Strategic Staffing Analysis and Workforce Plan For the Planning Period 2027-2031

As Required by
Texas Government Code
Section 2056.0021

Health and Human Services
June 2026

TEXAS
Health and Human Services

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Executive Summary

The Health and Human Services (HHS) Strategic Staffing Analysis and Workforce Plan is an integral part of the HHS staffing plan. Workforce planning is essential for business operations as it addresses:

- Growing demand for HHS services.
- A rising number of employees approaching retirement age, leading to a smaller pool of experienced replacements.
- Greater competition for highly skilled employees.

HHS agencies take proactive steps to address these challenges by planning ahead and minimizing risks. With the support of funds appropriated by the 88th Legislature, the Texas Health and Human Services Commission (HHSC) made significant investments in recruitment and retention efforts to reduce the vacancies in difficult to fill critical positions.

Texas Government Code, Section 2056.0021 requires state agencies to develop a workforce plan in accordance with guidelines developed by the State Auditor's Office (SAO) and include it in their strategic plan. To meet these requirements, this HHS Workforce Plan - Schedule F attachment to the HHSC and the Department of State Health Services (DSHS) Strategic Plans for the Fiscal Years 2025–2029 - analyzes the following key elements for HHS:

- **Current Workforce Demographics** – Describes HHS workforce demographics.
- **Expected Workforce Challenges** – Describes anticipated staffing needs.
- **Strategies to Meet Workforce Needs** – Describes recruitment and retention strategies that address expected workforce challenges.

Health and Human Services

HHS, as reflected in Article II of the General Appropriations Act, consists of the two agencies described below.

Health and Human Services Commission (HHSC). HHSC began services in 1991. HHSC manages the day-to-day operations of state supported living centers and state hospitals, and administers programs that deliver benefits and services, including:

- Medicaid for families and children.
- Long-term care for people who are older or who have disabilities.
- Supplemental Nutrition Assistance Program (SNAP) food benefits and Temporary Assistance for Needy Families (TANF) cash assistance.
- Behavioral health and substance abuse services.
- Services to help keep people who are older or who have disabilities in their homes and communities.
- Services for women.
- Services for people with special health needs.
- Services for people with mental health issues.
- Disaster services.
- Family and safety resources.

The agency also oversees regulatory functions including:

- Licensing and credentialing long-term care facilities, such as nursing homes and assisted living facilities.
- Health care facilities regulation.
- Licensing child-care providers.

Department of State Health Services (DSHS). DSHS began services on September 1, 2004, and leads the state public health system and provides programs and services at the state, regional, and local levels. DSHS is organized in these programmatic areas, including Public Health Laboratory, Infectious Disease Prevention, Regional and Local Health Operations, Consumer Protection, Community Health Improvement, Chief State Epidemiologist, and the Center for Public Health Policy and Practice that:

- Prevent, detect, and respond to infectious diseases.
- Lead public health and medical response during disasters and emergencies.
- Develop and implement evidence-based public health interventions through data analysis and science.
- Reduce health risks and threats by establishing minimum standards for consumer protection.
- Promote healthy living through disease and injury prevention.

HHS Vision

Making a positive difference in the lives of the people we serve.

HHS Mission

We serve Texas.

Workforce Demographics

Figure 1 below shows a total of 41,579 full-time and part-time employees across HHS agencies in fiscal year 2025 (FY25). The HHS workforce increased by four percent (1,594 employees) between August 31, 2023, and August 31, 2025. Of these, 37,933 are employed by HHSC and 3,646 are employed by DSHS (refer to Figure 2).[1]

Figure 1: HHS Workforce (FY23 - FY25)

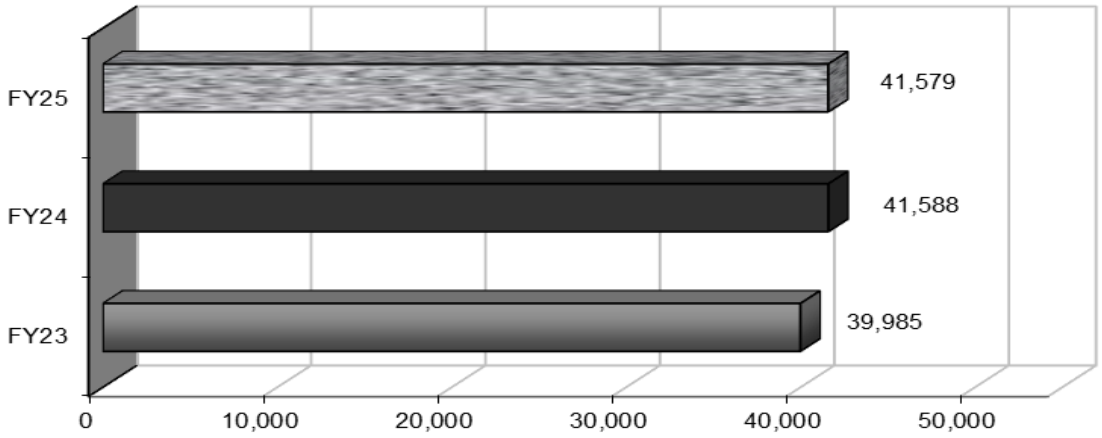
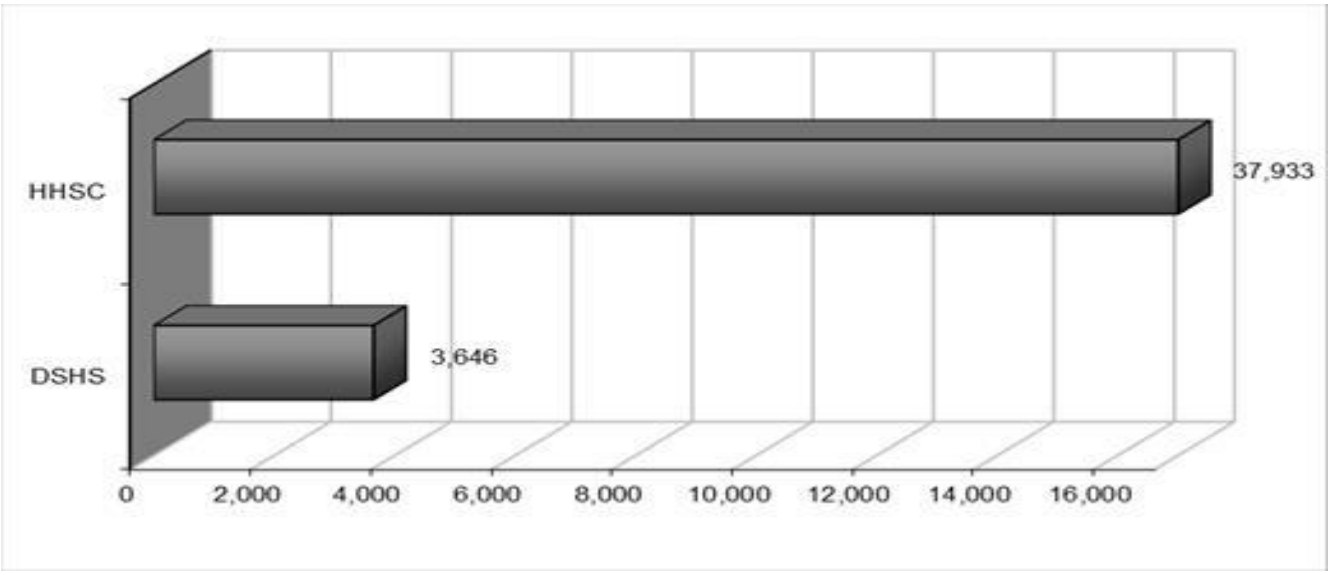


Figure 2: HHS Workforce by Agency for FY25



Job Families

Eighty percent of HHS employees (33,270 employees) work in 22 job families (refer to Table 1).

Table 1: HHS Largest Job Families for FY25

Job Family	Number of Employees
Human Services Specialists	6,906
Direct Support Professionals	5,184
Clerical Workers	2,838
Psychiatric Nursing Assistants	2,694
Program Specialists	2,359
Registered Nurses (RNs)	2,140
Managers	1,320
Licensed Vocational Nurses (LVNs)	964
Inspectors	930
Program Supervisors	918
Rehabilitation Technicians	895
Food Service Workers	832
Directors	816
System Analysts	713
Custodians	638
Maintenance Workers	537
Security Officers	480
Contract Specialists	470
Investigators	467
Accountants	443
Human Resource Developers	366
Public Health Technicians	360

Veterans

Four percent of the workforce (1,593 employees) are veterans (refer to Table 2).

Table 2: HHS Workforce by Veteran Status for FY25

Agency	Number of Veterans	FY25 Percentage
HHSC	1,365	3.6%
DSHS	228	6.3%
HHS	1,593	3.8%

State Service

Thirty-eight percent of the workforce has 10 or more years of state service. Twenty percent of the workforce have been with the state for less than two years. This breakdown is consistent across HHS agencies (refer to Table 3).

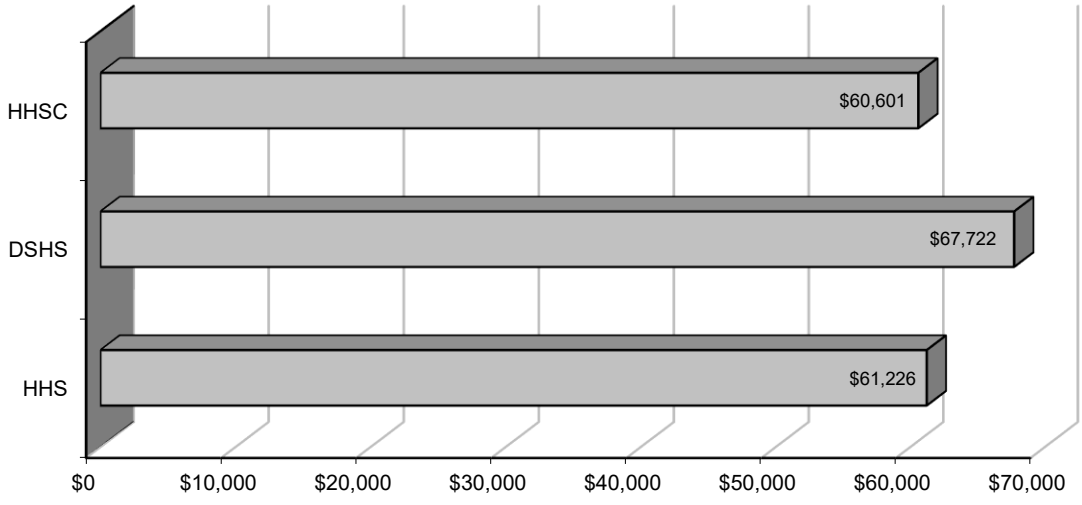
Table 3: HHS Agencies Workforce by Length of State Service for FY25

Agency	Percentage Less than 2 yrs.	Percentage 2-4 yrs.	Percentage 5-9 yrs.	Percentage 10 yrs. or more
HHSC	19.8%	21.8%	20.7%	37.8%
DSHS	16.3%	25.2%	20.4%	38.1%
HHS	19.5%	22.1%	20.7%	37.8%

Average Annual Employee Salary

The average annual salary for an HHS employee is $61,226 (refer to Figure 3). The average annual salary for DSHS is $67,722, and HHSC is $60,601.

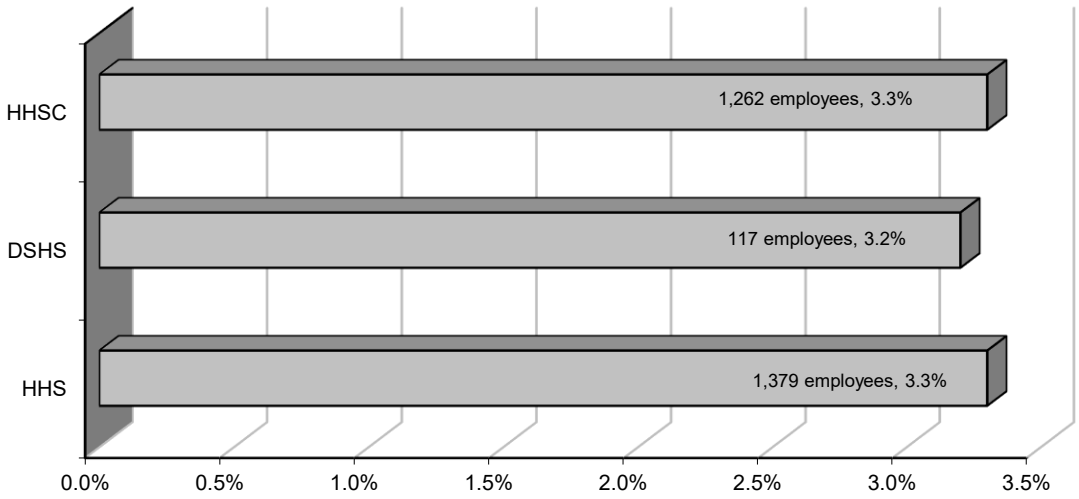
Figure 3: HHS Average Annual Salary by Agency for FY25



Return-to-Work Retirees

Rehired retirees constitute three percent of the total HHS workforce (refer to Figure 4).

Figure 4: HHS Return-to-Work Retirees by Percent of Workforce for FY25



Turnover

The FY25 HHS turnover rate was 17.2 percent, two percent higher than the statewide turnover rate for classified regular and part-time employees of 15.4 percent (refer to Table 4). [2] [3]

Table 4: HHS Workforce Turnover (FY23 – FY25)

Agency	FY23	FY24	FY25
HHS	21.4%	18.0%	17.2%
Statewide	18.7%	16.5%	15.4%

Of the two HHS agencies, HHSC experienced a higher turnover rate at 17.5 percent (refer to Table 5).

Table 5: Turnover by HHS Agency for FY25

Agency	Average Annual Headcount	Total Separations	Turnover Rate
HHSC	39,084	6,829	17.5%
DSHS	3,860	541	14.0%
HHS	**42,944**	**7,370**	**17.2%**

Of the FY25 separations, 70 percent were voluntary, and 29 percent were involuntary (refer to Table 6). Voluntary separations include personal reasons, transfers to other agencies, and retirements. Involuntary separations include terminations at will, resignations in lieu of termination, and dismissals for cause.

Table 6: HHS Separations by Reason for FY25

Type of Separation	Reason	Separations	Percentage[4]
Voluntary	Personal reasons	4,055	55.0%
Voluntary	Transfer to another agency	306	4.2%
Voluntary	Retirement	811	11.0%
Involuntary	Termination at Will	104	1.4%
Involuntary	Resignation in Lieu of Termination	133	1.8%
Involuntary	Dismissal for Cause	1,886	25.6%

Certain job families have higher turnover rates including Direct Support Professionals at 33.7 percent, Psychiatric Nursing Assistants at 25.5 percent, and Food Service Workers at 24.9 percent (refer to Table 7). The data in this table are a point-in-time

estimate from August 31, 2025. They do not reflect current turnover or vacancy rates as of the date of this publication.

Table 7: HHS Turnover by Job Family for FY25

Job Family	Average Annual Headcount	Separations	Turnover Rate
Direct Support Professionals	5,564	1,876	33.7%
Psychiatric Nursing Assistants	2,867	732	25.5%
Food Service Workers	894	223	24.9%
Laundry Workers	94	22	23.5%
Licensed Vocational Nurses (LVNs)	1,029	233	22.6%
Public Health Registered Nurses (RNs)	123	27	22.0%
Custodial Workers	676	148	21.9%
Human Services Technicians	53	11	20.9%
Medical Technologists	80	16	19.9%
Financial Examiners	56	11	19.8%
Project Managers	222	40	18.0%
Claims Examiners	319	57	17.9%
Purchasers	97	17	17.6%
Associate Psychologists	109	19	17.4%
Property Managers	86	15	17.4%
Auditors	98	17	17.3%
Registered Nurses (RNs)	2,232	386	17.3%
Occupational Therapists	59	10	16.9%
Security Workers	500	82	16.4%
Clerical Workers	3,000	476	15.9%
Information Specialists	64	10	15.6%
Human Services Specialists	6,668	1,036	15.5%
Resident Specialists	58	9	15.5%
Qualified Intellectual Disability Professionals	279	43	15.4%
Inventory Coordinators	124	19	15.4%
Groundskeepers	59	9	15.3%

Retirement Projections

As of August 31, 2025, 11 percent of the HHS workforce is potentially eligible to retire and leave state employment. Twenty-three percent of the current workforce could potentially retire in the next five years.[5]

Table 8 below shows the percentage and number of eligible first-time retirees across HHS. **Note**: These percentages do not include return-to-work retirees.

Table 8: HHS First-Time Retirement Eligible Projection (FY25 – FY30)

Agency	FY25	%	FY26	%	FY27	%	FY28	%	FY29	%	FY30	%
HHSC	664	1.8%	878	2.3%	962	2.5%	1,054	2.8%	1,178	3.1%	1,165	3.1%
DSHS	67	1.8%	97	2.7%	101	2.8%	91	2.5%	95	2.6%	86	2.4%
HHS	**731**	**1.8%**	**975**	**2.3%**	**1,063**	**2.6%**	**1,145**	**2.8%**	**1,273**	**3.1%**	**1,251**	**3.0%**

Losing this part of the workforce means HHS will lose experienced employees in important roles. Succession planning and employee development are essential to ensure qualified replacements for those leaving state service.

Critical Workforce Skills

Advances in technology, population growth, and changing service models are raising the need for well-trained staff.

It is important for HHS to recruit and hire individuals who have the expertise to design, implement, evaluate, and execute HHS programs and services. These necessary skills include:

- Analytics, assessment, and handling data management;
- Policy development and program planning;
- Effective communications;
- Basic public health sciences;
- Financial planning and management;
- Contract administration and management;
- Technical proficiency;
- Leadership and strategic guidance;
- Adaptability to changing needs and situations;
- Teamwork and collaboration; and
- Proactive problem-solving.

As HHS experiences a reduction in tenured staff, it is crucial to provide effective training to ensure current employees have the necessary skills to succeed.

To promote staff development and succession planning, HHS must continue to develop the skills and talents of its managers. HHS has shown commitment to leadership and continues to offer a formal leadership development program. This interagency training and mentoring initiative helps high-potential managers prepare for greater responsibilities. The main objectives of the initiative are to:

- Equip managers to handle greater and more varied roles and responsibilities;
- Provide opportunities for managers to gain insight into key management challenges;
- Enable managers to engage and contribute as they learn; and
- Foster a collaborative leadership culture across HHS.

Environmental Assessment

The Texas Economy

In Texas, the unemployment rate remained low at 4.3 percent in December 2025. The state added 132,500 jobs between December 2024 and December 2025, more than any other state, and outpaced the national annual job growth rate by half a percentage point. Looking ahead, wage growth is expected to remain strong in 2026, with a projected increase of 1.1 percent.[6] [7] [8]

Population Growth

As the population of Texas grows and the number of residents qualifying for HHS services increases, HHS agencies need to continue recruitment and retention efforts to meet this growing need.

According to the United States Census Bureau, as of July 2025, the estimated population of Texas was over 31 million, which represents an 8.8 percent increase from the census count in 2020. [9]

Poverty in Texas

The U.S. Department of Health and Human Services defined the poverty level for 2025 according to household/family size as follows:

- $32,150 or less for a family of four;
- $26,650 or less for a family of three;
- $21,150 or less for a family of two; and
- $15,650 or less for an individual.[10]

It is estimated that 13.4 percent of Texas residents live in families with annual incomes below the poverty level. This rate is slightly higher than the national poverty rate of 10.6 percent.[11]

Households or families with an annual income below the poverty level often face challenges in meeting basic needs, such as food and nutrition. This financial hardship increases their reliance on social services, including food and nutrition assistance

programs. As poverty rates rise, the demand for such assistance grows, making these social services essential for supporting vulnerable populations.

Expected Workforce Challenges

For the purpose of expected workforce challenges, HHS focused on positions that are mission critical, difficult to recruit for and/or retain, or are experiencing other challenges as reported by the targeted program area. The major job categories highlighted in Table 9 represent certain positions and skill sets that are vital to fulfilling the mission of the HHS agencies. These roles are integral to the successful delivery of health and human services across the state.

People working in these vital job roles play an important part in delivering services to Texans, helping to meet the community's needs in an effective and efficient way. The continued recruitment and retention of professionals in these positions are crucial for HHS to maintain its commitment to serving the public.

A review of HHS job families shows that, within various program areas, some job families and positions that are related to delivery of essential services are facing recruitment and retention challenges.

Table 9 provides a detailed overview of these jobs, highlighting key metrics such as the number of employees, average salary, turnover rate, vacancy rate, average days vacant, and the percentage of staff eligible for retirement within the next five years. This data highlights the workforce challenges that need specific strategies to maintain consistent service delivery and organizational stability.

Notes:

- Table 9 lists only those HHS program area jobs with at least 10 filled positions and either a turnover rate above 15 percent and/or a vacancy rate exceeding 10 percent.
- The data used for this analysis are a point-in-time estimate from August 31, 2025. As such, they do not reflect the vacancy or turnover rates as of this publication.

Table 9: HHS Targeted Job Families Review for FY25 [12]

Job Family	Number of Employees	Average Salary	Turnover Rate	Vacancy Rate	Average Days Vacant	Percent Retirement Eligible in Next Five Years
Direct Support Professionals at States Supported Living Centers (SSLCs) within HHSC Chief Program and Services Officer (CPSO) Division	4,970	$43,683	33.9%	10.1%	101	12.6%
Psychiatric Nursing Assistants at State Hospitals (SHs) within HHSC CPSO Division	2,592	$44,043	26.2%	9.5%	94	12.2%
Nurse I–Vs at SSLCs and SHs within HHSC CPSO Division	1,187	$90,135	20.2%	10.6%	126	19.6%
Eligibility Advisor Is within HHSC CPSO Division	1,171	$38,268	38.4%	19.0%	102	1.3%
Licensed Vocational Nurses at SSLCs and SHs within HHSC CPSO Division	925	$61,314	22.9%	13.5%	185	21.7%
Medical Eligibility Specialists within HHSC CPSO Division	625	$45,876	16.1%	6.7%	94	13.4%
Food Service Workers at SSLCs within HHSC CPSO Division	488	$40,630	26.0%	7.4%	128	25.0%
Community Care Worker I-IIIs in Community Services (CS) within HHSC CPSO Division	411	$41,268	24.5%	5.1%	37	23.4%
Food Service Workers at SHs within HHSC CPSO Division	313	$40,558	21.3%	8.2%	51	25.6%
Custodian I-IIIs at SSLCs within HHSC CPSO Division	305	$36,627	16.1%	6.4%	101	38.0%
Custodian I-IIIs at SHs within HHSC CPSO Division	277	$35,719	29.9%	8.3%	102	24.9%
Nurse IIIs in Regulatory Services within HHSC Chief Policy and Regulatory Officer (CPRO) Division	243	$89,936	18.1%	7.3%	137	29.6%
Program Specialists in DSHS Community Health Improvement (CHI) Division	162	$63,057	16.1%	13.4%	91	22.8%
Purchasers in Procurement and Contracting Services (PCS) within the HHSC Chief Operating Officer (COO) Division	91	$61,826	17.6%	7.1%	125	31.9%

Job Family	Number of Employees	Average Salary	Turnover Rate	Vacancy Rate	Average Days Vacant	Percent Retirement Eligible in Next Five Years
Information Technology Business Analyst I-IVs within the HHSC Chief Information Officer (CIO) Division	90	$89,627	14.1%	8.2%	77	31.1%
Environmental Protection Specialist I-Vs within DSHS Consumer Protection (CP) Division	85	$65,280	10.3%	16.0%	83	27.1%
Microbiologist I-Vs within DSHS Public Health Laboratory (PHL) Division	78	$61,729	14.2%	12.4%	113	9.0%
Chemist I-Vs within DSHS PHL Division	72	$65,823	10.7%	14.3%	100	11.1%
Guardianship Specialist I-IIIs in CS within HHSC CPSO Division	65	$53,860	13.2%	8.5%	63	26.2%
Public Health Nurses within DSHS Regional and Local Health Operations (RLHO) Division, Regions 1, 5/6, 8, 9/10, and 11	55	$73,054	28.0%	17.9%	52	18.2%
Molecular Biologist III-Vs within DSHS PHL Division	55	$71,376	6.9%	14.1%	80	9.1%
Vehicle Driver IIIs in Facility Operations Support Services within HHSC COO Division	38	$36,530	19.9%	7.3%	163	26.3%
Manager I-IVs within the DSHS CHI Division	37	$76,556	19.3%	9.8%	105	21.6%
Physician II-IVs at SSLCs within HHSC CPSO Division	36	$283,020	13.5%	10.0%	354	36.1%
Medical Technologist I-Vs within DSHS PHL Division	35	$62,060	13.1%	12.5%	41	34.3%
Director IIIs and VIs within HHSC CIO Division	27	$156,832	22.4%	6.9%	152	48.2%
Physician II-IVs at SHs within HHSC CPSO Division	26	$263,202	11.3%	13.3%	181	26.9%
Data Analyst IV and Vs in Data Analytics and Performance within HHSC CPRO Division	36	$88,577	8.2%	14.3%	45	0.0%
Program Specialist II-IVs within DSHS RLHO Division, Regions 1, 8, and 9/10	30	$56,063	6.3%	11.8%	75	26.7%
Program Specialist I-VIIs within DSHS PHL Division	23	$67,202	23.8%	11.5%	24	39.1%

Job Family	Number of Employees	Average Salary	Turnover Rate	Vacancy Rate	Average Days Vacant	Percent Retirement Eligible in Next Five Years
Program Specialist IVs in Civil Rights Office within HHSC COO Division	23	$59,974	20.2%	11.5%	244	34.8%
Social Worker I-IVs at SSLCs within HHSC CPSO Division	23	$69,055	16.5%	8.0%	122	43.5%
Data Scientists within HHSC Office of Inspector General (OIG)	22	$84,839	23.0%	0.0%	0	4.6%
Epidemiologists within DSHS CHI Division	22	$75,424	8.7%	12.0%	96	4.5%
Administrative Assistant IIs (Data Entry Operators) within DSHS PHL Division	20	$42,392	22.7%	13.0%	33	30.0%
Psychiatrists at SSLCs within HHSC CPSO Division	19	$292,225	15.2%	9.5%	243	36.8%
Nurse II-IVs within DSHS CHI Division	19	$72,847	10.3%	13.6%	77	31.6%
Contract Manager I-IIs in PCS within HHSC COO Division	19	$102,773	9.9%	17.4%	30	21.1%
Public Health Prevention Specialists within DSHS RLHO Division, Region 5/6	17	$51,173	10.5%	15.0%	125	11.8%
Financial Analyst II-IVs in Compliance and Quality Control within HHSC CPRO Division	13	$79,191	16.0%	7.1%	364	15.4%
Psychologist I-IIIs at SHs within HHSC CPSO Division	13	$122,348	26.0%	13.3%	257	38.5%
Financial Analyst III-IVs within HHSC CIO Division	13	$88,700	23.1%	0.0%	0	53.9%
Program Managers in CS within HHSC CPSO Division	12	$65,883	15.1%	7.7%	36	83.3%
Management Analyst II-IVs within HHSC CIO Division	10	$76,870	8.7%	44.4%	102	30.0%

Strategies to Meet Workforce Challenges

Below are the current and future targeted strategies to address identified workforce challenges.

Recruitment Strategies Across Program Areas

- Use social media, HR hiring platforms, and electronic job boards. Including industry-specific and professional associations with job boards.
- Attend career fairs, including industry-specific job fairs and events.
- Leverage network of internal and external stakeholder relationships.
- Create partnerships with educational institutions.
- Identify emerging talent through internships, Early Career Programs, and mentorships.
- Develop promotional materials for hard-to-fill job openings.
- Generate applicants through the Texas Workforce Commission (TWC) for Veterans Services and part-time workers.
- Promote, post, and hire from within.
- Use public engagement and offline marketing tools to target specific job openings.
- Create a job fair toolkit supporting the ability to interview on-the-spot.
- Promote and share the benefits of state employment.
- Use digital ad campaigns and search engine marketing.
- Survey new staff in orientation to gather feedback to refine recruiting tactics.
- Leverage a positive work culture to promote and incentivize employee referrals.
- Increase industry visibility to skilled professionals by having department leaders represent the agency at state and industry conferences.
- Build talent pipelines for certain hard-to-fill or critical roles.
- Seek applicants statewide and recruit outside of Texas and distribute notifications of jobs through state and national outlets.
- Continually review and revise job postings for clarity, benefit references, and to ensure accurate applicant screening criteria are listed on postings.
- Collaborate with the Human Resources Talent Acquisition Office to have job openings spotlighted at job fairs.

- Train hiring managers on the processes of applicant selection, interviewing, and onboarding.
- Streamline interviews for proper applicant feedback and to reduce hiring time.
- Develop and expand the use of realistic job previews.
- During recruitment, share examples where training, professional certifications, and conference attendance are paid.
- Conduct market salary data analysis to help address and better align salaries with market pay.
- Consider the size and structure of HHS to develop a unique approach to compensation.
- Promote work life balance.
- Use a tracking system to monitor open positions and vacancy rates on a weekly basis and track recruitment efforts at each step in the hiring process.
- Audit vacant positions to more clearly reflect the job duties.
- Improve the naming convention of job titles on postings by including the working title, rather than a generic one.
- Post jobs multiple times to raise listings back to the top of the search list if no qualified applicants apply.
- Explore "return-ships," professionals with significant work history who want to re-enter the workforce.
- Emphasize experience over formal education where appropriate, expanding the applicant pool.
- Encourage existing staff to share job postings to encourage recruitment of qualified candidates.
- Implement a Disaster Volunteer Management Program to introduce volunteers to the department and the job opportunities available.
- Consider fellowships to bring in talented individuals who could be retained in the future.
- Consider involving Public Health and other college students in volunteering, completing their practicum experience, and designing a capstone, thesis, or dissertation project under a DSHS staffer. This initiative could help prepare them to become future employees.
- Resume the DSHS Public Health Fellowship Program.

- Develop a paid summer internship with the University of Texas (UT) Biotech Skill Up program for students seeking laboratory careers upon graduation, which provides interns with hands-on experience during an eight-week rotation at the DSHS Laboratory.
- Advertise the Public Service Loan Forgiveness (PSLF) program to potential applicants by highlighting that HHS agencies are qualifying employers and provide information regarding PSLF program requirements to new employees.

Retention Strategies Across Program Areas

- Continue robust employee appreciation events, recognition, and awards programs.
- Use employee surveys and hold feedback sessions to communicate results.
- Use salary equity adjustments where appropriate.
- Administer stay interviews and surveys.
- Promote workplace wellness initiatives, including mental health.
- Provide leadership development to strengthen the leadership bench through program-specific initiatives and other HHS leadership programs.
- Focus on internal promotions as an avenue for career advancement.
- Strengthen employee connection and engagement efforts.
- Educate staff on the PSLF program.
- Hold division, regional and department all-staff meetings, town halls and lunch and learn sessions to promote staff communication and team building.
- Use the biennial Survey of Employee Engagement as a tool for continuous feedback and to define new opportunities for improvement.
- Solicit process-improvement ideas from team members and create opportunities to collaborate in workgroups to develop and implement process-improvement initiatives.
- Actively evaluate workload levels and staffing needs to ensure the division can effectively support the agency’s data-driven goals.
- Encourage leadership to conduct weekly or bi-weekly one-on-ones with direct reports.
- Continue to regularly evaluate and balance employee workloads to ensure effective distribution of responsibilities.

- Conduct regular performance evaluations with the opportunity to provide feedback to managers.
- Generate development plans for staff outlining areas for growth.
- Continue to award administrative leave for outstanding performance.
- Develop a succession planning framework.
- Develop mentoring, coaching, and job shadowing programs.
- Cross train staff to help prepare for future roles and ensure continuity of effort.
- Provide targeted training to address individual employee skill gaps.
- Continue team building and collaboration efforts that include coordinating teams across cities, regular workgroup meet ups, and cross department workgroups.
- Continue positive work culture activities such as social connections and regular manager check-ins.
- Conduct quarterly leadership meetings for knowledge sharing and leadership development.
- Continue to monitor staff salaries, provide merit awards, and provide equity adjustments where needed.
- Develop a standardized division and/or agency-wide New Employee Orientation (NEO) to improve retention and engagement.
- Create an Essentials for Leaders SharePoint page with tools, and best practices for managers and directors.
- Host social events for new hires several times a year to promote connections.
- Start a volunteer group for staff to assist in planning and hosting quarterly engagement opportunities, with a particular focus on enabling regional staff to connect and engage.
- Add team lead roles and reclassify positions to better align work and roles and provide backup for managers.
- Audit positions to accurately reflect job duties during disaster activation.
- Submit photos with descriptions from various facilities to all staff. The photos provide a sense of unity, and insight into everyday activities at the hospitals and state supported living centers.
- Use the Creative Ideas Portal to allow staff members to submit process improvements ideas.
- Advocate for additional staff when workloads are challenging.

- Track turnover in roles that are historically difficult to retain.
- Monitor turnover metrics before and after implementation of new strategies, with a focus on critical and high-turnover roles.

References

[1] Data source for Section 3, Workforce Demographics: HHS Centralized Accounting and Payroll/Personnel System - Human Capital Management (CAPPS-HCM) as of 8/31/23, 8/21/24, and 8/31/25. Note: Percentage totals may not equal 100% due to rounding.

[2] Data source for Section 4, Turnover: HHS CAPPS-HCM for FY 2023-2025. Note: Legislative transfers are not considered separations.

[3] State Auditor's Office, "Classified Employee Turnover for Fiscal Year 2025," February 2026 Report No. 26-703 web page https://sao.texas.gov/reports/main/26-703.pdf, last accessed 3/03/26. Note: The State Auditor's Office does not consider transfers between state agencies as a loss to the state and therefore does not include this turnover in their calculations.

[4] Death accounted for 1.0% of separations (76 separations).

[5] Data source for Section 5, Retirement Projections: HHS CAPPS-HCM as of 8/31/25, 8/31/24, 8/31/23. Note: Retirement estimations include return-to-work retirees.

[6] U.S. Facts. Retrieved March 17, 2026, from https://usafacts.org/answers/what-is-the-unemployment-rate/state/texas/.

[7] Economic News Release. U.S. Bureau of Labor Statistics. Retrieved March 17, 2026, from https://www.bls.gov/news.release/laus.nr0.htm.

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[9] U.S. Census Bureau QuickFacts: Texas. Census Bureau QuickFacts. Retrieved January 12, 2026, from https://www.census.gov/quickfacts/TX.

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[11] U.S. Census Bureau QuickFacts: Texas. Census Bureau QuickFacts. Retrieved January 12, 2026, from https://www.census.gov/quickfacts/TX.

[12] Agency divisions listed in Table 9 reflect HHS organizational structure during fiscal year 2025.