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Major Industry Employment, Massachusetts, 2015 II to 2017 II

NAICS Code	Industry	2015 II	2017 II	Absolute Change	Relative Change
10	Total, all industries	3009522	3117053	107531	4%
11	Agriculture, forestry, fishing and hunting	7798	8348	550	7%
21	Mining, quarrying, and oil and gas extraction	1010	1022	12	1%
22	Utilities	10510	11256	746	7%
23	Construction	140116	151294	11178	8%
31-33	Manufacturing	250083	243778	-6305	-3%
42	Wholesale trade	124034	125677	1642	1%
44-45	Retail trade	351628	352920	1292	0%
48-49	Transportation and warehousing	79094	84779	5686	7%
51	Information	87911	91662	3751	4%
52	Finance and insurance	166359	169674	3315	2%
53	Real estate and rental and leasing	43870	46521	2651	6%
54	Professional and technical services	293476	313398	19922	7%
55	Management of companies and enterprises	65144	67109	1966	3%
56	Administrative and waste services	179512	186517	7004	4%
61	Educational services	138549	142607	4058	3%
62	Health care and social assistance	596367	626046	29679	5%
71	Arts, entertainment, and recreation	58157	63018	4861	8%
72	Accommodation and food services	300116	312647	12531	4%
81	Other services, except public administration	115781	118774	2993	3%



Major Industry Employment Projections, U.S., 2016-2026

Industry	2016	2026	Absolute Change	Relative Change
Total, W&S Jobs	144979.3	155742.8	10753.5	7.4 %
Agriculture, forestry, fishing and hunting	2351.5	2345.4	-6.1	-0.3%
Mining, quarrying, and oil and gas extraction	626.1	716.9	90.8	14.5%
Utilities	556.2	559.6	3.4	0.6%
Construction	6711.0	7575.7	864.7	12.9%
Manufacturing	12348.1	11611.7	-736.4	-6.0%
Wholesale trade	5867.0	6012.8	145.8	2.5%
Retail trade	15820.4	16232.7	412.3	2.6%
Transportation and warehousing	4989.1	5353.4	364.3	7.3%
Information	2772.3	2824.8	52.5	1.9%
Finance and insurance	8284.8	8764.6	479.8	5.8%
Professional and technical services	20135.6	22295.3	2159.7	10.7%
Educational services	3559.7	4066.2	506.5	14.2%
Health care and social assistance	19056.3	23054.6	3998.3	21.0%
Leisure and hospitality	15620.4	16939.4	1319.0	8.4%
Other services	6409.4	6761.4	352.0	5.5%
Federal government	2795.0	2739.2	-55.8	-2.0%
State and local government	19427.9	20216.6	788.7	4.1%

Health Care Employment, Massachusetts, 2000-2017 II

2000-2008	2000	2008	Absolute Change	Percent Change
Ambulatory Care	120.3	140.2	19.9	16.5%
Hospitals	141.9	175.1	33.2	23.4%
Nursing and Residential Care	85.6	96.5	10.9	12.7%
Individual and Family Services	28.3	51.5	23.2	82.0%
Total Health Care Sector	376.1	463.3	87.2	23.2%
2008-2012	2008	2012	Absolute Change	Percent Change
Ambulatory Care	140.2	159.6	19.4	13.8%
Hospitals	175.1	183.9	8.8	5.0%
Nursing and Residential Care	96.5	101.0	4.5	4.7%
Individual and Family Services	51.5	69.0	17.5	34.0%
Total Health Care Sector	463.3	513.5	50.2	10.8%
2012-2016	2012	2016	Absolute Change	Percent Change
Ambulatory Care	159.6	186.2	26.6	16.7%
Hospitals	183.9	195.0	11.1	6.0%
Nursing and Residential Care	101.0	102.8	1.8	1.8%
Individual and Family Services	69.0	89.3	20.3	29.4%
Total Health Care Sector	513.5	573.3	59.8	11.6%
2015 II-2017 II	2015 II	2017 II	Absolute Change	Percent Change
Ambulatory Care	178.3	187.9	9.6	5.4%
Hospitals	189.3	195.8	6.5	3.4%
Nursing and Residential Care	103.4	105.1	1.7	1.6%
Individual and Family Services	82.9	93.1	10.2	12.3%
Total Health Care Sector	553.9	581.9	28	5.1%

Health Care Employment Projections, United States, 2016-2026

	2016	2026	Absolute Change	Relative Change
Ambulatory health care services	7,081.7	9,279.4	2,197.7	31.0%
Hospitals	5,025.0	5,444.0	419.0	8.3%
Nursing and residential care facilities	3,313.6	3,742.7	429.1	12.9%
Individual and Family Services	2,229.4	3,100.8	871.40	39.09%

Ambulatory Health Care Employment, Massachusetts, 2015 II – 2017 II

	2015 II	2017 II	Absolute Change	Percent Change
Offices of Physicians	55674	56795	1121	2%
Offices of Dentists	23855	24581	725	3%
Offices of Other Health Practitioners	17644	19532	1888	11%
Outpatient Care Centers	23637	25138	1501	6%
Medical and Diagnostic Laboratories	5594	6232	637	11%
Home Health Care Services	43860	46940	3080	7%
Other Ambulatory Health Care Services	8045	8776	731	9%

Ambulatory Health Care Employment Projections, United States, 2016-2026

	2016	2026	Absolute Change	Relative Change
Offices of Physicians	2527	3,076	548.8	21.7%
Offices of Dentists	925	1,101	175.4	18.9%
Offices of Other Health Practitioners	858	1,122	264	30.8%
Outpatient Care Centers	856	1,178	322.6	37.7%
Medical and Diagnostic Laboratories	262	334	72.1	27.4%
Home Health Care Services	1362	2,100	738.2	54.2%
Other Ambulatory Health Care Services	288	365	76.4	26.5%



Hospital Employment, Massachusetts, 2015 II – 2017 II

	2015 II	2017 II	Absolute Change	Percent Change
General Medical and Surgical Hospitals	164123	169056	4933	3%
Psychiatric & Substance Abuse Hospitals	4905	5650	745	15%
Other Hospitals	20366	21170	803	4%

Hospitals Employment Projections, United States, 2016-2026

	2016	2026	Absolute Change	Percent Change
General Medical and Surgical Hospitals	5481.5	5792.3	310.8	5.7%
Psychiatric & Substance Abuse Hospitals	268.6	264.0	-4.6	-1.7%
Other Hospitals	303.1	411.1	108.0	35.6%

Nursing and Residential Care Employment, Massachusetts, 2015 II – 2017 II

	2015 II	2017 II	Absolute Change	Percent Change
Nursing Care Facilities	54990	52644	-2346	-4%
Residential Mental Health Facilities	22536	23958	1422	6%
Community Care Facilities for the Elderly	19321	21626	2305	12%
Other Residential Care Facilities	6704	6908	203	3%

Nursing and Residential Care Employment Projections, United States, 2016-2026

	2016	2026	Absolute Change	Percent Change
Nursing Care Facilities	1644.0	1661.1	17.1	1%
Residential Mental Health Facilities	613.7	733.8	120.1	20%
Community Care Facilities for the Elderly	891.9	1204.3	312.4	35%
Other Residential Care Facilities	164.0	143.6	-20.4	-12%

Individual and Family Social Services Employment, Massachusetts, 2015 II – 2017 II

	2015 II	2017 II	Absolute Change	Percent Change
Adjusted Services to Elderly and Disabled	55965.0	64618.0	8653	15%
Child and Youth Services	7566.7	6863.3	-703	-9%
All Other Individual and Family Services	19369.3	21668.3	2299	12%

Individual and Family Social Services Employment Projections, United States, 2016-2026

	2016	2026	Absolute Change	Percent Change
Adjusted Services to Elderly and Disabled	1624.4	2325.6	701.2	43.2%
Child and Youth Services	NA	NA	NA	NA
All Other Individual and Family Services	NA	NA	NA	NA

Industry Employment Projections Continuing Care Assisted Living, U.S., 2016-2026

	2016	2026	Absolute Change	Relative Change	Share of Change
Total Employment	891.9	1204.3	312.4	35.0%	100%
Management	28.3	37.4	9.1	32.2%	3%
Business-Finance Professions	8.4	11.4	3	35.7%	1%
Counselors-SW	7.6	10.1	2.5	32.9%	1%
PT-OT	2.4	3.3	0.9	37.5%	0%
RN	31.8	42.0	10.2	32.1%	3%
LPN-LVN	49.1	64.9	15.8	32.2%	5%
Home Health Aide	88.2	128.1	39.9	45.2%	13%
Nursing Assistant	161.8	213.7	51.9	32.1%	17%
OT-PT Aide	1.8	2.4	0.6	33.3%	0%
Food Prep & Service	156.8	205.9	49.1	31.3%	16%
PCA	144.8	210.5	65.7	45.4%	21%
Sales	4.4	5.8	1.4	31.8%	0%
Admin Support	47.5	59.0	11.5	24.2%	4%
Trans/Material Moving	8.7	10.5	1.8	20.7%	1%

Industry Employment Projections Home Health Care, U.S., 2016-2026

	2016	2026	Absolute Change	Relative Change	Share of Change
Total Employment	1362.0	2100.0	738	54%	100%
Management	38.4	56.7	18.3	48%	2%
Business-Finance Professions	15.1	22.6	7.5	50%	1%
Counselors-SW	29.0	43.1	14.1	49%	2%
PT-OT	25.7	53.2	27.5	107%	4%
RN	180.3	267.8	87.5	49%	12%
LPN-LVN	85.9	127.6	41.7	49%	6%
Home Health Aide	411.1	671.8	260.7	63%	35%
Nurses Aide	77.8	115.5	37.7	48%	5%
OT-PT Aide	10.2	18.0	7.8	76%	1%
Food Prep & Service	2.0	3.0	1	50%	0%
PCA	313.2	488.2	175	56%	24%
Sales	9.8	14.6	4.8	49%	1%
Admin Support	96.8	134.4	37.6	39%	5%
Trans/Material Moving	4.0	5.8	1.8	45%	0%

Industry Employment Projections Services to Elderly and Disabled, U.S., 2016-2026

	2016	2026	Absolute Change	Relative Change	Share of Change
Total Employment	1624.4	2325.6	701.2	43.2%	100%
Management	38.4	51.3	12.9	33.6%	2%
Business-Finance Professions	17.2	23.0	5.8	33.7%	1%
Counselors-SW	107.4	143.9	36.5	34.0%	5%
PT-OT	4.2	5.6	1.4	33.3%	0%
RN	22.6	30.3	7.7	34.1%	1%
LPN-LVN	12.2	16.3	4.1	33.6%	1%
Home Health Aide	214.0	315.4	101.4	47.4%	14%
Nursing Assistant	41.6	55.8	14.2	34.1%	2%
OT-PT Aide	1.3	1.7	0.4	30.8%	0%
Food Prep and Service	19.7	26.4	6.7	34.0%	1%
PCA	917.6	1363.7	446.1	48.6%	64%
Sales	3.5	4.5	1	28.6%	0%
Admin Support	83.4	101.1	17.7	21.2%	3%
Trans/Material Moving	30.7	38.5	7.8	25.4%	1%

Community Health Worker Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	57.5	67.8	10.3	18%	100%
Education	2.3	2.5	0.2	9%	2%
Ambulatory Care	11.1	14.6	3.5	32%	34%
Offices of Physicians	2.5	3.0	0.5	20%	5%
Outpatient Clinics	5.6	7.5	1.9	34%	18%
Hospitals	5.9	6.3	0.4	7%	4%
Nursing/Res Care Facilities	2.8	3.2	0.4	14%	4%
Social Assis	14.7	18.3	3.6	24%	35%
Svce Eld and Disa	3.4	4.5	1.1	32%	11%
Comm Relief	3.5	3.5	0	0%	0%
Voc Rehab	1.1	1.6	0.5	45%	5%
Religious/Civic	8.2	9.2	1	12%	10%
Government	9.2	9.9	0.7	8%	7%

Home Health Care Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	911.5	1337.0	425.5	47%	100%
Employment Services	17.4	18.6	1.2	7%	0%
Ambulatory Care	417.7	680.2	262.5	63%	62%
Home Health Agencies	411.1	671.8	260.7	63%	61%
Hospitals	12.0	12.1	0.1	1%	0%
Med/Surg Hospitals	9.9	10.3	0.4	4%	0%
Nursing/Res Care Facilities	197.7	253.1	55.4	28%	13%
Nurse Care Facil	24.3	29.3	5.0	21%	1%
Resid Care Cog Dis.	58.1	67.1	9.0	15%	2%
Cont. Care Asst Liv	88.2	128.1	39.9	45%	9%
Social Assis	225.7	328.9	103.2	46%	24%
Svce Eld and Disa	214.0	315.4	101.4	47%	24%
Government	13.7	14.4	0.7	5%	0%

Social and Human Service Assistants Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	389.9	453.7	63.8	16%	100%
Education	10.8	12.4	1.6	15%	3%
Ambulatory Care	30.1	39.1	9	30%	14%
Offices of Health Practitioners	10.1	15.1	5	50%	8%
Outpatient Clinics	20	15.5	-4.5	-23%	-7%
Hospitals	15.7	15.8	0.1	1%	0%
Nursing/Res Care Facilities	54.5	61.8	7.3	13%	11%
Nurse Care Facil	5.5	5.5	0	0%	0%
ResidCare Cog Dis.	34.4	42.6	8.2	24%	13%
Cont.Care Asst Liv	1.8	2.4	0.6	33%	1%
Social Assis	151.3	186.5	35.2	23%	55%
Svce Eld and Disa	40.3	54.1	13.8	34%	22%
Comm Relief	19.6	22.2	2.6	13%	4%
Voc Rehab	19.9	18.4	-1.5	-8%	-2%
Religious/Civic	31.5	35.7	4.2	13%	7%
Government	80.8	85.8	5	6%	8%

LPN and LVN Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	724.5	813.6	89.1	12%	100%
Employment Services	28.9	31.3	2.4	8%	3%
Education	15.8	17.0	1.2	8%	1%
Ambulatory Care	211.6	283.8	72.2	34%	81%
Offices of Physicians	93.9	112.4	18.5	20%	21%
Outpatient Clinics	24.9	34.3	9.4	38%	11%
Home Health Agencies	85.9	127.6	41.7	49%	47%
Hospitals	114.8	100.0	-14.8	-13%	-17%
Med/Surg Hospitals	94.2	78.3	-15.9	-17%	-18%
Psych Hospitals	10.0	10.0	0.0	0%	0%
Spec Hospitals	10.6	11.8	1.2	11%	1%
Nursing/Res Care Facilities	273.9	293.3	19.4	7%	22%
Nurse Care Facil	212.3	213.8	1.5	1%	2%
Resid Care Cog Dis.	10.9	13.1	2.2	20%	2%
Cont. Care Asst Liv	49.1	64.9	15.8	32%	18%
Social Assis	15.6	20.2	4.6	29%	5%
Svce Eld and Disa	12.2	16.3	4.1	34%	5%
Government	47.9	49.9	2.0	4%	2%

Massage Therapists Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	160.3	190.1	29.8	18.6%	100%
Ambulatory Care	35.4	53.1	17.7	50.0%	59%
Chiropractors	11.3	13.8	2.5	22.1%	8%
All other health care practitioners	11.3	13.8	2.5	22.1%	8%
Non health personal care	46.9	61.5	14.6	31.1%	49%
All other health care practitioners	11.3	13.8	2.5	22.1%	8%
Non health personal care	46.9	61.5	14.6	31.1%	49%

Medical Assistants Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	634.4	819.0	184.6	29%	100%
Employment Services	9.3	9.6	0.3	3%	0%
Education	10.5	11.6	1.1	10%	1%
Ambulatory Care	485.0	645.3	160.3	33%	87%
Offices of Physicians	363.5	478.6	115.1	32%	62%
Office of Optometrists	12.8	15.3	2.5	20%	1%
Outpatient Clinics	54.7	83.8	29.1	53%	16%
Hospitals	95.0	110.0	15.0	16%	8%
Med/Surg Hospitals	91.9	106.6	14.7	16%	8%
Nursing/Res Care Facilities	16.4	21.6	5.2	32%	3%
Nurse Care Facil	5.3	5.9	0.6	11%	0%
Cont. Care Asst Liv	9.8	14.2	4.4	45%	2%
Government	4.9	5.2	0.3	6%	0%

Nursing Aides Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	1510.3	1674.4	164.1	10.9%	100%
Employment Services	41.8	45.5	3.7	8.9%	2%
Education	9.2	9.8	0.6	6.5%	0%
Ambulatory Care	119.2	169.3	50.1	42.0%	31%
Offices of Physicians	20.0	23.9	3.9	19.5%	2%
Outpatient Clinics	15.7	21.9	6.2	39.5%	4%
Home Health Agencies	77.8	115.5	37.7	48.5%	23%
Hospitals	397.9	426.1	28.2	7.1%	17%
Med/Surg Hospitals	299.2	314.2	15.0	5.0%	9%
Psych Hospitals	7.9	7.5	-0.4	-5.1%	0%
Spec Hospitals	30.8	42.6	11.8	38.3%	7%
Nursing/Res Care Facilities	794.3	854.4	60.1	7.6%	37%
Nurse Care Facil	603.7	607.9	4.2	0.7%	3%
Resid Care Cog Dis.	25.0	29.4	4.4	17.6%	3%
Cont. Care Asst Liv	161.8	213.7	51.9	32.1%	32%
Social Assis	46.0	61.1	15.1	32.8%	9%
Svce Eld and Disa	41.6	55.8	14.2	34.1%	9%
Government	61.8	65.0	3.2	5.2%	2%

Orderlies Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Absolute Change	Relative Change	Industry Contribution to Change
Total	54	58.4	4.4	8%	100%
Ambulatory Care	3.1	4.1	1	32%	23%
Hospitals	40.2	42.6	2.4	6%	55%
Med/Surg Hospitals	38.4	40.9	2.5	7%	57%
Nursing/Res Care Facilities	6.8	7.4	0.6	9%	14%
Nurse Care Facil	5.1	5.1	0	0%	0%
Cont. Care Asst Liv	1.4	1.9	0.5	36%	11%
Government	1.5	1.6	0.1	7%	2%

Personal Care Attendant Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Change	Percent Change	Industry Contribution to Change
Total	2016.1	2770.1	754.0	37%	100%
Employment Services	44.1	45.5	1.4	3%	0%
Ambulatory Care	321.8	498.8	177.0	55%	23%
Outpatient Clinics	6.7	8.7	2.0	30%	0%
Home Health Agencies	308.8	481.7	172.9	56%	23%
Hospitals	6.8	7.1	0.3	4%	0%
Med/Surg Hospitals	6.8	7.1	0.3	4%	0%
Nursing/Res Care Facilities	371.5	473.5	102.0	27%	14%
Nurse Care Facil	24.8	30.0	5.2	21%	1%
Resid Care Cog Dis.	191.6	224.0	32.4	17%	4%
Cont. Care Asst Liv	144.8	210.5	65.7	45%	9%
Social Assis	1003.4	1445.1	441.7	44%	59%
Svce Eld and Disa	917.6	1363.7	446.1	49%	59%
Other Non Health Svce	147.1	144.2	-2.9	-2%	0%
Private HH	133.9	144.2	10.3	8%	1%

Physical/Occupational Therapist Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Absolute Change	Relative Change	Industry Contribution to Change
Total	187.1	242.6	55.5	29.7%	100%
Ambulatory Care	111.6	159.0	47.4	42.5%	85%
Offices of Therapists	88.1	124.4	36.3	41.2%	65%
Hospitals	30.6	32.0	1.4	4.6%	3%
Med/Surg Hospitals	25.7	27.0	1.3	5.1%	2%
Nursing/Res Care Facilities	23.2	25.8	2.6	11.2%	5%
Nurse Care Facil	20.9	22.8	1.9	9.1%	3%

Psychiatric Aides Occupational Employment Projections, U.S., 2016-2026

	2016	2026	Absolute Change	Relative Change	Industry Contribution to Change
Total	73.6	77.4	3.8	5.2%	100%
Ambulatory Care	2.2	2.6	0.4	18.2%	11%
Hospitals	34.1	32.9	-1.2	-3.5%	-32%
Med/Surg Hospitals	3.9	4.1	0.2	5.1%	5%
Psych Hospitals	29.7	28.1	-1.6	-5.4%	-42%
Nursing/Res Care Facilities	12.2	14.6	2.4	19.7%	63%
Resid Care Cog Dis.	11.5	13.8	2.3	20.0%	61%
Social Assis	3.6	4.7	1.1	30.6%	29%
Svce Eld and Disa	2.7	3.6	0.9	33.3%	24%
Government	20.2	21	0.8	4.0%	21%

Homecare Workforce Recruitment and Retention



Our Union

1199SEIU includes:

Over 450,000 healthcare workers in MA, NY, NJ, MD, DC, and FL

Over 55,000 Massachusetts healthcare workers, including 45,000 PCAs

Overall, SEIU includes:

2.4 million members across the country!

The PCA Job

Supporting people with disabilities/elders:

Activities of Daily Living (eating, toileting, dressing, bathing)

Instrumental Activities of Daily Living (shopping, laundry, meal prep, transport)

Why Do People Become Homecare Workers

- ✓ Personal Experience Caring for a Family Member/Friend
- ✓ Financial Compensation – Supporting Self/Family
- ✓ Commitment/Calling to Caring Profession
- ✓ Flexibility of Hours
- ✓ Interest in Advancing in Healthcare Field
- ✓ Available Positions

**Turnover for PCA Program =
30-50% Annually!**

Why Do People Leave?

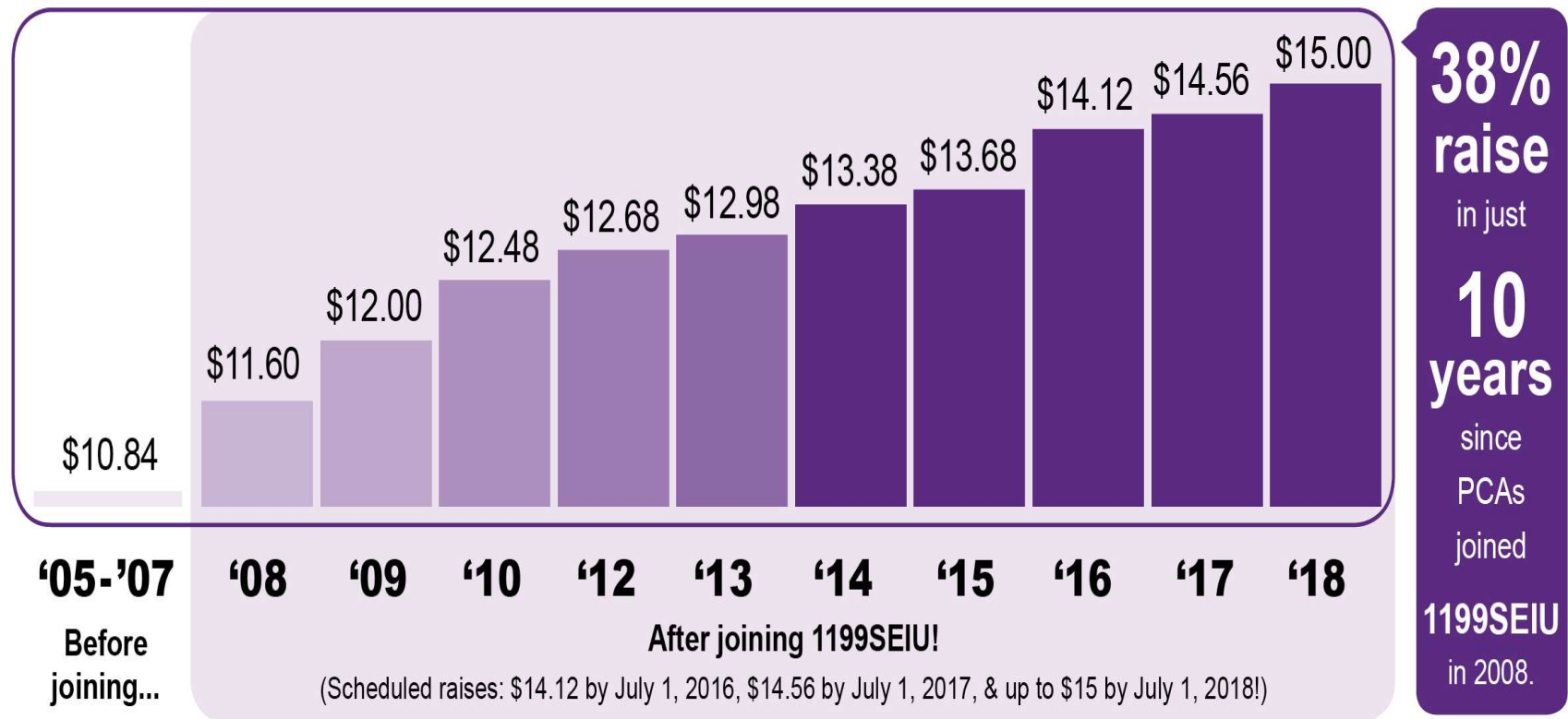
- ✓ Low Pay – Can't Support Self/Family
- ✓ Lack of Employer Sponsored Health Insurance – Cliff Effect
- ✓ Invisible and Isolated Workforce
- ✓ Minimal Opportunities for Career Advancement
- ✓ Need More Hours
- ✓ Late/Non Payment for Services
- ✓ Health/Safety Concerns: Harassment, Back Injuries

The Union Difference:

- ✓ Invisible No More –
Building Community among Homecare Workers
- ✓ Professionalizing the Workforce –
 - Additional Training Opportunities
 - Career Ladders
- ✓ Improving Wages/Benefits

What have we won?

Since PCAs joined 1199 in 2008, we have fought for and won 38% wage increases!



What have we won?

- ✓ Higher Wages – 38% increases – and highest starting wage for PCAs in the country – up to \$15 in 2018!
- ✓ Homecare Trainings
- ✓ Up to 40 hours of earned sick time/year
- ✓ Paid PCA Orientation
- ✓ Overtime Pay and Increased Hours Cap
- ✓ A Unified Voice to Protect and Improve PCA Program
- ✓ Health & Safety – PCAs now have access to gloves and masks, as well as health and safety training at no charge

Training Opportunities:

Adult First Aid/CPR

Alzheimer's and Dementia

Bloodborne Pathogens

Body Mechanics and Transferring

Communications and Boundary Setting

English for Speakers of Other Languages

Medication Safety

Nutrition and Diabetes

Topics in Computers

Training Enrollment:

Skills Workshops: 6090

Tuition Enrollment: 307

CNA: 339

ESOL: 578

Computer Classes: 598

Classroom Orientation: 17,532

More Educational Opportunities:

Certified Nurse Assistant (CNA) Programs

Tuition Vouchers for College Classes

**BOTH OF THESE OPPORTUNITIES ARE FULLY PAID FOR
BY THE HOMECARE TRAINING BENEFIT**

Integration of Homecare Workforce Into Care Teams:

- ✓ Homecare Workers are Eyes and Ears in Elders' Homes
- ✓ With Additional Training, Homecare Workers can Play Active Role Monitoring Health Conditions.
- ✓ Advanced Aide Positions Lead to Career Advancement and Fill Void in Current Healthcare Model
- ✓ Successful Models in California, New York

Home Care – Next Steps:

- ✓ Building Organization of Homecare Agency Workers to Lift Wages
- ✓ Fight for \$15 and Paid Family Medical Leave
- ✓ Continued Partnerships Matching Homecare Workers with Consumers/Agencies

Facing the Future of Care: Innovations in recruitment and retention of home care workers- Strategies for the MassHealth Personal Care Attendant (PCA) Program

**Lisa Marschke, Project Manager, Commonwealth Medicine
Center for Health Policy and Research/MassAHEC
508-856-4819**

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MRC Consumers

**Educate on
PCA jobs**

**Prepare
worker
profiles**

**Facilitate
match w/PCA
Employers**

PCA Consumers

**Post open
jobs**

**Facilitate
match w/PCA
workers**

**Promote
networking
events**

MRC Pilot

Are you looking to hire a PCA??

Come to the Meet & Greet event!

*"MRC makes no warranties and/or guarantees regarding the suitability of potential employees and applicants.
The decision to employ is not made by MRC."*

At the Meet & Greet event*:

- Meet local PCA candidates
- Talk in a neutral location
- Collect names and phone numbers
- Interview people for your job

* You do not have to hire at this event



Bring information about your job:

- Days and hours you are looking to fill
- When you want them to start working
- Tasks you need help with (bathing, dressing, etc.)
- Best way for candidates to contact you to learn more about the job

Next event: Wednesday, January 24, 2018 from 2:00pm-4:00pm
Temple Landing, 370 Middle Street, New Bedford, MA 02740

Please register with Ana by phone [774-510-5241](tel:774-510-5241) or email: ahayes@coastlinenb.org
Can't make it that day?? You can send a surrogate, family member or friend to meet
PCA candidates for you.

All consumers that attend are eligible to win a \$50 gift card.

Please refrain from wearing scented products (perfume, cologne) so we can maintain a scent-free environment that is safe and comfortable for all.

Program Partners: 1199SEIU, UMass Medical School, Center for Living and Working, Coastline Elderly Services Inc., Elder Services of Merrimack Valley, Elder Services of Worcester Area Inc., Family Service Association of GFR Inc., LifePath, Greater Springfield Senior Services, Independence Associates, Montachusett Home Care Corporation, Northeast Independent Living Program, Northeast ARC, Old Colony Elder Services, Options, Pride, Inc., Southeast Center for Independent Living, STAVROS, Tri-Valley Elder Services and West Mass ElderCare.

Meet & Greet Events

MassHealth PCA Program Directory

Call Toll Free: 1-844-422-6277 (1-844-422-MASS)



Your link to community services

**Franklin Hampshire
Health Care Employer Working Group**

Conveners:

**Franklin Hampshire Employment & Training
Consortium**

Franklin Hampshire Regional Employment Board

Massachusetts Workforce Areas and One-Stop Career Centers



Executive Office of Labor and Workforce Development
Department of Career Services
December 2017

Health Care Employer Challenges

1. Significant and ongoing demand for health care positions with strong competition between employers. (CNAs, HHAs, PCAs, Medical Assistants, Surgical/Medical Lab/Sterile Technicians, and RNs)
2. Applicant readiness and work readiness skills:
 - resumes, cover letters, interview skills, focus on transferable skills
 - work ethic, interpersonal skills, communication, customer service, problem solving, critical thinking, team building, safety awareness, and understanding of patient care needs)
3. Insufficient training programs/seats in the region to meet employer demand.

Employer Challenges

4. High Employee turnover rates for new hires:

- Lost employer investment in on-boarding and initial training.
- Unclear understanding of job demands or job environment.
- Expectation for wage rates and benefits higher than many employers are able to offer.
- A growing value preference for part-time and day-time shifts resulting in employer difficulty scheduling shifts.

Employer Challenges

5. Lack of transportation is a barrier to employment – bus schedules don't match work schedules or child care schedules.
6. Public safety net supports and the “Benefit Cliff Effect” may be a disincentive to work

Cliff Effects: Benefit levels decline more steeply than earnings increase, resulting in a decrease in total resources at certain key earnings thresholds (earnings + benefits)

Job Seeker Challenges

1. \$11/\$22,800 minimum wage doesn't provide a living wage:
 - Published Living wage in Western MA is \$12.34/\$25,667 (single adult) except Northampton and Amherst which is \$13.36/27,040 due to higher housing costs (LivingWageWesternMA).
 - The Living Wage formula accounts for basic subsistence needs of a family. It does not create financial independence.
 - People earning the designated living wage for our region remain eligible for public assistance programs like food stamps, subsidized housing, and MassHealth but experience the "cliff effect" 6 to 12 months into employment.
2. Lack of transportation is a barrier to employment
 - Lack of access to a private vehicle
 - Bus schedules don't match work schedules or work/child care locations and schedules
 - The majority of fixed route bus service ends by 5 or 6pm and most do not run on weekends
 - Most communities in Franklin/Hampshire counties are not served by bus transportation

Job Seeker Challenges

3. Limited child care services prevent some parents from working:
 - Centers don't open early enough for 7 or 7:30am shifts
 - No weekend/evening care
 - Waitlists for before/after school care
4. Irregular shifts and part-time work makes it difficult for workers to earn sufficient wages and to juggle family responsibilities.

Job Seeker Challenges

5. Workplace Culture

- Perceived lack of support
- Emotional stress of day to day work with ill/dying/lonely residents
- Need more orientation/training
- High turnover = high patient to worker ratio = inability to call out when sick, need to work extra shifts, called in on days off, and feeling stretched too thinly between patients.

Training Provider Challenges

1. Training costs are prohibitive for many students:
 - Limited access to financial aid or scholarships
 - Decreased public funding for CNA/HHA trainings
2. Training programs need minimum enrollment to cover program costs.
3. Training design dictated by public funding – needs more flexibility:
 - Length and 20 hours/week to obtain credential with public funds.
4. Availability, commitment and retention of qualified, licensed Allied Health instructors to ensure quality and continuity of trainings.

Priority Solutions

1. Create a Health Care Employers Working Group (including non-profits) to work with the FHREB, FHCC, and trainers to explore and implement solutions. ✓
2. Staff sharing/work schedule coordination to achieve full-time schedules for workers.
3. Alternative transportation:
 - Shared vans/shuttles
 - On-demand transportation

Priority Solutions

4. Work readiness/job awareness:

- Job shadowing and work-based learning options
- Career orientation and job readiness sessions with targeted outreach (high schools, retired nurses, grad students)
- Improved coordination/communication between employers, career center, and trainers with pre-screened training slots and job matching of trainees.

5. Explore funding options:

- Local Allied Health Training Fund – employer sponsored
- Workforce Training Fund

Priority Solutions

6. Workplace culture improvements:
 - Facility assessments, team building, incumbent worker training, communication
7. Explore comprehensive training to meet new clinically complex job demands = greater workforce readiness and career advancement.
8. Analyze options to reduce high turnover costs:
 - Cost analysis – increased wages/benefits to lower recruitment costs.
 - Track impact of priority solutions on turnover rate.

Employer Perspective

Tom Porter, President
Elite Home Health Agency, Inc.

Employer Perspective

- Small margins
- Staffing crisis beginning in 2016
- Western MA market does not support the \$30 - \$40 per hour client service charge needed to pay direct care staff wages of \$15-\$18/hour
- Collaboration between service providers is essential
- Immediate action is needed to meet the demand for services

Q & A

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