reported the highest state hospital turnover rate of 57 percent.\textsuperscript{306}

With a high vacancy rate of about 14 percent, most vacant psychiatrist positions go unfilled for months.\textsuperscript{307} At some state hospitals, these positions remain vacant for seven months (at the Rusk and Terrell state hospitals). These challenges are expected to continue, as more than 30 percent of these highly skilled and tenured employees are currently eligible to retire, and may leave at any time. Within five years, this number will increase to 46 percent.\textsuperscript{308}

State hospitals face increasing difficulty in recruiting qualified psychiatrists. This has resulted in excessively high workloads for the psychiatrists on staff, reducing the ability of state hospitals to function at full capacity, placing hospital accreditation at risk and increasing the average length of patients' stay.

To deal with these recruitment difficulties, the System has often used contract psychiatrists to provide required coverage. These contracted psychiatrists are paid at rates that are well above the amount it would cost to hire psychiatrists at state salaries (costing in excess of $200 per hour, compared to the hourly rate of about $105 paid to psychiatrists at state hospitals).\textsuperscript{309} These contracted psychiatrists may not be immediately available in an emergency (increasing the risk to patients) and are unable to provide the individualized treatment that arises from daily contact with staff and patients. Consequently, the patient's length of stay increases and annual number of patients served decreases. Since medical records of patients are almost completely electronic, psychiatrists are required to be proficient at computer entry and documentation. It often takes many weeks to train a contract psychiatrist on the nuances of the electronic medical record system.

Due to the complex medical and mental challenges that individuals residing in state hospitals exhibit, it is critical that HHS is able to effectively recruit and retain qualified psychiatrists. Continued targeted recruitment strategies and retention initiatives for these highly skilled professionals must be ongoing.

\textsuperscript{305} Ibid.  
\textsuperscript{306} HHSAS Database, FY 2015 data.  
\textsuperscript{307} HHSAS Database, as of 8/31/15.  
\textsuperscript{308} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.  
\textsuperscript{309} HHSAS Database, as of 8/31/15.
Psychologists

There are 236 psychologists in HHS, with the majority (98 percent) employed in state supported living centers and state hospitals across the state.\(^{310}\)

System psychologists earn an average annual salary of $57,043.\(^{311}\) This salary falls below the market rate. The State Auditor’s Office 2014 market index analysis found the average state salary for Psychologist IIs to be nine percent behind the market rate.\(^{312}\)

Turnover for these psychologists is high at 25 percent, with psychologist positions often remaining unfilled for several months before being filled.\(^{313} 314\)

Psychologists at State Supported Living Centers

About 77 percent of HHS psychologists (182 employees) work at state supported living centers across Texas. These employees participate in quality assurance and quality enhancement activities related to the provision of psychological and behavioral services to state supported living center residents; provide consultation and technical assistance to individuals with cognitive, developmental, physical and health related needs; implement and evaluate behavioral support plans; review the use of psychotropic medication in treating behavior problems; perform chart reviews; and perform observations and assessments relevant to the design of positive interventions and supports for individuals.\(^{315}\)

The typical psychologist at these facilities is about 41 years old and has an average of eight years of state service.\(^{316}\)

Turnover for these psychologists is high at about 26 percent, reflecting the loss of about 52 workers during fiscal year 2015. Turnover rates by location ranged from 10 percent at the Denton State Supported Living Center to 75 percent at the El Paso State Supported Living Center.\(^{317}\)

With a high vacancy rate for these positions (at approximately 11 percent), psychologist positions often remain open for months before being filled. At the

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\(^{310}\) HHSAS Database, as of 8/31/15. Note: Includes Psychologists, Behavioral Health Specialists, and Behavioral Analysts.

\(^{311}\) HHSAS Database, as of 8/31/15.


\(^{313}\) HHSAS Database, FY 2015 data.

\(^{314}\) Ibid.

\(^{315}\) HHSAS Database, as of 8/31/15.

\(^{316}\) Ibid.

\(^{317}\) Ibid.

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Brenham State Supported Living Center, positions have remained vacant for an average of 10 months.\textsuperscript{318}

**Psychologists at State Hospitals**

There are 50 psychologists working at HHS state hospitals, with nearly 60 percent employed in Psychologist II positions.\textsuperscript{319} Full staffing of these positions is critical to providing needed psychological services to patients.

These psychologists play a key role in the development of treatment programs for both individual patients and groups of patients. Their evaluations are critical to the ongoing management and discharge of patients receiving competency restoration services, an ever growing patient population in the state hospitals. They also provide testing and evaluation services important to ongoing treatment, such as the administration of IQ, mood, and neurological testing instruments.

These highly skilled and tenured employees have, on average, about 10 years of state service, with an average age of 46.\textsuperscript{320}

Turnover for these psychologists is high at about 22 percent. The San Antonio State Hospital experienced the highest turnover at 43 percent.\textsuperscript{321}

The vacancy rate for these positions is very high, at about 18 percent, with positions often remaining unfilled for over seven months.\textsuperscript{322}

HHS may face significant recruitment challenges in the next few years, as 18 percent of these highly skilled and tenured employees are currently eligible for retirement, and may leave HHS at any time.\textsuperscript{323}

It is critical that the HHS fill all budgeted state hospital psychologist positions and is able to effectively recruit and retain qualified psychologists.

**Epidemiologists**

HHS employs 91 full-time epidemiologists who provide services in the areas of infectious disease and injury control, chronic disease control, emergency and disaster preparedness, disease surveillance and other public health areas.\textsuperscript{324} They

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\textsuperscript{318} HHSAS Database, as of 8/31/15.
\textsuperscript{319} Ibid.
\textsuperscript{320} Ibid.
\textsuperscript{321} HHSAS Database, FY 2015 data.
\textsuperscript{322} HHSAS Database, as of 8/31/15.
\textsuperscript{323} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\textsuperscript{324} HHSAS Database, as of 8/31/15.
provide critical functions during disasters and pandemics and other preparedness and response planning.

Nationally, there is a shortage of epidemiologists. Although epidemiology is known as the core science of public health, epidemiologists comprise less than one percent of all public health professionals. As of May 2014, there were approximately 5,800 epidemiologist jobs in the U.S., with a projected job growth rate of 6.3 percent by 2022.

On average, System epidemiologists have about nine years of state service, with an average age of approximately 39 years.

Turnover for System epidemiologists is currently high, at about 25 percent, well above the state average turnover rate of 18 percent. This rate is much higher for entry-level Epidemiologist Is, at 38 percent. When the level of on-the-job experience needed to adequately perform the job is considered, this high turnover rate is of special concern. It takes, on average, a year for a new epidemiologist to learn his or her job. Several years are required to develop the specialized expertise required of senior epidemiologists to support the state and protect public health.

HHS is currently experiencing difficulty filling vacant epidemiologist positions. Vacant positions are going unfilled for many months due to a shortage of qualified applicants available for work.

Low pay is a contributing factor in the inability to attract qualified epidemiologist applicants. System epidemiologists are currently earning an average annual salary of $56,861. This salary is significantly below the average wage paid nationally ($76,900), and also lower than the Texas average of $66,880.

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329 HHSAS Database, as of 8/31/15.

330 HHSAS Database, FY 2015 data.

331 State Auditor’s Office (SAO) FY 2015 Turnover Statistics.

332 HHSAS Database, as of 8/31/15.

333 HHSAS Database, as of 8/31/15.

In addition, HHS may face significant recruitment challenges in the next few years to replace these highly skilled employees who are eligible for retirement. Though only 11 percent of these employees are currently eligible to retire, this rate will increase in the next five years to 23 percent. \(^{355}\)

HHS will need to closely monitor this occupation due to the nationally non-competitive salaries and a general shortage of professionals performing this work.

**Sanitarians**

Another public health profession currently experiencing shortages is environmental health workers (i.e., sanitarians). \(^{336}^{337}\)

There are 127 sanitarians employed with HHS. \(^{338}\) HHS registered sanitarians inspect all food manufacturers, wholesale food distributors, food salvagers in Texas, as well as all retail establishments in the 188 counties not covered by local health jurisdictions and conduct a multitude of environmental inspections such as children’s camps, asbestos abatement, hazardous chemicals/products and many others. Sanitarians are instrumental in protecting the citizens of Texas from food-borne illness and many dangerous environmental situations and consumer products, including imported foods, drugs and consumer products. The U.S. Food and Drug Administration (FDA) and the Consumer Products Safety Commission (CPSC) have little manpower and therefore depend on the state programs to protect citizens. System sanitarians also respond to a variety of emergencies, including truck wrecks, fires, tornados, floods and hurricanes. They are the first line of defense against a bioterrorist attack on the food supply.

On average, HHS sanitarians are 46 years old and have about 10 years of state service. About 43 percent of these employees have 10 or more years of state service. \(^{339}\)

Though the turnover rate for HHS sanitarians is currently low at about 10 percent, HHS has experienced difficulty filling vacant positions, with vacant positions often going unfilled for many months due to a shortage of qualified applicants available for work. \(^{340}^{341}\)

355 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
338 HHSAS Database, as of 8/31/15.
339 Ibid.
340 Ibid.
341 HHSAS Database, FY 2015 data.
Historically, HHS has faced special challenges filling vacancies in both rural and urban areas of the state. In addition, the state requirement for sanitarians to be registered and have at least 30 semester hours of science (in addition to 18 hours of continuing education units annually) has made it increasingly difficult to find qualified individuals.

With 17 percent of sanitarians currently eligible to retire, and 39 percent eligible to retire in the next five years, HHS will need to develop creative recruitment strategies to replace these skilled and highly tenured employees.\(^{342}\)

**Laboratory Staff**

HHS operates a state-of-the-art state laboratory in Austin and two regional laboratories, one in San Antonio and the other in Harlingen. The Austin State Hospital provides laboratory services for the other HHS state hospitals and state supported living centers.

While laboratory staff is made up of a number of highly skilled employees, there are four job groups that are essential to laboratory operations: chemists, microbiologists, laboratory technicians and medical technologists.

Targeted recruitment and retention strategies are used to ensure that HHS laboratories have enough staff to meet HHS goals. One strategy has been to contract with private laboratories. This has not been a particularly desirable alternative to hiring laboratory staff. Barriers to using contracts with private labs include securing a cost-effective contract arrangement and the difficulty in obtaining a long term commitment. In most cases, contracting with private lab services is more costly than hiring staff to perform these services. To further address these difficulties, HHS may consider increasing entry-level salaries for new laboratory staff and for currently employed staff during fiscal years 2018 and 2019.

**Chemists**

There are 59 chemists employed in the HHS Division for Disease Control and Preventive Services, all located in Austin.\(^{343}\)

The typical System chemist is about 47 years old and has an average of about 12 years of state service. Nearly half of the employees have 10 years or more of state service.\(^{344}\)

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\(^{341}\) HHSAS Database, as of 8/31/15.
\(^{342}\) Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
\(^{343}\) HHSAS Database, as of 8/31/15.
\(^{344}\) Ibid.
While the overall turnover rate for System chemists is well managed at about 10 percent annually, Chemist IIs experienced a 19 percent turnover rate, slightly above the state average turnover rate of 18 percent.  

The vacancy rate for System chemists is currently high at about 17 percent, with vacant positions often going unfilled for many months due to a shortage of qualified applicants available for work. These vacancy problems are expected to worsen as employees approach retirement. Nearly 20 percent of these tenured and highly skilled employees are currently eligible to retire.

Low pay is a factor in the inability to attract qualified chemist applicants. System chemists earn an average annual salary of about $45,940. The State Auditor’s Office 2014 market index analysis found the average state salary for chemists ranged from three to 11 percent behind the market rate. The average annual salary for chemists nationally is $77,860 and $71,670 in Texas.

**Microbiologists**

There are 130 microbiologists working for HHS, with the majority at the Austin laboratory.

System microbiologists have, on average, about 11 years of state service, with an average age of about 41 years.

The turnover rate for all System microbiologists is below the state average rate of 18 percent at about 14 percent. This rate is much higher for entry-level Microbiologist Is (at 26 percent) and Microbiologist IIs (at 21 percent).

System microbiologists earn an average annual salary of about $43,069. The State Auditor’s Office 2014 market index analysis found the average state salary for
microbiologists ranged from one to seven percent behind the market rate.\textsuperscript{357} This average annual salary also falls below the national and statewide market rates for this occupation. The average annual salary for microbiologists nationally is $76,230 and $55,100 in Texas.\textsuperscript{358} This disparity in earnings is affecting the System’s ability to recruit qualified applicants for open positions. Microbiologist positions often remain unfilled for several months.\textsuperscript{359}

In addition, HHS may face significant recruitment challenges in the next few years to replace these highly skilled and tenured employees who are eligible for retirement. Though only 13 percent of these employees are currently eligible to retire, this rate will increase in the next five years to 25 percent.\textsuperscript{360}

**Laboratory Technicians**

The laboratory technician profession is currently experiencing national shortages.\textsuperscript{361}

There are 53 laboratory technicians employed at HHS.\textsuperscript{362}

The typical laboratory technician is about 41 years old and has an average of 11 years of state service.\textsuperscript{363}

The turnover rate for System laboratory technicians is slightly below the state average rate of 18 percent at about 16 percent.\textsuperscript{364, 365}

The vacancy rate for System laboratory technicians is currently high at about 15 percent, with vacant positions often going unfilled for many months due to a shortage of qualified applicants available for work.\textsuperscript{366}

Low pay is a factor in the inability to attract qualified laboratory technician applicants. HHS laboratory technicians earn an average annual salary of about $30,128.\textsuperscript{367} The average annual salary for medical and clinical laboratory technicians nationally is


\textsuperscript{359} HHSAS Database, as of 8/31/15.

\textsuperscript{360} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.


\textsuperscript{362} HHSAS Database, as of 8/31/15.

\textsuperscript{363} Ibid.

\textsuperscript{364} State Auditor’s Office (SAO) FY 2015 Turnover Statistics.

\textsuperscript{365} HHSAS Database, FY 2015 data.

\textsuperscript{366} HHSAS Database, as of 8/31/15.

\textsuperscript{367} Ibid.
$41,420 and $38,970 in Texas.\textsuperscript{368} The State Auditor's Office 2014 market index analysis found the average state salary for laboratory technicians ranged from five percent above to 15 percent behind the market rate.\textsuperscript{369}

These problems are expected to worsen as employees approach retirement. Nearly 30 percent of these tenured and highly skilled employees will be eligible to retire in the next five years.\textsuperscript{370}

**Medical Technologists**

The medical technologist profession is also currently experiencing national shortages.\textsuperscript{371}

Within HHS, there are 65 medical technologists.\textsuperscript{372} These workers perform complex clinical laboratory work and are critical to providing efficient and quality healthcare.

System medical technologists have, on average, about 11 years of state service, with an average age of 44 years. About 45 percent of these employees have 10 or more years of state service.\textsuperscript{373}

The turnover rate for all System medical technologists is slightly below the state average rate of 18 percent at about 16 percent. This rate is much higher for entry-level Medical Technologist Is (at 20 percent) and Medical Technologist IIs (at 34 percent).\textsuperscript{374} \textsuperscript{375}

The vacancy rate for System medical technologists is currently high at about 15 percent, with vacant positions often going unfilled for many months due to a shortage of qualified applicants available for work.\textsuperscript{376}

HHS medical technologists earn an average annual salary of $41,993, which is below the average wage paid nationally ($61,860), and also lower than the Texas average of $59,660.\textsuperscript{377} \textsuperscript{378} In addition, the State Auditor's Office 2014 market index


\textsuperscript{370} Includes return-to-work retirees. HHSAS Database, as of 8/31/15.


\textsuperscript{372} HHSAS Database, as of 8/31/15.

\textsuperscript{373} Ibid.

\textsuperscript{374} State Auditor's Office (SAO) FY 2015 Turnover Statistics.

\textsuperscript{375} HHSAS Database, FY 2015 data.

\textsuperscript{376} HHSAS Database, as of 8/31/15.

\textsuperscript{377} Ibid.

analysis found the average state salary for medical technologists ranged from seven to 16 percent behind the market rate. This disparity is affecting the HHS’ ability to recruit qualified applicants for open positions.

Though only 14 percent of these employees are currently eligible to retire, over a quarter of these employees will be eligible in the next five years. HHS will need to develop creative recruitment strategies to replace these highly skilled and tenured employees, and to ensure a qualified applicant pool is available to select from as vacancies occur.

Note: The Employees are listed under the Occupational title of Medical and Clinical Laboratory Technologists.


380 Includes return-to-work retirees. HHSAS Database, as of 8/31/15.
DEVELOPMENT STRATEGIES TO MEET WORKFORCE NEEDS

Recruitment Strategies

General Strategies

♦ Increase attendance at job fairs, college fairs, and military installation recruiting events.

♦ Develop or enhance partnerships with entities such as, but not limited to, social service agencies, workforce centers, veteran networks, high schools, PAL programs and colleges or universities.

♦ Market positions that qualify for participation in the federal Public Service Loan Forgiveness (PSLF) Program, which allows qualifying full-time employees to have the remaining balance of their Direct Loans forgiven after making 120 qualifying monthly payments.

♦ Promote the benefits of state employment, including job stability, insurance, career advancement ladder and opportunities, and the retirement pension plan.

♦ Develop LinkedIn pages promoting HHS as an employer of choice;

♦ Create HHS Jobs pages for passive recruitment;

♦ Develop active recruitment strategies for candidate sourcing via social media professional networks.

State Supported Living Center Strategies

♦ Continue to advertise employment opportunities using a variety of media sources, including print advertising in local and regional newspapers, billboards, and local radio and television commercials.

♦ Continue to post jobs on various employment and professional websites.

♦ Continue to use banners and billboard-style signage near the entrance of the facilities to advertise available positions.

♦ Continue to use of direct mail to increase awareness of job opportunities.

♦ Continue to participate in major job fairs.

♦ Continue to host on-campus job fairs for direct support professionals, nurses, and support positions such as Food Service, Housekeeping, and Maintenance, and management specialist/recruiter supports the facilities when requested by sending additional recruitment materials.

♦ Continue to attend career fairs targeting veterans in an effort to recruit the growing number of veterans leaving military service and seeking employment in other governmental entities.

♦ Continue to submit salary exception requests for approval of salary offers greater than the HHS allowable amount.

♦ Continue to adjust nurse salaries in Regions 6, 7 and 11 to be more competitive with the private sector.
Continue to posting positions in multiple cities when possible and moved positions around to the different regions in an effort to recruit viable nurse applicants.

Continue to inform nurse applicants of available incentives such as teleworking from home or offering compressed or flex schedules.

Implement a nursing plan that provides promotional opportunities for nurses that want to remain in direct contact roles in addition to those seeking management opportunities.

Hire J-1 Visa Waiver applicants. The J-1 Visa Waiver allows a foreign student who is subject to the two-year foreign residence requirement to remain in the U.S. upon completion of degree requirements/residency program, if they find an employer to sponsor them. The J-1 Visa Waiver applies to specialty occupations in which there is a shortage. The J-1 Waiver could be used to recruit physicians, pharmacists, psychiatrists, dentists, psychologists, nurse practitioners, physician assistants, registered therapists, and others for a minimum of three years.

Request salary increases for physicians, nurse practitioners, and psychiatrists.

State Hospital and Public Health Strategies

Continue using social work, nursing, medical student, psychiatric resident and other medical professional student/intern rotations at state hospitals, central office, and within Health Service Regions.

Continue using internet-based job postings, billboards, job fairs, professional newsletters, list serves and recruitment firms.

Continue posting difficult-to-recruit positions in professional publications.

Continue regular and ongoing dialogues and presence with baccalaureate and advanced nursing program educators in Texas schools and respective universities in the state and surrounding areas;

Solidify a “pipeline”
  o from academia to HHS for students to learn about the work of the System and gain experience, skills and qualifications through internships.
  o through ongoing public health nursing internships between nursing schools and HHS for students to learn about the work, and gain experience, skills and qualifications through practical experience.

Work with nurse practitioner educational programs to develop, fund and promote specialty psychiatric nurse practitioner tracks with rotations in state hospitals.

Offer incentives and educational leave to encourage System non-licensed staff in state hospitals and Health Service Regions to train to become RNs or other critical shortage staff.

Review current sanitarian salaries from local health departments, industry and the federal government and make necessary salary adjustments.

Enhance capacity to recruit bilingual workers.

Provide additional workforce support and expertise in area of recruitment to work units.
♦ Consider the use of recruitment bonuses and moving allowances for highly competitive job categories, such as psychiatrists, pharmacists and other “shortage” clinical professionals.
♦ Fund stipends for Psychiatrists-in-Training at state hospitals.
♦ Request exception to HHS rules governing the hiring of licensed psychological personnel to include license-eligible applicants, with agreement that full licensing will be obtained within a certain time frame.

Other Targeted Strategies
♦ Department of Family and Protective Services (DFPS) Protective Service Worker Strategies:
  o Continue providing an internet resource. By clicking on the "Jobs" link from [https://www.dfps.state.tx.us/](https://www.dfps.state.tx.us/), users are taken to the "Come Work for Us" page that includes realistic job preview videos for Adult Protective Services (APS), Child Care Licensing (CCL), Residential Licensing Services (RCCL) Specialists, and Child Protective Services (CPS) positions, as well as written realistic job previews for all of the programs. CPS also has a self-screening test that asks applicants questions to help them decide which stage of service might be a better fit for them prior to applying.
  o Continue using a pre-screening test for job applicants to assess skills and performance capabilities. DFPS implemented a new hiring process in March 2015 to focus screening efforts around identifying the best attributes needed to be successful as a direct delivery caseworker. The HSI is founded on research contained within A Research-Based Child Welfare Employee Selection Protocol6, and requires applicants to respond to a series of behavioral and skill assessment questions assessing risk in the following areas with a rating of Not A Strength (NAS), Adequate (ADQ), or Strong (STR):
    ▪ Attendance / Turnover Risk
    ▪ Conscientiousness
    ▪ Demonstrates Respect
    ▪ Self-Management
    ▪ Service Orientation
    ▪ Analytical Skills
    ▪ Reading Comprehension
    ▪ DFPS Math and Reasoning

After evaluating applications and HSI responses, the TAG Hiring Specialist and Program Supervisors collaborate to select which applicants they wish to interview and hire.
To refine the new HSI model further, Workforce Development and The National Association of Social Workers - Texas (NASWTX) are working in partnership on the development of an external stakeholder survey focused on clients' perspectives of what makes a great caseworker. This survey will focus on case outcomes and ask those who received services from DFPS what caseworker behaviors or characteristics made their experience great. If proven successful, the long-term goal for this project would be to take a similar approach to all DFPS Program services, informing agency hiring practices across the spectrum of DFPS services.

- Continue efforts to recruit bilingual workers by using consistent testing for bilingual skills and implementing a consistent policy for bilingual pay.
- Allow for the substitution of CPS related experience in lieu of education for CPS services statewide.
- Provide an increased starting salary (6.8 percent or 3.4 percent) to social work graduates hired into APS, CPS and State Wide Intake (SWI).
- Improve the recruitment of students in the Title IV-E Child Welfare Training Program, which will increase organizational loyalty among its graduates.
- Explore the feasibility of hiring individuals with two-year degrees for qualifying protective services worker positions, along with creating a career path for those individuals for achieving long-term service with HHS.
- Initiate a 2-year degreed CPS caseworker pilot for hiring internal candidates with qualifying job experience (e.g., Human Services and Administrative Technicians).
- Expand statewide for all CPS stages of service the substitution of experience in lieu of education.
- Increase the marketing of the unique values associated with "Protecting the Unprotected."
- Provide the following focused recruitment activities for jobs with low applicant pools and high vacancy rates:
  - Offer 6.8 percent above base salary.
  - Provide locality pay in some areas of the state.
  - Provide recruitment bonuses to certain staff.
  - As funding allows, deploy recruiters in key areas of the state to build relationships and source potential applicants.
  - Attend job fairs and organize hiring fairs in specific areas to interview many staff in one or two days.
  - Partner with DFPS media specialists to produce special interest stories about jobs.
  - Add training sessions to accommodate all new hires.
  - Increase hiring specialist resources for targeted areas, when necessary.
- Work with contracted partners to expedite certain hiring activities.

- **Claims Examiners**
  - Work with institutions of higher education in the Austin area to share Social Security Administration’s (SSA’s) training curriculum for Claims Examiners and explore interest with Department Heads and Professors for adding some of the SSA training concepts into their curriculum.

- **Sanitarians**
  - Continue facilitating the use of a “Sanitarian-In-Training” model, whereby individuals with appropriate education and experience but who lack the required license may be hired at a lower pay group in a related classification (as Environmental Protection Specialist Is) and provided the opportunity to obtain their license and supplement their field experience.

### Retention Strategies

#### General Strategies

- Explore opportunities for flexible work schedules, telework, mobile work and alternative officing.
- Develop a management forum and other tools to assist individuals with the technical skills transition and be successful in positions that require both technical and management skills.
- Continue promoting succession planning/career development through HHS programs, such as the HHS Leadership Development Program.

#### State Supported Living Center Strategies

- Continue paying licensure fees and required training and continuing education costs for employees whose position require them to maintain professional licensure.
- SSLC Division has added a Licensed Vocational Nurse IV to the available positions. This provides ability to retain LVN’s as their experience increases and also to offer higher salaries for more experienced applicants.

#### State Hospital and Public Health Strategies

- Continue involvement in HHS System-wide efforts to address health and human services workforce issues, including retention of staff filling essential positions and participation in leadership development opportunities.
- Continue to provide adequate training to assist employees in preparedness of their jobs and expand opportunities for cross-training.
♦ Continue to provide formally approved continuing education for various licensed healthcare professionals that meet requirements for credentialing and evaluate options for paying for these continuing education programs.
♦ Continue adjusting and approving Nursing Compensation plans every two years.
♦ Develop a methodology for performance-based merits.
♦ Improve the work environment through the provision of adequate technological tools, streamlined business processes and additional supervisory training.
♦ Provide additional workforce support and expertise in the area of retention to work units.
♦ Consider opportunities to mentor professional staff.
♦ Recognize and reward employees who make significant contributions.
♦ Increase System commitment to and effectiveness of retaining a racially and ethnically diverse workforce.
♦ Implement continuous business improvement processes.

Other Targeted Strategies
♦ Department of Family and Protective Services (DFPS) Protective Service Worker Strategies:
  o Partner with stakeholders to conduct a multi-phased benefits (i.e., salary) study that evaluates the System's competitiveness and pay strategies within the existing industry market.
  o Use applicable literature reviews, successful private sector initiatives, and internal statewide agency best practices to implement new or revise existing onboarding strategies.
  o Administer surveys and use the data to improve existing practices and guide the development of new initiatives targeted to improve employee experiences.
  o Use applicable literature reviews, successful private sector initiatives, and identified statewide agency best practices to implement new and revise existing strategies integrating employees into their units.
  o Promote existing career enhancement/advancement ladders.
  o Create virtual town halls to provide an economical, sustainable, and scalable way for statewide employees to interact with System executive staff on a more frequent basis.
  o Develop and implement an employee recognition program beyond existing Stars and eRewards programs by soliciting feedback from workers, supervisors, and directors on current best practices and then compare findings to private sector best practices.
  o Evaluate the effectiveness and scope of DFPS locality pay\textsuperscript{381} by:

\textsuperscript{381} The General Appropriations Act, Article II, authorizes HHS agencies to provide additional compensation to current and newly hired employees whose duty station is located in an area of the state in which the high cost of living is causing excessive employee turnover. This additional pay may not exceed $1,200 per month and is proportional to the hours worked during the month.
working with stakeholders and university partners to conduct a cost of living comparison for all counties in the State of Texas,
conducting a housing cost analysis for individuals in Region 9 to evaluate the impact of the stipend and determine if stipend amounts should be adjusted; and
reporting the results of such assessments by December 2016, as required by H.B. 1, Rider 41, of the 84th Legislature, Regular Session, 2015.

Beginning December 1, 2015, overtime (OT) payment thresholds were reduced from 240 to 140 hours. Furthermore, after December 1, the OT payment process was automated so that employees with approved OT hours exceeding 140 are automatically paid down the following month, no longer require managers to authorize payment. OT payment trends are a concern within Workforce Development, due to the short-and long-term effects on agency employee retention and turnover rates. Workforce Development plans to accomplish the following during fiscal year 2016:

Explore possibilities for changing when employees are paid out for OT when moving from non-exempt to exempt positions

Measure existing financial incentives for effectiveness in fiscal years 2016-17 include longevity pay, mentoring stipend, travel reimbursements, regular and one-time merits, CPS performance bonus, investigative stipend, Title IV-E stipend, college degree pay, on-call pay, and high-risk pay.

Eligibility Staff:
Continue the Business Process Redesign initiative to streamline functions performed by eligibility staff, creating capacity to help manage workloads as caseloads increase in relation to the anticipated population growth in Texas.
Exploring the development of additional career tracks for clerical and eligibility staff to promote career advancement and reduce turnover.
Exploring the development of a mentoring program to provide structured support to eligibility staff completing training.
Utilizing telework across some business units and exploring expansion to others.

Epidemiologists:
Consider defining a non-manager career ladder beyond Epidemiologist III for continued growth.

Claims Examiners:
Review current functional job descriptions of Claims Examiners to determine if the period of time currently in place for promotions to the next
level could be reduced to allow for these employees, once trained, to work complicated cases sooner.

- Explore the possibility of having an additional Claims Examiner classification created to be more in line and competitive with their peers in other states and federal components who do the same work.