

SENATE SPECIAL COMMITTEE ON AGING HEARING
*Taking care of Mom and Dad: Why We Need a Quality Workforce to Serve
Our Older Americans*

Wilkes University Wilkes-Barre, Pennsylvania

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TESTIMONY OF VERA SALTER Ph.D. PROFESSIONAL
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My name is Vera Salter and I am the Professional Development Director for the Direct Care Alliance, a non-profit organization that serves as the national advocacy voice for the nearly 4 million direct care workers in the United States. Previously I founded the National Clearinghouse on the Direct Care Workforce at PHI, and worked with the US Department of Labor to establish an apprenticeship program for home health aides.

As you know the number of Americans needing long-term care is expected to double in the coming decades from 13 million in 2000 to 27 million in 2050. In Pennsylvaniaⁱ 1,867,500 people were aged over 65 in 2008 comprising 15 percent of the population and nearly one million people were aged over 75. In the Scranton Wilkes-Barre MSA 17.8 percent of the population is aged over 65.ⁱⁱ Those who need paid long-term services and supports in the future will find that direct care workers will provide the vast majority (over 70) percent of that care.

In 2008 there were 3.2 million nursing assistants, home health aides and personal assistants in the United States and that number is projected to increase to 4.3 million as early as 2018.ⁱⁱⁱ There are 165,000 direct care workers employed in Pennsylvania and these are among the largest and fastest growing occupations in the Commonwealth projected to increase by 50 percent over the next ten years.^{iv}

Most direct care workers receive low wages (on average \$10 an hour) little or no benefits and insufficient training and professional development. As a result this profession is plagued by high turnover rates that compromise the quality of care of the people they serve. If we are to retain direct care

workers in this profession we will need to provide basic labor protections, livable wages and benefits, training and opportunities for advancement.

I have been asked to address the issue of what is needed in terms of training, certification and advancement opportunities to make direct care a desirable profession.

Training: First I want to stress that all direct care workers should be required to receive adequate training. Currently Federal regulations require only 75 hours of training for Nursing Assistants and Home Health Aides, and there are no Federal requirements for personal care assistants who provide services under the Medicaid program or to private individuals. We recommend that all direct care workers receive at least 120 hours of training and continuing education on the job as indicated in the 2008 Institute of Medicine Report “*Retooling for an Aging America: Building the Health Care Workforce*.”

Recognition and Certification: Second we recommend that all direct care workers have competency-based professional credentialing programs available to them so they can receive recognition for their knowledge and skills. The Direct Care Alliance has established a National Professional Credential for personal assistance workers, a group that is not currently federally regulated. We also recommend that specialty credentials in such areas as dementia, peer mentoring, wound care, diabetes management and many other areas be available to direct care workers.

Respect and Opportunities for Advancement: We believe that it is imperative for direct care workers to have improved working conditions and opportunities for advancement within their field if they are to remain in this work and provide the quality care that our elders deserve. There are many ways that senior aides can serve as peer-mentors for new recruits and receive training and compensation for their expertise beyond their entry-level skills. Genesis HealthCare headquartered in Kennett Square Pennsylvania has maintained a Geriatric Nursing Assistant Specialist program for 21 years that trains and compensates nursing assistants for their advanced knowledge.

There have been numerous qualitative and quantitative studies that have documented the measures are effective in retaining workers.^v

These include:

- An analysis of interviews with participants in a large career ladder demonstration in Massachusetts that examined whether nursing assistants were more committed to their jobs when they perceive their jobs as having more autonomy, use of knowledge and teamwork.
- A retention specialist program that demonstrates that assigning a manager with expertise in retention programs to a facility can improve retention when compared to facilities without such a program.
- The WIN A STEP UP program in North Carolina that provides continuing education and compensation for education modules.

Dr. Peter Kemper, a Professor at Penn State University interviewed direct care workers in all settings in his role as evaluator of the Better Jobs Better Care project. He summarized what they say is most important to them: “More pay, better work relationships, being appreciated, listened to and treated with respect.”

In other words, what we all want in our work. Unfortunately these efforts are limited and sporadic. What is needed is a broad public policy that changes the way direct care work is managed and compensated.

ⁱ Kaiser State Health Facts

ⁱⁱ U.S. Census 2003 ACS Survey

ⁱⁱⁱ PHI Facts 3 February 2010 Update.

^{iv} PHI State Facts: Pennsylvania’s Direct-Care Workforce October 2009

^v A number of these studies are included in a special edition of *The Gerontologist* July 2008 48 (suppl. 1)