



Testimony of Allison Cook

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PHI

Joint Legislative Hearing

Workforce Development Budget

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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.