



SEIUHealthcare.
United for Quality Care

DHS/ORS Personal Assistant Training Program Stakeholder Input Process EXECUTIVE SUMMARY

Introduction

SEIU Healthcare Illinois represents 28,000 Personal Assistants working in the Illinois DHS/ORS Home Services Program, providing home care services to people with disabilities across the State and ensuring that people with disabilities live independently at home and in the community.

SEIU members achieved first-time funding to start a paid training program for PAs in their collective bargaining agreement with the State of Illinois. Through a Joint Committee with the State, and with input from stakeholders in the Disability Community, our goal is to develop a statewide training program that can provide high quality training to thousands of Personal Assistants on a voluntary basis, and enable PAs to develop the skills and knowledge necessary to provide the highest quality home services to consumers. We believe that PA training will strengthen the Home Services Program, and enhance the home care services provided to people with disabilities.

In order to design a successful training program, SEIU has sought input and engagement from all key stakeholders, including Personal Assistants; the Disability Community, particularly Centers for Independent Living; key staff from the Department of Rehabilitation Services; Home Services Consumers; and other collaborators.

To assist with stakeholder engagement and support a successful design process, SEIU has contracted with PHI, a nationally recognized organization with experience in developing Direct and Home Care Worker¹ and Consumer² Training programs in multiple states. (*see attachment*). The attached reports capture the input we received from Personal Assistants, CIL Disability Advocates, and HSP Consumers.

¹ PHI's complete 77-hour **Personal Care Services (PCS) Curriculum**, foundation training for direct care staff in all settings and for a variety of clients, is available at: <http://phinational.org/training/resources/pcsc>.

² PHI's Michigan curriculum for consumers, "**Employing, Supporting and Retaining Your Personal Assistant Workshop Series**" is available at: <http://www.michigan.gov/lrc/0,1607,7-148--179012--,00.html>.

1. **Hopes and Expectations**

An overwhelming number of the 2,040 Personal Assistants who responded to SEIU's survey – 78% – would like to receive training to do their job as a PA. 68% reported that they have received no training to do their job as a PA. PAs want training to improve their ability to provide services that ensure their consumers' physical and emotional health and support them in directing their lives in satisfying and fulfilling ways. They also hope to enhance their own experience as support givers and reduce stresses related to their work.

CILs and consumers similarly want the PA Training Program to enhance PAs' ability to support them in providing safe and responsive consumer-directed services, and to prepare PAs for additional training by individual consumers regarding their needs and preferences. They hope this will lead to more reliability and stability in the workforce. They also hope that the training program will build on, and not supplant, CILs current training work, and be carried out in partnership with the CILs and consumers.

2. **Knowledge, Skills and Attitudes Essential for PAs**

The DHS/ORS Home Services Program has four required topics (asterisked below) for PA orientations. The CILs have included these in their larger list of "Must Have" elements for PA training. These subjects are consistent with areas PAs have identified as important to them. They include: Independent Living Philosophy*, Individualizing Services to Consumers *, Universal Precautions *, Proper Transfer Techniques *, Proper Completion of the PA Packet, Understanding the Service Plan, Completing a Time Sheet, General Disability Etiquette, Confidentiality, Sexual Harassment, Neglect, Abuse, and Fraud. Various CILs also provide additional training in a range of additional topics.

CILs and consumers emphasized that training should reinforce consumer control and direction and deepen PAs' understanding of their role as the consumers' employees.

Key stakeholders from the State has expressed the need for PAs to receive a standardized training/ orientation package that covers core topics around employment information, preventing fraud and sexual harassment, privacy policies, universal precautions and lifting and body mechanics.

PAs also expressed interest in CPR/First Aid training; communication, relationship and problem solving skills – both to enhance relationships with and support consumers who are challenged in coping in their lives, and to manage relationships with family members and others in the homes; understanding the DHS/ORS system and their role within the program, responsibilities and boundaries within their role as a PA; safe transfer techniques and body mechanics; and understanding more about the disabilities and conditions of the consumers they work with and how best to support consumers in living with them. A significant number felt that CNA training would be valuable.

3. **Training Design and Implementation**

All stakeholders interviewed agreed that one to four-hour training programs, repeated at various times and days throughout the whole week, would be the most accessible approach

for PAs. A menu approach to the offerings would build in the flexibility needed to address the wide variety of backgrounds of PAs, as well as the diverse needs of their consumers. Offering different topics back-to-back would also allow PAs to devote fuller days to training if that suited their schedules.

Training must be delivered locally to be accessible to PAs. The 23 CILs are interested in partnering to offer training locally, and many Coordinators are interested in becoming trainers in the PA Training program. CILs and consumers also believe that consumer involvement in the training is critical. SEIU is also interested in reaching out to other educators across the State who have experience as adult educators or as subject matter experts.

PAs need advance notice of training offerings, communicated through as wide a variety of means as possible to ensure they are notified and have sufficient time to make arrangements to attend and so that they ensure coverage for their consumers. CILs suggested that notifying consumers of the training would also support good outreach.

SEIU very strongly believes that training should utilize adult learner-centered methods as articulated by PHI. PAs and the CILs affirmed their interest in training that used multiple approaches to actively engage learners in training and appeal to a variety of learning styles.

At this time, all training is voluntary. A range of opinions about mandatory training was expressed by stakeholders. Consumers want no barriers to choosing the PA they prefer. Some CIL representatives and some PAs felt various topics ought to be prerequisites for working as a PA.

4. Peer Mentoring

SEIU strongly believes that establishing and developing a trained corps of PA Peer Mentors who could support other PAs in their jobs would strengthen the Home Services Program and provide vital support for new or incumbent Personal Assistants. PAs, CILs and Consumers were excited about the potential for a Peer Mentor Training Program. Mentors will create opportunities for one-on-one training, and at the same time they can facilitate networking among PAs. They can provide expertise in providing supports and services. They may also enhance classroom training and collaboration with CILs and consumers. Being a mentor also offers growth and career opportunities for the mentors.

5. Advisory Group

The outreach that SEIU has done over the past six months has laid the foundation for a Training Advisory Group that includes representatives of the CILs, consumers, and PAs. This will ensure ongoing oversight, input and collaboration so that the Training Program is addressing the needs and concerns of all stakeholders.

Attachment:



~ PHI: Improving Direct-Care Jobs, Improving Care ~

Headquartered in the South Bronx, PHI's mission is to promote *quality jobs* and *quality care* throughout the eldercare and disability service sector. Our work impacts the lives of consumers, families, and staff employed by eldercare/disability service providers; in particular, we pursue a sectoral workforce strategy to improve the jobs of the 3.2 million *direct-care staff* in the U.S. — home health aides, certified nurse aides, and personal care workers.

With 43 staff, PHI implements policy and practice initiatives in 20 states and nationally. We are grounded in close association with three affiliates: *Cooperative Home Care Associates* employs 1700 home health aides and is the largest worker cooperative in the country, managing an employer-based training program that enrolls 420 inner-city women annually. *Independence Care System* is our \$100 million nonprofit managed care program, coordinating services for more than 1600 low-income adults living in their homes with physical disabilities. *Home Care Associates*, owned by its 200 staff, brings our employment and training model to Philadelphia.

Direct-Care Jobs: A Workforce Development Opportunity

Direct-care workers are the nation's second largest occupational group, providing 70 to 80 % of all paid eldercare/ disability services. They also represent one of the fastest growing occupations in the U.S., with demand for *one million* new workers by 2018. This growth is due in part to retiring baby boomers, who are anticipated to use personalized care at a higher volume than any prior U.S. generation. National and state public policies, including the implementation of the Affordable Care Act, will also accelerate demand, shifting services out of institutions and into homes and communities, and creating opportunities for advanced roles for these workers in care coordination.

Thus direct-care jobs are a gateway to employment for hundreds of thousands of low-income individuals each year—central to the economic life-blood of low-income communities across the country. *One out of every 12* low-wage workers in the U.S. is a direct-care worker.

PHI's Work to Improve Direct-Care Jobs

PHI employs staff based in Michigan, New England, New York, Pennsylvania and Washington, D.C. We also work closely with several federal agencies, including the Centers for Medicare and Medicaid Services and the U.S. Department of Labor, and we work to be a valued partner to all key stakeholders within the sector: employers, organized labor, and aging/disability consumer organizations.

At any one time, PHI is consulting to at least 20 major employers across the country, including home care agencies, personal care programs, nursing homes, and other residential settings. We adapt field-tested workforce and organizational practices designed to create *quality care through quality jobs*. Current initiatives include:

- Φ ***National Healthcare Sectoral Strategy:*** With lead support from the Charles Stewart Mott Foundation, PHI fields a national “sectoral employment development strategy,” an employer-based blend of policy and practice. With targeted funding from The Ford Foundation, PHI is conducting practice work to strengthen direct-care worker roles with eight providers in the East Coast and Midwest and engaging employers in policy advocacy.
- Φ ***Entry-Level Training:*** In partnership with the Pennsylvania Department of Labor and Industry, PHI has developed a model competency-based training curriculum for entry-level direct-care workers, an effort that is now informing curriculum development efforts in at least seven other states, including states receiving Personal and Home Care Aide State Training (PHCAST) grants from the US Department of Health and Human Services.
- Φ ***Blueprint for Home Care Worker Training:*** PHI worked with the Service Employees International Union Local 775 in Washington State, authoring the “blueprint” for a training program focused on personal care workers in Washington State.
- Φ ***Personal and Home Care Assistant Training Demonstration:*** PHI is playing a major role in the Personal and Home Care Aide State Training Program (PHCAST) program, established under the Patient Protection and Affordable Care Act (PPACA). A three-year, \$15 million national demonstration program, PHCAST will enable six states to create or strengthen training for personal and home care aides. PHI helped to inform the overall national design for PHCAST (advising U.S. Sen. Herb Kohl’s office, which sponsored the PHCAST language in the PPACA), and subsequently secured contractual technical assistance roles to help PHCAST grantees in Michigan, California, Massachusetts, and North Carolina.
- Φ ***Raising Wages:*** Last year, PHI and its affiliate ICS released a *blueprint* for strengthening the home- and community-based service delivery system in New York State. Several of our recommended changes were included in the latest state budget—including an increase in the wage floor for home care aides (to \$10 per hour, to be fully implemented by March 2014) that will improve compensation for 80,000 home health aides.
- Φ ***Advanced Aide:*** With support from the John A. Hartford Foundation, PHI is developing a new position that prepares direct-care workers for participation in new models of service delivery. This competency-based, fundamental redesign of the job description for direct-care workers will justify substantial investment in training, support, and compensation. In return, Advanced Aides will provide greater added value to consumers and employers.
- Φ ***Overtime and Minimum Wage Protections:*** Most home care and personal assistance workers are denied basic federal wage and hour protections, due to the *Companionship Exemption* within the U.S. DOL’s Fair Labor Standards Act. PHI works with a range of allies to redefine the exemption by driving a social media campaign, securing media editorial support, and research and analysis. The DOL is now considering changes to the exemption.
- Φ ***State Workforce Policy Development and Program Implementation:*** Under a multi-year contract, PHI works with the National Direct Service Workforce (DSW) Resource Center, a technical assistance consortium funded by the Centers for Medicare and Medicaid Services, to support state policymakers to improve the recruitment and retention of direct-care staff.