North Dakota Qualified Service Provider Hub Survey Report

Karen Bernhardt, PhD

Executive Summary

In 2022, the Aging Services Division within North Dakota Health and Human Services partnered with the University of North Dakota Center for Rural Health to create a centralized "hub" to support North Dakota's Qualified Service Providers. Qualified Service Providers or QSPs are individuals such as friends, neighbors, and family members who are committed to providing care for people who want to continue to live in their own homes and communities. QSPs do not need to have a special certificate or license, but they do need to prove they have the necessary skills to provide care. The purpose of the North Dakota QSP Hub is to provide support, educational tools, and training opportunities for individual QSPs and QSP agencies. As part of this effort, QSPs and QSP agencies were surveyed to determine their primary needs, to provide feedback on their experiences, and to assist in directing the focus of the QSP Hub. This report provides an overview of the needs and experiences of individual QSPs and QSP agencies in North Dakota.

Key Findings

Individual QSP Survey

- 68.7% of individual QSPs reported having a close personal relationship with one or more of their clients prior to becoming their QSP.
- Over half of individual QSPs reported serving clients under 65 years old.
- The service most commonly provided by individual QSPs was homemaker service.
- When asked how influential various factors were in becoming a QSP, the desire to help others/make a difference in people's lives was most frequently rated as extremely influential.
- A flexible work schedule was most frequently rated as extremely influential for staying a QSP.
- Paperwork was the most commonly noted challenge of working as an individual QSP.

QSP Agency Survey

- 26.9% of QSP agencies reported they have been providing services for 16 or more years.
- When asked to report the average wage of QSPs employed by their agency, the most common response was $18.00 - $19.00 per hour.
- The service most commonly provided by QSP agencies was homemaker service.
- QSP agencies most frequently designated compensation/pay as extremely influential in both recruiting and retaining QSP employees.
- When asked how long, on average, a QSP position is open before it is able to be filled, the most common response was 1-3 months.
- According to the opinions and experiences of the responding agencies, the most common reason that QSPs leave their role was because they found another job that pays more.

Table of Contents

Introduction

Qualified Service Providers (QSPs) are individuals or agencies who provide care and services to adults with physical disabilities and older adults in their own homes. For example, this is often seen as one family member caring for another family member in need. QSPs can provide a wide range of services, including homemaking, transportation, case management, residential care, and personal care services.

There are two types of QSPs, which are differentiated by the source of employment. *Individual or independent QSPs* are self-employed contractors. As such, these QSPs are responsible for their own insurance, record keeping, billing, and taxes. Additionally, these QSPs are required to prove they have competency in all the standards to provide a particular service (North Dakota Health and Human Services, 2022). On the other hand, *agency QSPs* are individuals employed by an agency that is responsible for the training and financial components of the job. Agencies must verify that their employees have the specific skills needed to provide services.

In North Dakota, individuals are not required to have a certain degree or certification in order to work as a QSP. To become a QSP, individuals fill out the required application paperwork and are contacted once they are approved. QSPs must have a current Authorization to Provide Services for each client before providing services. The North Dakota QSP Hub serves a resource center to assist in this process for both QSP agencies and individual QSPs, as well as anyone who would like to become a QSP. The QSP Hub also provides assistance and resources to those who are already working as QSPs in North Dakota. The QSP Hub provides one-on-one individualized support on numerous topics, such as enrollment, billing, documentation, and renewal. The QSP Hub also has a library of tip sheets and guides and provides various trainings on QSP-related topics.

Methods

Survey Development

In order to gather information to guide and enhance the services provided by the QSP Hub, two separate surveys were conducted: one for QSP agencies and one for individual QSPs. The surveys gathered information about QSPs themselves, their clients, their services, and their experiences as a QSP. Many of the questions used in these surveys were originally developed through numerous meetings with stakeholders using feedback from multiple entities to ensure the questions were appropriate for the designated audiences. The surveys were created using Qualtrics survey software. A paper copy of each survey was also created and could be requested by participants who preferred to complete the survey by hand as opposed to electronically.

Survey Dissemination

The surveys were disseminated via email to a listserv consisting of 1,224 individual QSPs and 194 QSP agencies. Participants had approximately three weeks to complete the survey that corresponded to their role (i.e., QSP agency or individual QSP). Participants also had the option to request a paper copy of the survey, which they could mail in upon completion.

Results

Individual QSP Survey

Response Rate

Out of the 1,224 electronic invitations sent to individual QSPs, there were 361 records received. The overwhelming majority (359) were electronic records in Qualtrics, whereas two records were paper copies received via mail. Participants who did not respond beyond survey question six were excluded from the analyses. Using this criterion, there were 16 records excluded from analyses. Thus, 345 records (28.2% of the total invitations sent) were included in the analyses. Missing data were excluded using the pairwise method, and the number of valid responses is indicated for each question. Some of the questions allowed participants to select more than one response option. Therefore, some of the questions may have response totals greater than the number of respondents or percentage totals greater than 100.0%.

Demographics Summary

Out of the 345 valid responses to the survey, 80.9% (n = 279) of the respondents provided services as an individual QSP (i.e., self-employed), 13.3% (n = 46) of the respondents were employed by a QSP agency, and 5.8% (n = 20) of the respondents provided services as both. Participants were asked to indicate what type(s) of individual QSP they were by selecting all types that applied. Among the 340 respondents, the most common response was individual provider (55.9%, n = 190), followed by family personal care (39.7%, n = 135), and family home care (36.2%, n = 123).

When asked if they have a close personal relationship with any of the people they provide care for that started before becoming their QSP, 68.7% (n = 235) of respondents answered 'Yes' and 31.3% (n = 107) answered 'No.'

Basic demographic information was collected from the survey respondents, such as their age. The age breakdown of survey respondents (n = 345) was as follows: 30.7% (n = 106) were 55-64 years old, 21.4% (n = 74) were 65 years or older, 20.9% (n = 72) were 45-54 years old, 16.5% (n = 57) were 35-44 years old, 7.8% (n = 27) were 25-34 years old, and 2.6% (n = 9) were 18-24 years old.

Examining the highest level of education among respondents (n = 345) revealed that 33.0% (n = 114) received a high school diploma or GED, 27.8% (n = 96) completed some college, 18.3% (n = 63) received an associate's degree or 2-year degree, 10.1% (n = 35)

received a bachelor's or 4-year degree, 4.3% (n = 15) completed some high school, 4.1% (n = 14) received a post-graduate degree, and 2.3% (n = 8) preferred not to answer.

Survey participants were asked to report their annual household income. Of the 345 QSPs who responded, 23.5% (n = 81) preferred not to answer the question. The next most common responses were $30,000 - $39,999 (13.6%, n = 47), $20,000 - $29,999 (11.6%, n = 40), and $40,000 - $49,999 (11.6%, n = 40).

Participants were asked if they had any other jobs aside from working as a QSP. Of the 345 responding QSPs, over half (64.1%, n = 221) indicated they did not have any other jobs, whereas 35.9% (n = 124) indicated they did have one or more other jobs. Those who reported having additional jobs were asked to indicate the average number of hours per week they work at those jobs. Of the 122 responses to that follow-up question, 27.0% (n = 33) reported working an average of 20-29 hours per week, 23.0% (n = 28) reported working an average of 40-49 hours per week, 16.4% (n = 20) reported working an average of 0-9 hours per week, 16.4% (n = 20) reported working an average of 30-39 hours per week, 13.9% (n = 17) reported working an average of 10-19 hours per week, 2.5% (n = 3) reported working an average of 50-59 hours per week, and 0.8% (n = 1) reported working an average of 60+ hours per week.

When asked to provide their city of residence, 328 participants responded. The most common responses were Bismarck (14.0%, n = 46), Fargo (including West Fargo; 10.4%, n = 34), Minot (6.7%, n = 22), Grand Forks (6.4%, n = 21), and Mandan (5.8%, n = 19).

Clients Served

Figure 1. Average Number of Publicly Funded HCBS Recipients (n = 331) and Private Pay/Other Third-Party Insurance Clients (n = 325) Served per Month
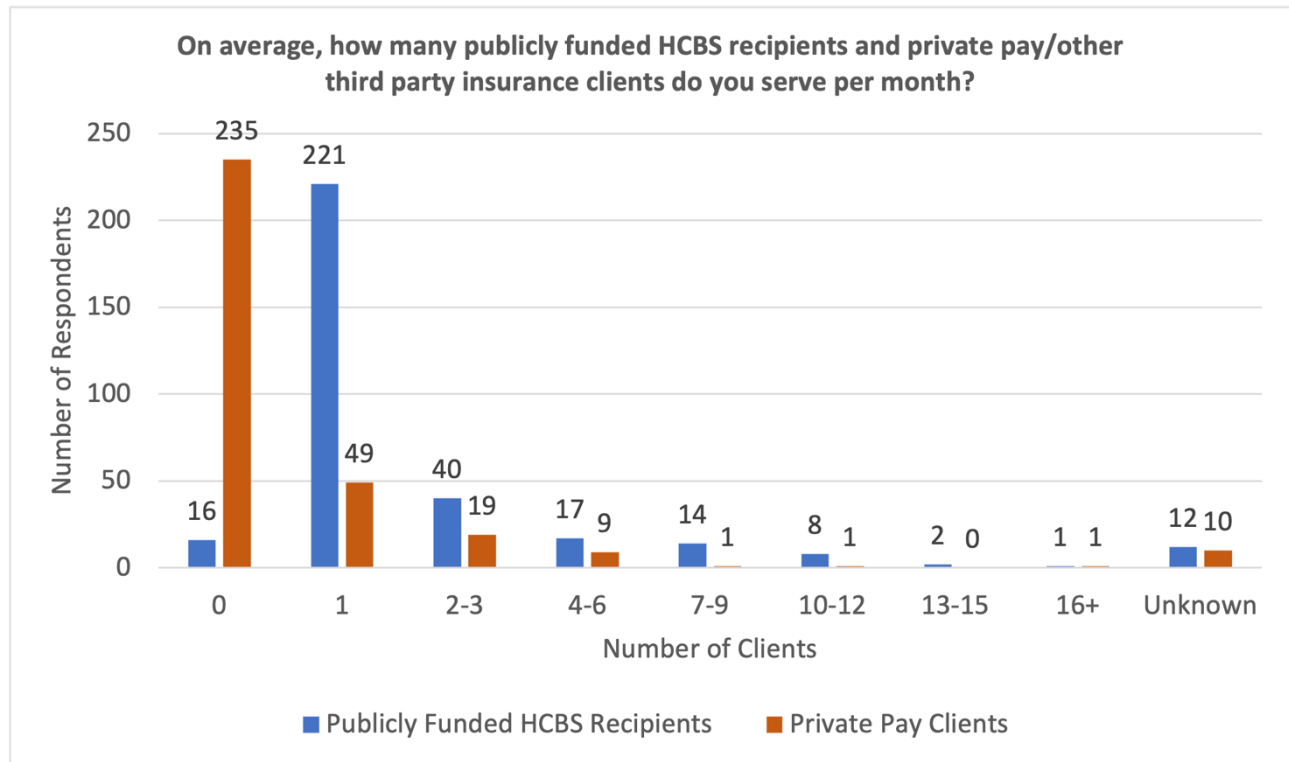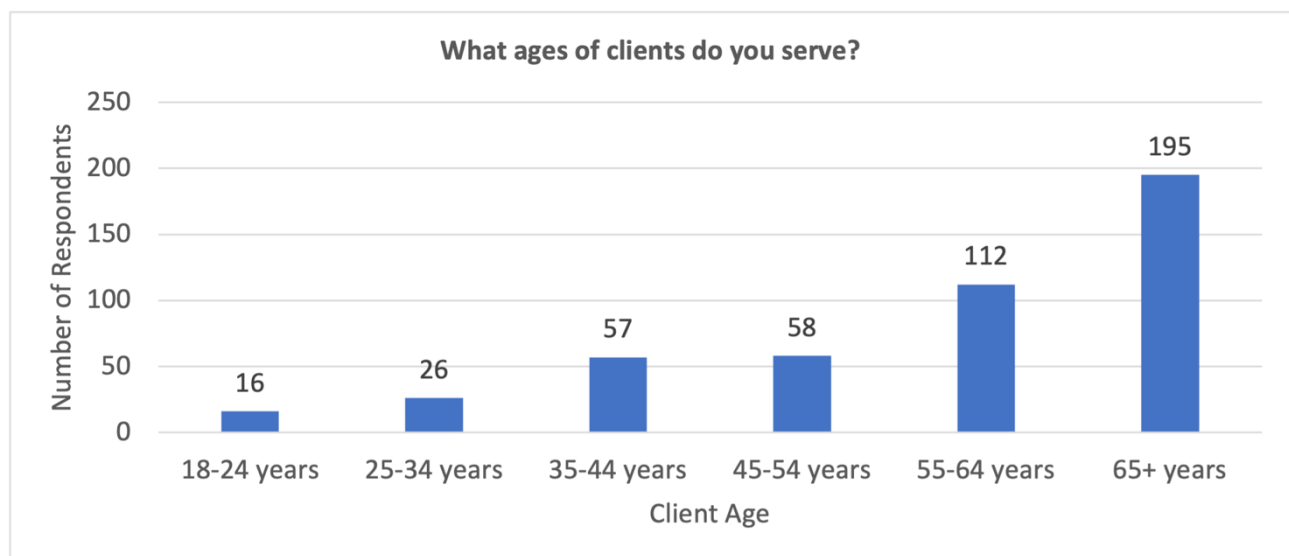

Figure 2. Ages of Clients Served (n = 327)*

*Note: Participants were able to select more than one response option for this question.

QSP Work/Services Provided

QSPs were asked to indicate the city or cities where QSP services are provided. Of the 327 responses, the most common locations listed were Bismarck (15.3%, n = 50), Fargo (including West Fargo; 10.7%, n = 35), Mandan (9.2%, n = 30), Grand Forks (8.0%, n = 26), and Minot (6.4%, n = 21).

Figure 3. Length of Time Providing QSP Services (n = 333)

How long have you been providing QSP services?

Bars (Number of Respondents):
- Less than 1 year: 77
- 1-3 years: 97
- 4-6 years: 43
- 7-9 years: 27
- 10-12 years: 35
- 13-15 years: 24
- 16+ years: 30

X-axis: Number of Years
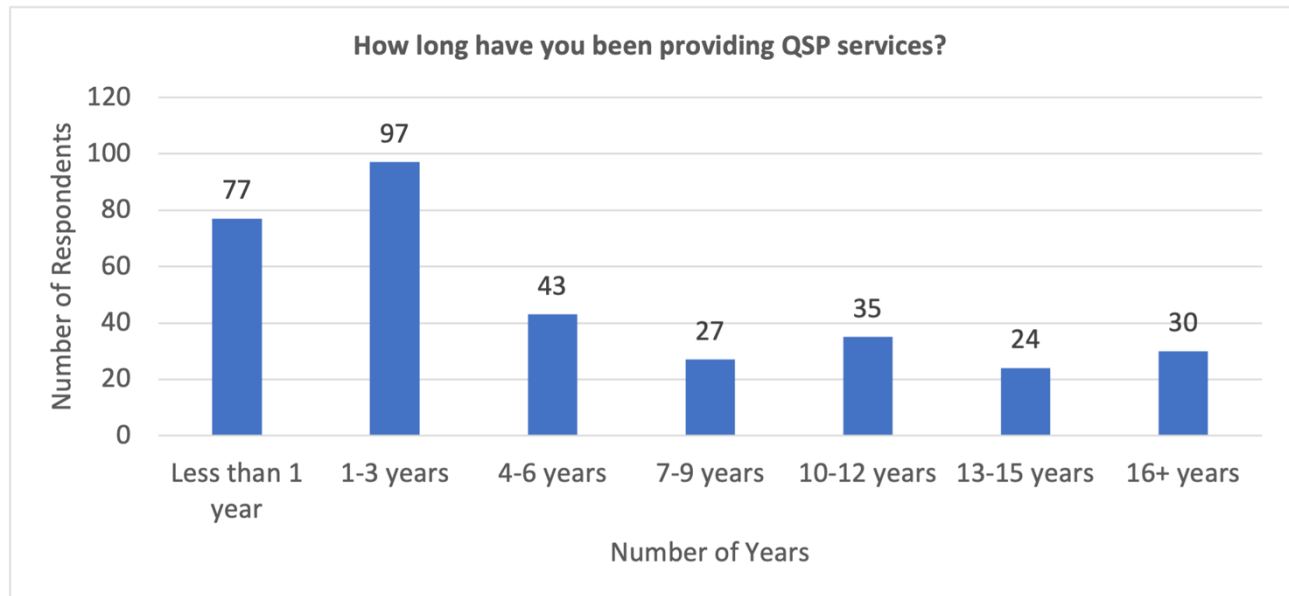
Figure 4. Typical Number of Hours Worked per Week as a Family/Individual QSP (n = 249)*

Typically, how many hours do you work per week as a a family/individual QSP?

Bars (Number of Respondents):
- 0-9: 37
- 10-19: 34
- 20-29: 20
- 30-39: 26
- 40-49: 18
- 50-59: 11
- 60+: 12
- 24/7 Care: 91

X-axis: Hours Per Week
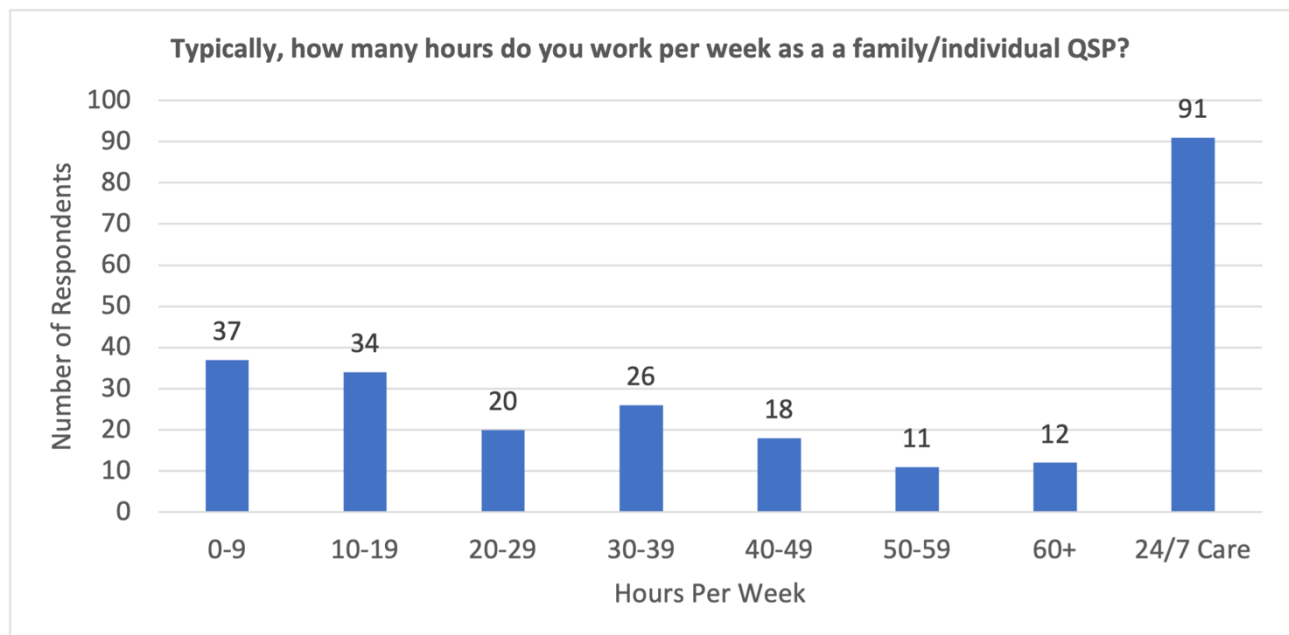
*Note: This question was only displayed to the 299 participants who reported providing services as an individual QSP.

Figure 5. Typical Number of Hours Worked per Week for a QSP Agency (n = 51)*
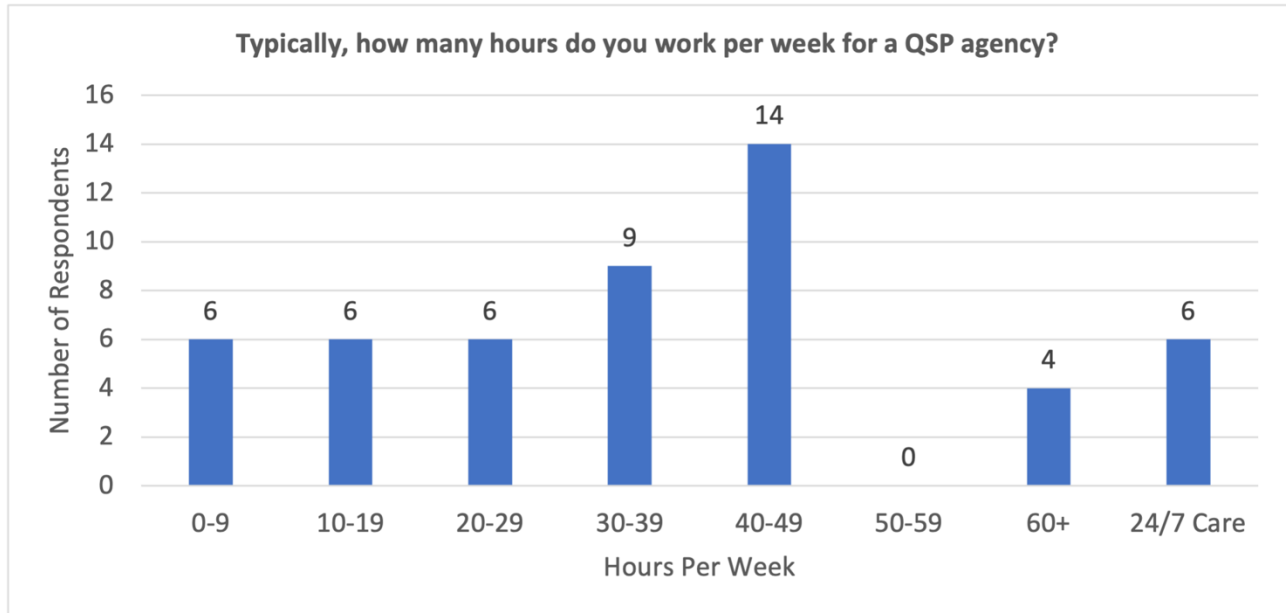
*Note: This question was only displayed to the 66 participants who reported being employed by a QSP agency.

Table 1. Services Provided to Clients by QSPs (n = 320)*

Service	Number of QSPs Providing Service
Homemaker service	143
Personal care service – SPED (15 min)	115
Non-medical transportation – Escort	93
Non-medical transportation – Local and out of town	85
Family personal care	80
Personal care service – SPED (daily)	75
Family home care	72
Companionship services	59
Chore – Labor (includes snow removal)	50
Respite care	50
Extended personal care	45
Supervision	44
Adult day care	16
Environmental modification	13
Specialized equipment	11
Adult foster care	8
Extended personal care – Nurse	3
Home delivered meals	3
Nurse education care	1
Other	20

*Note: Participants were able to select more than one response option for this question.
Installation ERS was not selected by any of the responding QSPs.

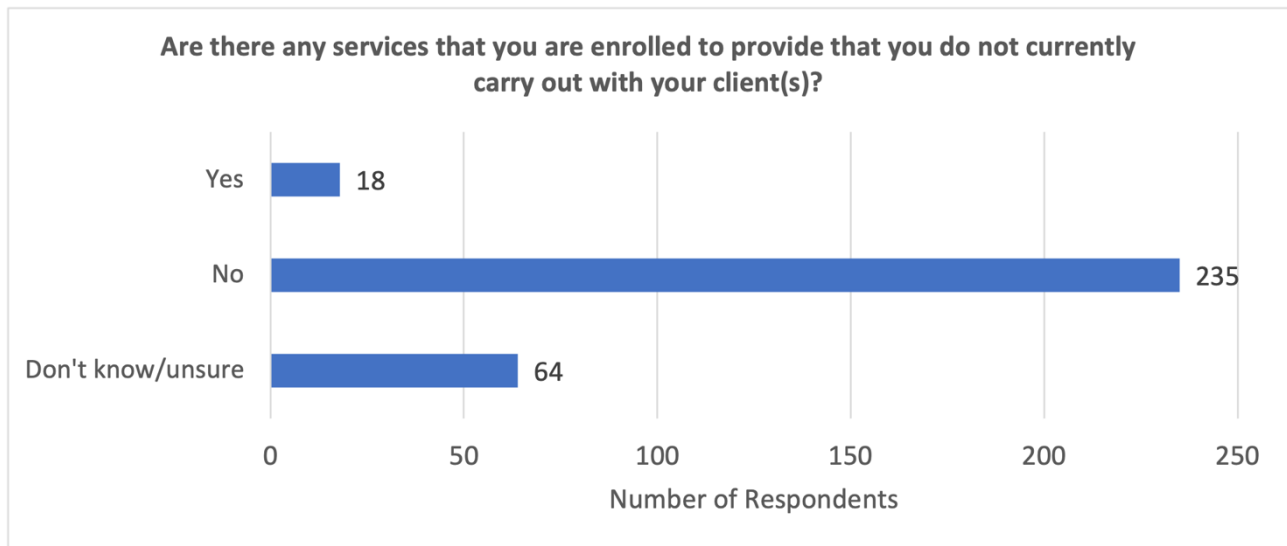**Figure 6. Breakdown of QSPs Who Do Not Provide Services in Which They Are Currently Enrolled (n = 317)**

Are there any services that you are enrolled to provide that you do not currently carry out with your client(s)?

Response	Number of Respondents
Yes	18
No	235
Don't know/unsure	64

Number of Respondents

Figure 7. Factors That Would Increase Awareness of QSP Services (n = 296)*

What would help make people more aware of your availability of QSP services?

Response	Number of Respondents
Not interested in making people more aware of QSP services	136
Referrals	113
Advertising/marketing	95
Social media	87
Provider database	85
QSP navigators	76
Other	13

Number of Respondents
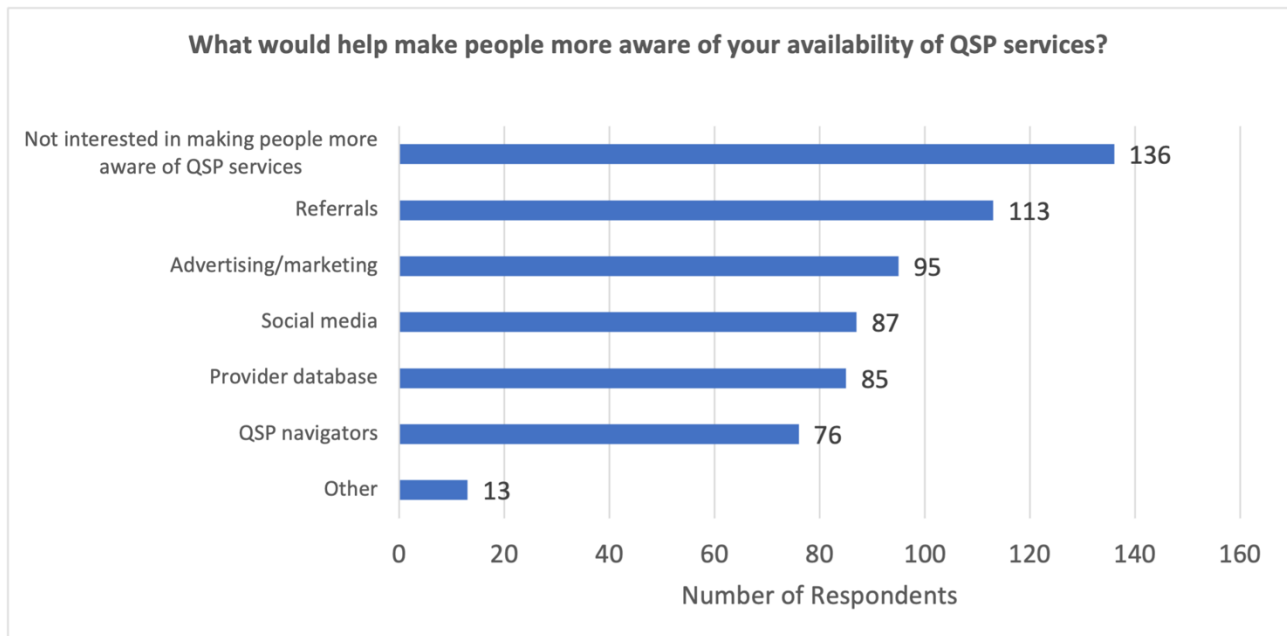
*Note: Participants were able to select more than one response option for this question.
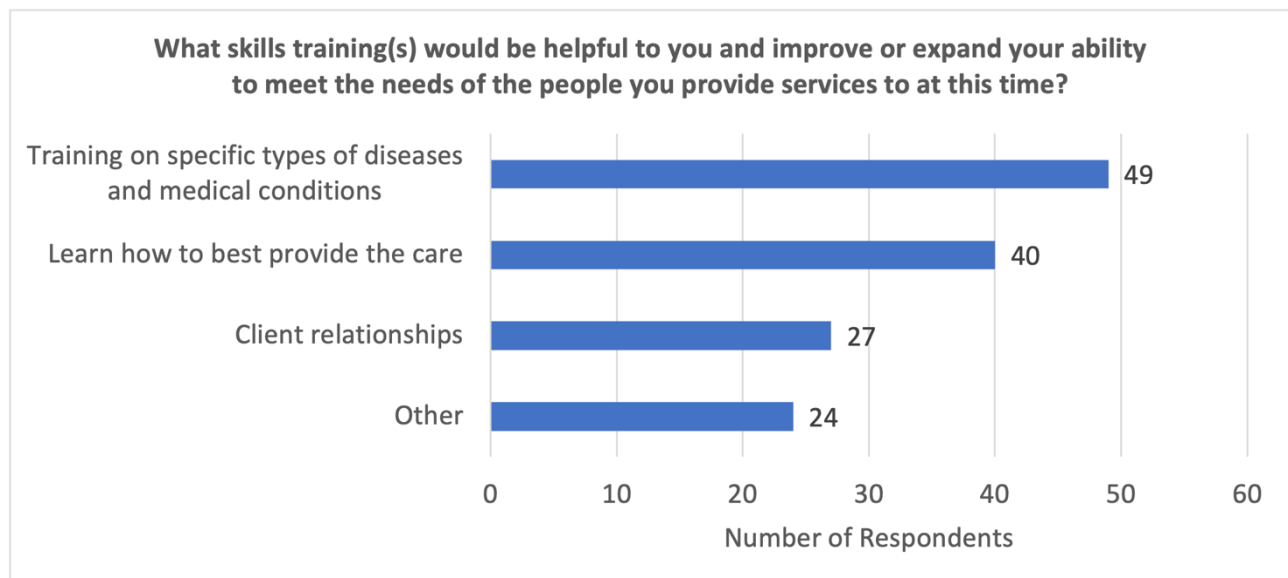
Trainings

Figure 8. Breakdown of QSPs Who Believe There Are Skills Trainings That Could Help Improve or Expand the Services They Provide (n = 300)

Are there skills trainings that could help you improve or expand the services that you provide?
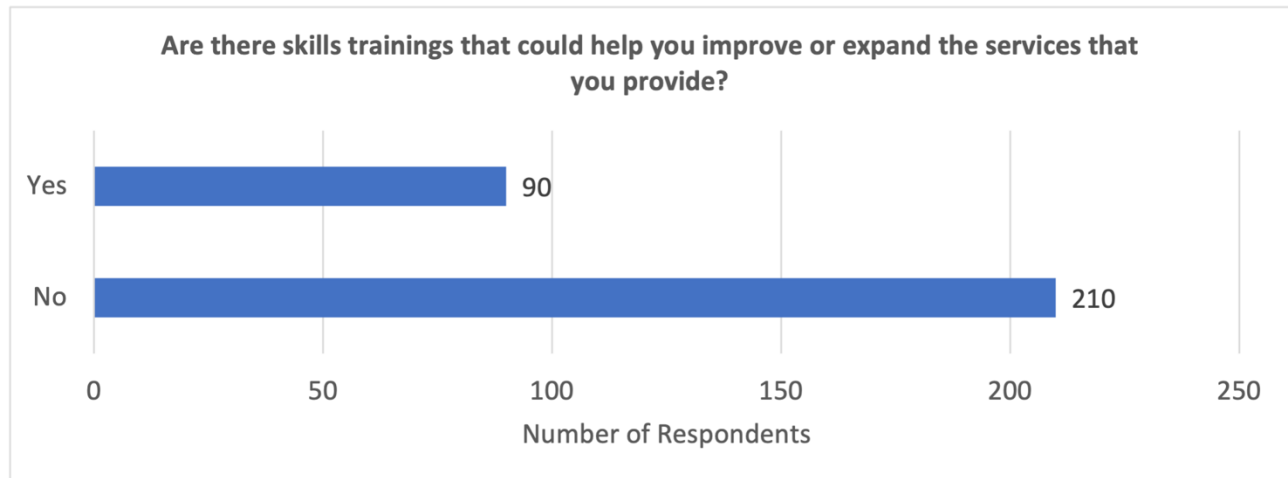
To better understand the skills trainings that QSPs believe would be most helpful, the 90 participants who responded 'Yes' in Figure 8 were asked to indicate the specific skills training(s) that would be helpful to improve or expand their ability to meet the needs of those they provide services to at this time. The results of that follow-up question are shown below in Figure 9.

Figure 9. Breakdown of Skills Trainings That Would be Helpful to Improve or Expand Ability to Meet Clients' Needs (n = 84)*

What skills training(s) would be helpful to you and improve or expand your ability to meet the needs of the people you provide services to at this time?

*Note: Participants were able to select more than one response option for this question. This question was only displayed to the 90 participants who answered 'Yes' in Figure 8.

Rural Differential Rate

Figure 10. Breakdown of QSPs that provide care for individuals who qualify for the rural differential rate (n = 296)
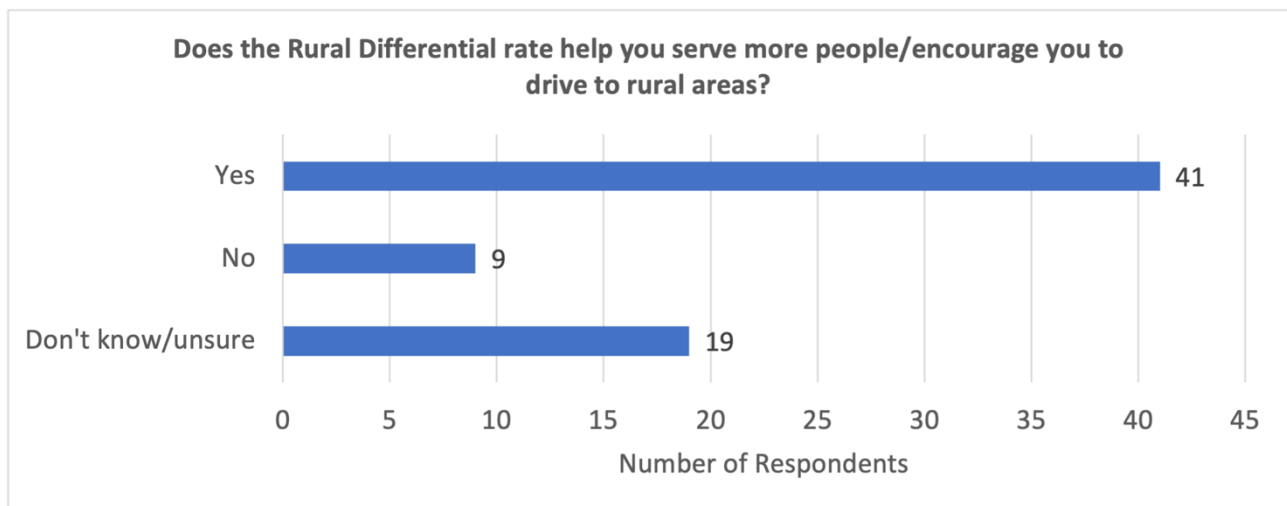
Do you provide care for individuals that qualify for the Rural Differential rate?

Response	Number of Respondents
Yes	72
No	119
Don't know/unsure	105

Number of Respondents
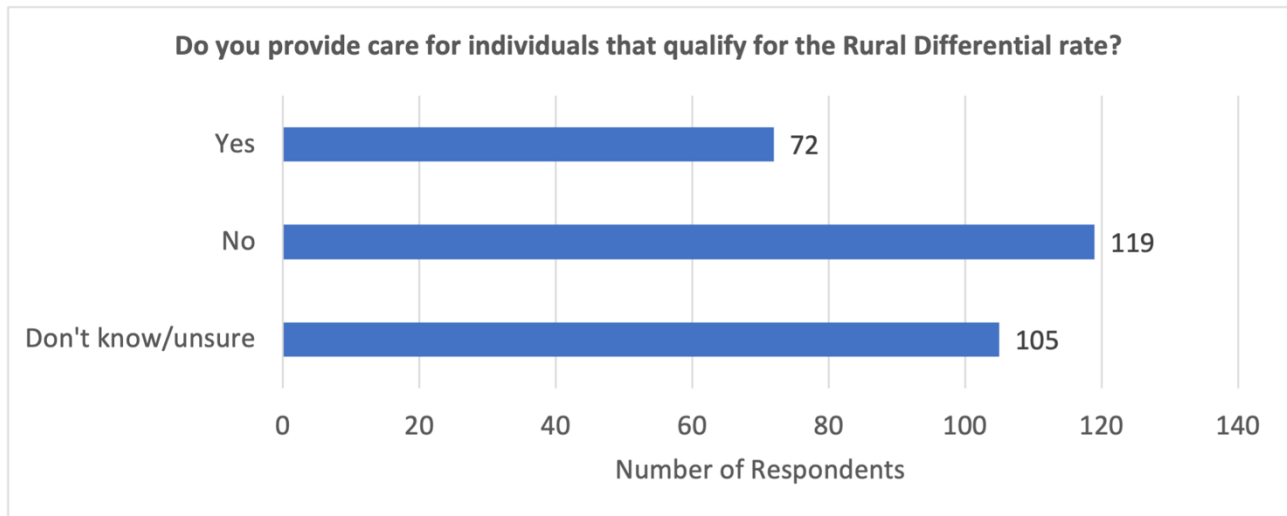
Participants who responded 'Yes' to the question in Figure 10 were asked a follow-up question aimed at understanding the helpfulness of the rural differential rate. The results are shown in Figure 11.

Figure 11. Breakdown of QSPs that find the rural differential rate helps them serve more people and drive to rural areas (n = 69)*

Does the Rural Differential rate help you serve more people/encourage you to drive to rural areas?

Response	Number of Respondents
Yes	41
No	9
Don't know/unsure	19

Number of Respondents

*Note: This question was only displayed to the 72 participants who answered 'Yes' in Figure 10.

In order to gather more detailed feedback on the rural differential rate, participants were asked if there was anything about the way the rural differential works that they would like to change. Qualitative analysis was conducted on the 115 responses to this question, and the following themes emerged. The most common response theme was no (n = 45). The next most common response theme was don't know/not sure (n = 18), followed by do not

know what the rural differential is (n = 16), N/A (n = 14), higher pay (n = 9), include travel/drive time (n = 3), yes (n = 3), and paid milage (n = 2). There were five other responses that did not fit into any particular theme.
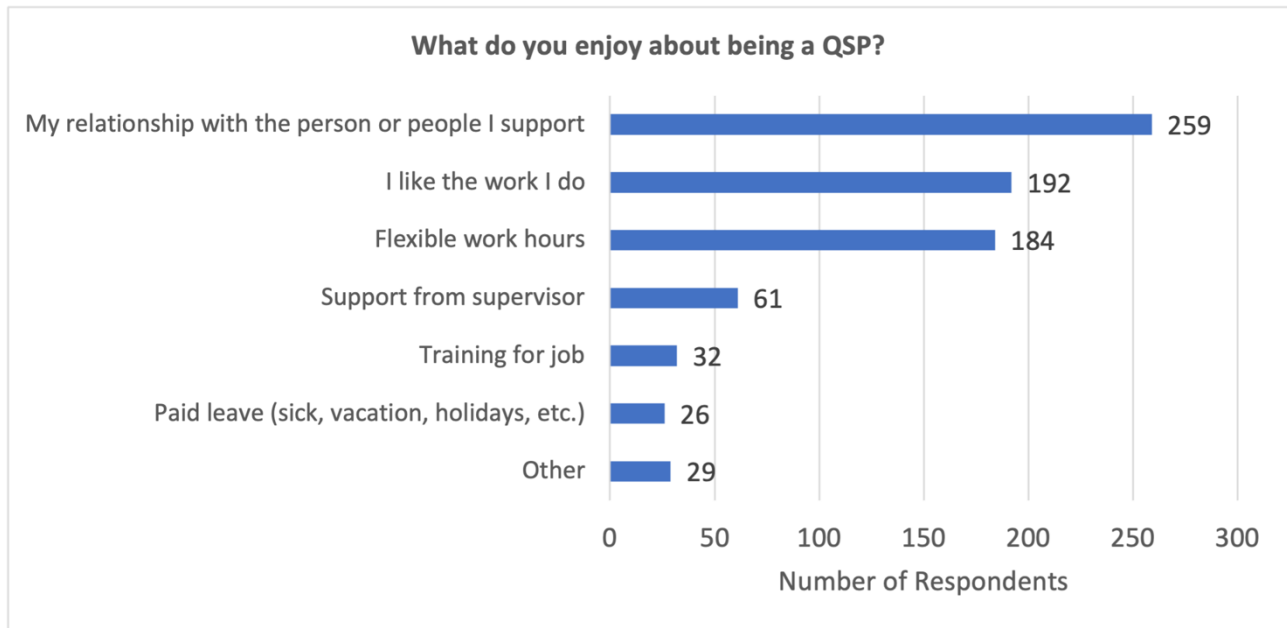
General

Table 2. Rating of How Influential Each Factor is in Becoming a QSP

Item	Not at all influential (n)	Slightly influential (n)	Somewhat influential (n)	Very influential (n)	Extremely influential (n)	Total responses (n)
Compensation/pay	42	42	84	83	48	299
Benefits	114	37	37	58	36	282
Advancement opportunities	147	38	47	31	23	286
Payer reimbursement	94	43	49	58	44	288
Continuing education/training opportunities	107	40	64	51	28	290
Flexible work schedule	52	20	46	94	79	291
Applications and paperwork that are easier and simpler to complete	49	25	53	90	74	291
Assistance with ongoing application support (making error corrections, submitting missing documents)	51	28	68	79	63	289
Length of time it takes to get started working as a QSP	73	41	60	73	43	290
Desire to help others/make a difference in people's lives	13	8	16	89	164	290

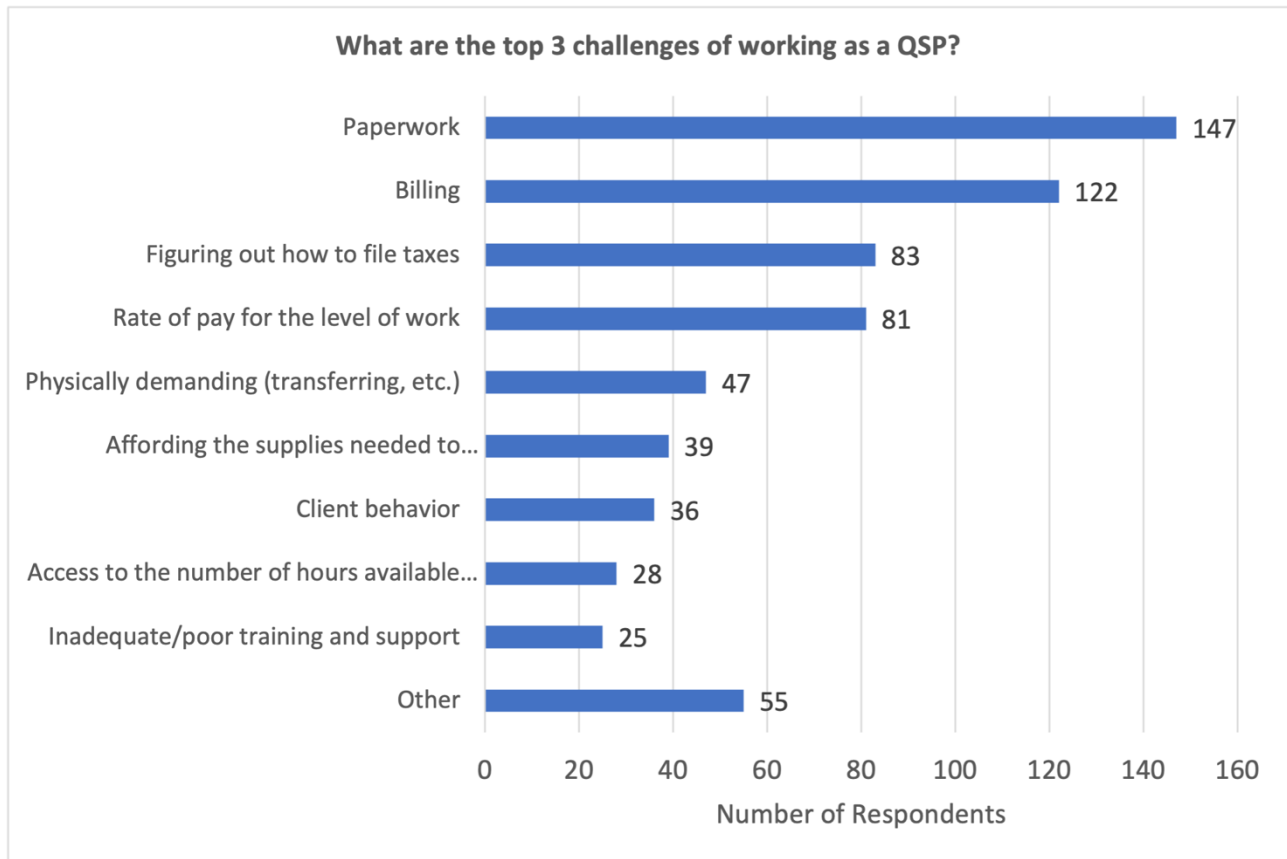## Table 3. Rating of How Influential Each Factor is in Staying a QSP

Item	Not at all influential (n)	Slightly influential (n)	Somewhat influential (n)	Very influential (n)	Extremely influential (n)	Total responses (n)
Compensation/pay	38	34	60	74	66	272
Benefits	101	29	37	48	42	257
Advancement opportunities	110	32	49	35	32	258
Payer reimbursement	82	29	43	54	47	255
Continuing education/training opportunities	88	37	50	43	39	257
Flexible work schedule	48	11	37	79	84	259
Streamlined recertification processes	40	26	56	77	59	258
Responsive support or assistance with EVV	48	16	59	71	61	255
Responsive support or assistance with billing	45	18	48	78	69	258
Responsive support or assistance with claim status	45	16	49	75	73	258
Responsive support or assistance with business acumen (e.g., finding clients, taxes, tracking expenses)	74	30	42	57	52	255

Figure 12. Enjoyable Aspects of Working as a QSP (n = 294)*

What do you enjoy about being a QSP?

Category	Number of Respondents
My relationship with the person or people I support	259
I like the work I do	192
Flexible work hours	184
Support from supervisor	61
Training for job	32
Paid leave (sick, vacation, holidays, etc.)	26
Other	29

*Note: Participants were able to select more than one response option for this question.

Figure 13. Top 3 Challenges of Working as a QSP (n = 283)*

What are the top 3 challenges of working as a QSP?

Category	Number of Respondents
Paperwork	147
Billing	122
Figuring out how to file taxes	83
Rate of pay for the level of work	81
Physically demanding (transferring, etc.)	47
Affording the supplies needed to…	39
Client behavior	36
Access to the number of hours available…	28
Inadequate/poor training and support	25
Other	55

*Note: Participants were able to select up to 3 response options for this question.

16

Qualitative analysis was conducted in order to determine the most prevalent themes among the open-ended survey questions. Participants were asked what motivated them to enroll as QSPs, and 261 individuals responded. Several common themes emerged, including someone important to them needed care (n = 127), love working with/helping people (n = 71), keeping individuals in their homes (n = 40), financial motivation (n = 31), self-employment/flexible schedule/working at home (n = 26), encouraged by someone they knew such as a client or social worker (n = 12), fulfill a need in the community (n = 8), and no longer wanted to work in a nursing home setting (n = 3). Some responses included more than one theme, and 14 responses did not fit into any of the aforementioned themes.

When asked if they had any additional comments at the end of the survey, 133 individuals provided a response. The most common themes after no comment (n = 65) were thankful for the QSP program/had a positive experience (n = 20), insufficient compensation/benefits (n = 13), miscellaneous issues (n = 9), enjoy being a QSP (n = 8), technology struggles (n = 6), desire for increased communication and/or in person assistance (n = 6), and billing/payment issues (n = 5). Some responses covered more than one theme, and five responses did not fit into any of the themes.

QSP Agency Survey

Response Rate

Out of the 194 invitations sent to QSP agencies, there were 80 records received. All 80 records were electronic records in Qualtrics. Nine records were excluded from analyses, four for being completely blank and five for only responding to the first question of the survey. Thus, 71 records (36.6% of the total invitations sent) were included in the analyses. Missing data were excluded using the pairwise method, and the number of valid responses is indicated for each question. Some of the questions allowed participants to select more than one response option. Therefore, some of the questions may have response totals greater than the number of respondents or percentage totals greater than 100.0%.

Respondents' Demographics

Participants were asked to identify their role within the QSP agency, and some participants listed more than one role. Of the 70 responses provided, 21.4% (n = 15) of the participants identified as owners or co-owners, 21.4% (n = 15) identified as managers, 15.7% (n = 11) identified as directors or assistant directors, 12.9% (n = 9) identified as supervisors, 10.0% (n = 7) identified as CEOs, 7.1% (n = 5) identified as nurses, 5.7% (n = 4) identified as administrators, 5.7% (n = 4) identified as coordinators, 5.7% (n = 4) identified as staff/direct care, 2.9% (n = 2) identified as quality assurance, and 8.6% (n = 6) identified as a different role that did not fit into any of the above categories.

Demographics Summary of QSPs Employed by Agencies

When asked how many QSPs they employed in an average month in the past year, over half (67.6%, n = 48) of the 71 responding agencies reported employing 0-9 QSPs, followed by 9.9% (n = 7) of agencies reporting they employed 10-19 QSPs and 9.9% (n = 7) reporting they employed 20-29 QSPs. Moreover, 5.6% (n = 4) of agencies reported employing 40-49 QSPs, 5.6% (n = 4) of agencies reported employing 60 or more QSPs, 1.4% (n = 1) of agencies reported employing 30-39 QSPs, and zero agencies reported employing 50-59 QSPs in an average month.

Some basic demographic information was collected about QSPs employed by the agencies, such as their age. When asked to indicate the ages of QSPs that they employ, agencies were able to select more than one response option. Of the 68 responses, 69.1% (n = 47) reported employing QSPs between 35 and 44 years old, 66.2% (n = 45) reported employing QSPs between 45 and 54 years old, 60.3% (n = 41) reported employing QSPs between 25 and 34 years old, 60.3% (n = 41) reported employing QSPs between 55 and 64 years old, 52.9% (n = 36) of agencies reported employing QSPs between 18 and 24 years old, and 30.9% (n = 21) reported employing QSPs 65 years and older.

The average length of time QSPs have worked at the agencies was also assessed. Of the 66 responses, 28.8% of agencies (n = 19) reported the average length of time QSPs worked at their agency was less than one year, 28.8% of agencies (n = 19) reported the average time was 1-2 years, 16.7% (n = 11) reported the average time was 3-4 years, 15.2% (n = 10) reported the average time was longer than 10 years, 6.1% (n = 4) reported the average time was 5-6 years, 4.5% (n = 3) reported the average time was 7-8 years, and zero agencies reported the average length of time was 9-10 years.

Clients Served

Figure 14. Average Number of Publicly Funded HCBS Recipients (n = 67) and Private Pay/Other Third-Party Insurance Clients (n = 66) Served per Month by Agencies
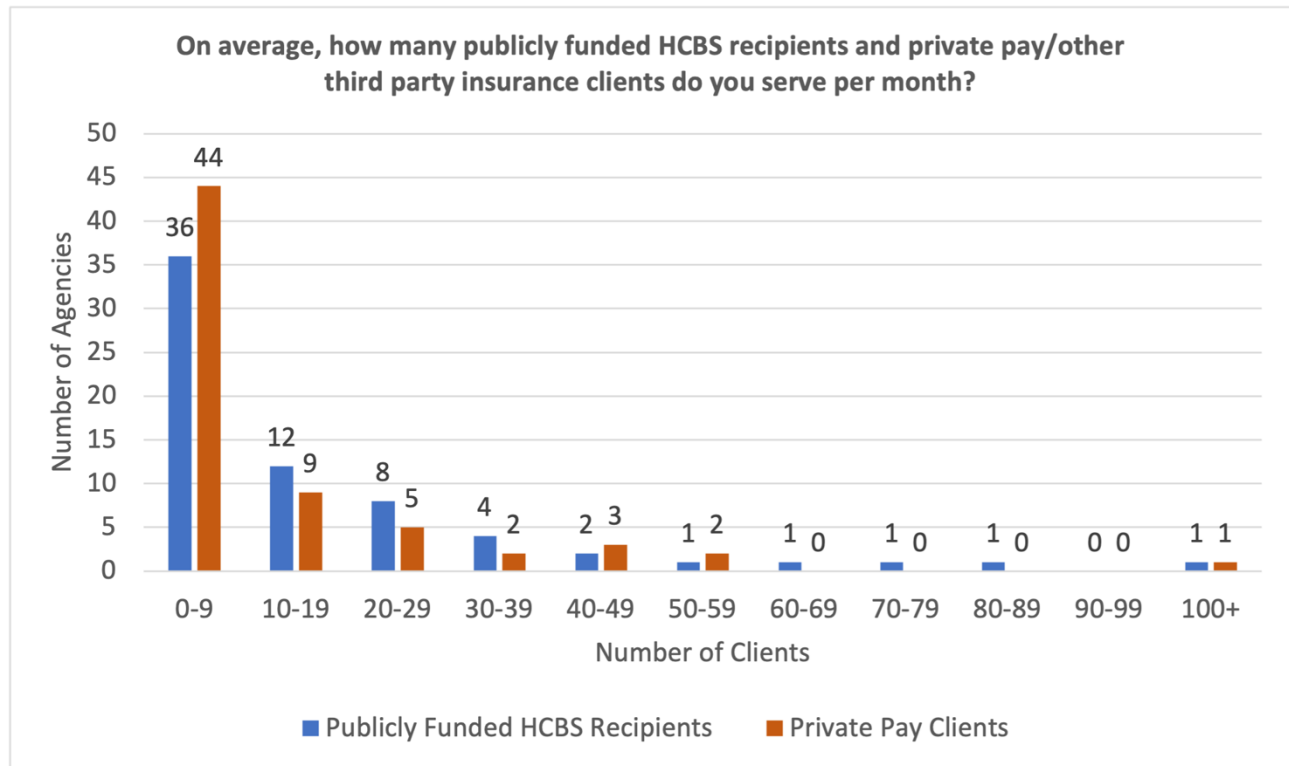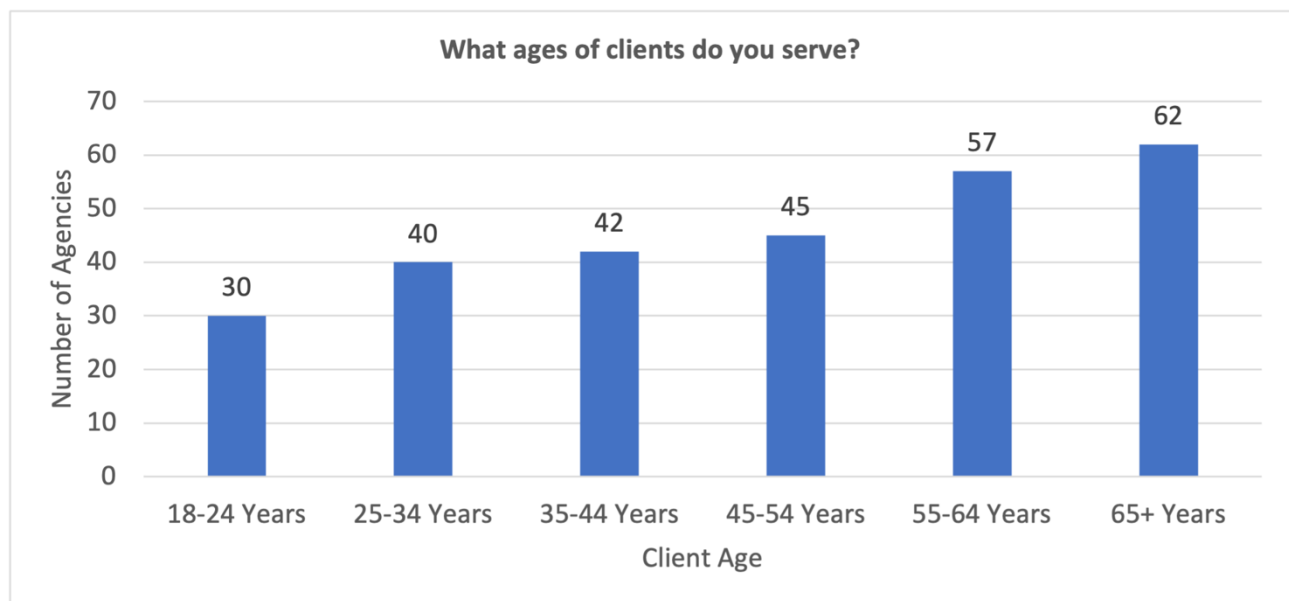
On average, how many publicly funded HCBS recipients and private pay/other third party insurance clients do you serve per month?

Number of Clients	Publicly Funded HCBS Recipients	Private Pay Clients
0-9	36	44
10-19	12	9
20-29	8	5
30-39	4	2
40-49	2	3
50-59	1	2
60-69	1	0
70-79	1	0
80-89	1	0
90-99	0	0
100+	1	1

Figure 15. Ages of Clients Served by Agencies (n = 67)*

What ages of clients do you serve?

Client Age	Number of Agencies
18-24 Years	30
25-34 Years	40
35-44 Years	42
45-54 Years	45
55-64 Years	57
65+ Years	62

*Note: Participants were able to select more than one response option for this question.

Services Provided

Figure 16. Length of Time Agencies have Provided QSP Services (n = 67)

How long has your agency been providing QSP services?
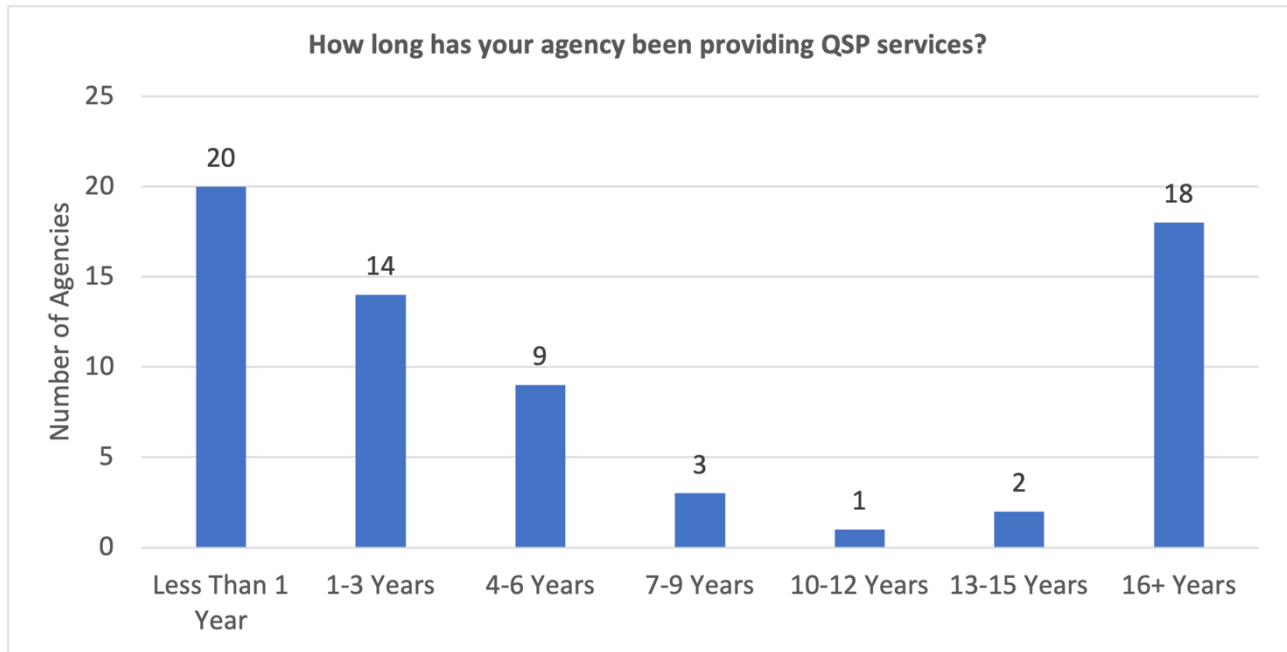
Table 4. Services Provided to Clients by QSP Agencies (n = 68)*

Service	Number of Agencies Providing Service
Homemaker service	59
Personal care service – SPED (15 min)	52
Non-medical transportation – Escort	42
Companionship services	40
Non-medical transportation – Local & out of town	37
Respite care	37
Supervision	34
Chore – Labor (includes snow removal)	28
Extended personal care	27
Extended personal care – Nurse	25
Nurse education care	21
Community supports service	18
Residential habilitation	12
Personal care – Assisted living – SPED	10
Non-medical transportation – Carrier, bus, taxi	9
Adult residential care	5
Home delivered meals	3
Transitional living	3
Adult day care	2
Specialized equipment	2
CHR assessment	1
Environmental modification	1
Respite care – Institutional	1
Transition coordination	1
Other	7

*Note: Participants were able to select more than one response option for this question. Emergency response system (ERS), installation ERS, one time transition costs, and supported employment were not selected by any responding QSP agencies.

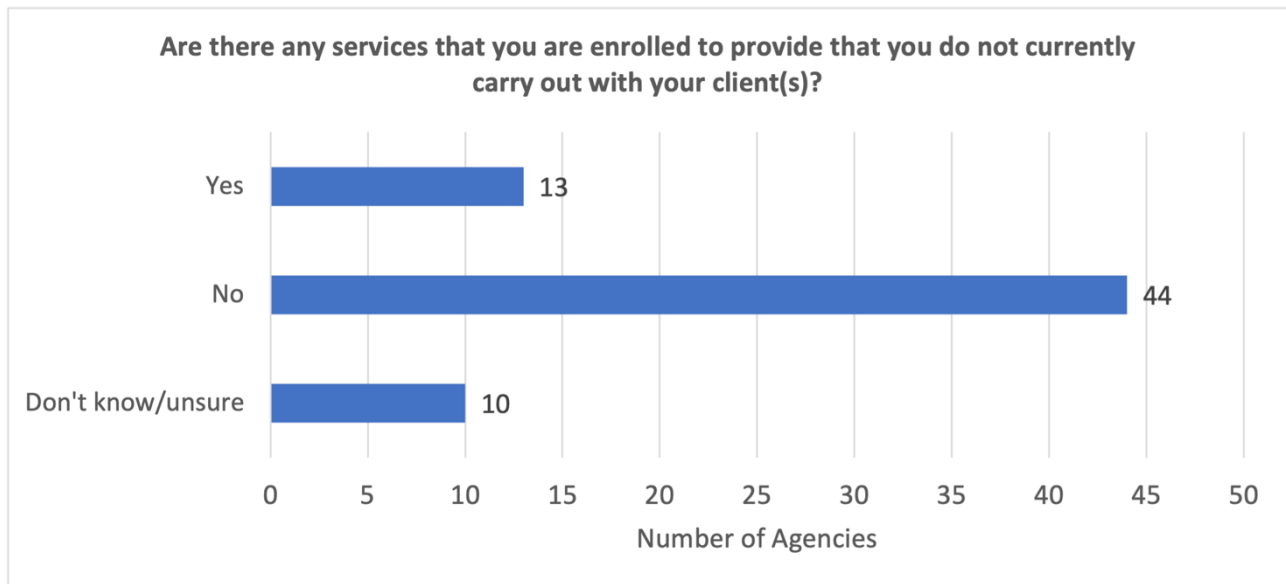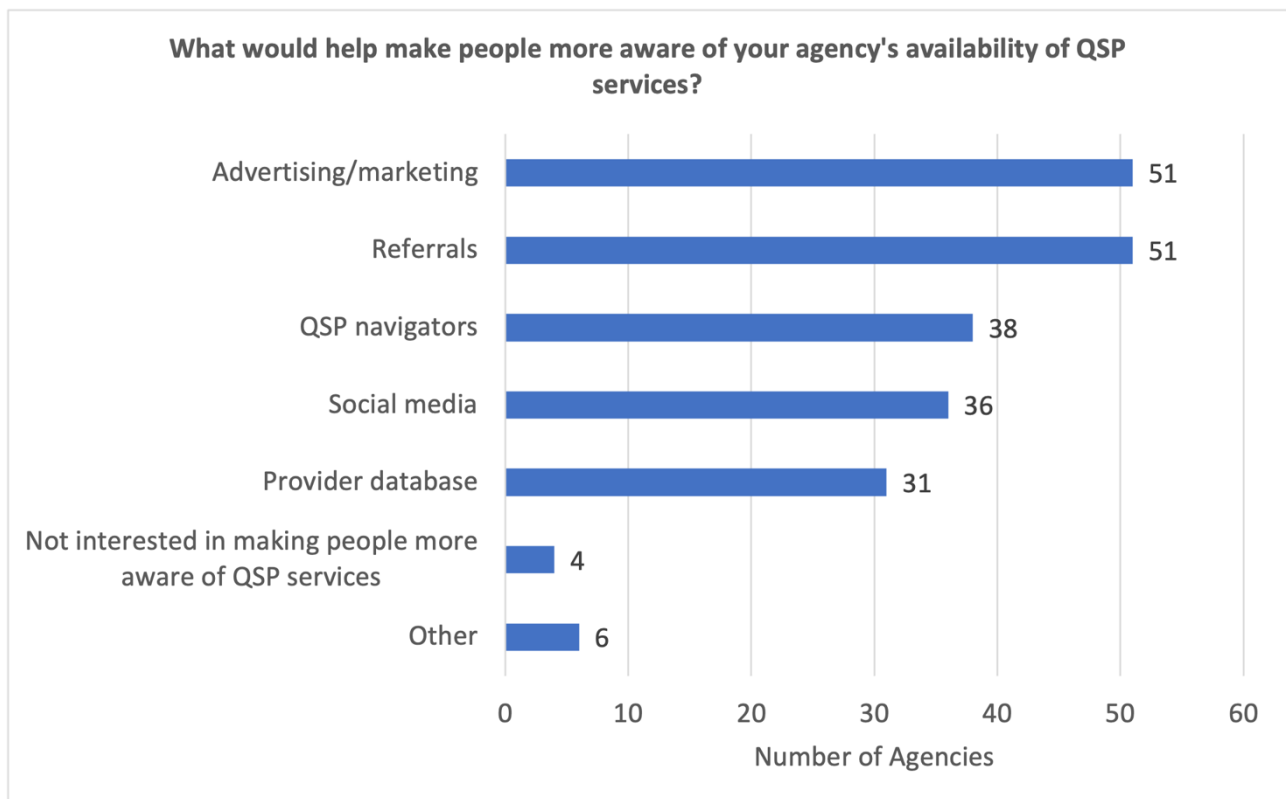**Figure 17. Breakdown of Agencies Who Do Not Provide Services in Which They Are Currently Enrolled (n = 67)**

Are there any services that you are enrolled to provide that you do not currently carry out with your client(s)?

Response	Number of Agencies
Yes	13
No	44
Don't know/unsure	10

X-axis: Number of Agencies (0 to 50)

Figure 18. Factors that Would Increase Awareness of Agencies' Services (n = 62)*

What would help make people more aware of your agency's availability of QSP services?

Factor	Number of Agencies
Advertising/marketing	51
Referrals	51
QSP navigators	38
Social media	36
Provider database	31
Not interested in making people more aware of QSP services	4
Other	6

X-axis: Number of Agencies (0 to 60)

*Note: Participants were able to select more than one response option for this question.

Compensation and Benefits

Table 5. Benefits offered by QSP agencies

Benefits	Yes (n)	Yes (%)	No (n)	No (%)	Total Responses (n)
Paid time off (PTO), not differentiating between sick and vacation time	29	45.3%	35	54.7%	64
Paid sick leave	26	42.6%	35	57.4%	61
Paid vacation	33	54.1%	28	45.9%	61
Your organization's health insurance	33	50.8%	32	49.2%	65
Your organization's dental insurance	36	55.4%	29	44.6%	65
Your organization's vision insurance	36	55.4%	29	44.6%	65
Your organization's life insurance	30	47.6%	33	52.4%	63
Your organization's retirement plan	37	56.9%	28	43.1%	65
Short term disability	30	49.2%	31	50.8%	61
Long term disability	26	41.9%	36	58.1%	62

Figure 19. Average Hourly Wage of QSPs Employed by Agencies (n = 65)
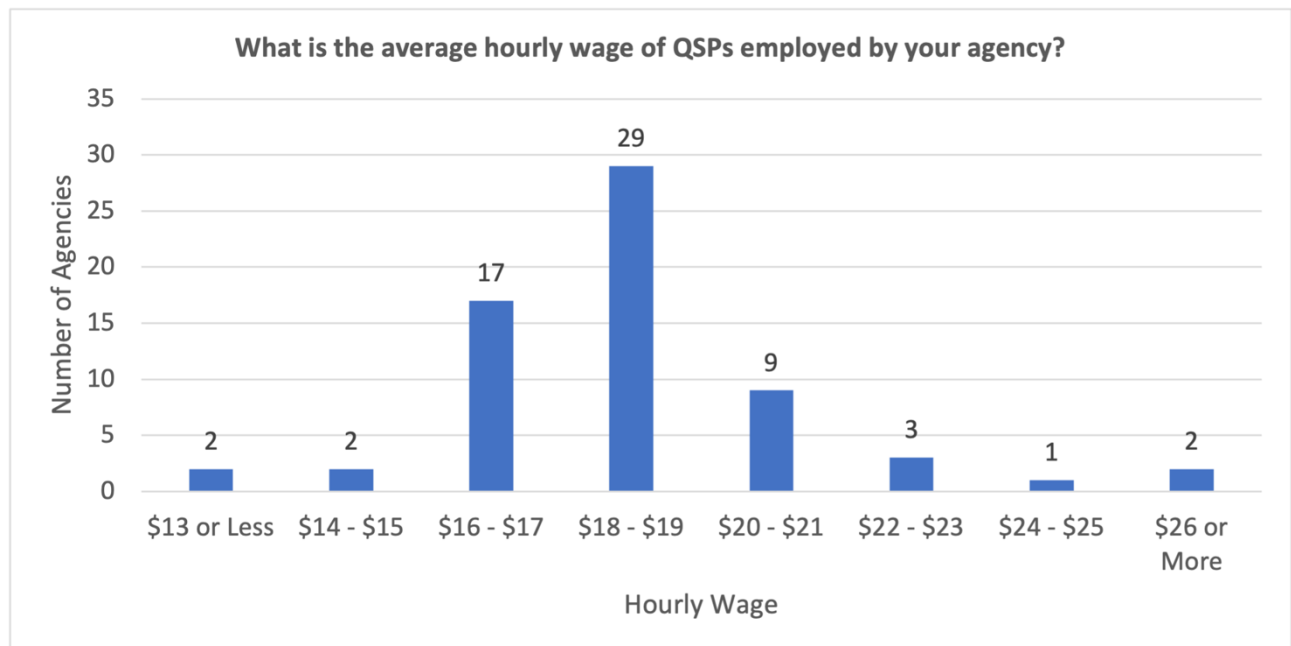
Trainings

Figure 20. Types of Training and Assistance that Would Help Agencies Better Manage their QSP Business (n = 58)*

What types of training and assistance would help your agency to better manage your QSP business?

Category	Number of Agencies
Managing claim status, payments, and denials	33
Marketing of services	32
Staff management (recruitment, hiring, training, supervision)	32
Education about all HCBS services and authorization requirements	31
Utilization of the EVV system and Therap systems	28
Renewal paperwork for your QSP agency	26
Quality program standards	22
Policy development	20
Record keeping	19
Insurance needs	18
Technology needs	18
Taxes	11
Other	9

*Note: Participants were able to select more than one response option for this question.

QSP Agency Capacity

QSP agencies were asked several questions aimed at assessing their current staff capacity, their potential ability to serve more individuals, and their plans to grow their business. The results are shown below in Figures 21 through 25.

Figure 21. Breakdown of QSP Agencies Who Have Current Staff Capacity to Serve more Individuals (n = 65)

Do you have current staff capacity to serve more individuals?

Response	Number of Agencies
Yes	41
No	14
Don't know/unsure	10

Number of Agencies
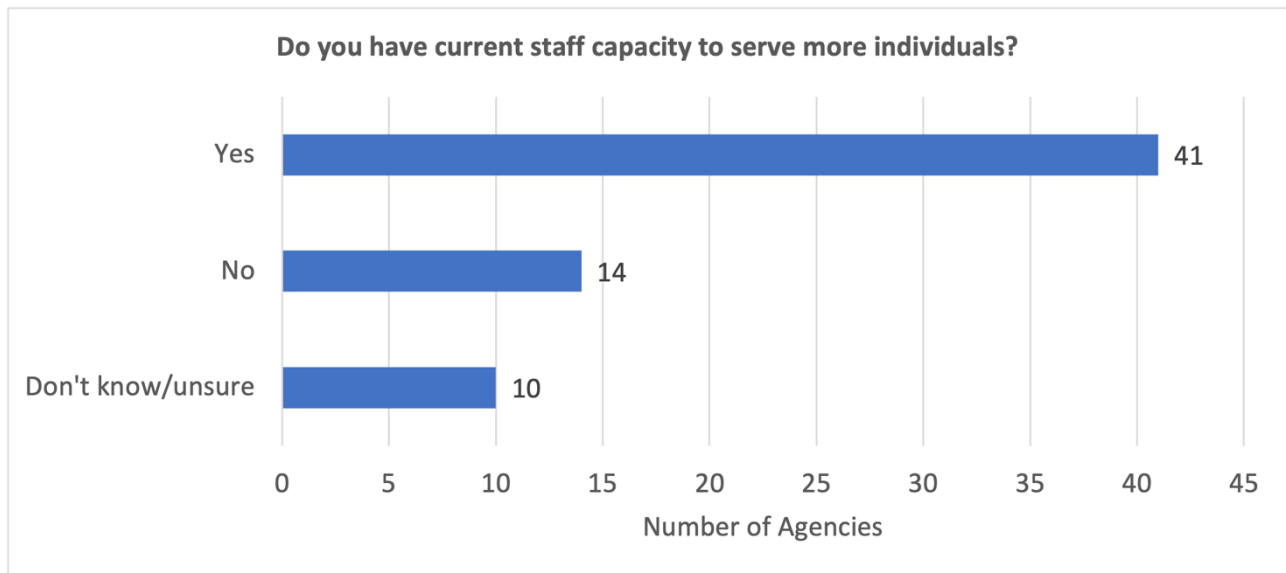
Figure 22. Breakdown of QSP Agencies Who Feel Adequately Staffed to Meet Demand in Their Service Area (n = 65)

Do you feel you are adequately staffed to meet demand in your service area?

Response	Number of Agencies
Yes	36
No	23
Don't know/unsure	6

Number of Agencies
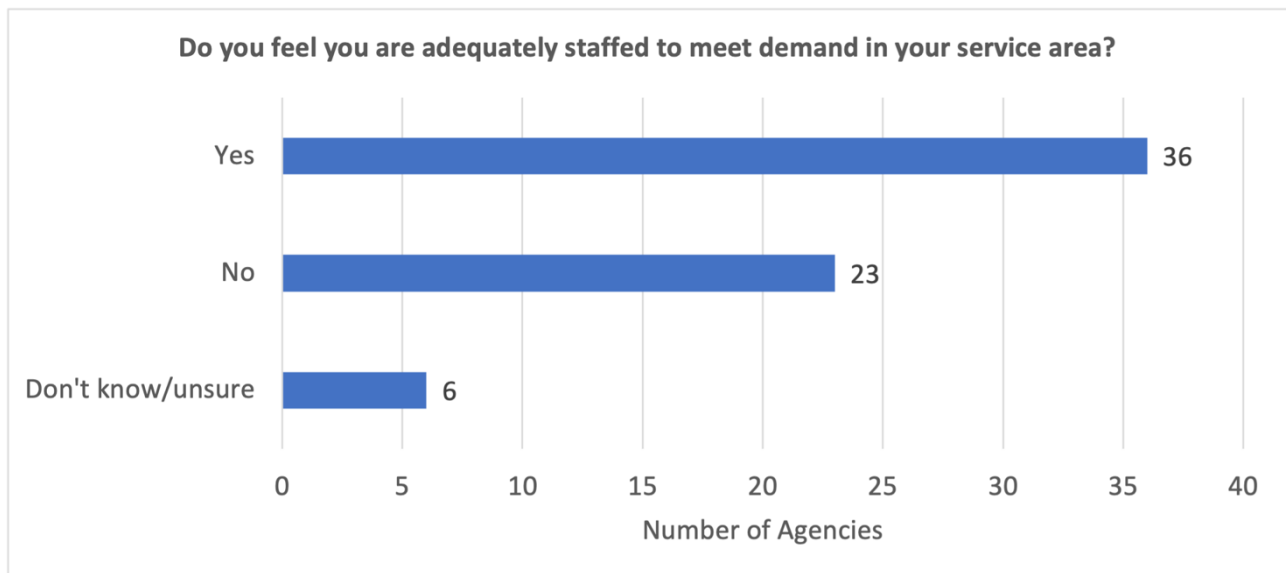
Figure 23. Breakdown of QSP Agencies Willing to Take on More Clients if They Had Staffing (n = 65)

Would you be willing to take on more clients if you had staffing?

Response	Number of Agencies
Yes	60
No	2
Don't know/unsure	3

Number of Agencies
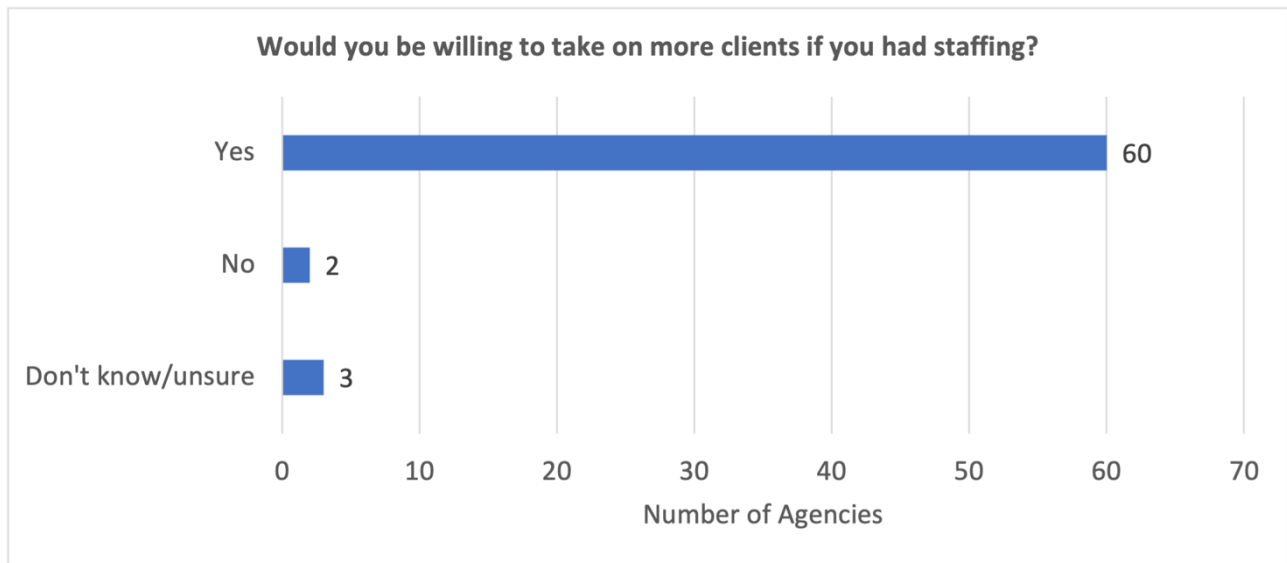
Figure 24. Breakdown of QSP Agencies with Plans to Grow or Expand Their Business (n = 65)

Does your agency have plans to grow or expand your business?

Response	Number of Agencies
Yes	42
No	4
Don't know/unsure	19

Number of Agencies
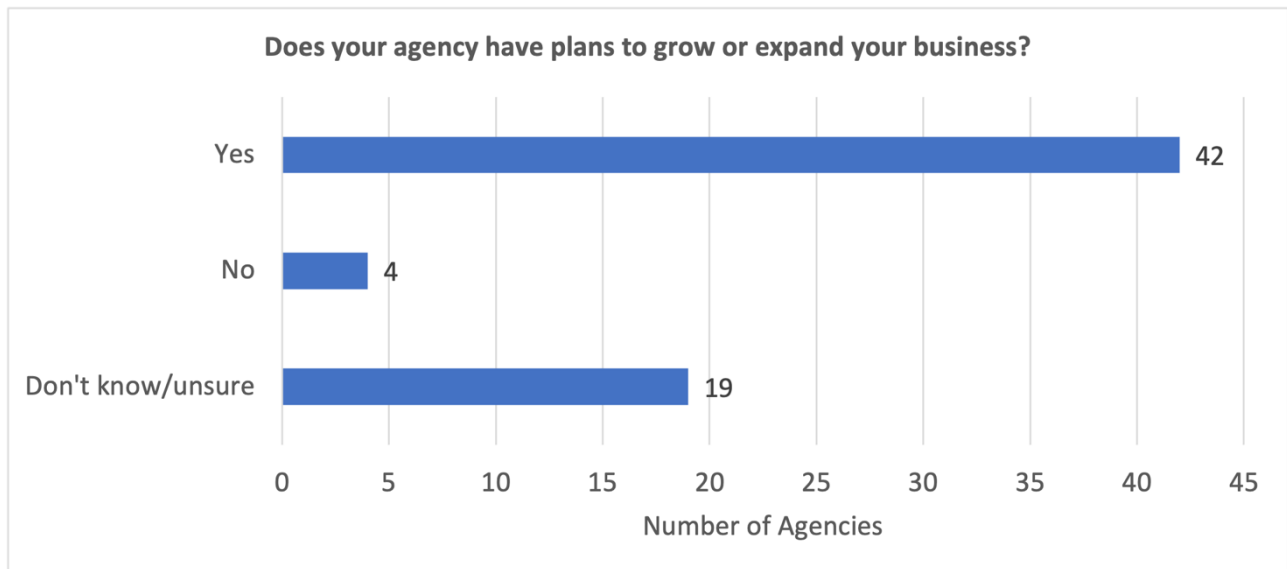
Figure 25. Ways QSP Agencies Plan to Grow and Expand (n = 42)*
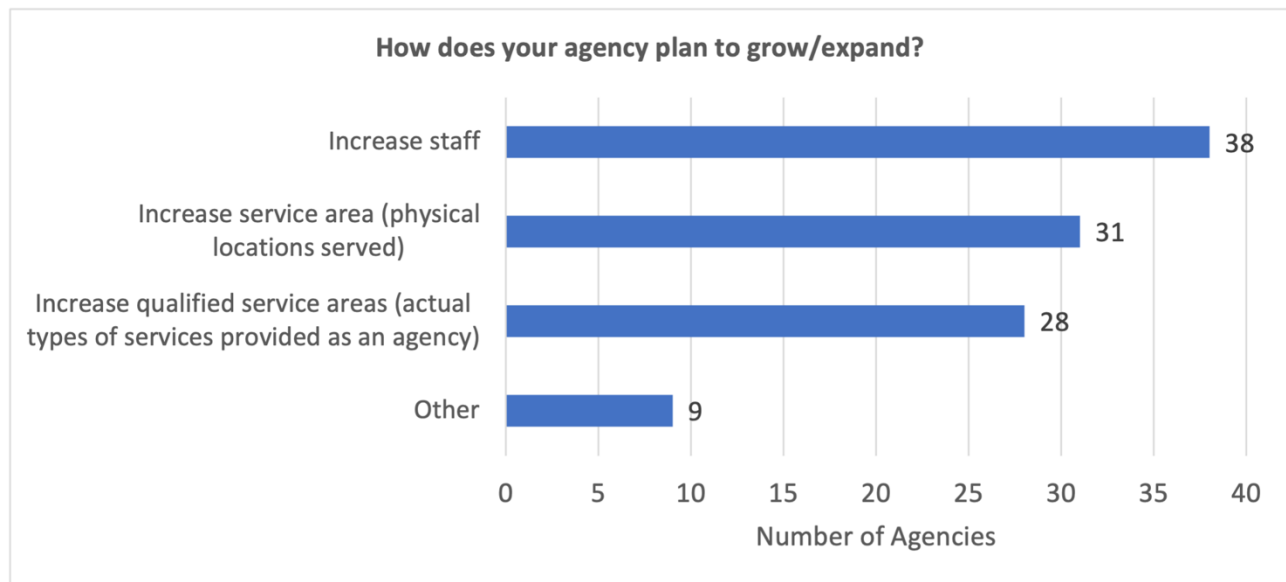
How does your agency plan to grow/expand?

Increase staff — 38
Increase service area (physical locations served) — 31
Increase qualified service areas (actual types of services provided as an agency) — 28
Other — 9

Number of Agencies

*Note: Participants were able to select more than one response option for this question. This question was only displayed to the 42 participants who indicated their agency has plans to grow or expand their QSP business.

Agencies were asked how long QSP positions are open on average before they are able to be filled. Of the 58 responses, 36.2% (n = 21) of agencies reported 1-3 months, 25.9% (n = 15) reported 1-3 weeks, 8.6% (n = 5) reported less than one week, 3.4% (n = 2) reported 4-6 months, 3.4% (n = 2) reported 10-12 months, 3.4% (n = 2) reported they are always hiring, and 6.9% (n = 4) reported they were unsure how long QSP positions generally went unfilled. Nine responses did not fit into any of the aforementioned time frames and some agencies' responses spanned multiple time frames.

General

Table 6. Rating of How Influential Each Factor is in Recruiting QSP Employees

Item	Not at all influential (n)	Slightly influential (n)	Somewhat influential (n)	Very influential (n)	Extremely influential (n)	Total responses (n)
Compensation/pay	1	0	9	20	32	62
Benefits	1	4	15	22	19	61
Advancement opportunities	6	10	21	14	10	61
Payer reimbursement	11	3	15	11	20	60
Continuing education/training opportunities	4	13	17	16	12	62
Flexible work schedule	3	3	7	29	19	61
Responsive support or assistance with other administrative processes and requirements	5	6	15	22	14	62
Applications and paperwork that are easier and simpler to complete	2	6	17	25	11	61
Assistance with onboarding new agency employees	9	8	12	21	12	62

Table 7. Rating of How Influential Each Factor is in Retaining QSP Employees

Item	Not at all influential (n)	Slightly influential (n)	Somewhat influential (n)	Very influential (n)	Extremely influential (n)	Total responses (n)
Compensation/pay	0	1	7	18	37	63
Benefits	0	4	9	22	27	62
Advancement opportunities	5	9	22	14	13	63
Payer reimbursement	10	6	13	15	18	62
Continuing education/training opportunities	5	6	21	18	13	63
Flexible work schedule	3	1	9	30	19	62
Responsive support or assistance with other administrative processes and requirements	7	6	16	21	13	63

Figure 26. Reasons Why QSPs Leave Their Role (n = 63)*

In your opinion and experience, why do QSPs leave their role?

Reason	Number of Agencies
Found another job that pays more	57
Found another job that offered better benefits	37
Found a job with hours that worked better for their family	35
Not able to guarantee the desired number of hours	26
Too physically demanding	22
Not a good fit with the person or people receiving care	21
Supporting people is a difficult job	20
Found another job closer to home	19
No opportunity for promotion	10
Too little time with and/or poor quality from supervisors	10
Training and support was inadequate and/or poor	10
Not recognized for the work they did	8
Could not get along with co-workers	8
Other	12

*Note: Participants were able to select more than one response option for this question.

At the end of the survey, QSP agencies were asked if they had any additional comments. Qualitative analysis of the 29 responses revealed that the most common themes were dissatisfaction with the current referral process (n = 8), dissatisfaction with Therap (n = 4), no comment/NA (n = 4), insufficient pay/benefits (n = 3), enjoy the work (n = 3), need more training (n = 2), struggling to find employees (n = 2), and claims issues (n = 2). Five agencies had other comments that did not fit within any of the themes, and some responses covered more than one theme.

Discussion

Clients Served

Although a common perception may be that QSP clients are primarily elderly, the survey results showed that a larger number of both individual QSPs and QSP agencies reported serving clients under age 65 compared to those who reported serving clients 65 years of age and older. The majority of individual QSPs reported serving one publicly funded HCBS recipient per month and zero private pay or other third party insurance clients per month on average. The majority of QSP agencies reported serving between 0-9 publicly funded HCBS recipients per month and between 0-9 private pay or other third party insurance clients per month on average.

Services Provided

Most commonly, individual QSPs reported providing services for 1-3 years, whereas QSP agencies reported providing services for less than one year. The service most frequently reported as being provided by both individual QSPs and QSP agencies was homemaker service. To make people more aware of their services, QSP agencies most frequently reported that advertising/marketing and referrals would be helpful. On the contrary, individual QSPs most frequently reported that they were not interested in making people more aware of their QSP services.

Compensation and Benefits

When asked to indicate whether or not they offered particular benefits, over half of responding QSP agencies reported offering the following to their employees: paid vacation, the organization's health insurance, the organization's dental insurance, the organization's vision insurance, and the organization's retirement plan. The most common average hourly wage for employees reported by QSP agencies was $18.00 - $19.00. Two agencies reported providing an average hourly wage of $13.00 or less, and two agencies reported providing the highest average wage of $26.00 per hour or more.

Trainings

Less than half of individual QSPs indicated there are skills trainings that could help to improve or expand their services. Among those who indicated skills training would be helpful, the most commonly desired training topic was specific types of diseases and medical conditions, followed by learning how to best provide the care.

QSP agencies were asked what types of training and assistance would help them to better manage their QSP business. The most common response was managing claim status, payments, and denials, followed by both marketing of services and staff management (e.g., recruitment, hiring, training, and supervision).

QSP Agency Capacity

QSP agencies were asked several questions aimed at assessing their current capacity and potential ability to serve more people. The majority of responding QSP agencies indicated they currently had staff capacity to serve more individuals. Additionally, over half of QSP agencies indicated they are adequately staffed to meet demand in their service area. The overwhelming majority of responding agencies indicated they would be willing to take on more clients if they had staffing. Over half of responding agencies indicated their agency has plans to grow or expand their business. Among those agencies who planned to grow or expand, increasing staff was the most common way they planned to do so, followed by increasing their service area (the physical locations served). Agencies provided varying responses for the average length of time a QSP position is open before it is able to be filled. The most common time frame reported by agencies was 1-3 months, followed by 1-3 weeks.

Rural Differential Rate

Individual QSPs were asked a few questions regarding the rural differential rate. More QSPs reported they did not provide care for individuals that qualify for the rural differential rate than those who did. Moreover, slightly greater than one-third of QSPs were unsure if they provide care for individuals that qualify for the rural differential rate. Among QSPs who reported serving individuals that qualify for the rural differential rate, the majority reported that the rural differential rate helps them to serve more people and encourages them to drive to rural areas. Individual QSPs most commonly indicated there was nothing they would change about how the rural differential rate currently works.

General

When asked how influential various factors were in becoming a QSP, individual QSPs most commonly responded that the desire to help others/make a difference in people's lives was extremely influential. Individual QSPs most commonly indicated that a flexible work schedule was extremely influential in staying a QSP. When asked to indicate the top three challenges of working as a QSP, paperwork, billing, and figuring out how to file taxes were the response options most commonly chosen by individual QSPs in that order. The most common response to what individual QSPs enjoy about their work was the relationships with the people they support.

When agencies were asked to rate how influential various factors were in recruiting and retaining QSPs, compensation/pay was most commonly chosen as being extremely influential in both instances. Relatedly, agencies most commonly indicated that the reason QSPs leave their role is due to finding another job that pays more.

Conclusion

Qualified service providers (QSPs) fill an important role in healthcare workforce. They allow clients to remain in their homes and communities while receiving vital services. The results of both the individual QSP survey and the agency QSP survey provide valuable insight into the current state of the QSP workforce in North Dakota as well as the needs of that workforce. These survey results will be used to continue to guide and enhance the services provided by the North Dakota QSP Hub.

References

North Dakota Health and Human Services. (2022). Adults and Aging Qualified Service Providers (QSP). Retrieved from https://www.hhs.nd.gov/human-services/providers/adults-and-aging/qualified-service.

Appendix A

2024 Individual QSP Survey

1. How do you provide services as a Qualified Service Provider?

  ○ As an individual QSP (self-employed)

  ○ Employed by a QSP agency

  ○ Both

2. What type(s) of individual QSP are you? (Check all that apply)

  ☐ Family Home Care

  ☐ Family Personal Care

  ☐ Individual Provider

3. Do you have a close personal relationship with any of the people you provide care for that started before you became their QSP?

  ○ Yes

  ○ No

4. What is your age?

  ○ 18-24 years

  ○ 25-34 years

  ○ 35-44 years

  ○ 45-54 years

  ○ 55-64 years

  ○ 65 years or older

5. What is your highest level of education?

  ○ Some high school

  ○ High school diploma or GED

  ○ Associate's degree or 2-year degree

  ○ Some college

  ○ Bachelor's or 4-year degree

  ○ Post-graduate degree

  ○ Prefer not to answer

6. What is your annual household income?

○ Less than $10,000

○ $10,000 - $19,999

○ $20,000 - $29,999

○ $30,000 - $39,999

○ $40,000 - $49,999

○ $50,000 - $59,999

○ $60,000 - $69,999

○ $70,000 - $79,999

○ $80,000 - $89,999

○ $90,000 - $99,999

○ $100,000 - $149,999

○ $150,000 or more

○ Prefer not to answer

7. Do you have any other jobs aside from working as a QSP?

○ Yes

○ No

8. **If you answered 'Yes' to Question 7,** on average, how many hours per week do you work at your additional job(s)?

○ 0-9 hours

○ 10-19 hours

○ 20-29 hours

○ 30-39 hours

○ 40-49 hours

○ 50-59 hours

○ 60 or more hours

9. Where do you live? Please list the city and state below.

10. Where do you provide QSP services? Please list the city(ies) and state(s) below.

_____

_____

_____

11. How long have you been providing QSP services?

○ Less than 1 year

○ 1-3 years

○ 4-6 years

○ 7-9 years

○ 10-12 years

○ 13-15 years

○ 16 or more years

12. On average, how many publicly funded HCBS recipients do you serve per month as a QSP (i.e., Medicaid waiver, SPED, Ex-SPED, and Medicaid State Plan - Personal Care)?

○ 0 clients

○ 1 client

○ 2-3 clients

○ 4-6 clients

○ 7-9 clients

○ 10-12 clients

○ 13-15 clients

○ 16 or more clients

○ Unknown

13. On average, how many private pay or other third party insurance clients do you serve per month (i.e., not funded by the state or Medicaid)?

○ 0 clients

○ 1 client

○ 2-3 clients

○ 4-6 clients

○ 7-9 clients

○ 10-12 clients

○ 13-15 clients

○ 16 or more clients

○ Unknown

14. What ages of clients do you serve? (Check all that apply)

☐ 18-24 years

☐ 25-34 years

☐ 35-44 years

☐ 45-54 years

☐ 55-64 years

☐ 65 years or older

15. Typically, how many hours do you work per week as a family/individual QSP? Check 'Not applicable' if the category does not apply to you.

○ 0-9 hours

○ 10-19 hours

○ 20-29 hours

○ 30-39 hours

○ 40-49 hours

○ 50-59 hours

○ 60 or more hours

○ 24/7 care

○ Not applicable

16. Typically, how many hours do you work per week for a QSP agency? Check 'Not applicable' if the category does not apply to you.

○ 0-9 hours

○ 10-19 hours

○ 20-29 hours

○ 30-39 hours

○ 40-49 hours

○ 50-59 hours

○ 60 or more hours

○ 24/7 care

○ Not applicable

17. What services do you provide to clients? (Check all that apply)

☐ Adult Day Care (S5101)

☐ Adult Foster Care (S5140)

☐ Chore - Labor (includes snow removal) (S5120)

☐ Companionship Services (S5135- TF)

☐ Environmental Modification (S5165)

☐ Extended Personal Care (S5115)

☐ Extended Personal Care - Nurse (S5115 - TD)

☐ Family Home Care (00001)

☐ Family Personal Care (S5136)

☐ Home Delivered Meals (S5170)

☐ Homemaker Service (S5130)

☐ Installation ERS (S5160)

☐ Non-Medical Transportation - Local and out of town (T2001)

☐ Non-Medical Transportation - Escort (T2001-UC)

☐ Nurse Education Care (S5108)

☐ Personal Care Service - SPED (Daily) (T1020)

☐ Personal Care Service - SPED (15 min) (T1019)

☐ Respite Care (S5150)

☐ Specialized Equipment (T2028)

☐ Supervision (S5135)

☐ Other _____

18. Are there any services that you are enrolled to provide that you do not currently carry out with your client(s)?

○ Yes (please explain why): _____

○ No

○ Don't know/unsure

19. How influential is each of these items in <u>becoming</u> a QSP? Please rate each item.

	Not at all influential	Slightly influential	Somewhat influential	Very influential	Extremely influential
Compensation/pay	○	○	○	○	○
Benefits	○	○	○	○	○
Advancement opportunities	○	○	○	○	○
Payer reimbursement	○	○	○	○	○
Continuing education/training opportunities	○	○	○	○	○
Flexible work schedule	○	○	○	○	○
Applications and paperwork that are easier and simpler to complete	○	○	○	○	○
Assistance with ongoing application support (making error corrections and submitting missing documents)	○	○	○	○	○
Length of time it takes to get started working as a QSP	○	○	○	○	○
Desire to help others/make a difference in people's lives	○	○	○	○	○
Other (please specify)	○	○	○	○	○

20. How influential is each of these items in <u>staying</u> a QSP? Please rate each item.

	Not at all influential	Slightly influential	Somewhat influential	Very influential	Extremely influential
Compensation/pay	○	○	○	○	○
Benefits	○	○	○	○	○
Advancement opportunities	○	○	○	○	○
Payer reimbursement	○	○	○	○	○
Continuing education/training opportunities	○	○	○	○	○
Flexible work schedule	○	○	○	○	○
Streamlined recertification process	○	○	○	○	○
Responsive support or assistance with EVV	○	○	○	○	○
Responsive support or assistance with billing	○	○	○	○	○
Responsive support or assistance with claim status	○	○	○	○	○
Responsive support or assistance with business acumen (e.g., finding clients, taxes, tracking expenses)	○	○	○	○	○
Other (please specify)	○	○	○	○	○

21. Are there skills trainings that could help you improve or expand the services that you provide?

○ Yes

○ No

22. **If you answered 'Yes' to Question 21**, what skills training(s) would be helpful to you and improve or expand your ability to meet the needs of the people you provide services to at this time? (Check all that apply)

☐ Learn how to best provide the care

☐ Client relationships

☐ Training on specific types of diseases and medical conditions (please indicate

☐ which specific ones): _____

☐ Other (please specify): _____

23. What would help make people more aware of your availability of QSP services? (Check all that apply)

- ☐ Advertising/marketing
- ☐ Provider database
- ☐ Social media
- ☐ Referrals
- ☐ QSP navigators
- ☐ Other (please specify): _____
- ☐ I am not interested in making people more aware of my QSP services (please specify why): _____

24. What do you enjoy about being a QSP? (Check all that apply)

- ☐ Flexible work hours
- ☐ Support from supervisor
- ☐ Paid leave (sick, vacation, holidays, etc.)
- ☐ Training for job
- ☐ I like the work I do
- ☐ My relationship with the person or people I support
- ☐ Other (please specify):

25. What are the top 3 challenges of working as a QSP? (Select up to 3 options)

- ☐ Billing
- ☐ Paperwork
- ☐ Physically demanding (i.e., transferring, etc.)
- ☐ Figuring out how to file taxes
- ☐ Inadequate/poor training and support
- ☐ Affording the supplies needed to do the work
- ☐ Access to the number of hours available to work as a QSP
- ☐ Rate of pay for the level of work

☐ Client behavior

☐ Other (please specify): _____

26. What motivated you to enroll as a QSP?

_____

_____

_____

27. Do you provide care for individuals that qualify for the Rural Differential rate?

○ Yes

○ No

○ Don't know/unsure

28. If you answered 'Yes' to Q27, does the Rural Differential rate help you serve more people/encourage you to drive to rural areas?

○ Yes

○ No

○ Don't know/unsure

29. Is there anything about the way the Rural Differential works that you would like to change?

_____

_____

_____

30. Do you have any additional comments?

_____

_____

_____

Appendix B

2024 QSP Agency Survey

1. What is your role within the QSP agency?

_____

_____

2. Over the last year, how many QSPs/direct care employees did you employ in an average month?

- ○ 0-9
- ○ 10-19
- ○ 20-29
- ○ 30-39
- ○ 40-49
- ○ 50-59
- ○ 60 or more

3. What ages of QSPs/direct care employees do you employ? (Check all that apply)

- ☐ 18-24 years
- ☐ 25-34 years
- ☐ 35-44 years
- ☐ 45-54 years
- ☐ 55-64 years
- ☐ 65 years or older

4. What is the average length of time QSPs/direct care employees have worked at your agency?

- ○ Less than one year
- ○ 1-2 years
- ○ 3-4 years
- ○ 5-6 years
- ○ 7-8 years

○ 9-10 years

○ More than 10 years

5. What is the average hourly wage of QSPs/direct care employees employed by your agency?

○ $13 per hour or less

○ $14 - $15 per hour

○ $16 - $17 per hour

○ $18 - $19 per hour

○ $20 - $21 per hour

○ $22 - $23 per hour

○ $24 - $25 per hour

○ $26 per hour or more

6. How long has your agency been providing QSP services?

○ Less than 1 year

○ 1-3 years

○ 4-6 years

○ 7-9 years

○ 10-12 years

○ 13-15 years

○ 16 or more years

7. What ages of clients do you serve? (Check all that apply)

☐ 18-24 years

☐ 25-34 years

☐ 35-44 years

☐ 45-54 years

☐ 55-64 years

☐ 65 years or older

8. On average, how many publicly funded HCBS recipients do you serve per month as a QSP agency (i.e., Medicaid waiver, SPED, Ex-SPED, and Medicaid State Plan - Personal Care)?

- ○ 0-9 clients
- ○ 10-19 clients
- ○ 20-29 clients
- ○ 30-39 clients
- ○ 40-49 clients
- ○ 50-59 clients
- ○ 60-69 clients
- ○ 70-79 clients
- ○ 80-89 clients
- ○ 90-99 clients
- ○ 100 or more clients

9. On average, how many private pay or other third party insurance clients do you serve per month (i.e., not funded by the state or Medicaid)?

- ○ 0-9 clients
- ○ 10-19 clients
- ○ 20-29 clients
- ○ 30-39 clients
- ○ 40-49 clients
- ○ 50-59 clients
- ○ 60-69 clients
- ○ 70-79 clients
- ○ 80-89 clients
- ○ 90-99 clients
- ○ 100 or more clients

10. What services do you provide to clients? (Check all that apply)

- ☐ Adult Day Care (S5101)
- ☐ Adult Residential Care (D9410)

- ☐ Chore - Labor (includes snow removal) (S5120)
- ☐ CHR Assessment (T1023)
- ☐ Community Supports Service (S5126)
- ☐ Companionship Services (S5135- TF)
- ☐ Emergency Response System (ERS) (S5161)
- ☐ Environmental Modification (S5165)
- ☐ Extended Personal Care (S5115)
- ☐ Extended Personal Care - Nurse (S5115- TD)
- ☐ Home Delivered Meals (S5170)
- ☐ Homemaker Service (S5130)
- ☐ Installation ERS (S5160)
- ☐ Non-Medical Transportation - Carrier bus, taxi (T2004)
- ☐ Non-Medical Transportation - Local and out of town (T2001)
- ☐ Non-Medical Transportation - Escort (T2001-UC)
- ☐ Nurse Education Care (S5108)
- ☐ One Time Transition Costs (T5999)
- ☐ Personal Care Service - SPED (15 min) (T1019)
- ☐ Personal Care - Assisted Living - SPED (T2031)
- ☐ Residential Habilitation (T2016)
- ☐ Respite Care (S5150)
- ☐ Respite Care - Institutional (S5151)
- ☐ Specialized Equipment (T2028)
- ☐ Supervision (S5135)
- ☐ Supported Employment (T2019)
- ☐ Transition Coordination (T2038)
- ☐ Transitional Living (T2021)
- ☐ Other _____

11. Are there any services that you are enrolled to provide that you do not currently carry out with your client(s)?

○ Yes (please explain why): _____

○ No

○ Don't know/unsure

12. Does your agency offer any of the following benefits? Please respond to each item in the matrix below.

	Yes	No
Paid Time Off (PTO), not differentiating between sick and vacation time	○	○
Paid sick leave	○	○
Paid vacation	○	○
Your organization's health insurance	○	○
Your organization's dental insurance	○	○
Your organization's vision insurance	○	○
Your organization's life insurance	○	○
Your organization's retirement plan	○	○
Short term disability	○	○
Long term disability	○	○

13. Do you have current staff capacity to serve more individuals?

○ Yes

○ No

○ Don't know/unsure

14. Do you feel you are adequately staffed to meet demand in your service area?

○ Yes

○ No

○ Don't know/unsure

15. Would you be willing to take on more clients if you had staffing?

○ Yes

○ No

○ Don't know/unsure

16. Does your agency have plans to grow or expand your business?

○ Yes

○ No

○ Don't know/unsure

17. If you answered 'Yes' to Q16, how does your agency plan to grow/expand? (Check all that apply)

☐ Increase staff

☐ Increase service area (physical locations served)

☐ Increase qualified service areas (actual types of services provided as an agency)

☐ Other (please explain): _____

18. On average, how long is a QSP/direct care employee position open before it is able to be filled?

_____

19. How influential is each of these items in recruiting QSPs/direct care employees? Please rate each item.

	Not at all influential	Slightly influential	Somewhat influential	Very influential	Extremely influential
Compensation/pay	○	○	○	○	○
Benefits	○	○	○	○	○
Advancement opportunities	○	○	○	○	○
Payer reimbursement	○	○	○	○	○
Continuing education/training opportunities	○	○	○	○	○
Flexible work schedule	○	○	○	○	○
Responsive support or assistance with other administrative processes and requirements	○	○	○	○	○
Applications and paperwork that are easier and simpler to complete	○	○	○	○	○
Assistance with onboarding new agency employees	○	○	○	○	○
Other (please specify):	○	○	○	○	○

20. How influential is each of these items in <u>retaining</u> QSPs/direct care employees? Please rate each item.

	Not at all influential	Slightly influential	Somewhat influential	Very influential	Extremely influential
Compensation/pay	○	○	○	○	○
Benefits	○	○	○	○	○
Advancement opportunities	○	○	○	○	○
Payer reimbursement	○	○	○	○	○
Continuing education/training opportunities	○	○	○	○	○
Flexible work schedule	○	○	○	○	○
Responsive support or assistance with other administrative processes and requirements	○	○	○	○	○
Other (please specify):	○	○	○	○	○

21. In your opinion and experience, why do QSPs/direct care employees leave their role? (Check all that apply)

☐ Found another job closer to home

☐ Found another job that pays more

☐ Found another job that offered better benefits

☐ Found a job with hours that worked better for their family

☐ Not recognized for the work they did

☐ No opportunity for promotion

☐ Could not get along with co-workers

☐ Had too little time with and/or poor quality from supervisors

☐ Training and support was inadequate and/or poor

☐ Supporting people is a difficult job

☐ Too physically demanding

☐ Not able to guarantee the desired number of hours the QSP is seeking

☐ Not a good fit with the person or people receiving care

☐ Other (please specify): _____

22. What types of training and assistance would help your agency to better manage your QSP business? Examples: Assist with marketing, hiring, training, policy development, record keeping, etc. (Check all that apply)

☐ Utilization of the Electronic Visit Verification (EVV) system and Therap systems

☐ Education about all HCBS services and authorization requirements

☐ Staff management including recruitment, hiring, training, and supervision

☐ Record keeping

☐ Taxes

☐ Marketing of services

☐ Policy development

☐ Quality program standards

☐ Insurance needs

☐ Technology needs

☐ Renewal paperwork for your QSP agency

☐ Managing claim status, payments, and denials

☐ Other (please specify): _____

23. What would help make people more aware of your agency's availability of QSP services? (Check all that apply)

☐ Advertising/marketing

☐ Provider database

☐ Social media

☐ Referrals

☐ QSP navigators

☐ Other (please specify): _____

☐ Not interested in making people more aware of our QSP services (please specify why):

_____

24. Do you have any additional comments?

_____

_____

_____