HOME CARE AIDES



RECOMMENDATIONS FOR CHANGE

THE HOME CARE AIDE

FOUNDATION & COUNCIL

Throughout our 50 year history, the Council has served as a strong collaborator with the Legislature, state agencies and our elder network partners. We have led the charge for industry standards and have worked with state agencies to develop programmatic and contractual best practices to ensure that quality services are provided by home care agencies. We have created nationally recognized training programs to strengthen and enhance the care home care aides provide in the community. Throughout all of our grantfunded efforts, we prioritize the need for adopting evidence-based practice to most effectively support this workforce. We have not only applied this information in Massachusetts, but have disseminated this work nationally- continuing the Commonwealth's reputation as an innovative leader in the provision

of health and long-term care.



CURRENT SITUATION

The home care industry has been struggling for years to meet the growing demand for services while attempting to build a sustainable business model and grow and maintain a decentralized workforce. The need for these essential front-line caregivers has never waned. But, the pressures placed on agencies that participate in Massachusetts' State Home Care Program have grown exponentially, as have the challenges to recruit and retain more qualified workers.

The Home Care Aide Foundation's Home Care Industry Assessment, conducted from 2016–2017, highlights the pressure points: low recruitment of new workers, high turnover of incumbents, and a workforce that is plagued with challenges from inconsistent hours and low wages to personal life burdens. It is getting ever more difficult for home care agencies to patch together a system to meet the care needs of Massachusetts' most vulnerable citizens. The most significant impediment is stagnant rates paid to the home care agencies that provide direct care services to low-income elders and disabled individuals in the state and federally funded programs.

The Massachusetts home care system is beginning to crack and will crumble if nothing is done to address the major threats. If investments are not made, elders desperately in need of care will suffer along with the diminishing numbers of home care workers who have remained in these essential jobs because of a passion for the work. When there are not enough front-line caregivers to provide the daily care individuals needs to remain at home, the state will not be able meet its health care cost containment goals.

Changes must happen now. There is no more time to delay.

HOME CARE AIDES FROM OUR STUDY:

96% FEMALE

48% IMMIGRANTS

50% HIGH SCHOOL DIPLOMA OR LESS

40% HOUSEHOLD INCOME UNDER \$20,000

48% MASSHEALTH MEMBERS

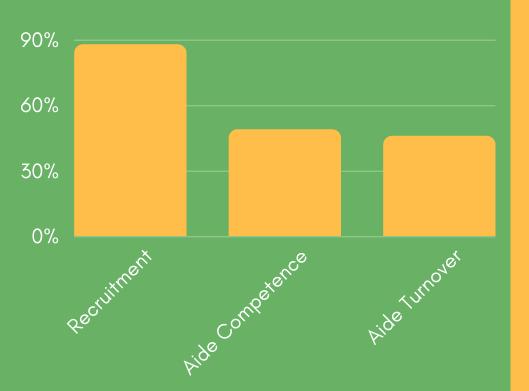
\$12.77 AVERAGE WAGE

THE HOME
CARE AIDE
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INCREASE RECRUITMENT

With an anticipated 16,844 home care aides needed by 2024 in Massachusetts, an average growth rate of 32%, identifying and preparing individuals to come into the field is a key priority. Despite this demand, nearly 90% of home care agencies report that recruiting qualified home care aides is their top workforce challenge. Coupled with this, over 45% of the agencies currently experience difficulty filling weekend and weekday cases. Additionally, fewer agencies are offering free initial training to perspective workers due to the cost and lack of training staff.

Top Three Agency Workforce Challenges



Significant infrastructure costs including training, recruitment and retention, health insurance and other benefits must be acknowledged through the provider rates established to support these essential services

Recommendation #1:

Identify mechanisms to make initial training lowcost or free to individuals interested in pursuing a career in home care

Recommendation #2:

Improve the support provided to trainees and new workers to ease the transition into work

Recommendation #3:

Develop innovative partnerships with community- based organizations to recruit and support younger and nontraditional workers into field

FIGURE 1.

Agencies reported that their top challenges related to workforce included finding qualified aides to fill open positions (88%), home care aide communication and professional skill competence (49%) and home care aide turnover (46%).

IMPROVE RETENTION

Turnover of home care aides is a critical issue that disrupts an agency's ability to provide service to clients. Our study found that the average home care aide turnover rate is 16% over a three-month period. Over one third of an agency's aide workforce changes every quarter. On average, agencies only add three new aides every three months due to the high turnover; hiring 18 people, but losing 15. To fully illustrate the depth of the problem, you have to look at intent to leave the job. Home care aides report a high intent to leave the job, with nearly 37% stating they are either very or somewhat likely to leave in the next year.

Home Care Aides' Intent to Leave the Job

37% VERY OR SOMEWHAT LIKELY TO LEAVE

63% NOT AT ALL OR SOMEWHAT UNLIKELY TO LEAVE

The top three things home care aides like least about their job: pay, benefits, and the lack of information they have about their clients

Recommendation #1:

Work with the
Massachusetts' Legislature
to increase wages and
improve the benefits offered
to home care aides
employed by home care
agencies

Recommendation #2:

Invest in programs and pilot innovate partnerships and models that support home care aides to manage the personal and work life challenges that threaten their ability to remain on the job

FIGURE 2.

A large proportion of home care aides report intent to leave their job within the next year, a serious concern for agencies that are already experiencing high turnover rates.

MAXIMIZE HOURS

With the growing demand and high turnover, home care agencies need to maximize the hours worked by the home care aides they employ. Our study found that home care aides work on average only 26 hours per week. Yet, 42% report wanting to work more hours. Aides can not afford to support themselves or their families on the low wages they earn. But when they are available and want more hours, they must often turn down hours to remain eligible for public benefits, which provide them with services they desperately need to make ends meet. At the same time, agencies struggle to build schedules that match both worker availability and client need.

Home Care Aides on Public Benefits

31% REPORT REDUCING HOURS TO REMAIN ELIGIBLE FOR BENEFITS

55% OF HOME CARE AIDES ARE ON AT LEAST ONE PUBLIC BENEFIT

Today's home care
system relies on lowwage caregivers to
provide direct care to
vulnerable lowincome elders

Recommendation #1:

Address the rise in short shifts by increasing rates to support the differentials paid to aides for these undesirable shifts and provide consistent, higher reimbursement for travel

Recommendation #2:

Work across state agencies to review various program requirements and engage in a system wide approach to address the benefit cliff issues that force home care aides to limit their hours

FIGURE 3.

Over half of the home care aide workforce is on at least one public benefit. Of those on benefits, 31% reported reducing their hours to become or remain qualified.

STABILIZE SCHEDULES

The ever-changing nature of home care, whether due to client availability or change in condition, leaves home care aides with inconsistent and variable schedules that are difficult to build a career on. In focus groups, home care aides spoke about the impossibility of making a position at one agency their primary job because of the constant risk of lost income as work hours fluctuate. In our study, 47% of the aides had at least one other job and reported traveling an average of 41 minutes between clients each day. Scheduling issues and travel were identified as major problems with the job, and a reason why aides look elsewhere for more stable work.

Home Care Aides' with Other Jobs

40%
30%
20%
10%
0%
Categining Jobs
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Other Tobs

In contrast to home care, institutional based long-term care settings, offer regularly scheduled shifts to workers, resulting in consistent rates of pay, making it hard for agencies to compete

Recommendation #1:

Develop innovative ways to better cluster clients to improve scheduling and decrease travel

Recommendation #2:

Adopt and adequately reimburse agencies for full-time home care aide positions

FIGURE 4.

Among all home care aides, 47% have at least one other job outside of their position as a home care aide. 35% have a job in another caregiving position (such as, as a PCA or CNA), 26% have more than one home care aide job, and 19% work in another industry.

^{*}The most frequently reported 'Other Job' was in the Food Service Industry

UP-SKILL AND INTEGRATE

Home care aides are the eyes and ears of the health care system in the community. They have a great deal to offer but are most often overlooked by the health care system. When properly engaged and supported, they can help bridge the knowledge gap and assist in keeping clients out of the hospital and institutional settings. Providing greater training, responsibility, and information to these essential workers will not only lead to better client outcomes but will also increase work satisfaction for aides who reported a lack of information or misinformation about their clients as a major barrier in their work.

Percent of Home Care Aides that Strongly or Somewhat Disagree

14%

"my supervisor provides me with all the information I need about my clients to be successful"

23%

"my supervisor is supportive of my career, such as offering me opportunities for training"

37%

"i am satisfied with my opportunities for promotion at my agency"

Recommendation #1:

Invest in the creation of new up-skilling opportunities for home care aides and ensure that state-level workforce funding is designed to support the ongoing training needs of the home care aide workforce

Recommendation #2:

Increase the information provided to home care aides through the use of technology

Recommendation #3:

Improve the training provided to home care aide supervisors to ensure aides are properly supported and communication is enhanced

Recommendation #4:

Partner with managed care entities to begin to build new models for care delivery that include the home care aide as an integral team member

FIGURE 5.

Home care aides reported strong disagreement with questions about the amount of information they are provided regarding their clients and about the opportunities for training and promotion within their agency.

BACKGROUND

The Home Care Aide Foundation, with generous support from The Tufts Health Plan Foundation, led the project, "Setting the Agenda: Data driven advocacy to address home care aide policy". The goal was to execute a Massachusetts home care workforce and industry study to understand the current status of the State Home Care Program workforce, as well as identify priority areas for policy change or legislative action.

The Home Care Agency survey was embedded in the online system that administered the 2016 Homemaker Intent to Contract Application. In total, 106 home care agencies completed the Home Care Agency Survey. At the time of the data collection, 135 agencies had contracts to work within the State Home Care Program, of which 58 responded to the survey, resulting in a 43% response rate.

The sampling strategy for collection of Home Care Aide Survey was to solicit participation from home care agencies that completed the Agency Survey. The survey was available in four languages and data was collected through online and paper surveys in 2017. 3,007 home care aides were eligible to participate in the survey through eleven home care agencies. 656 total home care aides responded to the survey, resulting in a 21.8% response rate.

Three stakeholder focus groups with provider organizations, academic and government agency representatives, and aging network stakeholders and four focus groups with home care workers were conducted. The focus groups assisted in contextualizing the results from the surveys and in identifying barriers that could be alleviated through changes in policy, as well as providing recommendations for changes to policy and practice.

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www.tuftshealthplanfoundation.org



FOR A COPY OF THE FULL DATA REPORT OR FOR QUESTIONS

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