

Comparative National and State Data Vacancy and Turnover Rate

As noted in the text, the NHQOP FY 2003 reported a 50% NH vacancy rate. Data on rates of turnover of direct care staff in DD institutions is reported by Braddock 2005. As seen in the chart below, NH's 50% figure is much higher than the national average of 28% turnover of direct care staff in institutions and the rates in MA and CT, the only two NE states reporting. They were 19% and 11.6, respectively, in institutional settings. Prouty 2005 p. 54

The differences in vacancy rates are even more substantial. NH has a 36.2% vacancy rate of direct support staff which compares with 5.6% vacancy rates in institutions nationwide, and a 4.85% and 5.6% vacancy rate, respectively, in MA and CT. See chart below. Id.

2002 Direct Support Staff Turnover and Vacancy Rates-Percentage

	Turnover	Vacancy
NH*	50%	36.2
U.S.**	28%	5.6%
MA**	19%	4.8%
CT**	11.6%	5.6%

*In community in NH **Institutions only in 2002.

Source Prouty (2005), p. 54

In analyzing what is a nationwide problem of recruiting and retaining qualified direct support staff, Braddock 2005 cited to a 2002 study which found three general economic constraints in the recruitment and retention of DD direct support staff:

1) rapidly increasing health insurance costs; 2) growing demand in competing service industries; and 3) the advantage the private sector 'supply and demand' employers have over publicly funded human services systems, which, unlike the private sector are restricted by fixed appropriations. p. 24

The study went on to say that fixed appropriations are a particular problem in community programs in contrast to the state institutions. Clearly applicable to the problem existing in New Hampshire, Braddock summarized the study's findings.

Fixed appropriations can be used as a means of legislative control over total costs, thereby suppressing staff wages and benefits that constitute 60-70% of MR/DD community program budgets. In contrast, for state-operated services...salary increases are typically tied to the cost of living, increase annually, and rise in relation to employee length of time on the job. Because of the large buying power of states, state employee fringe benefits are usually

much more generous than those for community direct support staff. Braddock 2005, p.24