



LONG-TERM CARE SUBCOMMITTEE February 1, 2024

Agenda

ltem	Speaker
Welcome	Bonita Campo
AMS Tip of the Month	Jessica Zering
ALTSA Workforce Development Operational Strategies	Stacy Graff & Stephanie Marko -DSHS/RCS/ALTSA
Addressing the LTC Workforce Challenges Practice and Policy Working Together	Dr. Donald J. Smith, Jr. & Christopher Dula, Workforce Training and Education Coordinating Board
Questions and Open Discussion	ALL
Wrap up and next steps	Bonita Campo





ANTIMICROBIAL STEWARDSHIP TIP OF THE MONTH

Jessica Zering, PharmD, BCIDP, BCPS, CAPM Jessica.zering@doh.wa.gov

Antimicrobial Stewardship – Tip of the Month

- What?
 - Fast facts from the literature or from clinical guidelines
- Who?
 - All clinical staff
- Why?
 - To provide LTCFs with helpful AMS information in a quick, bite-sized format
- How Do I Share These in My Facility?
 - Via emails, staff huddles, educational binders, discussing at committees

These tips do not replace clinical judgement

Washington State Department of Health | 4

Check Out the Latest Resources!



WASHINGTON STATE SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE

Washington State Department of HEALTH

October 2023 | DOH 420-548

Urine Polymerase Chain Reaction-Based (PCR) Testing Guidance Document

Introduction:

- Urine polymerase chain reaction-based (PCR) laboratory testing has been promoted to clinicians as an alternative method of obtaining urine cultures.
- Due to the high prevalence and overuse of antibiotics for asymptomatic bacteriuria (ASB) in the postacute and long-term care population, guidance on the topic of PCR urine testing is provided to ensure safety.
- This document is intended to provide guidance but does not replace clinical judgement.
- WA PALTC and WA DOH Urine PCR Testing Guidance Document
- Do You Really Have a Penicillin Allergy Handout for Patients
- <u>Communicating with Residents and Families about Antibiotics CE</u>
- Antimicrobial Stewardship Toolkit for Nursing Homes

Washington State Department of Health | 5

Do you really have a penicillin allergy? If not, you may not be getting the best antibiotic for your infection



The facts

While 10% of all people in the US report an allergic reaction to penicillins... Studies actually show that less than 1% of the

Studies actually show that less than 1% of the population is truly allergic to penicillin.

Why might this be?

- Most people who have a penicillin allergy lose their allergy within 10 years.
- Side effects from a medication might seem like allergic reactions, but they are not the same.
 Some people may have incorrectly labeled a side effect as an allergic reaction.
- Some people may believe they are allergic to penicillin due to a family member's allergy. People do not need to avoid penicillin if a family member is allergic.

References

1. CDC. Is It Really a Penicillin Allergy? <u>https://www.cdc.gov/antibiotic-use/community/pdfs/penicillin-factsheet.pdf</u>

 Khan DA, Banerji A, Blumenthal KG, et al. Drug allergy: A 2022 practice parameter update. Journal of Allergy and Clinical Immunology. 2022;150(6):1333-1393. doi: <u>https://doi.org/10.1016/i.jaci.2022.08.028</u>

3. AAAAI. Penicillin Allergy FAQ. Updated Sept 2023.

https://www.aaaai.org/tools-for-the-public/conditions-library/allergies/penicillin-allergy-fa



Washington State Department of DOH 420-540 CS November 2023 The quest this document, in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov

Side effects vs. allergies A side effect is a symptom caused by a medication

A side effect is a symptom caused by a medication you took. Side effects are common. They are usually mild and go away quickly. Examples of common side effects include feeling sick to your stomach and having diarrhea.

An allergic reaction is caused by the immune system's reaction to a medication. Allergies are rare and usually happen every time you take a particular medication. These occur right away or shortly after taking a medication. Allergic reactions can include itchy rashes, trouble breathing, wheezing, and anaphylaxis.

Why does it matter?

Penicillin and other similar antibiotics often work better for certain infections (i.e., antibiotics given before surgery or dental procedures).

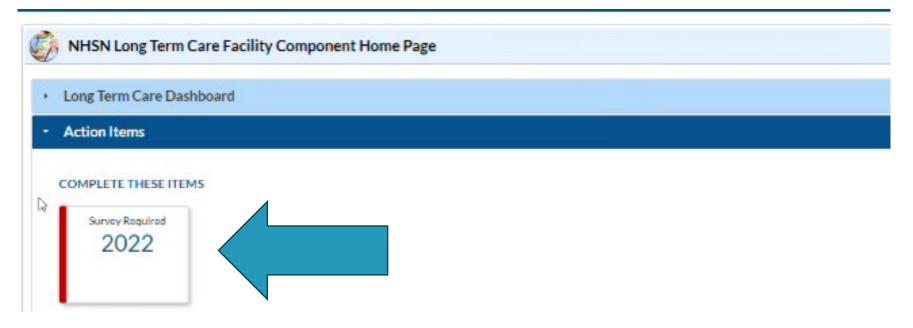
People who report a penicillin allergy often receive other antibiotics that cause more side effects.

If your health care provider discovers that you do not have a true penicillin allergy, they will have more options to treat your bacterial infection.

Make sure you're getting the best antibiotic for your infection. Talk to your health care provider today about your penicillin allergy.

Complete the Annual NHSN Survey!

- Annual survey allows Public Health to learn how to better support you
- You will all receive an alert from NHSN to complete survey (see below)
- Survey must be completed in one sitting

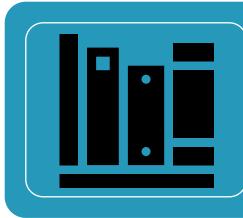


Washington State Department of Health | 6



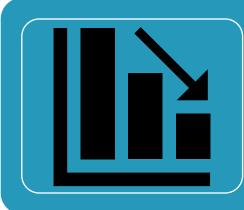
AHRQ ANTIBIOTIC STEWARDSHIP INITIATIVE

AHRQ Quality Improvement Study¹



Study Type and Population

- Quality improvement initiative conducted from Dec. 2018 Nov. 2019
- 439 nursing homes, skilled nursing care, hospice, dementia care, and residential and continuing care communities
- Multiple bed sizes from urban, suburban, and rural settings represented



Outcomes

- Primary: Decrease in antibiotic starts
- Secondary: Decreases in other antibiotic use metrics (days of therapy, defined daily doses)

Washington State Department of Health | 8 1. Katz M et al. JAMA Netw Open. 2022 Feb 1;5(2)e220181

Methods¹

- Based on AHRQ 4 Moments of Antibiotic Decision-Making framework
- 15 webinars led by ID experts in 12 months
- Tools such as narrated presentations, posters, and pocket cards were available
- Monthly antibiotic use data was submitted to AHRQ
- Both prescribers and direct care staff involved

Box. The 4 Moments of Antibiotic Decision Making

1. Make the Diagnosis

Does the resident have symptoms that suggest an infection?

2. Cultures and Empiric Therapy

What type of infection is it? Have we collected appropriate cultures before starting antibiotics? What empiric therapy should be initiated?

3. Duration of Therapy

What duration of antibiotic therapy is needed for the resident's diagnosis?

4. Stop, Narrow, Change to Oral

It's been 2-3 days since we started antibiotics. Reevaluate the resident and review results of diagnostic tests. Can we stop antibiotics? Can we narrow therapy? Can we change to oral antibiotics?

	Rate per 1000 resident-days			
Outcomes	Baseline (n = 410)	End of program (n = 410)	Difference (95% CI)	P value
Antibiotic starts				
All antibiotics	7.89	7.48	-0.41 (-0.76 to -0.07)	.02ª
Fluoroquinolones	1.49	1.28	-0.21 (-0.35 to -0.08)	.002 ^a
Piperacillin-tazobactam	0.09	0.11	0.02 (-0.01 to 0.04)	.13
Third-generation cephalosporins	0.80	0.74	-0.06 (-0.14 to 0.02)	.15
Ceftazidime/cefepime	0.09	0.13	0.04 (-0.004 to 0.08)	.08
Antibiotic days of therapy				
All antibiotics	64.10	61.05	-3.05 (-6.34 to 0.23)	.07
Fluoroquinolones	10.6	9.41	-1.20 (-2.15 to -0.24)	.01 ^a
Piperacillin-tazobactam	2.18	3.01	0.83 (-0.17 to 1.84)	.10
Third-generation cephalosporins	5.48	4.72	-0.76 (-1.44 to -0.88)	.03 ^a
Ceftazidime/cefepime	1.41	2.19	0.78 (0.07 to 1.49)	.03 ^a
Urine cultures collected	3.01	2.63	-0.38 (-0.61 to -0.15)	.001 ^a
Clostridioides difficile LabID events/10 000 resident-days	1.66	1.50	-0.16 (-0.64 to 0.33)	.52

Table 3. Changes in Antibiotic Use, Urine Cultures Collected, and Clostridioides difficile LabID Events

Washington State Department of Health | 10 1. Katz M et al. JAMA Netw Open. 2022 Feb 1;5(2)e220181

What Were the Key Takeaways?¹

- Educating direct caregivers about sending urine cultures only when specific signs and symptoms were present (i.e., diagnostic stewardship) was credited with the noted reduction in the # of urine cultures ordered
- Engaging all staffing roles facilitates organizational culture change
 - This study was unique in its inclusion of nurse assistants

Thank you!

Jessica.zering@doh.wa.gov

References:

1. Katz M et al. JAMA Netw Open. 2022 Feb 1;5(2)e220181

Washington State Department of Health | 12



Transforming lives

Aging and Long-Term Support Administration

February 1, 2024







Washington State Department of Social & Health Services ALTSA Workforce Development Operational Strategies

Transforming lives

Presented by: Stacy Graff, Workforce Development Unit Manager Stephanie Marko, Retention Specialist

Overview







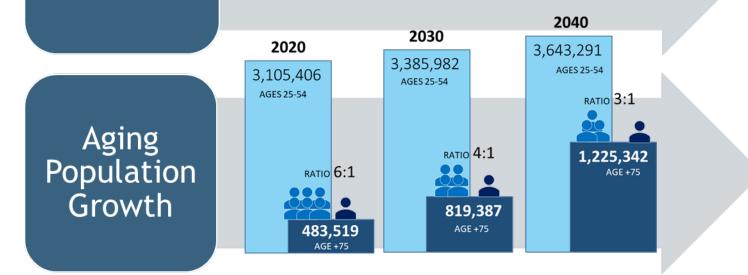
- Workforce Shortage
- Voice of the Caregiver what workers want
- Strategies legislative, ALTSA initiatives
- Workforce Retention



Workforce Shortage Predictions

 Washington State does not have enough caregivers.

• This is expected to get worse.



Workforce

Shortage

- We are living longer and healthier lives!
- We need a health care system built to support us all, so we can thrive as we age.

Workforce Shortages are causing systemwide problems



On average, clients are waiting 60 days for an in-home paid provider



Clients have less choice in how they receive services and by whom

What Caregivers Want

- Recognition
- Career Advancement
- Assistance Finding Jobs
- Wages/Benefits
- Flexibility
- Support







Addressing Workforce Challenges

- Broaden recruitment & retention efforts.
- Reduce barriers to employment.
- Increase visibility and showcase the importance of the workforce in delivering essential, person-centered services.
- Innovative service delivery.
- Data collection & evaluation.

Moving Forward: Implementing Legislative Workforce Wins

HB 1694, Addressing
the Home Care
Workforce Shortage

- Lessened barriers to entry
- Expanded the definition of "family member"
- Requests reports on paying spouses and parents of medically complex children

SB 5278, Implement Audit Recommendations to Reduce Barriers to Home Care Aide Certification

- Required changes to testing and certification to reduce barriers to entry
- Requests report on further reduction of barriers on testing and certification

SB 5499, Multistate Nurse Compact

> Sets up system to allow nurses from other states to work more easily in Washington state (and vice versa)

HB 1435, Home Care Safety Net Assessment

 Creates a workgroup to investigate implementation of a home care safety net assessment SB 5582, Reducing barriers and expanding educational opportunities to increase supply of nurses in Washington

- Expanded credentialing and educational opportunities and eliminated bottlenecks
- Created HCA to LPN apprenticeship pathway pilot
- Funded direct care jobs marketing campaign

Marketing and Outreach

High School Home Care Aide Program

Retention

Navigation and Support

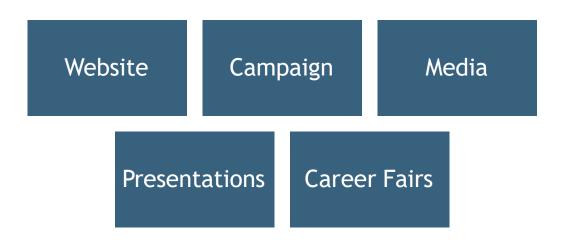
Direct Care Workforce Collaborative

ALTSA Workforce Strategies

The Workforce Development Team at ALTSA works statewide and collaboratively with community partners on recruitment and retention of direct care workers.

-All All

Marketing and Outreach





Caregiver Making Tea

<u>Full Length Commercial</u> Chili (Spokane) - Tribal Bumper (vimeo.com) Washington State Department of Social & Health Services



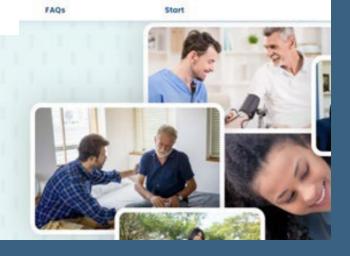
Develop & introduce new brand
Build & launch updated website
Promote Caregiver Information Events
Design & initiate awareness campaign
Create & share useful digital/print materials
Advertise on social media platforms

Find your Why– Become a Caregiver!

Professional career development A passion for serving others Flexible schedules Variety in daily work Health insurance & other benefits*

Depends on employer benefits package

Learn More & Get Started



Select Language

Navigation and Support

The Workforce Development team has three Workforce Navigators who help provide guidance and support to prospective home care aides from the point of interest, through employment.





Home Health Care Draft(1).mp4



Advocacy group created by ALTSA to give a voice to people providing direct care services across the state. The forum allows caregivers from all settings to engage in conversations about the benefits and challenges of providing direct care and to provide feedback about proposals that impact them and the clients they serve. Direct Care Workforce Collaborative

- Improve job quality
- Rebranding
- Recruitment and Retention
- Training
- Career and Professional Development
- Data gathering and analysis
- Regulation
- Supports

strong Patience Heart Honest Communicate Organized Emotionally Forgiving Respectful Option Kind 0 Work Ethical Positivity Physical Commitment ive Career Relationship Great Listen Effective Tolerant Boundaries **Detail-oriented** Passion

What advice would you give someone who's considering becoming a caregiver?

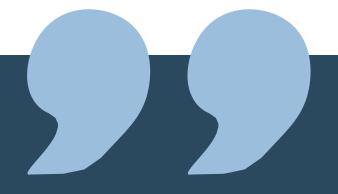
Retention

Retention work is key to maintaining the caregiver workforce.



History

Background information about the development of the Retention Toolkit.



Educate, Inspire, and Empower Leaders. There is more to retention than just pay!

Workforce Development Team

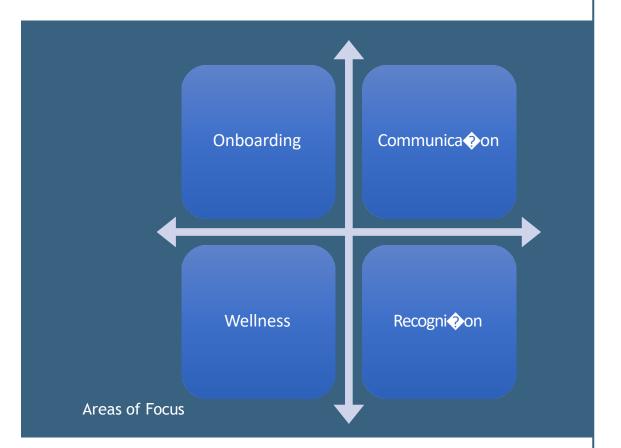


2021 Direct Service Workers Staff Stability Survey

Recruitment and Retention Strategies Reported Used in CY 2021

Recruitment and Retention Strategies	Number of Agencies*	
Provide bonuses, stipends, or raises to DSWs as they complete key stages of a credentialling process or upon completion of the credentialing process	23	
Provide sign-on bonus	19	
Use a DSW ladder to retain workers in DSW roles	17	
Include DSWs in agency governance	11	
Implement employment engagement surveys to assess DSW satisfaction and experience working for the agency	9	
Offer and/or participate in apprenticeship programs for recruitment purposes	8	
Employee recognition programs	6	
Engage with high schools and/or local colleges/universities for recruitment purposes	4	
Support staff to get credentialed through a state or nationally recognized professional organization	3	
Require training for DSWs above and beyond those trainings required by state regulations	3	
Provide training on a Code of Ethics	2	
Realistic job preview (provides accurate information about the job duties, both positive and negative, from the perspective of people who do the work)	0	

Four areas of focus were chosen for the toolkit based on feedback from stakeholders and retention subgroups:



Layout: Each module of the toolkit is divided out into four sections

- 1) What employees say
- 2) What is (insert topic of module)
- 3) Practice
- 4) Learn more

The Voice of the Employee is the focus in the "What Employees Say..." section included in every topic. This includes statistics relevant to that topic.



WHAT EMPLOYEES SAY

- 91% of workers at companies led by leaders that support well-being efforts say they feel motivated to do their best at their jobs. (American Psychological Association)
- 61% of employees are burned out on the job. (CareerBuilder)
- The top five stress symptoms causing missed workdays are constant fatigue (29%); sleeplessness (26%); aches and pains (24%); high anxiety (23%) and weight gain (18%). (CareerBuilder)
- Only 46% of employees reported that their company supports physical and emotional health. (IBM, 2020)
- 48% of employees have reported that company-sponsored training helps them the most when it comes to stress management. (Udemy, 2017)
- About 70% of the employees agreed that they require their employer's help to ensure that they are healthy and financially secure. (EBRI)
- According to a report from Ginger, an on demand emotional support application, 81% of employees reported that the symptoms of workplace stress could range from fatigue and anxiety to physical ailments which in turn, caused them to miss work.

"I have worked at this facility for 6 years. I stay because they are so flexible and understand I have a family. I work 3, thirteen-hour shifts, and have weekends off." - Direct Care Worker, ALF, Spokane

> "I love my job because the owner is mentoring me and encouraging me to learn"

- Direct Care Worker, AFH, Airway Heights.

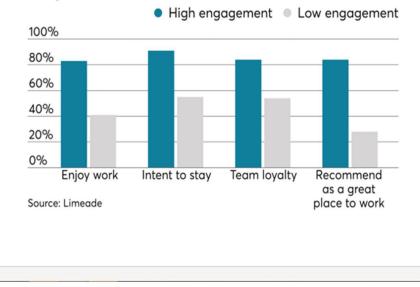
RETENTION TOOLKIT Wellness

WHAT IS WELLNESS?

Wellness is a positive, day-to-day approach to a long, healthful, active life.

There are many ways to be well- regular exercise, maintain a healthy diet, avoid harmful habits, engage in preventive health care, make an effort to reduce the stresses of daily life, and tend to physical, mental, personal, and emotional needs.

How wellness engagement impacts workers



A description of the topic is included in the next section of each module. Defining the topic and why it has an impact on employee engagement, satisfaction, and retention.

RETENTION TOOLKIT

Wellness

LEARN MORE

Please visit the CareLean site to complete the suggested trainings on Wellness. All the Wellness modules are available to your staff as well and provide CE credits for caregivers. Encourage employees to complete these courses as part of your commitment to wellness.

DSHS Approved Continuing Education Training - CareLearnWA

- Employee Wellness Healthy Sleep
- Employee Wellness Managing Stress
- · Employee Wellness Weight Management
- Taking Care of You
- Long Term Care Culture Change
- · Employee Wellness Importance of Physical Fitness
- · Stress Management for the Caregiver

TEDTalk- click below to view the short, inspirational TEDTalk.

"Why we need to treat our employees as thoughtfully as our customers" (10 min) <u>Ted Talk w/</u> <u>Diana Dosik: Why we need to treat our employees as thoughtfully as our customers - Bing</u> video

Website

Workplace Mental Health & Well-Being — Current Priorities of the U.S. Surgeon General (hhs.gov)

Washington Warm Line – peer support help line for people living with emotional and mental health challenges. Calls are answered by specially trained volunteers who have lived experience with mental health challenges. They have a deep understanding of what you are going through and are here to provide emotional support, comfort, and information. All calls are confidential. Immediate translation in 155 languages: **877-500-WARM**

The LEARN MORE section has linked information to trainings, TED Talks, Podcasts, and additional resources.

RETENTION TOOLKIT

Wellness

PRACTICE

Lead by example. Take care of yourself and encourage employees to practice self-care. Make wellness a priority, talk about it openly.

✓ Take 10 minutes a day to meditate, journal, or watch a funny video.

✓ Get those steps in! Consider wearing a tracker and having a step competition with your employees.

Steps per Day	Category	
< 5000 steps/day	Sedentary	
5000 - 7499	Somewhat Active	
7500 - 9999	Somewhat Active	
10,000 - 12,499	Active	
> 12,500	Highly Active	

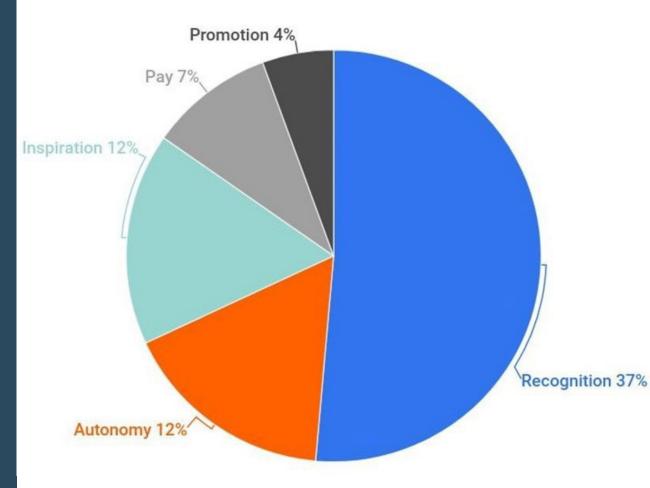
1http://sandeehealthyliving.blogspot.com/2014/05/10000-steps-day.html

- ✓ Find a new healthy recipe to try and share it!
- ✓ Step outside for some fresh air or sunshine.
- ✓ Reflect on one thing or one person you are grateful for.
- ✓ Make your annual well care appointment checkups.
- ✓ Check in with someone each day, just to see how they are doing.

The PRACTICE section has a list of actionable items that a supervisor can use to improve their skills.

A little recognition can go a long way!

WHAT DO EMPLOYEES CONSIDER MOST IMPORTANT FOR SUCCESS?



Launched on the CareLearn Platform

• CareLearn Washington is for direct care professionals working in Washington State for an Adult Family Home, Assisted Living Facility, Enhanced Service Facility, or Home Care Agency <u>not affiliated with the SEIU</u>; as well as Unpaid Caregivers who provide assistance to family members or friends.

• CareLearn Washington has been designed to provide caregivers affordable, quality, and accessible online learning opportunities. It serves as an additional resource for caregivers who need to earn continuing education credits. CareLearn increases access to training and can reduce the amount of time caregivers need to be away from the people they care for.

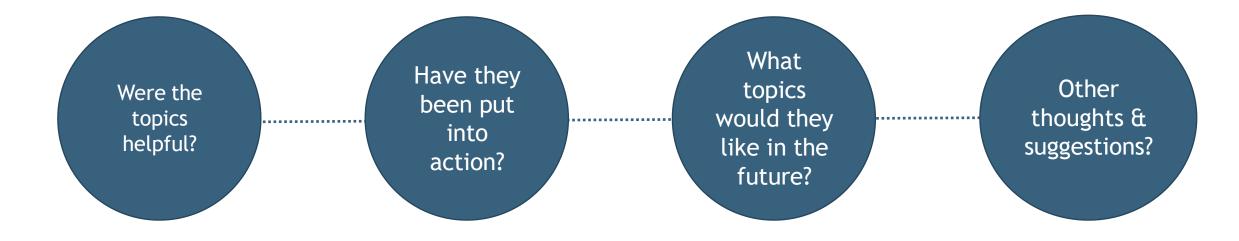


The Onboarding Experience has lasting effects.





90 days after the Retention Toolkit has gone live, a survey will go out to managers/supervisors. This, in conjunction with CareLearn data, will help to guide the ongoing work on retention.



ADKAR MODEL

Awareness	+	Desire	+	Knowledge	ŧ	Ability	+	Reinforcement	=	Change
There are actions they can take as leader		Desire	+	Knowledge	+	Ability	+	Reinforcement	=	Confusion
Awareness	+	Reduced turnove lower recruitment cost, better client	t	Knowledge	+	Ability	+	Reinforcement	=	Resistance
Awareness	+	Desire	+	Retention Toolkit and courses		Ability	+	Reinforcement	=	Anxiety
Awareness	+	Desire	+	Knowledge	+	Free, mobile friendly, self paced		Reinforcement	=	Frustration
Awareness	+	Desire	+	Knowledge	+	Ability		Survey and results in improved retention	=	Backsliding

The Future of the Retention Toolkit





New Module Harassment, Abuse and Discrimination



Feedback Action feedback from post survey-Spring 2024



Hoping to... Incorporate its message and content into "Note to employers performing required orientations"



Make available to new AFH applicants as a resource

Thank You!

Stacy Graff - <u>stacy.graff@dshs.wa.gov</u> Stephanie Marko - <u>stephanie.marko1@dshs.wa.go</u>v



Transforming lives

Addressing the LTC Workforce Challenges Practice and Policy Working Together

Dr. Donald J. Smith, Jr., Long-Term Care Workforce Policy Manager Chris Dula, Healthcare Workforce Senior Researcher





Washington State Department of Social & Health Services

ALTSA Aging and Long-Term Support Administration

Recognizing the Challenges

"Long Term Support Services (LTSS) have challenged policymakers for decades. Most individuals who need LTSS receive the assistance from a family caregiver. Those who need paid LTSS in a nursing home or in their own home must negotiate a complex, patchwork of expensive services."

"The need for LTSS and the cost to governments will grow drastically over the next two decades with population aging, increasing the already underfunded government health care programs," (CMS, 2013).

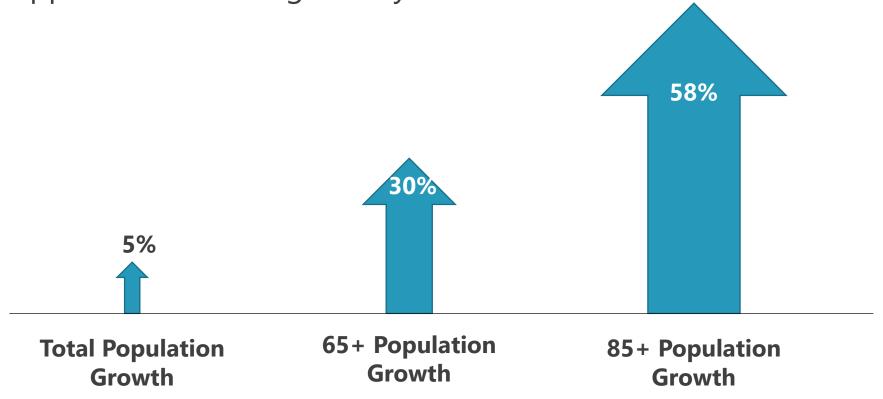




- > Highly Complex
- Multiple efforts and partners
- > Limited Resources
- Not static. The finish line is moving.
- Creating collaborative efforts



70% of Washingtonians over the age of 65 will need paid LTC support for an average of 4 years.





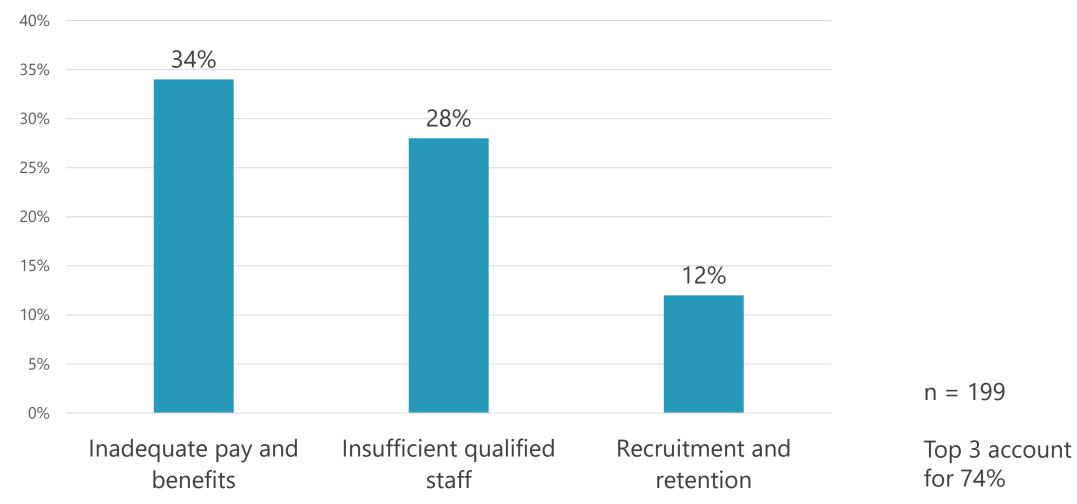
Long-Term Care Facilities

Occupations with exceptionally long vacancies:

Top occupations cited as having exceptionally long vacancies by date of reporting							ĺ			
Rank	Spring 2020	Fall 2020	Spring 2021	Fall 2021	Spring 2022	Fall 2022	Spring 2023	İ		
1	Nursing assistant	Nursing assistant	Registered nurse	Registered nurse	Registered nurse	Nursing assistant	Registered nurse			
2	Registered nurse	Registered nurse	Nursing assistant	Licensed practical nurse	Licensed	Licensed practical nurse	Licensed practical nurse			
2	2 Registereu nuise	Registered hurse	Nursing ussistant	Nursing assistant		Registered nurse	Nursing assistant			
3	Licensed practical nurse	Licensed practical	Licensed practical nurse	Occupational therapist	Nursing assistant	Nursing assistant	Nursing assistant	Cook /		Ύ
Ŭ	Dentist	nurse			Dhysical Food services	Food services	Food services	Most cited		
	Multiple .	Occupational therapy assistant	Occupational therapist				Environmental Services	đ		
4	occupations cited at same	Physical therapist	Physical therapist	Speech-language therapist		Cook / Food services	Dietitian / Nutritionist		ļ	
	frequency	Physical Therapy Assistant	Social worker Speech-language therapist	therapist			Occupational therapy assistant			

Sentinel Network has contributed to understanding the key role of LPNs & helped spur the development of the LPN Registered Apprenticeship Pilot in LTC.







"You have to talk about wages. You cannot put food on the table without it. But it's also about the environment. **Give us dignity. We are not 'just' CNAs."**

"We need to learn to empower those doing the actual work. **This industry is carried by those** doing the care work."

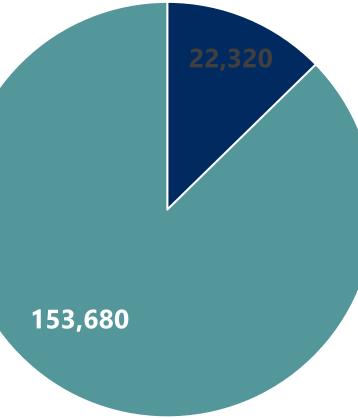
– Narcisa Gacek, Nursing Assistant

- Misrak Mellsie, Brookdale Senior Living



Projected Job Openings in WA State: All Direct Care Workers, 2020-2030

Occupation	Job Openings Due to Growth	% Growth
Home Health and Personal Care Aides	17,460	28%
Nursing Assistants	4,860	14%
All Direct Care Workers	22,320	23%

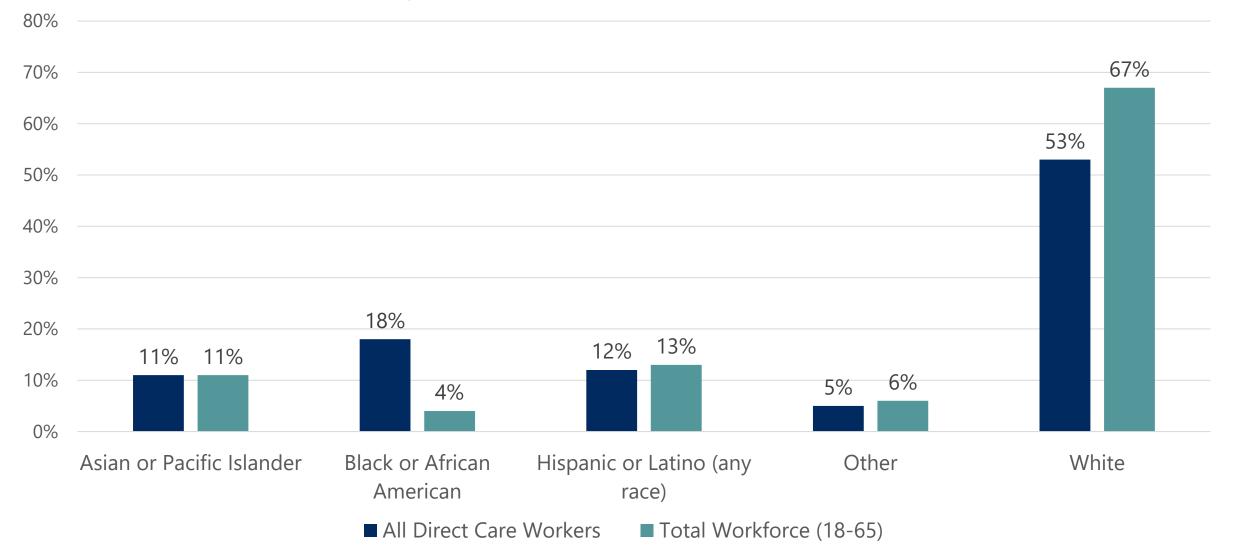


Job Openings Due to Growth

Job Openings Due to Seperat Separations



Race and Ethnicity of all Direct Care Workers vs. Total Workforce in WA State, 2020





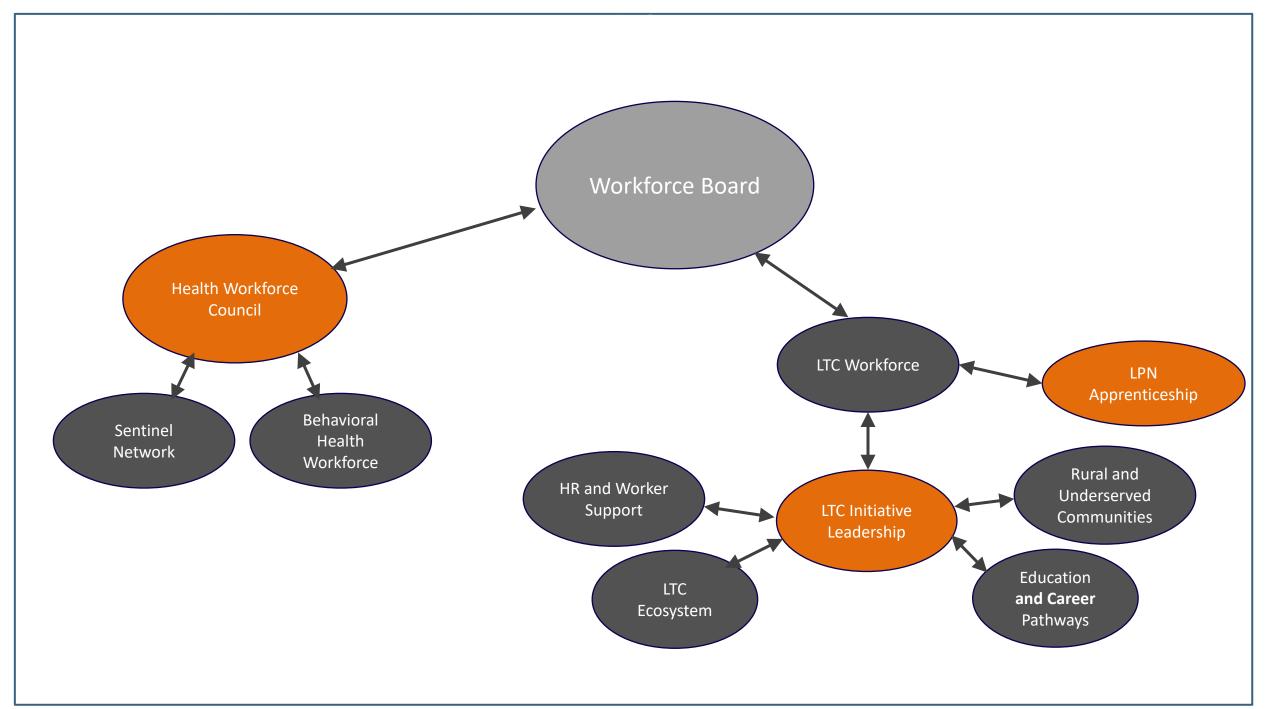
The Washington Workforce Training and Education Coordinating Board (Workforce Board) is an agency that serves as a <u>partnership between labor</u>, <u>business</u>, and <u>government</u> that is dedicated to meeting the need for a skilled healthcare workforce and supporting Washington residents obtain family-wage jobs. The Workforce Board acts as an <u>advocate for workforce development related issues</u>, an <u>independent third-party evaluator of the state's workforce system</u>, the <u>lead policy advisor</u> and a <u>regulator of private career school programs and veterans' education programs</u>. The Workforce Board <u>offers recommendations to the legislature</u>.

More information on The Workforce Board can be found at <u>Washington Workforce</u> <u>Training & Education Coordinating Board</u>



- Health Workforce Council
- Behavioral Health
- Sentinel Network
- In-house research
- Long-Term Care Workforce Initiative
- NAC/HCA to LPN Registered Apprenticeship Project
- Dementia Action Collaborative





People who care....





How do we create an environment of cooperation?

First, we overcome the silo mentality?

Silo mentality is an attitude within an organization where departments or teams don't share knowledge or collaborate with one another, leading to difficulties in achieving long-term goals.

Gliffy.com (2021)



- > Competitive
- Efficiency is limited
- > Resources are scarce
- Successes become less frequent



When the silos come down.....

- Competition becomes collaboration
- Efficiency is enhanced
- Resources reach further
- Successes become more frequent

Policy meets Practice



2023 Legislative Session

Range of Bills monitored by the Workforce Board

- Nursing education
- Professional licensing
- LTC workforce
- Homecare
- Behavioral health
- Data management



A high-quality system of coordinated long-term care support services that provide accessible choices in care settings.

Ensuring access to comprehensive career pathways and lifelong learning opportunities contributes to a well-trained and equipped staff who provide quality, empathic care in a stable, nurturing work environment.



"How do we get from the Current State to the Ideal State?"

Creating an environment of collaboration



The approach

- Based upon stakeholder contributions
 - Healthcare, state agencies, businesses, educators, LTC providers, labor, and direct care staff
 - Each stakeholder contributes equally
- An initial set of recommendations developed through a series of sub-committee meetings
- Recommendations developed by the stakeholders



- Workforce Board funded in 2022 for a 3-year project to launch a Licensed Practical Nurse (LPN) Registered Apprenticeship pilot for Long-Term Care (LTC).
 - Partner coalition leading program development
 - Three LTC employers, the WA State Board of Nursing, Labor & Industries, two community and technical colleges, & WA Health Care Association as the industry sponsor
 - 40 frontline caregivers in LTC taking prerequisite LPN courses
 - First cohort will start the LPN program in Fall 2024 at Edmonds College
 - Apprenticeship Navigators supporting students to access wraparound services
 - Dept. of Veteran Affairs is also exploring LPN apprenticeship through this project

Continued funding request: \$1.2M/year through FY27.

- Funding ends June 30, 2025 a year into the first cohort's education program
- Funds through FY27 will provide time to build a sustainable program that will allow two cohorts to complete their LPN coursework.



LTC Initiative 2024 Recommendations

- Continued support of LPN RAP & expanded support for LPN RAP educational programs
- Increase reimbursement rates
- Review allowed work locations for Nurse Techs
- Expand QIP Nurse Program
- Continuation of LTC Initiative Funding with grant program

Full recommendations & data analysis available in **2023 LTC Initiative Report**



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Washington Long-Term Care
Workforce Initiative
Legislative Report
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Fall 2023

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LTC Ecosystem

- 1. HCA licensing. This has been an area of significant concern to agencies, providers, and care givers due to delays in license activation, fees and responses from Department of Health (DOH) to inquiries. A preliminary report by DOH has expanded upon these concerns and is looking at solutions to these challenges.
- 2. Marketing. The Workforce Board has been tasked with recruiting a marketing firm to conduct a campaign aimed at recruiting nurses in the LTC sector and in rural communities. This group will be surveyed for recommendations to share with the marketing firm. There could potentially be some policy recommendations that come out of the marketing research.

HR and Worker Support

- 1. Leadership and its role in recruitment and retention.
- 2. Culture change, its role in recruitment and retention and methods to effect culture change at the facility level.
- 3. Continuing education availability and relevance at the leadership level.
- 4. Establishing career pathways within a caregiver group. i.e. nursing assistantscertified (NACs) who have no interest in moving out of their role. Could career tracks with specific skillsets be established to offer greater compensation, worker engagement and responsibilities?
- 5. Recruiting beyond nursing with a focus on support staff.

Education and Career Pathways

- 1. Health care aide (HCA) training, testing and potential solutions to the testing backlog.
- 2. Career advancement and "bridging the gap."
- 3. Career progress and having established pathways in place to provide an advancement strategy for workers.
- 4. A partnership between the college systems and caregiver pathways.
- 5. Challenges in recruitment, retention, and career progression in assisted living facilities (ALFs)

Rural and Underserved Communities (NEW!)

- The lack of training options. There is a great deal of interest in the Licensed Practical Nurse (LPN) Apprenticeship, but this is still in the pilot phase of the project. High school to workforce and retention of trained workers within their home community is a key factor for these communities.
- 2. Collaborative approaches to problem solving. This is one area where research can prove critical to identifying available resources and mapping out their availability.
- 3. Competition for entry level staff. How can a community work together to share their limited workforce between healthcare venues?
- 4. The role of Artificial Intelligence (AI) in long-term care (LTC). This is a technology that is in its infancy but could prove to be a critical resource going into the future. AI could be used to support administrative roles, patient assessments or monitoring. It could free caregivers from time-consuming administrative responsibilities, allowing more time for direct patient care.
- 5. Refugee and immigrant populations could prove to be an untapped resource in healthcare if a way to license foreign-trained providers could be developed. A key challenge in fully utilizing this potential resource is language barriers.

Questions?

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Questions and Open Discussion

Reminders

- The HAIAR section produces a monthly Gov Delivery newsletter
 - Each edition delivers updates from various sections within HAIAR and provides readers with valuable resources as well as information about pertinent news and events.
 - <u>Subscribe to our HAIAR monthly newsletter</u> or scan the QR code
- Slides and meeting minutes will be emailed within seven days of this meeting
- The next meeting is scheduled for March 7, 2024, at 4:00 p.m.
 - Agenda items can be sent to <u>bonita.campo@doh.wa.gov</u>



Thank you



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