THE DIRECT CARE WORKFORCE IN HOME CARE

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Direct Care Staff in Home Care

- **Subsumes several categories of workers**
  - **Home health aides**
  - **Home care aides/personal care attendants**
  - **Hospice aides**

Roles/Responsibilities of Direct Care Staff in Home Care

- Personal care/activities of daily living assistance (e.g. eating, bathing, dressing)
- Assistance with instrumental activities (e.g. housekeeping, meal preparation)
- Eyes and ears of system
- Emotional support; one-on-one relationship
- Liaison with family caregivers

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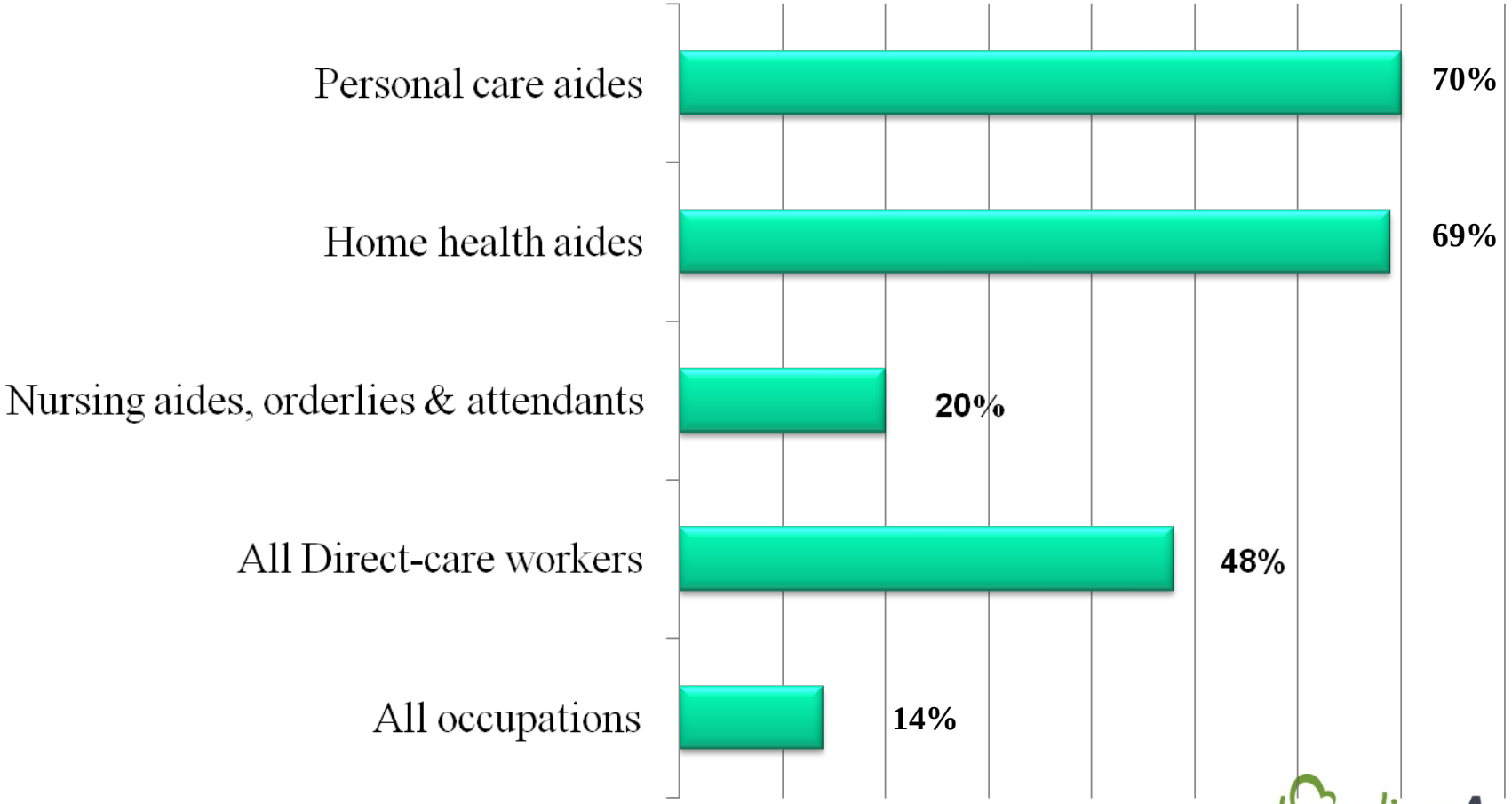
United States: Occupational Growth Projections, 2010-2020



Source: PHInational.org

Characteristics

- Largely non-Hispanic, middle-aged women
- ½ white, 35% black
- Low wages-stagnant over 10 years
- Great variability in benefits
- High proportion employed part-time

Hospice Aides Fare Better

- **Higher wages – 32% higher than homecare aides; 8% higher than home health aides**
- **More likely to have access to employer-sponsored health insurance**
- **More likely to receive benefits**
  - **Paid sick leave**
  - **Pension**
  - **Travel reimbursement**
- **More likely to be employed FT**
- **Less likely to quit**

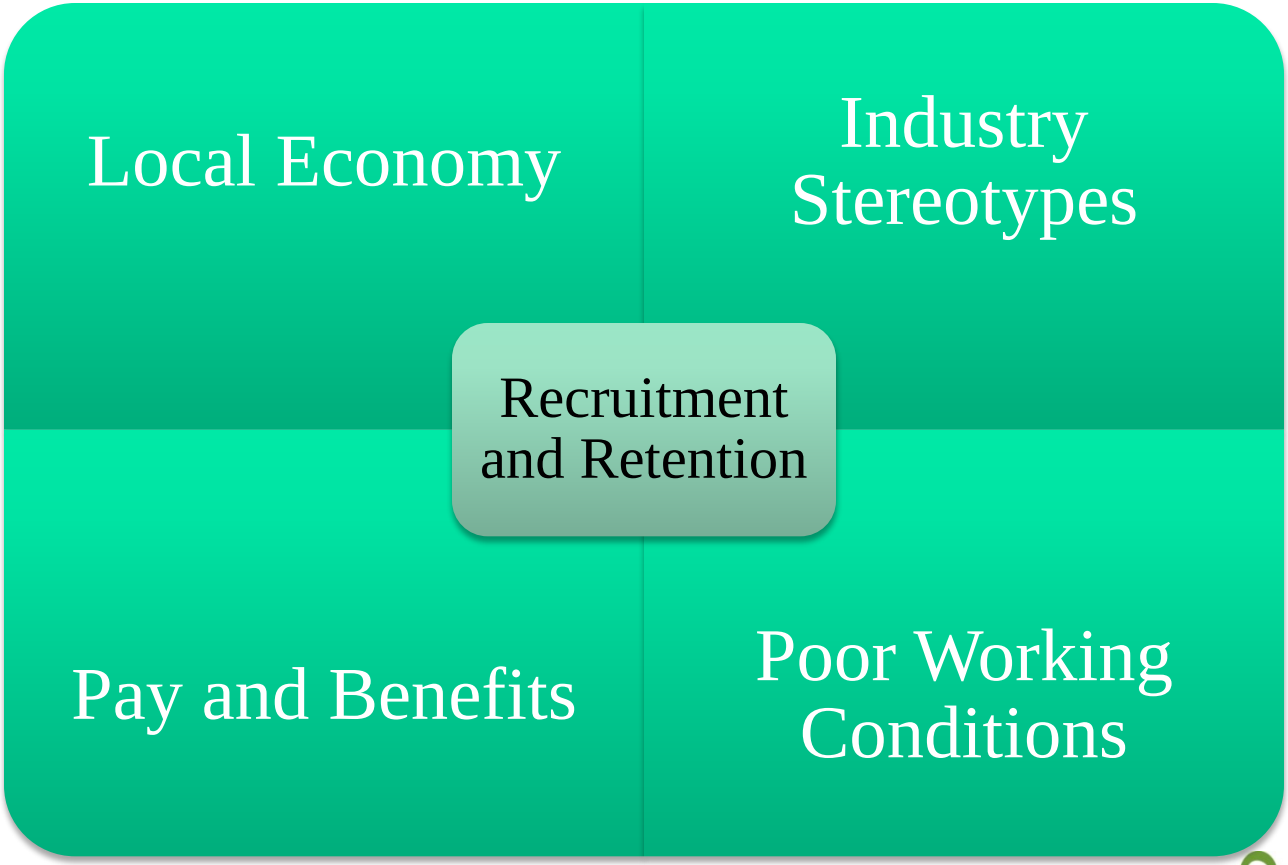
Training Requirements

- **Medicare/Medicaid certified home health and Hispanic aides – federally mandated 75 hours and competency exam**
- **Home care/personal care**
  - **No federal requirements**
  - **Minimal state requirements, tremendous variability**
- **Consumer-directed workers**
  - **Training is a concern**

Implications for Employers and Consumers

- Lack of competent staff
- High turnover and churning
- Lack of consistency in care
- Heavy workloads for other workers
- Effects on quality of care, quality of life
- Costs to employers, system as a whole

Factors Influencing Workforce Recruitment and Retention



Solutions for Developing this Workforce

- **Competency-based training (basic clinical placements, orientation and in-service)**
- **Better supervision (coaching & mentoring)**
- **Career advancement (Lattices, not just ladders!)**
- **Worker empowerment**
- **Attention to wages and benefits**

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Special Issues for Training Home Care Workforce

- Multiple co-morbidities/multiple meds
- Functional decline
- High risk for depression, social isolation
- Dementia
- Significant family involvement
- Cultural competence

Examples of Workforce Development

- **PHCAST – North Carolina Program**
- **EWA's Advances Direct Care Worker**
- **Washington State Home Care/Personal Care Worker Apprenticeship**

Long-Term Trends

- **The emerging “care gap”**
- **Shift from institutional to in-home and community based settings**
- **More ethnically/racially diverse older adults and staff**
- **More highly educated, demanding older adults**

Long-Term Trends cont.

- Greater disparity between “haves” and “have-nots”
- Expansion of consumer-directed service systems
- Impact of new technologies

Expanding the Pipeline

- High school students
- Older workers
- Redeployment of unemployed workers
- Former family caregivers
- Technology to help reduce demand

Goals for Developing Workforce

- **Strengthen incumbent workforce**
- **Expand supply of personnel entering field**
- **Create more competitive positions through wage and benefit increases/redesign**
- **Improve working conditions/quality of jobs**

Goals for Developing Workforce cont.

- Make larger/smarter investments in formal and continuing education of the workforce
- Train workforce around new models of service organization and delivery
- Moderate the demand for LTC personnel