

Investing in the Frontlines: Improving Employment Outcomes of Direct Caregivers in the Changing Healthcare Industry

August 14, 2014

Organized by the Federal Reserve Bank of St. Louis

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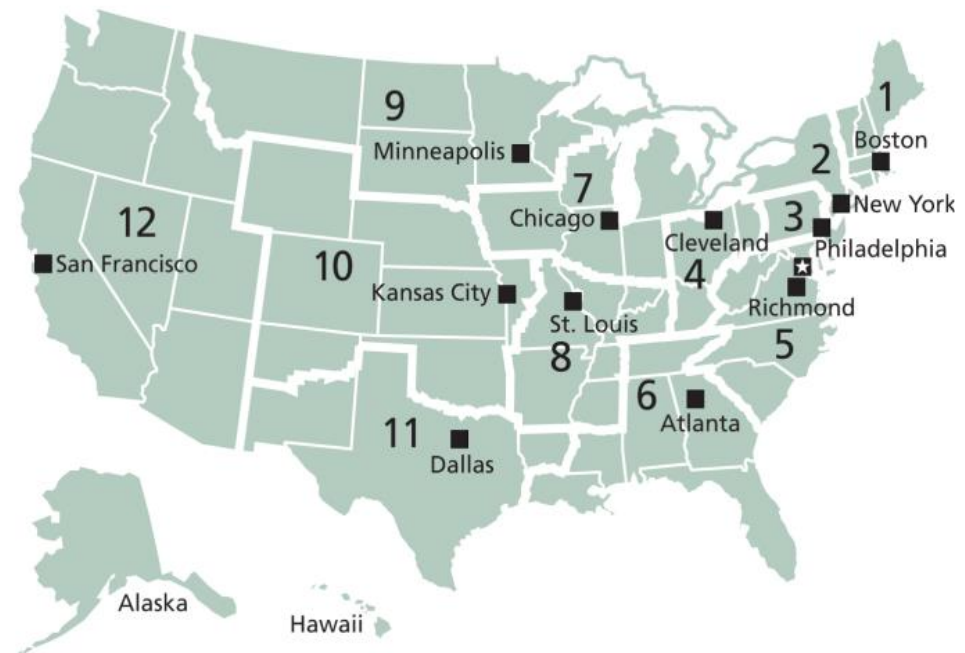
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Community Development

The Community Development (CD) function within the Federal Reserve System – consisting of individual departments at each of the twelve Federal Reserve Banks as well as at the Board of Governors – promotes economic growth and financial stability for low- and moderate-income (LMI) communities and individuals through a range of activities, including:

- **Convening stakeholders**, including practitioners, financial institutions, nonprofits, governmental agencies, and the philanthropic and private sectors,
- **Conducting and sharing research** to examine economic challenges facing low- and moderate-income communities and attendant policy implications; and,
- **Identifying emerging issues.**



Today's Presenters and Agenda

- **Steven Shepelwich**, *Senior Community Development Advisor*, Federal Reserve Bank of Kansas City
- **Jan Hunter**, *CareerSTAT Director*, National Fund for Workforce Solutions
- **Steven L. Dawson**, *Strategic Advisor*, Paraprofessional Healthcare Institute (PHI)

Introduction

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Implementing the Patient Protection and Affordable Care Act: Impacts on the Frontlines of Caregiving

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The Workforce Implications of the ACA

- About CareerSTAT and the National Fund
- Overview
- Affordable Care Act (ACA) Legislation, Goals and Impacts
- Labor Demand
- Skills Demand
- Implications to workforce planners
- Recommendations
- Q&A

About CareerSTAT and the National Fund

- **CareerSTAT, is a national, employer-led initiative of the National Fund for Workforce Solutions. Our strategic imperatives are to:**
 - Establish an employer-led advocacy council for expanding investments that yield strong skill development and career outcomes for lower wage earning, frontline healthcare workers.
 - Promote these investments by generating support from healthcare Leaders who endorse and champion investments in frontline workers and recognizing those healthcare institutions who meet career advancement standards.
 - Create Guidance Tools for Productive Investments in Front-Line Healthcare Workers.
 - Design and release studies that document effective practices and make the business case for investments.
 - Disseminate best practices to healthcare industry leaders and public policy decision makers.

Overview

- High degree of uncertainty – “building the car while driving it”
- Frontline workers essential to Triple Aim
- Demand will increase in both patient and technology-centered positions
- Higher skill expectations: top of the job description, specific skills
- Opportunities for new or expanded roles and advancement
- Challenges, unknowns and cross-cutting trends

ACA Legislation

- Effort to accomplish two key things:
 - **Make health care accessible to more people**
 - Prevents insurers from denying care for pre-existing conditions
 - Extends insurance to all through “exchanges”
 - **Improve the process of delivering care, to lower costs, increase quality, and improve health outcomes**
 - The US spends more on healthcare per capita than any other industrialized nation
 - The US achieves less in outcomes measures

Source: Berwick, Nolan and Whittington

ACA Goals

- **Expand access to care**
 - Health care exchanges
 - Expanding Medicaid to 138 percent of poverty line
 - Prevent denial of coverage for pre-existing conditions
 - Individual and employer mandates
- **Improve the delivery of care (“triple aim”)**
 - Lower costs
 - Increased quality of care
 - Improved health of populations

ACA Health Care Impacts

- **Transforming** 1/6 of the U.S. economy; biggest change in our system of social support in half a century
 - Medicare / Medicaid was the last large scale change
- **Transforming** health care delivery
 - Focus on wellness and prevention
 - Focus on primary care over hospital-based care
 - Care is coordinated across the continuum and across disciplines
 - Care is patient-centered
- **Transforming** health care financing
 - Paying for performance: incentives to lower readmissions, improve patient satisfaction, achieve better health outcomes
- **Shifting** workforce composition
 - Focus on frontline worker supply and demand, scope of practice and roles

ACA Mechanisms

- Payment reforms: paying for performance
 - Lower readmission rates
 - Higher patient satisfaction
 - Better health outcomes (heart failure, pneumonia, infections)
- Improving coordination of care across providers & episodes
 - Accountable Care Organizations
 - Patient Centered Medical Homes
- Promoting prevention
- Patient self-management
- Community-based care
 - Grants to community health centers

ACA Labor and Demand

- **Several Emerging Patterns**

- Job growth is moving from acute care to primary care, outpatient settings, home health and long-term care facilities
- Strong occupation demand in support & **tech**: home health aides, Certified Nursing Assistants (CNAs), pharmacy technicians, Emergency Medical Technician (EMTs), medical assistants, health information techs (spell out)
- Frontline workers being asked to performing at the top of their license/job description;
- Frontline workers being enabled to participate in problem-solving and process improvement, using advanced technology, and seeing their role evolve from treating sickness to promoting wellness
- New roles and responsibilities to meet ACA cost and patient care goals.

Traditional Jobs, Expanded Roles

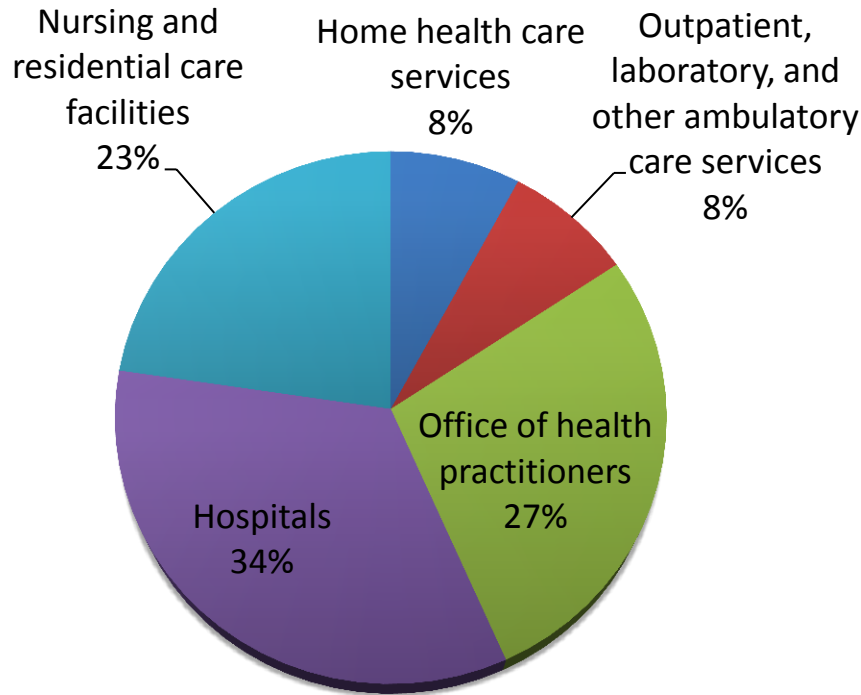
- **CNAs, Patient Care Assistants**
 - Customer service, observation (for safety), patient transitions
 - Assume routine tasks of RNs (documentation, med pulls)
- **Medical Assistants**
 - cross-training to assume administrative and patient care roles; EMRs
 - coaching patients in disease management
 - assist with chart reviews and updates
 - follow-up with patients outside of visit (meds, Dr., self-care)
- **Health IT and Information Management**
 - ICD-10 codes; cross training in clinical and IT; data analytics

New Roles, Emerging Occupations?

- **Emerging Roles:**
 - Case managers: RNs, social workers, non-licensed staff
 - Community health workers
 - Patient navigators
 - Care managers
 - Health coaches
- **Critical skills:** Knowledge of community resources; interpersonal and team skills; assertiveness; understanding the care transition

Sector Growth (continued)

- Health Care Subsector Growth 2010 – 2020



Health Care Employment by Subsector: 2010

Source: Bureau of Labor Statistics

Skills In Demand

- **General:** Team skills, communication, technology, problem-solving, knowledge of the care transition
- **Direct Care (CNAs, Patient Care Associates (PCAs)):** Observational skills, customer service
- **Medical Assistants:** Administrative as well as clinical skills; supervisory skills in some cases
- **Patient Navigators:** Assertiveness, cultural competencies
- **Health Information/Med Records Techs:** Medical terminology, data analytics, detail orientation, cross-disciplinary understanding

Recommendations

- **Employers:**
 - Create a workforce planning function that can measure and forecast workforce needs, lead workforce development efforts internally and externally
 - Invest in frontline workforce skills, career advancement and measure impact
- **Policymakers:**
 - Advocate for investment in upgrading of low-quality but essential frontline jobs
- **Workforce Institutions:**
 - Build capacity of smaller health care employers and promote piloting, scaling of promising practices
- **Philanthropy:**
 - Support efforts to analyze ACA impact on frontline workforce and promote new training investments for frontline workforce.

Challenges

- No template or standards for new roles – “you can’t download the job description”
- Payment model lagging behind delivery reforms
- Scope of practice restrictions
- Providers’ reluctance – ACA uncertainties, cost concerns
- Potential job reductions with merged positions, shift to primary, use of technology
- More responsibility without compensation
- Potential cutbacks in talent development

CareerSTAT Resources

- **Implementing the Patient Protection and Affordable Care Act: Impacts on the Frontlines of Caregiving** By Randall Wilson ([link](#))
- **CareerSTAT: A Guide to Making the Case for Investing in the Frontline Hospital Workforce** By Randall Wilson and Robert Holm ([link](#))
- **Visit the CareerSTAT website:**
<http://nfwsolutions.org/initiatives/careerstat>

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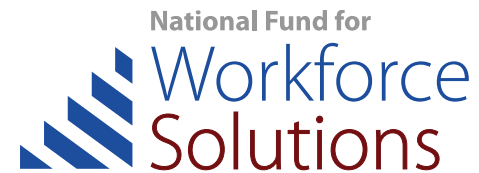
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Build Ladders *and* Raise the Floor

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Paraprofessional Healthcare Institute



- **PHI:** Nonprofit practice and policy organization for the front-line healthcare workforce.
- **CHCA:** Cooperative Home Care Associates – homecare agency / training program.
- **ICS:** Independence Care System – nonprofit managed long-term care coordination program.

A Hard Reality...

- The vast majority of low-income people in the U.S. will never achieve a middle-class life.

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“Those born at the bottom of the income ladder are likely to stay there as adults. More than 40 percent of Americans raised in the bottom quintile of the family income ladder remain stuck there as adults, and 70 percent remain below the middle.”

Source: The PEW Charitable Trusts Economic Mobility Project - 2012

The Core Challenge...

- What can we offer to the millions of low-income Americans who—at best—will remain trapped within low-wage sectors?

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Can we build ladders
and
raise the floor?

The Story of Cooperative Home Care...



Source: PHI, Inc.

A Model Employer in a Low-wage Sector...

- **Cooperative Home Care Associates:**
 - South Bronx-based home care agency
 - Serving elders / people with disabilities
 - 2100 home care aides
 - 70 percent Latina; 30 percent African American
 - Worker-owned
 - Unionized – Service Employees International Union

Entry-level Training...

- **Employer-based training program:**
 - 600 enrollees annually
 - 70 percent word-of-mouth recruitment
 - 80 percent graduation rate
 - 95 percent placement rate
 - 66 percent retention at one year
 - 15 percent annual turnover rate

The Role of the Employer...

- **Employer engagement beyond training:**
 - Small “emergency” loan fund
 - Stipends for tax assistance
 - Training of front-line supervisors
 - Peer-mentors / internal career ladder
 - Scheduling full-time work
 - Culture of respect

Changing the Rules of the Game...

- Public policy initiatives:
 - **New York State – minimum wage floor**
 - \$9.50/hour (2011) → \$14.09/hour (2014)
 - **Federal – fair labor standards**
 - Minimum wage and overtime protection
 - **New rungs in the aide ladder**
 - Hand-held technology / “Advanced Aide”

A Broader Definition of Success...

- **...built upon a wider range of strategies:**
 - Not only employer engagement in training
 - But fundamental job re-design.
 - Not simply “best practices” in programs
 - But industry-wide systems change.
 - Not just mobility for a relative few
 - But stability for the many.

Questions?

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Wrap-Up/Closing

Thank you to today's presenters and to all participants for joining this session.

Next steps:

- All session materials are available on our web site and in the next few days we will be posting an audio file of today's session.
- If you have topical suggestions for future sessions, or any questions about this program, please feel free to contact us at communities@stls.frb.org
- Information about future sessions will be posted on our website along with archived materials from past sessions:
www.stlouisfed.org/connectingcommunities/

Related Resources



In connection with this session, you can find a variety of additional resources on this topic , available at **www.fedcommunities.org**.

It provides an array of practical resources to help you in your role as a community development professional, whether your work involves supporting people, places, the practice of community development, or small business development.