



Answering the Call to Care: Creating Quality Jobs for Direct Care Workers in NH

August 5, 2020 | 10:00 – 11:30 am | Webinar

Question and Answer

Question: How is the Community College System supporting pathways to the BSDH and MSDH programs that are part of the NH credentialing of direct care/direct access dental hygienists?

Susan Huard: Thank you for the question and we have a strong interest in this area. There are no opportunities within our state to get a Bachelor's or Master's Degree in dental hygiene. Our program is well subscribed and well supported, and we have a continuing interest in providing or connecting people with a Bachelor's degree. I do not have an update for you, but I want to assure you it is near the top of our list of to-do items. Thank you for bringing it back up.

Question: How is the DirectConnect Program work connected to the New Hampshire Needs Caregiving Initiative and the Sector Partnership efforts?

Jennifer Rabalais: This may be broader than just DirectConnect and maybe Susan can comment on the Sector Partnership more. My understanding of the New Hampshire Needs Caregivers program is that it is a recruitment tool for LNAs and emphasizes a career pathway within nursing homes. It is not unlike the model, or a piece of the model, used underneath DirectConnect in that it creates a pipeline between training opportunities and employment opportunities. So, the connection is, in my mind, similarity in establishing a pipeline. Susan, do you want to talk a little bit about the New Hampshire Sector Partnership?

Susan Huard: The Sector Partnership Initiative covers the state in various areas and is morphing into regional programs that are connected in the area of healthcare. There is a very active group in the Monadnock region and an up and coming group in the Concord area. After the presentation this morning, I can see that there should be a strong connection between our work and UNH's work as we both have a shared interest in training for direct care workers. There needs to be a level of consistency to the training. The direct care workers suffer from not having a license and certification requirement. I put "suffer" in quotes because it is a big fact, not a suggestion.

Question: For background checks (on the state's licensure site), can there be a risk category instead of the flag/no flag to flag those LNA's that may need supervision?

Wendi Aultman: That is a good question. One of the ways in which I have experienced another layer of mitigating the risk of hiring someone, or if an agency has a concern about individual's receiving care, is through the state registry. In addition to something being flagged, it will present in a criminal background check and is reported through the Elderly and Adult Services, Adult Protection Agency. If it is a founded report, take for example financial exploitation, it likely will be on the state registry. This is an additional check agencies need to have when hiring staff. Within the licensure rules when agencies have a flag that comes up on a background check, there is a process for asking for a waiver. There are a lot of waiver requests. Some flexibilities are already in place within some of the policies and rules. In terms of the flagging for risk that is not something in my area that we would be able to direct change on. It is certainly something that the healthcare workgroup can stress in how to additionally create ways to help with the risk of individuals who are flagged.

Question: Given that we are in a current pandemic and the emotional toll on direct care workers is huge, how are we thinking about supporting workers?

Wendi Aultman: Through many of the partnerships we have with agencies who hire direct care workers, and internally at DHHS, there are tools and resources that help in talking with workers directly about their stressors. Employee assistance programs are there to help and we meet with folks all the time. We also have hotlines, peer mentoring, and mental health counseling resources for employees to directly address their concerns. Something else to consider is that many agencies are experiencing the loss of people they care for and are working directly with families who are dealing with that loss as well.

Laura Davie: This question connects to the DirectConnect program, specifically training for leaders and supervisors on how best to support employees. As Susan discussed earlier, trying to do the work while not making a livable wage and the added stressors of the pandemic make it hard to be in the position of direct care worker. At the previous webinar we hosted a direct support professional who discussed that because of the shortage workers are not able to provide emotional support for clients, which was difficult for her as she enjoyed this aspect of the work. I think this is something that we must continue to put out there and make resources available for both the supervisors and workers.

Question: What plans are underway for medical dental integration in home healthcare and long-term care? Are there policies that create parity along license providers and dental hygienists?

Laura Davie: These panelists do not have expertise in this area but if the querier has resources please put them in the chat box.

Question: With direct care professionals working long hours and possibly having children and a family, it seems hard for workers to train off-site. Is there training available on-site?

Heather Carroll: When you look at the structure of a strong workforce they must be trained for whatever they may encounter. It is tough because there is a lot of extra training right now, not only because of the pandemic, but the general gravity and depth of human beings. Training is that extra piece of building the tool chest that goes with direct care workers to deliver care whether that is in a facility or in the community. Unfortunately, in a time where we are in a pandemic and we are limiting the time we can be together, training has hit a pause button.. I am not saying that training is not important and in fact certain kinds of training such as properly using PPE, or how to communicate while wearing a mask must be delivered right now and on the go. Some agencies and organizations are trying to deliver this information online and to get workers resources. We must be ready for returning to a training-based model where people who advance their skills advance their career. This idea of equal opportunity - where if I invest my time, in return I can confidently walk into a situation and handle it.

More Questions? Contact our Presenters!

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