
STRENGTHENING THE LONG-TERM CARE WORKFORCE

OCTOBER 24, 2019

SAMANTHA SCOTTI, NCSL

STEPHEN CAMPBELL, PHI



NATIONAL CONFERENCE OF STATE LEGISLATURES

- Bipartisan membership organization
 - All 50 states and the territories
 - 7,383 state legislators
 - All state legislative staff (30,000+)
- Goals:
 - To improve the quality and effectiveness of state legislatures
 - To promote policy innovation and communication among state legislatures
 - To ensure states a strong, cohesive voice in the federal system
- Research, education, technical assistance



STRENGTHENING THE LONG-TERM CARE WORKFORCE

- **Presentation overview:**

- Direct care workers in Maine: who are they and what are the challenges, Stephen Campbell, PHI
- Long-term care workforce: Legislative Levers, Samantha Scotti, NCSL
- Recruitment and Retention Initiatives: State Examples, Stephen Campbell, PHI



THE DIRECT CARE WORKFORCE IN MAINE

STEPHEN CAMPBELL
DATA AND POLICY ANALYST
PHI

OCTOBER 24, 2019

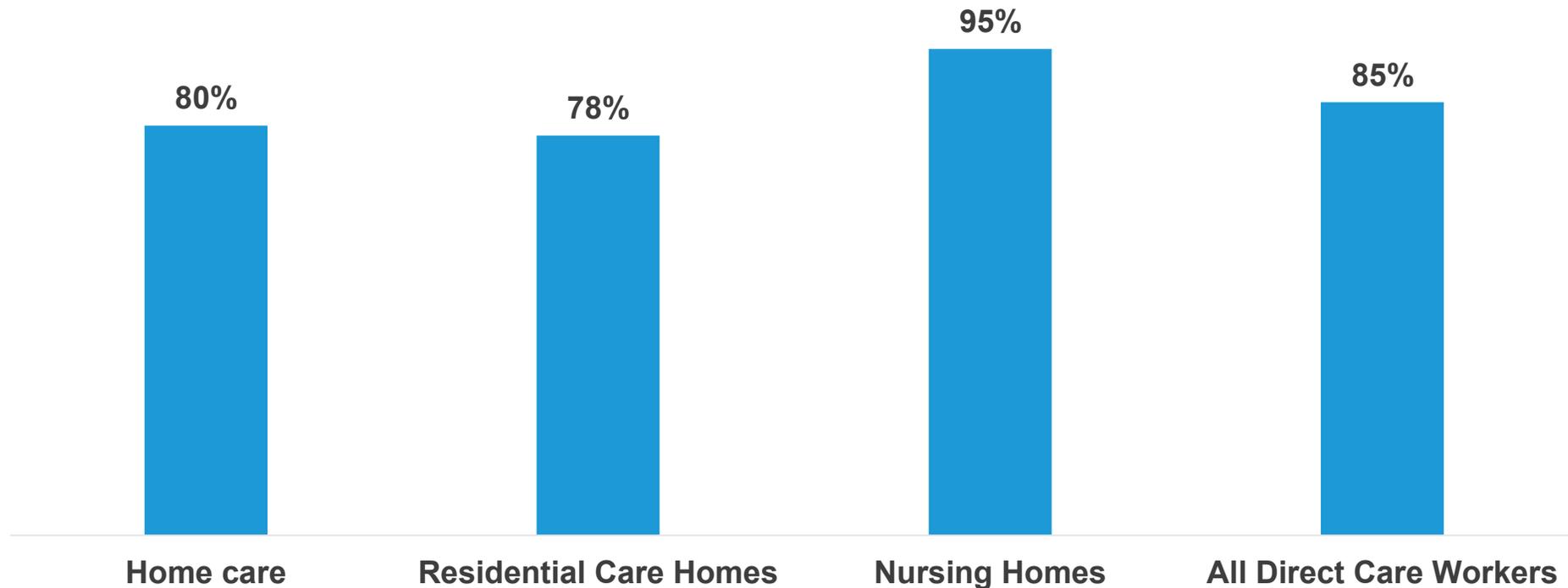




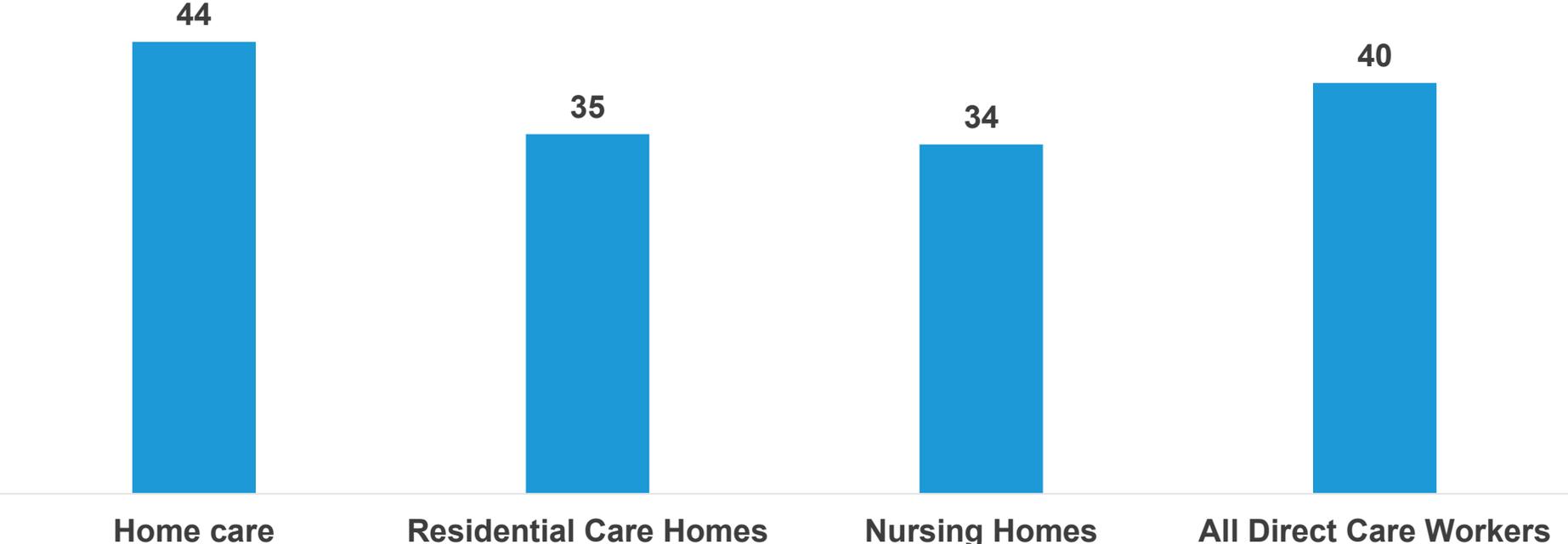
WHO ARE

DIRECT CARE WORKERS IN MAINE?

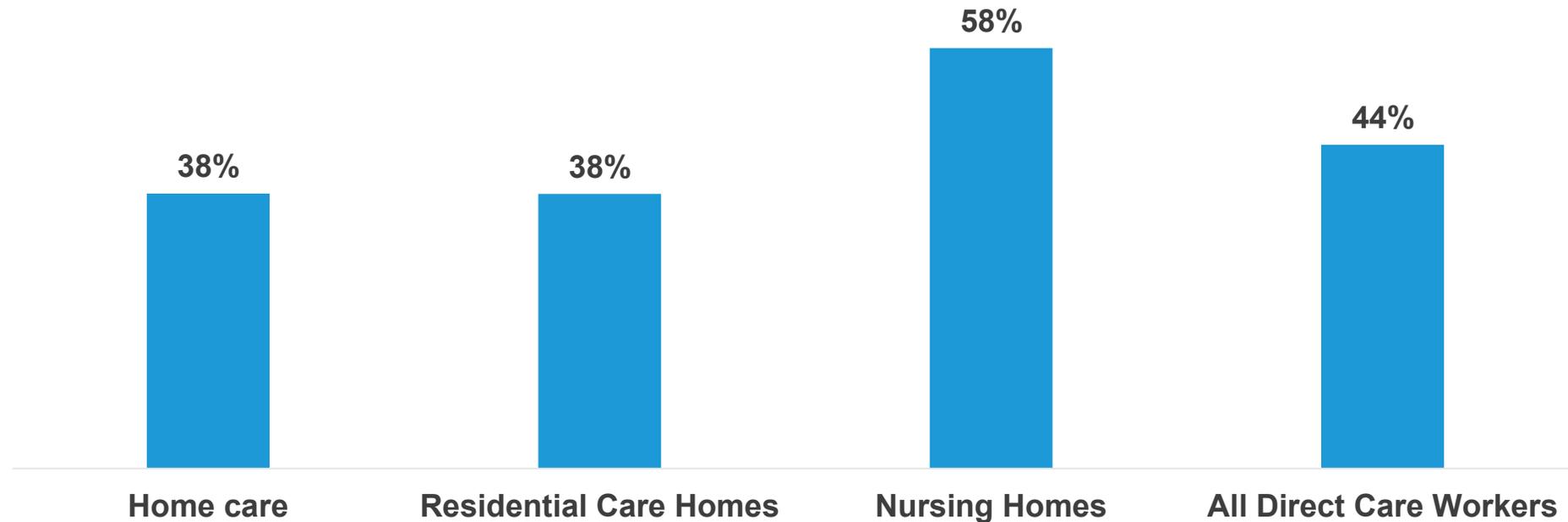
6 IN 7 DIRECT CARE WORKERS ARE WOMEN



DIRECT CARE WORKERS HAVE A MEDIAN AGE OF 40 YEARS OLD

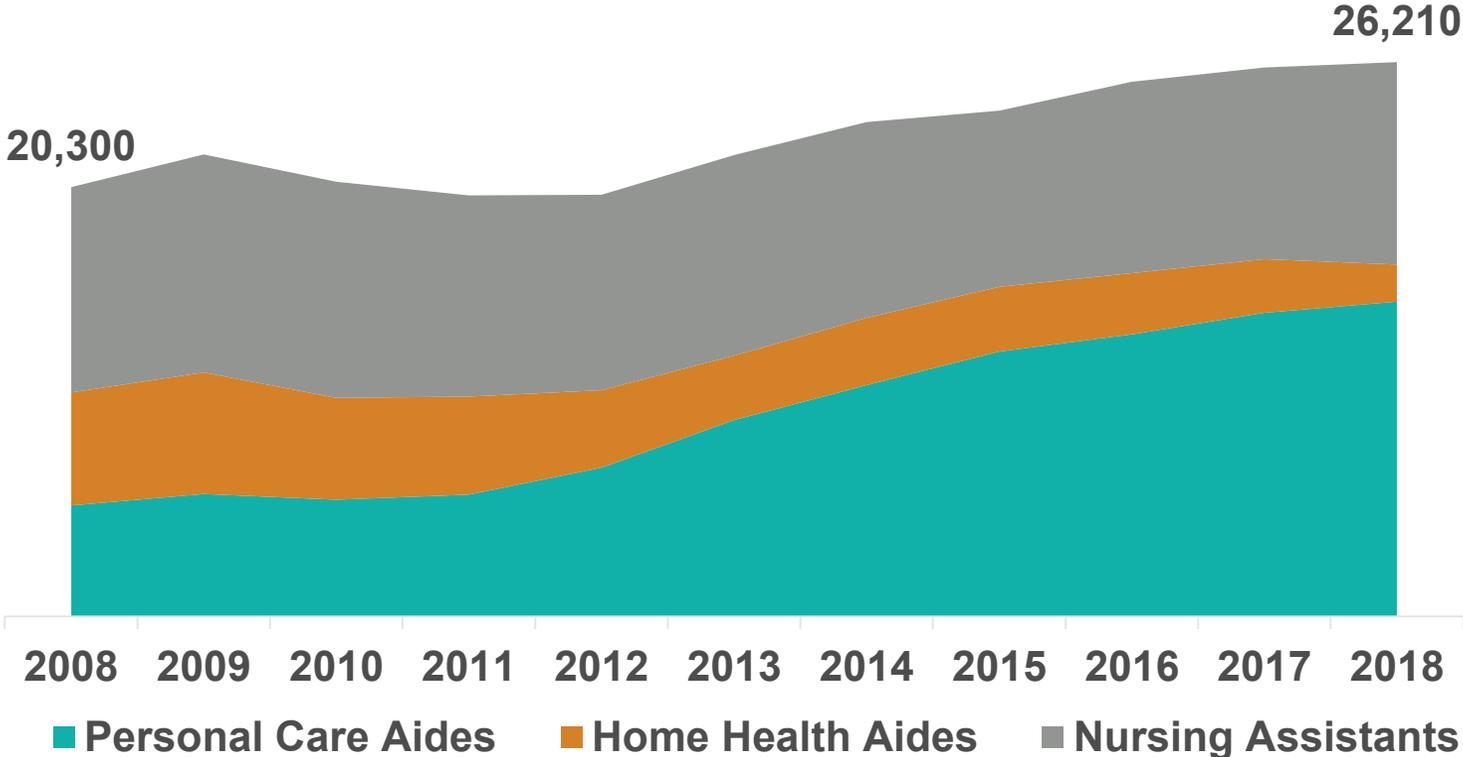


2 IN 5 DIRECT CARE WORKERS HAS A HIGH SCHOOL EDUCATION OR LESS



WHAT ARE THE
THE CHALLENGES
THAT THEY FACE?

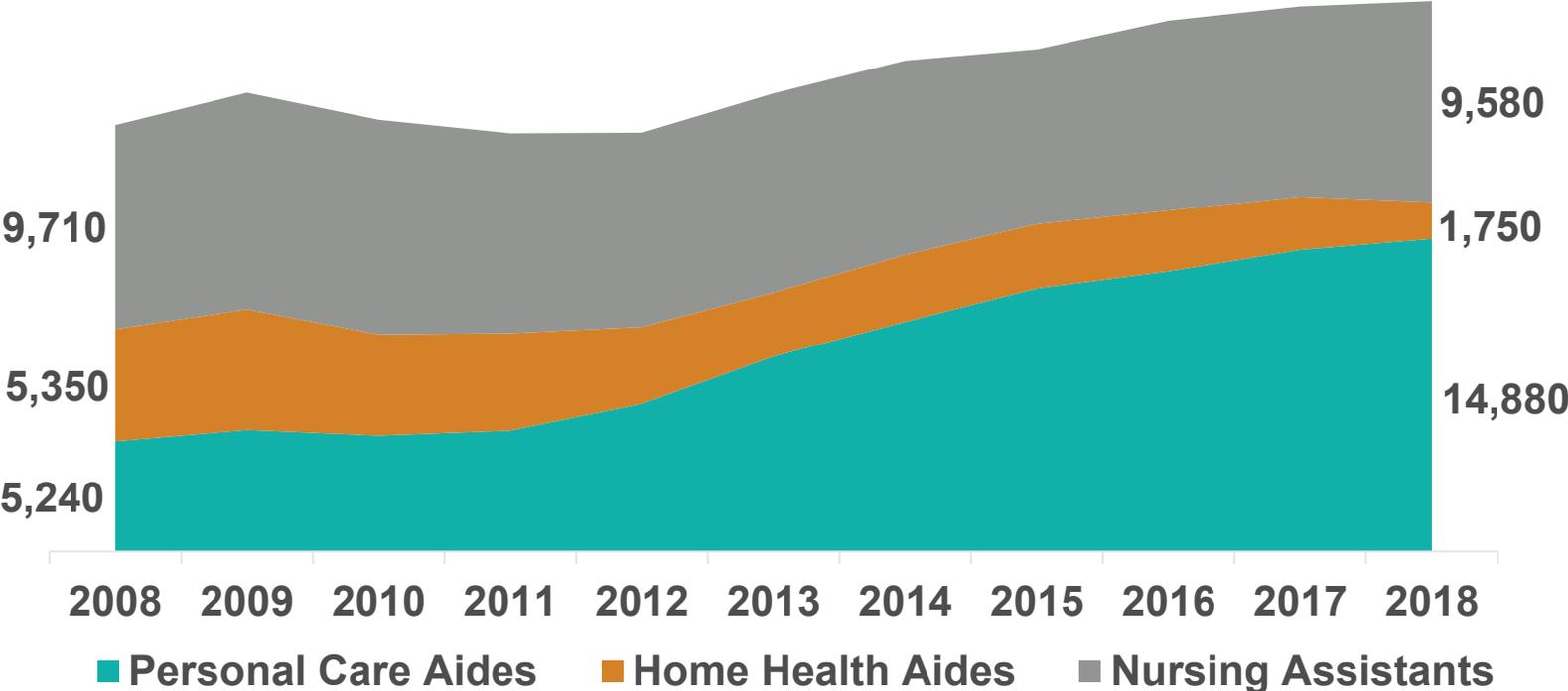
DEMAND HAS INCREASED IN THE PAST DECADE



PHI. "Workforce Data Center." Last modified August 30, 2019. <https://phinational.org/policy-research/workforce-data-center/>.



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PHI. "Workforce Data Center." Last modified August 30, 2019. <https://phinational.org/policy-research/workforce-data-center/>.



THREE MAJOR FACTORS DROVE UP DEMAND



**GROWING POPULATION
OF OLDER ADULTS**

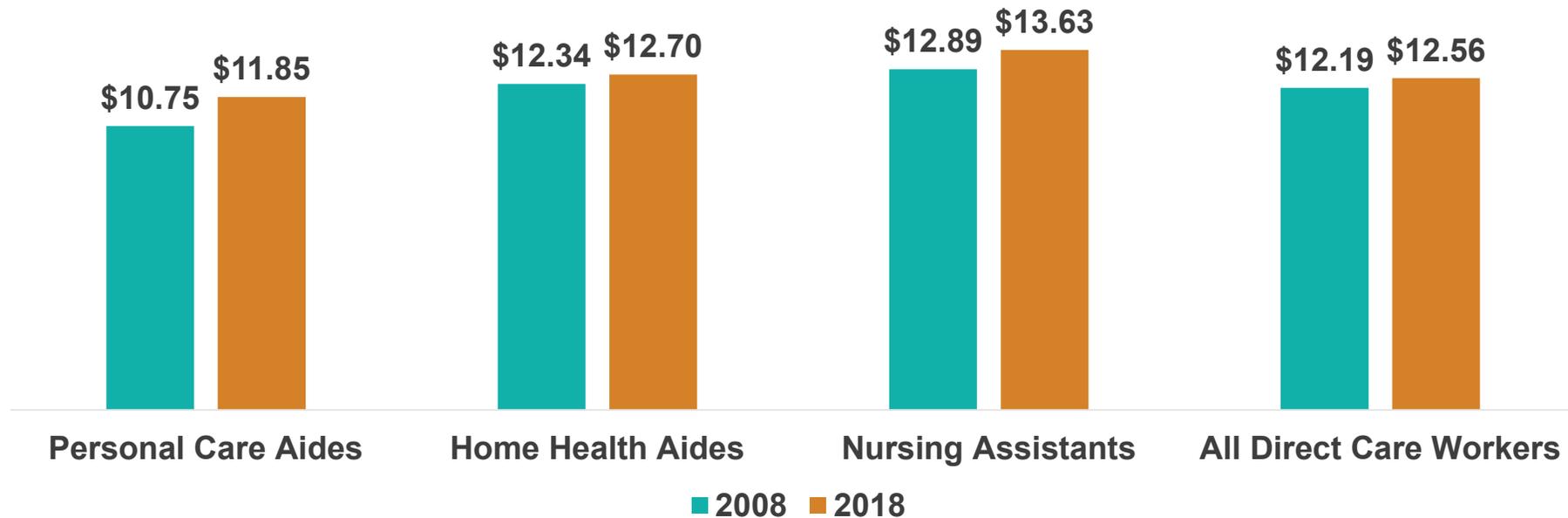


**CONSUMER
PREFERENCES
FOR CARE**

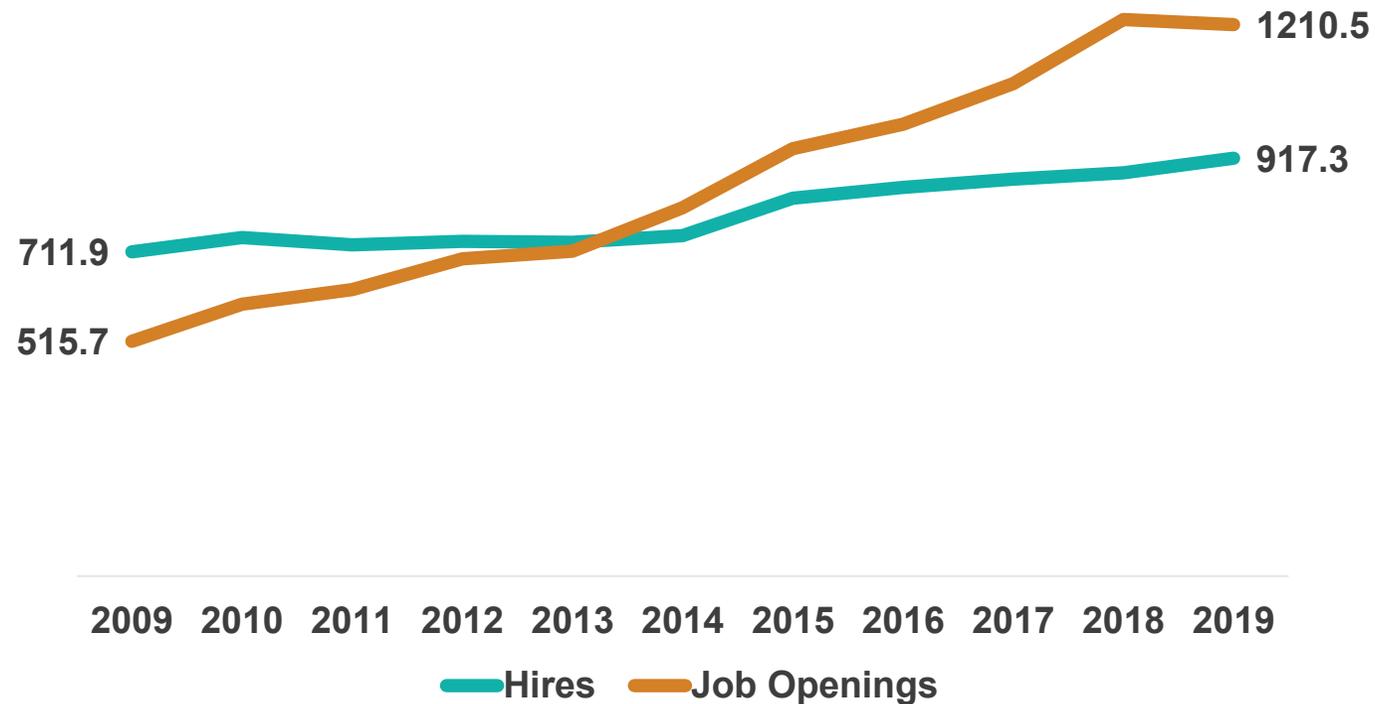


**POLICY AND
PROGRAMMATIC
CHANGES**

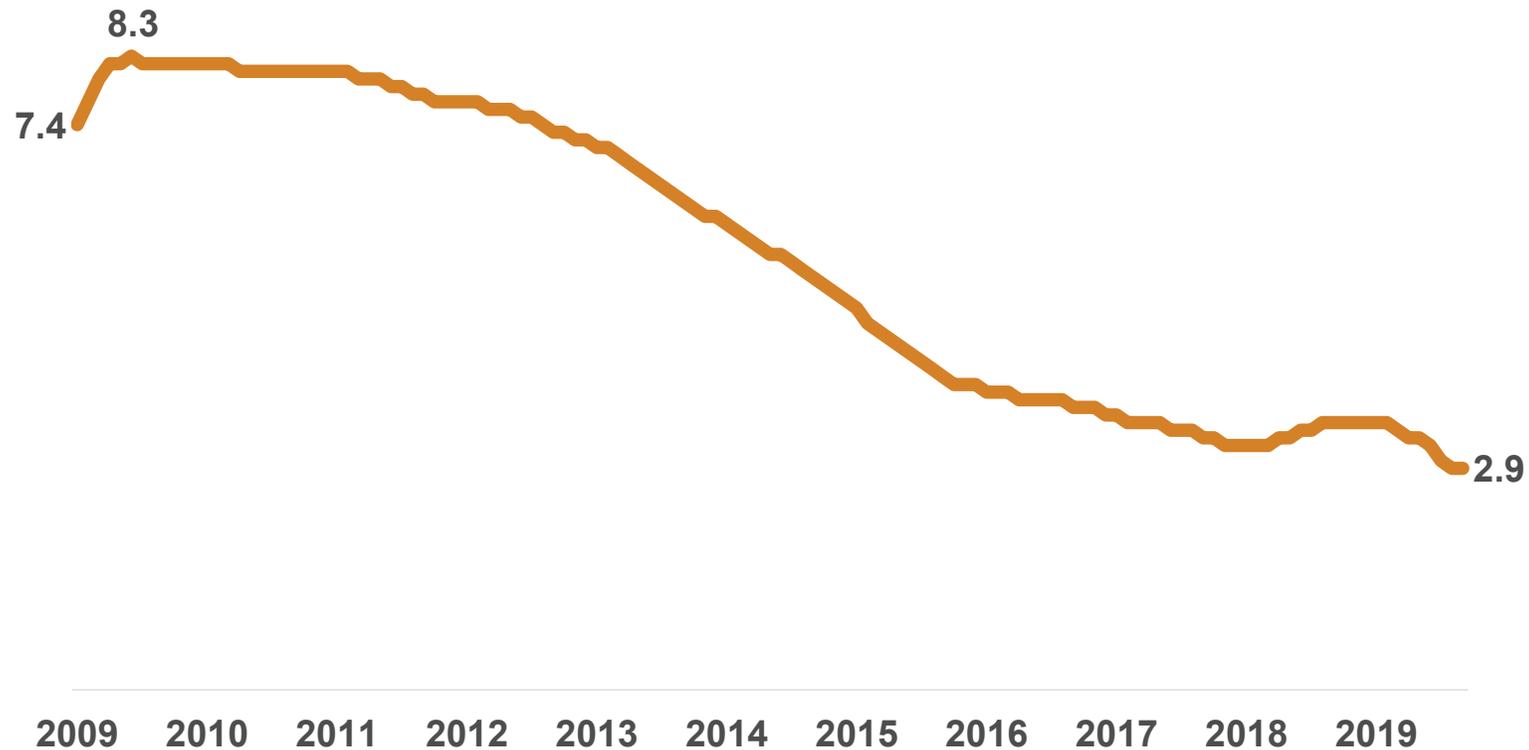
WAGES HAVE STAGNATED IN THE PAST TEN YEARS



THE LABOR MARKET IS EXTREMELY TIGHT



THE LABOR MARKET IS EXTREMELY TIGHT

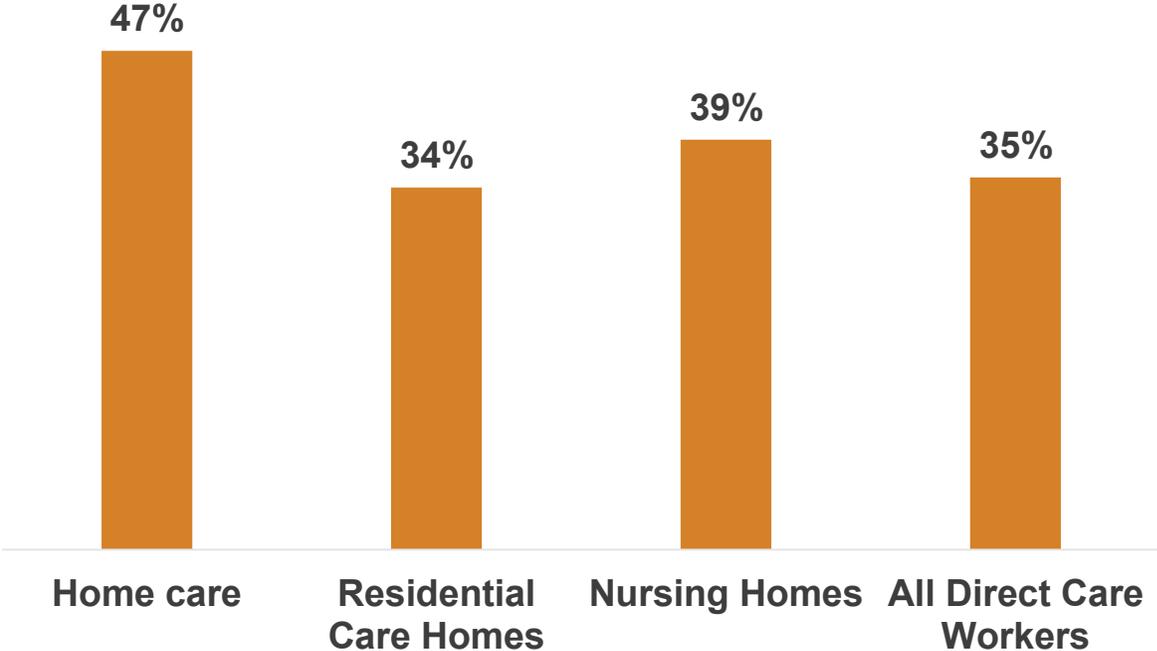


U.S. Bureau of Labor Statistics (BLS), Local Area Unemployment Statistics. 2019. *Local Area Unemployment Statistics*. Washington, D.C.: BLS. <https://www.bls.gov/lau/>; analysis by PHI (October 22, 2019).



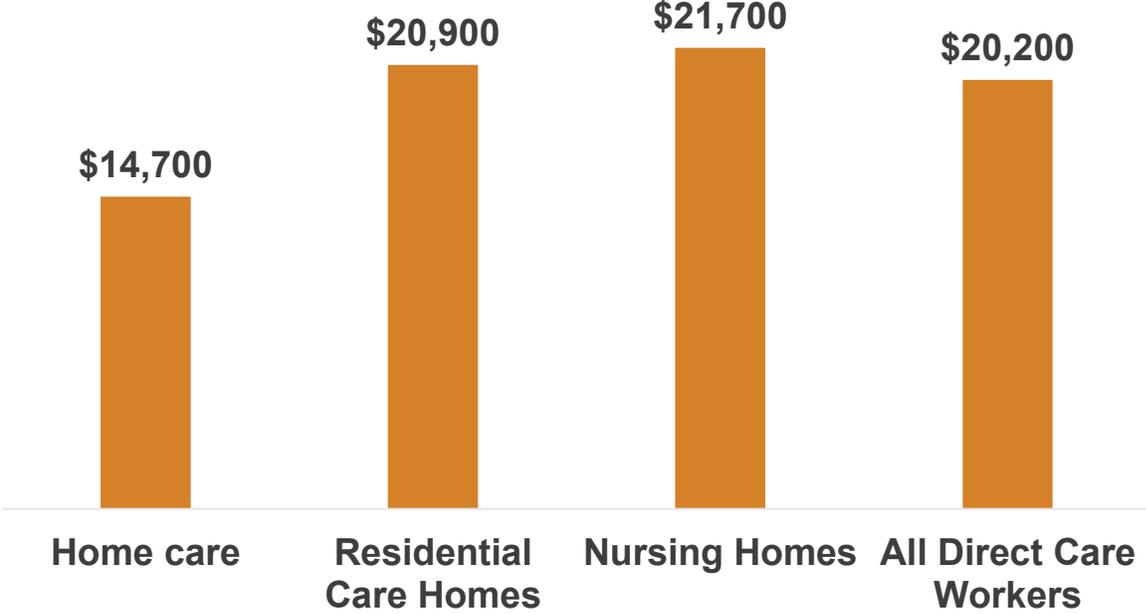
LOW WAGES AND PART-TIME HOURS RESULT IN ECONOMIC HARDSHIP.

**1 IN 3
WORKS
PART TIME**



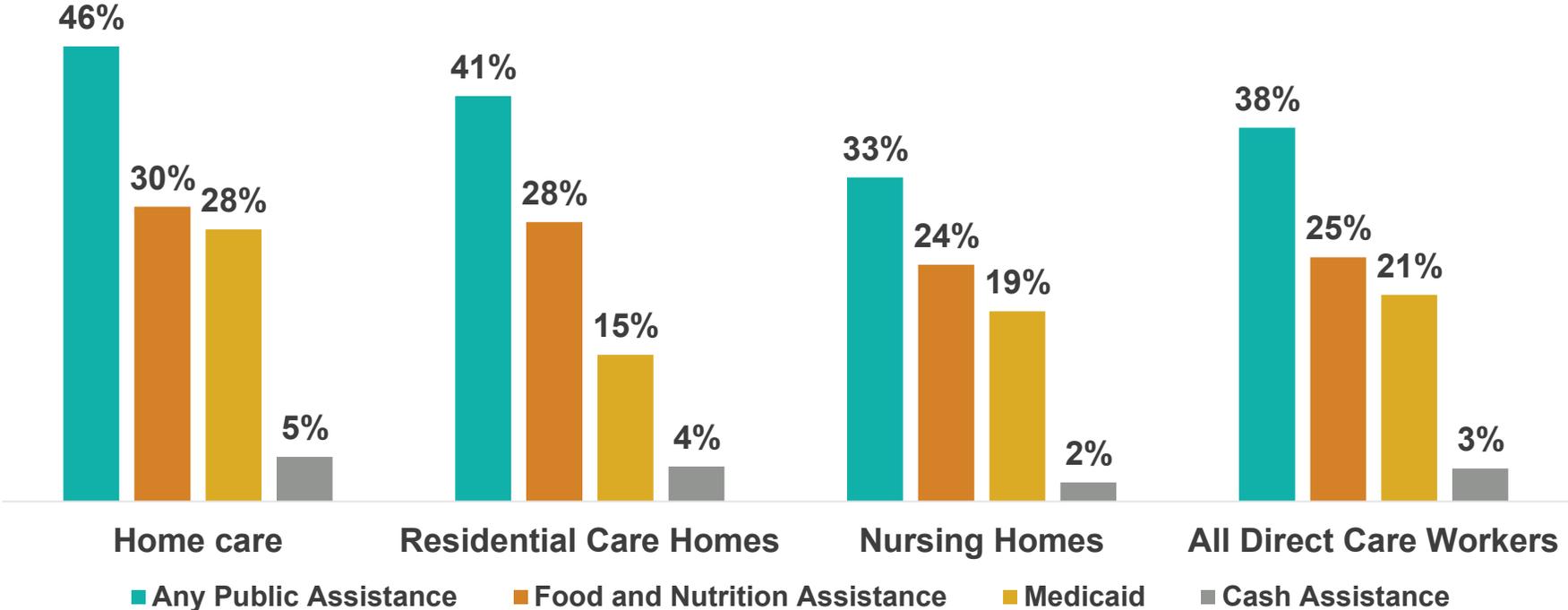
LOW WAGES AND PART-TIME HOURS RESULT IN ECONOMIC HARDSHIP.

MEDIAN
PERSONAL
EARNINGS
ARE LOW

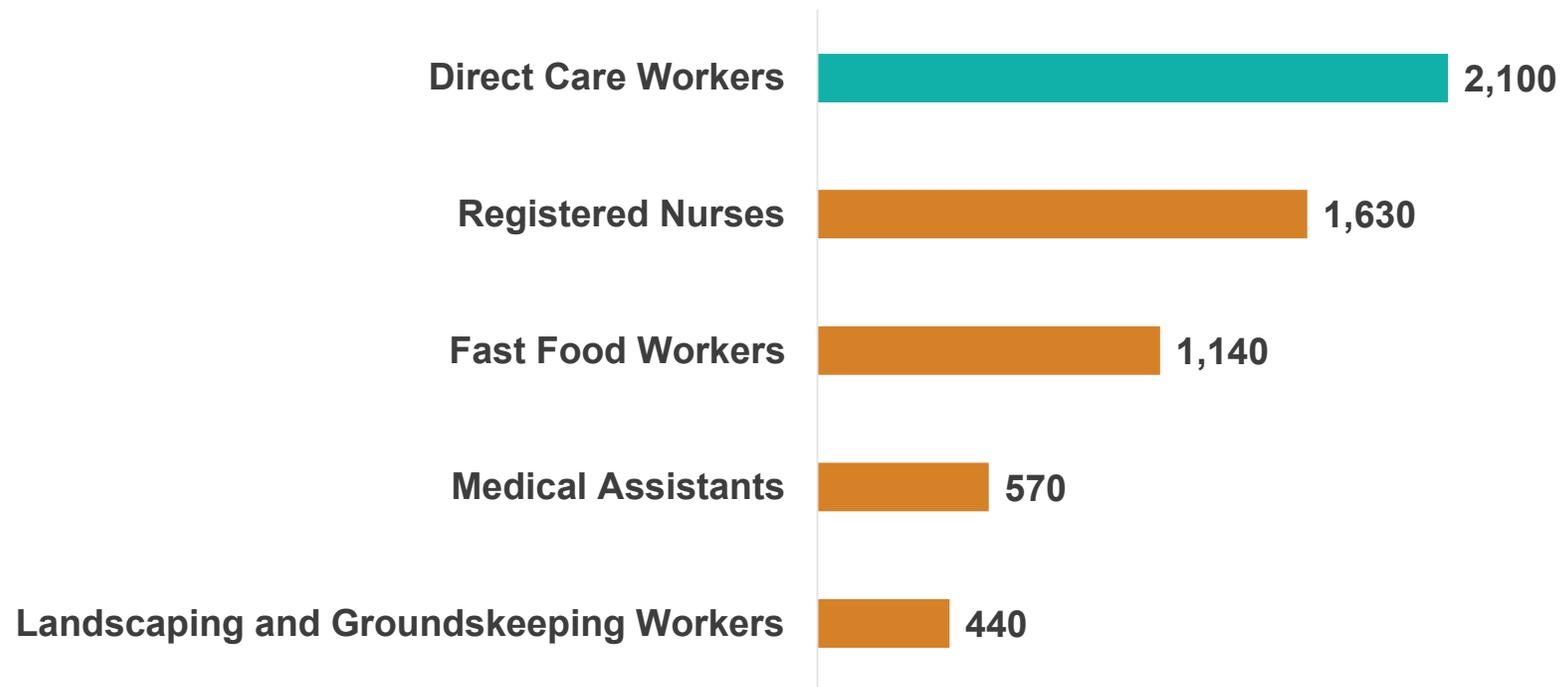


LOW WAGES AND PART-TIME HOURS RESULT IN ECONOMIC HARDSHIP.

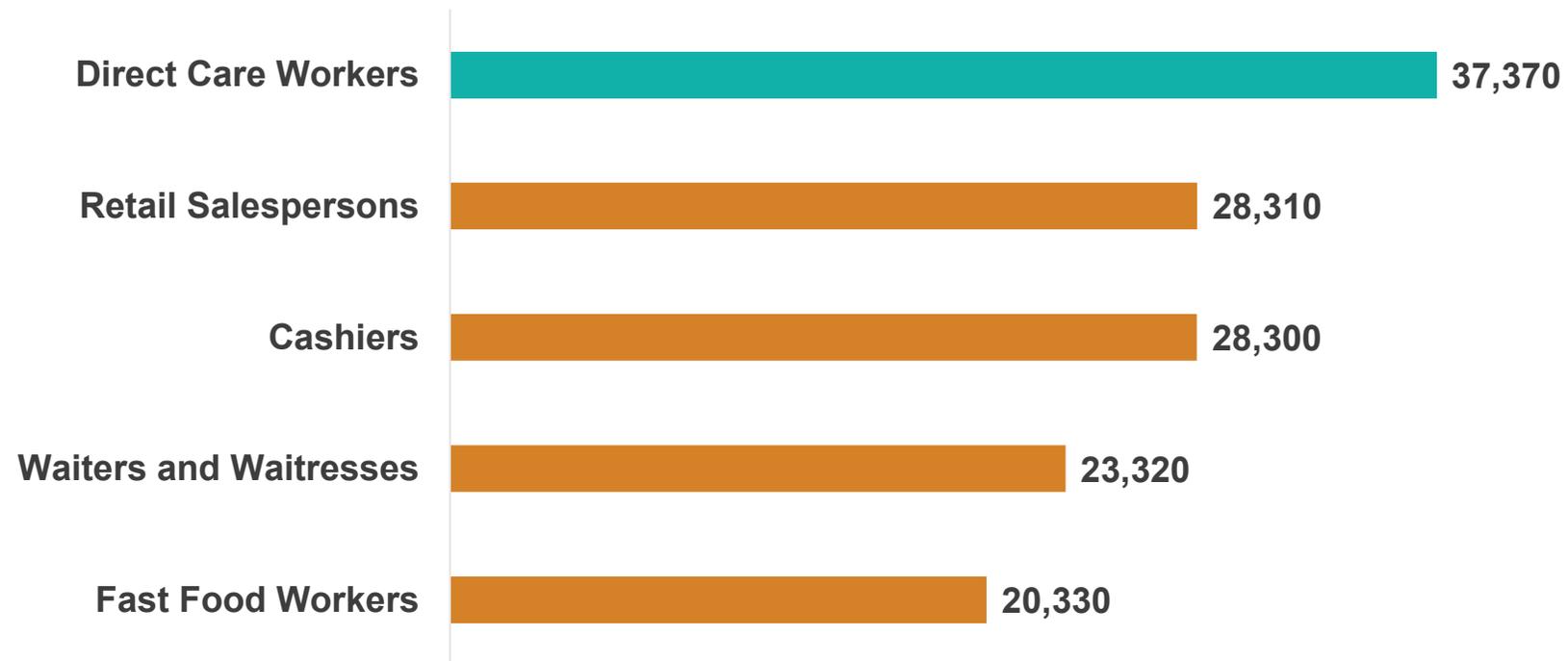
**2 IN 5
RELY ON
PUBLIC
ASSISTANCE**



BY 2026, THIS WORKFORCE WILL ADD 2,100 NEW JOBS.



THERE WILL BE 37,370 JOB OPENINGS IN DIRECT CARE FROM 2016 TO 2026.



LONG-TERM CARE WORKFORCE: LEGISLATIVE LEVERS

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LONG-TERM CARE WORKFORCE: LEGISLATIVE LEVERS

- States consider various strategies to improve delivery of HCBS and to support the recruitment and retention of the direct care workforce as demand rises for home care.
 - Wages and Benefits
 - Workforce Protections
 - Training
 - Other initiatives



WAGES AND BENEFITS

- Colorado SB 238 (2019) establishes a new hourly minimum wage for employees who provide direct care.
- Maryland HB 166 (2019) increases the rate of reimbursement for community service providers, including direct care staff, each fiscal year (beginning with a 3.5% increase in 2019).
- New York S01507 (2019) provides funding for an average of a 2% pay increase for direct care workers in eligible state-funded programs.
- Wisconsin Act 59 (2017) increases the direct care portion of funds paid to managed care companies that go towards wages, bonuses, time off, or benefits through the general appropriations bill.

WORKFORCE PROTECTIONS

- Illinois HB 1288 (2015) provides for certain workplace protections, including reference to days off and workplace harassment.
- New York S6584 (pending) seeks to limit the number of hours that direct care workers work in a given week. It would limit hours to 60/week, “except in the case of extraordinary circumstances.”
- Nevada SB 232 (2017) provides for the mandatory payment of wages and, under certain circumstances, overtime wages for certain hours worked, limitations on deductions for food and lodging, rest breaks and days off.



TRAINING

- Washington Initiative 1163 (2011) expands learning objectives, increases training hours, and introduces certification requirements for PCAs. After meeting the certification requirements, PCAs can complete condensed training to become an HHA or a nursing assistant.
- Arizona addressed training by implementing a uniform, statewide and state-funded training system in 2012, following recommendations from their Direct Care Workforce Committee

ACCESS TO TRAINING

- West Virginia §16-5C-5(d) permits “the nonclinical instruction portions of a nurse aide training program approved by the Office of Health Facility Licensure and Certification to be provided through distance learning technologies.”



POPULATION-SPECIFIC TRAINING

- **Dementia Care**
 - Illinois SB 2301 (2016) establishes minimum training requirements for employees of home health agencies providing services for people with Alzheimer's and related dementias.
 - Oklahoma 2017 HB 1620 (2017) directs the State Board of Health to promulgate rules requiring dementia training in certain settings, including for home health agencies.
- **Fall Prevention**
 - Minnesota Statutes 144A.4795 establishes requirements for training content and competency evaluations for unlicensed personnel. This training includes the prevention of falls for providers working with the elderly or individuals at risk of falls.

OTHER INITIATIVES

- Scope of Practice:
 - New York [N.Y. Education Law §139-6908\(2\)](#)
 - Allows for expanded scope of practice for advanced home health aides (AHHAs). The expanded scope of practice includes “the administration of medications which are routine and prefilled or otherwise packaged in a manner that promotes relative ease of administration.”
- Task Forces and Report:
 - New Jersey [SB 959 \(2018\)](#)
 - Texas Health and Human Services Commission report [\(2018\) report](#)





Thank you!

Contact:

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RECRUITMENT AND RETENTION INITIATIVES

IMPROVE ENTRY-LEVEL AND ONGOING TRAINING



Building Training; Building Quality

State: Michigan

Additional Information:
tinyurl.com/y4c3y926



Prepare to Care

State: Iowa

Additional Information:
tinyurl.com/y6tqjpcg

**RAISE THE PROFILE AND
STRENGTHEN THE PIPELINE**





WisCaregiver Careers

State: Wisconsin

Additional Information:
tinyurl.com/y3abur7h

OPTIMIZE THE EXISTING WORKFORCE



Direct Support Connect

State: Minnesota

Additional Information:
<https://tinyurl.com/y3tj9oqn>

ENCOURAGE INNOVATION IN THE FIELD

development and problem-solving.



improve job satisfaction and care.



MEASURE PROGRESS OVER TIME



Recruitment, Retention, and Benefits Data

State: Texas

Additional Information:
tinyurl.com/y69fghmg

Position Type	Difference in recruiting new staff from 1/1/2018 - 12/31/2018? Please select one option for each Position Type
Attendants*	1 - Situation is worse (Harder to recruit)
Employment Services (SE, EA)*	0 - No staff of this type
Nurses (RNs, LVNs)*	2 - No difference
Specialists (PT, OT, Dietary, etc.)*	3 - Situation has improved (Easier to recruit)
Central Office Staff*	2 - No difference
Administrative and Operations Staff*	2 - No difference

Position Type	Number of staff (Full-time, Part-time, Temp, Medicaid, Non-Medicaid & Private Pay combined) on 12/31/2018	Number of staff who left:		Number of vacancies on 12/31/2018	Percentage of work hours filled w/OT or non-scheduled staff (Estimates accepted if unknown)	Average number of days to fill vacant positions (Estimates accepted if unknown)	Current starting wage for this type of position within your agency in 2018 (Hourly Rate)	Average wage for this type of position after 2 years of employment (Hourly Rate)
		1/1/2018 - 6/30/2018	7/1/2018 - 12/31/2018					
Attendants	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Employment Services (SE, EA)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Nurses (RNs, LVNs)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Specialists (PT, OT, Dietary, etc.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Central Office Staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Administrative and Operations Staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> %	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
TOTAL	0	0	0	0				

Length of Time with your Agency	Using the total number of staff from above, what is the length of time they have been with your agency?	
LESS than 6 months	<input type="text"/>	
BETWEEN 6 and 12 months	<input type="text"/>	
OVER 12 months	<input type="text"/>	
Total Staff by Length of Time	0	
Number of CPC clients (Medicaid, Non-Medicaid, Private Pay, etc. combined) actively enrolled on 12/31/2018	<input type="text" value="0"/>	
Is it more difficult for you to hire and keep CLASS attendants versus PHC attendants?		

Figure B-1. HCS/TxHmL Residential Attendants: Turnover vs 2-year Wage Growth

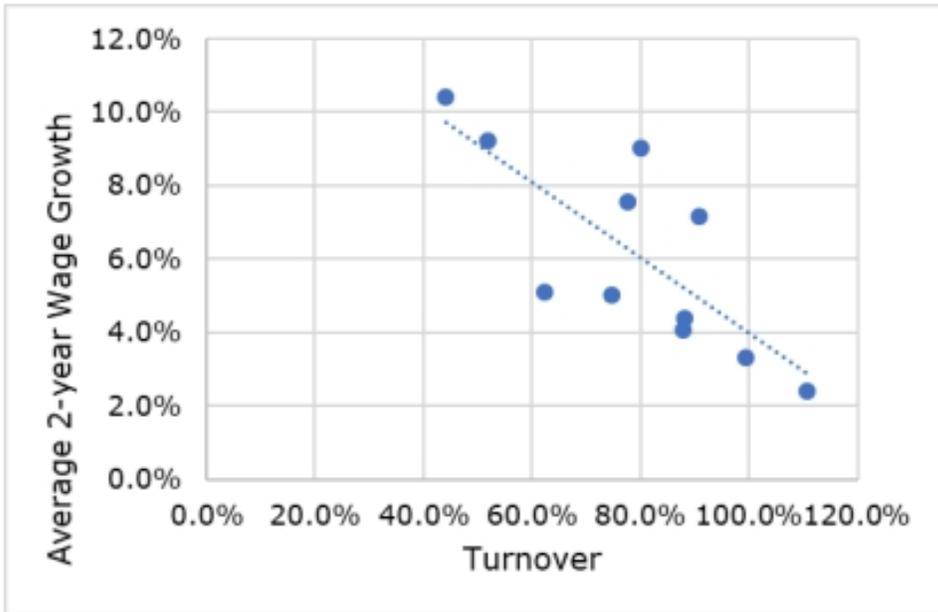
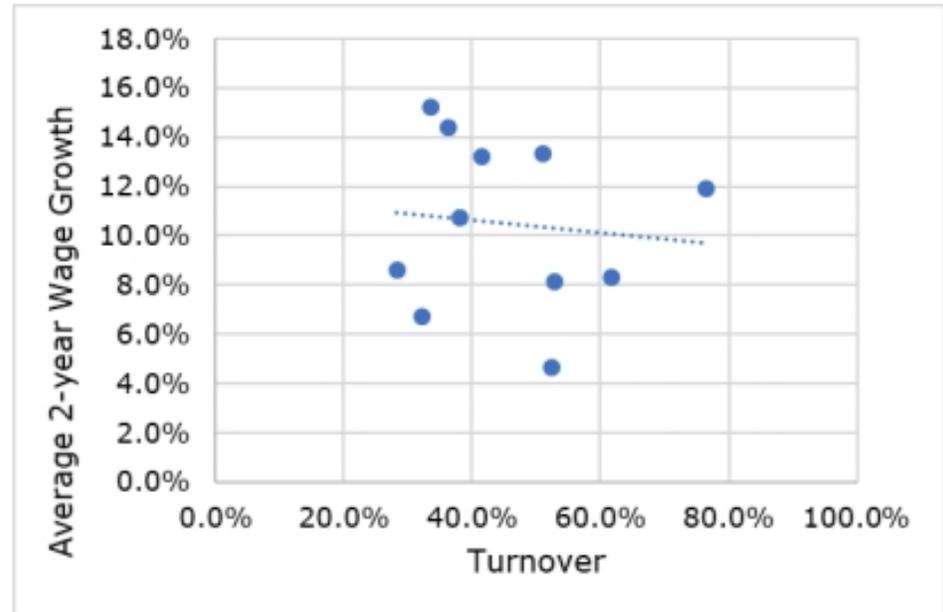


Figure B-2. HCS/TxHmL Non-Residential Attendants: Turnover vs. 2-year Wage Growth



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