

North Country Region Sector Partnerships Initiative Data Project



**NH SECTOR
PARTNERSHIPS
INITIATIVE**

August 2022

History of the North Country Region Healthcare Workforce Group

In 2017, the Bureau of Economic Affairs established the New Hampshire Sector Partnerships Initiative (SPI) to help fill the gaps in construction, healthcare, hospitality, manufacturing, and technology sectors. SPI advisors were hired for each sector to establish relationships among various workforce groups, commissions, education programs, and employers.

The North Country Healthcare Workforce group was established in the Fall of 2017 using the successful model from the Monadnock Region Healthcare Workforce group. This group regularly convened key stakeholders to develop strategies to grow the region's healthcare workforce by reducing barriers, advocating for education programs, and educating employers on existing workforce programs offered by community organizations.

Early convenings of the North Country Healthcare Workforce Group included strategic planning, including SWOT analysis, in February 2018. Participants identified the strengths, weaknesses, opportunities, and threats pertaining to the region's healthcare workforce. From this exercise, strategies to help grow the healthcare workforce were developed.

The group's first project was to host a state-wide conference for licensed nursing assistants (LNAs) at the Mountain View Grand in Whitefield, NH. Organizers included North Country Health Consortium, Weeks Medical Center, Hugh Gallen Career and Technical Education Center, Genesis HealthCare, and Coos Nursing Hospital. Over 60 LNAs from around the state attended the day of learning, celebration, and renewal. Attendees learned about Music and Memory, Hospice, Oral Health, Alzheimer's Habilitation Therapy and LNA best practices.

The North Country Region Healthcare participated in a pilot survey of workforce data collection and analysis in the Fall of 2021. The success of the pilot along with the feedback obtained from participants helped SPI to obtain additional funding and implement a regional, state-wide data project in 2022.

Roxie Severance, Chair
North Country Region Healthcare Workforce Group

I. Introduction

The ability to measure sector partnership initiative outcomes is an indication of the effectiveness and maturity of sector partnership(s).¹ Accordingly, the US Department of Health and Human Services² has recognized the need to improve the use of data and evidence-based practices in healthcare workforce planning. The U.S. Department of Labor Sector Strategy Implementation Framework³ identifies data informed decision making as an essential component in achieving high performing sector partnerships.

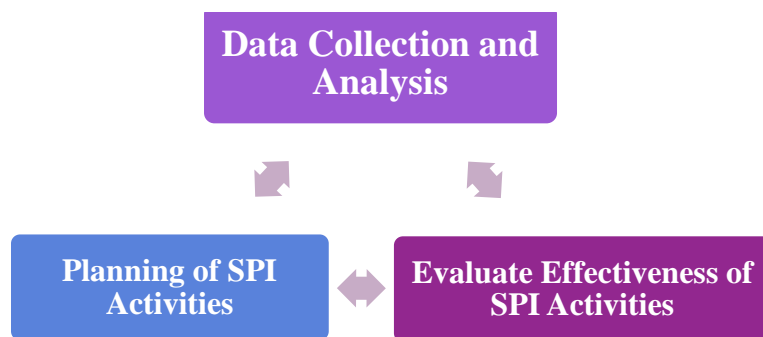
The New Hampshire Healthcare Sector Partnership Initiative (SPI) has fostered numerous collaborations and

partnerships to improve the healthcare workforce since established in 2017. While efforts have been plentiful, there are opportunities to establish continuous quality improvement framework including measurable outcomes to determine the effectiveness of initiatives and achieve sustainability.

II. Background and Planning

The sector partnership initiative has been successful in creating and maintaining regional groups throughout the state. The lack of data related to the healthcare workforce has inhibited the ability to move forward in developing and tracking key performance metrics necessary to sustain the program.⁴

Figure 1. Relationship between data collection and analysis, planning, and evaluation



New Hampshire Employment Security (NHES)⁵ provides valuable labor market information, including occupations, worker skills, unemployment rates, changes in employment, projected job growth, and earnings. This information, along with employer input and feedback obtained through data collection, will assist to fully define the scope of workforce issues (Figure 2)⁶.

¹ Iowa Sector Partnerships Toolkit 1.0: Planning: <https://educateiowa.gov/sites/files/ed/documents/Sector%20Partnership%20Toolkit%20-1.0%20Planning.pdf>

² U.S. Department of Health and Human Services (2021). Health workforce strategic plan. Retrieved 3/10/2022: <https://bhwh.hrsa.gov/sites/default/files/bureau-health-workforce/about-us/hhs-health-workforce-strategic-plan-2021.pdf>

³ U.S. Department of Labor (2015). ETA Sector Strategies Technical Assistance Initiative, Sector Strategies Implementation Framework, Working Version 2.1:

https://www.in.gov/dwd/files/07-etass_sector_strategies_framework_201503015_final.pdf

⁴ Iowa Sector Partnerships Toolkit 3.0: Sustaining: <https://educateiowa.gov/sites/files/ed/documents/Sector%20Partnership%20Toolkit%203.0%20-%20Sustaining%20%28September%202017%29.pdf>

⁵ New Hampshire Employment Security (n.d). Granite Stats. <https://www2.nhes.nh.gov/GraniteStats/index.jsp>

⁶ From Iowa Sector Partnership Toolkit 3.0 (2017), p.30

In preparation for data collection, strategic planning exercises were conducted in four of the five SPI regions during the summer of 2021. The regional groups were comprised of various stakeholders including employers, academic institutions, training programs, and supporting entities. These stakeholders actively participated in the development of goals, desired outcomes, and measures of success. Through consideration and review of the desired outcomes and measures of success for the regions the questions to

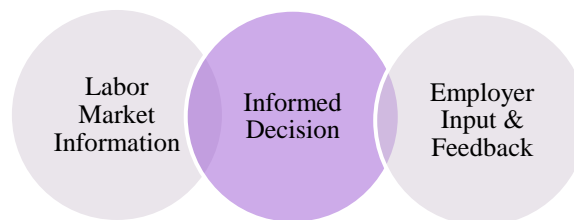


Figure 2. Informed Decision Making

be answered as part of the SPI data collection project include:

- Which positions/ jobs are most in demand, and in what areas and settings?
- Are the job vacancies amongst healthcare settings similar or different?
- Are the job vacancies similar or different amongst the various regions of the state? If so, what are the similarities? Differences?
- Are there sufficient training programs to meet the demands for the identified positions/ jobs?
- What are the opportunities for youth engagement and/ or participation in healthcare careers in various regions of the state?
- How many employers are using apprenticeship and/ or other training programs?
- How are the numbers of vacant positions changing over time? Are they increasing or decreasing?
- What are the factors impacting recruitment and retention of staff?
- How will employers and education/ training programs ensure fair and equitable access to education and career pathway opportunities?

North Country Region

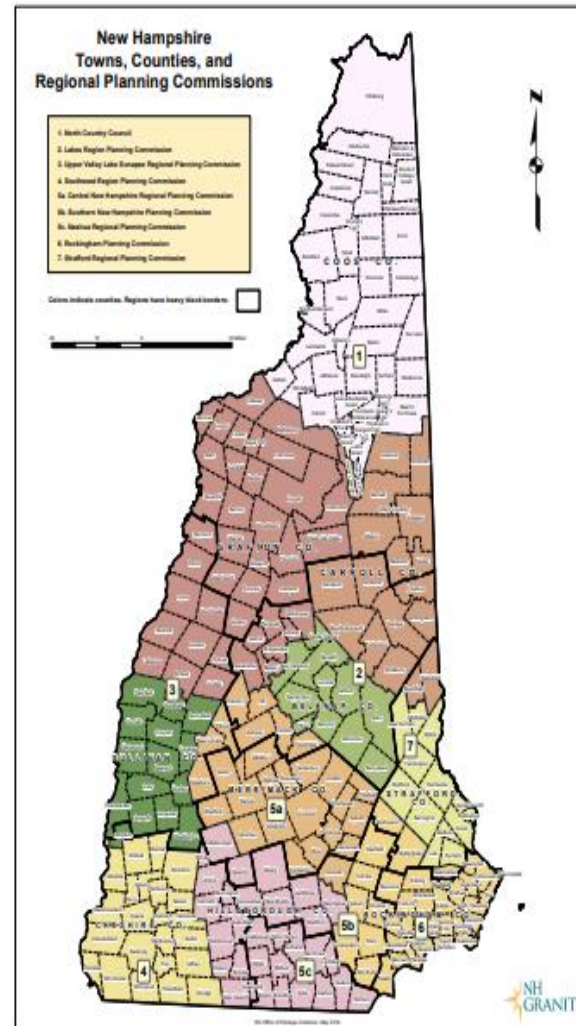
Desired Outcomes/ Measures of Success

- Open positions at <2% FTEs
 - Decreased # of traveler/ agency/ temporary staff
- Future students in pipeline intending to practice in Northern NH

III. Survey Design

Utilized the North Country Council* (Area 1) established by the New Hampshire Regional Planning Commission⁷ to define the counties, cities, and towns to be included in the North Country Region survey.

Grafton County	Coos County	Carroll County*
Bath	Pittsburg	Conway
Bethlehem	Clarksville	Eaton
Easton	Stewartstown	Albany
Haverhill	Colebrook	Bartlett
North Haverhill	Columbia	Jackson
Landaff	Stratford	Chatham
Lincoln	Dixville	
Littleton	Millsfield	
Monroe	Errol	
Sugar Hill	Odell	
Woodstock	Northumberland	
Woodsville	Stark	
Lyman	Dummer	
Benton	Cambridge	
Franconia	Success	
	Shelburne	
	Berlin	
	Gorham	
	Randolph	
	Jefferson	
	Lancaster	
	Carroll	
	Whitefield	
	Dalton	
	Milan	



*Not part of the 2022 data collection; will be included as part of second data collection period in 2023

⁷Except for Campton, Groton, Rumney, Thornton, Warren, Waterville Valley, and Wentworth. These towns were included in the Lakes Region data collection project. <https://www.nh.gov/osi/planning/services/gis/documents/towns-counties-rpcs.pdf>

After defining the counties and towns to be included for each region, a list of survey respondents was developed for the North Country Region utilizing the Department of Health and Human Services (DHHS) NH Health Facilities Licensed Under RSA 151⁸. The list, published monthly, includes the types of providers identified in the demographic section of plan for data collection, including Assisted Living/ Residential Care, Home Health Agency Hospice, Home Health Care Provider, Home Care Service Provider, Nursing Home, Hospital, Supportive Residential Care, and Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/ IID), and Other⁹. After establishing the list of facilities or organizations by county, city,

and/ or town for the region, a master contact list was developed including facility type, contact name, email address, and number of beds (as applicable).

The survey was designed in collaboration with stakeholders and was tested in the North Country Healthcare SPI Region in 2021. The 2022 North Country Region survey was conducted utilizing survey monkey and was sent by email to twenty-two (22) facilities and organizations in the region. The survey was open for data collection from May 9, 2022, to May 25, 2022, and took an average of eighteen (18) minutes to complete.

Table I. Facility Types, Total # in region, and # Responding to Survey

Facility Type	# in North Country Region	# of Responses
Assisted Living/ Residential Care Facility	1	0
Community Health Center/ FQHC	2	2
Home Health Agency Hospice	1	1
Home Health Care Provider	2	0
Home Care Service Provider	0	0
Hospital	5	5
Non-Emergency Walk-in Care Center	2	1
Nursing Home	7	1
Supported Residential Care Facility	2	0
	22	10

⁸<https://www.dhhs.nh.gov/oos/bhfa/documents/licensedfacilities.pdf>

⁹ Non-emergent care facilities and Federally Qualified Health Centers (FQHC) were included in this survey due to the size of the region. These agencies were not included in other regions.

IV. Survey Demographics and Results

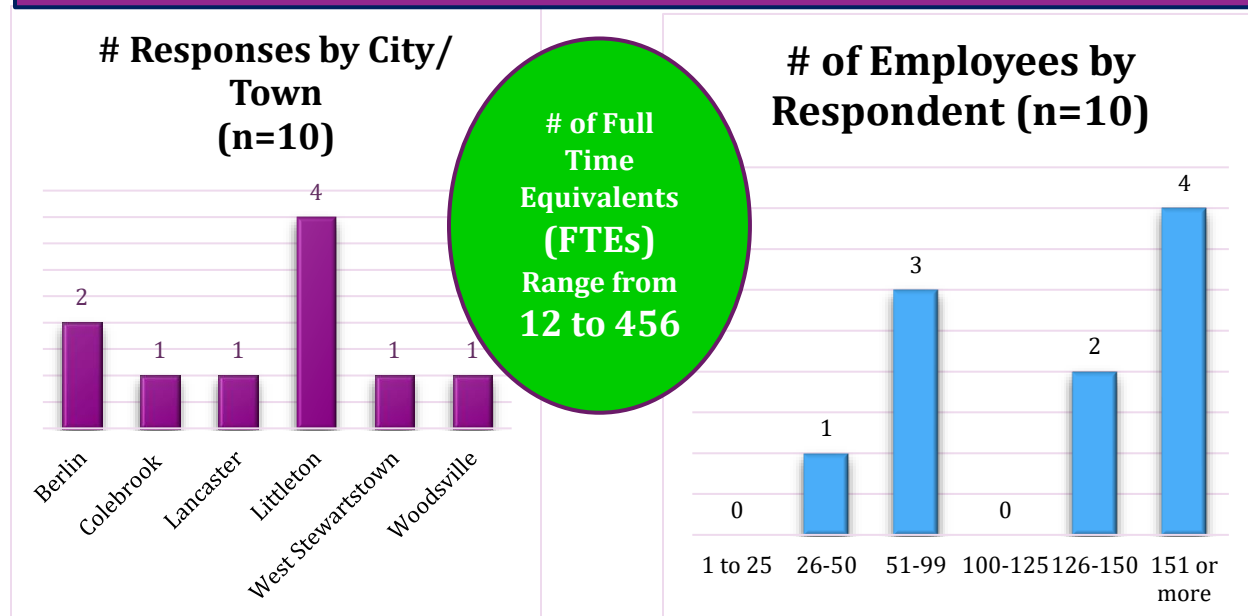
Of the twenty-two (22) potential respondents, ten (10) responded to the survey for a response rate of forty-six (46%) percent. The ten (10) responses came from six (6) cities or towns in the region: Berlin, Colebrook, Lancaster, Littleton, West Stewartstown, and Woodsville. Two (2) responses were received from community health/ federally qualified health center, one (1) response was received from a home health agency hospice, five (5) responses were received from hospitals, one (1) response was received from a non-emergent walk-in care center, and one (1) response was received from a nursing home.

Response Rate

46%

The number of full-time equivalents (FTEs) range between twelve (12) and four hundred fifty-six (456) amongst survey respondents. For the purposes of this survey, an FTE was defined as 40 hours per week (1.0 FTE= 40 hours per week). One (1) respondent indicated they have between 26-50 employees and three (3) respondents employ between 51-99 employees. Of the larger organizations, two (2) indicated they have between 126-150 employees, and four (4) respondents indicated they have 151 or more employees.

Demographics of Survey Respondents (10 Surveys)



A total of nine hundred eighty-one (981) healthcare beds were represented in the twenty-two (22) facilities invited to participate in the survey. The ten (10) survey respondents represent two hundred twenty-three (223) of these beds, or twenty three percent (23%) of the total beds for the facility types included in the survey. Four (4) of the ten (10) respondents do not have healthcare beds due to the type of services provided by their organizations.

Respondents represent
23% of beds in
the North Country
Region

The primary objective of this survey was to determine the numbers of open positions and vacancy rates (%) for key positions as defined in Appendix A. Survey participants were asked to identify the total number of filled positions and vacancies by job. These numbers were combined to determine the total number of positions by job if fully staffed. This number was then divided by the number of vacant positions to determine the vacancy rate (Total number of positions by job if fully staffed/ total number of vacant positions= vacancy rate %).

Table II (below) provides the total number of positions filled by job, the number of open or vacant positions, the total number of positions, and vacancy rate (%) by job.

Table II. Numbers of Filled, Vacant, and Total Positions by Job and Vacancy Rate (%)

	# Positions Filled	# Positions Open/ Vacant	Total # Positions	Vacancy %
Advanced Practice Registered Nurse (APRN)	37	9	46	20%
Emergency Medical Technician (EMT)	6	1	7	14%
Environmental Services Supervisor	8	1	9	11%
Environmental Services Worker (Entry Level)	56	10	66	15%
Food Service Supervisor/ Chefs/ Cooks	21	3	24	13%
Food Service Worker (Entry Level)	42	8	50	16%
Home Health Aide/ Personal Care Attendant	N/A	N/A	N/A	N/A
Licensed Nursing Assistant (LNA)	97	55	152	36%
Licensed Practical Nurse (LPN)	29	12	41	29%
Medical Assistant (MA)	90	19	109	17%
Medication Nursing Assistant (MNA)	15	0	15	0%
Phlebotomy Technician	10	4	14	29%
Registered Nurse (RN)	273	77	350	22%

The highest vacancy rates are seen for licensed nursing assistants (36%) licensed practical nurses (29%), phlebotomy technicians (29%) and registered nurses (22%). The numbers of vacant positions are greatest for registered nurses (RNs), licensed nursing assistants (LNAs) and medical assistants (MAs) compared to other jobs.

Figures 3 and 4 provide additional perspectives on vacancy rates and number of vacancies by position.

Figure 3. Vacancy Percent (%) by Job

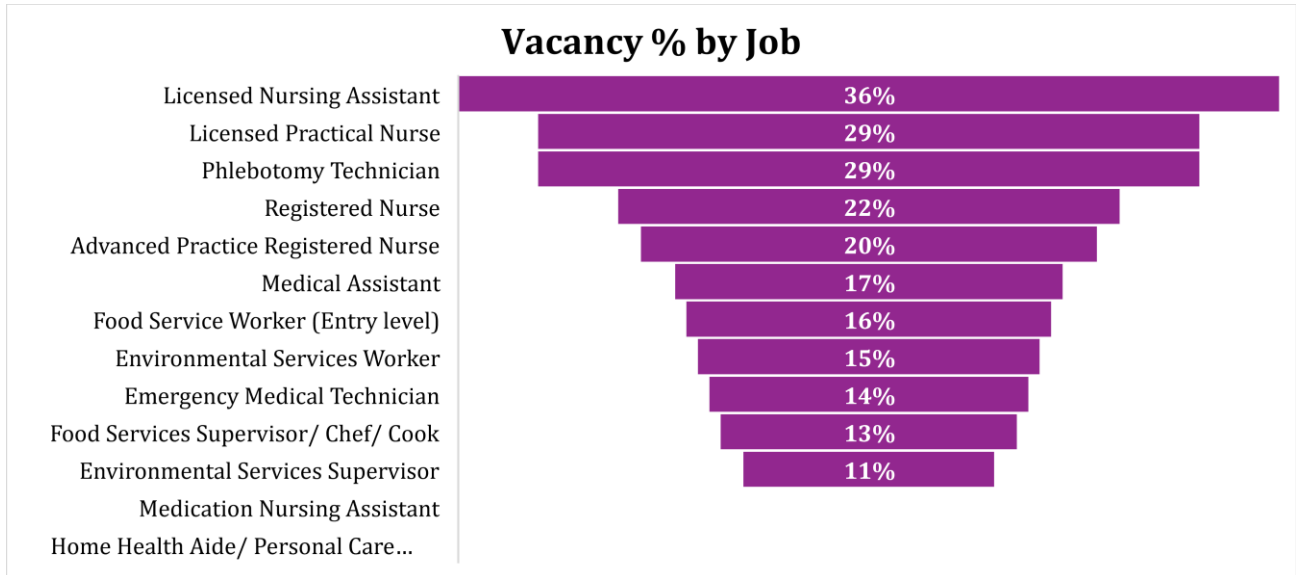
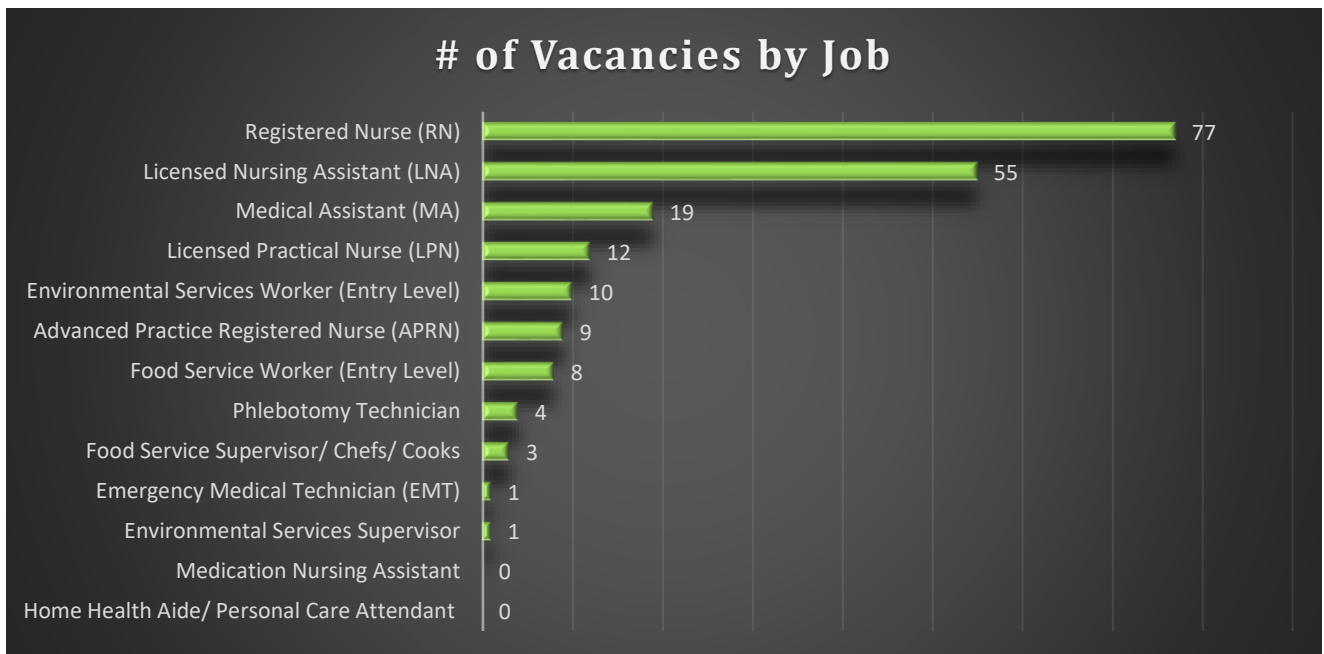


Figure 4. Number of Vacancies by Job



V. Results of Data Collection and Labor Market Information

Advanced Practice Registered Nurses (APRNs) represent five percent (5%) of the jobs included in the survey with a total of forty-six (46) FTEs needed to achieve full staffing in the ten (10) responding facilities. Nine (9) of these positions are open for a vacancy rate of twenty percent (20%). According to New Hampshire Employment Security¹⁰ (NHES) there are an estimated eighty (80) APRNs employed in the North Country region and growth is projected at almost twenty five percent (25%) by 2028 (Table IV).



**Advanced
Practice
Registered
Nurse**



**Licensed
Nursing
Assistants**

Licensed Nursing Assistants represent seventeen percent (17%) of the jobs included in the survey with one hundred fifty-two (152) LNAs needed to fully staff the ten (10) facilities/ organizations responding to the survey. Fifty-five (55) of these positions are open for a vacancy rate of thirty six percent (36%). According to NHES there are an estimated four hundred eighty (480) LNAs employed in the North Country region and growth is projected at four percent (4%) by 2028 (Table IV).

Entry level environmental services workers, including housekeepers and laundry aides, represent eight percent (8%) of the total jobs included in the survey with sixty-six (66) needed to fully staff the ten (10) facilities responding to the survey. Ten (10) of these positions are open for a vacancy rate of fifteen percent (15%). According to NHES (2021) there are an estimated four hundred eighty (480) Maid and Housekeeping Cleaners employed in the North Country region and growth is projected at almost eight percent (8%) by 2028.



**Environmental
Services Workers
(Entry Level)**

¹⁰ New Hampshire Employment Security (2021, May). OEWS Wage by Occupational Group. Retrieved July 28, 2022: <https://www2.nhes.nh.gov/GraniteStats/SessionServlet?page=OESWage.jsp&SID=17&planning=000001&planningName=North%20Country%20Council>

Table VI. Results of Data Collection and Labor Market Information

	# Positions Filled	# Positions Open/ Vacant	Total # Positions	Vacancy %	Estimated Employment ¹¹	Entry Wage	Mean Wage	Experienced Wage	Median	Percent Change/ Growth 2018-2028 ¹²
Advanced Practice Registered Nurse (APRN)	37	9	46	20%	80	\$45.67	\$55.78	\$60.83	\$58.18	24.6%
Emergency Medical Technician (EMT)	6	1	7	14%	80	\$13.67	\$16.22	\$17.49	\$14.19	3.1%
Environmental Services Supervisor	8	1	9	11%	90	\$17.07	\$22.13	\$24.66	\$22.71	4.6%
Environmental Services Worker (Entry Level)	56	10	66	15%	480	\$11.73	\$14.18	\$15.41	\$13.88	-2.3%
Food Service Supervisor/ Chefs/ Cooks	21	3	24	13%	400	\$13.83	\$19.96	\$23.03	\$18.55	7.9%
Food Service Worker (Entry Level)	42	8	50	16%	80	\$10.71	\$12.99	\$14.13	\$13.65	0.0%
Home Health Aide/ Personal Care Attendant	N/A	N/A	N/A	N/A	580	\$11.39	\$13.72	\$14.88	\$13.79	40%/ 36.7%
Licensed Nursing Assistant (LNA)	97	55	152	36%	480	\$13.83	\$16.74	\$18.19	\$17.60	4.3%
Licensed Practical Nurse (LPN)	29	12	41	29%	100	\$22.17	\$28.25	\$31.29	\$26.17	4.6%
Medical Assistant (MA)	90	19	109	17%	230	\$15.49	\$18.17	\$19.52	\$18.00	15.5%
Medication Nursing Assistant (MNA)	15	0	15	0%	N/A	N/A	N/A	N/A	N/A	N/A
Phlebotomy Technician	10	4	14	29%	20	\$14.52	\$17.08	\$18.36	\$18.09	7.1%
Registered Nurse (RN)	273	77	350	22%	780	\$27.52	\$34.31	\$37.71	\$36.06	7.1%

¹¹ New Hampshire Employment Security (2021, May). OEWS Wage by Occupational Group. Retrieved July 28, 2022:

<https://www2.nhes.nh.gov/GraniteStats/SessionServlet?page=OESWage.jsp&SID=17&planning=000001&planningName=North%20Country%20Council>

¹² New Hampshire Employment Security (n.d.). Long term occupation projections. Retrieved July 28, 2022:

<https://www2.nhes.nh.gov/GraniteStats/SessionServlet?page=TermOcc.jsp&SID=15&planning=000001&planningName=North%20Country%20Council&term=Long>



Food Service Workers

(Entry Level)

Entry level food service workers, including dietary aides, dishwashers, and prep cooks represent almost six percent (6%) of the jobs included in the survey with a total of fifty (50) workers needed to achieve full staffing in the ten (10) responding facilities. Eight (8) of these positions are open for a vacancy rate of sixteen percent (16%). According to NHES (2021) there are an estimated eighty (80) entry level food service workers (referred to as food servers non restaurant by NHES) employed in the North Country region. There are an estimated three hundred thirty-six (336) dishwashers employed in the Region. Growth for entry level food service workers is projected at almost six percent (6%) by 2028, while growth for dishwashers is projected at less than one percent (<1%) by 2028.

Food Service Supervisors, Cooks, and Chefs represent almost three percent (3%) of the jobs included in the survey with a total of twenty-four (24) workers needed to achieve full staffing in the responding facilities. Three (3) of these positions are open for a vacancy rate of thirteen percent (13%). According to NHES (2021) there are an estimated four hundred (400) First Line Supervisors of Food Preparation and Serving Workers and one hundred six (106) Cooks-Institutional/ Cafeteria employed in the North Country region. Growth is projected at almost eight percent (8%) for

Food Service Supervisors and almost four percent (4%) for Cooks by 2028.



Food Service Supervisors Cooks/ Chefs



Licensed Practical Nurse

Licensed Practical Nurses represent almost five percent (5%) of the jobs included in the survey with a total of forty-one (41) LPNs needed to achieve full staffing in the responding facilities. Twelve (12) of these positions are open for a vacancy rate of twenty-nine percent (29%). According to NHES (2021) there are an estimated one hundred (100) LPNs employed in the North Country region. Growth is projected at almost five percent (5%) by 2028.

Registered Nurses represent almost forty percent (40%) of the jobs included in the survey with a total of three hundred fifty (350) needed to achieve full staffing in the ten (10) responding facilities. Seventy-seven (77) of these positions are open for a vacancy rate of twenty-two percent (22%). According to NHES (2021) there are an estimated seven hundred eighty (780) RNs employed in the North Country region. Growth is projected at seven percent (7%) by 2028.



Registered Nurse



Home Health Aide/ Personal Care Attendant

Home Health Aides and Personal Care Attendants

represent zero percent (0%) of the jobs included in the survey. None of the responding facilities employ Home Health Aides or Personal Care Attendants and/ or identified the need for HHAs/ PCAs in their organizations. These results are unlikely to represent the needs of the region due to the facility types included/ responding to the survey (Table I). According to NHES (2021) there are an estimated five hundred eighty (580) HHAs/ PCAs employed in the North Country region. Growth is projected at forty percent (40%) for HHAs and almost thirty seven percent (37%) for PCAs by 2028.

Environmental Services Supervisors represent one percent (1%) of the jobs included in the survey with a total of nine (9) needed to achieve full staffing in the ten (10) responding facilities. One (1) of these positions are open for a vacancy rate of eleven percent (11%). According to NHES (2021) there are an estimated ninety (90) First Line Supervisors of Housekeeping and Janitorial Workers employed in the North Country region. Growth is projected at almost five percent (5%) by 2028.



Environmental Services Supervisor



Medication Nursing Assistant

Medication Nursing Assistants (MNAs) represent almost two percent (2%) of the jobs included in the survey with a total of fifteen (15) MNAs needed to achieve full staffing in responding facilities. None (0) of these positions are open for a vacancy rate of zero percent (0%). Estimates for the numbers of MNAs employed and projected growth in the North Country region are not available.

Medical Assistants (MA) represent twelve percent (12%) of the jobs included in the survey with a total of one hundred nine (109) MAs needed to achieve full staffing in responding facilities. Nineteen (19) of these positions are open for a vacancy rate of seventeen percent (17%). According to NHES (2021) there are an estimated two hundred thirty (230) MAs employed in the North Country region. Growth is projected at almost sixteen percent (16%) for MAs by 2028.



Medical Assistant



Emergency Medical Technician

Emergency Medical Technicians (EMTs) represent less than one percent (<1%) of the jobs included in the survey with a total of seven (7) needed to achieve full staffing in responding facilities. One of these positions is open for a vacancy rate of fourteen percent (14%). According to NHES (2021) there are an estimated eighty (80) EMTs employed in the North Country region. Growth is projected at three percent (3%) by 2028.

Phlebotomy Technicians represent less than two percent (2%) of the jobs included in the survey with a total of fourteen (14) needed to achieve full staffing in responding facilities. Four (4) of these positions are open for a vacancy rate of twenty nine percent (29%). According to NHES (2021) there are an estimated twenty (20) Phlebotomy Technicians employed in the North Country region. Growth is projected at seven percent (7%) by 2028.



Phlebotomy Technician

VI. Factors Influencing Recruitment and Retention

“There are not enough applicants or qualified candidates”

Respondents were asked to identify barriers preventing their organization from filling vacant positions (Figure 5). Eighty percent (80%) of respondents identified lack of applicants or qualified candidates as primary challenges. Fifty percent (50%) identified the lack of affordable housing to be a barrier to filling vacant positions. Geographic location, compensation, and competition were identified as additional barriers.

Figure 5. Barriers to Filling Vacant Positions and Number of Respondents Selecting Reason as a Barrier

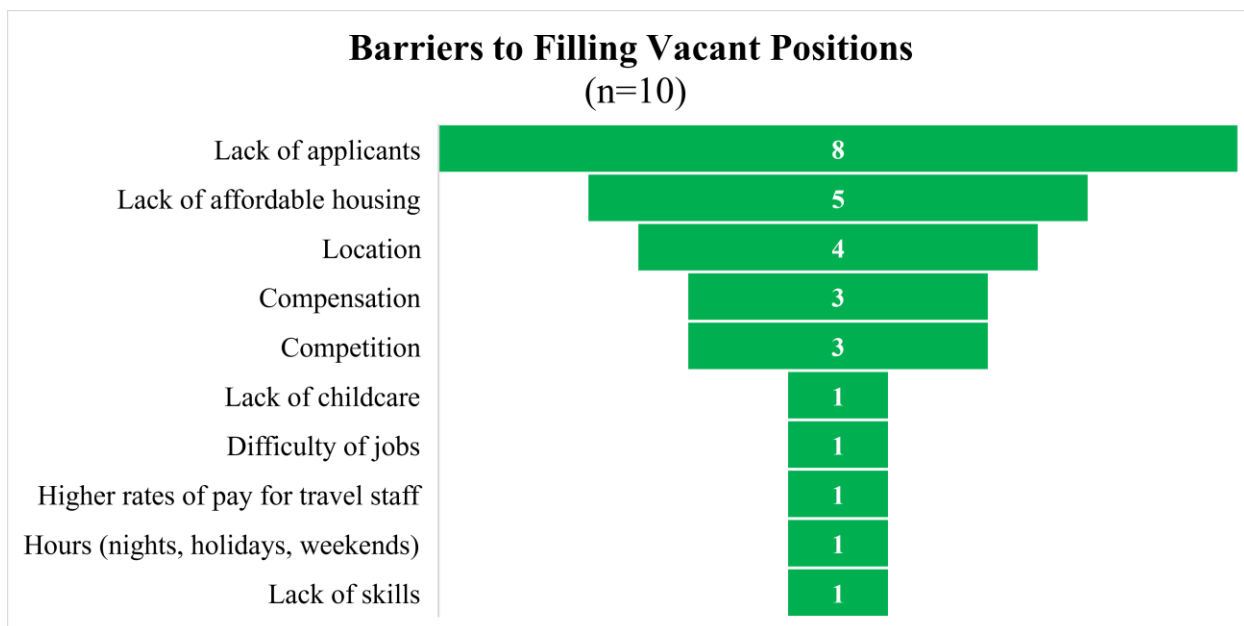


Table III. Incentives to Recruit and Retain Staff

Incentives to Recruit and Retain Staff	
Recruitment	Retention
Sign on Bonus(es)	Company Values/ Culture
Loan Repayment	Compensation
Retention Bonus	Benefits
Company Values/ Culture	Flexible Scheduling and Work/ Life Balance
Compensation	Engagement with Patients/ Community
Benefits	Opportunities for Growth
Flexible Scheduling	Teamwork/ Caring and Compassionate Co-Workers
Paid Time Off	Enjoy the Area (Geographic Location)
Organization Provides Quality Healthcare	Retention Bonus
Education Assistance	Hours (No Nights)
Paid Licensed Nursing Assistant (LNA) Training	Shift Differentials/ Stipends for Early Evening Shifts
Recruitment Bonus	
Performance Bonus(es)	
Free Snacks when Working	
Appreciation Gift when a Positive Patient Review is received	

Survey respondents were asked to identify incentives used to recruit and retain staff (Table III). Fifty percent (50%) of respondents identified sign on bonuses as an incentive to recruiting staff. Forty percent (40%) of respondents identified loan repayment and retention bonus(es), thirty percent (30%) company values and culture, and twenty percent (20%) identified compensation, benefits, and flexible scheduling as key incentives to recruit staff. Fifty percent (50%) of respondents identified company values/ culture and compensation as primary factors in the retention of staff. Forty percent (40%) identified flexible scheduling and work/ life balance as a key factor in retention. Twenty percent (20%) identified engagement with patients/ community, opportunities for growth, and teamwork as factors in the retention of staff. Lastly, respondents were asked to identify the number of full or part-time staff who are didactic instructors and/ or teach a class that leads to licensure or certification (Figure 6). Three (3) of ten (10) respondents indicated they have one (1) instructor, five (5) of ten (10) respondents indicated unknown, and two (2) respondents indicated they did not have staff teaching a class that leads to licensure or certification.

Figure 6. Number of Instructors or Teachers on Staff

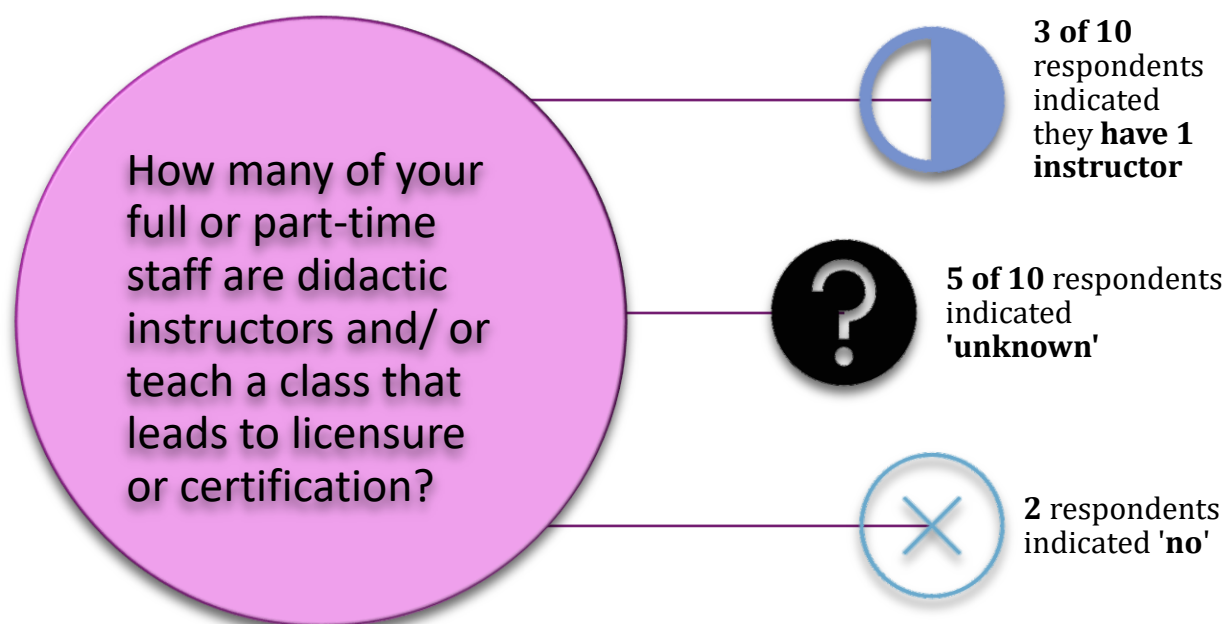


Table IV. Number of Instructors by Facility Type

Type of Facility	Number of Instructors
Community Health Center	1
Hospital	5
Nursing Home	1

VII. North Country Region Demographics

The population of the North Country Region/ Council increased by nine hundred one (901) between 2015 and 2021 (Table V). Despite the increase in overall population, the civilian workforce decreased by one hundred thirty-six (136) between 2015 and June 2022 (Figure 7). During the same period, the number of employed increased by five hundred eleven (511) and the number of unemployed decreased by six hundred forty-seven (647). The unemployment rate in the region is two percent (2%) as of June 2022 (NHES, n.d.).

Table V. Population¹³, Unemployment and Labor Force¹⁴

Year	Population	Civilian Labor Force	Employed	Unemployed	Unemployment Rate
2022 (June)	Not available	42,296	41,447	849	2.0%
2021	83,966	41,551	39,898	1,653	3.9%
2020	83,239	41,139	37,952	3,187	7.7%
2019	82,887	42,836	41,706	1,130	2.6%
2018	82,708	42,691	41,551	1,140	2.6%
2017	82,498	42,458	41,266	1,192	2.8%
2016	82,785	42,290	41,013	1,277	3.0%
2015	83,065	42,432	40,936	1,496	3.5%

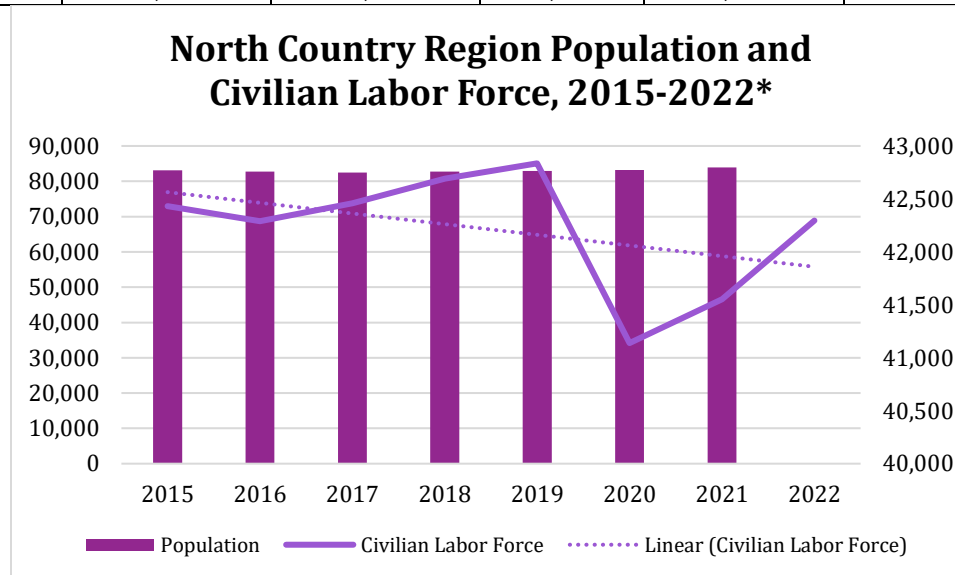


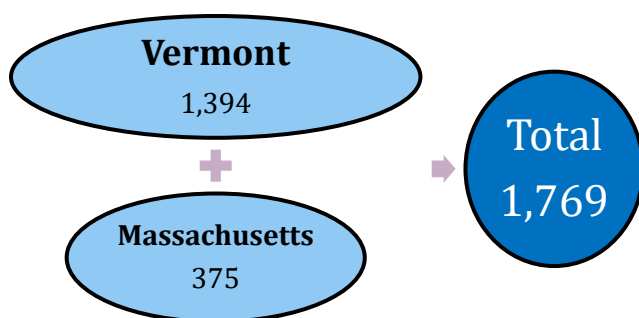
Figure 7. North Country Region Population and Civilian Labor Force, 2015-2022

*Population data unavailable for 2022.

¹³ New Hampshire Employment Security (n.d.) Population (US Census Bureau). Retrieved July 28, 2022: <https://www2.nhes.nh.gov/GraniteStats/SessionServlet?page=Population.jsp&SID=18&planning=000001&planningName=North%20Country%20Council>

¹⁴ New Hampshire Employment Security (n.d.) Unemployment and Labor Force. Retrieved August 13, 2022: <https://www2.nhes.nh.gov/GraniteStats/SessionServlet?page=LAUS.jsp&SID=12&planning=000001&planningName=North%20Country%20Council>

According to NHES¹⁵ forty thousand nine hundred four (40,904) individuals in the North Country Region traveled to work in 2010. Of these individuals, twenty-three thousand five hundred nineteen (23,519) made the commute to one of ten (10) cities or towns listed in Table VI. Another one thousand three hundred ninety-four (1,394) individuals commuted out of state to Vermont, three hundred seventy-five (375) to Massachusetts (Figure 7). Three hundred sixty (360) commuted to Maine.



Conway	5,728
Berlin	4,115
Littleton	3,984
Gorham	1,764
Lancaster	1,633
Lincoln	1,554
Haverhill	1,404
Plymouth	1,280
Bartlett	1,044
Colebrook	1,013
Total	23,519

Table VI. Top 10 Cities/ Towns of Employment and Numbers of Commuters in the North Country Council Planning Region

Figure 8. Number of Commuters from North Country Region to Neighboring States

VIII. Limitations and Future Considerations

There findings of this report must be considered in light of several limitations. The number of facilities and organizations included in the survey and limited response rate could affect the accuracy of vacancy rates and numbers of vacant positions by job. Additionally, data collected from facilities and organizations were for one point in time and may not reflect an average vacancy rate or account for seasonal changes or other circumstances. To address this challenge, a repeat survey will be conducted early 2023 to provide an additional 'snapshot' of job vacancies utilizing the same methodology. Lastly, population and labor market information do not match the time frame of the job vacancy data. Efforts were made to use the most recent information available.

Please note that the small number of facilities and limited response rate did not allow for data to be segmented or reported by setting to protect the identities of respondents. Vacancies by facility type will be reported in the final report inclusive of the six SPI regions.

Future considerations should include expanding the survey to additional facility/ organization types in the region to obtain information from physician practices, municipalities, behavioral health centers, and the numerous other setting types who employ healthcare workers. Incentives for participation and/ or governance considerations may encourage organizations to participate. Regarding Medication Nursing Assistants (MNAs) and Emergency Medical Technicians (EMTs),

¹⁵ New Hampshire Employment Security (n.d.) Commuter Patterns. Retrieved August 13, 2022: <https://www2.nhes.nh.gov/GraniteStats/SessionServlet?page=Commute.jsp&SID=4&planning=000001&planningName=North%20Country%20Council>

considerations should be made to obtain data from more nursing homes and expand data collection to facility or organization types, including municipalities.

Appendix A. Survey Content, Operational Definitions, and Timeline: Healthcare Facilities and Organizations

Healthcare SPI Strategy/ Purpose	The Sector Partnerships Initiative (SPI) is an industry-driven regional healthcare workforce initiative to help businesses in healthcare address their workforce needs, while also helping workers prepare for and advance in careers in this critical sector.	
Purpose	What	Operational Definition
Determine numbers of healthcare workers available to care for patients and/or provide healthcare services; establish baseline vacancy rates for key jobs/ positions	Vacancy data (vacancy %) by job/ setting/ region (county/ counties/ towns)	Number of FTEs ON STAFF by job (1.0 FTE=40 hours per week) when fully staffed/ Number of current FTEs (1.0 FTE=40 hours per week). Excludes temporary, agency, traveling, and/ or per diem staff.
	Licensed Nursing Assistant (LNA)	Nursing assistants with current license issued by the NH Board of Nursing
	Medication Nursing Assistant (MNA)	Medication Nursing Assistants with current license issued by the NH Board of Nursing
	Registered Nurse (RN)	Registered Nurses with current license issued by the NH Board of Nursing
	Licensed Practical Nurse (LPN)	Licensed Practical Nurses with current license issued by the NH Board of Nursing
	Medical Assistant (MA)	Individual who has completed Medical Assistant certificate training
	Home Health Aide (HHA)/ Personal Care Attendant (PCA)	Individual providing care to patients in their home or other residential setting
	Advanced Practice Registered Nurse (APRN)	Advanced Registered Nurse Practitioner with current license issued by the NH Board of Nursing
	Phlebotomy Technician	Individual who has completed Phlebotomy Technician training
	Food Services Supervisor/ Cooks/ Chefs	Food Service worker in a supervisory and/ or Cook/ Chef job role
	Food Service Workers (Entry Level)	Food Service worker in an entry level position (dietary aide, dishwasher, prep cook)
	Environmental Services Supervisor	Environmental Services worker in supervisory role (Housekeeping, Laundry, and/ or Maintenance Supervisor/ Director)
Environmental Services Worker (Entry Level)	Environmental Services worker in entry level role (housekeeper, laundry attendant/ aide, maintenance helper, painter)	

	Emergency Medical Technician (EMT)	Emergency Medical Technician with current license issued by the NH Department of Safety
Demographics	Facility/ Organization Type	
	Assisted Living	HeP-805 Assisted Living Residences: Supported Residential Health Care Licensing
	Home Health Agency	HeP-809 Home Health Providers
	Nursing Home	HeP-803 Licensed Nursing Homes
	Hospital	HeP-802 Licensed Hospitals
	Residential Care provider	HeP-804 Assisted Living Residences: Residential Care Licensing
	Other	
	Location (Town/ City)	Town or City where the facility or organization is located
	Number of Employees	Total number of Full and Part-Time Employees excluding temporary, agency, and/ or traveling staff
Number of Full-Time Equivalents	Total number of Full-Time Equivalents (FTEs) (1.0 FTE= 40 hours per week). Excludes part-time, per diem, temporary, agency, and /or traveling staff	
Understand Key Drivers of Regional Recruitment/ Retention Efforts	How many of your full- or part-time staff are didactic instructors?	Total number of staff who teach a course that leads to licensure or certification (LNA, MNA, MA, LPN, RN, APRN, Phlebotomy, EMT)
	List 3 barriers that prevent you from filling vacant/ open positions	Qualitative/ free text
	List 3 incentives you use to recruit staff	Qualitative/ free text
	List 3 reasons your employees continue to work for your organization (3 factors influencing retention of current staff)	Qualitative/ free text

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*Funding for this report was provided by the Southern New
Hampshire Area Health Education Center (SNHAHEC) through
The CDC Health Equity Grant.*