



Quality Jobs Equal Quality Care: Building Capacity in the Direct Service Workforce (DSW)



*HCBS SP Direct
Service Workforce
(DSW) Summit*

December 3, 2020

**Audio available through
device speakers**

Direct Service Workforce Summit Agenda

- Welcome and Logistics
- Introduction: Environment and Trends
- Panel Discussion
- Topic 1: Person-Centered Practice
- Topic 2: Coordinating Care Across Settings and Systems
- Topic 3: Professional Development
- Summary and Synthesis
- Next Steps and Leaving in Action

Logistics

- All audio is muted, but you can unmute to speak. Please raise your hand and we will call on you.
- We will use the chat function for some polling and discussion.
- Later in the session we will go into small group breakout sessions. You'll be randomly assigned to a group; when the pop-up appears asking if you want to join the breakout, click 'yes'.

Quality Jobs Equal Quality Care: Building Capacity in the Direct Service Workforce

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Direct Service Workforce Overview



Amy Hewitt

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Direct Service Workforce Introduction

- Sectors and Roles
- Data and Demographics
- Key Trends

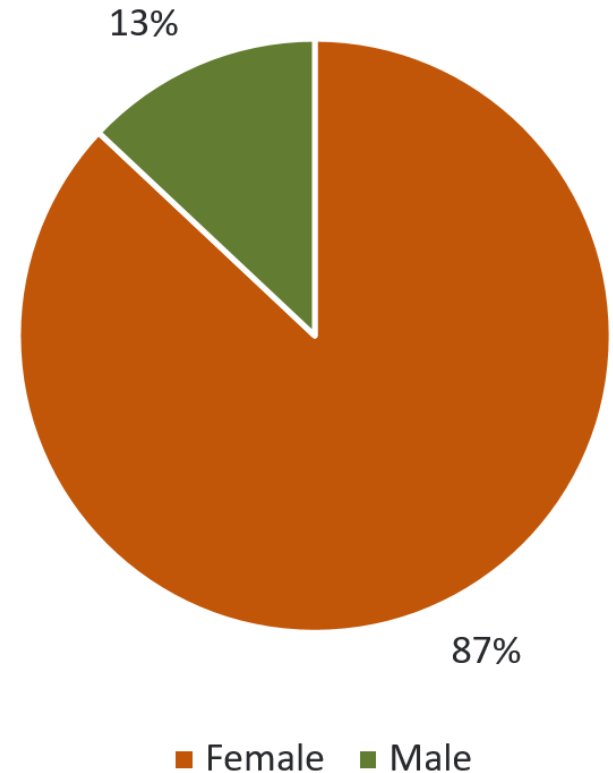
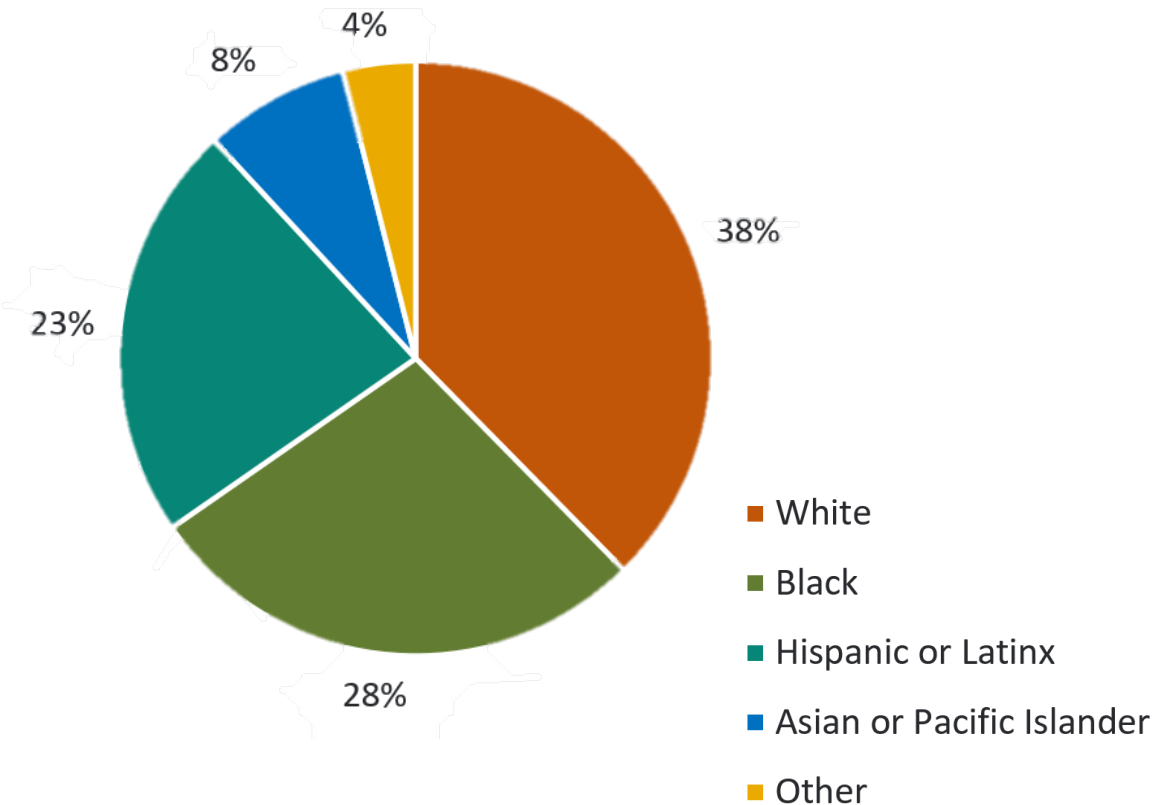
Sectors and Roles

- DSWs provide essential and fundamental support for personal care activities, relationship building, companionship, development of independent living skills, etc.
- Three identified sectors:
 - Aging and Physical Disabilities
 - Behavioral Health (BH)
 - Intellectual and Developmental Disabilities (I/DD)

Data and Demographics

- Inconsistently reported data across sectors; but some national estimates of employment and wages available through the Occupational Employment Statistics (OES) program
 - The DSW is predominantly a workforce of women, ages 30-49 and women of color; immigrant women and immigrant women of color are overrepresented (compared to their percentage in the general population).
- Frequently paid below living-wage standards
 - Nearly 50% rely on at least one form of public assistance

Data and Demographics, continued



Key Trends Impacting State Medicaid Agencies

- Person-Centered Approaches
- Self-Direction
- Increasing Demand for Direct Service Workers
- Value-Based Purchasing of Services
- Medicaid Managed Care

Direct Service Workforce Perspectives: A Panel Discussion

- Jerry Smith, Marketing and Business Manager, ICI, UMN
- Laura Buckner, Training Consultant, Texas Center for Disability Studies, The University of Texas at Austin; Mentor Trainer, The Learning Community for Person Centered Practices; Parent
- Bryant Hollifield, Self Advocate and Person who uses DSP services
- Ryene Fenner, Direct Service Professional, New Horizons Resources Inc.
- Deyanelin Galvez, Direct Support Professional, The Center for Family Support

Direct Service Workforce Perspectives: A Panel Discussion

- From your perspective, what is the value of person-centered practices?
- What is the importance of retaining direct service workers long term?
- What do you see as the biggest barriers to recruiting and keeping direct service workers?
- How can State Medicaid agencies best support the DSW?



Person-Centered Practice: Delivering Quality Supports People Want



Sheli Reynolds

Associate Director

Institute for Human Development

University of Missouri Kansas City

Purpose

- The topics shared today are designed for summit participants to inform conversation and discussion on the DSW.
- This presentation focuses on:
 - The implementation and evaluation of person-centered practices
 - The role of direct service workers in the implementation of person-centered plans

Focus Area 1: A Statewide Person-Centered LTSS System

- Overview and Challenges:
 - Person-centered practices include person-centered thinking as a philosophy and approach and training that teaches a set of skills and tools to help direct service workers as they support people to achieve their outcomes.
 - The wide variation in services, eligibility, state rules, payers and home and community-based services (HCBS) delivery systems creates challenges in implementing person-centered practices.
 - People who use services are the experts of their lives and are integral to informing system reform.

A Statewide Person-Centered LTSS System

- Promising Practices
 - Developing person-centered practices that are scaled and consistent across systems:
 - Charting the LifeCourse is an example of a framework that can help organizations develop and evaluate policies to ensure they are implementing quality person-centered practices.
 - The Learning Community under the District of Columbia’s No Wrong Door initiative provided support to individuals receiving services and direct service workers.
 - Engaging individuals receiving HCBS and direct service workers in reform efforts:
 - The Massachusetts demonstration under the Medicare-Medicaid Financial Alignment Initiative, called One Care, aims to have at least half of its One Care Implementation Council to be consumers of its services.

Focus Area 2: The Role of Direct Service Workers in Person-Centered Practices

- Overview and Challenges:
 - Direct service workers need a diverse skillset, support, and trainings to support the implementation of an individual's person-centered plan.
- Promising Practices:
 - Supporting direct service workers in facilitating meaningful relationships and building social capital, so that people using services are fully included in the communities of their choice:
 - The Institute on Community Integration (ICI) at the University of Minnesota (a University Center on Excellence in Developmental Disabilities) works to improve policies and offers training to enhance capacity of agencies to support community living.

Poll 1

- What is the key to best understanding how people want to receive supports?

Small Group Discussion

1. What is one of the best approaches you have seen or experienced related to understanding how people want to receive services and supports?
2. What have you done in your state or your organization that works or is promising?
3. How has COVID-19 impacted your state or organization's ability to understand how people want to receive services?

Small Group Discussion Instructions

- Answer 'yes' when pop-up asks if you want to join a breakout
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- Discussion questions will appear in a banner at top or bottom of your screen
- Determine a notetaker
- Go round robin; everyone share about Question 1
- Everyone share about Question 2
- Everyone share about Question 3
- To return to full group, answer 'yes' when asked

Highlights and Promising Practices

- Notetakers: Copy and paste into chat the highlights of your group conversation
- Everyone: Raise your hand to speak up aloud and share a promising idea you heard

Break

- Take a 5 minute break



Coordinating Care Across Systems and Settings



Erika Robbins
Vice President, Lewin

Purpose

- The topics shared today are designed for Summit participants to inform conversation and discussion on the DSW.
- This presentation focuses on:
 - Value-Based Payment (VBP)
 - Managed Long-Term Services and Supports (MLTSS)

Overview and Challenges

- The movement to decreasing institutional-based care and increasing home and community-based options, combined with a lack of career paths and poor pay and benefits, contributes to the direct service worker shortage.
- This shortage corresponds to decreased quality of care, higher costs for people and providers, and increased incidences of preventable injuries.

Focus Area 1: Value-Based Payment Models

- VBP is one way to address the challenges of quality, DSW retention and decreasing preventable injuries.
- Tying payment to outcomes encourages providers to increase quality of services.
- Challenges include:
 - Risk adjustment
 - Collaboration with providers
 - Data collection and performance measurement

Promising Practices

- Incorporating workforce quality measures in the state's contracting and quality measurement process:
 - Pay-for-performance bonuses for MCOs in Texas
 - Tennessee's Quality Improvement in LTSS (QuILTSS)
- Support providers as they shift to value-based payment:
 - Create cross-sector partnerships in data collection and solutions for combating systemic challenges
 - Maine Commission to Study Long Term Care Workforce Issues
 - Create matching registries to connect people seeking direct support with direct service workers looking for employment

Focus Area 2: Managed Long Term Services and Supports

- As of 2020, 25 states have implemented MLTSS programs.
- Recruitment and retention remain a challenge under MLTSS:
 - Including recruitment and retention measures as well as expectations for professionalization in MLTSS contracts may be one way to address this challenge.

Promising Practices

- **Ensure livable wages:**
 - Twenty-one states have used wage pass-through legislation expressly to increase direct service worker wages.
 - Some states have increased minimum wage requirements or required providers to meet wage benchmarks.
- **Require strategies for recruitment and retention as part of the provider contracting process:**
 - TennCare requires providers to develop strategies inclusive of training and credentialing.
 - HealthChoices in Pennsylvania requires participating managed care organizations to implement workforce innovation components, including credentialing.

Poll 2

- What is the most promising approach you have seen to integrating care?

Small Group Discussion

1. What is the role of Medicaid agencies in reducing turnover and increasing capacity in the Direct Service Workforce?
2. What have you done in your state or organization that is working or is promising?
3. How has COVID-19 impacted your state or organization's ability to reduce turnover and increase capacity in the DSW?

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Highlights and Promising Practices

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Professional Development: Building Competencies



Barbara Kleist

***Program Manager, Institute on
Community Integration, UMN***

Purpose

- The topics shared today are designed for summit participants to inform conversation and discussion on the DSW.
- This presentation focuses on:
 - Professional Development and Building Competencies

Focus Area 1: Career Ladders

- Overview and Challenges:
 - Apprenticeships, certificates, and advanced degree programs provide opportunity for career growth
 - Limited opportunities for role advancement into supervisory positions and few systemic incentives built into existing career paths
 - Majority of opportunities simply move direct service workers from direct support to mid-manager supervisory roles (often more administrative responsibilities, less engagement with people who use services)

Career Ladders

- Promising Practices:
 - Credentialing initiatives:
 - Expedited certified nursing assistant training for certified personal care attendants/aides
 - Nationally recognized credentials through the National Alliance for Direct Support Professionals (NADSP)
 - State-based credentialing pilots or initiatives
 - Federal Department of Labor (DOL) apprenticeship programs requiring wage increases upon completion

Focus Area 2: Training

- Overview and Challenges:
 - Training is frequently hours-based instead of competency-based.
 - The regulatory-driven culture of training may hinder opportunities for providing individualized and person-centered supports.
- Promising Practices:
 - Strengthening of training requirements:
 - Washington state's ballot initiative for increased PCA training standards
 - Combining competency-based training requirements with value-based payment and managed long term services and supports contracts
 - TennCare (Tennessee) requires contractors to develop strategies for recruitment and retention

Training, continued

- Support on-boarding training and continuing professional development
 - The DSP Academy in Washington, DC provides no-cost Direct Support Professional (DSP) training and certification for youth and young adults with disabilities
 - WisCaregiver Careers provides training, certification and a retention bonus for prospective CNA candidates
 - Provision of support for, and access to national platforms such as the College of Direct Support

Poll 3

- What best supports DSW competencies?

Small Group Discussion

1. How can DSW training and career ladders improve DSW retention and effectiveness?
2. What have you done in your state or organization that is working or is promising?
3. How has COVID-19 impacted your state or organization's ability to train and develop the DSW?

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Summarize and Prioritize

- Key themes and promising practices
- Learning: What did you hear that was new to you?
- Potential recommendations for action

Next Steps

- Compile notes, chat log, comments
- Follow up webinar in the spring to share findings from this Summit and to discuss prioritizing recommendations



Thank you!

