



# Transforming Workforce Development: Lessons from Hiring New Graduates and The New England Home Health Nurse Residency Program

PRESENTED TO  
THE NEW ENGLAND HOME CARE & HOSPICE CONFERENCE & TRADE SHOW  
MAY 2026

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## Presenters



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## Objectives

Participants will be able to:

1. Describe the hiring and on-boarding of recent RN graduates in home health as an opportunity and a culture shift
2. Identify key components for building a new RN graduate pipeline in home health care
3. Explore the focus and findings of the New England Home Health Nurse Residency Program (NEHHNRP), Year 1
4. Examine key takeaways and lessons learned in the hiring, clinical on-boarding and professional development of recent RN graduates entering home health care

homecarenh.org

**Care, Compassion and Community**

**HOME HEALTH NURSE RESIDENCY PROGRAM**

The New England Home Health Nurse Residency Program is a 9 month-long transition-to-practice program that serves as a bridge to support and enhance the professional development of new graduate nurses entering home care practice.

**A HOME HEALTH NURSE CAREER OFFERS:**

- Flexibility and Independence
- Competitive Pay | Time off
- Mileage Reimbursement
- Support from a Diverse Nurse Community
- Exposure to multiple disciplines

**NURSE RESIDENTS WILL:**

- Experience everyday hands-on practice with an experienced preceptor
- Be supported by other specialty staff (PT, OT, ST, MSW, education staff)
- Attend planned education and learning sessions, as well as problem solving the management of complex clients in a patient-centered, team-oriented, practice setting.

**9 MONTH PROGRAM**

Transition from new graduate to competent professional nurse in just 9 months with a combination of practical application, educational opportunities, and peer support. You'll enjoy employment by one of the participating agencies and—as part of the nursing resident cohort—build strong community with nurses from the other agencies.

**START YOUR HOME HEALTH RESIDENCY PATH BY CONTACTING ONE OF THESE PARTICIPATING AGENCIES TO PROCURE A RESIDENCY POSITION**

<p><b>Cornerstone VNA</b> cornerstonevna.org hl@cornerstonevna.org</p>	<p><b>Granite VNA</b> granitevna.org granitevna@granitevna.org</p>	<p><b>Lake Sunapee Region VNA &amp; Hospice</b> lakesunapeevna.org hr@lakesunapeevna.org</p>	<p>If you are a Home Health Agency located in New England interested in participating, please email: Elaine Gerber, NRP Manager, at EGerber@vhcare.org</p>
<p><b>Franklin VNA &amp; Hospice</b> ford@franklinvna.org</p>	<p><b>Elliot VNA</b> manchester@vna.org Austin.Berret@revolutionhealth.org</p>	<p><b>Walking Nurse and Hospice for Vermont and New Hampshire</b> vhcare.org email@vhcare.org</p>	

## Hiring and On-boarding Recent RN Graduates:

## Opportunity and Culture Shift

## Hiring and On-boarding: The Challenge



## Hiring and On-Boarding: The Opportunity

### Making the Case for Home Health Nurse Residency Programs

- Workforce pipeline not been sufficiently tapped
- New/recent grads are selecting employment in setting with NRP
- Infusion into Workplace: Knowledge, Adaptability
  - Preceptor and Orientee
- Structured support for
  - Clinicians in less structured setting
  - Clinicians with few agency staff orienting as recent grad
- Potential for long-term retention

**A Value-driven  
Opportunity**

# The New England Home Health Nurse Residency Program

Pilot project funded by  
Department of Labor  
2024-2026

A 9-month program for new and recent (<1 year experience) RN graduates to transition from graduate to professional home health care nurse

A comprehensive and unique program for home health care nurses, combining virtual training, peer discussions, and individualized clinical on-boarding in HH agency

Initially developed and consistently guided by the NEHHNRP Advisory Group, while being led and implemented by the Nurse Residency Program Manager

**Start date: August 2025**



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## New England Home Health Nurse Residency Program

- **Participating Home Health Agencies:**

Cornerstone VNA  
Dartmouth Health Home Care (formerly Visiting Nurse and Hospice for VT and NH)  
Franklin VNA  
Granite VNA  
Lake Sunapee Region VNA & Hospice  
The Elliot VNA (formerly VNA of Manchester and Southern NH)  
Westbrook, CT Visiting Nurses & Public Health

- **NEHHNRP Project Manager:**

Elaine Gardner  
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- **NEHHNRP Project Director:**

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- **Advisory Group:**

Alaina Alexander-Buck, Lake Sunapee VNA  
Johanna Bilodeau, formerly from VNH for VT & NH  
Donna Frizzell, The Elliot VNA  
Tammi Mozier, Granite VNA  
Lisa Romanovitz, Cornerstone VNA  
Jen Ufkin, Cornerstone VNA



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# Hiring and On-Boarding New/Recent RN Graduates: A Culture Shift

## From:

- “New grads aren’t ready for home health”
- “An RN needs 2 years of med-surg or inpatient experience first”

## To:

- “New grads are an investment in our future”
- Requiring:
  - Leadership commitment
  - Tailoring of planning and scheduling by staff and teams
  - “Can-do” culture



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## Key Components for Building a New RN Graduate Pipeline in Home Health Care

Lessons from  
Cornerstone VNA  
Rochester, NH



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## My Story

- Started as a nursing student in home care ✨
- No clear path for new grads
- COVID- 2020 exposed major workforce gaps



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## The Challenge

- Hard to attract new grads
- Visiting Nurse Association Health System of Northern New England (VNAHSNNE) had a new grad program but those VNAs that were part of the Rural Health Care Network (RHCN) could not access
- Nursing students with limited exposure to home care
- Growing workforce shortages ⚠️



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## What We Built

- Built a strong preceptor program - 2008
- Launched new grad strategy - 2021 🤝
- Partnered with local universities and colleges
- Created Home Care 101 touchpoints



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## Early Results

- First hire within months
- Proved interest exists ✨
- Identified what needed improvement



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## Training That Works

- 2 new grads hired since 2021-2024 
- Extended orientation (6–12 months)
- Strong preceptors + check-ins
- Hands-on interdisciplinary learning



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## What We Learned- Early On

- Delay admissions (3–6 months) 
- Focus on skills early
- **Flexibility is critical**



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## What Drives Success

- Organization commitment- increased cost upfront (onboarding) with long term reward (retention) 🔥
- Program and Leadership commitment
  - Director, Manager, Education, Quality
- Preceptor model
- Consistent evaluation
- Program flexibility



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## Evolving the Model

- Joined nurse residency program (2025) 🚀
- 3 nurses hired for program
  - 2 successfully completed 📊
  - 1 delayed start date and quit within first 5 days of employment
- Structured marketing/recruitment
- Strengthened framework and learning
- Added peer cohort support



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# Impact

- Better prepared new grads
- Stronger retention
- Improved recruitment approach ✨



## The Focus and Findings:

# New England Home Health Nurse Residency Program (NEHHNRP) Year 1



# Performance Measures

Pilot project funded by  
Department of Labor  
2024-2026

1. Expand the former VNAHSNNE Project to **home health agencies in the New England states**
2. **Recruit, hire, and enroll** up to two nurses at each participating agency
3. **Assess completion rates of residency enrollees**, with the goal of 80% of the cohort successfully completing the program
4. **Implement clinical skills competency evaluations** – virtual training and clinical setting experience
5. **Evaluate clinical skill performance, competence, confidence, and other factors**, e.g., patient care mgmt, preceptorship, stress/burnout, organizational commitment, and resilience, using the **Casey-Fink Graduate Nurse Experience Survey** and recommended survey timepoints
6. **Measure employment retention rates** of nurses who complete the residency at 1-year and 3-years



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# Benefits and Costs

## NEHHNRP: An enhancement of the HHA's usual onboarding process

- **Benefits included**

- Nurse Resident acquisition of home health care knowledge and critical thinking skills through evidence-based training, cohort huddles, and clinical on-boarding
- Preceptor and Clinical Manager support

- **Costs**

- Time in nurse resident cohort discussions and virtual training specific to home health care, totaling **4-5 hours per week**
- No cost** to participate in NEHHNRP during **Year 1**, August 2025-April 2026.



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# Marketing, Recruitment & Hiring Resources

**NRP Recruitment Materials available for participating agency use:**

- NRP Informational Brochure - Flyer
- Job Description – Template
- Letter of Hire, with contingency – Template
- Frequently Asked Questions (FAQs) – for HR/Talent Acquisition Team and Clinical Manager

**RN Nurse Resident (or New Graduate RN)**  
**[HHA Name] and the New England Home Health Nurse Residency Program (NEHHNRP)**

**Job Description - Template - for specific HHA to post online**

**Description**

Are you a new nursing graduate interested in home health care nursing? If so, join our (Agency Name) team and participate in the New England Home Health Nurse Residency Program. As you complete your clinical onboarding at (Agency Name), your orientation will be enhanced through the New England Home Health Nurse Residency Program (NEHHNRP), a unique and comprehensive program designed for recent RN graduates entering home health nursing. Participation in the 9-month NEHHNRP provides evidence-based training and live cohort discussions as you transition from graduate to professional home health care nurse.

This employment opportunity offers you individualized clinical training, preceptor guidance, and clinical manager support at (Agency Name) while experiencing focused standardized training and peer discussions designed for recently graduated RNs in home health care nursing. As a result, a path is forged for learning new skills, advancing nursing career goals, and progressing to expert nursing care for home health care patients.

**NEHHNRP Overview**

This 9-month, paid, comprehensive, evidence-based, and standardized Nurse Residency Program promotes critical thinking, clinical skills, mentored problem-solving, and leadership skills. RN Nurse residents participate in educational and professional development sessions with their nurse resident cohort while developing expertise in the home health nurse role through tailored support at (Agency Name).

Experiences and training sessions are designed for the Nurse Resident to:

- Experience a 9-month, paid, comprehensive, evidence-based, and standardized Nurse Residency Program that promotes professional growth and development
- Gain an in-depth understanding of the home health care role and develop expertise in evidence-based practice for home health care patients
- Obtain comprehensive training and peer discussions designed for recently graduated RNs in home health care nursing



## Nurse Resident Curriculum

<b>Welcome to Home Health Care and the NEHHNRP</b>	<ul style="list-style-type: none"> <li>•Intro to HHC, purpose, patient population, services, disciplines, payors, safety, boundaries, communications</li> <li>•NEHHNRP, personal expectations &amp; goals</li> </ul>
<b>The Patient Home Visit</b>	<ul style="list-style-type: none"> <li>•Revisits; Pre-visit, Visit, &amp; Post-visit Activities; Admission to Discharge and OASIS timepoints; Assessment through Evaluation including Plan of Care, Patient Goals, Interventions such as Assessment/Monitoring, Teaching/Guidance, Treatments/Procedures, and Case Management; Changes in Patient Condition</li> </ul>
<b>Patient Conditions &amp; Problems</b>	<ul style="list-style-type: none"> <li>•Assessment -&gt; Evaluation, Care Planning, Clinical Skills &amp; Competency, Case Scenarios, Clinical Reasoning, Risk Mitigation, Change in Condition re: Patients with Cardiovascular, Pulmonary/Respiratory, Musculoskeletal, Cognitive, Behavioral Health, Genitourinary, Gastrointestinal, Integumentary/Skin/Wound, Endocrine, and/or Neurological Conditions; Infection &amp; Control; Laboratory &amp; Intravenous Therapy Needs</li> </ul>
<b>Patient-Centered Care &amp; Interventions</b>	<ul style="list-style-type: none"> <li>•Patient Assessment, Patient Engagement, Communications, Patient/Caregiver Teaching, Medication Management, Self-Care Management, Culturally Competent Care, Health Literacy, Patient-Centered Care, Health-Related Social Needs, Family and Social Support, Community Resources, Case Management, Quality Improvement and Measurement</li> </ul>
<b>Certified Home Health Care Delivery</b>	<ul style="list-style-type: none"> <li>•Conditions of Participation, Comprehensive Assessment, OASIS Assessments, Documentation in HH Care, Payors/Insurance, CMS, CMS Websites &amp; Resources, HHA Policies &amp; Procedures, State Regulations and Surveys, Quality Measures, Public Reporting, 5 Star Ratings</li> </ul>

**Methodologies**

- Apply “simple to complex” approach to training over time
- Live “Huddles” with Cohort of NRs via Webex – 2x/week, 1 hour each
- MedBridge Training Modules and Clinical Procedure Manual
- Case Scenarios, Q&As
- Application of knowledge and clinical skills in home health patient care delivery
- Check-in meetings and planning with Nurse Resident, Preceptor, Clinical/Education Manager(s), and NRP Manager



# Preceptor Support

## Nurse Residency Program

- Overview
- Purpose
- Goals & Measures of Success
- Plan
- Evaluation

## Precepting a New/Recent RN Graduate

- Communications
- Daily Efficiencies & Time Management
- Learning and Teaching Styles
- Feedback Strategies
- Managing for Accountability
- Handling Difficult Conversations and Conflict Resolution
- Building a Professional Development Plan
- The Team and Transitions
- Well-being

## Methodologies

- ❑ Live “Huddles” with Preceptor Cohort via Webex – prior to start of the 9-month program and monthly
- ❑ Recommend Training Modules as needed
- ❑ Discussions, Case Scenarios, Program Updates



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## Sequencing of Clinical Foci and Skills

- Simple to Complex
- A. Intro and HH Patient Care Delivery
- B. Comprehensive and OASIS Assessments & aligned patient conditions; Case Management
- C. Increasingly complex patient conditions; Caseload Management; Quality Outcomes; Regulatory aspects

New England Home Health Nurse Residency Program (NEHHNRP)			
NEHHNRP – Schedule/Syllabus			
August 2025 → April 2026			
Week #	Week of	Topics – Prep for the Following Week	Clinical Skills/Clinical Procedure Manual
0	Wks of 8/11/25, 8/18/25, 8/25/25	<ul style="list-style-type: none"> <li>• Entry to NEHHNRP</li> <li>• Intro to Home Health Care: An Overview</li> <li>• The NEHHNRP</li> <li>• Methods of Evaluation:                             <ul style="list-style-type: none"> <li>◦ Casey-Fink Graduate Nurse Experience Survey</li> </ul> </li> <li>• Clinical Skills/Competencies</li> </ul>	
1	Complete Wk of 8/25/25, For Wk of 9/01/25	<ul style="list-style-type: none"> <li>• Home Health Excellence: Best Practices for Home Visits (66m.)</li> <li>• Home Health Excellence: Comprehensive Homecare Assessment – Part 1 (63m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Bag Technique (5m.)</li> </ul>
2	Complete Wk of 9/01/25, For Wk of 9/08/25	<ul style="list-style-type: none"> <li>• Home Health Excellence: Introduction to the Environment (62m.)</li> <li>• Home Health Excellence: Homecare Assessment – Part 2 (88m.)</li> <li>• Home Health Excellence: Developing the Plan of Care (21m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Hand Hygiene (23m.)</li> <li>• Vital Signs: Temperature (7m.)</li> <li>• Vital Signs: Pulses (2m.)</li> <li>• Vital Signs: Respiratory Rate (3m.)</li> </ul>
3	Complete Wk of 9/08/25, For Wk of 9/15/25	<ul style="list-style-type: none"> <li>• Home Health Excellence: Professional Development &amp; Self-Care Strategies (62m.)</li> <li>• Home Health Excellence: Communication and Patient Engagement (65m.)</li> <li>• Home Health Excellence: Regulatory Compliance Essentials (62m.)</li> </ul>	
4	Complete Wk of 9/15/25, For Wk of 9/22/25	<ul style="list-style-type: none"> <li>• Policies &amp; Procedures: What's In It For Me (39m.)</li> <li>• How to Make an Effective Home Visit (110m.)</li> <li>• Nurse Autonomy: What it is and What it is Not (38m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Blood Pressure Measurement Education-Upper and Lower Extremity (28m.)</li> <li>• Medication Reconciliation in the Home (7m.)</li> </ul>
5	Complete Wk of 9/22/25, For Wk of 9/29/25	<ul style="list-style-type: none"> <li>• Home Health Excellence: Care Coordination and Collaboration (62m.)</li> <li>• Fundamentals of Chronic Condition Management (70m.)</li> <li>• Home Health Excellence: Case Management Part 1 (60m.)</li> </ul>	

	Wk of 12/01/25, For Wk of 12/08/25	<ul style="list-style-type: none"> <li>• and Vascular (27m.)</li> <li>• Comorbidities in Complex Patients: Pulmonary (21m.)</li> <li>• OASIS-E1: Section A (Administrative Information, Patient Tracking) (60m.)</li> <li>• OASIS-E1: M2420. Discharge Disposition (Administrative Information) (2m.)</li> <li>• OASIS-E1: Sections B and C (B. Hearing, Speech, &amp; Vision; C. Cognitive Patterns) (57m.)</li> </ul>	
16	Complete Wk of 12/08/25, For Wk of 12/15/25	<ul style="list-style-type: none"> <li>• Functional Cognition Part 1: Impairment &amp; Dementia (90m.)</li> <li>• OASIS-E1: Sections D, E, and F (D. Mood, E. Behavior, F. Preferences for Customary Routine Activities) (49m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment-Musculoskeletal (24m.)</li> </ul>
17	Complete Wk of 12/15/25, For Wk of 12/22/25	<ul style="list-style-type: none"> <li>• OASIS-E1: Section G (Functional Status) (80m.)</li> <li>• OASIS-E1: Section GG (Functional Abilities) (72m.)</li> </ul>	
18	Complete Wk of 12/22/25, For Wk of 12/29/25	<ul style="list-style-type: none"> <li>• Wound Management: Skin Assessment and Wound Identification (64m.)</li> <li>• Holistic Wound Healing Part 1: Understanding Causative Factors (46m.)</li> <li>• OASIS-E1: Section M (Skin Conditions) (62m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Wound Care: Assessment &amp; Measurement (6m.)</li> <li>• Wound Care: Cleansing and Packing a Wound (6m.)</li> <li>• Wound Care: Jackson-Pratt Drain (JP Drain) Care and Removal (9m.)</li> <li>• Wound Care: Staple &amp; Suture Removal (8m.)</li> <li>• Wound Care: Multilayer Compression Therapy (11m.)</li> </ul>
19	Complete Wk of 12/29/25, For Wk of 1/05/26	<ul style="list-style-type: none"> <li>• Wound Debridement, Dressing Types, and Coverage Selection (83m.)</li> <li>• Assessment and Documentation of Pressure Injuries (45m.)</li> <li>• Prevention of Pressure Injuries (45m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Wound Care: Negative-Pressure Wound Therapy (10m.)</li> <li>• Application of Hydrocolloid Dressing (24m.)</li> </ul>
20	Complete Wk of 1/05/26, For Wk of 1/12/26	<ul style="list-style-type: none"> <li>• Nutrition, Hydration, and Dysphagia: Overview of Risks and Problems (71m.)</li> <li>• Candid Conversations About OASIS-E1: Wounds (Section M) (47m.)</li> <li>• Holistic Wound Healing Part 2: Treatment Techniques and Strategies (64m.)</li> </ul>	<ul style="list-style-type: none"> <li>• Preventing Pressure Injuries (10m.)</li> </ul>
21	Complete Wk of 1/12/26,	<ul style="list-style-type: none"> <li>• OASIS-E1: Sections H, I, J, and K (H. Bladder &amp; Bowel, I. Active Diagnoses, J. Health</li> </ul>	<ul style="list-style-type: none"> <li>• Gastrointestinal Assessment (3m.)</li> </ul>



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# Successes and Challenges

## • Process

- Hiring
- Overview of NEHHNRP
- Regular monthly meetings: Advisory Group
- Regular monthly meetings: Preceptors
- Regular monthly Check-ins: HHA Educator/Clinical Mgr, Preceptor, Nurse Resident, NRP Manager
- Cohort Huddles 2x/week: Didactic plus Case Studies
- Preceptor Meetings: Topic focused and application

## • Structure

- Virtual learning
- Curriculum Content
- Cohort Huddles & Discussions

## • Outcome

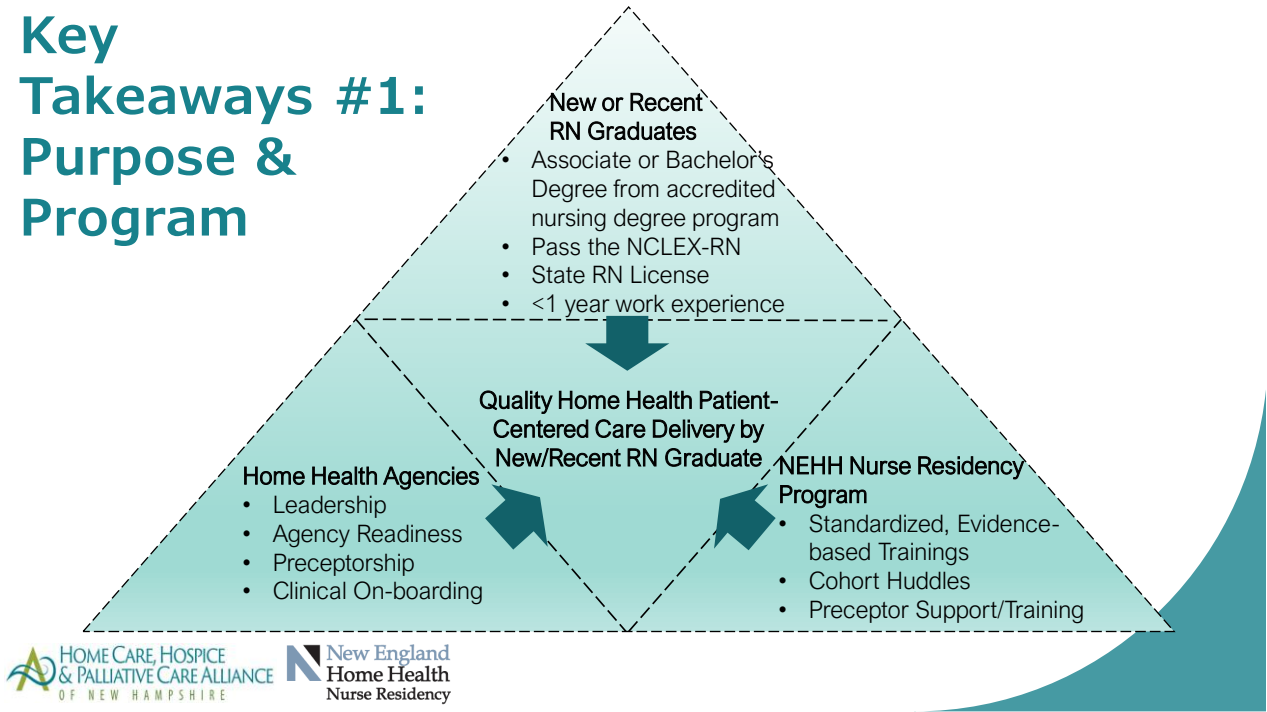
- Casey-Fink Surveys – beginning, mid-point, end
- Development of Program Evaluation
- Attendance & Completion
- Employment
- Clinical Skill Competency
- Quality Patient Outcomes
- Accurate and Efficient OASIS coding
- Appropriate identification and use of Agency Policies and Procedures
- Quality Patient Outcomes
- Retention

- |                           |                        |
|---------------------------|------------------------|
| • <b>Key Stakeholders</b> | - Nurse Residents      |
|                           | - Patients             |
|                           | - Preceptors           |
|                           | - Home Health Agencies |
|                           | - NEHHNRP              |

## Key Takeaways and Lessons Learned:

# Hiring, Clinical On-boarding, and Professional Development of New/Recent RN Graduates Entering Home Health Care

# Key Takeaways #1: Purpose & Program



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# Key Takeaways #2: Opportunities, Outcomes



1. Engagement in a **structured and supportive first-work experience** that builds workforce development and promotes professional growth in HH care nursing
2. Participation in a **cohort experience** with peers from various HHAs while engaging in **agency onboarding** for development of expertise in HH care nursing and patient care delivery
3. **Application** of increasingly in-depth knowledge of **evidence-based care** for HH patients in
  - ❑ Providing **quality care** to HH **patients experiencing illness** and related treatment regimens
  - ❑ Identifying and implementing **patient-focused interventions** to **mitigate adverse events** and rehospitalizations
  - ❑ Contributing to the **quality delivery** of HH care as a **professional member of the team**



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## Key Takeaways #3: Making It Happen

- It is possible
- Build on what you have
- Invest in training and support
- We must think differently about our nursing workforce ✨



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Questions  
and  
Answers

*Thank you*



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