

SECTION 1009 REPORT

RECRUITMENT AND RETENTION CHALLENGES FOR THE WORKFORCE DELIVERING THE MOST FREQUENTLY USED SUPPORTS AND SERVICES

2016

I. Executive Summary

After months of discussion and review of available data, the Workgroup on the Direct Support Workforce (hereinafter called, “the Workgroup”) mandated by the Michigan Legislature¹ has concluded that the critically important frontline workforce delivering face-to-face supports and services to the state’s residents with intellectual and developmental disabilities, mental illness, or substance use disorders is not stable. Employers, including individuals using self-determination as well as organizational employers are not able to recruit or retain a qualified, competent workforce. In order to fulfill the service and support delivery requirements of both the state’s Mental Health Code and the Medicaid program and ensure the ability to comply with the Centers for Medicare and Medicaid Services Home and Community Based Services rules, additional state investments and new state policies and practices are needed to secure the dignity, well-being, independence and community involvement of people living with disabilities.

Within its diverse membership, the Workgroup reviewed relevant information and data on workforce recruitment and retention. This information included the large numbers of job vacancies across the state, the high staff turnover rates, the current inability to provide supportive services due to staff shortages, the closure of supportive service organizations and programs because of staff shortages, and reports from beneficiaries on the pain of losing relationships and trust when direct support staff move to a higher paying job. Medicaid beneficiaries speak openly of a high “quality of life”—to pursue employment, education, and inclusion—that is not possible without a stable, competent direct support workforce.

The needed workforce is not small and the jobs require complex skills and knowledge. The direct support workforce currently provides the majority of Medicaid funded behavioral health services and these services comprise a growing proportion of the overall Medicaid funded behavioral health services.

The Workgroup concludes that immediate actions are needed to address the current and worsening staffing challenges and that other state policy changes are needed in the long-term. The Workgroup’s unanimous recommendations are:

¹P.A. 84 of 2015, Article X, Section 1009

Immediate Actions Needed to Improve Wages and Benefits

The Michigan Legislature and Governor need to make additional investments into all the named Medicaid covered supports and services to assure that:

- Direct support staff earn a starting wage of at least \$2.00 per hour above the state's minimum wage. These investments and the starting wage rate should increase as the state's minimum wage increases and should include the mandatory employer costs (FICA, worker's compensation, etc.) associated with employment.
 1. Direct support staff earn paid leave time at the minimum rate of 1 hour for every 37 hours worked (i.e., 10 days a year for full-time employment).
- The Michigan Department of Health and Human Services (MDHHS) should use its contractual authority to set Medicaid payment and reimbursement rates that provide sufficient funding to provide and maintain a starting wage rate of at least \$2.00 per hour above the state's minimum wage, associated employer costs, and paid time off to the direct support workforce.
- The Michigan Department of Health and Human Services and each Prepaid Inpatient Health Plan (PIHP) shall collect and publish data on the size, compensation, and stability (turnover rates and job vacancies) of the direct support staff providing the identified supports and services at least annually. The collected data shall be used to assess the impact of the funded wage increases on the wages paid, direct support staff turnover rates, job vacancies, service delivery, and the adequacy of the direct support workforce.

Long Range Solutions to Improve Workforce Stability

- Develop and fund a promotional campaign to build public awareness and appreciation of people with disabilities and those who chose a career to support them. The campaign should build off the system's mission of inclusion and stigma elimination. MDHHS, the PIHPs, employers, direct support staff, and people with disabilities should participate in the creation and execution of the campaign.
- Expand the existing MDHHS funded matching services registry for Home Help beneficiaries to include all Medicaid beneficiaries using the self-determination option to address the difficulties (conducting criminal background checks, advertising, recruiting, etc.) individuals using self-determination have in finding direct support staff.
- Change Michigan's current laws and policies on criminal background checks to include a "rehabilitation review" similar to those authorized in 17 other states in order to increase the potential pool of applicants for direct support careers. Implementing a review process of applicants for direct support careers. Implementing a review process would allow people with a disqualifying criminal conviction to demonstrate that they no longer represent a threat to people needing supports and services or to their property.
- Provide publicly financed tuition reimbursement or incentives to direct support workers who are actively studying to become psychologists, behavior specialists, nurses, therapists and other health care occupations that serve people with intellectual and developmental disabilities, mental illness, and substance use disorders in order to increase the number of people interested in doing direct support work. This effort will also improve the frontline skills and broaden the experiences of other health care occupations serving these populations.

- Legislatively require the creation of a workgroup to identify the wide ranging initial competences, skills, and aptitudes needed by the direct support staff and to provide recommendations for a training and credentialing program to assure a competent direct support workforce.