



## **Call to Care NH: The Direct Care Workforce in the Time of COVID**

July 15, 2020 | 10:00 – 11:30 am | Webinar

### **Question and Answer**

**Question:** Do agencies have a way to quantify the cost they have absorbed in terms of additional supplies, staffing, etc., during the past few months in response to COVID? How can relief funds be directed to the organizations as they have been to healthcare systems?

**Nancy Rollins:** Easter Seals works with OSHA and has been able to estimate what we need for staff by prioritizing where they are and what they are doing. Relative to PPE - the N95 mask, a gown, gloves, hand sanitizer; we have been able to establish how long these things are good for, but that varies depending on both the use and type of resource we are talking about. It almost has become a science relative to figuring this all out and at Easter Seals we have been blessed by getting several grants and funding to allow us to be able to procure materials. Our staff here have been incredible in terms of almost pounding the streets to make sure we have the sufficient PPE for our staff. There are still shortages, we recognize that, but we are doing our best to ensure that the staff and clients are safe.

**Amy Moore:** I echo what Nancy said. Ascentria has a number of programs in New England and I have been in charge of PPE for New Hampshire. There are things that I did not know at the beginning, such as getting hand sanitizer from local distilleries. Early on we started entering a code into our system so we can code shifts and hours that are affected or lost because of Covid, whether it is on the client side or the caregiver side. We also coded our expenses for PPE. We have gone after several grants. Our staff is incredible about getting around – we'll say: "there is work here in this part of the state for this two-hour chunk" or "I have stuff for you here and there" and they just go. As far as supplies, as Nancy said, I think we are in this for the long haul. If you look at what is happening nationally, we are trying to make sure we are set up for the next wave.

**Question:** As a member of the direct care workforce, how much is PPE on your mind both initially and then looking into the future? Do you worry about having what you need to stay healthy?

**Heather Grow:** I did [worry] at the beginning, there were not any extra resources to give out and I used my own gloves. I told clients "this is as many gloves as I have, and this is how many more times I can come and hopefully I will get some in the meantime". I had friends and parents making masks and I'm good on that

front, I know we have some supplies at the main office that I can access and get more whenever I need it.

**Question:** What are the incentives and disincentives for the direct care workforce to be paid directly as self-employed caregivers? Do you see much competition with people wanting to move away from the agency and move into self-employment?

**Amy Moore:** I can speak to that and we see this on and off. We have had people leave to do something privately and then they come back. We talk about it, and for me it comes down to them protecting themselves as far as workers compensation and benefits. This work is incredibly challenging and doing it on our own pose's certain risks, compared to if you are associated with an agency you can have some protection, training, and support.

**Nancy Rollins:** I think that is a tough decision. When you look at poverty, specifically how the brain operates for those who are in poverty, you are in a fight or flight mode. If you know a good percentage of this workforce lives in poverty, they are just in survival mode. That is the tricky part. I feel like there is a good percentage of the workforce that is put in that tough position to make those decisions.

**Question:** What do we need and how can we get more data and information on the situation for the direct care workers, such that we can advocate moving forward? Do you see holes in the data that is needed?

**Amy Moore:** Nancy probably has a lot on this but look at the workforce – it is 86% female. We have a workforce that are traditional caregivers, whether it is paid or not, women tend to wear many hats. Given the current times, parents are having to make tough decisions about whether kids go back to school or not which will greatly affect and has affected our workforce.

**Nancy Rollins:** I think collectively organizations have good data relative to what is going on in terms of turnover, retention, hiring, and so forth. We need to find a way to collectively pull that together. At the national level, several organizations and groups are looking at this and we need to up the ante relative to that. We need a big goal like creating a campaign around how we raise the level of value that is then equated to wages. I'm talking about value in general for the work that is critically needed to support people in their homes. I know a number of national organizations, including Easter Seals affiliates in the country that are coming together to strike that public policy campaign. The other thing we need is to recognize that people are going to want a different way of doing business than we did it ten years ago. We started to talk about this with Bill Thomas around alternatives to nursing homes. We must pull this stuff up. For example, the Greenhouse project – which indicated people wanted to live in small community settings, no surprise there. We will need to be creative and look at how we do that and not just for certain people of an economic background, but for everyone.

In addition, we must review how do we really get waivers and other things to give a wage that allows for true person-centered care.

**Question:** With the demand increasing are you all utilizing existing staff and paying overtime now?

**Nancy Rollins:** Easter Seals is utilizing existing staff, including reassigning staff from areas that are underutilized or closed during COVID, such as our adult day. We also would not purposely increase workload without having sufficient staff. It does not serve clients, or the staff well, especially if staff are working 70-80 hours a week. An organization has an obligation to balance client need with staff workload and budget.

**Question:** How should senior care be provided in the future?

**Nancy Rollins:** It needs to be more holistically person-centered, flexibly funded and engage clients more creatively beyond meeting their activities of daily living.

### **More Questions? Contact our Presenters!**

**Heather Grow**, Personal Care Service Provider, Ascentria Care Alliance,  
[joyofcreations@gmail.com](mailto:joyofcreations@gmail.com)

**Amy Moore**, Program Director, Ascentria Care Alliance, [AMoore@ascentria.org](mailto:AMoore@ascentria.org)

**Nancy Rollins**, Chief Operating Officer, Easter Seals, [nrollins@eastersealsnh.org](mailto:nrollins@eastersealsnh.org)