# **HFAM Testimony SB 307 Final.pdf**Uploaded by: DeMattos, Joseph Position: FAV



#### TESTIMONY BEFORE THE SENATE FINANCE COMMITTEE

January 21, 2021

Senate Bill 307: Labor and Employment - Direct Care Workforce Innovation Program Written Testimony Only

**POSITION: SUPPORT** 

On behalf of the members of the Health Facilities Association of Maryland (HFAM), we appreciate the opportunity to express our support for Senate Bill 307. HFAM represents over 170 skilled nursing centers and assisted living communities in Maryland, as well as nearly 80 associate businesses that offer products and services to healthcare providers. Our members provide services and employ individuals in nearly every jurisdiction in the state and provide the majority of long-term and post-acute care to Marylanders in need.

Senate Bill 307 would establish the Direct Care Workforce Innovation Program to provide matching grants to eligible entities to create and expand on successful recruitment and retention strategies that address the range of potential barriers to increasing the number of direct care workers with the goal of ensuring the availability of trained direct care workers across the state.

Workforce development, recruitment, and retention of both direct and indirect workers across all healthcare settings was important before the COVID-19 pandemic and now is even more critical.

For years, in Maryland and across the nation, healthcare settings have faced staffing shortages in a range of roles from physicians and nursing aides to housekeeping and dietary workers. The COVID-19 pandemic has exacerbated these challenging workforce shortages. While no single piece of legislation will solve this ongoing crisis, Senate Bill 307 provides expanded grant opportunities and partnerships for direct care workforce recruitment and retention in healthcare settings, which is an excellent and important start.

Additionally, we often find ourselves focused on public policy problems or most recently enormous healthcare and economic challenges brought on by the ongoing pandemic. This bill reminds us of the opportunity we share to train direct care workers for a rewarding profession and the earning that comes with it, to lay the groundwork for that individual to build upon their skill set and advance their career in healthcare, and the familial and community impact that comes with it.

For these reasons we request a favorable report from the Committee on Senate Bill 307.

Submitted by:

Joseph DeMattos, Jr. President and CEO (410) 290-5132

#### **LeadingAge Maryland - 2021 - SB 307 - direct workf** Uploaded by: Greenfield, Aaron

Position: FAV



6811 Campfield Road Baltimore, MD 21207

**TO:** The Honorable Delores G. Kelley

Chairwoman, Finance Committee

**FROM:** LeadingAge Maryland

**SUBJECT:** Senate Bill 307, Labor and Employment- Direct Care Workforce Innovation

Program

**DATE:** January 21, 2021

**POSITION: Favorable** 

Leading Age Maryland supports Senate Bill 307, Labor and Employment – Direct Care Workforce Innovation Program.

LeadingAge Maryland is a community of not-for-profit aging services organizations serving residents and clients through continuing care retirement communities, affordable senior housing, assisted living, nursing homes and home and community-based services. We represent more than 120 not-for-profit organizations, including the vast majority of CCRCs in Maryland. Our mission is to expand the world of possibilities for aging in Maryland. We partner with consumers, caregivers, researchers, faith communities and others who care about aging in Maryland.

Senate Bill 307 establishes a Direct Care Workforce Innovation Program in the Division of Workforce Development and Adult Learning within the Maryland Department of Labor. This program would provide matching grants to eligible entities to create and expand successful recruitment and retention strategies that address the potential barriers to increasing the number of direct care workers.

The Maryland Regional Direct Services Collaborative, in which LeadingAge Maryland is a founding member, serves as a network of organizations and individuals working together to build and sustain a well-trained direct services workforce in the Maryland region. The challenge associated with hiring and retaining direct care workforce tops the list of concerns that our nonprofit organizations express, not only for the future, but also right now. Direct care workers are critically important in providing round-the-clock supports and care services to frail older

adults and people with disabilities. These dedicated professionals accomplish difficult work with demanding schedules and low wages (median hourly wage in Maryland is \$13.03/hour – a median annual income of \$22,700). Forty-three percent of direct services workers in Maryland rely on some form of public assistance. Over the last year, COVID-19 has further strained an already stretched workforce. Direct care workers are now facing the added challenges of risks to their own health and that of their families', submitting to frequent testing, increased stress and grief of being in close contact with individuals who are ill from or dying of COVID-19, challenges with childcare and school accessibility, and other factors that make caregiving an even more challenging career to pursue.

Older adults are growing as a proportion of the population which means that care needs are expanding. A study of Maryland conducted by PHI in 2018 indicated that the number of older adults is predicted to grow by 75% within the next 30 years from 837,500 in 2015 to nearly 1.5 million in 2045. During the same time, adults over 85 will increase by nearly 200 percent. With only 5% expected growth among working-age adults, the ratio of working-age adults to those over 85 will shrink from 32-1 in 2015 to 12-1 in 2045.

While we have much more information we could offer to support the challenge of finding, training and retaining caregivers and direct service workers, we also have the daily experience of nonprofits who recognize that a well-trained and sufficient workforce is a critical component of quality care and yet struggle to find workers. Senate Bill 307 offers the opportunity for a variety of partners to collaborate to find innovative solutions to these challenge, to pilot approaches that are showing promise elsewhere, and to assure that older adults and people with disabilities in Maryland can get the care they need.

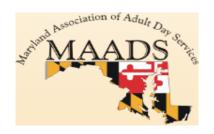
For these reasons, LeadingAge Maryland respectfully requests a <u>favorable report</u> for Senate Bill 307.

For additional information, please contact Aaron J. Greenfield, 410.446.1992

### **SB0307\_FAV\_LifeSpan\_MAADS.pdf**Uploaded by: Kauffman, Danna

Position: FAV





Managed by LifeSpan

TO: The Honorable Delores G. Kelley, Chair

Members, Senate Finance Committee

The Honorable Guy Guzzone

FROM: Danna L. Kauffman

Pamela Metz Kasemeyer

410-244-7000

DATE: January 21, 2021

RE: **SUPPORT**– Senate Bill 307 – *Labor and Employment – Direct Care Workforce Innovation* 

Program

On behalf of the LifeSpan Network and the Maryland Association of Adult Day Services (MAADS), we **support** Senate Bill 307. Members of the LifeSpan Network and MAADS provide post-acute care services to Maryland's elderly and disabled residents, many of whom are on Medicaid. Services are provided in a variety of settings, including nursing facilities, assisted living, and medical adult day centers. Senate Bill 307 establishes a Direct Care Innovation Program in the Department of Labor whose purpose is to provide matching grants to eligible entities to create and expand on successful recruitment and retention strategies that address the range of potential barriers to increasing the number of direct care workers.

Our workforce is the cornerstone of our operations. Prior to the declaration of the catastrophic health emergency brought on by COVID-19, Maryland was facing a workforce crisis due to several factors. Maryland's 60+ population is anticipated to increase from 1.2 million to 1.7 million by 2030, a 40% increase. This demographic shift impacts Maryland's post-acute care settings in two ways. First, the increasing senior population increases the need for services, which then increases the need for direct care workers. According to the Maryland Regional Direct Services Collaboration, Maryland will need approximately 40% more direct care workers to meet this increased need for care. Second, the increasing senior population will have a negative effect on the availability of direct care workers given that the primary labor pool for direct care workers are women aged 25-64, whose demographic is growing at less than one percent. The COVID-19 pandemic exacerbated these issues and demonstrates the need for Maryland to commit to developing a robust direct care workforce.

Recognizing the need to be part of the solution, LifeSpan's education affiliate, the Beacon Institute, has been working since the summer with the Maryland Board of Nursing and the Maryland Higher Education Commission to develop an online training program for certified nursing assistants. LifeSpan is hopeful that the course will be approved and that it will give individuals flexibility to enroll in this training program, especially those that may have been displaced from other industries due to the COVID-19 pandemic.

Similarly, Senate Bill 307 will enable and encourage organizations to find innovative methods for increasing the number of direct care workers. We urge a favorable vote.

### SB0307\_FAV\_MNCHA.pdf Uploaded by: Kauffman, Danna Position: FAV



January 21, 2021

The Honorable Delores Kelley Chair Senate Finance Committee, 3 East Miller Senate Building Annapolis, MD 21401

RE: **SUPPORT** – Senate Bill 307 – Labor and Employment – Direct Care Workforce Innovation *Program* 

Dear Chair Kelley and Members of the Committee:

Thank you for allowing us to submit comments on this very important subject. The Maryland-National Capital Homecare Association (MNCHA) is a trade association representing Home Health, Home Care, and Durable Medical Equipment agencies across Maryland. These providers include those who deliver services to Medicaid recipients across the entire State. MNCHA is in strong support of Senate Bill 307, which establishes a Direct Care Innovation Program in the Department of Labor whose purpose is to provide matching grants to eligible entities to create and expand on successful recruitment and retention strategies that address the range of potential barriers to increasing the number of direct care workers.

MNCHA members rely on the care provided by personal care aides and certified nursing assistants. Because of Maryland's increasing senior population, there is a growing need for home care services, which then increases the demand for direct care workers. The COVID-19 pandemic has only strengthened the need to bolster Maryland's direct care workforce, especially given that many more individuals are seeking care in home environments rather than in other settings. While Senate Bill 307 is not a solution to Maryland's need to develop a more robust direct care workforce, it is an essential piece of legislation that is needed to build Maryland's workforce to begin to ensure that the needs of Marylanders can be met in the upcoming years.

We thank the sponsor, and we thank the Committee for its consideration of this important legislation.

Respectfully,

Dawn E. Seek Executive Director

MNCHA

## **SB 307 FAV.DD Coalition .pdf**Uploaded by: London, Rachel Position: FAV



### Senate Finance and Budget & Taxation Committees SB 307: Labor and Employment - Direct Care Workforce Innovation Program

Position: Support January 21, 2021

The Maryland Developmental Disabilities Coalition is comprised of five statewide organizations that are committed to improving the opportunities and outcomes for Marylanders with intellectual and developmental disabilities (IDD). One of the most significant challenges facing our community is the high vacancy rate and turnover of the direct support workforce that is the backbone of community inclusion for over 17,000 Marylanders—a crisis that has deepened over the course of the COVID-19 pandemic. While we do not yet have complete pandemic era numbers, prior to the pandemic:

- 1 in 3 direct support staff didn't stay in their jobs 6 months;
- over half of direct support staff did not last a full year (and the vast majority left voluntarily because of high stress, low-wage work-- they can make as much if not more working for retailers and other employers);
- half of all IDD providers had a direct support vacancy rate over 16%;
- 1 in 4 providers had a direct support vacancy rate over 24%.

As Medicaid providers, DDA-licensed community-based organizations are dependant upon the rates established and paid by the State to deliver community supports to people with IDD. While pay rates are an important factor in the IDD workforce crisis, we know that other recruitment and retention strategies can have a positive impact on the stability of the workforce. Grants that support training, curriculum, career ladders, accreditation and other innovative ideas that have proven to be effective for the IDD workforce would provide important resources needed to increase the quality and longevity of these vital professionals.

We believe the grants envisioned by SB 307 would help improve the quality of life for the thousands of Marylanders with IDD who rely on direct support professionals to make inclusive lives a reality.

Respectfully submitted.

For additional information, contact Lauren Kallins, LKallins@macsonline.org



8601 Robert Fulton Dr Suite 140 Columbia, MD 21046



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Maryland Developmental
Disabilities Council

217 E Redwood Street Suite 1300 Baltimore, MD 21202



7000 Tudsbury Road Windsor Mill, MD 21244

#### **3 - FIN - SB307 - Nursing - LOC - Direct Care Work**Uploaded by: Office of Governmental Affairs, Maryland Department of Health

Position: UNF



### Board of Nursing

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

January 21, 2021

The Honorable Delores G. Kelley Chair, Finance Committee 3 East Miller Office Building Annapolis, MD 21401-1991

RE: SB0307 – Labor and Employment – Direct Care Workforce Innovation Program – Letter of Concern

Dear Chair Kelley:

The Maryland Board of Nursing ("the Board") respectfully submits this letter of concern for SB0307 – Labor and Employment – Direct Care Workforce Innovation Program. This bill established the Direct Care Workforce Innovation Program in the Division of Workforce Development and Adult Learning within the Maryland Department of Labor. It requires the Division to provide grants to eligible entities to create and expand on successful recruitment and retention strategies that address certain barriers to increasing the population of direct care workers. It additionally requires the Governor to include a \$250,000 appropriation in the annual budget bill for the Program.

The current definition of "direct care workers" includes two disciplines that are currently unregulated in the state of Maryland (the personal aide and psychiatric aide). The Board is concerned that with the passing of this bill, the personal and psychiatric aide disciplines will be placed under their authority, as the Board currently oversees and enforces certification of nursing assistants (CNA) and geriatric nursing assistants (GNA). This would pose a significant operational and fiscal impact.

In addition, the term "eligible entity" does not account for a large number of entities that currently provide CNA/GNA/Home Health Aide (HHA) training, i.e., for-profit businesses. Excluding for-profit businesses may be problematic as it is unclear whether there are any non-profit entities, labor organizations, or organizations with shared labor management oversight that currently provide CNA/GNA/HHA training.

SB0307 does not address how the Program will account for existing laws and regulations governing the minimum requirements for approved CNA/GNA/HHA training programs. Limiting eligible entities would likely create inefficiency in the Program because these entities would need to develop a CNA/GNA/HHA training program and receive approval from both the Maryland Higher Education Commission (MHEC) and the Board before being able to receive a grant.

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For the reasons discussed above, the Board of Nursing respectfully submits this letter of concern to SB0307.

I hope this information is useful. For more information, please contact Iman Farid, Health Policy Analyst, at (410) 585 – 1536 (<a href="mailto:iman.farid@maryland.gov">iman.farid@maryland.gov</a>) or Rhonda Scott, Deputy Director, at (410) 585 – 1953 (<a href="mailto:rhonda.scott2@maryland.gov">rhonda.scott2@maryland.gov</a>).

Sincerely,

Gary N. Hicks Board President

The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.