



*House of Representatives
Study Committee on the Workforce Shortage and Crisis
in Home and Community Based Settings*

Final Report

**Chairman Jesse Petrea
Representative, 166th District**

**The Honorable Emory Dunahoo
Representative, 30th District**

**The Honorable Wayne Howard
Representative, 124th District**

**The Honorable Tom Kirby
Representative, 114th District**

**The Honorable Karen Mathiak
Representative, 73rd District**

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Prepared by the House Budget & Research Office

Introduction

The House Study Committee on the Workforce Shortage and Crisis in Home and Community Based Settings was created by House Resolution 1257 during the 2018 Legislative Session of the Georgia General Assembly. HR 1257 acknowledges that tens of thousands of Georgians with physical, intellectual, and developmental disabilities receive out-of-home care and support in 24-hour, seven days a week residential settings throughout the state, participate in day programs during each weekday, and receive care from their family. All of these citizens, as a result of their disabilities, require the support of direct support professionals and provider agency staff to ensure their good health is maintained and that their medical needs are promptly and properly met.

The resolution also recognizes that all of these citizens require the support of well-trained personnel from a workforce that is stable and reliable and experiences only a modest turnover rate; however, there is a well-documented shortage of qualified applicants for these vital positions as well as a high turnover rate in this workforce of 45 percent¹. By comparison, the national turnover rate for all industries is 3.7 percent². Furthermore, the caregiver workforce has high vacancy rates of nine to 10 percent nationally. Meanwhile, demand for services is skyrocketing. Each day in the U.S., 10,000 people turn 65. In Georgia, there will be a 315 percent increase in the 85 and older population by 2050.

HR 1257 acknowledges that there are developed and effective means of workforce recruitment and retention that is vital to serving this growing population; however, providers of services to Georgians who are aging or disabled have found it difficult and costly to attract and retain a caregiver workforce able to implement the current laws and regulations related to care in home and community-based settings. Therefore, HR 1257 recommends that a study of the conditions, needs, issues, and problems concerning the workforce shortage for home and community settings be done in order to discover solutions to support this population.

House Resolution 1257 provides for the membership of the committee, consisting of five members to be appointed by the speaker of the House of Representatives. The speaker appointed the following members: Representative Jesse Petrea, Chair; Representative Emory Dunahoo; Representative Wayne Howard; Representative Tom Kirby; and Representative Karen Mathiak.

The study committee held three public meetings at the State Capitol during 2018, occurring on September 11th, October 9th, and December 12th. During these meetings, the committee heard testimony from multiple agencies and organizations involved in the home and community-

¹ <http://amplifier.ancor.org/DSPWorkforce?0>

² <https://www.bls.gov/news.release/pdf/jolts.pdf>

based services workforce in Georgia. This report provides an overview of the issues discussed by these individuals at the three meetings.

Committee Findings

Throughout eight hours of testimony, the committee heard from a broad cross section of the disability community representing aging, intellectual disabilities, and physical disabilities. Presenters to the committee included the Department of Behavioral Health and Developmental Disabilities, Department of Community Health, Department of Early Care and Learning, Technical College System of Georgia, the Service Providers Association for Developmental Disabilities (SPADD), American Network of Community Options and Resources (ANCOR), United Cerebral Palsy, Easterseals Southern Georgia, Diversified Enterprises, Home Care Association of America, CareMaster Medical Services, Alzheimer's Association, National Aging in Place Council, Thanks Mom and Dad Fund, Georgia Advocacy Office, Georgia Council on Developmental Disabilities, Access 2 Independence, Side by Side Brain Injury Clubhouse, and numerous researchers, advocates, providers, and caregiving individuals from across the state.

In every case, testimony pointed to the growing crisis with the state's caregiver shortage. Quality, retention, and turnover were all common themes identified by presenters. These issues put our most vulnerable populations at risk. Furthermore, there was broad agreement that these trends are worsening due to demographics, low unemployment, and increasing demand for services. Common themes for improvement include the creation of a career ladder for caregiver advancement, reducing unnecessary regulation and policies, improving caregiver training, and increasing Medicaid reimbursement rates for services.

Career Development and Training

Among the presenters at the committee meetings, there were multiple caregivers who spoke about their desire for continued training as well as a career ladder that allows them to have attainable career goals, develop responsibility as they gain experience, and provide opportunities for promotions and specializations.

One current way for caregivers to get more training is through a Certified Nursing Assistant (CNA) certification. The Technical College System of Georgia (TCSG) offers the CNA certification at 17 technical colleges across the state. Due to the high demand for CNA-certified caregivers, the program is part of the HOPE Career Grant, meaning tuition and fees are free for those seeking CNA certifications. The program can be completed in one semester and requires passing an exam and completing 45 clinical contact hours. The program also includes soft skills training and addresses work ethic. In 2018, there were 2,417 graduates of the CNA program,

with a placement rate of 99 percent. Despite these rates, there is still a large shortage of CNA-certified caregivers.

Those caregivers who do not receive a CNA certification are frequently left to uneven and chaotic training by employers. Presenters at the committee meetings recommended developing an educational pathway model as well as promoting awareness of careers in aging and long-term care. This increased awareness should be included during K-12 education as well as through Georgia's technical colleges and should emphasize the different sectors of health and long-term care, focus on person-centered care, and improve society awareness of the importance of these jobs.

Proxy Care

In 2010, the Georgia General Assembly passed legislation to allow proxy caregivers to provide basic services to people, providing an alternative to getting care from nurses. A proxy caregiver is an unlicensed person trained by a medical professional to provide health maintenance activities, such as medication administration, for someone who cannot perform these activities themselves. Electing to receive care from a proxy allows many people to receive basic care from someone they already know, and enables many people, including the elderly and those with disabilities, to get assistance with medications or personal care outside of a hospital or long-term care facility.

During the committee's meetings, there was discussion regarding proxy caregivers and the training they are provided. There is no current training module provided through the TCSG CNA programs and it was suggested that this process be included in the CNA certification.

Caregiver Registry

Senate Bill 406 was passed during the 2018 Georgia Legislative Session and requires comprehensive criminal background checks for owners, applicants for employment, and employees providing care or owning a personal care home, assisted living community, private home care provider, home health agency, hospice care, nursing home, skilled nursing facility, or an adult day care. The result of this legislation will be a public-facing caregiver registry that allows patients to view criminal background check results for individuals providing care to elderly individuals who receive health and personal care services.

At this time, the registry will show only a pass or fail of a national fingerprint-based criminal background check done through the Georgia Bureau of Investigation; however, presenters at the committee meetings expressed the desire to have a broader caregiver registry that includes all types of caregivers as well as displays data regarding a caregiver's training, education, and credentialing to allow providers and individuals to view more details about potential caregivers.

Medicaid Rates and the Labor Market

A common issue heard during numerous testimonies is the low Medicaid reimbursement rates to home and community based services (HCBS) providers. Data collected by the committee shows that average pay rates for caregivers are between \$9 and \$12 per hour. HCBS providers are competing with other hourly wage employers in the retail industry that are paying the same rate or more for jobs that require less physical labor, responsibility, and travel. As examples, minimum hourly pay is \$11 at Walmart, \$12 at Target, and \$14 at Costco. This makes it difficult for providers to attract and retain qualified staff who are entrusted with the personal care of the most vulnerable Georgians. Multiple testifiers at the committee meetings strongly suggested increasing the Medicaid reimbursement rate in order to provide better pay to caregivers.

Committee Recommendations

Upon review of the information presented, the House Study Committee on the Workforce Shortage and Crisis in Home and Community Based Settings recommends the following:

Training

Improve retention through the development of a career ladder that provides opportunity for promotion and specialization.

1. Encourage the Technical College System of Georgia (TCSG) to offer a certificate on proxy caregiving as part of the Certified Nursing Assistant (CNA) training curriculum.
2. Encourage TCSG to include home and community-based settings for CNA training clinicals.
3. Encourage TCSG to enable home and community-based services providers to operate CNA training programs.

Policy

Improve access to caregiving jobs and wages to caregivers by improving efficiencies for providers in policies and procedures. Improve retention and turnover by allowing caregivers to focus on caregiving rather than excessive documentation.

4. Eliminate policies in program requirements that require caregivers to have a high school diploma or a GED. Instead, require passage of the Test of Functional Health Literacy in Adults (TOFHLA) to ensure basic literacy.
5. Improve the effectiveness of the proxy caregiver process by working with the Department of Community Health and offering statutory changes as necessary.
6. Create a complete caregiver registry by expanding the CNA registry to include non-certified caregivers.
7. Encourage the Department of Community Health to streamline and simplify documentation required by direct support caregiver staff.

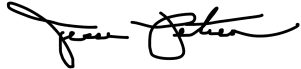
Budget

Improve quality, retention, and turnover by ensuring competitive wages for caregivers.

8. Increase the Medicaid reimbursement rates for Medicaid waivers serving the state's most vulnerable populations. The committee recommends increases that are passed through to caregivers by emphasizing that goal as the legislative intent. The committee recognizes that community-based caregivers are as equally important as institutional caregivers and have additional expenses (travel, etc.) in serving community populations.

Mr. Speaker, these are the findings and recommendations of the Study Committee on the Workforce Shortage and Crisis in Home and Community Based Settings.

Respectfully Submitted,



**The Honorable Jesse Petrea,
Representative, 166th District,
Chairman**

Prepared By:
Tara Boockholdt
Fiscal & Policy Analyst
House Budget and Research Office