

Testimony

**Pennsylvania House Aging and Older Adult Services Committee
Direct Care Workforce Investment and Quality of Care**

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Good morning. I am Bob Garraty, Executive Director of the Pennsylvania Workforce Investment Board (PA WIB). The PA WIB is the Governor's principal private sector policy advisor on building a strong workforce development system that is aligned with state education policies and economic development goals. All of its members are appointed by the Governor and represent a diverse cross section of business executives, labor officials, education leaders, economic development practitioners and local elected officials. In addition, the cabinet secretaries of five state agencies as well as four members of the legislature serve on the board. The Chairman is Mr. David Malone, the Principal and CFO of Gateway Financial Group. The board's mission is to ensure that Pennsylvania's entire workforce system, covering many programs in multiple departments and agencies, meets employers' needs for skilled workers and workers' needs for career and economic advancement. In addition, the board is responsible for providing policy guidance and direction, evaluating performance and recommending continuous improvements.

In 2004 Governor Rendell created the Pennsylvania Center for Health Careers, a public/private initiative led by a Leadership Council of more than 25 employers, Commonwealth agencies, industry associations, labor unions, professional associations, and educational institutions.

Since its inception, the Center has become a catalyst for developing an action agenda in response to Pennsylvania's health care workforce challenges. The Center, housed within the Pennsylvania Workforce Investment Board, serves as an organizational catalyst to develop an action agenda to address critical workforce shortages in health care, promote best human resource practices in the industry that improve retention and career advancement, and provide policy options to state government.

Addressing the nursing shortage was the Center's first initiative, which resulted in key strategies to increase nursing educational capacity, increase completion rates of nursing students, and recruit and retain non-traditional nursing students, including men and minorities.

In 2005 the Center created a Direct Care Workforce Workgroup focused on how best to improve the recruitment and retention of direct-care workers in the long-term living system. The Workgroup includes providers, labor representatives, consumers and other advocates. Its goal is to articulate the primary issues facing the direct-care workforce, research possible solutions, and make recommendations for action.

Pennsylvania's direct-care workforce includes more than 130,000 women and men who provide daily, hands-on support to elderly and younger consumers with physical and developmental disabilities. These direct care workers go by many names—nursing assistants, home health aides, home care workers, personal care aides and attendants, and direct support professionals. These occupational designations vary according to levels of training, the setting in which direct-care workers are employed, as well as the community of consumers they serve.

Projections indicate that by 2014, Pennsylvania will need an additional 24,610 direct-care workers—a **19 percent increase from 2004**—or a rate of growth nearly three times the state average for all occupations.

While regulatory and training requirements for direct care workers vary, all these professional caregivers operate at the vital point where the long-term living system “touches” the individual consumer, and thus where the essential caregiving relationship between the consumer and the paid caregiver is formed.

In 2007, the Center for Health Careers and the Governor's Office of Health Care Reform issued a report titled *Addressing Pennsylvania's Direct Care Workforce Capacity: Primary Recommendations for Quality Jobs and Quality Care*. The report outlines a series of recommendations by the Direct Care Workforce Workgroup about how best to support and grow the direct care workforce. The recommendations include greater access to affordable health insurance, a higher minimum wage for direct care workers, and improved access to full-time work opportunities.

One recommendation involves raising the training standards for direct care workers. Doing so would require a new **training and credentialing system** for direct care workers, one that is competency-based and built on the principles of person-centered care and consumer direction. Importantly, there is broad stakeholder agreement that such a system must take into consideration the costs to employers for enhanced direct care worker training.

Along those lines, a related recommendation in the report focuses on addressing Pennsylvania's payment systems for nursing homes and home and community-based care providers and creating financial rewards or incentives for higher training standards and superior performance with respect to direct care staffing adequacy, stability, and care quality. Approaches could vary in the degree and manner to which payments are linked to performance measures, but the basic premise is to foster a return on investment mindset about improved direct care worker training and supervision across the long-term living system.

Fortunately, the Commonwealth has the beginnings of a promising infrastructure through which to build out an employer-friendly training and credentialing system for direct care workers. The state Workforce Investment Board (WIB) has several years of experience working with local WIBs on the Industry Partnership approach to direct care worker investment.

An Industry Partnership is a collaborative effort that brings together management, labor and educational entities around the common purpose of improving the competitiveness of a cluster of companies or organizations producing similar products or services. Our Health Industry Partnerships have focused on the retention and recruitment of direct care workers with great success and they now offer a promising model for future investment.

In closing, I want to reiterate the shared consensus among stakeholders in the long-term living system: All agree about the **crucial link between the quality of jobs held by direct-care workers and the quality of services provided to the full range of direct-care consumers.**

A rapidly aging demographic in our Commonwealth, combined with a fundamental policy shift designed to serve greater numbers of people in home and community-based settings, is now placing critical direct care workforce demands on our long-term living system. The challenge before us is to devise creative policy options for meeting those demands, and to do so in a way that ensures the provision of person-centered care to Pennsylvania's seniors and other adults living with disabilities.