**Commission on the Status of Persons with Disabilities**

**Workforce Supports Subcommittee**

**Meeting Minutes**

Date of meeting: Thursday, May 11, 2023

Start time: 10am to 11am

Location: Virtual Meeting (Zoom)

|  |  |
| --- | --- |
| **Members Participating Remotely** | |
| 1 | Angela Ortiz (Chair) – Director of Operations, Partners for Youth with Disabilities |
| 2 | Chris White – CEO & President, Road to Responsibility, Inc. |
| 3 | Andrew Levrault – Deputy General Counsel, Disabled Persons Protection Commission |
| 4 | Representative Kay Khan – Massachusetts House of Representatives |
| **Members Not Present** | |
|  |  |

|  |  |  |
| --- | --- | --- |
| **Action Items** | | **Person Responsible** |
| 1 | Thanking our panelists | Angela |
| 2 | Following up on data request | Imene |

**Welcome, Roll Calls, and Introductions**

* Members and panelists welcomed each other.
* Panelists introduced themselves:
* Maura Sullivan, Senior Director of Government Affairs and Health Policy, Arc of MA
* Jake Krilovich, Executive Director, Home Care Alliance of MA
* Bill Henning, Executive Director, Boston Center for Independent Living (personal care attendant program and what independent living centers are experiencing)

**Takeaways from panelists on the Workforce Crisis**

Bill Henning opened the conversation with the following remarks:

* There are approximately 45,000 people using Personal Care Assistants (PCAs) in MA. There are 60,000 PCAs from pediatric to elder services. It’s an expanded program. It is as a crisis point because of the shortage of PCAs.
* Unfilled shifts. MassHealth will state that the number of people receiving payment through MassHealth for PCAs has not fluctuated radically.
* It is a buyer’s market for jobs. There is a high turnover happening.
* People requiring less support are also feeling the lack of PCAs.
* 1199 SEIU is in contract negotiations bringing the minimum wage to start at25/hr and add retirement benefits.
* Pronounced concern in the community of adhering to the medical model by adding a certification program.
* The Boston Foundation released a significant report on the devaluing of home care workers: the devaluing of the BIPOC communities, immigrants, people from the Caribbean, Haitian American, women, etc. Huge workforce of immigrant women who we need to value them.
* There’s a devalue of people receiving the services as well: people with disabilities, older people, relegate people off to nursing homes (by supporting the system), segregates and devalues people.
* Massacre COVID happened in nursing facilities: huge breeders. Alternative is smaller model facilities, homes where people will thrive.
* Opportunities for an economic boom for the state too when we increase wages, supports people with disabilities and seniors.
* Focus on what the PCA program is doing. There is an intersectionality of race, ethnicity, poverty, ageism, ableism.
* At BCIL, there is a challenge filling vacancies coupled with a consistent turn over. We also have managerial staff doing interviews and reference checks instead of providing direct, Independent Living services to people.

Maura shared the following remarks:

* She shared a personal anecdote, having a son with an intellectual and developmental disability (IDD) who hasn’t had weekend PCA services in 3 and a half years with spotty coverage during the week. She’s grateful to have a flexible job where she can be home. But this is a clear example of a systemic failure.
* Most underserved persons are over 3,000 for adults with IDD including autism, and those with complex needs.
* It’s an oppression of those individuals: clinical regression, at home without access to day program, huge strain on family caregivers, economic effects.
* Health strain on individuals.
* Increased boarding, no clinicians to take care of these folks with these specialized needs.
* The Arc is focusing on individuals who haven’t been able to get services and supports.
* Clear bias: how we value people with disabilities, compounded by the pandemic, it was a real awakening.
* People with disabilities are deprioritized for care, lack of response.
* The Arc seeing 27-40% vacancy rate. There are thousands who aren’t being served and those turning 22, 1,400 individual needs. If you’re turning 22, chances are you won’t receive services.
* It’s more than the rate, but we need modify the rate as a foundational step.
* Short term and long-term fixes would be to include parents/caregivers who have been doing this caregivers unpaid as PCAs.
* Better housing and opportunities for immigrant workers.
* Some workers must work three jobs to maintain a living wage. A living wage for a person with no kids is $21/hr.
* Issues with temporary staffing which has a detrimental effect on individuals: people with disabilities take time to bond with new staff.
* That PCA role continues to be undervalued. How do we get the importance of that role? All of our Arc chapters have poured substantial amount of money on marketing and campaigns, Public Service Announcements.
* While we have these individuals not being served, what can the Department of Developmental Services (DDS) and MassHealth do now to serve them other than bringing them back to day program? We saw some in the budget for 1:1 support.

Jake shared the following remarks:

* Pay is everything.
* For home health/home care staffing ebbs and flows.
* In the past we saw some shortages but right now it is across the board.
* Over 90% of our member agencies have vacancies in the agencies. It’s multifaceted.
* There’s a shrinking aid workforce: restaurant and retails offer more competitive rates. The State should set rates to be uniform.
* Nursing and aid shortage- competing with facilities-based opportunities: compete on pay, bonus nursing opportunities.
* There is a bias in nursing school curriculum: how are we training our students, students and high schoolers to different opportunities.
* Missed sense of respect- treating them, valuing them, giving them opportunities, career opportunities for aids versus nurse, how are we training and upscaling our aids? Our workforce 90% women and foreign born.
* Angela asked about the American Rescue Plan Act (ARPA) funding: home health had to submit what they’ll do with the extra funding? What have you shared with EOHSS for short/long term strategies?
* Jake responded that the relief was immediate but temporary. The concern was to keep wages sustainable once increased. Some agencies took the leap and hoped enhancements would be permanent, other agencies offered as bonus in increments, other agencies offered incentive programs like childcare, it came down to the permanency aspect of it.
* What Home Care Alliance of MA shared with EOHHS is that providers didn’t know if these enhancements will stay in place. EOHHS are working on keeping these permanent.
  + Bill made a comment that he wasn’t trying to degrade nursing homes. The issues he has with nursing home is the general health decline for people, tax on caregivers, skin breakdown for being bed ridden, lung congestion, degrading of nutrition are the primary concerns.
  + Jake acquiesced and added that people should stay home as it continues to not only being the cheapest option but most importantly that it is where people want to be.
  + Bill added that it is a human rights issues both for the worker and the recipient of the work.
  + Rep Khan thanked the panelists for their work and advocacy. She shared legislation that she’s working on: **H.191 An Act relative to a livable wage for human service workers** *Companion bill filed by Sen. Friedman, S.84.* This bill eliminates over time the existing pay disparity between the salaries of human service workers employed by community-based human service providers and state employees holding similar job titles who perform similar work. Due to this salary disparity, it is increasingly difficult for community-based organizations to recruit and retain qualified workers in the sector which has more than 156,000 jobs. Without such a solution, many jobs will continue to be unfilled leading to deterioration in the quality of services delivered to Massachusetts’ most vulnerable residents.
  + Rep Khan asked if PCAs get certification? She believes it raises stature of workers, that it is something that shows that they’re prepared and raise level of wanting to be an aid.
  + Bill answered yes there is training for PCAs and that the union looking at formal conference.
  + Maura thanked Rep Khan. She believes in paying people equitably. 92% of providers are struggling to meet to achieve their quality standards and it leads to people leaving because they don’t feel trained.
  + Angela shared about legislative and budget subcommittee and all thanked panelists for contributing to this important conversation.

**Scheduling**

* + Next meeting:
  + June 8, 2023 10-11
  + July 13, 2023 10-11
  + September 7, 2023 10-11
  + November 9, 2023 10-11

**Adjournment**