Address the Home Care Worker Crisis: There is a crisis in home care and the shortage of home care aides, found throughout the state regardless of funding source. Elders face delayed discharge from hospitals or require costlier institutionalizations to meet their intermittent or long term home care needs for personal assistance. The need for services is increasing, compounded by the decreasing numbers of available home care workers and informal caregivers, and cannot be met through current strategies, including utilization of the Consumer Directed Program. Many EISEP and Medicaid providers rely on the same home care agencies and both are finding problems meeting the need for APPROVED hours of care.

Current home care employers are already experiencing difficulty recruiting and retaining an adequate workforce to meet client needs. Approved and funded hours of care are being left unfilled due to the home care worker crisis, and families and friends are burning out as informal caregivers who are trying to fill the care gaps. Now is the time to adopt funding mechanisms that incentivize recruitment and retention, to re-image these vital workers as paraprofessionals at a competitive salary that values their contributions, and explore other innovative strategies to promote an increase in the pipeline of workers for this growing field.

**Recommendations:** The need for services is increasing, compounded by the decreasing numbers of available home care workers and informal caregivers, and cannot be met through current strategies, including reliance on the worthwhile and valued Consumer Directed Program in Medicaid and in EISEP to meet the care gap.

Create incentives for the recruitment and retention of home care workers to truly address the shortage that otherwise will result in more nursing home placements for those who would prefer to receive care at home.

Provide funding for a livable wage and benefits for the paraprofessional home care workforce to address the problems in recruiting and retaining workers that has resulted in forced reductions in service, although hours have been authorized.
**Adjustments in rates must be accountable and transparent.** Funding that goes to Medicaid Managed Long Term Care (MLTC) plans must be directed toward recruitment and retention of the paraprofessional home care workforce. Data must be included in cost reports to show when hours of care have been assessed/approved, but not delivered due to workforce shortages. Such reports must be shared in a timely manner with the Legislature and the Department of Health as well as with the Department of Labor who should be encouraged to formulate local, regional and statewide strategies as needed. The Medicaid Inspector General should be charged with review of MLTC and home care employers’ cost reports to ensure that additional funds in fact were directed to recruitment and retention incentives for the employees for whom it was intended.

**A public campaign is essential** to overcome a negative image of home care workers and rebrand the workforce as paraprofessionals. (The negative image has been referenced in a June 2003 report of the US Department of Health and Human Services, as an image that is thought of as “an inadequately trained woman with few skills receiving low pay for unpleasant work, and with little hope for advancement.”) The public image campaign should focus on the important contributions home care paraprofessionals make to the community. Provide a role for the NYS Labor Department to be the conduit for people who respond to the campaign and utilize the DOL work readiness skills training, including English as a second language, and connect them to job openings.

**Convene a Stakeholder Task Force** to brainstorm and make recommendations. To address the immediate and emerging crisis, expedited appointments should be made August 1, 2017 so that the group can convene immediately with a report by November 1, 2017. Developing an adequate strategy to address the crisis requires policy and practice to mutually support solutions and that all stakeholders work on a coherent, shared strategy. Stakeholders appointed must include representatives of public and private sector employers, along with representatives of government, consumers, and labor. Additionally, state agencies represented on the Most Integrated Setting Coordinating Council charged with implementing the state’s Olmstead plan should immediately review the home care paraprofessional worker shortage and have strategies included in their agency budgets for the Executive Budget proposed for SFY 2018-19.

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38 COUNTIES REPORT THERE EXISTS
A HOME CARE WORKFORCE
SHORTAGE
REGARDLESS OF PAYER SOURCE
Additional Recommendations for Workforce Innovations

1. It is not enough to address payment issues without addressing the pipeline of workers for the future. Data must be collected to define the scope and nature of the crisis.

2. Provide funding for a public image campaign to recruit home care paraprofessionals.

3. Provide a role for the NYS Labor Department to connect interested people to the work readiness skills training and job openings.

4. Create Task force to brainstorm and recommend.

5. Stress that DSRIP funds for workforce must address local paraprofessional home care recruitment & retention.

6. Prioritize use of Workforce Investment funds, Welfare to Work and SCEP training and placement initiatives to address the crisis.

7. Create a mentored apprenticeship program.

8. Provide retirement security.

9. Incentivize the use of technology and Safe Patient Handling procedures in home care settings.