

Commission on the Status of Persons with Disabilities Workforce Supports Subcommittee Meeting Minutes

Date of meeting: Thursday, June 8, 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	Representative Kay Khan – Massachusetts House of Representatives
Members Not Present	
4	Andrew Levrault – Deputy General Counsel, Disabled Persons Protection Commission

Action Items	Person Responsible	
1	Thanking our panelists	Angela
2	Follow up with Dr. Watt on presenting her capstone and Rebecca Gutman on data sharing	Angela and Imene

Welcome, Roll Calls, and Introductions

- Members and panelists welcomed each other.
- Panelists introduced themselves:
 - Dr. Fatima Watt, Chief Executive Officer at Pappas Rehab Hospital for Children under the Department of Public Health
 - Rebecca Gutman, Vice President of Home Care 1199SEIU United Healthcare Workers East
 - Elizabeth Sharon, Personal care Assistant (PCA)
 - Dan Greaney, PCA Consumer Employer

Takeaways from panelists on the Workforce Crisis

Scope of the Problem

- Current number/percentage of vacancies?
Rebecca:
 - Silver tsunami- baby boomers are aging; more people are in need of care whether consumer direct car or home car agency.

- Demographics or caregivers are also getting older, perfect storm of more people needing care and people providing the care are also aging.
- This was a need that was anticipated.
- Bargaining conversation- struggling to fill in the capacity.
- Consumer directed program- highest needs consumers are struggling to find people.
- Consumer employer hours are going unused not because they aren't needed, but because they cannot find someone.
- People have been dying because they couldn't find PCAs to help them with their daily lives, crisis is here, and deaths are happening.
- PCAs through collective bargaining have gained paid time off. Over 16,000 PCAs with access to paid time off aren't taking it because they can't find someone to replace them. Even with benefits, we need to raise the wages higher and address other issues.
- Surveyed the membership: 1. Wages, 2. Tie wages to training, 3. PCAs want additional formal training (dignity and racial justice issue access to education), 4. Retirement benefits.

Dan:

- Been in the PCA Consumer program for the last 45 years. I had 8 different PCAs working for me to help me complete my tasks. Very difficult time finding staff, they are currently working over 55 hours a week.
- Issues he's hearing from provider he works for: hard time finding nurses or LPN. Community nurses are helping folks in the community as PCAs, most consumers with complex needs have untrained PCAs. Once they are trained, they tend to leave the PCA programs for less stressful jobs. People are leaving for same or better wage.
- Issue with the lack of a pay structure: someone with no experience would get the same amount of pay than a seasoned employee.
- Lack of health insurance, retirement plan, robust benefits -> loss of people, high turnover.

Elizabeth:

- Issues that Dan addressed are being addressed with our 1199SEIU bargaining committee.
- Majority of PCA workers are BIPOC women, their incomes are supported by programs that have a limited number of ours before found ineligible for state and federal benefits such as MassHealth for example.
- These women want to work but they have their own families they must take care of.
- State needs to realize what's necessary and address socio-economic injustice.

Collective Impact

Rebecca:

- We represent home care agencies, PCAs, and CMAs. In our union, all these stakeholders are talking with each other.
- Having systemic conversations with employers, legislators, and administration.

- Advocating to increase home care agency rates, 75% should go to direct care workers.
- Are we getting enough government funding?
- Is that funding going to people who are mostly impacted, the direct care workers.

Dan:

- All too familiar with folks not being able to receive care, increase infections leading to deaths.
- People are trying months to find people to work for them.
- MassHealth for high end users, only count for night as activity time. “If I’m waking up someone every hour, they should get paid an hourly rate”.
- Nightly hours going unfilled lead to hospitalizations. If needs aren’t met, it can lead to strokes or heart attacks.
- High end users compete with folks who need little to moderate support and assistance.

Short-Term Strategies

Fatima:

- Although we work with pediatric age patients, we have patients older than 26 because there are no next steps to send them to.
- Needs are complex, multiple disabilities.
- Not in the business of institutionalize children or young adults.
- For those who need a medical group or that level of care, there is no staff. It’s been difficult with group homes closing.
- Families are not able to provide the level of care that patients need. Some patients don’t have families, have DCF involvement.
- Believe in “nothing about us without us”. Patients want to live independently.
- Lack of appropriate group home peer models.
- As CEO, 87% of my job is staffing. Need of nurses, physicians, and respiratory therapists.
- Currently relying on agency staff.
- Even with real estate and building programs, we don’t have staff to run the programs.
- Stakeholders are working hard in isolation. We should be combining our strengths to better provide help and meet needs, i.e., share resources with or without congregate care.
- During covid, temporary models helped, how can we use them for the long term?
- Opportunities to build capacity within our own systems.
- Start recruiting very early, before college. In middle and high school. Most people don’t want to enter healthcare low wage for hard work. We are low staff that we are missing the joy in the work, that’s not good care either.

Comments and questions from Commissioners:

- Rep Khan shared that her background is in psychiatric nursing.
- She has legislation (H.191 An Act relative to a livable wage for human service workers. Companion bill filed by Sen. Friedman, S.84)
- She represents the city of Newton, where one of her constituents, Gerard, was a strong incredible advocate.
- Has congregate been looked at with sharing personnel? How can we be creative with the shrinking workforce?

- Dan shared that small groups share PCAs/workforce, may be great for some folks but not all.
- He shared that before there was a PCA program, he was institutionalized in Waltham, it was singled out and the institution would share workers. “As much as we were cared for, there is no place like home”.
- Chris empathized with Dan and thanked him for sharing his story.
- Chris asked Rebecca how many unused PCA hours are there?
- Rebecca shared they are analyzing those numbers now. They are doing an analysis of how much paid time off has been unused: numbers of hours that have been authorized versus number of hours that have been utilized.
- Angela shared that home and community, self-determination choice, where and how people want to receive care is critical. As a model and organization, we need to look at folks with lived experiences leading the conversations.

Adjournment

Next Meetings

- Next meeting:
- July 13, 2023 10-11
- September 7, 2023 10-11
- November 9, 2023 10-11