) 1	your typical	2. What are your common themes for staff leaving?	3. What have you found to be successful to battle these common themes of staff leaving?	
; ; ; ; ;	5 years; I had 1 OT resign in 2018; 1 OT and 1 PT resign 2017; 1 OT in 2016, none	opportunities and/or	As evident by the lack of turnover, we don't have an issue. What we have that helps us keep folks is: - Autonomy - Opportunities for growth (our organization is only 5+ years old and they have the opportunity to help begin many of our programs) - Pay and benefits - Providing protected time (2 protected every Tuesday) weekly for Dept meetings, professional development, team building, etc - Our organization has invested heavily in Associate Engagement surveys over the last 3-years and we have taken their feedback seriously,	

			holding focus group meetings regularly to take action from their feedback (i.e. clearly defining FLEX time for salaried associates, establishing guidelines for weekend rotations, providing a set amount for Cont Ed dollars per associate, adjusting schedules to allow for mentoring and learning from colleagues, etc)	
ORG B	1-2 staff per year.	Young staff starting families and wanting to work less (which we sometimes cannot accommodate) and moving closer to their family. Sometimes they get tired of commuting and find something closer to where they live. Rarely for better opportunities for professional growth.	We work hard to give lots of opportunities for professional growth and added responsibility as desired. We also try to accommodate part time work but there is only so much we can do with scheduling and still meet patients needs. Cannot really do anything about it when they move to be close to family.	

ORG C	Our turnover	The overwhelming	We have lots of options for Rehab	
ONG C	rate varies from	majority of staff who	staff within our system- Early	
	year to year and	leave are usually moving	1	
	'	because of a spouse's	and NICU. The majority of the time	
	discipline. More	iob. We have some that	we are able to work with individuals	
	often we face	transfer within the	and transfer them to another	
	individuals	system to better	location that better meets their	
	wanting to cut	accommodate their	personal needs. We also share staff	
	their hours after	home life(e.g. school	so that our staff are exposed to	
	having a baby.	system so that they	different type settings.	
		don't work Summers		
		when their kids are out		
		of school)		
ORG D				I do not have exact numbers for our
				turnover rate, but I think it's pretty low.
				In the last 6 years, I've had 9 therapists
				leave. 1 retired, 3 had babies and
				decided to stay at home, 2 left for other
				jobs in the area, and 3 moved out of
				state/region due to transfers for their
				spouses. We have been able to replace
				all these positions, and then hire more.
				Some staff, mostly those with babies, will
				return to work at lesser hours (part-time
				vs full-time), or will come back as PRN
				employees to cover weekends or times of
				staff vacation or high census. I can also

				tell you that I've hired back or received calls from 4 of the people who have left in the recent past who want to come back.
ORG E) Very low turnover < 10%. Pretty much the same for PT/OT/ST	Moving out of area; productivity too tough; job closer to home/shorter commute	Help them understand the business side of therapy	
ORG F	Our turnover rate for inpatient Acute/Rehab PT, OT, Speech combined seems to run at roughly 20%/year. This includes PRN staff. We have more turnover in PT and OT than in Speech and more turnover with PRN staff than with regularly scheduled staff.	don't use them enough and/or they aren't available enough to work	We are being more transparent about the needs and expectations of the applicant and of our program when we interview. We are also trying to be more selective in our interview process and not just hiring someone because we need to fill a position which is something we've done historically.	
Org G	Current turnover rate; PT – 30%	Look for position with better hours (early intervention/school	Advisory Council/shared governance, Transparency of expectations and	

ОТ	- O%	based) to seek better	demands during interviewing.
SLF	P- 1%	work life balance	Flexibility to meet employees
		Personal family reasons-	request for schedule changes
		spouse relocation	