

ADDRESSING THE HEALTH CARE WORKFORCE SHORTAGE

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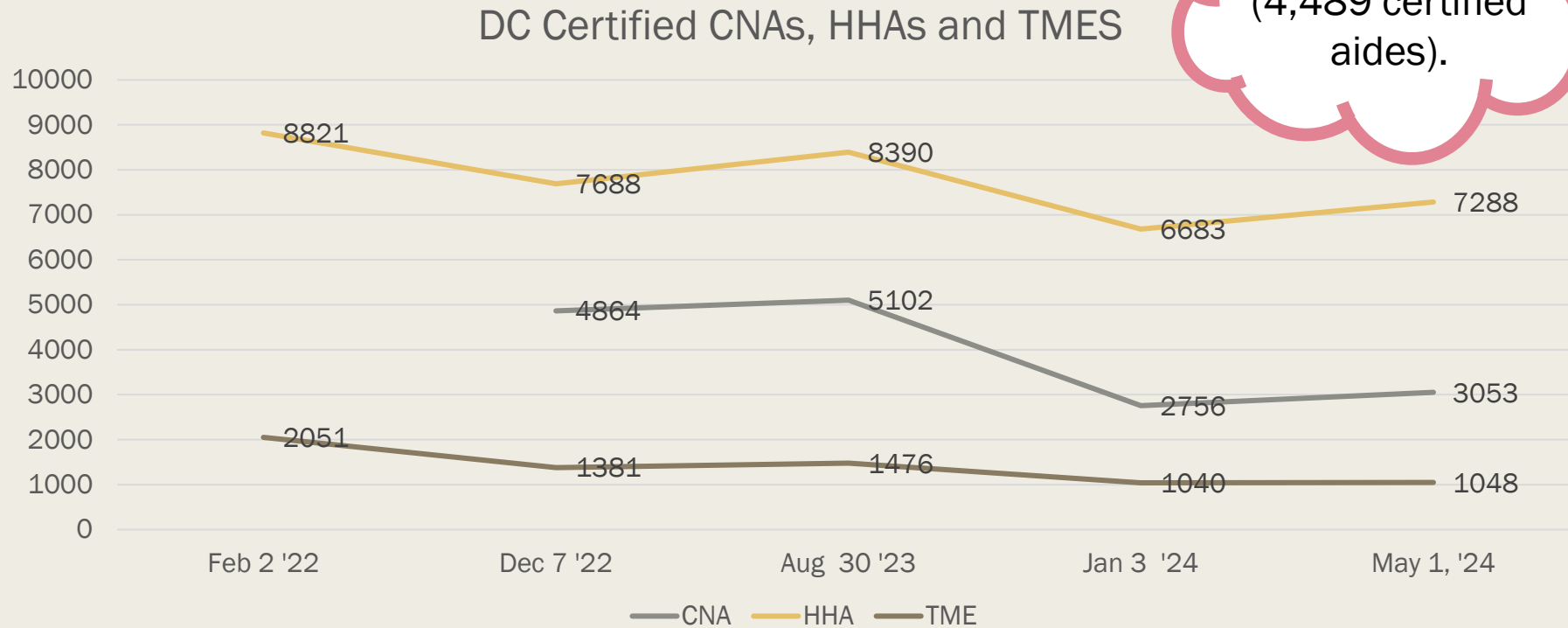
October 2024



DC Direct Care Workforce Shortage by the Numbers

Source: DC Board of Nursing

In Jan. 2024, DC lost 1/3 of the workforce (4,489 certified aides).



Why Is There A Direct Care Workforce Shortage?

- Low Pay compared to Other Local Entry Level Jobs
- Lack of Access to Training
- Insufficient Career Educational Pipeline
- These Jobs Are Undervalued And Too Often Are Not Considered A “Good Job”, Thereby Attracting Little Investment and Few Applicants
- Lack of Action By Our Governmental Leaders; Bureaucratic barriers
- Lack Of Awareness By The Public

What Can Be Done To Correct Our Healthcare Workforce Shortage?

- Raise Wages for all Direct Care Worker, regardless of Care Setting or Title.
- Create and Support Progressive Wage Scales, higher pay for experience and advanced training.
- Modernize Regulations and Eliminate Unnecessary, Burdensome Requirements that Discourage Workers from pursuing training and certification
- Increase Capacity to Train Workers and Eliminate All Costs For Direct Care Training and Credentialing
- Create A Universal Home Health Aides and CNA Credential Based On Competencies; reduce the age for certification from 18 to 16.
- Promote reciprocity: Allow CNAs, HHAS and Nurses from other jurisdictions to work in DC.

Successes and Works in Progress

- Nurse Education Enhancement Act (August 10, 2021) – Provided funding for residents to obtain CNA, HHA, MA-C and CNA to HHA Bridge or pursue or RN to BSN degree.
- High Need Healthcare Career Scholarship and Health Professional Loan Repayment Program of 2022 (Signed by Mayor, Jan 10, 2023)
- Direct Support Professional Payment Rate of 2022 – Raises the wages of all HCBS workers (inclusive of CNAs) to an average of 117.6% of the Living Wage.
- Health Occupations Revision General Amendment Act of 2023, Introduced October 2023, passed by Council in May 2024. **Reduces Age of Aides from 18 to 16.**
- DOH issues Final Rule August 16, 2024, allowing CNAs to work as Home Health Aides
- Revisions made to Parking Permit process for Aides.
- Direct Care Worker Amendment Act of 2023 - Introduced on Nov. 6, 2023. Renamed the **Certified Nurse Aide Amendment Act of 2024** and passed unanimously on October 1, 2024.
- **Nurse Licensure Compact** legislation introduced July 2023, under Council Review

Certified Nurse Aide Amendment Act of 2024

Originally Introduced as the Direct Care Worker Amendment Act of 2023, Nov. 6 2023

- Amends HORA to establish a new credential for certified nurse aides that combines the competencies of CNAs and HHAs.
- Authorized the Mayor to establish rules setting forth standards of education experience required to qualify as a CNA.
- Requires the Mayor, through rulemaking to establish a transition process to ensure that a person registered to certified as a CNA or HHA before the effective date of this section shall be authorized to practice as a CNA.
- Does not allow MD and VA HHAs and CNAs to work in DC with no additional process. Instead, a MD or VA nurse aide or equivalent can practice as a CNA by applying for an expedited temporary license with the BON. DOH is required to approve a completed application within five (5) days or notify the applicant that the application was denied and the necessary steps that the applicant must take for approval.

Changes, continued.

- Directs Board of Nursing to consult with a temporary, five-member Advisory Committee on Certified Nurse Aides and Nursing Assistive Personnel – a person with CNA or HHA experience, two reps of licensed providers, one training provider, and a DOH representative on the following:
 - *Education and competency-based standards for certification.*
 - *Barriers to development and support of on-the-job training and registered apprenticeship programs .*
- Amends the Direct Support Professional Payment Rate Act of 2020 to raise the requirement that DHCF reimburse HCBS providers to pay an average wage of 120% of the Living Wage or Min. Wage, whichever is higher.
- Using today's LW, **this represents an increase of \$0.42/hour or \$873.60/year** if aide works full-time.

Current LW = \$17.50

117.6% = \$20.58

120% = \$21.00

Next Steps

- Virtually all reforms enacted by Council require implementation by DC Health and the Board of Nursing.
- Wages – Increase is not funded but is still insufficient and does not include facility-based workers.
- Training Capacity – DC only has one approved school to train Home Health Aides (down from Seven). There appears to be no plan to address this loss of capacity.
- Testing Capacity – DC Health’s Testing Vendor is unable to timely schedule exams.
- While MD and VA CNAs can now work in DC as HHAs, the endorsement process remains a barrier.
- Nurse Licensure Compact – We are working to overcome DC’s Health objections to this Bill.

Nurse Licensure Compact – DC Health Objections

- Forty-two states are members the compact.
- A compact nurse licensed in his/her home state can work in any other Compact state without obtaining a license from that State.
- This means 40,000 nurses could be working her in DC and the BON would not have any information about them and could exercise no oversight.
- DOH would also lose the revenue from licensure fees.

Proposed Solution. - Enact legislation requiring employers to “register” compact nurses with the BON and pay a registration fee. However, no additional licensure would be required. Revenue would be held in a special purpose to fund the BON.

LTC Coalition is conducting a survey of providers to determine if this is feasible.

NURSE LICENSURE COMPACT SURVEY LINK:

- Below is a link to a very brief (3 minute) survey to help us understand support for joining the Nurse Licensure Compact to ease the Nursing Shortage in DC.
- Please share this link with other providers.
- Please respond no. later than October 20, 2024.

<https://www.surveymonkey.com/r/8LY8RKQ>

Thank you!

DISCUSSION AND QUESTIONS

FOR MORE INFORMATION

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