



The Future of Maine's Care Workforce Planning Summit

Culminating Report

Overview

On Tuesday, June 18, 2024, members of Maine's Essential Care & Support Workforce Partnership (The Partnership) and other stakeholders met at the Harraseeket Inn in Freeport to address the growing crisis in the essential care workforce. This summit, "The Future of Maine's Care Workforce Planning Summit," was informed by years of outreach, coalition building, research, and advocacy by a diverse array of actors and organizations that resulted in:

- the formation of the 2019 [Commission to Study Long Term Care Workforce Issues](#)
- increasing worker compensation by setting a 125% of minimum wage floor for the labor portion of direct care worker reimbursement rates, and by securing an additional \$126 M in Federal matching funds to provide one-time sign-on bonuses for direct care and support workers¹
- improving training options and simplifying credentialing
- the establishment of the [Direct Care & Support Professional Advisory Council](#)
- the creation of the [Essential Support Workforce Advisory Committee](#) by the Legislature, the Governor and state agencies to advise on the State's shortage of direct care and support workers
- the creation of [Maine's Essential Care & Support Workforce Partnership](#) which engages in advocacy, research & coalition building to increase access to direct care by properly valuing those delivering it.

In spite of these efforts and the resulting policy changes, the care gap continues to grow. This crisis requires significantly more be done to ensure people get the care they need and are entitled to receive.

Summit participants came together to learn from each other and to generate a collection of potential action steps that have the best likelihood to address this crisis.

¹ Direct care and support is provided by workers and family members in a variety of settings. Certified nursing assistants (CNAs), direct support professionals (DSPs), personal support specialists (PSSs), independent support specialists (ISSs), behavioral health professionals (BHPs) and home health aides work across a spectrum of care, from day services and home meal delivery, to hospice and home care, to shared living arrangements, small group homes, private non-medical institutions and nursing facilities. They support people with a wide range of daily living activities including eating, dressing, bathing, grocery shopping, and taking medication. Broadly speaking, these workers are defined in statute as "essential support workers."

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During the morning presentations, participants heard from the following experts in higher education, health care, economic policy, long term support services, state and municipal government, and the business community:

- Sharon Deschenes, Professional Support Specialist
- Justin Dyer, DSP/CRMA/MHRT & Direct Care and Support Professional Advisory Council Member
- Jess Maurer, Executive Director, Maine Council on Aging
- Amanda Rector, Maine State Economist
- Garrett Martin, Executive Director, Maine Center for Economic Policy
- Shanna Cox, President & CEO, Lewiston Auburn Metropolitan Chamber of Commerce
- David Daigler, President, Maine Community College System
- Kate Dufour, Director of Advocacy and Communications, Maine Municipal Association
- Dr. Rebecca Spear, Program Director, Geriatric Medicine Fellowship
- Laura Cordes, Executive Director at the Maine Association of Community Service Providers

Together, these individuals provided reflections on the value of this critical work and the workers who do it, estimates of the current and future needs gap, population changes contributing to the workforce shortages, and potential solutions to bring more people into the care economy.

The presentations also included the Partnership's second grant-funded report from Maine Center for Economic Policy (MECEP), "[Closing the Gap: Maine's Direct Care Shortage and Solutions to Fix It](#)," a report which estimates the scale of the care gap and makes recommendations for how to have sufficient staffing to meet Maine people's direct care needs.

In the afternoon, people worked in small groups to answer the question, "Where do we go from here?" Two sets of small-group conversations were held in which participants brainstormed solutions, prioritized solutions, and identified action steps for the highest priority solution. Time was short, so the ideas and actions below are top level.

The Partnership's Leadership Team has thoroughly reviewed the presentations, flip charts, table notes, and the post summit evaluations. The Leadership Team also convened to discuss how to transform all this input into a clear and actionable plan. The next step in the process will further refine the actions needed to begin implementing some of the proposed solutions.

Top Recommendations

The following recommendations represent the most commonly cited priorities from the day.

Improving Benefits & Compensation for Workers

This category along with the "Training, Credentialing & Recruiting" category includes the most cited number of recommendations. These various recommendations seek to increase wages and benefits that attract workers to the field and promote longevity.

- Pursue innovations that improve benefits for direct care and support workers such as:
 - a state-subsidy for workers to purchase insurance on the state's marketplace
 - establish a statewide coalition to manage benefits for smaller employers
 - higher education benefits for workers and their immediate family members as proposed in the 131st legislature in LD 1718
 - give workers access to the Maine Public Employee Retirement System
 - allow for flexibility in funding so that benefits can be customized to worker needs and preferences
 - survey frontline workers about which benefits are most valuable to ensure employers are informed about what will optimize recruitment and retention
 - fund pilot projects to test which interventions increase recruiting and retention
- Promote programs and opportunities that reduce the cost of housing and transportation
 - change legislation and section rules to allow for payment to direct care & support workers who live with care recipients
 - promote the use of "Nesterly" and the creation of more Accessory Dwelling Units to reduce the housing crisis
 - reduce transportation barriers by partnering with entities such as GoMaine, Working Cars for Working Families, municipalities, and independent transportation providers
 - increase the mileage reimbursement
- Reduce burnout and turnover through targeted benefits
 - prioritize benefits that increase with time served such as retirement and sabbaticals
 - employee assistance programs (EAPs)
 - respite care

- Increase compensation
 - raise reimbursement for the labor portion of direct care in all settings to at least 140% of the state minimum wage
 - ensure workforce investments are focused on improving long-term retention and include passthrough policies and clear guidelines to optimize worker benefit
 - establish permanent funding for sign-on bonuses and offer longevity bonuses
 - change the pay structure based on experience & longevity
 - require regular review of compensation, not through a rate study, but by market analysis of the labor market and how much should be paid based on how many workers we need in the field

Training, Credentialing & Recruiting

This category, along with the “Improving Benefits and Wages” category includes the most cited number of recommendations. These various recommendations seek to improve the supporting infrastructure; access to early, free or affordable, and ongoing opportunities; and the quality of available options.

- Reducing Barriers to Credentialing & Training by:
 - studying Wisconsin's and Michigan's programs that have been able to create free universal worker training and credentialing systems that provide workers portable and stackable credentials and encourage Maine to follow these models;
 - providing free and paid training opportunities such as internships, apprenticeships, on the job training
 - encouraging the Department of Licensing to align licensing across populations and expand supports for all populations
 - working with the Commissioner to ensure Office of Behavioral Health (OBH) and Office of Aging & Disability Services (OADS) collaborate on one universal credentialing system so that workers starting with one population can easily move to serving another or workers can serve multiple populations at one time facilitating worker sharing by region
 - expand tuition reimbursements to four-year colleges
- Improving the training infrastructure and quality of instruction by:
 - funding innovations through pilot and evaluation grants
 - centering direct care and support workers by engaging with the [Direct Care & Support Advisory Council](#)
 - ensuring access to ongoing in-house or easily accessible training, mentorship, and enhanced supervision

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- standardizing orientation and mentorship
- increasing leadership development opportunities
- Exposing youth to the workforce opportunities by:
 - collaborating with high schools, vocational & technical schools, and higher education - Career Technical Education (CTE)
 - creating internships, job shadowing, apprenticeship programs
 - creating a liaison position within state government to identify and support agencies who can work directly with educational institutions
- Decrease Turn-over
 - Create functional job videos that show people what they will see and do and that reflect best practice training for recruiting

Increasing the Size and Diversity of the Workforce

This category was the next most cited and overlaps with the category above; however the focus was on recruiting and training diverse populations - mainly New Americans.

- Create DEIB Learning Committees, convened by related associations, in order to share ideas and promote peer learning
- Support Federal Legislation that reduces the time Asylum Seekers must wait before working
- Attract New Americans to the profession by working with the Maine Office Of New Americans to provide:
 - training and supports in primary language
 - peer support
 - in-house English language proficiency education
- Decrease the gender disparities by engaging higher education to design a hub for gender-related health issues and build supports for men interested in non-traditional careers
- Provide benefits for family caregivers - cash and/or other benefits similar to VA
- Broaden the pool of people who can provide care such as massage therapists, nail techs, etc

Advocacy

Collecting data, disseminating information, telling stories, and shifting the narrative about the economic and intrinsic value of direct care work was also high on participants' list of priorities.

- Collect data that is currently not available:
 - engage stakeholders in the data design

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- survey annually to measure job vacancies, turnover rates, and working conditions
- provide funding to the Maine Health Data Organization to regularly measure the direct care gap for all payers and forecast workforce needs across all populations
- collect data that shows what the full cost to the State would be if all authorized services were actually utilized and use this number to inform future budget needs
 - Reallocate money remaining in the fund to trigger an internal care cascade (re: 23,000 hours)
- track and report health outcomes of people on waitlists or who are receiving only a fraction of their approved care
- Public Education Efforts:
 - show how the work is valuable and rewarding - regardless of career ladder by showcasing professionals in the field/ story telling
 - enhance state efforts to build public awareness of Community Models of Care
 - create strong messages that educate the public about the crisis and raise awareness of the work needed
- Legislative and Administrative Education Efforts
 - build support for prioritizing the funding of this workforce by engaging candidate this fall in a conversation
 - elevate direct care access and workforce issues in Maine's economic development priorities
 - call on the state to build awareness of the cost of the workforce gap on the broader health care system, including by consulting annually with hospitals, statewide health care providers, and long-term care consumer advocates
- Monitoring and Oversight
 - Expand membership of the Essential Support Workforce Advisory Committee and make the committee a permanent oversight body with authority to hold agencies to account

Other Critical Recommendations

Many more topics and recommendations surfaced and were shared; and while they do not fit into the above categories, they are equally as important.

- Restructuring the ways we fund the system
 - explore establishing a universal, public, and fully-integrated long-term supports and services insurance program that integrates financing, coordination and delivery of services

- review financing for opportunities to maximize federal investments in this workforce
- make family care portable by establishing Care Vouchers
- Using Technology to Bridge Workforce Gaps
 - Generate a position paper with agreed upon standards to expand use of and access to technologies that will enhance, empower, and reduce staffing needs that meets the following criteria:
 - Promotes equity across funding sources and sectors
 - Prevents State from de-incentivizing providers who find ways to be more efficient through the use of technology
 - Expands virtual support such as telehealth and “Just in Time” care
 - Supports the spread of access to broadband
 - Increase the use of assisted technologies and remote monitoring by
 - assessing current usage and effectiveness (Maine Health Care Assn)
 - making the case for funding
 - identifying partners and leaders to promote specific recommendations (MCOA Partnership)
 - Improve systems for matching caregivers with individuals needing care on a regional basis

Next Steps & Timeline

We will convene a set of working groups who will work over the next few months to pour through the materials and make recommendations to the Partnership's Advisory Council. These recommendations will prioritize strategies and activities that will inform our work together.

In our first meeting, the Leadership Team decided that a series of issue briefs from the Maine Center for Economic Policy with messaging support from Lynn Davey of Davey Strategies, in lieu of the planned third economic impact report, will best serve our needs. These issue briefs will be designed to support education initiatives that rise to the top out of the Partnership's work over the next few months.

August: Build the organization & structure needed to support working groups and the Advisory Council; finalize working group charters, memberships and co-chairs; expand outreach into the communities that are so far under represented in our Partnership.

September: Advisory Council Meeting (9/9/24 @ 3PM) & the launch of working groups; continue outreach and supporting the working groups

October & November: continue outreach and supporting the working groups; promote messaging that will build public support for our efforts

December: Final reports and recommendations from working groups; Advisory Council Meeting to finalize action plan; meet cloture deadlines if new legislation is to be introduced; continue outreach and supporting the working groups; promote messaging that will build public support for our efforts

January-June 2025: Implementation and evaluation period; groups may continue to meet to operationalize and guide further action.

Conclusion

The June 18th Summit highlighted the breadth of the continuing crisis and generated a myriad of suggested action steps needed to grow this workforce to meet Maine's current and future demands.

Coming out of the Summit, there is good energy to continue the progress made in previous years and we have commitments from over 30 participants to join working groups to dig in on next steps. We look forward to working with all of you to build a solid road map to advance this work over the next twelve months.