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Healthcare Business Insights™

2022 Fall member retreat

Hiring and retaining staff in a highly competitive market

Stacie Adcock

Manager of Revenue Cycle Administrative Services

Nebraska Medicine

About the speaker

Stacie Adcock

Manager of Revenue Cycle Administrative Services

Nebraska Medicine

- Stacie has been with Nebraska Medicine since September 1989.

- In her current role as revenue cycle administrative services manager, she is responsible for training, quality and revenue cycle-related systems.

- She graduated from Clarkson College with a bachelor's degree in healthcare business.

- She is ARCR-certified through Epic.

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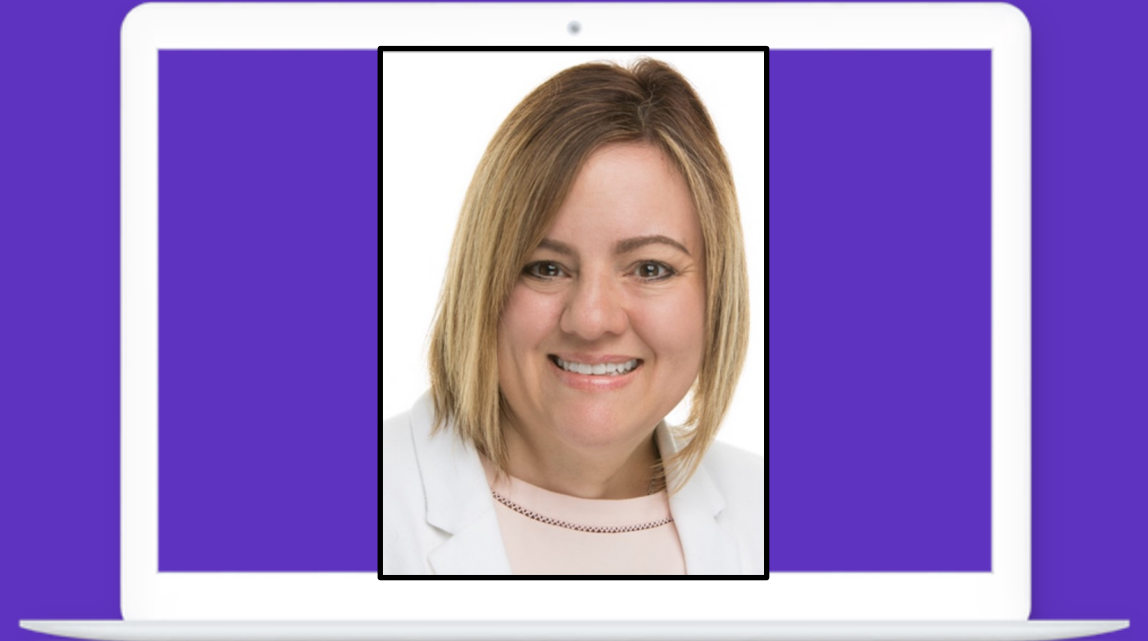
Learning objectives

Hiring and retaining staff in a highly competitive market

- Define how recent happenings and trends, such as staffing shortages, have altered the course of practices related to staffing, recruiting, training, engagement and retention

- Take away realistic strategies that can help to simultaneously improve results in all of these realms

- Illustrate team values and culture, including but not limited to a focus on increasing performance achievement

Nebraska Medicine at a glance

$1.8 billion academic health system

- Primary clinical partner of University of Nebraska Medical Center

- Our two hospitals are anchored by tertiary/quaternary academic medical center

- More than 70 specialty and primary care clinics with 50 specialties and subspecialties

- Licensed beds are made up of:

1. **Nebraska Medical Center:** *718 licensed beds, Omaha*
2. **Bellevue Medical Center:** *91 licensed beds, Bellevue*

Organization Facts & Figures			Annual	2021
Hospitals	2	Discharges	40,000	39,000
Clinics	70+	Primary and specialty visits (in-person)	990,000	1,034,000
Licensed beds	809	ER visits	80,000	91,000
Employees	9,500	Telehealth visits		82,504
Affiliated physicians	1,000+			
EHR	Epic			

*The **Fred & Pamela Buffet Cancer Center** opened in 2017, plus, planning is underway for our **NExT project**, which includes a state-of-the-art academic medical center facility and a **federal all-hazard disaster response** military and civilian partnership*

Agenda

1. **Where we are today and how we got there**
   How COVID, remote work and shortages are continuing change progression

2. **How we approach training: A general overview**
   Expanding cross-training, job shadowing and dedicated resources

3. **How training, career progression, and retention intersect**
   Check-ins, retention recovery and our career ladder

4. **Promoting engagement and cohesion in performance achievement**
   Report cards, quality audits, recognition and staff resources

5. **Reevaluating recruitment and hiring strategies**
   Job descriptions, social media and more considerations

6. **Forging and maintaining Culture**
   Finding your team values and measuring staff sentiment

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Where we are today and how we got there

Accommodating remote structures across the revenue cycle

Remote vs. hybrid vs. onsite

Patient Access

Onsite

Financial Counseling

Hybrid

(Meet with patients in-person or virtually)

HIM

Remote

(Full-time remote except for certain positions)

Patient Financial Services

Hybrid

(Full-time remote except for certain positions)

COVID-19, Remote work, Shortages all lead traditional roles to shift

Change is leading to more change that is blurring departmental lines

Deployment of Welcome: patients can now register themselves on a tablet without interacting with live staff

+

Automated wayfinding: patients can show themselves to treatment areas and we're alerted when they've arrived

=

Live staff are doing less registrations and more documenting, verification or follow-up

Deployment of Automation: COVID also allowed us to slow down (in some ways) and reevaluate processes or automate

+

Automated Processes: Led to the ability to reduce this team by 2-3 FTEs

=

Instances like this allowed us to redeploy staff to other functions or teams where there was more need

This is also allowing us to be more patient-facing, grow staff knowledge with work complexity, and flex staff to other functions or areas

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We're not perfect, and we face the same struggles as you…

Limitations exist amid staffing shortages

- We now have a taskforce to review potential states that are able to recruit from.
  - Which means we may lose staff or prospects to remote work for companies in higher-waged states

- Because we still have roles that are not fully remote, we may also lose staff to a local competitor

- We've had to reevaluate our policies and procedures and how those may attract or detract candidates

- We also looked at how our existing vendors might be able to take on more or additional tasks to help ease volumes
  - **For example:** using our statement vendor instead of sending staff onsite to handle certain paper- or print-based tasks

How we approach training:
A general overview

The same trends allowed us to spend more time cross-training staff

Which allowed them to see the connections between their work and other areas

As an example: when volumes decreased, we had multiple staff cross-train on how to handle returned mail, allowing them to see why an accurate address is so important

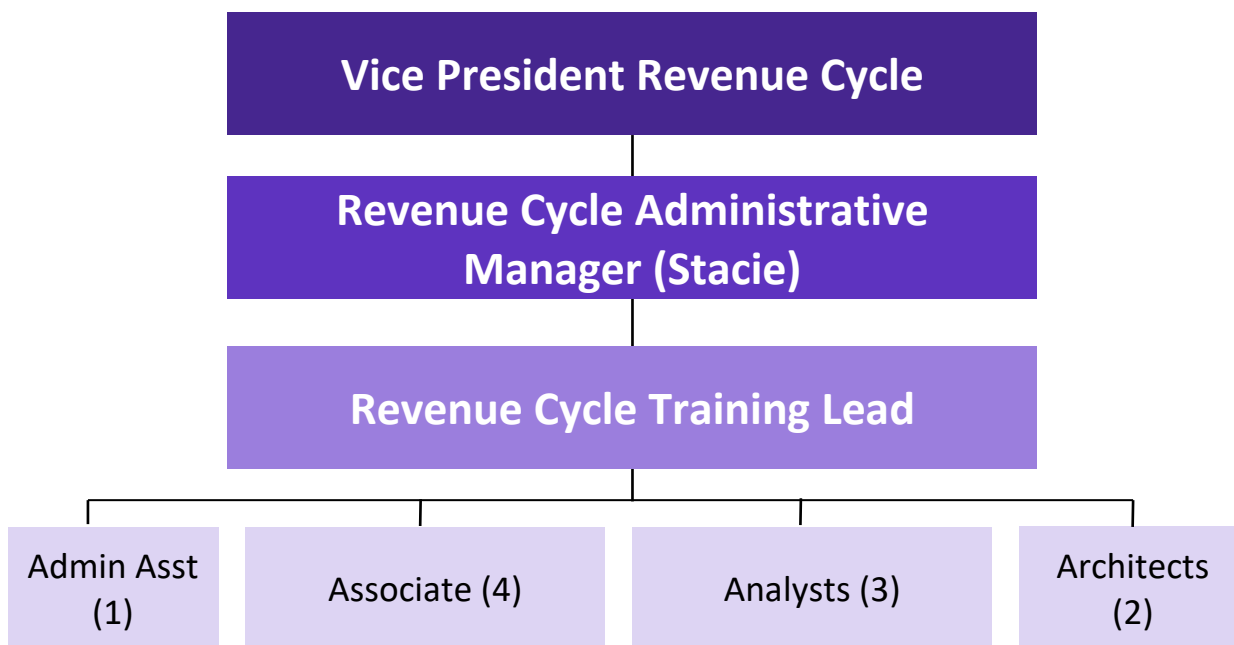| Home Department	Permanent Role	Reassigned Task	Reassigned Area	Training Hours Required	Date Reassigned (Start)	Date Reassigned (Stop)
Insurance Services	Claim Edit/Pre-Reg	INS DNB Workqueue	Same	0	3/24/2020	4/6/2020
Insurance Services	Claim Edit/Pre-Reg	INS DNB Workqueue - Half Time	Same	0	3/24/2020	4/6/2020
PFS Support	Contract Variance	Follow Up	PFS Operations	0	3/16/2020	3/27/2020
Insurance Services	IP Authorization	Insurance available not on account WQ	RC Admin	0.25	3/27/2020	5/4/2020
Insurance Services	IP Authorization	Insurance available not on account WQ	RC Admin	0.25	3/27/2020	4/30/2020
Insurance Services	IP Authorization	Insurance available not on account WQ	RC Admin	0.25	3/27/2020	4/30/2020
Insurance Services	IP Authorization	Insurance available not on account WQ	RC Admin	0.25	3/27/2020	4/3/2020
Insurance Services	IP Authorization	E-rejected and Non-RTE Queue	Claim Edit Pre-Reg	0	3/25/2020	4/3/2020
Insurance Services	IP Authorization	E-rejected and Non-RTE Queue	Claim Edit Pre-Reg	0	3/25/2020	4/3/2020
PFS Support	Document Imaging	Mailing Claims and Work from Home support	PFS Operations/Support	2	3/26/2020	
PFS Admin	Reimb. Appeals Sr. Assoc.	Answering Customer Service Calls	PFS Cust Svc.	0	4/3/2020	
PFS Support	MBSA - Claims	Self Pay Credits	PFS Support	1	4/2/2020	
PFS Admin	Reimb. Appeals Sr. Assoc.	Working on 11296 - PB Commercial	PB Operations	0	4/2/2020	
Insurance Services	OP Authorization	Insurance available not on account WQ	RC Admin	1	4/9/2020	4/24/2020
Insurance Services	OP Authorization	Insurance available not on account WQ	RC Admin	1	4/9/2020	4/29/2020
Insurance Services	OP Authorization	Insurance available not on account WQ	RC Admin	1	4/13/2020	5/1/2020
Insurance Services	OP Authorization	Insurance available not on account WQ	RC Admin	1	4/13/2020	4/29/2020
Insurance Services	OP Authorization	Insurance available not on account WQ	RC Admin	1	4/13/2020	4/29/2020
PFS Operations	TX F/U	HB BCBS Follow Up	Same	0	4/6/2020	
PFS Operations	TX F/U	PB Credits - 10 hours a week	PFS Support	0	4/13/2020	4/17/2020
PFS Support	MBSA - Claims	Self Pay Credits	PFS Support	1	4/9/2020	
Insurance Services	IP Authorization	Insurance available not on account WQ/Returned Mail	RC Admin	1	4/6/2020	5/18/2020
Insurance Services	Claim Edit/Pre-Reg	Insurance available not on account WQ/Returned Mail	RC Admin	0.5	4/6/2020	6/8/2020
Insurance Services	Claim Edit/Pre-Reg	Insurance available not on account WQ/Returned Mail	RC Admin	0.5	4/6/2020	6/8/2020
Insurance Services	Claim Edit/Pre-Reg	Insurance available not on account WQ/Returned Mail	RC Admin	0.5	4/6/2020	6/8/2020
Insurance Services	IP Authorization	Insurance available not on account WQ	RC Admin	0.25	4/6/2020	4/29/2020
Insurance Services	IP Authorization	Insurance available not on account WQ	RC Admin	0.25	4/6/2020	5/4/2020
Insurance Services	IP Authorization	Insurance available not on account WQ/Returned Mail	RC Admin	0.25	4/6/2020	5/18/2020
Insurance Services	IP Authorization	840 - Pre Registration	Access	0.25	5/1/2020	5/7/2020
Insurance Services	IP Authorization	840 - Pre Registration	Access	0.25	5/1/2020	5/7/2020

This also brings to light opportunities for internal promotion and maintains organization-wide retention.

Staff are allowed to job shadow each other as well

- **For example:** A biller could start by shadowing other roles or functions within patient financial services

- We schedule one-hour sessions, but some staff will end up shadowing up to four hours

- As part of Stay interviews or succession planning, we have the conversations to see if other areas would be of interest

Nebraska Medicine's Revenue Cycle Training Department Structure

```
┌─────────────────────────────────────┐
│    Vice President Revenue Cycle      │
└─────────────────────────────────────┘
                   │
┌─────────────────────────────────────┐
│   Revenue Cycle Administrative       │
│        Manager (Stacie)              │
└─────────────────────────────────────┘
                   │
┌─────────────────────────────────────┐
│     Revenue Cycle Training Lead      │
└─────────────────────────────────────┘
```

| Admin Asst (1) | Associate (4) | Analysts (3) | Architects (2) |

Revenue Cycle Administrative Manager (Stacie):

- Determines quality criteria with each revenue cycle area leader
- Assigns criteria a point value (100% total achievable score)
- Notifies revenue cycle leaders of retraining needs

Revenue cycle training lead:

- Conducts 1 random quality audit per staff member

Revenue cycle trainers:

- Conduct 2 random quality audits per staff member (for a total of 3)
- Sends audit result summaries to revenue cycle leaders
- Lead new-hire training or training for staff transitioning roles
- May review audit results with staff members or shadow as needed

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How training, career progression, and retention intersect

Engraining manager-to-staff check-ins

Weekly

30-Day

60-Day

90-Day

Six-Month

12-Month

18-Month

Quarterly

Each manager creates their own line of questioning or discussion items; staff may fill out ahead of meeting

This approach also helps prepare leaders for succession planning

Example check-in sheet – After two weeks

Discussion guide for first Friday check-in

Date: _____

Name: _____

1. Which team members have you met this week?

2. What have our team members done to make you feel welcome?

3. What was the best part of your first week?

4. What was the most challenging thing you had to deal with this week?

5. Is there anything that you think we should change to help new staff during their first week at Nebraska Medicine?

6. Did you have a chance to meet senior leadership for the department?

7. Did you receive appropriate access to equipment/resources needed for your job?

8. What questions/ concerns do you have for next week?

Example 30/60/90 Day check-in sheet

Discussion guide for developmental 1x1 (12-18 months)

Date: _____

Name: _____

Baseline expectations:

1. Has this job met your expectations? In what ways? Where has it fallen short?

2. Do you have the tools and equipment you need to do your job?

Assimilation:

3. Which coworkers have been especially helpful to you?

4. What sources have you been using to learn about news in the department and the organization?

5. Tell me about some of your successes during your first 30/60/90 days.

Challenges:

6. Describe any frustrations you've experienced so far.

7. Have you done anything to address these frustrations?

Suggested onboarding improvements:

8. In what areas would more training be helpful for you and other new hires?

8. If you could change one aspect of your experience in the department, what would that be?

9. On which aspects of your job performance would you like more feedback?

Overall concerns:

10. Do you have any concerns about your job that I could address?

Example **quarterly** check-in sheet

One-on-one meeting agenda

Date: _____

Name: _____

1. What is at least one new thing you have learned this week?

    What do you need from me to be successful?

2. Any safety concerns to share?

3. Questions to review:

    Items that you will accomplish in the next 5 work days:

4. Items that you would like to keep track of to accomplish in the future:

5. Reminder for iValue nomination:

Database assigned items/questions:

Issue #	Date	Description	Questions	

6. What have you done this week to display helping a friend by teaching instead of doing?

7. What have you done this week that might have hindered?

8. Annual Eval goals: Update on accomplishments:
    a.   _____
    b.   _____
    c.   _____

9. Items accomplished to report on annual evaluation:

Example 12-18 month check-in sheet

Discussion guide for developmental 1x1 (12-18 months)

Date: _____

Name: _____

Part 1: Professional Goals and Aspirations:
As a first step, it can be helpful to identify where you are in relation to where you may want to go with your professional career:

1. Are you new in your role, or new to your organization, and needing to master essential competencies critical for your success?

2. Are you thinking about preparing for a different role, which may require different skills or developing existing skills into significant strengths?

3. Are you experienced in your role and looking to maintain full engagement and enthusiasm through taking on additional challenges, building competencies that are needed to meet changing work demands, using strengths more fully or mentoring others?

Part 2: Use the following questions to further refine your professional goals:

1. What gives you the greatest sense of satisfaction and reward?

2. What do I want to do that I am not currently doing?

3. How will these goals/motives help me deliver results at Nebraska Medicine?

4. What is now, or will be, of greatest need to Nebraska Medicine, or to my department, in the future?

5. Do I see myself changing roles? If so, when, and what does the next role look like?

6. How might my role change in the future? What competencies will I need to be ready?

7. What work experiences do I need to develop professionally and stay engaged?

When a staff member does choose to leave...

We conduct a **retention/stay interview** to see if we can recover the team member internally

Audience Question:

Has anyone implemented <u>stay interviews</u> at their organization and, if so, what success have you found with doing these?

Retention Recovery Interview Questions

Date:

Colleague Name:

Job Title:

Reason validation/identification

1a. *If not known:* What's the main reason you've decided to leave Nebraska Medicine?

1b. *If known:* So I've heard you may be leaving because of _____, is that accurate?

Determining underlying factors

2. I realize you are leaving because _____, but what factors at Nebraska Medicine have contributed to that decision? What happened the caused you to start considering leaving? *Guide them: is your schedule a concern, are you unsure of how to move into the position you'd like, are you struggling with our team, etc.*

Determine if underling factors can be remedied

3. What would need to change in these areas for you to consider staying with Nebraska Medicine? *Leverage the decision tree if the overarching resignation reason is outlined.*

If the modifications achievable in your unit or another...

4. Let's explore what that would look like, and see if I can make some modifications on our unit, or if we can find somewhere that can.

If the modifications are not possible, or resignation cannot be avoided

4. I'm really sorry to hear that, but I understand your circumstance. I appreciate everything that you've done for our unit/team. Now I'd just like to know a little more about your experience here at Nebraska Medicine. Do you mind if we work through a few more questions?

5. If you can recall, what was the reason you started looking for a new position?

6. Do you feel we fully utilized your skills and talents?

7. Do you feel you knew about development opportunities at Nebraska Medicine? What could we do to help you understand what growth looks like here?

8. What can we do as a department to create an environment that is more engaging and inviting?

Revenue cycle development program

Offering opportunities to grow leadership skills

- Recently re-initiated this program

- Self-nomination but manager-approved

- Up to 3 participants each round

- Program runs from July of acceptance year through June the following year

- **Qualifications:**
  - 2.0 or higher on evaluations
  - Meet or exceed productivity and outcome expectations
  - Commit to 2-4 hours per week without requiring overtime
  - 1-hour weekly review/discussion with VP of revenue cycle

What participants do:

- Identify a performance improvement opportunity

- Complete application for self-nomination

- Discuss with manager and obtain approval

- Send application to VP of revenue cycle

We offer and regularly update our career ladder

Key:
- ACCESS
- HIM
- PFS
- Rev Cycle Admin
- Multiple Departments
- **Bold: Degree/Certificate Required**

HIM Records Associate

Document Imaging Associates

Office Assistant

HIM Record Review Sr. Associate

Revenue Cycle Support Associate

Patient Access Sr. Associate

Medical Billing Sr. Associate

Insurance Services Associate

Admin Assistant

Payment Apps Associate

Patient Financial Counselor

Insurance Services Sr. Associate

CS Sr. Associate

Collections Sr. Associate

Specialty Billing Sr. Associate

Payment Apps Sr. Associate

Language Services Associate

Patient Access Lead

Prof. Coding Associate

HIM Lead

Reimbursement Appeals Sr. Associate

ED/ Ambulatory Coding Sr Associate

Prof Coding Sr Associate

Revenue Cycle Senior Associate

Rev Cycle Training/ QA Associate

Language Services Lead

Inpatient Coding Sr Associate

PFS Lead

Him Coding Lead

Coding/CDI Educator

Revenue Cycle Training/ QA Lead

Denials & Projects Sr. Analyst

Revenue Integrity Sr. Analyst

Deaf/HOH Services Associate

CDI Sr Analyst

CDI Lead

Applications Sr Analyst

Application Lead

Audience Question:

Is any other facility <u>sharing</u> career ladder or growth opportunities throughout the revenue cycle?

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Promoting engagement and cohesion in performance achievement

Providing individual report cards to drive top-tier performance

Spearheaded by the Vice president of revenue cycle, this initiative started in 2017

- Reports issued to each individual staff member monthly

- Developed by our database builders

- Sent via email from a revenue cycle admin account

These individual report cards contain:

- **Productivity scores:** collaborated with IT to create a file transfer protocol to pull in data daily

- **Quality scores (rolling year):** maintained via distinct database and obtained through the quality audit process.

- **Departmental KPI achievement:** revenue cycle leaders are given access to this database and input data on the 15th of every month.

- The latter will even show an individual's achievement toward a department goal, like POS Collections.

Report Cards – A Closer Look

Making expectations and progress clear while sharing options for further engagement
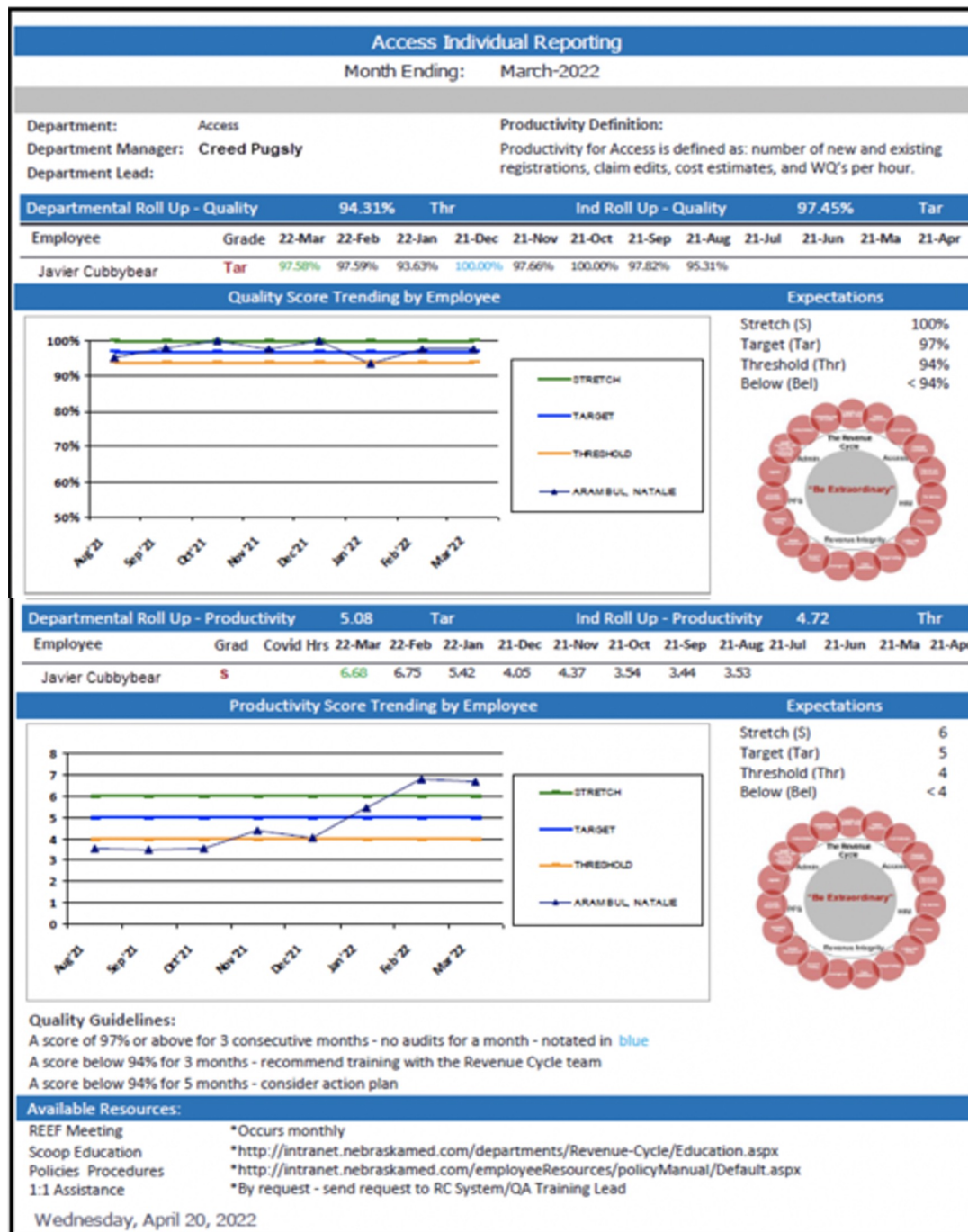
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Report Cards – A Closer Look

Departmental specifics **(Pages 2 & 3)**
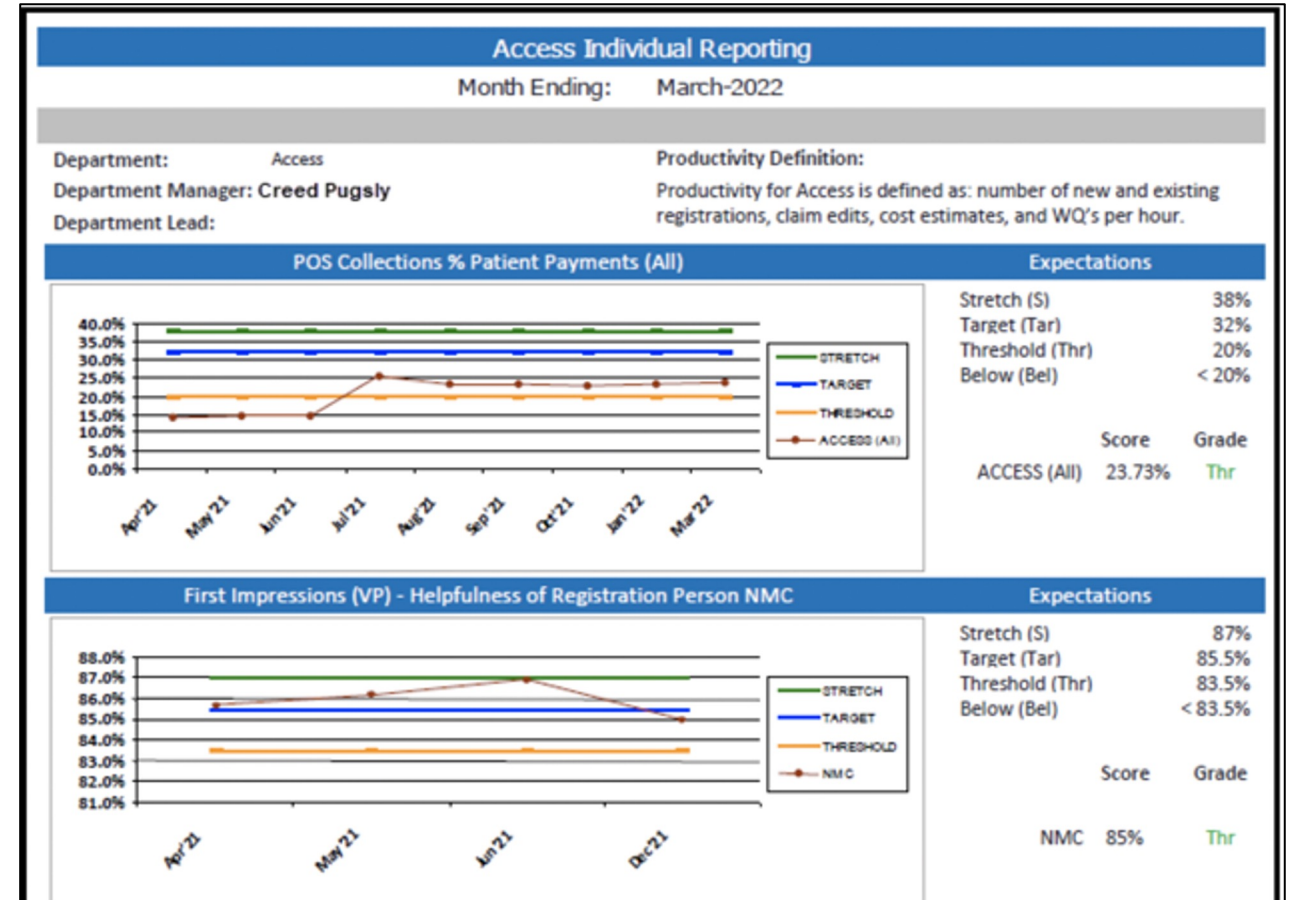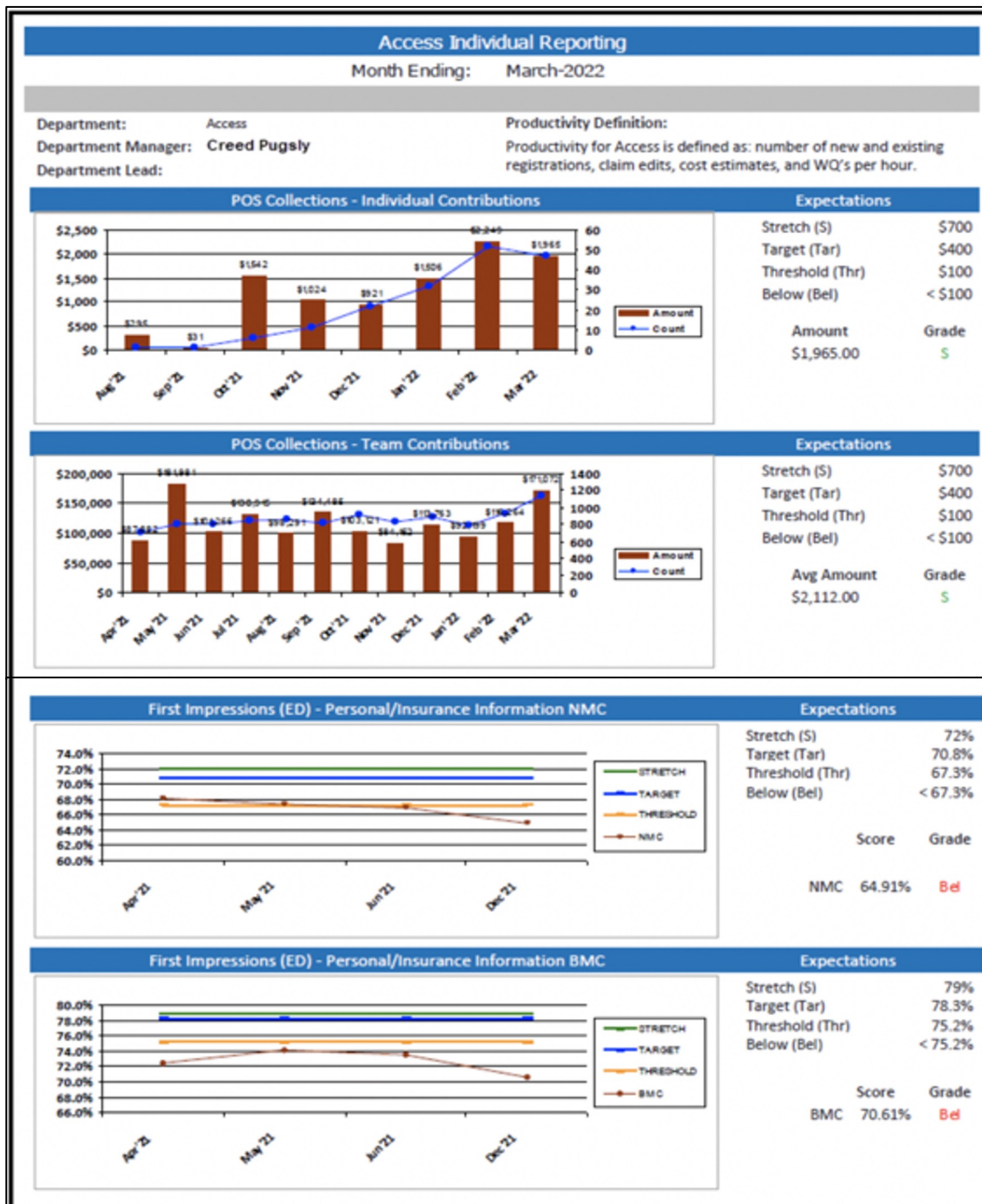
Recognizing exemplary performance

How we help to solidify a **97.51%** systemwide quality score

For high audit scorers:

- **97%** or higher scores for **3** consecutive months earns a **certificate**

- **100%** or higher scores for **3** consecutive months earns a **lapel pin**

- Those exhibiting a high degree of **teamwork** or **customer service** are given a **superstar award**

All of these are awarded at monthly team meetings

Identifying opportunities for learning and growth

Most importantly, these reports and resulting conversations help staff know exactly what to improve and work toward. It's less about what is done wrong and more about what to do next.

- The *"Why didn't anyone tell me"* phenomenon is real

- Helps promote standardization of processes and protocol

- Brings to light otherwise unidentified learning opportunities

  - **Example:** Legal guardian

Access, Medical Receptionists & Scheduling Associates: ROLES AND RESPONSIBILITIES

Category	Responsibilities/Activities	Frequency	Medical Receptionist	Patient Access Associate	Patient Access Sr. Associate	Scheduling Associate	Scheduling Sr. Associate
Registration (to include eligibility & benefits)	Utilize RTE and Contact Payers as needed to verify coverage and patient benefits	Daily	X	X	X		
	Communicate prior approvals to patients prior to service	Daily			X		
	Update Plan Codes or Add coverage in One Chart as required	Daily	X	X	X	check with stacie	
	Guarantor Types	Daily		X	X		
	Specialty Billing Flag	Daily	Varies by clinic	X	X	X	
	Cash Pay for Radiology	Daily		X	X		
	Self Pay Packages	Daily	Varies by clinic	X	X		
	Pre-Reg Account Creation	Daily		X	X	X	
	Check-in Process (Hospital Outpatient & Clinics)	Daily	X	X	X		
	Admission process for a procedure/inpatient (Hospital)	Daily			X		
	Quick Reg (Emergency Room specific)	Daily			X		
	Full Reg (Emergency Room specific)	Daily			X		
	Scanning of documents (DL, Insurance Card)	Daily	X	X	X		

How monthly quality audits trigger retraining

Only **0.017%** of team members have had to go through an action plan, signifying the impact of this process

Action plan ends

Did they have a compliance-based error?

Yes → **Errors = -6 points or an automatic fail**

No

Did they score 94% or higher?

Yes → **Pass**

Did they fail 3 out of 12 rolling months?

Yes → **Flagged for retraining; manager informed.**

→ **Trainer will:**
- **Review audit with staff member**
- **Shadow as needed**
- **Provide summary to manager**

No → **Evaluate at next review**

Does performance dip another 2 out of 12 months?

No → Evaluate at next review

Yes → **Action plan; Audit 3x per week**

Passed 3 consecutive months?

No

Yes → **Action plan ends**

Passed 2 consecutive weeks?

No → **Action plan; Audit 3x per week**

Yes

As a reward: those who pass 3 months in a row can skip their next audit.

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Employee Newsletter

- The training team also sends out a "Weekly Scoop" newsletter to all revenue cycle staff every Monday

- Features new team members, overall performance and even a food column

- Delivers brief education on updates, policy or process changes

(Pages 1 & 2)

Additional avenues to recognize performance

8:30 AM daily leadership meeting:

- Share performance at a higher level on key metrics
- Quickly identify any need for adjustment across teams
- Leaders then trickle this down to their respective teams

Show your appreciation:

Friday M&Ms:

- A way for staff to recognize each other (give "Kudos")
- Sent via email to departments every Friday

Thank you for being so MARVELOUS & MAGNIFICENT
Here are the shout outs from this week:

- I'd like to thank Debby Spidell for helping me with a transplant related denial, you rock! (Jess Payton)

- Amy Brende- Thank you for your help with Medica claim (Amy Mumma)

- Janelle Mcmillin- Thank you for always offering your help and answering any questions I have. (Kerry Cordova)

Audience Question:
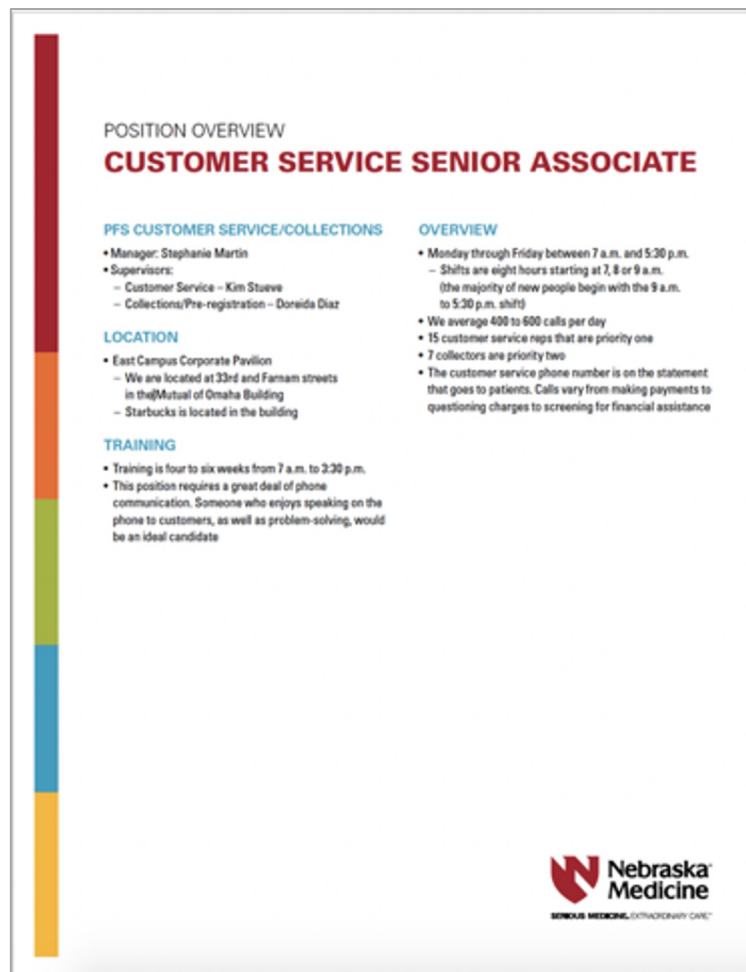
What have others used at their facility(ies) to recognize fellow colleagues?

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Reevaluating recruitment and hiring strategies

Posted Job Descriptions needed a revamp

From vague to informational

- The intention was to provide a cover sheet to share upfront:
  - Whether the position is remote (or for a specific location)
  - What to expect with training
  - Shift details
  - Level of workload
  - Size of team
  - Supervisor names
  - And in some cases, indications of desired values or provided culture

We're also trying:

Intern program:

- We field interns from community and four-year colleges in the area and will put them through a modified onboarding training program (including access to Epic)
- Will spend some time shadowing our staff
- Then we can assign certain projects or work

More avenues for posting:

- Military communities
- College-affiliated programs

Employee spotlights:

- Postings on Facebook or LinkedIn directly from a current employee
- Shares when the employee started at Nebraska Medicine, how long they've been employed, their career trajectory, and how they ended up in their current role

Strong HR partnerships:

- We have dedicated "sourcers" that go out and find candidates

More flexibility in how we fill open roles:

- We focus less intently on skills assessments
- We consider whether to backfill at a lower level, such as a medical biller vs. a specialty biller and grow them or other staff up

Going live to share open positions

- Facebook Live

- Career fairs to include local colleges

- Utilizing leader networking groups
  - **Example:** Military Wives group

- Immediate interviews and hiring on-the-spot
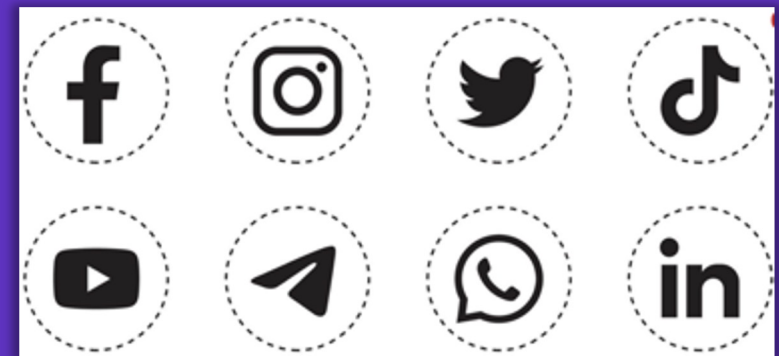
Forging and maintaining Culture

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How we achieve extraordinary together

As a result of the efforts outlined, and actively mapping out our cultural values, Nebraska Medicine has been able to foster a systemwide culture of not only quality but accountability.

Nebraska Medicine also partnered with Sean Delaney to focus on employee engagement

Why culture:
A healthy culture creates a better place for us to work

Appreciation:
Offering appreciation is a way to recognize and value others

Mood elevator:
Being aware of our moods helps us with our work and relationships

Be here now:
Being fully present with the people we are with and what we are doing

Accountability:
Taking responsibility for our choices

Curiosity/judgment:
Remaining open to new ideas or ways of doing things

Assume good intent:
A reminder that other people are also trying to get a positive result

Filters:
People and situations look different with the lens we see them

Level of listening:
Listening to understand helps to build stronger relationships

Energy level:
Awareness this helps us understand how we're prepared to work

Gratitude
The more you practice being grateful, the more you get back

At your best:
An intentional approach to life orients a healthy state of mind

Blue chips:
Things of greater importance are a higher priority in life

Behavioral styles:
A framework for seeing and celebrating different perspectives

Diversity/Inclusion:
Understanding and celebrating differences makes us stronger

iTEACH values

OUR VALUES reflect **who we are** and **why we're here.**

ITEACH

Innovation

Search for a better way. Seek and implement ideas nd approaches that can change the way the world discovers, teaches and heals. Drive transformational change.

Teamwork

Respect diversity and one another. Communicate effectively and listen well. Be approachable and courteous. There is no limit to what we can achieve when we work together.

Excellence

Strive for the highest standards of safety and quality in all that you do. Work to achieve exceptional results.

Accountability

Commit. Take ownership. Be resilient, transparent and honest. Always do the right thing and continuously learn.

Courage

Make the tough decisions. Have no fear of failure in the pursuit of excellence. Admit mistakes and learn from them.
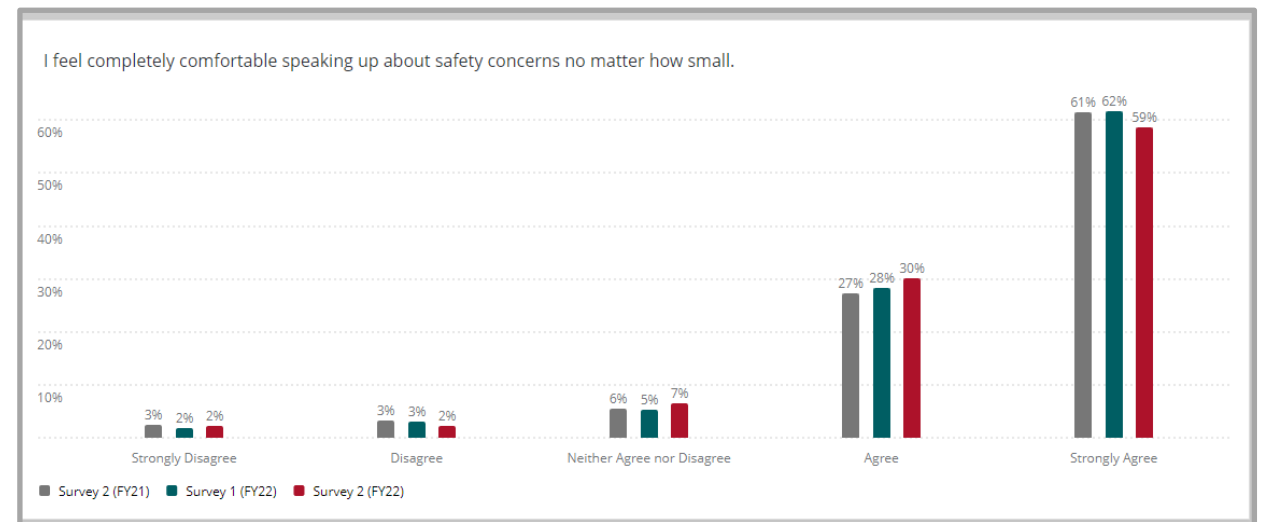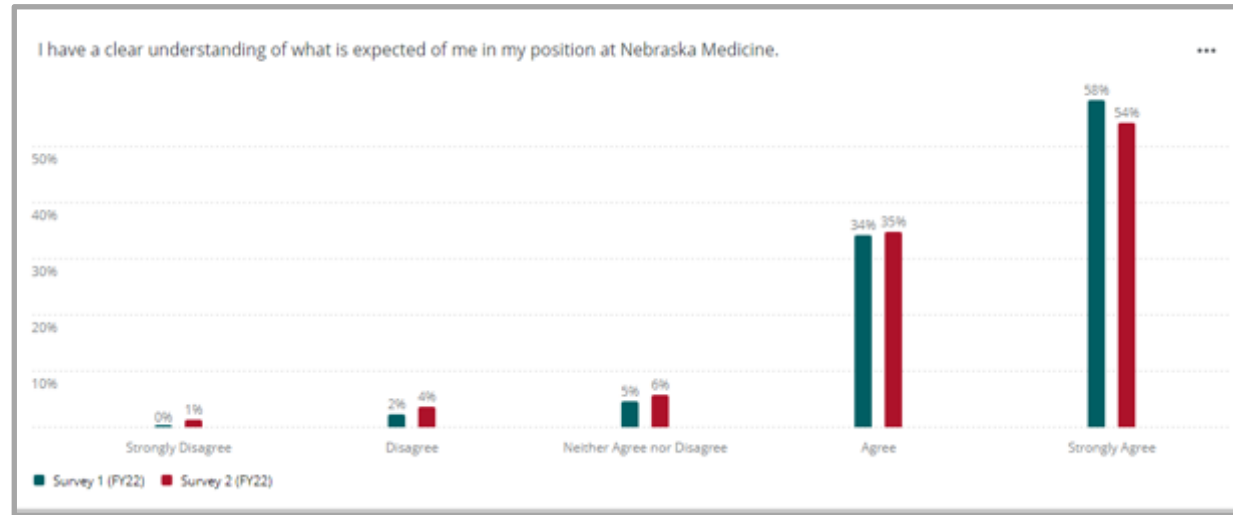
Healing

Show the empathy you feel. Be selfless in caring for patients, one another and the community.

Measuring employee engagement

Measuring employee engagement – *Cont'd*

I have a clear understanding of what is expected of me in my position at Nebraska Medicine.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Survey 1 (FY22)	0%	2%	5%	34%	58%
Survey 2 (FY22)	1%	4%	6%	35%	54%

I feel completely comfortable speaking up about safety concerns no matter how small.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Survey 2 (FY21)	3%	3%	6%	27%	61%
Survey 1 (FY22)	2%	3%	5%	28%	62%
Survey 2 (FY22)	2%	2%	7%	30%	59%

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Thank you

Stacie Adcock
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