

Strengthening the Direct Care Workforce: Suggested Approaches from a National Panel of Experts

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Objectives

- To increase knowledge of a national expert panel's suggested approaches to improve the supply and retention of direct-care workers and family caregivers, their training needs, and the need to evaluate outcomes for care receivers and providers
- To better understand provisions in the Patient Protection and Affordable Care Act that have the potential to impact the long-term care workforce

Background

Distinctions between family caregivers and direct-care workers have become blurred

- Some family members perform caregiving functions that used to be done only by paid professional providers
- Family members can become paid helpers under consumer-directed care programs
- Many direct-care workers also serve as family caregivers

Expert Panel Project

- Cooperative agreement between Benjamin Rose Institute on Aging and Administration on Aging (2007-2010)
- Assistant Secretary Greenlee's interest in the direct care workforce and family caregivers
- Convened a national panel of experts on the (non-institutional) long-term direct care workforce
- Task: Frame the panel's work and prepare a report on programmatic and policy-related considerations for strengthening this workforce

National Panel of Experts

- Lisa Alecxih (Lewin Group)
- Roger Auerbach (Auerbach Consulting)
- Clarence Brown (DC Office on Aging)
- Lynn Kellogg (Michigan Region IV AAA)
- Peter Kemper (Penn State)
- Kathy Leitch (Washington State Aging & Disability Services Administration)
- Carol O'Shaughnessy (ex officio)
(National Health Policy Forum)
- Martha Roherty (NASUAD)
- Joseph Ruby (Ohio 10B AAA)
- Robyn Stone (IFAS, AAHSA)
- Donna Wagner (Towson University)

AoA's Questions to the Panel

- How best to use AoA's mandate, authority, and influence to strengthen the long-term direct care workforce?
- What conceptual framework can be used to find answers to this question?

Conceptual Approach

Focus on direct-care workers and family caregivers:

- How to increase **supply** to meet growing needs for home- and community-based services
- How to improve **retention** in the role (and, for family caregivers, in outside employment)
- How to improve **readiness** or capacity of these helpers to provide care
- How to maximize positive **outcomes** for care recipients and caregivers
- Impact of the 2010 Patient Protection and Affordable Care Act, including the CLASS Act

Conceptual Approach

Potential actionable areas for AoA:

- New or expanded labor pools
- New education and training initiatives
- New interventions and program initiatives
- New or amended public policies
- Potential partnerships with other government agencies and community organizations

Panel's Activities

- Pre-meeting survey to complete matrix
- Formulate preliminary recommendations
- Two in-person meetings
- Critique and prioritize recommendations
- Produce final report

Strengthening the Direct Care Workforce for Long-term Services and Supports

Selected Suggested Approaches
from the Expert Panel
for Direct Care Workers (DCWs)

Increasing Supply and Retention

- Extend existing Fair Labor Standards to home care workers
 - Currently labeled as ‘companions’ and thus exempt from living wages/benefits
- Provide incentives and technical assistance to states to develop statewide worker registries that match consumers with caregivers
 - Currently only 24 states have registries
- Through ADRC grants, support linkages between ADRCs and existing worker registries in states that have them
 - Adds to the ADRC role as information & referral portals
 - Market registry to encourage immigrants, displaced older workers & those with DD to apply for DCW jobs

Improving Readiness

- Explore mechanisms for funding child care and other expenses while DCWs receive training
- Ensure training programs address--
 - Cultural sensitivity
 - Needs of immigrant DCWs for whom English is a second language
 - Pre-employment component: hands-on training; what the job is like
 - Post-employment: peer-to-peer mentoring

Improving Readiness

- Use OAA Title IV funds for evidence-based demonstrations, training and education programs for DCWs
- Encourage partnerships for training (and recruiting) DCWs in home care: WIBs, Dept. of Labor, community colleges, Dept. of Education, labor unions, Nursing Boards
- As part of the Reauthorization of the OAA, include DCW training programs focused on the core competencies required by the Patient Protection and Affordable Care Act

Improving Readiness for DCWs and Family Caregivers

- Support demonstration-evaluation programs that build on core competencies to train paid DCWs and family caregivers jointly
 - Promote shared understanding of roles
 - Issues related to care coordination
 - Enable paid DCWs to educate family caregivers about safe and effective care techniques (e.g., lifting)
 - Family caregivers to train DCWs in person-centered care
 - Possibly collaborate with the Department of Labor to implement & fund programs

Improving Outcomes

- Have AAAs raise standards by rewarding providers who achieve desired outcomes for clients
 - Reduced NH admissions among HCBS waiver participants; fewer hospital re-admissions & emergency dept. visits
- Incentivize provider organizations to implement, measure and report outcomes for DCWs
 - Decreased DCW turnover
 - Standardized collection of turnover data
 - Increased number of job advancements
 - Fewer unfilled positions

Strengthening the Direct Care Workforce for Long-term Services and Supports

Selected Suggested Approaches
from the Expert Panel
for Family Caregivers

Increasing Supply and Retention

- Continue supporting expansion of consumer-directed care programs
 - Promote peer-to-peer care
 - Allow spouses, other family members, non-kin and fictive kin to qualify as paid caregivers
- Identify ways to fund home remodeling, home additions, and installation of assistive technologies in partnership with the construction trades, home remodelers, HUD, and technology companies
- Pursue strategies to expand the Family and Medical Leave Act to accommodate family caregivers' needs and promote wage replacement

Increasing Supply and Retention

- Study new care models in which unpaid caregivers can bank their work hours for later use when they or their family members need care
- Encourage the Aging Network to support community caregiver associations
- Increase funding for the National Family Caregiver Support Program to enhance services
 - Including respite services with 24-hour availability

Improving Readiness

- Support hands-on training programs for family caregivers
 - Body mechanics, lifting, transferring, bathing, using assistive devices, managing medications, etc.
 - In consumer-directed programs, training in fiscal management, supervision of DCWs, and case management
- Determine the capacity of the Aging Network to offer 24/7 hotlines for caregivers to provide information, consultation and counseling on care-related problems
- Develop core competencies for Aging Network professionals to implement in their work with caregivers

Improving Outcomes for Care Recipients and Caregivers

- Promote the use of validated caregiver assessment tools
 - To identify training, service and support needs
 - For use when care recipients' needs increase or change
 - Discharge from hospital, rehabilitation unit, nursing home
 - Direct impact on care recipient's successful transition back to the home setting
 - Possible adverse effects of assessments
 - Negative impact on supply
 - Possibility of accusations of elder neglect/abuse
 - Lack of caregiver receptiveness to offers of help, training

Health Care Reform

Patient Protection and Affordable Care Act
(March 2010)

Community Living Assistance Services and
Supports (CLASS) Act

Health Care Reform

- National Health Care Workforce Commission: recommended a national credentialing program for personal care workers
- Demonstration grants for 6 states for 3 years to develop core competencies for personal and home care aides, pilot training curricula, and set up certification programs (\$15 million; 2010-2012)

Health Care Reform

- Training opportunities for DCWs in LTC settings (\$10 million; 2011- 2013)
- Geriatric Education and Training & Career Awards: must include family caregiver training
- Elder Justice Act (\$67.5 million; 2011-2014): incentives to enhance recruitment, training and retention of DCWs and improve management practices in LTC; commissions study to establish National Nurse Aide Registry
- Personal Care Attendants Workforce Advisory Panel established: to advise on salaries, wages, benefits, & workforce adequacy

Health Care Reform

- National Background Check Program: background checks for all employees with direct patient access in LTC; extends current 7 state pilots and agreements with newly participating states
- Community First Choice Option: provides attendant services and support under Medicaid for those with NH level of care & incomes up to 150% of FPL; states receive enhanced FMAP rate

Health Care Reform

CLASS Act

New LTC insurance program with benefit plan for enrollees who develop functional limitations to purchase community living services

Features:

- Automatic enrollment for those 18 & over and employed (opt out option)
- Financed by voluntary payroll deductions
- Vesting period is 5 years
- Cash benefit is not less than average of \$50 per day with no lifetime or aggregate limit
- Establishes the Personal Care Attendants Workforce Advisory Panel

Advocacy Issues in Health Care Reform

- Promote the involvement of family caregivers in the care of older adults served by medical/health homes
- Invest in a significant role for the Aging Network in care transition and care coordination models
- Models should emphasize family involvement and education regarding anticipated changes in caregiving demands

Barriers in Health Care Reform

- Most states do not have direct care workforce development policies that align with rebalancing goals and federal incentives for expanded HCBS
- Efforts underway to dismantle the ACA by direct repeal or refusal to fund
- The broad legislative constructs will be subjected to rule making that will lay out details for implementation
- Test will come at state level with wide variations related to each state's Medicaid policy
- Current economic climate and states' budgetary woes

Conclusions: Top Priorities Endorsed by Panelists

- Support demonstrations and evaluations of specialized DCW training programs so they can assist with managing chronic conditions associated in older adults; and those with physical disabilities;
- Pursue strategies to amend the tax code to include Caregiver Tax Credits to ease financial burdens of family caregiving
- Provide requested information to the National Health Care Workforce Commission on evidence-based best-practice programs to advance training, support and retention of DCWs and family caregivers
- Collaborate with CMS on infrastructure grants to enable AAAs to expand HCBS, serve a private-pay market, and administer managed care programs

Thank you!

Strengthening the Direct Care Workforce for Long-term Services and Supports: Suggested Approaches From a National Panel of Experts can be found at:

www.benrose.org → Policy → Projects & Reports

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Discussion

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