



The Direct Support Professional Workforce “Crisis”: How data can inform retention and recruitment

HCBS Conference
Baltimore, MD
8/28/18 1:15-2:30pm



Office for People With
Developmental Disabilities

rtc on community living





rtc on community living

ICI

INSTITUTE *on*
COMMUNITY
INTEGRATION



UNIVERSITY OF MINNESOTA
Driven to Discover™



STATE

Beset by rapes, rats, scalding, Florida home for disabled could lose license

BY CAROL MARBIN MILLER AND MONIQUE O. MADAN

Steven's Post 🔥 1 🟢 2

🔥 Angry 💬 Comment ➦ Share

MINNEAPOLIS

In Minneapolis, a 'house of horrors' hidden in plain sight

Girls endured years of abuse, neglect; system did little

By Chris Serres Star Tribune | MARCH 12, 2018 — 11:15AM



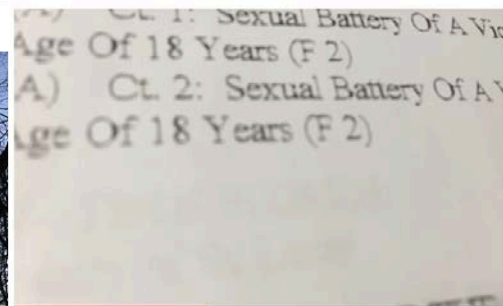
JEFF WHEELER, STAR TRIBUNE

Unshoveled sidewalks in front of the house where Jerry Lee Curry allegedly abused his twin daughters until authorities removed the young women from the home last

ChicagoTribune
News / Investigations / Suffering in Secret

f t e

Children with disabilities abused in group home, complaints allege



A state-funded group home that is supposed to help South Florida children with disabilities has racked up a history of complaints including child abuse and neglect, police and state records show.

Ad closed
Report
Why

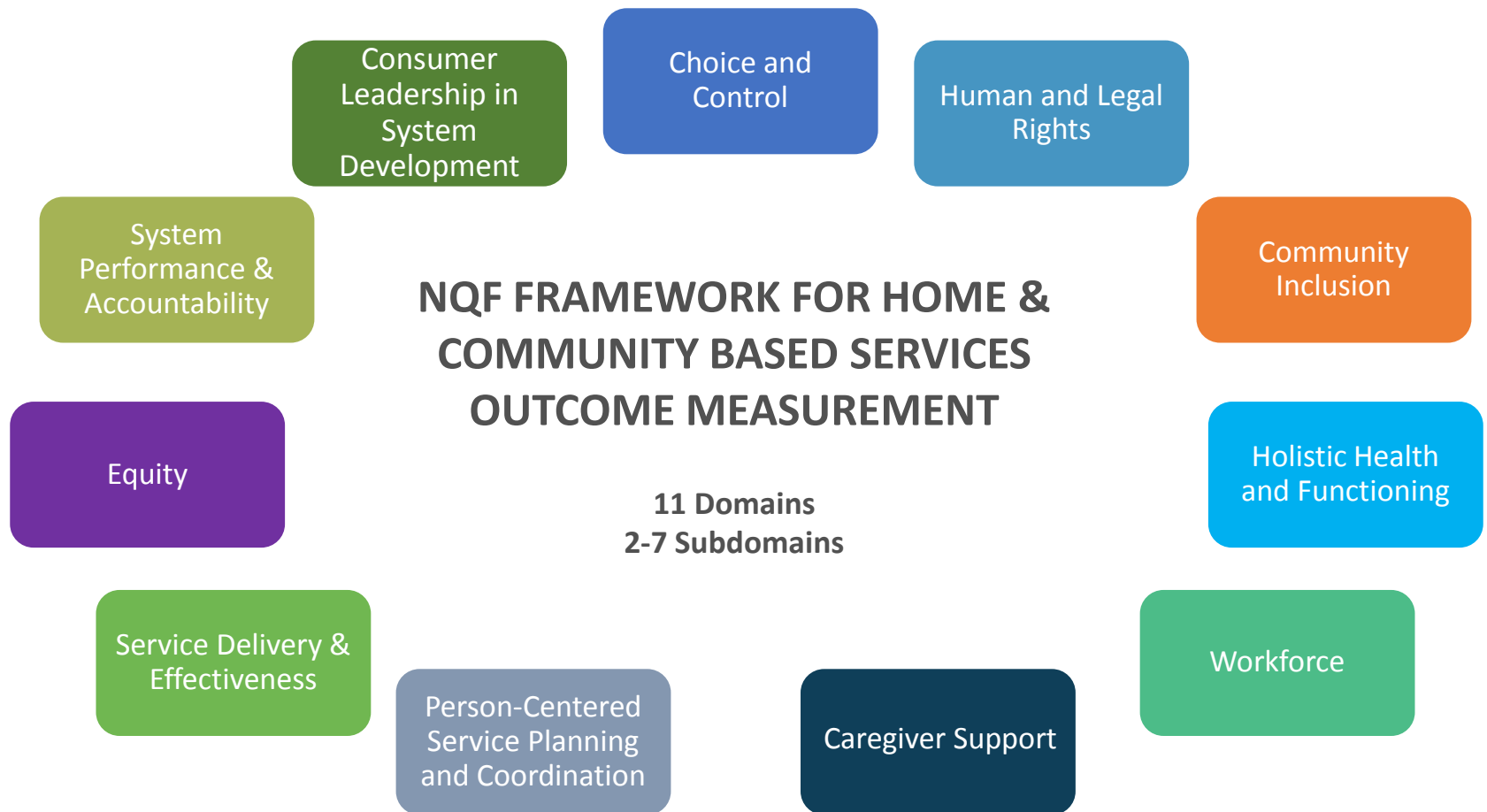
WNYP news
Published by
WNYP News

What Are Group Homes Hiding from Public? In One Case, Maggots.



Aug 10, 2017 · by David Klepper
From AP

National Quality Forum (NQF) framework





**Workforce
Key to
Quality**



Is there a crisis?

A **crisis** (from the Greek κρῖσις - *krisis*;^[1] plural: "crises"; adjectival form: "critical") is any event that is going (or is expected) to lead to an unstable and dangerous situation affecting an individual, group, community, or whole society. Crises are deemed to be negative changes in the security, economic, political, societal, or environmental affairs, especially when they occur abruptly, with little or no warning. More loosely, it is a term meaning "a testing time" or an "emergency event".



cri·sis Google

/ˈkrɪsɪs/

noun
noun: crisis; plural noun: crises

- a time of intense difficulty, trouble, or danger.
"the current economic crisis"
synonyms: emergency, disaster, catastrophe, calamity; More
- a time when a difficult or important decision must be made.
"a crisis point of history"
synonyms: critical point, turning point, crossroads, watershed, head, moment of truth, zero hour, point of no return, Rubicon, doomsday; More
- the turning point of a disease when an important change takes place, indicating either recovery or death.

crisis



NOUN

1 A time of intense difficulty or danger.
'the current economic crisis'
[*mass noun*] 'the monarchy was in crisis'
[+ More example sentences](#) [+ Synonyms](#)



1.1 A time when a difficult or important decision must be made.
[*as modifier*] 'the situation has reached crisis point'
[+ More example sentences](#) [+ Synonyms](#)

1.2 The turning point of a disease when an important change takes place, indicating either recovery or death.

Definition of CRISIS



plural crises \ˈkrɪ-,sēz\

- a : the turning point for better or worse in an acute disease or fever
b : a paroxysmal attack of pain, distress, or disordered function
c : an emotionally significant event or radical change of status in a person's life • a midlife crisis
- : the decisive moment (as in a literary plot) • The *crisis* of the play occurs in Act 3.
- a : an unstable or crucial time or state of affairs in which a decisive change is impending; *especially* : one with the distinct possibility of a highly undesirable outcome • a financial crisis • the nation's energy crisis
b : a situation that has reached a critical phase • the environmental crisis • the unemployment crisis



A Systemic Failure

Around the country people are pushing for changes that address the direct support workforce crisis. Among them are those rallying in New York City (pictured here). Photo courtesy of <http://facebook.com/BFair2DirectCare>.

*By Amy Hewitt, Joseph Macbeth,
Barbara Merrill, and Barbara Kleist*

Direct Support Professionals (DSPs) provide daily support to people with intellectual and/or developmental disabilities (IDD) so they can live and participate in their communities as friends, neighbors, co-workers, students, family members, volunteers, voters, and taxpayers. Increasingly these supports are provided inside the individual or family home, allowing other family members to work and have respite from their daily caregiving

Root of DSP workforce challenges

- **No** good planning
- Departments of Labor allowed “off the hook”
- Changing demographics
 - Aging of Americans
 - Fewer younger Americans
- Shifts in laws and expectations

Evolution of Supports and Services



Traditional Disability Services



Integrated Services and Supports



Types of Supports Leveraged

Other factors influencing reality

- Growth # of People with ID/DD Receive Services
 - **390%** increase in last 2 decades
- People with IDD live longer (age 66)
- Growing diversity
- Economic stability and growth
 - Impact of Great Recession on momentum

DSP workforce reality is a **public health crisis**

- ***Primary public health concern*** due to:
 - **size of the workforce** and increases in **demand** to support need
 - support provided is **essential to the health, safety and overall well-being** of seniors, people with disabilities
 - **substandard work conditions** undermine the ability to recruit and retain DSWs threatening the future supply

(Hewitt, A., Larson, S., Edelstein, S., Seavey, D., Hoge, M. A., & Morris, J., 2008).

Workforce conditions that deter entry into the profession



Low wages

Meager benefits

Physically challenging work (high rate of injury)

High accountability for actions

Isolation from other workers and supervisors

Lack of a career ladder

Insufficient training and professional development



Consistent workforce data

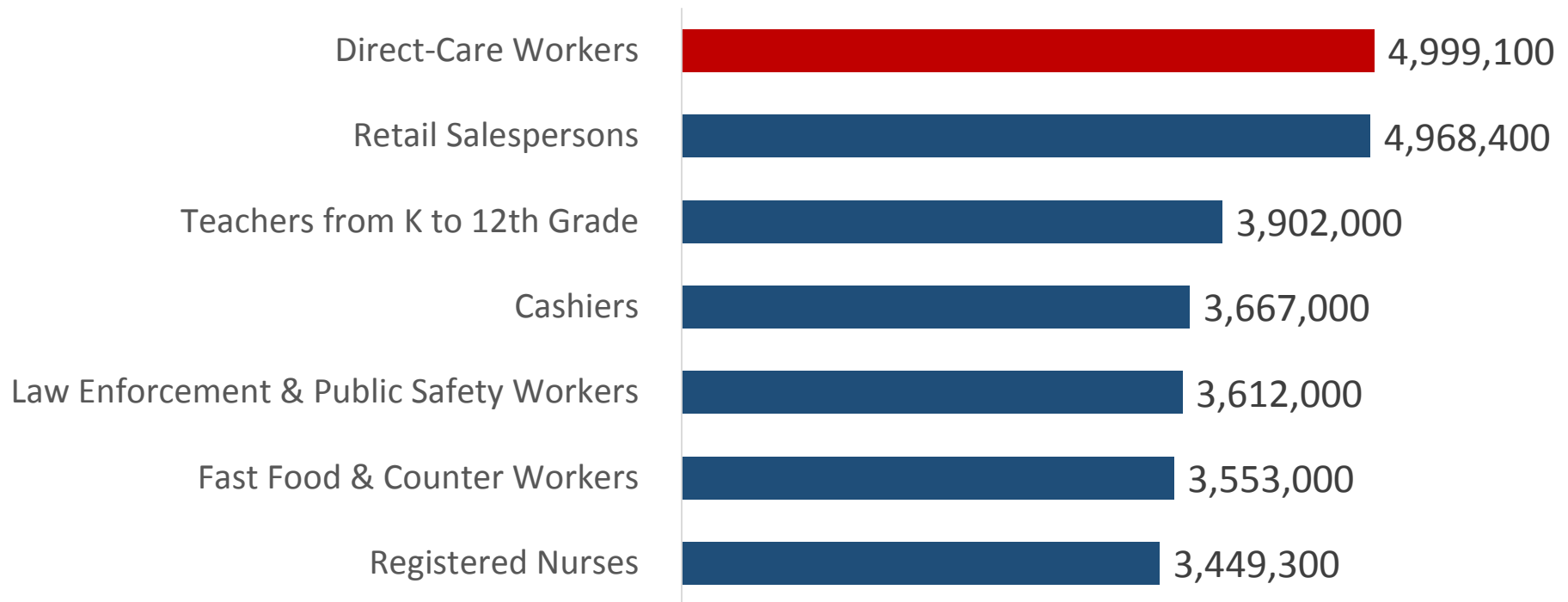
- **Number of DSPs**
 - PT/FT/relief or temporary
- **Demographics**
 - Basics
 - Retirement age
- **Wages**
- **Benefits**
 - Taken up
- **Crude Separation**
 - Before 6 months
- **Average tenure**
- **Vacancies**
- **Overtime paid in last 30 days**
- **Waiting lists, denials and authorized vs delivered services**
- **Frontline supervisor**
 - Number
 - Demographics
 - Wages
 - Crude separation
 - Vacancies
- **Differences by**
 - FT/PT and temp status
 - Setting type
 - Individual characteristics
 - Service type
 - Provider
 - Zip Code
- **Costs of recruitment, selection and on boarding**
 - Marketing
 - Advertising
 - Interviewing
 - Selection process
 - Background checks
 - Replacement DSP costs
 - Training delivery and time
 - Admin
- **Ratio # people served to people served**
- **Qualitative stories where a DSP changed a life and saved money**

Importance of DATA

- Legislative advocacy
- Accuracy in separating information DSP who with certain populations or types of services
- Make informed policy and practice decisions
- Create wage scales within organizations
- Other reasons?.....

Direct Care Workers

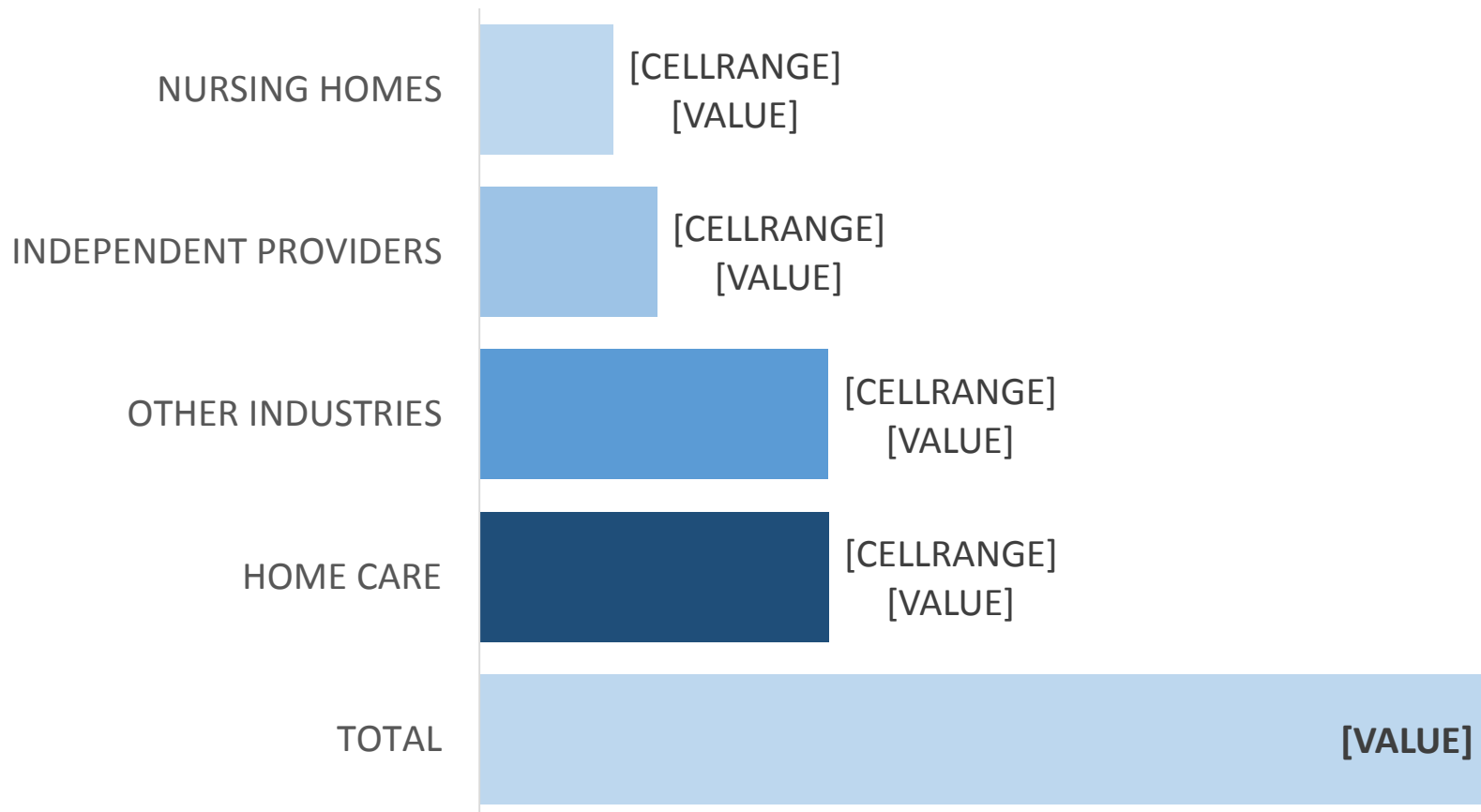
Largest Occupational Groups in the U.S., 2020



From: Occupational Projections for Direct-Care Workers 2012–2022

<https://phinational.org/wp-content/uploads/legacy/phi-factsheet14update-12052014.pdf>

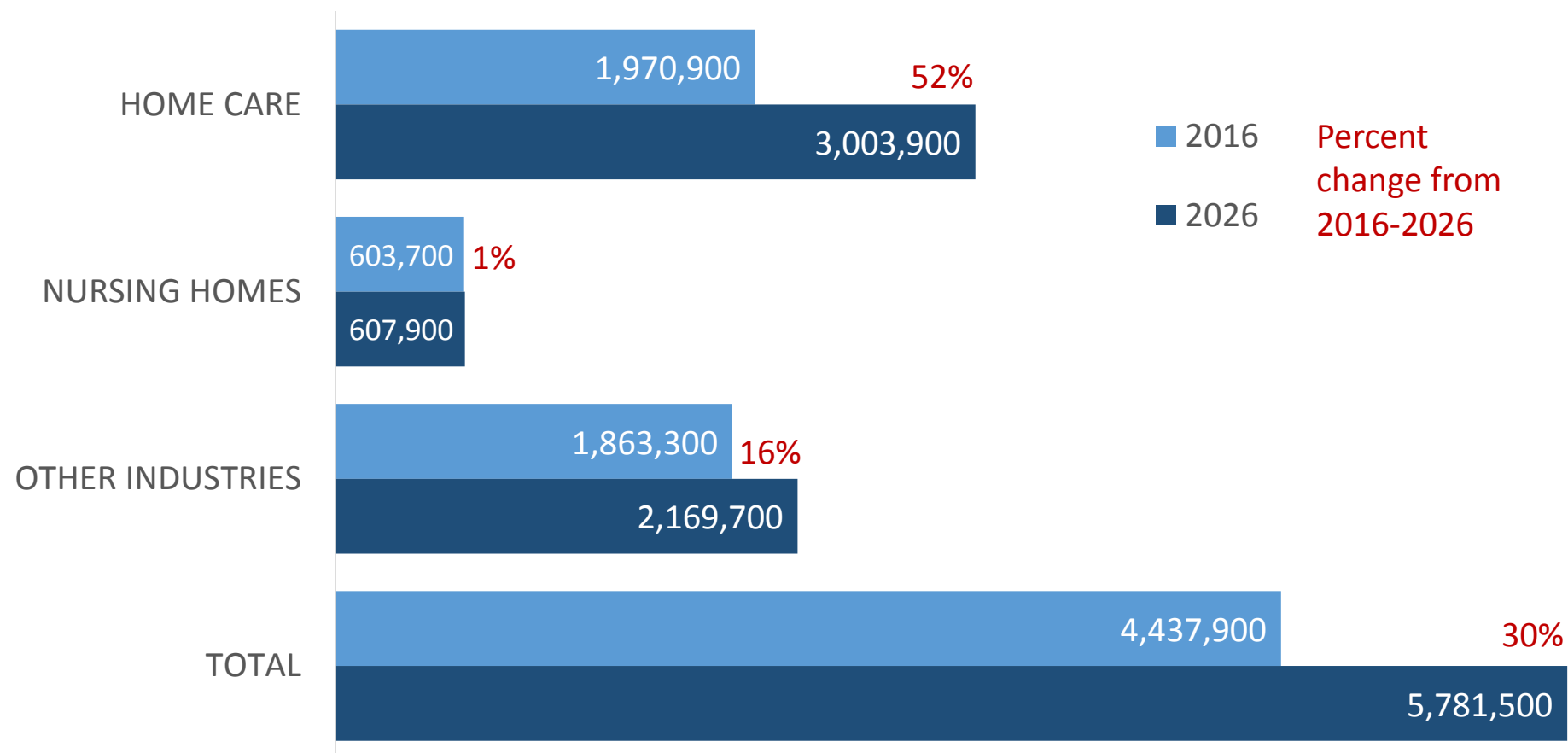
Number of DSPs in U.S. 2016



PHI. "Workforce Data Center." Last modified November 10, 2017.

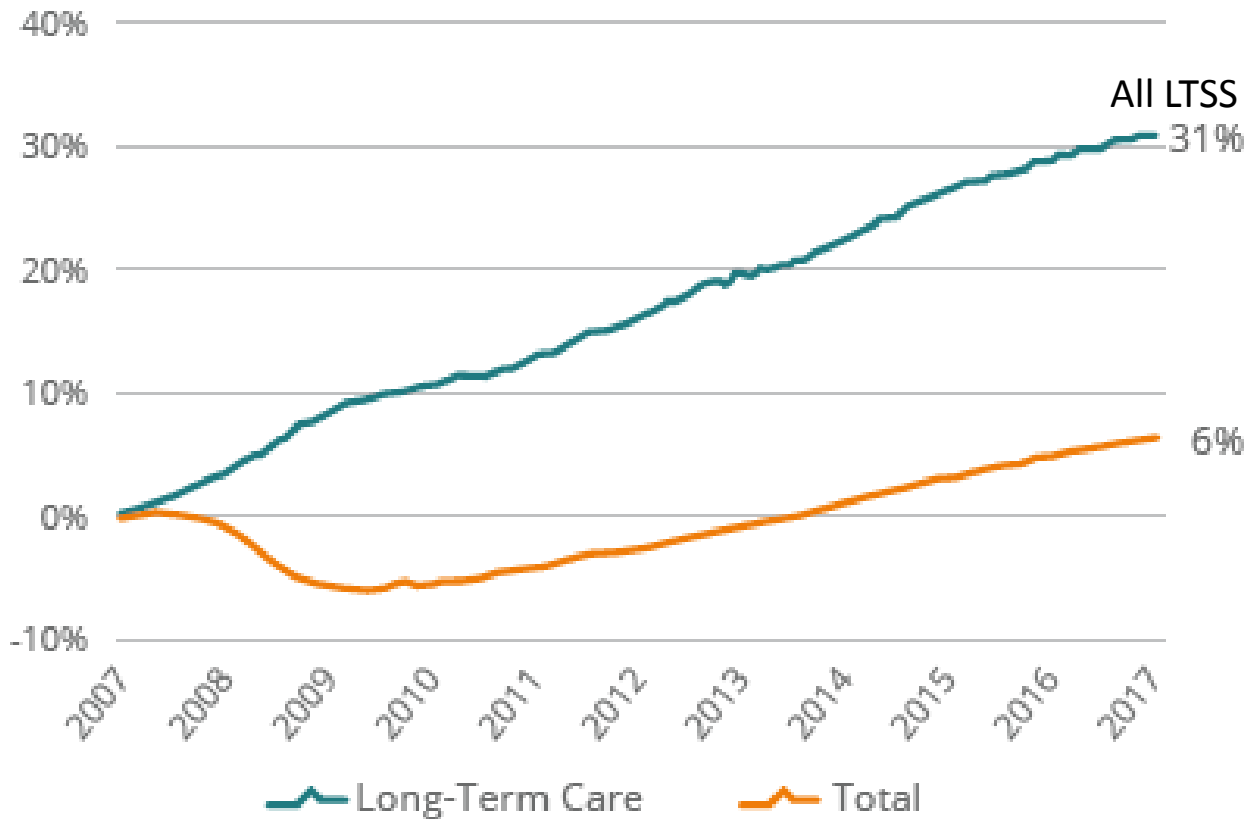
<https://phinational.org/policy-research/workforce-data-center/>

Projected growth of workforce 2016-2026 (BLS)



PHI. "Workforce Data Center." Last modified November 10, 2017.
<https://phinational.org/policy-research/workforce-data-center/>.

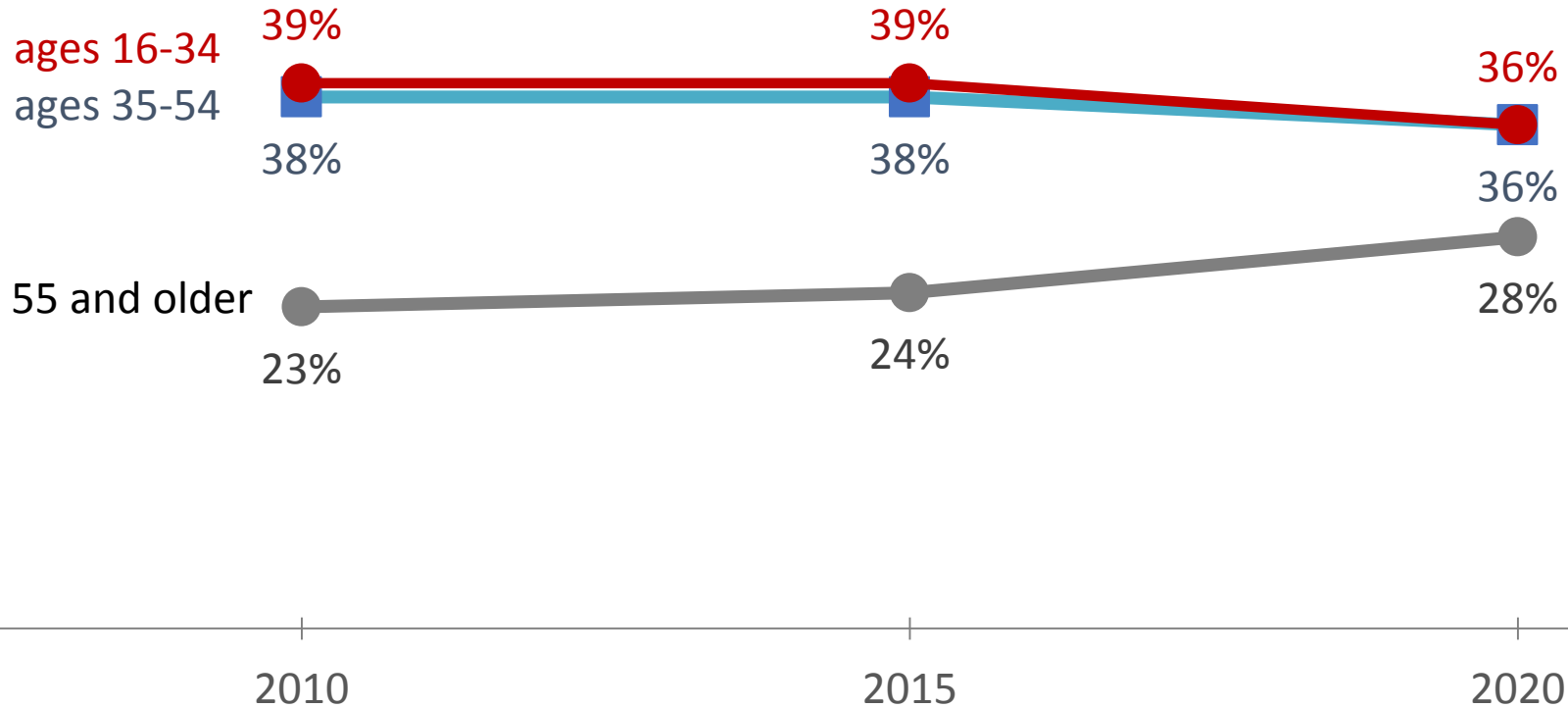
LTSS and U.S. economy 2007-2017



- 1 million+ direct care jobs (54% growth)
- 1 in 6 new jobs in U.S. was in LTSS
- 4/5 new jobs were in home care

From: <https://phinational.org/wp-content/uploads/2017/11/LTC-and-the-Economy-PHI-2017.pdf>
Source: U.S. Bureau of Labor Statistics (BLS), Current Employment Statistics (CES). 2017. Employment, Hours, and Earnings - National. <https://www.bls.gov/ces/>; analysis by PHI (October 4, 2017).

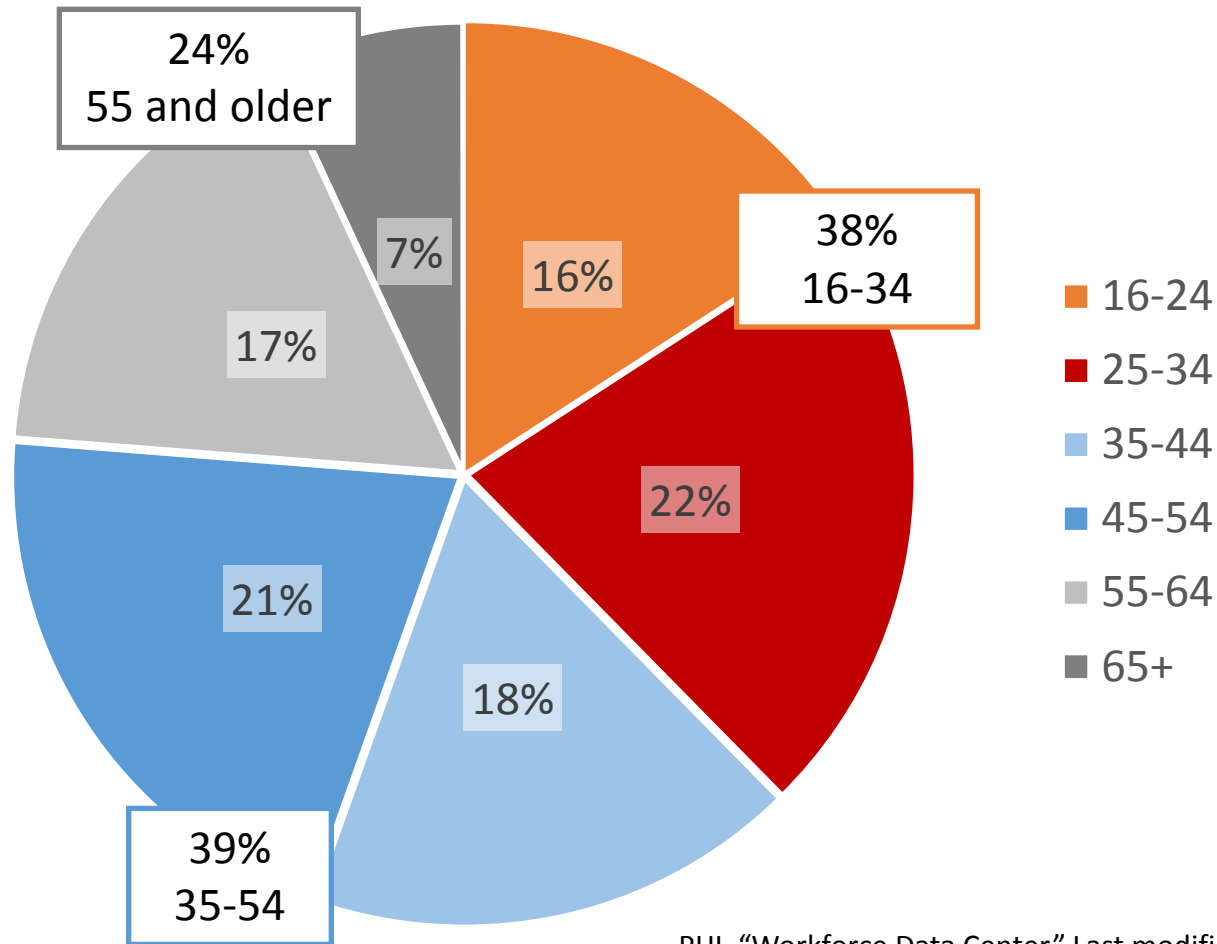
Projected Aging of the Direct-Care Workforce in the United States, 2010-2020



PHI, 2012 for 2010 and 2020 and for 2015: PHI. "Workforce Data Center." Last modified November 10, 2017.

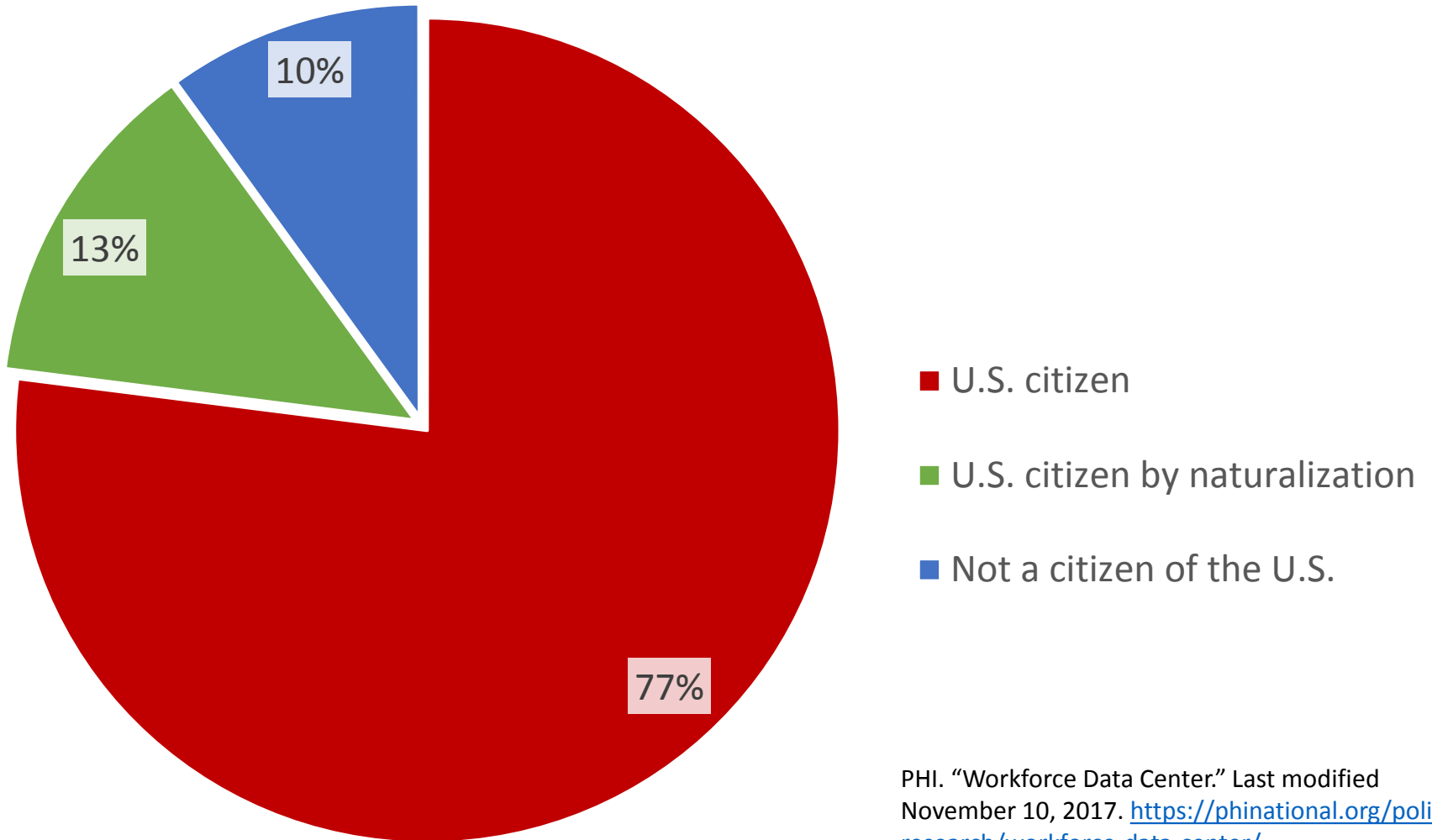
<https://phinational.org/policy-research/workforce-data-center/>

Age of DSPs in U.S. (2015 ACS)



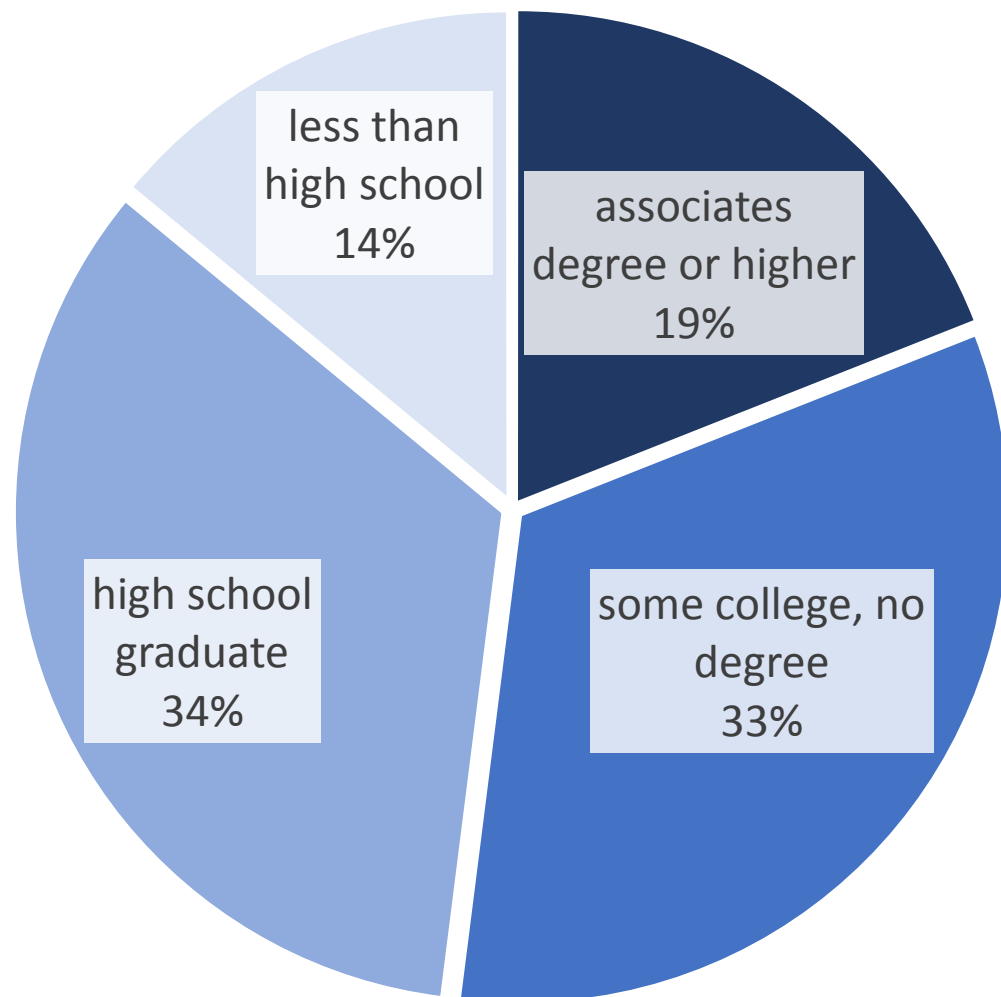
PHI. "Workforce Data Center." Last modified November 10, 2017. <https://phinational.org/policy-research/workforce-data-center/>.

DSP citizenship status in U.S. (2015 ACS)



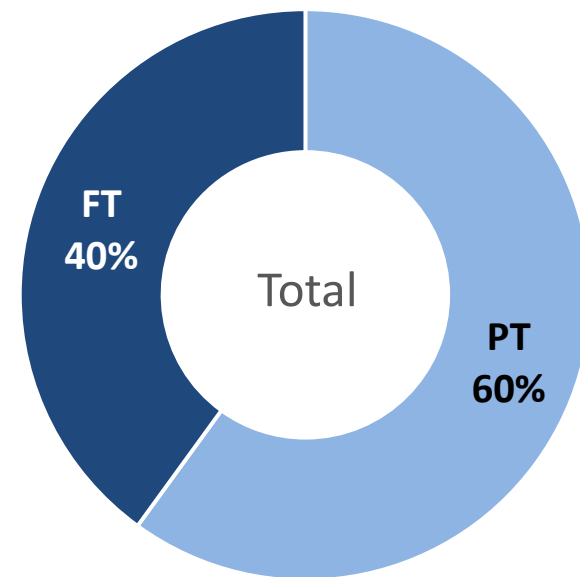
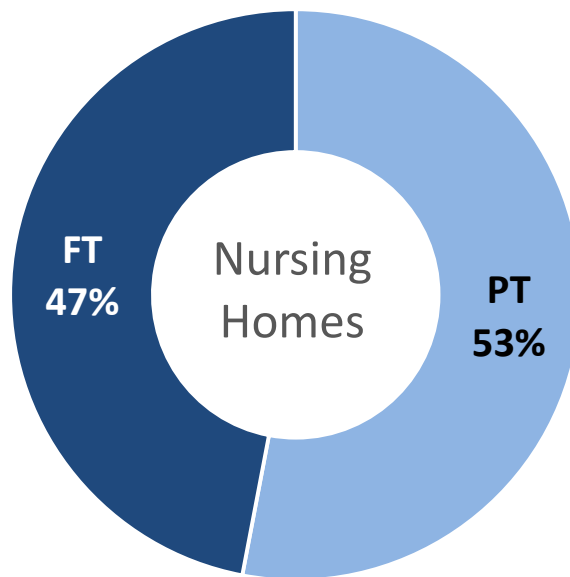
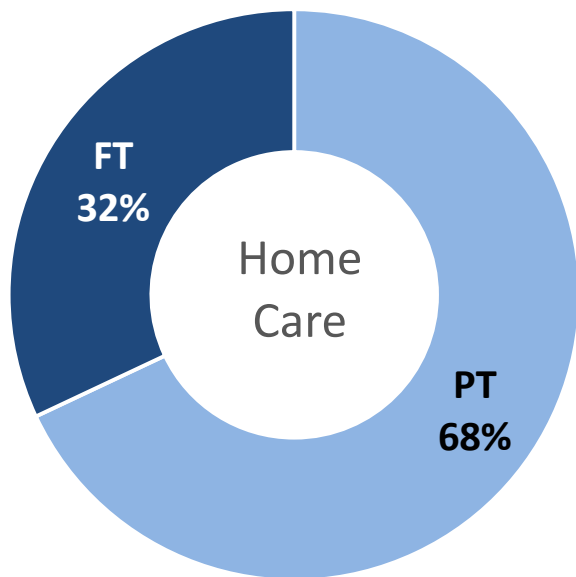
PHI. "Workforce Data Center." Last modified November 10, 2017. <https://phinational.org/policy-research/workforce-data-center/>.

DSP educational attainment in U.S. (2015 ACS)



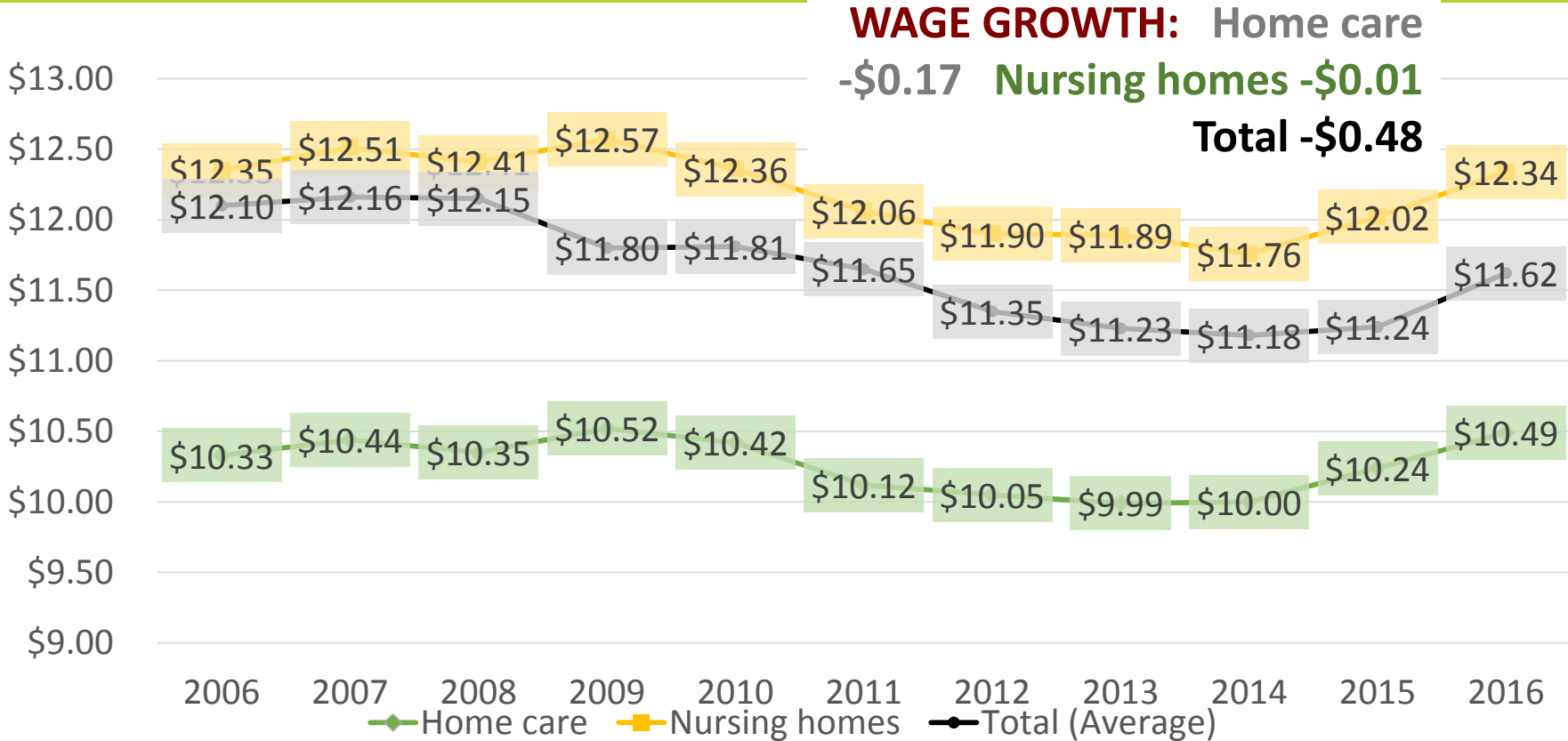
PHI. "Workforce Data Center." Last modified November 10, 2017. <https://phinational.org/policy-research/workforce-data-center/>.

National employment status in the U.S. (2015 ACS)



PHI. "Workforce Data Center." Last modified November 10, 2017. <https://phinational.org/policy-research/workforce-data-center/>.

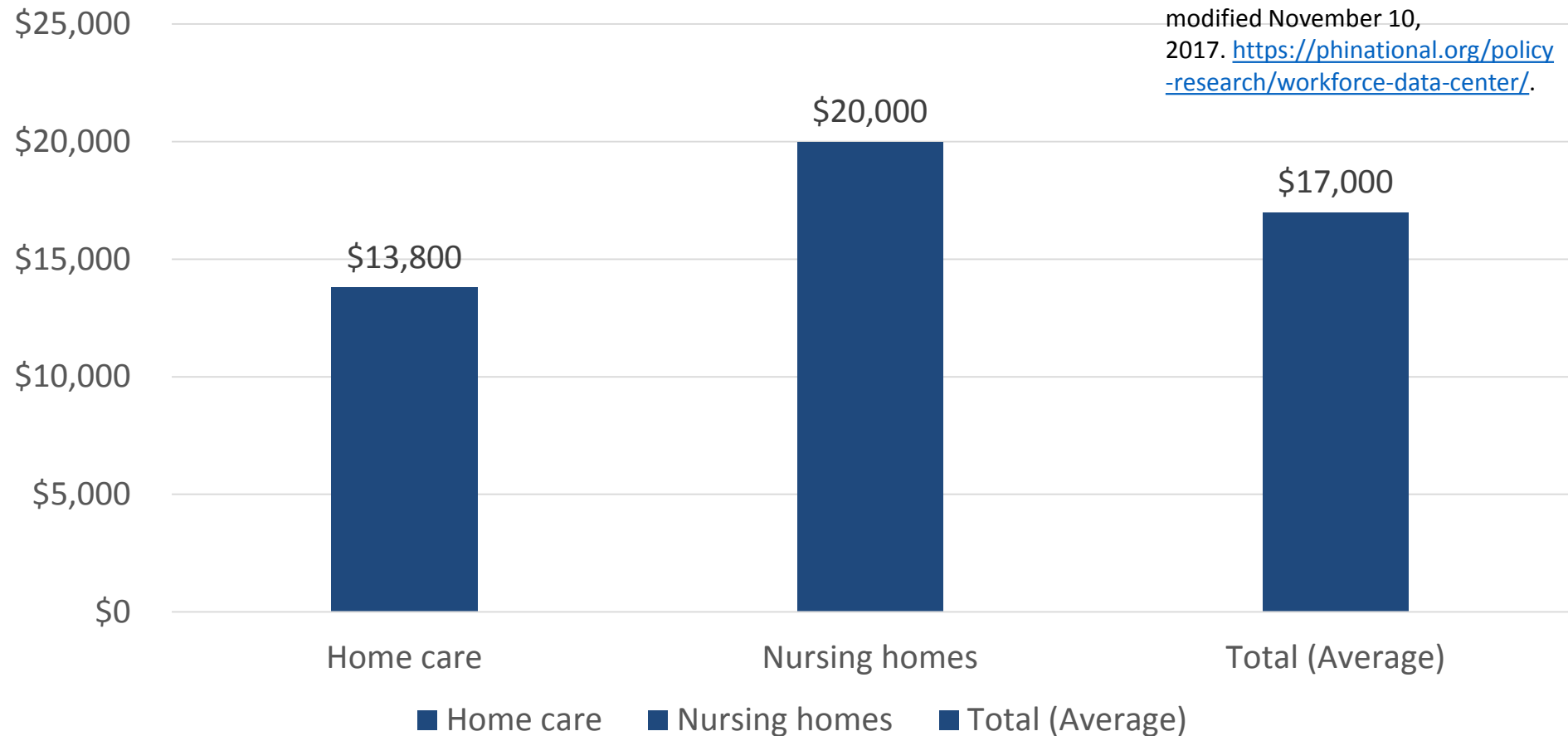
United States DSP wages over time (2016 BLS)



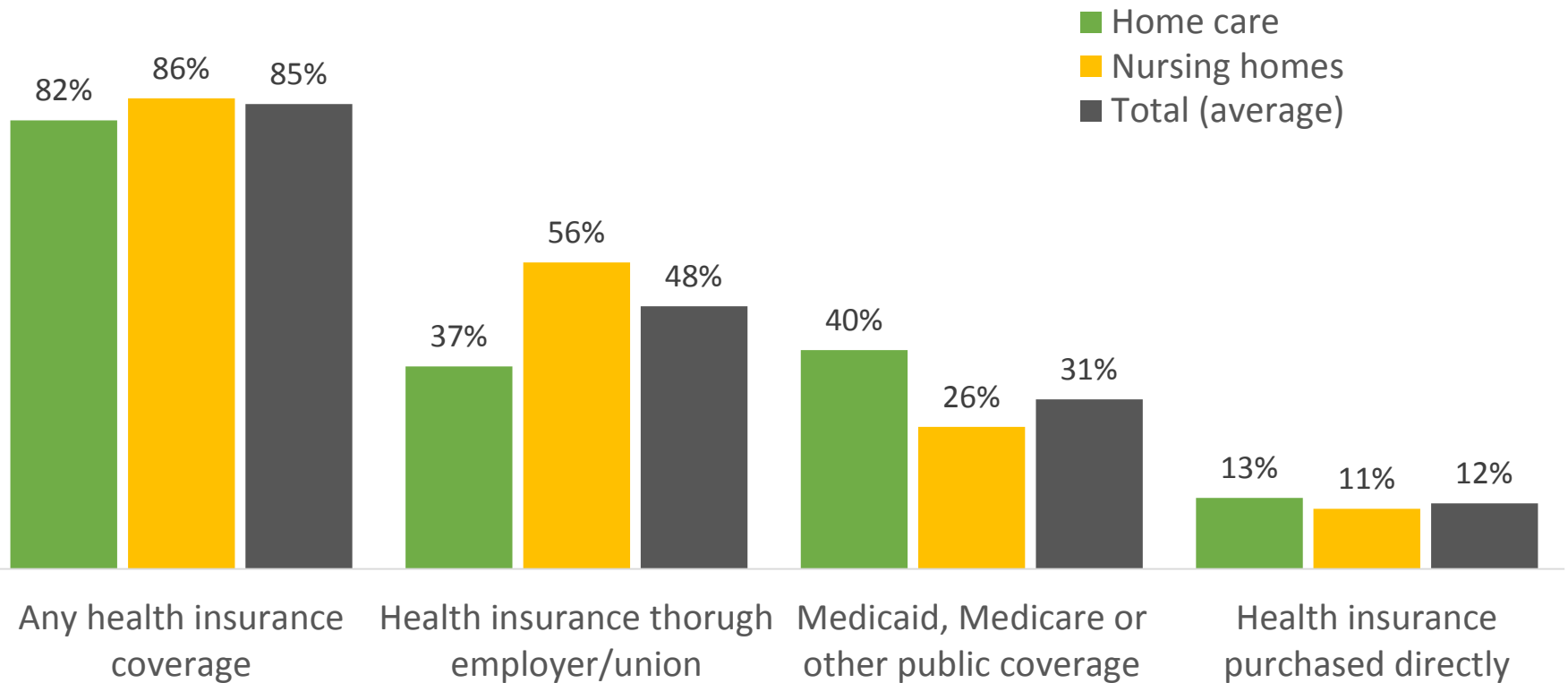
PHI. "Workforce Data Center." Last modified November 10, 2017.
<https://phinational.org/policy-research/workforce-data-center/>.

Median Annual Earnings (2015, ACS)

PHI. "Workforce Data Center." Last modified November 10, 2017. <https://phinational.org/policy-research/workforce-data-center/>.



United States DSP health insurance (2015 ACS)



PHI. "Workforce Data Center." Last modified November 10, 2017. <https://phinational.org/policy-research/workforce-data-center/>.

National Core Indicators™

2016 Staff Stability Survey Report



**NATIONAL CORE
INDICATORS™**
NASDDDS & HSRI



Human Services
Research Institute

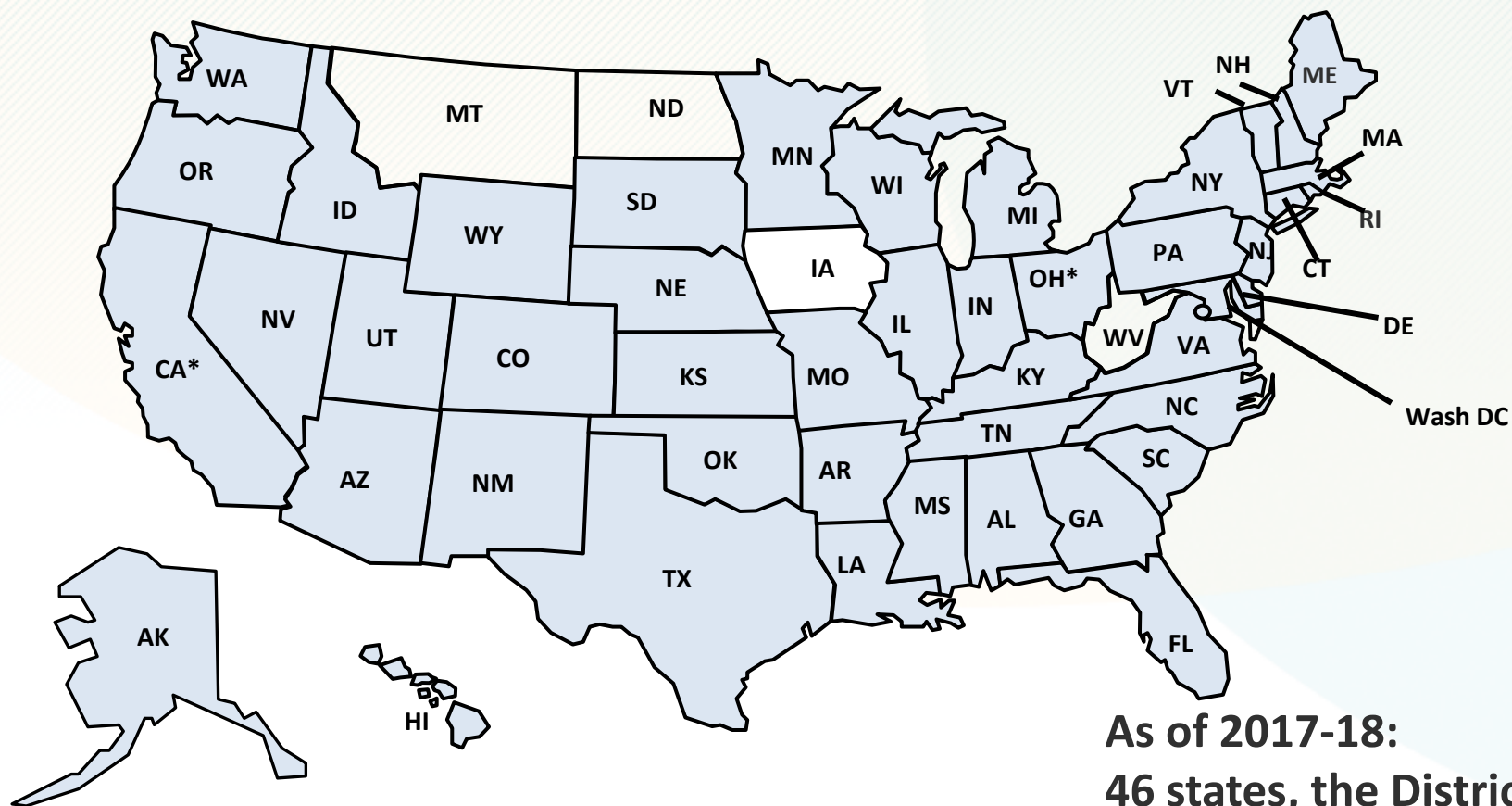
NASDDDS
National Association of State Directors of Developmental Disabilities Services

NATIONAL CORE INDICATORS (NCI)?

- NASDDDS – HSRI Collaboration
 - Multi-state collaboration of state DD agencies
 - Launched in 1997 in 6 participating states with a 15 state steering-committee – now in 47 states (including DC) and 22 sub-state areas
- Goal: Measure performance of public systems for people with intellectual and developmental disabilities
 - Help state DD systems assess performance by benchmarking, comparing to other states
- Assesses performance in several areas, including:
 - employment, community inclusion, choice, rights, and health and safety
- Now expanded to elderly and people with disabilities through the NCI-AD



National Core Indicators State Participation



**As of 2017-18:
46 states, the District
of Columbia and 22
sub-state regions**



Why Develop A Tool To Look At Staff Stability?

- Lack of consistent national data about direct service workforce- no DoL SOC* for DSP
- Data needed to assess status of a state's DSP workforce
- Measure impact of policy or fiscal initiatives
- Legislatures requesting data before approving increases based on the need for a competent, skilled workforce

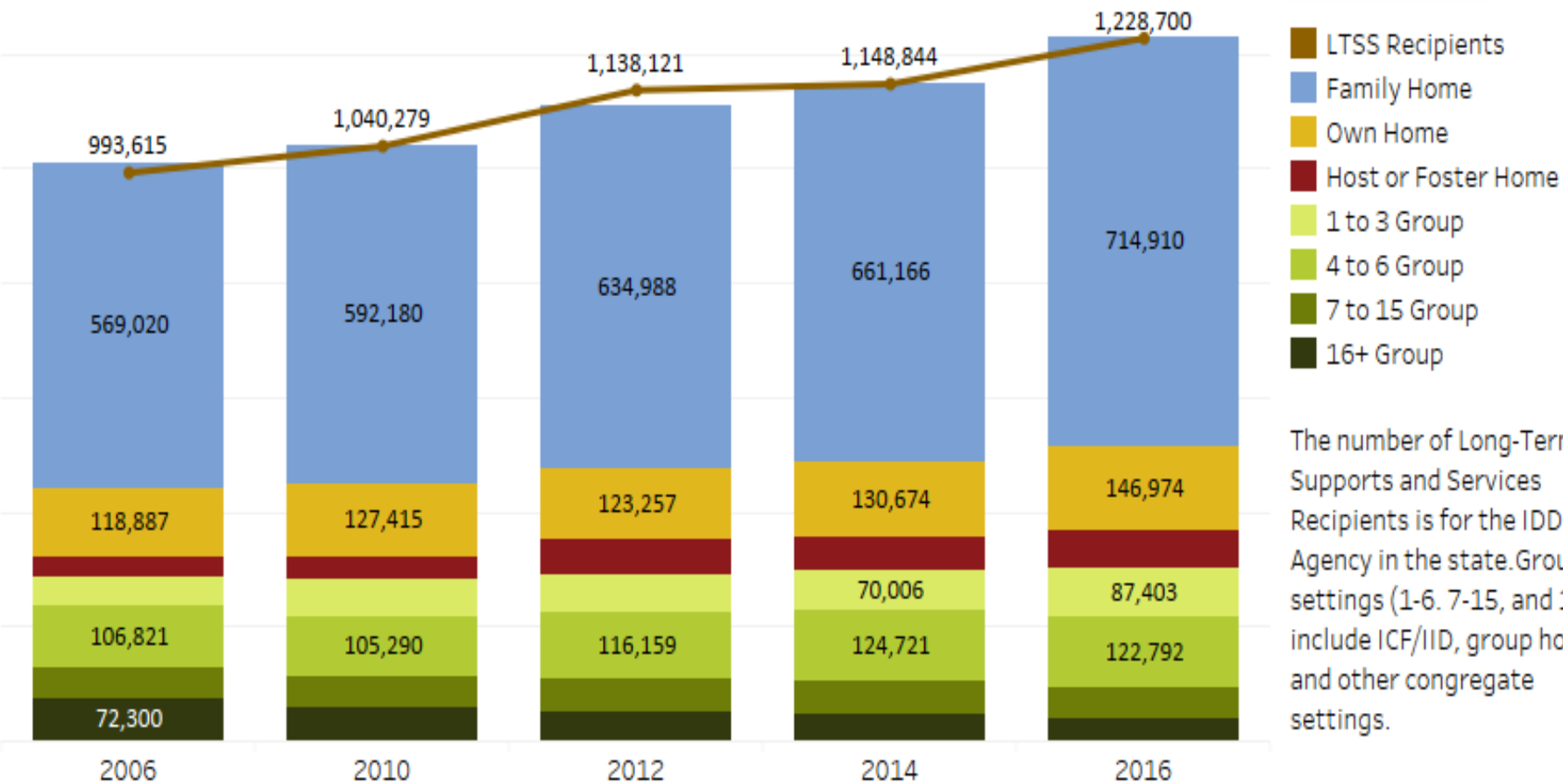
*Standard occupational classification



Growth in DD Services

United States

Living Arrangements of LTSS Recipients by Fiscal Year over Time

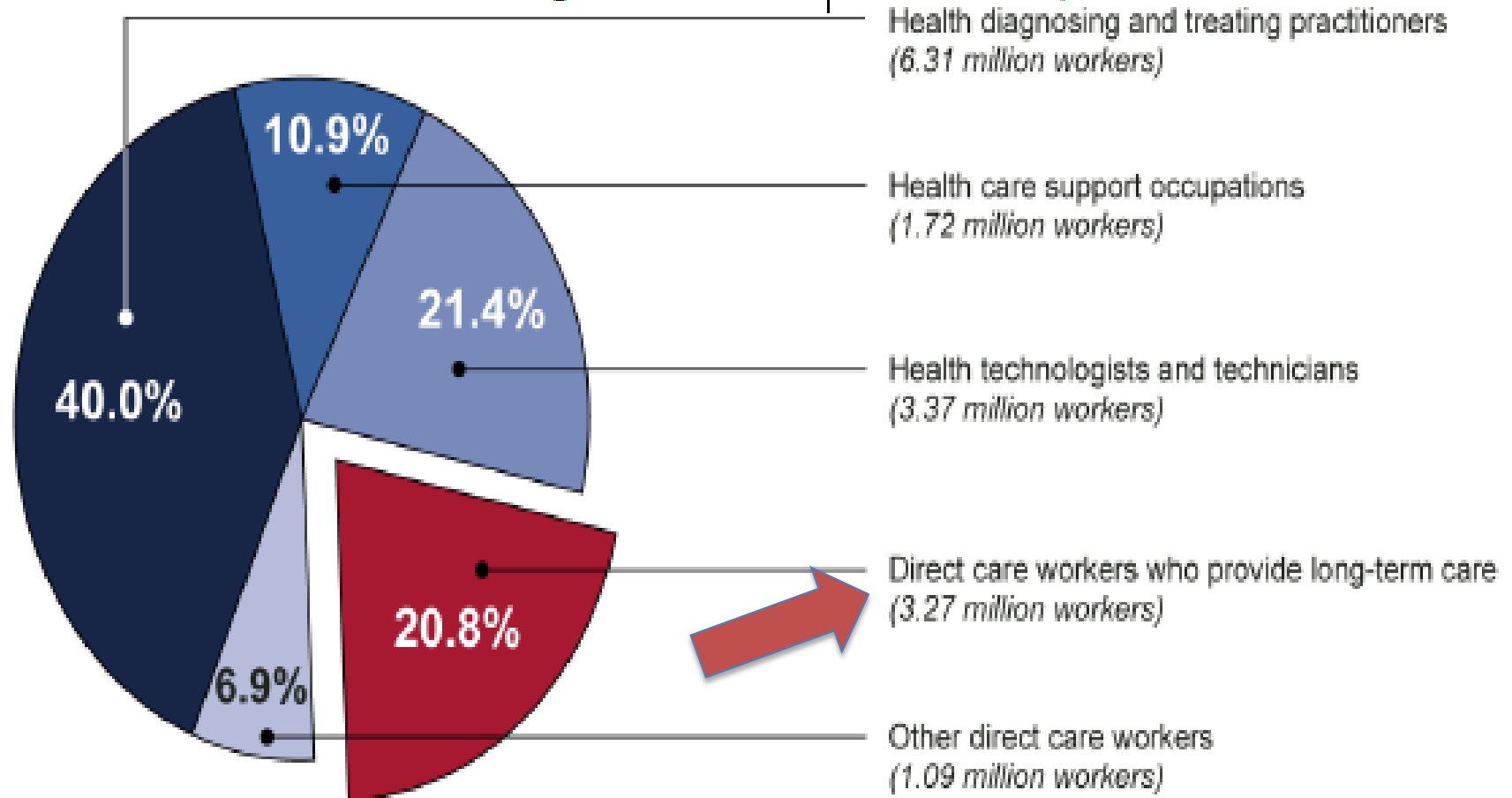


The number of Long-Term Supports and Services Recipients is for the IDD Agency in the state. Growth settings (1-6, 7-15, and 16+) include ICF/IID, group homes, and other congregate settings.



2016 GAO Report

Direct Care Workers as a Percentage of the Total Health Workforce, 2014



Source: GAO analysis of Census Bureau data. | GAO-16-718



Impact on Workforce and Agencies

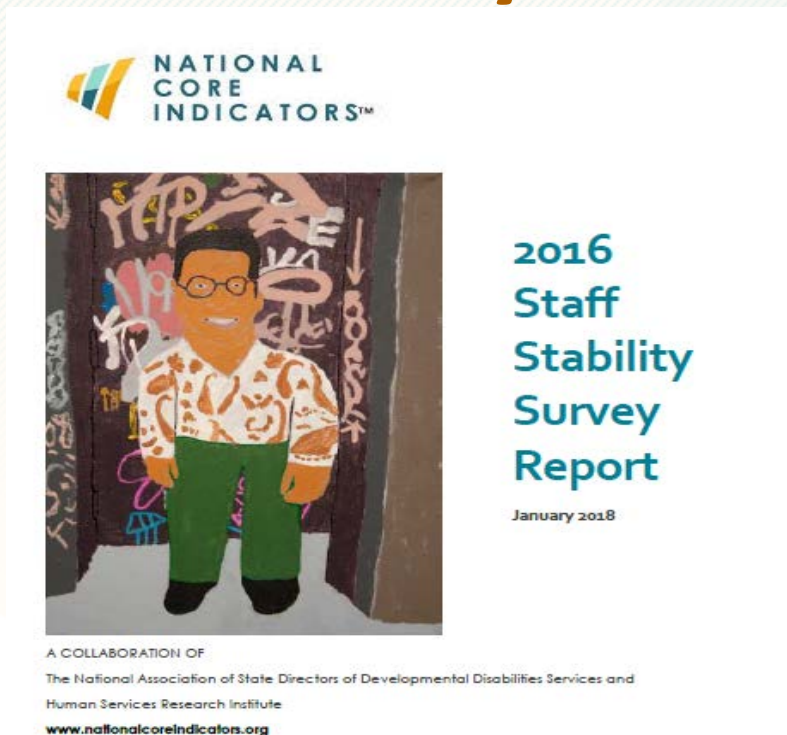
- Wages below Federal Poverty Levels result in DSPs working several jobs
- Many eligible for public benefits (e.g., food stamps, Medicaid)
- High vacancy rates/turnover rates impact service delivery – staffing ratios and access, stress, mandatory OT
- High turnover rates: increased costs to providers



National Core Indicators

Staff Stability 2016 Survey Results Highlights

2016 Staff Stability Survey Results



The report is available at
<https://www.nationalcoreindicators.org/resources/staff-stability-survey/>



Goal of NCI Staff Stability Survey

To establish **standardized** benchmark DSP **workforce data** for state DD systems to **measure** improvements made through **policy** or **programmatic changes**.



Who is a Direct Support Professional?

For the purpose of this survey:

- DSP is an employee who's primary job responsibility is to deliver support, training, and/or personal assistance or supervision to adults with I/DD. DSP's, for this survey, must spend at least 50% of their time in direct service tasks.



Important Notes on the Report

- State operated facilities (employees of the state) were not included
- “AVERAGE” data (at bottom of tables) are **average of state averages**

All data refer to:

- Jan 1, 2016-Dec 31, 2016
- Data are shown aggregated by state (not by individual provider)
- See Appendix in report for more info on state sampling procedures



Table 1: Sample Sizes

The 2016 Sample

- 3,022 agencies, 21 states
- 70% deliver Residential Services, 75% In-home Services, 58% Non-Residential Services
- Desired confidence level/margin of error is 95/5; not all states met
- 156,000 people supported in residential or at home; 201,000+ supported in non-residential (may be duplicated counts)
- 2017 data in the cleaning process, but estimates of participation available.

State	Valid responses	Total # of provider agencies who received the survey	Response rate	Sample size to reach 95% confidence level and 5% margin of error^	Meets 95% confidence level and 5% margin of error?	Margin of error for sample size based on valid responses (assuming 50% response distribution) ^
AL	45	143	31.5%	105		12.14%
AZ	191	271	70.5%	166		7.49%
CT	29	182	15.9%	125		16.7%
DC	87	124	70.2%	87	YES	4.87%
GA	184	301	61.1%	170	YES	4.51%
HI*	17	30	56.7%			
IL	115	261	44.1%	156	YES	2.81%
IN	98	100	98.0%	80	YES	1.41%
MD	116	181	64.1%			4.11%
MO*	52	52	100.0%			
NE	46	52	78.8%	46		7.11%
NY	280	354	79.1%	185	YES	2.68%
OH-IC	10	10	100.0%		YES	0.85%
OH-ICF	8	9	100.0%	79	YES	0.00%
OR	115	656	17.5%	243		4.87%
PA	42	19	100.0%	19	YES	0.00%
SC	19	19	100.0%	19	YES	0.00%
SD	114	15	73.5%			
TN	74	74	99.9%	63	YES	3.99%
TX*	15	15	100.0%	15	YES	0.00%
UT	3022	4719	AVG: 68.8%			
VT						
TOTAL	3022	4719	AVG: 68.8%			

* States were instructed to provide NCI with a list of all provider agencies in the state providing direct support to adults with IDD. These states did not provide NCI with the email addresses of all provider agencies providing



Standard Definitions of Service Type

Definitions of support types

- **Residential supports**
 - People living outside of the family home.
 - 24-hour supports such as a group home or ICF/ID And/or
 - people living in supported housing or supported living < 24 hours of support
 - Key factor is provider agency owns the setting or operates the lease
- **In-home supports**
 - supports provided to a person in their home (not owned or leased by a provider agency).
- **Non-Residential Supports**
 - supports and services outside of the home.
 - Day programs and community support programs
 - Job or vocational services



Turnover Rate

The turnover rate =

number of DSPs separated in last 12 months /
number of DSPs on payroll as of December 31, 2016

	DSP's on Payroll as of 12/31/16	N	# DSP's separated in last 12 months	N	Statewide Turnover Rate
NCI Average	253,223	3022	111,931	2953	45%

NCI Average
Turnover Rate:
45.5%



Tenure: Employed DSP's

	<6 months	6-12 Months	> 12 months
Average NCI	19%	16%	65%
Range	12-28%	11-23%	50-74

Tenure: Separated DSP's

	<6 months	6-12 Months	> 12 months
Average NCI	38%	21%	41%
Range	23-50%	17-26%	27-56%



Vacancy rates

Table 19: Full-time DSP Positions and Vacancy Rates (As of Dec 31, 2016)

	# FT DSPs employed	# FT Position Vacancies	Total # FT DSP Positions	Statewide Vacancy Rate
NCI AVG	148,521	17,953	166,474	9.8%

- Includes only provider agencies that **differentiated between full-time and part-time employees.**
- **NCI Average is 9.8% full-time vacancy rate ; 15.4% part-time vacancy rate**



Wages

- Average Overall Wage: \$11.76 /hour
- Range of Overall wage: \$9.14-\$19.26
- Average Starting wages: \$10.79
 - Residential \$10.52
 - In-Home \$10.82
 - Non-Residential \$10.90



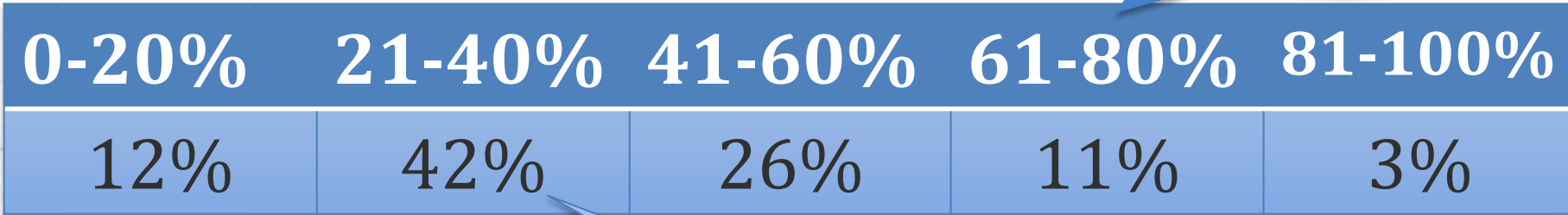
Table 21: Average Hourly Wage - All DSPs

Wages

- Comparison to State Minimum Wage is essential to accurate understanding and context for comparison

	State Minimum Wage ⁶	Avg. Hourly Wage	Std. Deviation	Median Hourly Wage	Minimum hourly wage	Maximum hourly wage	N
AL	\$7.25	\$9.53	1.74923	\$9.20	\$7.25	\$14.00	31
AZ	\$9.25	\$11.55	1.51555	\$9.10	\$9.25	\$17.72	75
CT	\$9.60	\$14.06	1.98704	\$13.85	\$11.43	\$18.50	24
DC	\$10.77	\$14.64	1.86644	\$13.00	\$10.77	\$25.00	59
GA	\$7.25	\$10.39	2.19995	\$10.00	\$7.50		122
HI	\$2.00	\$12.00	1.00000	\$12.50	\$8.50		
IL	\$8.25	\$10.95	1.69754	\$10.68	\$8.25		
IN	\$7.25	\$10.73	1.20125	\$10.60	\$8.10		
MD	\$8.75	\$12.62	3.11125	\$11.90	\$9.50		70
MO							
NE							
NY							
OH-I							
OH-II							
OR	\$9.75**	\$13.13	2.30394	\$12.33	\$9.50	\$20.00	80
PA	\$7.25	\$12.67	2.85004	\$12.00	\$8.25	\$25.00	87
SC	\$7.25	\$10.61	0.65518		\$9.95	\$12.58	31
SD	\$8.55	\$12.00	1.23299	\$11.92	\$11.92		19
TN	\$7.25	\$9.47	0.96437	\$9.33			97
TX	\$7.25	\$11.02	3.31584	\$10.00			31
UT	\$7.25	\$12.06	1.91398	\$11.76			5
VT	\$9.60	\$13.51	1.14417	\$13.59			14

% above State Minimum Wage



% of providers who reported wages at this % of MW



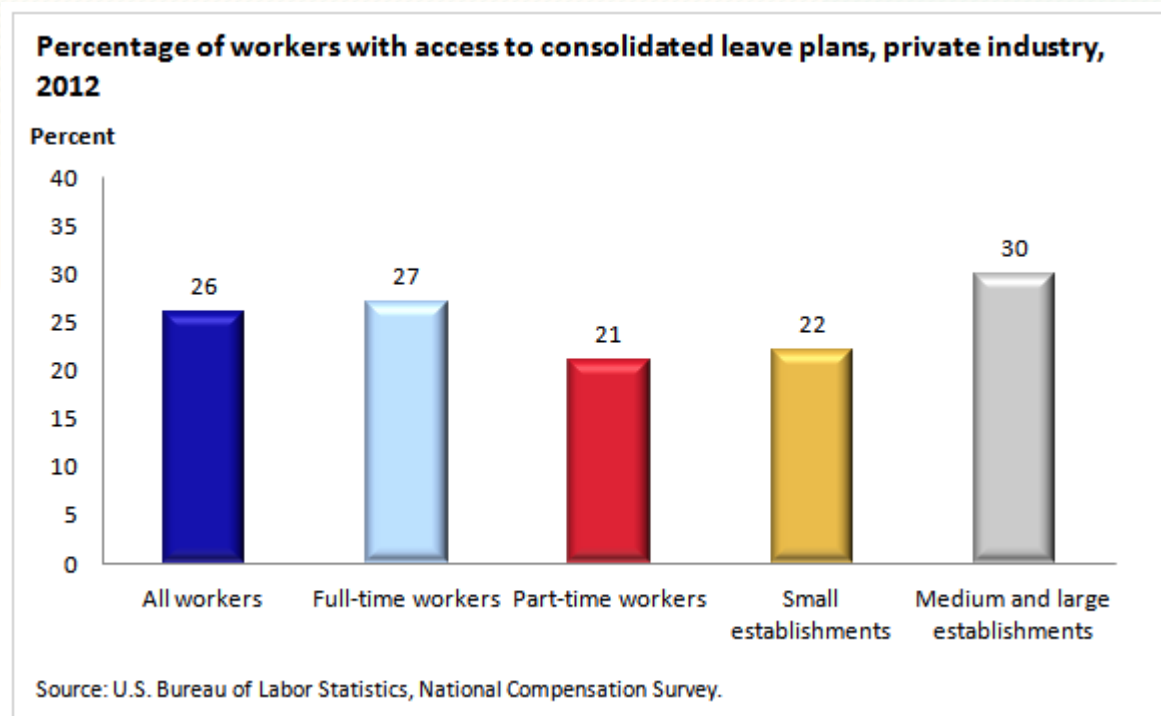
Paid Time Off

“Pooled Paid time off” is defined as a bank of hours in which the employer pools sick days, vacation days, and personal days together and the agency doesn’t distinguish between category of time off. Regular time off is time provided and tracked by category – vacation, sick, personal, etc.

- ***68% of participating agencies offered pooled paid time off to all DSP’s or to ALL Full-time DSP’s only***
- ***48% offered categorical time off to all DSP’s or to all FT Only DSP’s***



2012 BLS Part Time Workers: Paid Time off



Other benefits

- Health Insurance – offered by 66% of responding agencies to Full Time Only, and an additional 14% offer to ALL DSP's.
- Retirement, Continuing Education, career ladder, etc.



The picture is bleak

But, what can be done?

Resist the temptation to only look at wages....

Full experience of work is important—
Why do people leave jobs?

Wages are very important, but the context matters

Consider tenure, turnover and vacancy rates.

Look at wages, benefits, including retirement benefit-

Culture of the organization and work environment has an impact

The size of the agency appears to have an influence



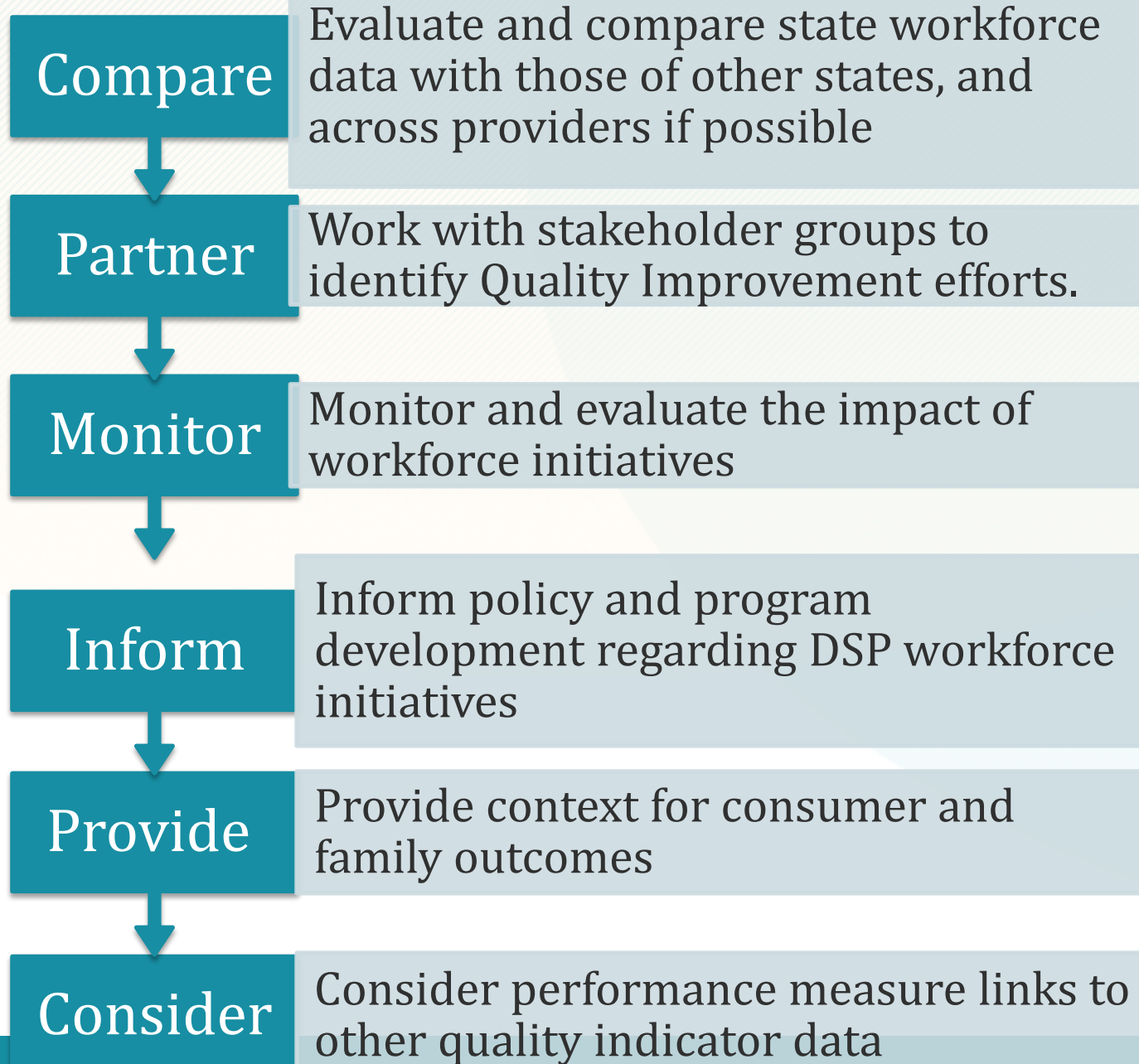
Factors Tied to Retention

1. Do I know what is expected of me at work?
2. Do I have the materials and equipment I need to do my work right?
3. Do I have the opportunity to do what I do best every day?
4. Does my supervisor, or someone at work, seem to care about me as a person?
5. At work, do my opinions seem to count?

Buckingham M and Coffman C, First Break All The Rules: What the Worlds Great Managers do Differently 1999, Simon and Shuster and Gallup Organization. P 33



How Can States Use the NCI Staff Stability Data?



What are other states doing?

- Using NCI Staff Stability Data to fulfill legislative mandates on data provision.
- Providing incentives to agencies to assess and analyze the factors contributing to their agency's turnover, and to promote practices in agencies with low turnover.
- Convening workgroups of all stakeholders to look at organizational culture tools and external factors contributing to turnover
- Tracking whether rate increases are allocated to wages and/or increased benefits



Huh?

Q u e s t i o n s ?

E m a i l :

M a r y L o u B o u r n e

mlbourne@nasdds.org

D o r o t h y H i e r s t e i n e r

dhiersteiner@hsri.org





**Office for People With
Developmental Disabilities**

New York State Office for People With Developmental Disabilities

Provider agency collaboration and the importance of data

HCBS Conference: August 28, 2018

Overview/Agenda

- Collaborating with Provider Agencies
- Recommendations to Strengthen Workforce
- NCI Staff Stability Survey Participation and Analysis





**Office for People With
Developmental Disabilities**

NYS OPWDD and Provider Agencies

A Collaborative Effort

Work Group

Supporting the staff who provide services to individuals with intellectual and developmental disabilities is part of a collaborative effort.

The Work Group, comprised of representatives from OPWDD and partners from the not for profit sector, convenes regularly to address the needs of Direct Support Professionals (DSPs).



Work Group Objectives

Specifically, the objective of the Work Group is to advance the field of Direct Support as a valued career in order to ensure the stability of the workforce.

- The Work Group is focusing on issues including:
 - recruitment
 - retention
 - compensation
 - the pursuit of strategies to reduce overtime
 - the promotion of employee work-life balance

Work Group Members

- Provider Agencies
 - Large
 - Small
 - Urban
 - Rural
- Provider Associations
- OPWDD Staff
- Industry Experts
- Academia



Work Group Activities

- The Work Group has met several times since its inception and members have been working to:
 - develop strategies to strengthen workforce
 - gather and analyze data
 - research available workforce analytics tools
 - study state/national surveys and indicators
 - explore various funding sources
 - meet with internal/external stakeholders
 - research trends, policies and practices in comparable states
 - research technology solutions
 - strategize on marketing campaigns



Key Initiatives

Data & Workforce Analytics

- Identifying: vacancy rates, turnover, wages, benefits, and recruitment/retention strategies.
 - NYS participation NCI Staff Stability Survey
 - Ongoing annual participation
 - Analyzing results of recent surveys:
 - NCI Adult Consumer Survey, #beFair2DirectCare survey, DSP Credentialing Study
 - Consolidated Fiscal Report (CFR) data and other sources
 - Review available data

Key Initiatives cont'd

Department of Labor - Occupational Code for DSPs

- Currently no code exists for DSPs

Pipeline Development

- High Schools, BOCES, Community Colleges, Colleges

Workforce Development Grants

- Locating resources & facilitating access

Research on Tech Solutions

- Scheduling software
- Remote monitoring
- Assistive technology



Key Initiatives cont'd

Emerging Workforce

- Researching, Recruiting & Retaining “Millennials”
 - Gaining better understanding of largest share of American workforce, as of 2015.
 - Inviting experts from the field to share insight on recruitment and retention of this demographic.

Professional Development

- Credentialing
- Training/Development opportunities

DSP Recognition

- Recognition activities and marketing campaign

Inventory of Recommendations

- List of recommendations, resources, and tools





**Office for People With
Developmental Disabilities**

NYS OPWDD and Provider Agencies

Developing Recommendations

Inventory of Recommendations

Agency Specific:

- Recruitment
 - Examples: Target recruitment methods toward millennials; Utilize technology and mobile applications in recruitment
- Retention
 - Examples: Provide training for supervisors; Recognize employees regularly; Offer flexibility in benefit choices
- Cost Savings
 - Examples: Apply for grants; Explore technology solutions for addressing issues
- Agency Toolkit
 - Examples: Developing agency toolkit that can be utilized by provider agencies to help strengthen their recruitment and retention strategies

Inventory of Recommendations

System Wide:

- Career/Profession
 - Examples: Pursue Federal DOL occupational code designation; Explore alternative learning options, such as BOCES, Job Corp, and Apprenticeships
- Robust and Reliable Data
 - Examples: Participate in the NCI Staff Stability Survey; Explore addendum to current reports or some other mechanism for capturing more specific data
- Funding and Rates
 - Examples: Study impact of recent funding increase provided by Governor/Legislature; Review funding/rate structures and impact on agencies offering higher DSP wages; Explore additional flexibility in use of Medicaid and other funding sources



**Office for People With
Developmental Disabilities**

NYS OPWDD and Provider Agencies

NCI Staff Stability Survey

NCI Staff Stability Survey

Overview:

- NYS participated in the Nation Core Indicators (NCI) Staff Stability survey for the first time in 2017.
- The data gathered refer to the period between Jan. 1, 2016 and Dec. 31, 2016.
- NYS administered the survey to all agencies that provided direct support services to adults with intellectual and developmental disabilities in 2016.
- Not mandatory, but significant efforts made to encourage/support participation



NCI Staff Stability Survey

NYS Participation Rates:

- 354 provider agencies identified as eligible participants
- 280 provider agencies completed surveys
- 79.1% response rate (Meets 95% confidence level and 5% margin of error)



NCI Staff Stability Survey

Efforts:

- Engage providers and provider associations
- Discuss importance of data
- Gain buy in and utilize partnerships
- Multiple emails and offers of assistance
- Phone calls

2017:

- Initial data indicates that NYS has increased participation and achieved over 80% participation rate



NCI Staff Stability Survey

Analysis

- Review data for trends
- Identify correlations
- Utilize data to inform efforts

Next Steps:

- Continue analyzing data and developing strategies
- Explore possible geographic break downs for future surveys



Questions?

Thank You!





Shaping policy • Sharing solutions • Strengthening communities



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Service providers support more than one million Americans with intellectual and developmental disabilities through the Medicaid program.

ANCOR is their voice in Washington.

Who does ANCOR represent?

Americans with I/DD include people with Down Syndrome, cerebral palsy and autism.

ANCOR is nonpartisan. We represent a workforce of many thousands of community providers across the country who empower people with disabilities to live with dignity – helping them to avoid costly state-run institutional care.

ANCOR members matter

Our members provide vital services including residential supports, daily life skills building and employment support.

1

We work tirelessly to protect the Medicaid safety net for those served by our members and to lead the innovation of new and diverse funding streams.

2

We champion the full implementation and funding for the ADA and other federal disability rights statutes and regulations.

3

We promote innovative and cost-effective business solutions to help our members use limited Medicaid resources efficiently.

Facts & Figures

ANCOR represents

1,400+

service providers and 52-state provider associations.

There are more than

5 million

Americans with intellectual and developmental disabilities (I/DD) living in the U.S.]

Each year, about

6,000

babies are born with Down syndrome.

1 in 68

children are now born with Autism.

45%

of frontline workers leave the field every year, leading to one of the nation's most pressing workforce crises.



Images from ANCOR's national "Cost of Compassion" video. Watch it at nationaladvocacycampaign.org.



Addressing the Disability Services Workforce Crisis of the 21st Century

Electronic Version

**American Network of Community Options and Resources
2017**



DSP turnover is high and frequent.

A high level of disruption is happening often in supports that need to be stable to be successful.

45.5%

national average turnover rate

24% - 69%

range of state turnover rates

Turnover by length of tenure



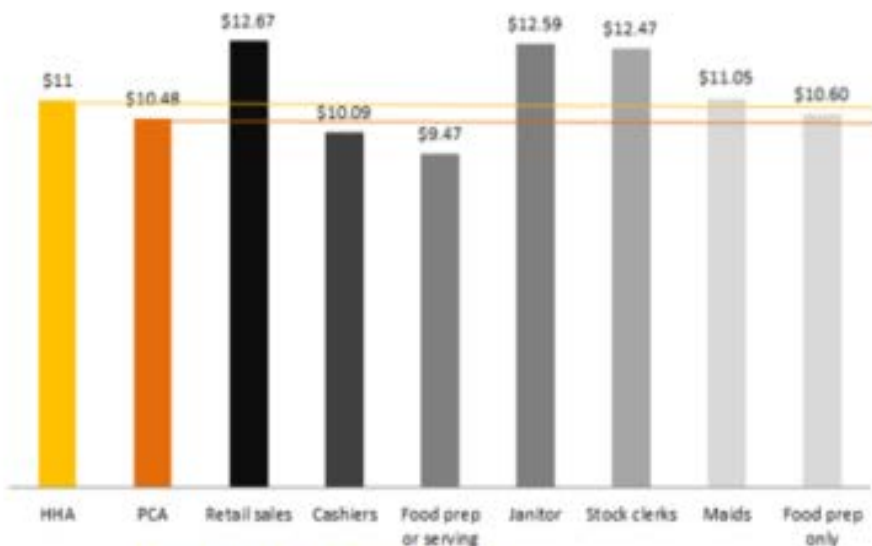
Source: [National Core Indicators \(NCI\) 2016 Staff Stability Survey](#)



Low wages are a primary cause of turnover.

DSPs operate within a very demanding regulatory framework and have high responsibilities – including keeping individuals alive – which their wages do not reflect.

Average Hourly Wages for Direct Care and Alternative Occupations



Source: [ANCOR 2017 workforce report](#)

Reason for leaving	Percentage
Inadequate pay	88.54%
Difficulty level / stress of work performed	66.88%
Lack of advancement	49.68%
Lack of supervisory support/appreciation	42.04%
Insufficient training/guidance	28.66%

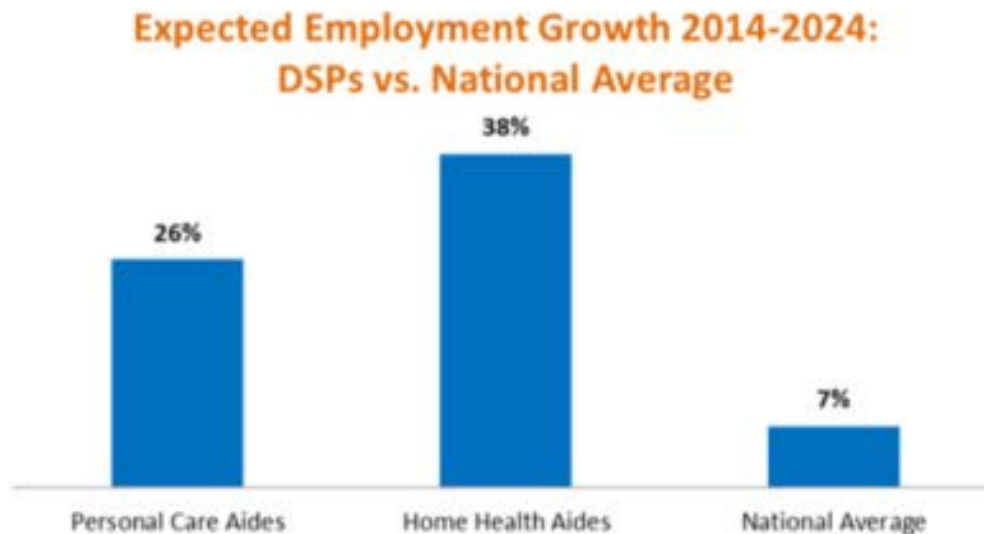
Source: [Medisked survey](#)

Multiple choice selection allowed so results add up to more than 100 percent



Demand for DSPs will increase, further exacerbating the effects of turnover.

Demographic trends increasing demand include the increase in autism diagnoses, increased longevity of people with I/DD, aging family caregivers needing more assistance to care for their loved ones with I/DD, and demand from baby boomers. Simultaneously, less women are being born into the labor pool and the DSP workforce is predominantly female. This promises unmet demand for supports.



Source: Bureau of Labor Statistics



Solutions include:

Improving DSP wages through greater federal and state investment in the Medicaid program, through which those wages are set. In 2018 some states increased DSP wages, including:

Connecticut

Kentucky

Maine

Innovative recruitment and retention techniques. Some agencies and states have shown creativity to increase recruitment within the constraints caused by lower wages:
Iowa: an agency leveraged a federal demonstration project to recruit more specialized DSPs, going beyond the usual recruitment targets.

Ohio:

The state and some schools partnered with I/DD supports agencies to recruit high school students on the verge of dropping out. The program allowed students to finish school while training to become DSPs.

One agency created an Employer Resource Network to offer more DSPs workplace flexibility and better benefits, leading to increased retention.

Wisconsin: an agency created clear career pathways with built-in wage increases, thus increasing retention.

Leveraging technology to better leverage DSPs time and reduce injuries. States such as Colorado and Minnesota have begun modernizing their authorized technologies policies to reflect recent developments in technology, such as the more widespread use of tablets, software and assistive technology.

ANCOR *Workforce Asks*

Our Asks: Support efforts to increase the Direct Support Professionals workforce

- Sign on to standard occupational classification (SOC) letter to encourage the Bureau of Labor Statistics to designate DSP as a discrete class of workers
- Encourage CMS to confirm Medicaid payments are authorized for the use of innovative technology solutions to deliver HCBS waiver services
- Allow providers to reinvest savings generated by using technology to deliver services
- Annual state reporting of IDD service reimbursement rates
- Revisit the Transition to Independence Act, with a focus on how the DSP workforce enhances community engagement and independent living
- Support federal, state, and local pipeline programs to increase the number of people entering the DSP field



What To do?

ACTION STEPS (from 6/28/18 workforce summit)

- Create an occupational title in BLS
- Support the development of a profession using training and credentialing programs throughout the U.S. and related wage increases.
- Support the development of pipeline programs to ensure new entrants into the workforce.
- Promote increased use of technology-enhanced supports and self-directed options.
- Develop and implement evidence based practices to improve retention.
- Support public awareness campaigns that promote the direct support profession in U.S. communities.
- Improve data collection options on relevant workforce outcomes.

For More Information:

- UMN RRTC on Community Inclusion

<https://cl.ici.umn.edu/>

- ANCOR

<http://www.ancor.org/>

- NY OPWDD

<https://opwdd.ny.gov/>

- NCI

<https://www.nationalcoreindicators.org/resources/staff-stability-survey/>

