WASHINGTON ELDERCARE WORKFORCE ASSESSMENT

BY THE NUMBERS

- 16 in-depth interviews with key informants involved in the Washington eldercare workforce.

- More than 50 eldercare workforce-related websites reviewed for applicable information and data.

- More than 20 meetings with, and presentations to, the University Network for Collaborative Governance, William D. Ruckelshaus Center Advisory Board, and national-level grant makers.

- Five Project Updates/Summaries/eNews articles published and disseminated in print and electronic format including the Ruckelshaus Center's 2,500+ mailing list and website, which received more than 38,000 page views during the project period.

- Two peer-reviewed extension fact sheets spotlight key findings.

2016 ISSUE

Like the rest of the nation, Washington is aging. By 2030, we will move from one in seven residents age 65+ to one in five. Additionally, the rate of growth will quicken, from a 3-percentage-point rise over the last 15 years, to a 7-point rise over the next 15. That means nearly 700,000 more elders than today, more than the entire population of Seattle. This “age wave” began in 2011, when Baby Boomers first reached age 65. As this population continues to age beyond 65 years, the health care services it wants and needs will change. Just as children’s health care needs transform as they grow, adults’ needs change as they move into their older years.

At the national and state level, health and social service providers are concerned they will not be able to accommodate the surge in demand by older adults and the changes in their health care needs. This evolution in demand for what often is referred to as eldercare services arrives in Washington concurrently with a swell in demand for all kinds of health services brought on by the Affordable Care Act. The confluence of these two new sources of health care demands presents Washington with an opportunity to apply thoughtful, collaborative planning to identify, understand, and address health care workforce issues, especially for the eldercare workforce. Washington’s research universities can play a unique and valuable role in that process.

RESPONSE

In Autumn 2012, the William D. Ruckelshaus Center received a grant from the WSU Extension Internal Grant Program to conduct a baseline assessment of the eldercare workforce in Washington. The center partnered with the UW Health Policy Center; 2 graduate students, at WSU (School of Economic Sciences) and UW (Department of Communication), contributed to the research. The study was designed to:

- Discover, assess, and aggregate generally available information and data about the types of providers comprising the eldercare workforce in Washington; demand for the workforce and gaps in supply; and current policy approaches to address gaps.

- Assess stakeholder interest in developing and participating in a statewide collaborative process to address eldercare workforce gaps.

- Participate in and advise the Elder Health Care Work Group within the University Network for Collaborative Governance (UNCG), which is exploring ways to build state and national consensus on eldercare workforce issues.

- Disseminate findings of the study to key stakeholders.

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QUOTES

“There already is a well-developed peer group for senior services in the long-term care world. But there isn’t a place where the two sides of the workforce equation meet.”

“We need bold leadership to address all the needs with long-term care. We need to see government and state leadership addressing these issues.”

“Is there value in starting a collaborative group addressing eldercare workforce issues? Yes, especially if the university acts as a convener and integrates other groups, groups that maybe focus on workforce issues, but don’t yet focus on long-term care workforce issues.”

PARTNERSHIPS

A unique partnership created through the Ruckelshaus Center between WSU Extension and the UW School of Public Health.

Expanded collaboration with the UNCG Elder Health Care Work Group.

Pending partnerships on future phases with WSU, NC State University Cooperative Extension, and Seattle University School of Law.

IMPACTS

Based on its research, the project team developed a series of tables that outline and describe the eldercare workforce within three categories:

- Individual Eldercare Providers – those who provide health care services, such as physicians, nurses, and oral health care professionals, and those who provide hands-on personal-care services, who are referred to as direct-care workers.

- Employers of the Eldercare Workforce – bricks-and-mortar establishments, such as adult family homes and hospitals; professional employment agencies, such as home health care agencies; and service programs, such as adult day-health programs.

- Public Agencies Directly Involved with Eldercare Provision – state and local agencies that implement public programs and employ case managers, health home coordinators, and others.

These tables can be used by stakeholders and policy makers to guide strategic planning for eldercare workforce capacity. For example, there are several gaps in the eldercare workforce now that, without changes in training, compensation, retention, and career advancement, will persist in the face of increasing demand. These gaps can be measured by type of provider, as well as by other criteria, such as geographic distribution, cultural and ethnic representation, and availability of care coordination.

The project team’s interviews with key informants statewide paved the way for the Ruckelshaus Center and its partners to engage with stakeholders to support creating opportunities to collaborate on eldercare workforce issues. The next phase of the project would convene stakeholders for listen-and-learn sessions that reveal and examine areas of conflict and consensus. These sessions also would help key players identify specific workforce issues and policies on which they could collaborate. In a first step, the project team has been invited by the Washington Workforce Training & Education Coordinating Board to identify potential areas of collaboration with the Health Care Personnel Shortage Task Force, to bring eldercare workforce issues to the table.

Project findings were published in 2015 in two WSU Research and Extension fact sheets, Washington State’s Eldercare Workforce and Aging in Place: A Policy Approach for Aging Well in Washington State. The baseline study also informed a formal assessment, completed in 2015, of opportunities for the Ruckelshaus Center to further involve WSU and UW in health policy collaborations.