



# The State of America's Direct Support Workforce Crisis



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# Direct Support Workforce in Crisis

The results of our 2022 survey reveal that this workforce emergency is now to the point of denying access to services and further threatening quality of services for people with I/DD. Over the course of a four-week period beginning in August 2022, ANCOR fielded a survey across its provider network that garnered 718 responses.

In the broadest terms, what we found is that providers are unable to attract and retain DSPs at a rate that, if left unaddressed, has the potential to completely collapse the system of services as we know it.

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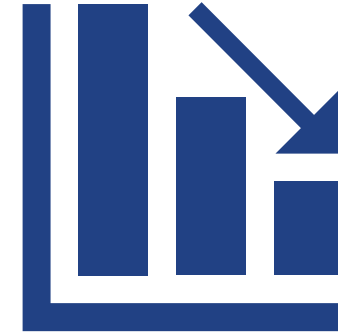
**83%**

of providers are turning away new referrals (a 25.8% pre-pandemic increase.)



**63%**

of providers are discontinuing programs and services (an **85.3%** pre-pandemic increase.)



**55%**

of providers are considering additional service discontinuations.

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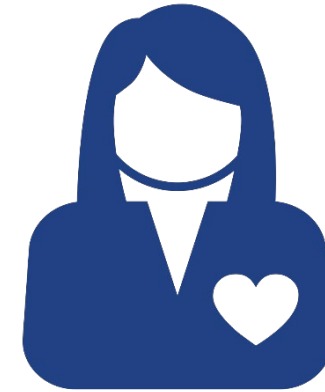
**92%**

of providers are struggling to achieve quality standards (a 33.3% pre-pandemic increase.)



**66%**

of providers are concerned vacancy/turnover rates will increase with the end of the PHE.



**55%**

of respondents who offer case management in addition to LTSS are struggling to find available providers.

# Solutions for a More Sustainable Future

## Recommendations for the Biden Administration:

- Issue guidance that specifically addresses workforce-related regulatory flexibilities in light of the termination of the COVID-19 PHE.
- Require states to establish systems of access monitoring that compel regular reviews of reimbursement rates.
- Require state and federal agencies to collect and report on measures related to workforce volume, stability and compensation.





# Solutions for a More Sustainable Future

## Recommendations for the 118<sup>th</sup> Congress:

- Appropriate funding to rebuild the DSP workforce as well as the broader HCBS infrastructure.
- Prioritize funding to incentivize the development of the DSP pipeline programs.
- Compel the U.S. Bureau of Labor of Statistics to establish a SOC for DSPs.



# Data Source for Wage Assumptions

Data sources for wage assumptions:

- Bureau of Labor Statistics Standard Occupational Classifications (SOC): 20 states
- Benchmarked against minimum wage: 3 states
- State's determination (i.e. the state dictated the wage assumptions to be used): 2 states

## What is the SOC?

The SOC is one of several standard classification systems established by the Office of Management and Budget (OMB) for use in the Federal statistical system. All Federal agencies that publish occupational data for statistical purposes are required to use the SOC to increase data comparability across Federal programs.

## Who is responsible for the SOC?

Responsibility for the SOC is, first and foremost, with the Office of Management and Budget. OMB requires the use of the SOC when publishing Federal statistics about occupations, makes the final decisions about the SOC, publishes the SOC Manual, and charters the SOC Policy Committee.



## Why use the SOC?

- **It is comprehensive.** *BLS wage data is representative of 1.2 million establishments and about 57 percent of the employment in the United states.*
- **It is regularly produced.** *BLS wage data is published on an annual basis, allowing rate model assumptions to be regularly reviewed and updated.*
- **It is cross-industry.** *BLS wage data is not limited to a single industry so estimates for a given occupation are representative of the overall labor market for that occupation; this is particularly important when considering wage levels for traditionally underfunded programs such as Medicaid.*
- **It is state- (and local-) specific.** *BLS wage data is reported for individual states and substate areas, permitting the evaluation of wage variance across states and within a given state.*

# Bureau of Labor Statistics Benchmarks

*The BLS does not have a standalone classification for DSPs. As a result, states generally exercise more discretion in choosing which classification or classifications to use as the basis for DSP wage assumptions compared to, for example, rates for nursing services since the BLS has specific classifications for registered nurses and licensed practical nurses. ...*

*Recognizing the imperfect fit of any single BLS classification for DSPs, the majority of rate models create a weighted average of multiple classifications to establish DSP wage assumptions.*

**Figure 2: Illustration of DSP Wage Assumption Using Weighted BLS Occupations**

Service	BLS Wage	Weight	Wage Value
Home Health and Personal Care Aide	\$12.96	60%	\$7.78
Psychiatric Aide	\$21.46	25%	\$5.37
Recreation Worker	\$14.60	15%	\$2.19
<b>Total</b>		<b>100%</b>	<b>\$15.33</b>

# SOC Assumptions

- Home Health and Personal Care Aides generally received the highest weight with other states varying widely in additional occupations.
- States differed also in how occupations were weighted.
- While some states establish different DSP wage assumptions based on setting, the list of occupations were similar for in-home support and community support.

Home Health and Personal Care Aides (31-1120)	[Description for personal care aides] Provide personalized assistance to individuals with disabilities or illness who require help with personal care and activities of daily living support (e.g., feeding, bathing, dressing, grooming, toileting, and ambulation). May also provide help with tasks such as preparing meals, doing light housekeeping, and doing laundry. Work is performed in various settings depending on the needs of the care recipient and may include locations such as their home, place of work, out in the community, or at a daytime nonresidential facility.	15
Social and Human Service Assistants (21-1093)	Assist other social and human service providers in providing client services in a wide variety of fields, such as psychology, rehabilitation, or social work, including support for families. May assist clients in identifying and obtaining available benefits and social and community services. May assist social workers with developing, organizing, and conducting programs to prevent and resolve problems relevant to substance abuse, human relationships, rehabilitation, or dependent care.	10
Recreation Workers (39-9032)	Conduct recreation activities with groups in public, private, or volunteer agencies or recreation facilities. Organize and promote activities, such as arts and crafts, sports, games, music, dramatics, social recreation, camping, and hobbies, taking into account the needs and interests of individual members.	8
Rehabilitation Counselors (21-1015)	Counsel individuals to maximize the independence and employability of persons coping with personal, social, and vocational difficulties that result from birth defects, illness, disease, accidents, aging, or the stress of daily life. Coordinate activities for residents of care and treatment facilities. Assess client needs and design and implement rehabilitation programs that may include personal and vocational counseling, training, and job placement.	4
Psychiatric Aides (31-1133)	Assist mentally impaired or emotionally disturbed patients, working under direction of nursing and medical staff. May assist with daily living activities, lead patients in educational and recreational activities, or accompany patients to and from examinations and treatments. May restrain violent patients.	3

# Legislation to Create a Standard Occupational Classification

## *Recognizing the Role of Direct Support Professionals Act*

- Would compel OMB to create Standard Occupational Classification (SOC) for DSPs, effective 30 days after passage
- Introduced in House (H.R. 2941) and Senate (S. 1332)
- Bipartisan legislation

# Thank You!



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