

Testimony of Allison Cook

New York Policy Manager

PHI

Joint Legislative Hearing

Workforce Development Budget

January 24, 2018

Thank you for the opportunity to comment on the Executive Budget proposal. I am Allison Cook, New York Policy Manager at PHI, a national non-profit based in the Bronx. PHI works to transform eldercare and disability services by promoting quality direct-care jobs as the foundation for quality care. Over the past 25 years, PHI has established itself as the nation's leading expert on the direct care workforce through our research, policy analysis, and hands-on work with providers. We are affiliated with Cooperative Home Care Associates, a worker-owned home care agency, and Independence Care System (ICS), a Medicaid managed care plan.

Landscape

As you are well aware, the field of workforce development provides the supports needed for a worker to get and maintain a job. While there is always a need for training workers for new and emerging fields, workforce development supports are especially needed in home care, where home care aides are one of the fastest growing occupations. In 2014, there were over 325,000 home care aides in New York State, including home health aides and personal care aides. That is expected to grow by almost 125,000 by 2024 – a growth of 38 percent.

Further, this workforce is comprised of a population that benefits greatly from workforce development. Over 90 percent are female. Approximately 78 percent of home care workers are people of color. Fifty six percent have a high school diploma or less. And 67 percent of the workforce were not born in the U.S. In other words, these jobs are available to (and the workforce is largely comprised of) workers who have been historically marginalized and are especially in need of workforce development investments.

Finally, workforce development investments are especially important for this occupation because we are facing a workforce shortage in most areas of the state. As the demand for home care workers is increasing, the number of adults in the typical caregiving age — people between age 25 and 64 — will slightly decrease. This means that over the next few decades, as the young-old ratio shrinks, New York will have fewer workers to support a growing number of older adults. Investing in home care aide workforce development would help improve recruitment and retention of workers, and decrease the workforce shortage.

Comments

PHI applauds the executive budget's efforts to invest in workforce development, which is a valuable tool in continuing to improve New York's economy and ensuring that families are able to make ends meet. However, we need to ensure that workforce development funding is provided for one of the fastest growing occupations – home care aides – as well as for emerging occupations. This can be accomplished in three key ways: (1) connecting workforce development with health funding; (2) providing workforce supports that augment training; and (3) improving our workforce data system.

Connect Workforce Development with Health Funding

When looking at home care, workforce training funding comes from both the workforce development field and the health field – both of which have found it valuable to invest in this workforce. From a workforce development perspective, there is explosive growth in the home care aide profession and a workforce shortage, meaning many job openings for trainees. Further, there is a relatively low educational threshold for entry, with a minimum of 45 hours of training for personal care aides and 75 hours for home health aides. From a health perspective, investing in the workforce will help to lessen the shortage, and ensure New Yorkers have access to the care they need. Coordinating the efforts between these overlapping fields allows New York to better meet the needs of these workers, home care employers, and home care clients.

- **Recommendation 1: Establish a joint workgroup to coordinate state workforce development and health initiatives for the workforce.** Coordinating these two funding streams is more important than ever. As the Department of Health recognizes the need to invest in the home care workforce to ensure access to services, there has been an increased investment in workforce training. Further, the Department of Health is implementing a new initiative to also address social determinants of health, including being employed. As the lines blur between health and workforce development, it is important for experts in workforce development to have input in what investments are needed to successfully build and maintain a workforce. A joint workgroup would make the most of the expertise on both sides to address the needs of the workforce, as well as the needs of their employers.
- **Recommendation 2: Coordinate with the Committee on Health to include a budget provision requiring input from workforce development experts when establishing the design of the proposed rural home and community based services study and when determining whether rate enhancements are necessary.** The Health and Mental Hygiene Article VII Legislation proposes the creation of a study of home and community based services in rural parts of the state, which will determine whether rate increases are necessary. PHI believes this is an important study, and should be conducted throughout the state (not solely in rural areas), should include more than fee-for-service providers,

and needs greater investment to allow for the necessary rates increases. Most importantly, the study should include input from workforce development experts, both in the design of the study and the determination of whether rate increases are necessary.

Provide Workforce Supports That Augment Training

Despite the size and importance of the home care workforce, there are insufficient supports for workers looking to enter and stay in these jobs. Too often, we focus on workforce development as primarily entry-level training. Entry-level training is a key component of workforce development, but other aspects of workforce development (such as access to affordable childcare, connection to public benefits, and ongoing training) must also be included when investing in this workforce.

- **Recommendation 3: Include a budget provision that establishes a home care advocate. The home advocate would provide home care workers with support and education on a range of topics, such as educate workers on applicable wage and labor rules; connect workers to free and low-cost training and other workforce development programs; and connect workers to public benefits.** This advocate would be especially important in overcoming the challenges faced by workers who have, historically, been marginalized and make up a majority of the home care workforce.
- **Recommendation 4: Coordinate health and workforce development funding to establish the Home Care Jobs Innovation Fund, which would fund pilot projects that test job supports that impact worker recruitment and retention.** This fund would identify strategies in addition to training that attract and keep workers in the field, such as innovative methods for finding the right applicants, new hire orientation strategies, or novel worker investments (e.g., transportation fund, scholarship program, or retention bonuses). The findings of these pilot projects would help the state craft a comprehensive strategy to address the home care workforce shortage.

Improve Our Workforce Data System

The Governor has indicated he supports using state-of-the-art data analytics to “plan and map New York’s innovation economy.” This is a very important tool for determining where workforce development funding should go. However, we also need to plan and map high-demand occupations – including home care aides.

- **Recommendation 5: Establish a data system that tracks the supply and demand of home care workers, including workforce size, stability, and compensation.** Workforce volume measures provide an overview of the supply of workers, including the number of full-time and part-time workers and the distribution of workers across settings and programs. Workforce stability measures help to determine the volatility of the workforce and where significant numbers of new workers are needed, including turnover rates, retention rates, and vacancy rates. Worker compensation measures

illustrate whether direct care jobs are competitively attractive when compared to other occupations, including average hourly wages, annual income, and benefits such as health insurance and paid time-off. This workforce data system is especially achievable in the healthcare field, where providers are often required to submit extensive reporting to the state on a variety of measures, including the workforce.

Conclusion

Thank you for the opportunity to testify before you today. PHI looks forward to working with you, other members of the State Legislature, and the new Office of Workforce Development as we tackle the difficult challenges of building and retaining a quality home care workforce.



NEW YORK CARING MAJORITY
www.nycaringmajority.org

Testimony before the Joint Legislative Hearing **Workforce Development Budget**

Wednesday, January 24th 2018

Bryan O'Malley, Consumer Directed Personal Assistance Association of New York & the New York Caring Majority

Thank you for the opportunity to testify today on behalf of our membership. The **Consumer Directed Personal Assistance Association of New York State** supports consumer directed personal assistance providers and recipients in all counties of New York State, offering supportive services, including, but not limited to: advocacy, systems change, and the promotion of consumer control and self determination.

CDPAANYS is an independent association, the only such organization in New York State to exclusively represent fiscal intermediaries. CDPAANYS has worked closely with the New York State Department of Health to build CDPA since the very beginning, and has served as the sole organization fighting for many of the rights and freedoms enjoyed by consumers, personal assistants and fiscal intermediaries.

Without action from the legislature, this is a budget that will force more New Yorkers into nursing homes, even though home & community-based services are far more affordable for the state. Meanwhile, over 17,000 seniors languish on waiting lists for home care, case management, and other critical services, while New York's Medicaid population has too few hours authorized or provided, or people go without services altogether. Investment in the home care and direct care workforce is a vital next step for the state.

New York must not exclude home care from our workforce development agenda. It is the fastest growing occupational sector, and the one in which women (esp. women of color) are overrepresented. We urge the state to support a feminist workforce development agenda by investing in home care in 2018. We can begin by expanding the \$3 million rural workforce study so that it can actually go to wages once the study is completed. If we can expand the rural study, get real resources behind it, that would be a meaningful first step in preparing our state for the years ahead. The state has already allocated \$289 million to the developmental disabilities community, but the rest of the sector needs support as well. In this year's budget, we have an opportunity to fund a workforce study not just focused on rural areas and fee for service. The \$3 million designated for workers should go to workers, not to pay for the study itself. Let's create wage pass-through policies and requirements. In addition, all data



NEW YORK CARING MAJORITY
www.nycaringmajority.org

collection on the workforce should include measurement of workforce volume, stability, and compensation all across the state.

In addition, I echo Allison Cook's recommendation that the committee coordinate with the Committee on Health to include a budget provision requiring input from workforce development experts when establishing the design of the proposed rural home and community based services study and when determining whether rate enhancements are necessary. The Health and Mental Hygiene Article VII Legislation proposes the creation of a study of home and community based services in rural parts of the state, which will determine whether rate increases are necessary. This is an important study, and should be conducted throughout the state (not solely in rural areas), should include more than fee-for-service providers, and needs greater investment to allow for the necessary rates increases. Most importantly, the study should include input from the direct care workforce itself, both in the design of the study and the determination of whether rate increases are necessary. We look forward to partnering with you to create a task force that is truly representative of all the constituencies that make up the Caring Majority.

Home care and CDPA are driving local economies across New York. We are creating jobs in every corner of the state. However, poor wages reflect a lack of investment in this workforce, and the failure to look at these workers through an economic development lens represents a failure if New York to invest in the jobs that lower income New Yorkers, especially women of color, rely on - jobs that immediately invest back in local economies through food, rent, and other necessities. The rural workforce study is currently in the health budget, but this is why we urge the legislature to fund it through economic development.

I also urge the legislature to coordinate health and workforce development funding to establish the Home Care Jobs Innovation Fund, which would fund pilot projects that test job supports that impact worker recruitment and retention. This fund would identify strategies in addition to training that attract and keep workers in the field, such as innovative methods for finding the right applicants, new hire orientation strategies, or novel worker investments (e.g., transportation fund, scholarship program, or retention bonuses). The findings of these pilot projects would help the state craft a comprehensive strategy to address the home care workforce shortage. Now is the time for the state to step up and lead in this area. We look forward to working with you in the weeks and months ahead to invest in New York's vital home care workforce. Thank you.



NEW YORK CARING MAJORITY
www.nycaringmajority.org

Testimony before the Joint Legislative Hearing **Workforce Development Budget**

Wednesday, January 24th 2018

Karla Lawrence, National Domestic Workers Alliance & the New York Caring Majority

Good afternoon. My name is Karla Lawrence and I am a home care worker. I am a proud member of SEIU 1199 as well as the National Domestic Workers Alliance. I am here today testifying on behalf of the New York Caring Majority.

My organization is home to the growing care and cleaning workforce that goes to work in homes, supporting America's families. We are the leading voice for dignity and fairness for the millions of domestic workers in the United States, most of whom are women and people of color. We are powered by over 60 affiliate organizations--plus robust local chapters--of over 20,000 nannies, housekeepers, and caregivers in 36 cities and 17 states. We work with a broad range of groups and individuals to change how we value care, women, families, and our communities.

Our home care worker organizing builds the voice and leadership of one of the fastest growing workforces in the country. By providing crucial supports and services, home care workers ensure that seniors and people with disabilities can live independently in their own homes. Despite our important work, across the country, home care workers don't make enough to feed our own families; face high rates of injury on the job; and lack healthcare and paid leave. We believe that home care workers must be the leaders who redefine this work and make these jobs high-quality ones. We also respect and collaborate with the families and individuals who employ home care workers, and see our struggles as deeply connected. That's what brings me here today.

My story is typical of our members. I grew up in Jamaica, as one of 4 siblings. Like so many girls and young women, I grew up caring for my siblings and for the aging members of my family and community. That's simply what we did. I took care of my grandmother in Jamaica for several years, and I look back on our relationship with great love and pride. Even when others sometimes didn't understand her needs, she and I were always very close and I always felt tuned in to her needs for dignity and care. I also was a caregiver for my father in the final months of his life after he suffered a series of heart attacks. I'm proud that he was able to pass away peacefully and with dignity.

I immigrated to New York in 1991 when I was 16 years old. I finished high school, and when it came time to begin pursuing work, I chose home care. I remembered how it felt to care for my



NEW YORK CARING MAJORITY
www.nycaringmajority.org

beloved grandmother back home, and realized that I had a passion for this work. I signed up for a course and became a home attendant right out of high school. With each client that I took care of, my passion for caregiving grew. I love meeting people's needs. I love making my clients smile and laugh. I love making them feel loved and ensuring that they don't feel left out of society. What work could be more precious and valuable than that?

I worked for eight years as a home attendant before deciding that I was ready to take the next step in the career ladder. I went back for more training to become a CNA, enabling me to perform more caregiving duties than before. Today I'm proud to share that I continue to climb the career ladder and am going to back to school for nursing. I have a passion for learning and a passion for caring. Most home care workers do!

As many of you know, our state is facing a crisis-level shortage of home care workers. As a result, seniors face delayed discharge from hospitals or require costlier institutionalization rather than their preferred and often less-expensive services at home. An immediate investment to recruit and retain home care workers will save local tax-payers from paying a higher Medicaid bill. But without action from the state, both the Medicaid and non-Medicaid populations remain underserved. Regardless of a person's income, there simply isn't a large enough workforce made up of dedicated individuals like myself. Low-wages and challenging working conditions make it almost impossible to be a home care worker. Being a member of 1199 means I'm better off than most home care workers but we are still undervalued.

Having a home care worker like me can prevent unnecessary falls and hospitalizations, not to mention ensuring that seniors are eating well and taking their medication on time. Home care workers are vital in preventing these costly and unnecessary setbacks. I understand we're facing a big deficit here in New York, and that it might seem impossible to find additional money to pay for home care in this moment. But the long-term costs to the system are far greater. What better preventive care than home care? What better defensive team than home care workers?!

Over the years, most of my clients have received services through Medicaid, though some pay out of pocket or get EISEP. I've lost count of how many clients of mine were in need of more hours of care than were allotted. Some were receiving 4 hours but they should have been getting 6-8 hours. Some were approved for 12 hours but they really needed round the clock care. For those seniors who have family members around, the family steps in for those additional hours. But for the ones without family, they're in real trouble. They're at greater risk for falls when they get out of bed or need to go to the bathroom. Safety is a big issue. One fall could lead to a broken bone or an unnecessary trip to the hospital. One injury begets another, and the path to recovery becomes longer and more costly.



NEW YORK CARING MAJORITY
www.nycaringmajority.org

My clients have worked all their lives and contributed so much to society. Why, in their hour of need, would we not do whatever it takes to give them the best? This is America. This is New York. Let's do right by our elders and pass a budget in 2018 that we can be proud of. A more caring budget. An age-friendly budget that invests in the home care workforce.

We applaud Governor Cuomo's inclusion of workforce development as a priority for the 2018 budget. I urge the legislature to ensure that home care is included in our state's workforce development agenda. It's the fastest growing occupational sector, and the one in which women (especially women of color) are overrepresented. #TimesUp on a workforce development agenda that does not prioritize the needs of women workers and our families. I urge you to fund the Home Care Jobs Innovation Fund, which Allison will discuss further in her testimony.

Thank you for hearing my testimony here today. The New York Caring Majority looks forward to working with you in the weeks and months ahead to do right by the millions of New York seniors, family caregivers, people with disabilities, and home care workers. When we join forces, we are truly the Caring Majority.



NEW YORK CARING MAJORITY
www.nycaringmajority.org

Testimony before the Joint Legislative Hearing **Workforce Development Budget**

Wednesday, January 24th 2018

Sylvia Vogelman, Jews for Racial & Economic Justice & the New York Caring Majority

Good afternoon. My name is Sylvia Vogelman. I am a senior & a member of Jews for Racial & Economic Justice. I'm honored to join Karla, Byran, & Allison in testifying today on behalf of the New York Caring Majority.

Seven years ago, I broke my right ankle and needed emergency surgery. I was unable to put any pressure on the ankle for 6 weeks. Being single I had no one to care for me and help me with my daily activities. Friends would bring me meals but I needed help for everything else including bathing. I was not on Medicare or Medicaid and had to hire help privately.

Getting adequate help was not easy and it was expensive. The first person I hired was terrific but she became injured and could not return. I then went through an agency but that also was difficult as I was all the way out on the North Fork in the town of Orient where there is a severe home care workforce shortage. Home care workers would have to drive a long distance and they weren't compensated for either time or gas money. That second worker lasted two weeks until she got a job closer to home and left me. The system of not paying workers for travel time and gas is unfair and if addressed would serve communities where there is a shortage. As an employer, I want to do the right thing and pay a living wage of \$15 dollars an hour, but as I age I worry that I can't afford it and will risk losing the right to age in my home with dignity.

I was delighted to hear that the state is prioritizing workforce development in this year's budget, but appalled to learn that home care is not included! I urge the Legislature to correct this wrong by funding the Home Care Workforce Innovation Fund, which Allison will discuss in her testimony.

Thank you for the opportunity to share my story with you today. I believe that everyone should have the right to healthcare, home care, a living wage, the ability to age in place with dignity. On behalf of the Caring Majority, I applaud your efforts to protect workers and transform New York into a more caring place to live.