



The 2025 Healthcare Workforce Management Report

A new day: Rebuilding healthcare from within





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Introduction

The healthcare workforce crisis isn't anything new. But in 2025, it's personal.

For healthcare providers delivering care across facility-, home-, and community-based settings, the staffing strain has moved beyond spreadsheets and scheduling headaches—and is showing up in very real ways. From missed visits or underutilized occupancy to burned-out employees, attrition, and impossibly difficult choices about how to prioritize care.

And yet, this moment presents a unique opportunity. More organizations are realizing that the future of healthcare will depend on how well we take care of the people who power it.

Solving the workforce challenge doesn't start with more recruitment and outreach, but it starts from within: with stronger systems, clearer communication, payroll transparency, and work-life balance that supports people, not just processes.

This report takes a closer look at the state of healthcare workforce management in 2025, starting with the macro trends reshaping our industry and an analysis of the perspective-shifting findings from our independent research. In conclusion, it shifts focus to the innovative ways in which leading organizations are restoring trust and fostering resilient teams to reimagine care delivery from the inside out.





About our research

We surveyed nearly 650 healthcare services professionals—including 505 administrators and 141 care staff—across organizations of all sizes, from under 200 employees to over 5,000. The methodology included a combination of qualitative interviews along with quantitative surveys with representatives from facility, home, and community-based care segments. Our primary research explores the forces driving underlying workforce challenges—and helps illuminate the thoughtful changes organizations need to make today—to emerge stronger tomorrow. Only then will they be better positioned to address the rising and complex care needs of years to come.

Some of what we discovered surprised us—and it may surprise you, too. The persistent challenges facing providers certainly feel well-understood. However, we unearthed hidden gaps in underlying dynamics between care staff and administrators, pointing to untapped opportunities to improve the workforce experience from the inside-out.

We explore these gaps and their implications and offer actionable strategies for closing them over the following chapters:

1. The big picture – Industry trends & challenges
2. What the data tells us – Insights from our research
3. A path forward – Tools & actionable strategies

The big picture

Industry trends & challenges



Setting the stage:

7 macro trends in healthcare

Senior care is being reshaped by powerful forces—some new, some long-standing, and all interconnected. Together, these seven trends help clarify the challenges providers across facility-, home-, and community-based care settings are navigating—and the opportunities they’re working to realize.

Organizations are being forced to reckon with these mounting pressures, navigate growing complexity, and rethink their long-term strategies. While much is murky, the imperative is clear: adapt, or fail.

Truly, administrators have a lot to digest, and consider. Understanding these trends—and their implications—will be critical for providers looking to not only keep up, but embrace the future with confidence.



The workforce shortage is mounting.

Staffing is not a new challenge for senior care—but it has grown more acute. In recent years, the labor challenge has intensified, driven by a smaller working-age population, a shrinking pipeline of new caregivers, and rising competition from other industries. High rates of care staff turnover, increasing wage pressure, and recruitment challenges plague the industry.

1

Care at home is a new imperative.

Demand for care at home isn’t slowing down. Consumer preference, payer support, and technology innovation are fueling the shift. Providers across the landscape are rethinking their roles and service offerings to meet growing demand, while navigating new operational complexities delivering high-quality care outside of traditional settings.

3

Technology fragmentation is costly.

Many providers rely on a patchwork of standalone systems. From EHRs and AMS platforms to CRM, patient portals, payroll, and HR solutions, organizations are left with disjointed information silos that hinder workflows, force staff to manually transfer data increasing likelihood of error, and complicate decision-making.

5

Consumer-driven care is shifting focus.

Patients, residents, and their families are taking a more active role in healthcare decisions—expecting greater transparency, flexibility, and quality of care. Providers must prioritize patient satisfaction and family engagement to remain competitive in an environment where reputation and responsiveness play a critical role in driving referrals and retention.

7

2

Margins are shrinking.

At the same time, providers are feeling financial strain from both sides: rising operational costs and tightening reimbursement models. From inflation and wage hikes to increased regulatory demands, expenses are mounting—all while payers and policymakers push to control spending.

4

Medicare Advantage is gaining dominance.

More than half of all Medicare beneficiaries are now enrolled in Medicare Advantage (MA) – a shift that is changing everything from care coordination and referral patterns to reimbursement models and more. Home-, facility-, and community-based providers are adopting to meet new priorities around cost control, quality measures, and value-based care.

6

A flurry of M&A is transforming our industry.

To remain viable in an increasingly competitive environment, many smaller, independent providers are being pushed into mergers, acquisitions, and consolidations. This wave of market reconsolidation is reshaping the industry, as larger organizations and private equity firms continue to absorb the smaller entities, creating bigger, more centralized networks.

Diving in:

5 underlying workforce management issues

Facing those seven enormous headwinds, providers are being forced to consider implementing sweeping, strategic change in order to survive in a changing landscape.

The answer may be simpler than it seems. Underlying every one of those seven macro trends is a single common thread: the workforce. The ability to efficiently manage payroll, HR, compliance, and scheduling is no longer just an administrative concern—it's an essential organizational imperative.

Despite efforts to modernize, many organizations struggle with outdated systems, disconnected workflows, and regulatory burdens that negatively impact their staff, limit retention, and contribute to burnout. And, the workforce itself is changing. Millennials and Gen Z care staff have very different expectations than do Boomers, who are leaving the workforce in droves. To attract Gen Z workers, healthcare must modernize its approach by offering better pay, transparent career paths, and mobile-friendly technology.

These workforce challenges are highly disruptive: at best they generate inefficiencies; at worst, they create compliance risk. The only way providers can deliver consistently high-quality care while sustaining their organizations' long-term financial health is with a robust, reliable, and long-tenured workforce. As industry demand skyrockets, leaders must find innovative ways to optimize workforce management and reduce administrative strain.





Issue 1: Complex payroll & wage structures

Healthcare payroll is much more nuanced—and complicated—than most other industries.

While most payroll systems are designed for employees with consistent pay schedules, healthcare providers must oversee a variety of pay rates and structures—including things like shift differentials, blended-rate overtime, on-call pay, and per-visit pay—that can vary based on staff roles, locations and care settings.

As a result, payroll errors are not uncommon. 81% of admins report experiencing at least one error per month; and, half of those individuals (40%) report

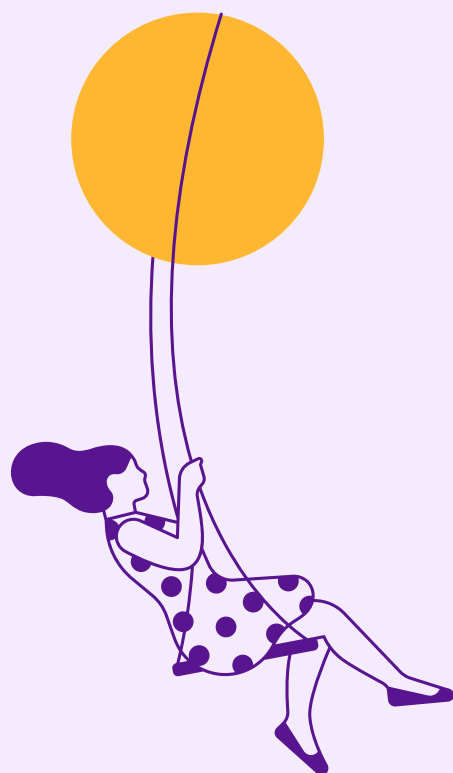
at least three. These errors are costly for care organizations. Payroll inaccuracies don't only create administrative and financial headaches; they directly impact staff satisfaction and retention.

The cost of complexity

Nearly one-quarter (24%) of all care staff are not confident their pay is calculated accurately—and one-fifth (20%) would lose significant trust in their employer after even just one error. 81% of admins report one such error monthly.

In an industry already struggling with workforce shortages, delayed or incorrect paychecks can erode trust, leading employees to seek opportunities elsewhere. We found that 20% of care staff would lose significant trust in their employer after only a single payroll error within a 12-month period with that number jumping up to 80% of care staff after three errors. A payroll error might seem like a minor inconvenience, but for healthcare workers who rely on timely and accurate wages, it can be a breaking point.

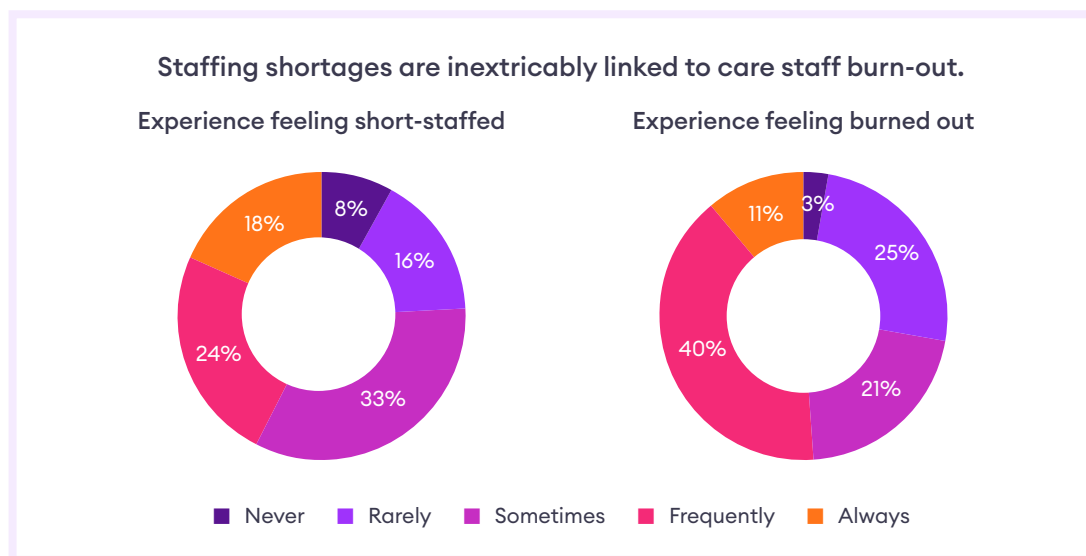
Payroll accuracy is essential to building—and retaining—employee trust.		
# errors	Staff: How many errors would cause you to lose confidence?	Admin: How many payroll errors do you make per month?
1 - 2	47%	41%
3 - 5	50%	30%
6+	3%	10%



Issue 2: Workforce shortages & high turnover

Staffing shortages continue to plague the industry. Nursing facilities report annual turnover rates as high as 128%, while home care providers are experiencing turnover over around 79%.^{1,2}

Unsurprisingly, our research found that 74% of organizations are actively experiencing a staffing shortage—and another 20% anticipate a shortage soon. In an industry built on relationships and continuity of care, this level of retention isn't just an administrative challenge, it's a direct threat to patient outcomes and operational stability.



While experienced, long-tenured staff are essential to every care organization, retention is an ongoing struggle. For home-based care organizations, less than one-third (30%) of their staff were found to have over 6 years of experience with their current organization.

Care staff face difficult workloads, odd or long hours, and, in many cases, a lack of financial security. These factors create a revolving door of employees leaving for roles with better pay, less stress, and greater flexibility. Without sustainable staffing solutions, providers are left scrambling to fill shifts—which means further straining remaining employees or outsourcing to costly staffing agencies.



Issue 3: Regulatory complexity & compliance risks

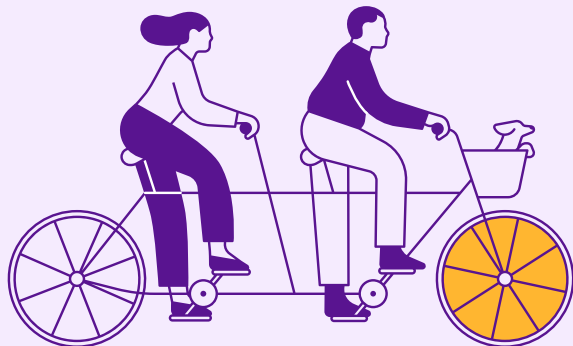
Healthcare is one of the most heavily regulated industries—not only do compliance requirements affect every aspect of payroll and HR, but they are constantly changing.

Our survey uncovered a sense of regulatory flux fatigue. In one interview, an administrator said: *“Tomorrow, the government can [suddenly announce] you need an extra license—and [we’ll] probably have to pay for it. You don’t have that in other industries.”*

Indeed, to avoid costly fines, penalties, or worse—loss of reimbursement or even license suspension—home-, facility-, and community-based care providers must navigate an intricate web of federal, state, and local regulations. While most admins rely on their payroll provider, professional organizations, or social media for regulatory updates—most generalized payroll and HR systems are not designed to accommodate our industry’s specialized compliance requirements. As a result, healthcare providers rely on manual tracking or disconnected workarounds, increasing the risk of non-compliance.

While the financial costs of non-compliance are one thing to calculate, its corrosive effects on reputation and workforce are another thing entirely. While impossible to calculate, its workforce costs are equally dear. Compliance breakdowns, like chaotic operations, inaccurate pay rates, and improper training or onboarding, are frustrating to staff, contribute to burnout, and accelerate attrition.

Post-acute care providers have to comply with over 600 mandatory regulatory requirements. To comply, health systems, hospitals, and post-acute care organizations spend nearly \$39 billion a year on the administrative aspects of regulatory compliance. Yet, only 9% of administrators surveyed report conducting regular external research to support their compliance efforts.³



Issue 4: Disconnected & manual processes

While technology is central to our lives in so many ways, many health service organizations still rely on outdated, disconnected systems to handle payroll, HR, and compliance.

Our survey revealed that most primary administrative responsibilities are being completed manually—at a great expense. While most respondents (99%) report using a point solution to cover at least a single function of payroll and HR, usage is all over the map. No single use case had an adoption rate over 42%.

Without a comprehensive suite of solutions to cover payroll, scheduling, and HR functions, administrators are relying on spreadsheets, paper-based processes, and siloed software. While manual processes may seem relatively harmless, if not outdated, these burdensome efforts create costly administrative workloads, contribute to more frequent payroll errors, and expose organizations to increased risk of non-compliance.

Disconnected processes don't just create operational headaches—they have real financial consequences. Payroll errors, compliance penalties, and inefficient scheduling all contribute to higher labor costs and administrative overhead, making it harder for organizations to operate efficiently.

Time is money, and the right technology gives time back.

Automated payroll solutions help save administrators precious time. Our data reflects a **25% reduction** in payroll time for admins at 1000+ FTE organizations who use a vendor-provider payroll solution. For clients using a payroll solution that's tailored for healthcare, the time savings can be monumental. In a recent case study for a home health & hospice organization, admins saw an **85% reduction** in time required to complete monthly payroll.⁴



Issue 5: The rise of contract & agency labor

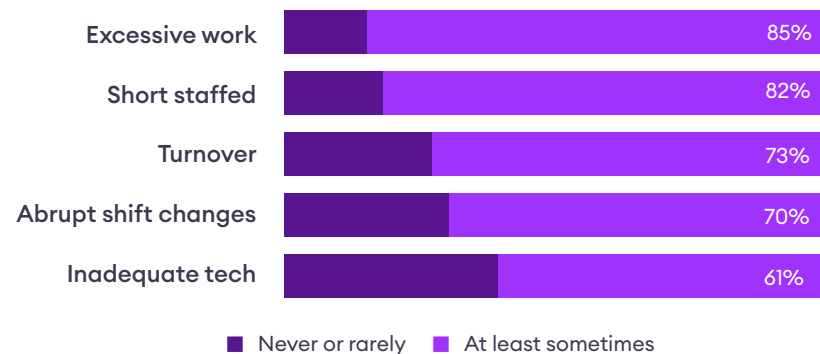
As attrition mounts and open shifts abound, organizations often find themselves becoming more and more reliant upon costly staffing agencies.

On one hand, by appealing to care staff with better flexibility, higher pay, and more transparency, the gig economy is further perpetuating the staffing shortage. Many nurses and caregivers are opting for per-diem shifts, gig platforms, or agency roles that allow them to pick up work on their own terms—rather than permanent full-time positions, a shift that reflects broader workforce trends across industries.

For organizations, this over-reliance on agency labor erodes their bottom line with costly emergency coverage, and limits their ability to support their own care teams. To help weather industry headwinds, organizations will need to reevaluate their own workforce benefits to present more competitively within the market and invest in their own resilient and reliable workforces.

Too much work, not enough hands.

How often do care staff encounter the following challenges at work?



What the data tells us

Insights from our research



The retention gap:

Workforce management challenges

Workforce management challenges may seem like merely part of the puzzle—but in reality, they are existential challenges threatening care organizations' long-term stability.

At the center of it all is the staffing shortage crisis. Despite rising demand and patient need, providers are unable to meet the moment—they are chronically understaffed. Organizations must invest in employee satisfaction and retention strategies in order to maintain the workforces they currently have.

But, our survey unearthed a critical disconnect that hinders retention: a gap between the way administrators and care staff perceive payroll. For staff, higher pay is the biggest employment motivator—by a mile. 75% of care staff would be motivated by more pay per hour. Yet, only 37% of administrators believe more pay would earn loyalty and retention. As long as administrators hold this misconception, efficacy of long-term retention strategies will be limited.

Compounding this issue, payroll accuracy continues to erode trust between employee and employer, furthering job dissatisfaction and fueling attrition. These perceptual gaps hinder organizations' efforts to retain staff. Only by better understanding their care staffs' core concerns can providers begin to foster rewarding, satisfying workplaces that earn long-term loyalty and retention.



The pay gap: The unrealized importance of pay in retention

For many care staff, their compensation is not just an important factor—it is the primary driver. An overwhelming majority of our respondents identify higher pay as the top motivating factor for retention. That's not surprising, as nearly 70% report living paycheck to paycheck, which motivates them to seek better earning opportunities.

The importance of pay is only made clearer when you consider that among care staff:

- 82% are their household's primary income earner.
- 79% have an annual household income of less than \$100,000.
- 68% would switch organizations for more pay.
- 67% would leave the industry for more pay.

However, our survey reveals a surprising gap—one that likely exacerbates the industry's acute retention challenges: despite the clear role pay has for care staff, administrators do not currently recognize its outsized impact on retention.

Money talks: HR leader on the importance of pay

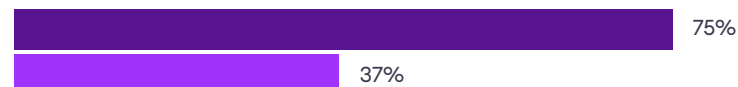
"The first question they ask me is: 'When can we start making money?'"

– HR Manager, Home Care

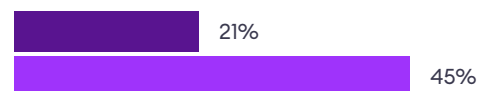
A critical disconnect: Care staff and administrators do not see eye-to-eye on retention.

What is the #1 motivating factor for care staff retention?

Higher pay



Professional development



■ Care staff ■ Administrator

Perhaps because of this disparity, and business pressures in general, our research showed that only 19% of administrators are currently increasing pay, with another 36% saying they are “very likely” to do so. While this shows some acknowledgment of the problem, it also suggests that a significant portion of administrators either cannot or do not believe that increasing pay will help solve the staffing shortage.

The payroll accuracy gap: Impact on trust & retention

Wages are central to the employer-employee relationship. Even minor payroll errors can irreparably erode trust and confidence. Despite this fact, our research reveals a troubling reality: neither administrators nor care staff have complete confidence in payroll accuracy.

“Every two weeks, I approve payroll. Most times I’m finding 8-10 errors. It’s a very manual process, provider by provider, with a calculator.”

– Administrator, Post-Acute Facility

While 80% of administrators report feeling very or extremely confident that payroll is calculated correctly, they are more error-prone than their optimism belies—and more forgiving of themselves than their staff are. While 80% of care staff would lose trust in their employer after three errors, 10% of admins think it would take 6 or more errors per year for an employee to lose trust.

Bad math: How many errors are too many errors?

While care staff demonstrate some leniency around errors, administrators overestimate their tolerance. Admins estimate it would take 3.5 payroll errors before they lost significant trust, but—care staff reach that limit at an average of 2.7 mistakes. In reality, this needn’t be a retention factor at all. Payroll errors can be eliminated entirely with the right technology.

This perceptual gap has an impact. Nearly 1 in 4 care staff do not believe their pay is correct. And, their suspicions are not unfounded—as we shared earlier, 80% of administrators make at least one payroll error per month.

In payroll and in life, trust is easy to lose.

80% of care staff would lose trust in their employer after three errors—and 40% of employers make at least three payroll errors per month.

There are two key drivers behind the payroll accuracy gap:

1. Manual calculations increase the risk of errors.
2. Without transparent and itemized breakdowns, care staff have trouble verifying and understanding their earnings.

Trust in payroll is trust in the organization itself. When staff question whether their paycheck is correct, it can quickly lead to frustration, disengagement, and ultimately, attrition. Addressing payroll accuracy isn’t just about numbers—it’s about reinforcing reliability, strengthening employer-employee relationships, and ensuring that staff feel valued and secure in their earnings.

Payroll errors put administrators on notice: More than half of care staff (51%) would consider looking for another job if they experienced frequent errors.

Other factors impacting retention

In addition to pay and payroll accuracy, there are myriad factors limiting retention.

Burnout is a significant issue among care staff. An overwhelming majority (72%) experience burnout at least once per month. One in ten employees experience it persistently, reporting feeling burned out daily.

Staffing shortages and high turnover were the most frequently cited contributing factors, as they both lead to excessive workloads and increased strain. Burnout is only further intensified by the reality of their role: it is challenging work to manage clients, residents, and patients.

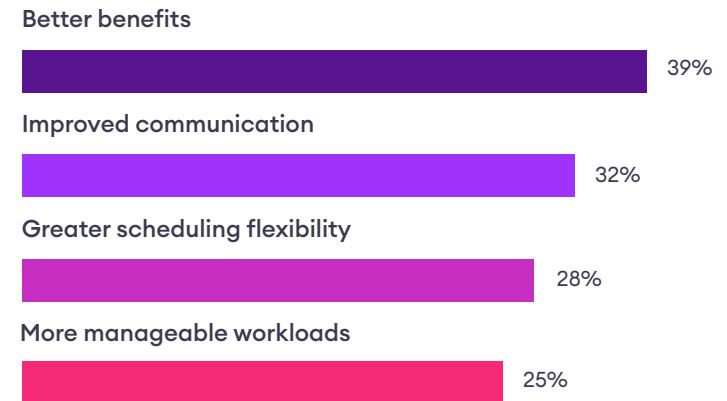
Beyond burnout, other top issues impacting care staff experience and retention include:

- Inefficient workflows that increase time spent on non-clinical tasks.
- Lack of autonomy, especially over scheduling and decision-making.
- Organizational issues, such as poor communication and lack of support.
- Financial stress, including around payroll accuracy and pay rates, further perpetuates burnout.

All of these issues share a common thread—care staff feel burdened by administrative work that takes time away from delivering care. Their passion lies in caring for others. Impersonal, manual tasks impede their focus, which can cause frustration and mounting job dissatisfaction. To improve retention, organizations must consider strategies that help rebuild morale and restore their care teams' joy in care.

Staff spotlight: What incentives are most motivating to you?

Turns out, salary is not the only key to better staff satisfaction and retention. Better employee benefits, scheduling flexibility, and workload improvements are key.



Unlike pay, these incentives give employers the opportunity to address key pain points in a cost-effective way. Addressing these needs can help organically strengthen retention, creating a more sustainable workforce.



Staffing challenges for administrators

Administrators are coordinating a massive juggling act—balancing recruitment, scheduling, retention, and employee concerns—all while handling a wide range of other responsibilities. The staffing shortage intensifies these challenges, making an already demanding job more difficult.

In addition to these challenges, administrators must also navigate:

- The complexities of managing diverse roles, shift-based work, compliance requirements, pay calculations, and credentialing processes.
- The pressure of managing geographical disparities, including managing staff across multiple locations, remaining compliant across varied state regulatory requirements, and struggling to attract and retain healthcare professionals in rural areas.

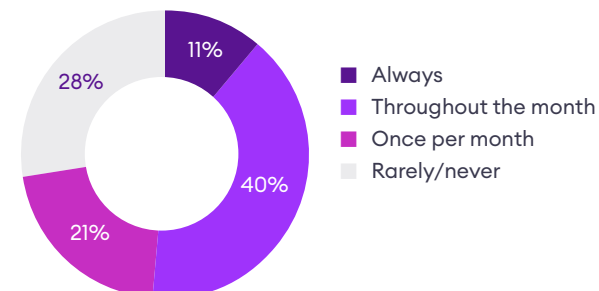
Staffing isn't just another task on an administrator's to-do list—it's a serious challenge with high stakes for their organization. Without enough staff, care quality suffers, workloads increase, and retention declines, creating a vicious feedback cycle that is difficult to break. Breaking the cycle is challenging, but necessary, to ensure organizational stability—and the well-being of those they care for.

Our research reveals workforce management is a heavy burden on administrators:

- 44% struggle to recruit care staff.
- 43% find managing staff schedules difficult.
- 43% report difficulty handling employee grievances.
- 42% of admins struggle with managing care staff performance.
- Employee retention (38%) and recruitment (36%) rank among their top pain points.

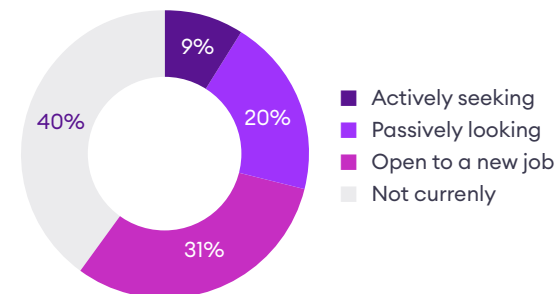
Burned out?

Three-quarters of care staff experience burnout.



Job hunting?

Only 37% of care staff are satisfied in their role today.



The operational gap:

Compliance and payroll challenges

Technology is not just a nice-to-have, it's a necessary tool to ensure organizational success—especially when considering compliance and payroll.

In an industry as heavily regulated as healthcare, staying compliant isn't just about avoiding penalties—it's about maintaining trust, ensuring operational stability, and protecting the well-being of both employees and patients. Yet, many healthcare organizations are navigating this complexity with outdated systems, manual processes, and a false sense of security.

While administrators express confidence in their compliance efforts, our research suggests that gaps remain, especially as today's regulatory changes outpace their ability to keep up manually.

At the same time, the technology designed to ease this burden is underutilized, leaving many organizations struggling with inefficiencies, payroll errors, and unnecessary administrative strain. By bridging these gaps—both in compliance confidence and in technology adoption—healthcare providers can reduce risk, improve efficiency, and create a better experience for their workforce.



The compliance confidence gap: Navigating regulatory complexity

Despite the overwhelming complexity of healthcare regulations, most administrators express confidence in their compliance efforts. In our survey, 77% of respondents report feeling assured in their ability to meet federal, state, and local payroll regulations.

However, when we dug deeper in interviews, a different picture emerged—one of constant regulatory changes, manual tracking, and growing administrative burden. As one HR leader put it: “Regulatory changes feel constant and overwhelming.”

Healthcare organizations must comply with more than 600 discrete regulatory requirements, spanning Conditions of Participation, Privacy and Security Rules, and Quality Reporting. Yet, only 9% of administrators conduct external research to stay up to date—a risky oversight in an environment where requirements shift rapidly. The

Compliance complexity, by the numbers⁵:

- **600+** | The growing number of discrete regulatory requirements healthcare organizations must comply with.
- **9%** | The number of administrators who leverage external resources to stay up-to-date on regulatory updates.
- **\$39B** | The collective cost of administrative compliance for healthcare organizations, each year.
- **3X** | The amount that fines increased for nursing homes between 2020 and 2022, alone.
- **\$560M** | The amount that these nursing homes paid for 36,000 violations across those 3 years.

“I really have to be in charge of reminding folks that their license is about to expire. I have every single clinician and every single therapist on spreadsheet after spreadsheet. It’s kind of an antiquated system.”

- HR Administrator, Hospice

financial stakes are high: healthcare providers collectively spend nearly \$39 billion annually on administrative compliance, and in the nursing home sector alone, non-compliance fines have skyrocketed. Between 2020 and 2022, these fines quadrupled, with 36,370 violations resulting in a staggering \$560 million in penalties nationwide.

Other heavily regulated industries, such as financial services, have embraced automation to reduce compliance risks and administrative strain. Yet, many healthcare providers continue to rely on outdated, manual processes that not only increase the likelihood of errors but also divert valuable resources away from patient care. Without proactive compliance strategies, organizations face mounting financial penalties, operational inefficiencies, and reputational damage—challenges that could be mitigated with the right technology.

The limitations of solutions not tailored to the industry

Despite advancements in technology, healthcare organizations still struggle with inefficiencies that create significant challenges for admins and hurt employee trust. While payroll and HR software can improve processes, generalized solutions often fall short in addressing the unique complexities of healthcare workforce management.

- **Payroll Processing Efficiency:** Our data shows that organizations using vendor-provided payroll solutions spend an average of 13.5 hours processing payroll per pay period, compared to over 18 hours for those relying on manual processes—a 25% efficiency gain. Of those using a vendor-provided general market solution, many are

still manually calculating elements like retroactive pay and shift differentials, which adds time and increases the likelihood of errors.

- **Error Management and Employee Trust:** Payroll errors have a direct impact on employee confidence. Our research found that 80% of care staff would lose significant trust in their employer after experiencing just three payroll errors in a year. Yet, 10% of administrators believe it would take six or more errors to impact trust—a clear disconnect between leadership perceptions and frontline reality.
- **Hidden Costs of Disconnected Systems:** Nearly all healthcare organizations use at least one software tool for payroll and HR functions, yet most rely on general-purpose solutions that lack capabilities designed for healthcare. These tools often operate in silos, forcing administrators to manually transfer data between systems—an inefficient process that increases errors, complicates compliance, and wastes valuable time. Without seamless integration and automated data sharing, organizations struggle with accuracy, administrative burden, and operational gaps that impact both staff experience and overall efficiency.

Missed opportunities: Admins cite workforce management headaches, yet their tech stacks leave room for improvement.

Our respondents rely on generalized tools, which are not designed to address nuanced industry challenges, like shift differentials, scheduling flexibility, and credential tracking.

Nearly every organization surveyed (99%) leverages some form of digital administrative tool—yet only 29% report using a vendor-provided solution to help onboard new hires, only 25% leverage tools to help manage payroll, and only 22% leverage technology to ensure compliance.

Healthcare’s workforce structure adds another layer of complexity. Unique factors like shift differentials, credential tracking, and multi-location scheduling require precise management, yet many administrators find themselves compensating for system shortcomings with time-consuming workarounds. These inefficiencies don’t just impact payroll teams—they create downstream effects on care staff, who depend on accurate and timely compensation.

Ultimately, the reliance on disjointed systems makes it harder for healthcare organizations to operate efficiently and maintain compliance. Addressing these challenges requires not just improved processes but also a shift in how organizations approach workforce management—ensuring that administrative strategies align with the realities of healthcare’s demanding environment.



Adoption of payroll & HR technology in healthcare

Over the years, the healthcare industry has become increasingly complex, with payroll, HR, and compliance requirements that are constantly changing and unique to this industry. These specialized regulations, which range from dealing with Medicaid and Medicare rules to tracking licensing and credential renewals, create challenges for administrators that general, or off-the-shelf solutions aren't designed to address.

Despite the fact that there are dedicated technology solutions now available, key findings from our study highlight that adoption remains low.

In our research, just 12% report utilizing a system designed specifically for healthcare—however, upon closer inspection, the majority of those respondents believe they leverage industry-specific tools, when in reality, they rely on general-purpose payroll systems. These non-tailored solutions fail to address the complexities unique to healthcare, forcing them to rely on manual workarounds.



In our analysis of technology adoption, two important points emerge:

1 Healthcare organizations have been expecting far too little from their technology solutions. They rely on off-the-shelf tools and manual workarounds, but by using solutions that don't address the unique challenges healthcare organizations face, many admins are left without effective solutions to their most complex problems.

Healthcare regulations are complex and ever-changing. Without a true tailored solution, it can be difficult for payroll and HR vendors to keep up with the needs of providers. Only solutions built with healthcare in mind—and which constantly innovate—can keep up with the industry's ever-evolving needs.

2 Organizations are not leveraging the latest technology – and are often unaware that there are solutions that automatically solve their problems and reduce the risk of errors. If admins believe they are looking at industry-specific solutions that still don't solve the challenges they are facing, they may not know that they were looking in the wrong place and prematurely stop their search.

This lack of awareness means that they are missing critical opportunities to improve the care staff experience, to more easily manage and maintain compliance, and to streamline their operations saving them time and money.

In contrast, the financial sector has widely adopted industry-specific workforce solutions that integrate compliance tracking, reducing administrative burden—which offers a great example of an industry putting technology to work for them.

A path forward
Tools & actionable strategies



Taking action:

4 steps toward a new day for workforce management

Care staff are the backbone—and beating heart—of any healthcare organization. Day in and day out, these individuals are driven by a commitment to their profession and those they care for.

While changing market forces complicate operations and decisions, at the end of the day, a harmonious workforce is the one constant you can rely on. Ensuring these teams have job satisfaction, a sense of autonomy, and a connection to both their patients and your organization is essential.

Yet, as our report illustrates time and again, hidden perspective disconnects persist between those providing care—and those managing them. Administrators and care staff often see the industry's challenges through different lenses, leading to misunderstandings that impact job satisfaction, retention, and overall workplace morale.

Bridging this gap isn't about choosing one perspective over the other—it's about creating an environment where both care staff and administrators have the tools, support, and alignment needed to succeed. By improving communication, investing in workforce management solutions, and ensuring pay and career growth expectations are met, organizations can foster a workplace where care staff feel valued and administrators can more effectively lead.

In the section that follows, we outline four steps that help organizations rebuild trust and reinvigorate their teams to help restore some of the lost joy in giving care. Together, this approach is meant to help healthcare organizations reconceptualize their workforce management strategies within a people-first context.



Step 1: Invest in career growth

“I absolutely love what I do.”

– Registered Nurse, Urgent Care Facility

Despite alarming rates of attrition, care staff remain dedicated to their profession: 62% of our respondents affirm healthcare is their long-term career. Yet—administrators significantly underestimate their commitment—only 29% believe that the average care staff member views the industry with long-term intent.

While on paper this disconnect may seem superficial, it hits right at the core of job satisfaction. As most care staff see healthcare as their long-term career, their current job dissatisfaction suggests the issue is not the work itself—but how they are being managed. Vital care staff leave due to avoidable frustrations: burnout, scheduling, stagnant wages, lack of support, and limited career growth opportunities.

Underappreciated employees look for the exit.

- Only 55% of care staff respondents feel appreciated in their role, and only 37% feel satisfied in their current position.
- 31% are open to other job opportunities, 20% are passively looking, and 9% are already preparing to leave.

Bridge the gap → A shift in administrative perspective around their teams' career health and growth could do wonders for morale, engagement, and long-term retention.

The good news: these challenges are addressable. Better workforce management processes can help alleviate core frustrations. Look for innovative solutions that are purpose-built to support the nuances of our industry:

- Flexible scheduling solutions that improve autonomy and enhance work-life balance
- Communication modules that improve communication with leadership
- Transparent payroll stubs that clearly itemize hourly pay, overtime, and more
- Streamlined data entry processes that reduce manual work and decrease burnout

Addressing these gaps is not only about retention, it's about setting your teams up for success. The retention will follow. When care staff feel valued, heart, and supported in their roles, they are far more likely to stay—and thrive.

Tools that help alleviate their biggest pains allow them to focus on the parts of their career they love most: providing unparalleled care for their patients or residents.

Step 2: Make pay meaningful—and motivating

Pay is more than a number—and as we learned, it's the number one driver of staff retention. Yet, for healthcare organizations, increasing wages isn't always as straightforward of a solution as they may like it to be.

Overcoming budgetary constraints is best balanced with a blended approach: one that supports the needs of both the organization and care staff. For organizations with the budget to do so, increasing pay is the most direct way of impacting retention, whether through annual pay raises, performance-based bonuses, or other creative compensation increases. However, direct pay increases aren't the only way of improving retention.

Offering meaningful career development opportunities to obtain the skills required to progress in their careers and advance within your organization can help show your staff that they don't need to go

elsewhere in order to keep moving forward with their goals. A critical factor to remember is that career development training alone will not motivate your staff to stick around long-term. Incentives surrounding training including additional pay for obtaining more skills being clearly communicated to staff let them envision their future without having to look outside of their current organization.

By combining better pay today with structured career progression and the promise of better pay tomorrow, organizations can build a more skilled and committed workforce while helping care staff achieve their financial goals.

Step 3: Prioritize payroll confidence

Payroll is a direct reflection on how much an organization values their employees. Don't let payroll errors erode your team's trust.

Establish a standard of accuracy from the get-go with systems thoughtfully designed to facilitate healthcare's complexity. With rules engines that seamlessly facilitate varied pay structures, shift rates, and more, you can immediately eliminate errors that arise from cumbersome manual time entries or calculations.

After accuracy, the next step to increasing care staff confidence is transparency. Providing itemized pay stubs that clearly break down their earnings, deductions, and any other necessary adjustments can help staff better understand their pay—offering a vital line of sight into their own financial situation.

A well-managed payroll process that promises accuracy and grants transparency builds a deep bond of trust. And, by alleviating concerns about payroll, you allow your care teams to focus on delivering the best quality care.

Step 4: Usher in a culture of compliance

In a rapidly evolving regulatory environment, ever-changing healthcare rules pose a headache for administrators—and expose areas of great risk for organizations.

Between labor laws, payroll regulations, and credentialing requirements, compliance demands both time and expertise—two resources that are often stretched thin. Failing to stay ahead of these changes puts organizations at risk for fines, audits, and potential legal issues.

Ensuring compliance starts with equipping HR and payroll teams with the right knowledge and support. Ongoing training, access to reliable regulatory resources, and dedicated time to stay informed on updates are essential. However, organizations don't have to navigate compliance alone. Establishing strong partnerships with legal experts, industry associations, and trusted technology providers can provide ongoing guidance and support.

By combining internal training with external expertise, organizations can proactively manage compliance rather than reacting to issues as they arise. This not only protects the organization, but also builds confidence among care staff, reassuring them that their credentials, pay, and working conditions are handled in accordance with the latest regulations.

Sources

1. Jama Network, [Health Care Staff Turnover and Quality of Care at Nursing Homes](#), October 2023
2. Activated Insights, 2024 [Activated Insights Benchmarking Report](#), 2024
3. American Hospital Association, [Regulatory Overload Report](#), February 2018
4. Viventium Case Study, [Improving Efficiency for Home Health and Hospice Agencies](#), April 2025
5. American Hospital Association, [Regulatory Overload Report](#), February 2018

A look at what's ahead

2025 & beyond

As we've seen, in 2025, the healthcare industry isn't just facing one singular challenge—it's working to navigate a complex array of market forces.

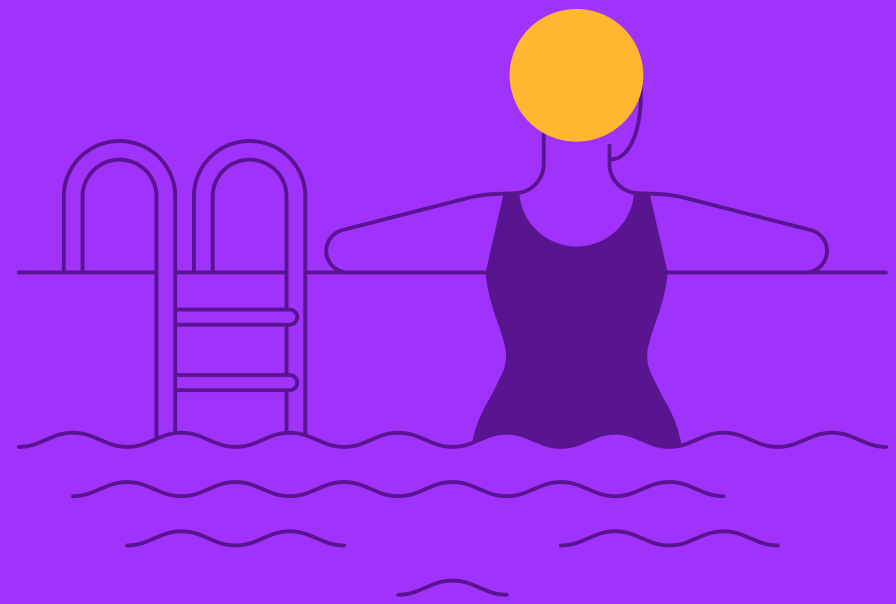
At the fore, the seven macro trends shaping our industry today are more than mere headlines. They're daily realities challenging healthcare leaders dually focused on protecting their organizations and prioritizing the highest quality patient care.

From shifting regulations and evolving care models to rising costs and economic pressures, administrators are looking for fresh ways to help their organizations adapt, and even thrive. At the same time, the five systemic workforce management challenges threaten the very core of what powers healthcare: its motivated, empowered, resilient care staff.

While these forces may feel overwhelming, the data reveals a hopeful truth: the future of healthcare is already taking shape. This transformation is happening from the inside-out—driven by people who are committed to solving avoidable challenges so they can refocus on what matters most: delivering exceptional care.

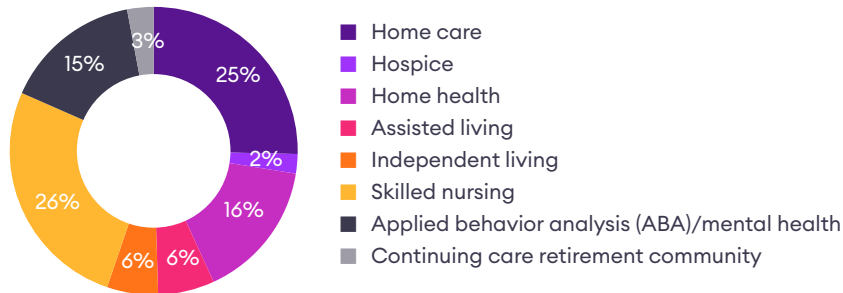
From reflection to insight and action, this report is meant to provide a sustainable framework for people and process. Investing in a people-first strategy, from prioritizing care staff career motivations, to prioritizing workplace transparency and ushering in a culture of communication and compliance, is the well-lit path ahead. With this in mind, we can move forward with intention, helping to align perspectives, empower administrators to lead with clarity and care staff to deliver with confidence.

We're working toward a new day in healthcare—and with the right insights, tools, and empathy—resilient, robust, and empowered care teams can get us there.

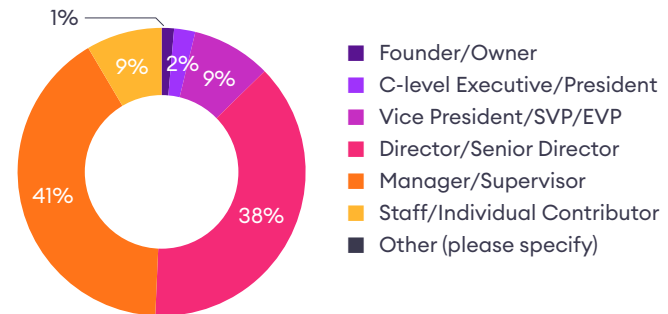


Administrator Demographics

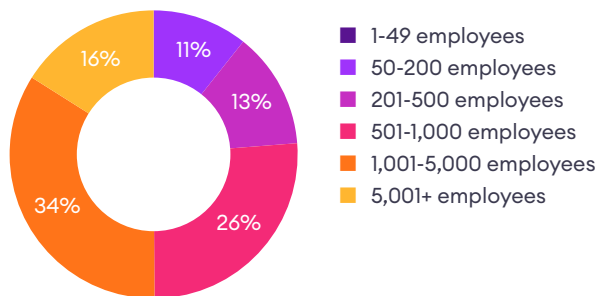
Primary Industry



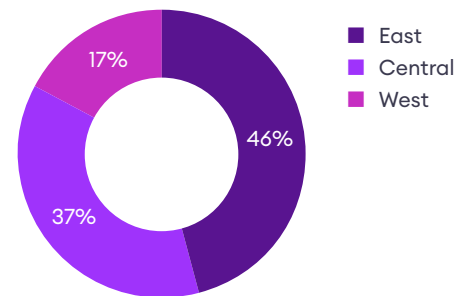
Position



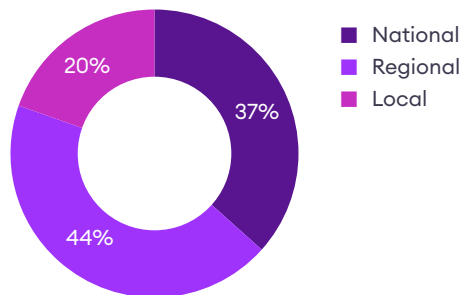
Employees



Region

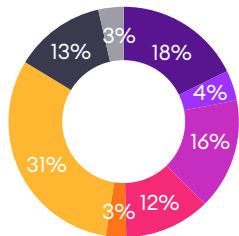


Location



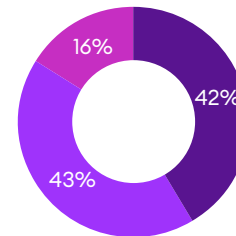
Care Staff Demographics

Primary Industry



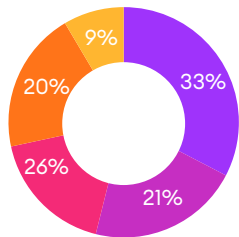
- Home care
- Hospice
- Home health
- Assisted living
- Independent living
- Skilled nursing
- Applied behavior analysis (ABA)/mental health
- Continuing care retirement community

Region



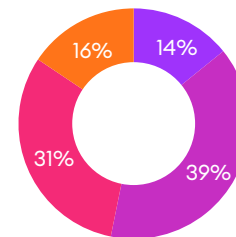
- East
- Central
- West

Employees



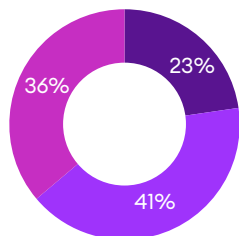
- 1-49 employees
- 50-200 employees
- 201-500 employees
- 501-1,000 employees
- 1,001-5,000 employees
- 5,001+ employees

Age



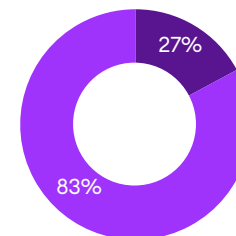
- 1925-1945
- 1946-1964
- 1965-1979
- 1980-1994
- 1995-2012

Location



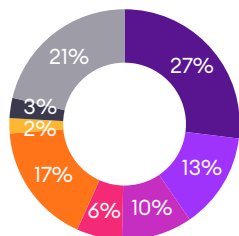
- National
- Regional
- Local

Gender



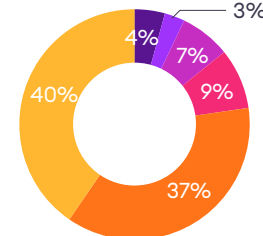
- Male
- Female

Primary Responsibility



- Registered Nurse (RN)
- Licensed Nurse Practitioner (LPN)
- Care staff or companion
- Certified Home Health Aid (CHHA)
- Certified Nurse Aide (CNA)
- Personal Care Assistant (PCA)
- Director of Nursing (DON)
- Other

Tenure



- Less than 90 days
- 3-6 months
- 7-12 months
- 13-23 months
- 2-5 years
- 6+ years

