## **ASPR TRACIE Technical Assistance Request**

Request Receipt Date (by ASPR TRACIE): 20 May 2020

**Response Date:** 29 May 2020 **Type of TA Request:** Complex

#### **Request:**

The requestor asked for resources related to shortages of direct care workforce staff (personal care aides, home health aides, nursing assistants), and strategies for workforce recruitment and sustainment.

### **Response:**

The ASPR TRACIE Team reviewed our existing resources and conducted a search online for additional materials and reached out to subject matter experts. Section I of this document includes comments from our SME Cadre member. Section II includes general resources for direct-care workforce. Section III include personal care aide (PCA) specific resources. Section III includes home health specific resources. Section IV includes general workforce resources.

Please refer to the Centers for Disease Control and Prevention's <u>Coronavirus Disease 2019</u> <u>webpage</u> for the most up-to-date clinical guidance on COVID-19 outbreak management.

#### I. SME Comments

Please note: These are direct quotes or paraphrased comments from emails and other correspondence provided by ASPR TRACIE SME Cadre members in response to this specific request. They do not necessarily express the views of ASPR or ASPR TRACIE.

- Unfortunately, there is not much available regarding research in this area. Every state has had shortages for years. With the current pandemic, current unemployment benefits have not incentivized many aides/assistants to find new work or go back to work. Normal salaries are estimated between \$360-\$450/ week for this workforce, and unemployment benefits for some states are much higher than that (e.g., NY is \$700/week).
- There is no universal plan for recruiting or sustaining staff and have not seen any new strategies for enhancing the workforce. Each state has their own requirements for this workforce which makes it challenging.
- This SME has offered to talk directly with the requestor should they request additional assistance, discuss strategies, or anecdotal lessons learned.

#### II. Direct Care Workforce General Resources

AAHSA. (2010). Direct Care Worker Retention: Strategies for Success.



This document discusses specific strategies to increase DCW retention as well as tangible case studies/examples:

- Competitive wages and health insurance benefits
- Cultural change
- Workplace/job design, management practices, and trained supervisors
- Comprehensive training
- Career advancement opportunities
- Cultural competence

Bureau of Labor Statistics. (2019). Home Health Aides and Personal Care Aides.

This page provides current statistics for this workforce, such as: The number of home heath aides is projected to grow 36% between 2018 and 2028, due to the growing elderly and population and preference to keep family members at home instead of nursing homes. In 2018, the median pay for home health aides was \$24,200, and for personal care aids was \$24,020. In a report by Mercer HPA, it is estimated that there will be a shortage of 446,300 home health aide jobs by 2025.

LTSS Center and Global Ageing Network. (2018). <u>Filling the Care Gap: Integrating Foreign-Born Nurses and Personal Care Assistants into the Field of Long-Term Services and Supports.</u>

This document discusses the utilization of foreign-born workers to augment staffing shortages and long term needs for staff in long-term services and support positions. It discusses issues with hiring and retaining these staff as well as benefits and challenges.

PHI. (2013). America's Direct-Care Workforce.

This document provides statistics and quick facts for direct-care workers. It notes that in 2012, DCW totaled more than 4 million workers and over 3.2 million were employed by facilities and agencies. An additional 800,000 independent providers are employed across the country in public programs that provide personal care services and employed directly by consumers.

Swanson-Aprill, L., Luz. C., et al. (2019). <u>Policy Brief- Direct Care Workforce Shortage</u>. Michigan Department of Health and Human Services, Aging and Adult Services Agency.

This policy brief notes that direct support professionals who work for individuals with mental illness or developmental/intellectual disabilities, home health aides, and PCAs are responsible for up to 80% of paid, hands-on care in private homes, residential settings, and adult day care settings. PCAs are typically employed by an agency or directly by clients and are a cost savings to placing clients in a nursing home (Medicare rate is \$208.50 per day vs. in home care at \$79.77 per day under Michigan's Choice Wavers).



Challenges that this workforce faces are described, such as wage levels (approx. \$10/day in Michigan in 2019), inconsistent work hours and lack of benefits, lack of training, and lack of job appreciation/support. The policy brief then describes ways that this workforce can be incentivized:

- Cash support for unmet emergency needs
- Bonuses
- Create career pathways
- Promote professionalizing this workforce
- Expand and improve access to training
- Increase recognition and the status of the workforce
- Examine innovative strategies for increasing wages
- Establish a statewide direct care workers commission

## III. Personal Care Aides (PCA) Specific Resources

Commonwealth of Massachusetts. (2020). MassHealth Personal Care Attendant (PCA) Program.

This web page provides links to information on PCA overtime management.

Luz, Claire and Hanson, Katherine. (2015). <u>Filling the Care Gap: Personal Home Care Worker Training Improves Job Skills, Status, and Satisfaction</u>. SAGE Journals. (Abstract Only)

This article discusses a 2010 PCA training program in Michigan that had positive outcomes such as increased learner skills, employability, and job satisfaction.

#### IV. Home Care Resources

ASPR TRACIE. (2020). Considerations for Homecare Actions in Infectious Disease Outbreaks.

This ASPR TRACIE technical assistance response summarizes subject matter input received specific to resources and information related to home-based and community healthcare infectious disease preparedness best practices.

ASPR TRACIE. (2020). COVID-19 Home-based Healthcare and Hospice Resources.

This Topic Collection focuses on plans, tools, templates, and other immediately implementable resources to help with COVID-19 preparedness, response, recovery, and mitigation efforts, focusing on home-based healthcare resources.



# ASPR TRACIE. (2019). <u>Engagement of Home Health and Hospice Agencies in Medical Surge</u> Activities.

This fact sheet in question and answer format is intended to assist home health and hospice agencies, healthcare coalitions, and other partners collaborate on and support each other's emergency preparedness and response efforts. The fact sheet identifies resources and offers suggestions to help home health and hospice agencies effectively maintain continuity of their operations and integrate into their community's emergency management framework before, during, and after a disaster.

#### ASPR TRACIE. (2020). Homecare and Hospice Topic Collection.

The resources in this Topic Collection include reports, toolkits, and guidance specific to homecare for providers and patients.

# ASPR TRACIE. (2019). Medical Surge and the Role of Home Health and Hospice Agencies (Full Report).

Home health and hospice agencies have an essential role in addressing healthcare needs during emergencies and disasters. Based on 245 survey responses and 25 follow-up interviews, this report explores the perceptions of home health and hospice agency leaders about their medical surge capabilities, their capacity and infrastructure for response, their level of engagement with other community preparedness partners, and their challenges to increased preparedness. **NOTE**: A one-page summary of this report can be found here.

## Sharma, A. (2020). Gov. Abbott announces waive approvals for healthcare workers during COVID-19 pandemic.

This article discusses the approved 1135 waiver request submitted by Texas Health and Human Services Commission to CMS during COVID-19 to allow nurse aids to provide home health and hospice services even if they have not been employed as paid as an aide within 24 months prior. It also allows for non-clinical staffers to help with feeding nursing home residents without completing a required 16-hour training course. Additional information on home care in Texas can be found on <a href="Texas Regulatory">Texas Regulatory</a> Information and <a href="Primary Home Care">Primary Home Care</a> (PHC). General information on CMS waivers and declarations during COVID-19 can be found <a href="here">here</a>.

National Association for Home Care & Hospice. (2020). <u>Coronavirus Resources for Home Care</u> & Hospice.

This resource page includes links to information and training materials on COVID-19 designed for in-home health and hospice care providers. **NOTE**: There is a section designated for patients and caregivers.



National Association of Home Care & Hospice. (2020). <u>Home Care Industry Coronavirus</u> (COVID-19) <u>Employer Frequently Asked Questions</u>.

This webpage addresses how healthcare employers are confronting difficult questions regarding how to handle employment issues.

Stringfellow, A., (2020). <u>How to Become a Paid Caregiver for a Family Member: 6 Steps to</u> Uncovering Financial Assistance Options for Family Caregivers.

The author explains how caregivers can be financially compensated for caring for loved ones.

#### V. General Workforce Resources

American Council on Aging. (2019). <u>How to Receive Financial Compensation via Medicaid to</u> Provide Care for a Love One.

This resource provides information on the various Medicaid programs that individuals can apply for to be financially compensated for servicing as a caregiver to a loved one.

ASPR TRACIE. (2020). <u>COVID-19 Workforce Virtual Toolkit: Resources for Healthcare Decision-Makers Responding to COVID-19 Workforce Concerns.</u>

This collection provides a curated set of resources and tools for decision-makers managing healthcare workforce challenges in response to the COVID-19 emergency. See specifically COVID-19 Workforce Protection Resources, COVID-19 Scope of Practice Expansions, and COVID-19 Workforce Resilience/Sustainability Resources.

Centers for Disease Control and Prevention. (n.d.) Caregiving.

This page provides general information for unpaid caregivers but may have applicability to paid care givers as well. Resources include a caregiving care plan form. This <u>page</u> includes tips for caregivers, and this <u>brief</u> provides statistics on caregivers in the US. This <u>MMWR</u> provides statistics on informal unpaid caregivers.

Committee on the Future Health Care Workforce for Older Americans Board on Health Care Services. (2008). Retooling for an Aging America: Building the Health Care Workforce. Institute of Medicine.

This report discusses strategies for training healthcare providers on geriatric care and how to prepare family members and informal caregivers on how to tend to aging loved ones. There are also recommendations for Medicare, Medicaid, and other health plans to pay higher rates to help boost recruitment and retention of geriatric specialists and care aides.

