Moving Beyond Words: Crafting a Plan for a 21st Century LTSS Workforce for MA

Summary of Proceedings

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HCA Home Care Alliance of Massachusetts

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Every day in this country, 10,000 baby boomers turn 65. This new generation of older Americans will be unlike any other to come before it. Thanks to medical advances, they will have a longer life expectancy than even the elders of today. They will be looking for a long-term care delivery system that allows them to continue living in their own homes and communities even when faced with a physical or mental disability.

The Bureau of Labor Statistics reports that, in the past decade, the home care workforce has more than doubled in size. Yet, the BLS and many other researchers have also documented that this degree of growth is not enough. If we continue on our current course, the projected supply of home care or long terms services and supports workers will be woefully insufficient to meet the demand.
Overview

On November 7, 2019, the Foundation for Home Health, the educational affiliate of the Home Care Alliance of Massachusetts hosted a day-long symposium dedicated to advancing ideas to retain and grow the paraprofessional direct care workforce. *Moving Beyond Words: Crafting a Plan for a 21st Century LTSS Workforce for MA* brought together home care industry leaders, local workforce board representatives, healthcare training organizations and policy makers to explore the key lessons learned or best practices recommended by various workforce reports, or in place in other agencies, or other states. Speakers and attendees also discussed how the industry and policy makers can work together to put Massachusetts in the forefront of those states addressing the challenges associated with the supply vs demand challenge home care faces.

Opening Remarks

**Maureen Bannan**, Executive Director, Hebrew SeniorLife Home Care; President, Foundation for Home Health; and Member, State Workforce Collaborative

In her opening remarks, Foundation President Maureen Bannan laid out a variety of challenges facing the homecare industry, including that the competitive position of the home health industry in the direct care labor market has declined.

“As was pointed out by the MA State Auditor’s office in their recent report ‘Gray Warnings,’ our ability to hire is impacted by a full employment environment, strong job growth in other sectors and rising entry level wages in a number of competitive industries,’ said Bannan. “Our agencies that are primarily funded through government programs have wage constraints on them directly tied to reimbursement inaction.”
Despite attempts to raise wages, the same report claims that 11% of the home care aide workforce’s take home pay places them below the federal poverty line, and a high percentage depend on public benefits for assistance with shelter and food.

Moving forward, Bannan suggested that older workers reentering the workforce might be a solution to some of the growing demand. A starting place would be to tie our workforce needs into the work of the Governor’s Council to Address Aging in MA. Among their areas of focus articulated in the Executive Order establishing this work is a recognition that “support for healthy aging may include support for retaining in the workforce those older adults that wish to work.”

**Keynote Presentation: The Massachusetts Health Care Workforce Collaborative**

Jennifer James Price, Undersecretary for Workforce Development, Massachusetts Department of Labor and Workforce Development

Undersecretary Price covered in more detail the challenge that the state faces as the demand for health and long-term care workers exceeds the supply. Price presented the preliminary work of Governor Charlie Baker’s Healthcare Workforce Collaborative, which was formed with the mission to “Close health care workforce shortages in MA to improve patient quality of care, provide new opportunities for a diverse workforce, retain pre-eminence in the industry, and fuel continued growth.”

The Collaborative is a multi-year private-public collaboration across government, educational institutions, and industry that will focus attention on key issues and economic bottlenecks contributing to workforce shortages and design and implement solutions.

The Collaborative is initially focusing on three sectors: nursing, behavioral health workers, and long-term care direct care works. Early direct care workforce thinking has focused on fast tracking
training, making training for Certified Nursing Assistants and Home Health Aides more universally available and standardized, and increasing access to advanced level skills training to increase upward career mobility.

**Sustainable Actions Panel: Leveraging Training and Technology to Support and Sustain the Home Care Workforce**

- **Sharon Grundel**, MEd, Director of Corporate Training, Training and Workforce of Holyoke & Springfield Technical Community Colleges
- **Christy Johnston**, MPH, Vice President of Governmental & Managed Care Services, Premiere Home Care
- **Helen Adeosun**, CEO and Co-Founder, CareAcademy

This panel outlined the potential of technology-assisted competency-based training to build a direct care workforce and to incorporate them into an interdisciplinary team in ways that drive employee engagement, value and patient outcomes.

Sharon Grundel described the unique collaborative program by which Holyoke Community College and Springfield Technical Community College share resources and faculty to enhance training opportunities for local residents. She described the state-of-the-art simulation lab that includes medical mannikins that monitor and measure students’ use of correct techniques in patient care. This interactive approach to clinical skills training provides real-time feedback to help students learn and replicate proper care techniques more quickly.

Premier Home Care’s technology solution, as presented by Christy Johnston, capitalizes on the home health aide as the most frequent “eyes and ears” in the home by providing them training and access to a “real time data” platform in which they are empowered to “Observe Ask and Report” changes in patient status that might negatively affect their course of care. Specific alert type trigger questions are built into the agency’s electronic visit verification system and aides are trained to observe and report to the team changes in behavioral, medication adherence, social
determinants of health, or illness. The EVV functionality and connection to the care team fosters collaboration and a strong sense of involvement and pride in the workers. Johnson reported that the program is already demonstrating success in the form of improved patient outcomes.

The CareAcademy model presented by Helen Adeosun leverages technology and e-learning to extend training to a wider potential workforce, drive quicker onboarding, and reduce early workforce turnover. The stackable modules include sessions on both clinical knowledge and soft skills training, and the system includes back-office functionality to enable agencies to monitor training progress and more efficiently match worker skills to client needs.

**Sustainable Actions Panel: Strengthening Recruitment and Retention of the LTSS Workforce**

Andrea Cohen, CoFounder and CEO, Houseworks  
Joanne MacInnis, RN, CDP, President/CEO, Aberdeen Home Care, Inc.  
Jo-Mary Koopman, RN, BSN, MBA, Senior Vice President, All Care VNA

On the day’s second panel, two independent private pay only agencies and one large certified home health agency discussed their most successful strategies in building their LTSS workforce. In the absence of any federal or state training or competency standards for the private homecare workforce, Andrea Cohen said that HouseWorks has invested “strategically and intentionally” in workforce training that establishes a knowledge base and then allows workers to complete condition-specific specialty training in such areas as dementia care. An internal star rating system is set to reward workers who complete advanced training. 5-star workers are eligible for bonuses and other perks.

At Aberdeen Home Care, owner Joanne MacInnis has successfully reduced turnover and improved retention by focusing on workplace culture and connectedness, along with offering some creative benefits. “We are on the small side as a private care company,” she said, “which allows us to invest differently in our workforce.” One of Aberdeen’s benefits - unusual within the
industry – is a company supported retirement plan with access to free financial planning assistance.

At All Care VNA, there is also a focus on reducing the sense of isolation that can be common among home care LTSS workers, and a proven cause of turnover. Koopman noted that managers and schedulers are expected to frequently check in (at least weekly) in person with their home care aides. The agency hosts monthly employee engagement events, frequent newsletter and personalized birthday cards. All aides have access to an emergency car owned by All Care in the event of a transportation problem. “While travel to multiple clients in a day can be part of the job,” Koopman said, “All Care VNA is working with their schedulers and software to maximize hours while minimizing travel times.”

All three companies report retention rates that are higher than the local or national average. As a result of both a culture of support and creative benefit structures, they are finding their own employees are emerging as their best recruiters of new talent. This, they said, is a true sign of moving toward an “employer of choice” status. Bonuses paid for such referrals is seen as money well spent. All three also stressed the importance of workers seeing internal career ladders, not necessarily clinical (e.g., aide to LPN), but managerial in the form of aides to schedulers and managers.

**Closing Address: 12 Ways to Strengthen the LTSS Workforce**

Robyn Stone, DrPH, Co-Director, Leading Age LTSS Center at UMass Boston

Drawing from her recent blog post of strengthening the LTSS workforce, Dr. Stone said she saw much of what she has written and testified about embodied in some the panel presentations. The issue, she said, is scaling up. Premier’s work to recognize the intersection of a well-trained, observant workforce and quality indicators needs to become industry standard practice. The work of CareAcademy, HouseWorks and others to “upskill” the job and add some career ladder
rungs within it drives the value proposition home to a workforce that has often not been so empowered.

Dr. Stone is highly supportive of exploring and expanding opportunities for nurse delegation, especially in states with very restrictive Nurse Practice Acts, such as Massachusetts. “This can serve to both elevate the aide position and allow nurses to operate at the top of their license,” she said.

Dr. Stone is a strong supporter of public payers, such as Medicare and Medicaid, investing in LTSS workforce development, either or both through adjusting rates to agencies that demonstrate a commitment to workforce development or by subsidizing training costs directly.

Finally, she strongly suggested agencies consider redesigning jobs to accommodate older workers, suggesting intentional efforts to “accommodate their unique work preferences and to take advantage of their unique gifts.”

Next Steps

Each of the symposium sessions was videotaped. Recordings will be posted to the public access section of the Home Care Alliance of MA website and publicized via social media.

Symposium participants were invited to complete an evaluation and brief survey of priority actions for follow up. Participants reported high satisfaction with the symposium content and format. Recommendations for continued action included:

- more sessions where best, effective practices in recruitment, training, engagement and retention are shared
- regular updates and process for and from the industry to the state Workforce Collaborative
- data collection and regular tracking of what the statewide workforce turnover rate is and impact of efforts to increase retention rates
• increased collaboration at the local level between home care agencies, community college training programs, and workforce boards to bring more workers into the home care field

• pursuit of outside funding to enhance outreach efforts to expand the awareness of home care as a career option and to train new workers from targeted populations (older workers, informal caregivers, immigrants, men, etc.)

• Coordinated advocacy among affected stakeholders and industry groups to pursue reimbursement rate increases from governmental payers to enable provider agencies to pay their workers a living wage.

The Foundation for Home Health and its parent Home Care Alliance of Massachusetts will use these recommendations as a roadmap to establish strategies for the next three to five years to build the 21st Century LTSS Workforce for Massachusetts.

Thanks to the Blue Cross and Blue Shield of Massachusetts Foundation for their financial support to make this symposium a success. And special thanks to the presenters at this symposium, and to the attendees who contributed their thoughtful input, professional expertise, and contagious enthusiasm to make this event a success!