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Solving the Direct Care Workforce Shortage Crisis – Three Promising Practices

Minnesota Age & Disabilities Odyssey

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by

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Overview

Three Promising Solutions Based Upon Olmstead Subcabinet Direct Care Workforce Recommendations Report, Approved March 2018

Voluntary Third-tier to MN's PCA Career Lattice – Certified PCA
PCA Rate Framework - PCA position & compensation linked by workforce

factors3. PCA College Service Corps



Volunteered as 1 of 3 Technical Writers who wrote the following:

Recommendations to Expand, Diversify and Improve Minnesota's Direct Care and Support Workforce Report

Approved by Olmstead Subcabinet in March 2018 Prepared by Cross-Agency Direct Care and Support Workforce Shortage Working Group



1. Voluntary third-tier to MN's PCA career lattice – Certified PCA

Report Recommendation: Provide tiered credential options and career ladders for direct care and support professionals (p 19).

Metropolitan Center for Independent Living funded by The Bush Foundation

- Development of curriculum leading to the credential of a "Certified PCA" linked to PCA Rate Framework, a basis to connect formal education certificate with competitive wage
- Development of Apprenticeship Program based upon formal credentialed education.
- Plans also look to Scholarships and additional opportunities (PCA CSC more later)
- Economic analysis and scalable work nationally in solving the direct care crisis



PCA Certificate Program Curriculum

Strategic Alliance with Minnesota State HealthForce Center of Excellence, Winona State University

PCA Pilot Project Committee – Broad scope of participation

4 Minnesota State Faculty currently developing the curriculum!

The curriculum follows MN Statute on Role of PCA's and 12 Competencies of PCAs by CMS for homecare sector.

Similar Certificate Programs exist such as Certified Nursing Assistant for the medical sector.



2. PCA Rate Framework - PCA position & compensation linked by workforce factors

Report Recommendation: A. Provide a livable wage to enhance job satisfaction and retention, and address statutory limits on service rates that make it difficult for providers to pay direct support staff a livable wage (p15).

Led to Sub-Team Implementation Report, May 21, 2018, which I had facilitated. DHS and community advocates worked on passage in 2021 of MN Statute 256B.851 COMMUNITY FIRST SERVICES AND SUPPORTS; PAYMENT RATES

Why is the PCA/CFSS Rate Statute Important?

Links PCA Position to Bureau of Labor Standards Standard Occupational Code.

MN Statute 256B.851 recognizes importance of Collective Bargaining Agreement (Subd 7).

MN Statute requires the following as the basis:

- 1. personal care assistance services, CFSS, extended personal care assistance services, and extended CFSS. The base wage component value equals the median wage for personal care aide (SOC code 31-1120). Extensive requirements then take place to build upon base wage for PCA & CFSS related positions.
- 2. Payment rate also have extensive requirements in how they are verified as sustainable.

Why is the PCA/CFSS Rate Statute Important?

So lets look at how does the Certified PCA become linked to the PCA Rate Framework?

Key Concept - competitive workforce factors benchmark for similar positions and credentials in establishing compensation.



Why is the PCA/CFSS Rate Statute Important?

Example of workforce factors linking PCA roles to Compensation:

Another Rate framework is MN Statute 256B.4914 HCBS Rate: (16) for individualized home support without training staff, <u>50 percent of the median wage</u> for home health and personal care aide (SOC code 31-1120); and <u>50 percent of the median wage</u> for nursing assistant (SOC code 31-1131);

• So it is justifiable to link a PCA position to similar positions as a competitive workforce factor.

Proposed Addition to MN Statute 256B.851 (PCA & CFSS Rate Framework): (New) Certified Personal Care Assistance services, CFSS, extended certified personal care assistance services, and extended CFSS. The base wage component value equals the median wage for nursing assistant (SOC code 31-1131); (PCA/CFSS Payment Rate follows).



PCA College Service Corps

Report Recommendation: E. Develop a service corps through partnerships with colleges, universities and/or private partners (p 18).

Women Staying Strong, Diane Drost Member of the Cross Agency' Workforce Group - Strong Advocacy for Service Corps!

Women Staying Strong, HealthForce Minnesota, & MCIL working together in launching PCA College Service Corps, thanks to a grant from Margaret A. Cargill Foundation Fund of the St. Paul & Minnesota Foundation. PCA College Service Corps Advisory Committee actively involved with this new pilot.

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Why the need for the PCA College Service Corps?

From Diane Drost, Women Staying Strong and a Member of the PCA College Service Corps Advisory Committee: There simply are not enough people available to work as PCAs.

We face the challenge in recruiting not only because of the shortage but also because those who do want to work as PCAs often prefer clients with less complex needs. This is what our Women's group has experienced.

In the past, more students applied to become PCAs, but now with the high costs of college they do not. Students had high energy, motivated and interested in the complex nature of Spinal Cord Injury (SCI).

In Order to build a pipeline we must provide incentives & access federal dollars. Some people believe service should be free but they do not understand how AmeriCorps, Vista programs works.

This is why we developed the service corps concept a win-win.

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Why the need for the PCA College Service Corps?

College students are already being recruited by a variety of organizations including hospitals, nursing homes and even group homes. These organizations have developed effective pipelines for recruitment. They are often able to offer incentives including scholarships & loan forgiveness.

We would like the opportunity to develop a pipeline in order to recruit students to work in home-care settings as PCAs. It is really a matter of equity. It is also a matter of survival. We welcome all students to join us in this endeavor regardless of income or area of study. This will benefit both students and those people most at risk of losing their ability to live in their homes in the community.

The federal government has been offering grant opportunities for people to do service work in underserved locations or with underserved groups including those with disabilities. These are just beyond our reach. There are many opportunities via AmeriCorps for students to meet community needs. Ours is not just a need but a humanitarian crisis of care. We must expand this workforce by enlisting college students to help. Federal dollars are out there and we no longer should be afraid to ask for support for those most vulnerable and at risk for their health and well being we must build this PCA College Service Corps.



FOR INDEPENDENT LIVING PCA College Service Corps Pilot

Key Features:

Recruit College Students to serve as PCA's, paid hourly over 30 weeks, 10 hours a weeks

Recruit People who are assessed at 10 or more hours of PCA assistance per day and who direct their own care, and involve their PCA Agency

Provide an Honorarium to the College Student over the 30 weeks totaling \$4,500.

Create career-long appreciation and commitment for people with disabilities

Increase PCA assistance for people who rely upon PCAs.



Thank you!



Jesse Bethke Gomez has over 25 years as a Chief Executive Officer leading non-profit corporations in advancing the well-being of children, families, individuals, people with disabilities and older adults. He serves as Executive Director for Metropolitan Center for Independent Living. Jesse has served on over 40 Boards of Directors, Commissions and Leadership Teams. In 2011 he was **appointed by the Minnesota Supreme Court as At-Large Commissioner of the Minnesota Judicial Selection Commission**. In 2000 Jesse was listed as among the "*100 Most Influential Health Care Leaders in Minnesota*" by Minnesota Physician Publication, LLP. Jesse personally trained with Dr. Edwards Deming who created the world-wide Quality Improvement Movement. Jesse was the first Minnesotan to receive the Reconocimento Ohtli award from the Country of Mexico. He is currently a Co-Leader of the Minnesota Cardio Vascular & Diabetes Leadership Team supported by the Minnesota Department of Health. Jesse is committed to advancing the ability of people to care for one another. Jesse Bethke Gomez contact information: jessebg@mcil-mn.org