Washington Eldercare Workforce Assessment
Impact Report

ISSUE

Like the rest of the nation, Washington State is aging. By 2030, we will move from one in seven residents age 65+ to one in five. And the rate of growth will quicken, from a three percentage point rise over the last 15 years to a seven point rise over the next. That will mean 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 very large population continues to age beyond 65 years, the health care services it wants and needs will change. Just as children's health care needs change as they grow into teens, adults' needs change as they move into their older years.

At both the national and state levels, health and social service providers are concerned that they will not be able to accommodate the surge in demand by older adults and the changes in their health care needs. This rise in demand for what is often referred to as *eldercare* services arrives in Washington State concurrently with a swell in demand for all kinds of health services from the thousands of new health insurance enrollees brought on by the Affordable Care Act. The confluence of these two new sources of health care demand presents Washington State with an opportunity to apply thoughtful and collaborative planning to identify, understand, and address health care workforce issues, especially *eldercare* workforce issues. Washington's research universities can play a unique and valuable role in that process. (254)

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 State. The Center partnered with the UW Health Policy Center on the study. Two graduate students, one at WSU (School of Economic Sciences) and one at 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 State; 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. (161)

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.

The eldercare workforce tables can be used by stakeholders and policy makers to guide strategic planning for eldercare workforce capacity. For example, the project team identified several current gaps in the eldercare workforce 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 outlined in the tables, as well as by 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 William D. Ruckelshaus Center and its partners to engage with a wide range of stakeholders to support finding and creating opportunities to collaborate on eldercare workforce issues. The next phase of the project would convene stakeholders around the state for listen-and-learn sessions that reveal and examine areas of conflict and consensus. These sessions also would help these key players to identify specific workforce issues and policies on which they could collaborate. In a first step toward the next project phase, the project team received an invitation from 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.

These and other project findings will be described and published in Autumn 2014 in two WSU Extension Fact Sheets. Through the fact sheets, the project team will offer a look at Washington State's age wave through the lens of health care provider supply and the issues that influence older adults' ability to access that supply, such as payment, environmental supports or constraints, care coordination, and financial planning. The findings of this baseline study are also informing a formal assessment, due in Fall 2014, of opportunities for the Ruckelshaus Center to further involve WSU and UW in health care policy collaborations. (420)

BY THE NUMBERS

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

- ~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 Web site, which

received over 38,000 page views during the project period.

- Two Extension fact sheets under development spotlighting key findings.

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. Given the numbers, the care systems in place are not sustainable.

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.
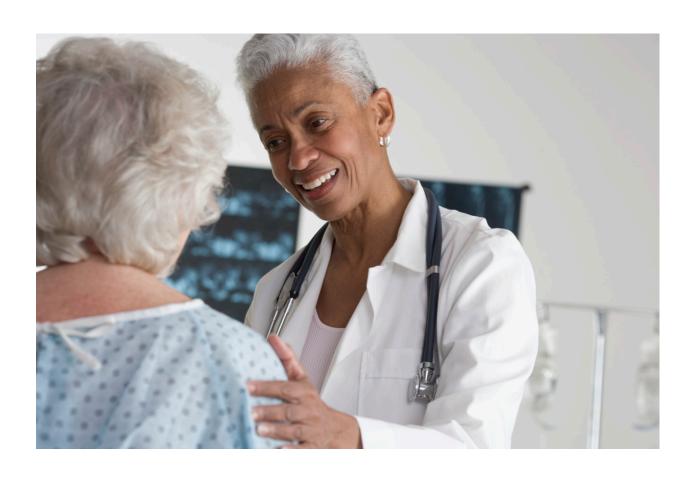

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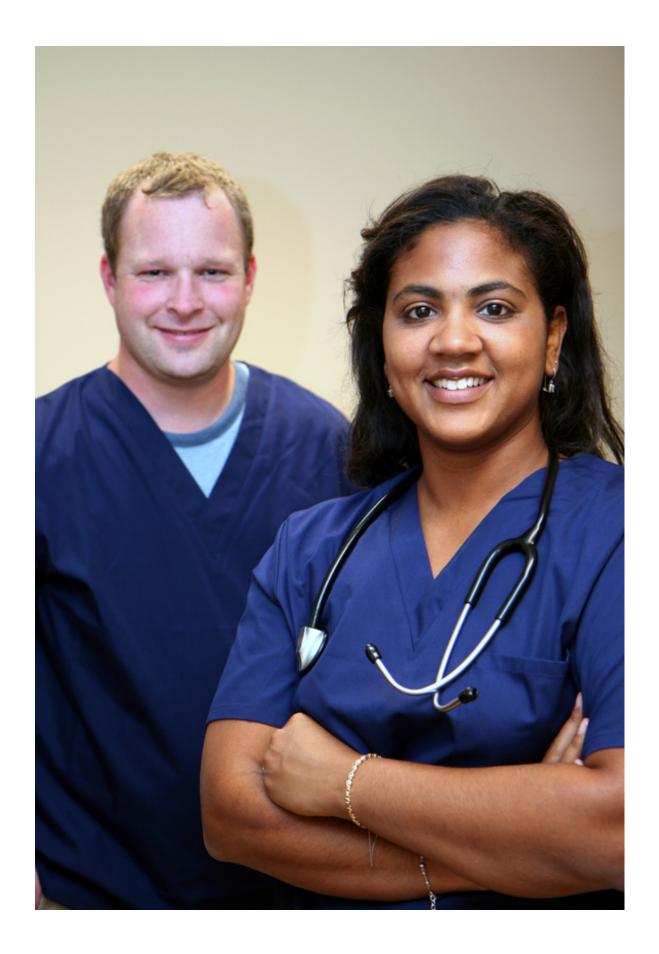
PARTNERSHIPS

- This project initiated a unique partnership through the Ruckelshaus Center between WSU Extension and the UW Health Policy Center in the School of Public Health.

- The project team partnered with the UNCG Elder Health Care Work Group to develop national and state-level opportunities for collaboration to address eldercare workforce issues.

- Professionals from Washington and other states have expressed interest in helping with future phases of this work, including faculty at WSU School of Economic Sciences, NC State University Cooperative Extension, and Seattle University School of Law.
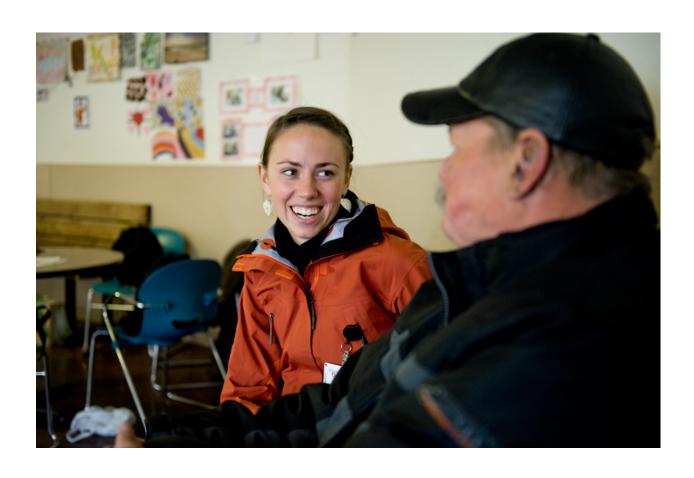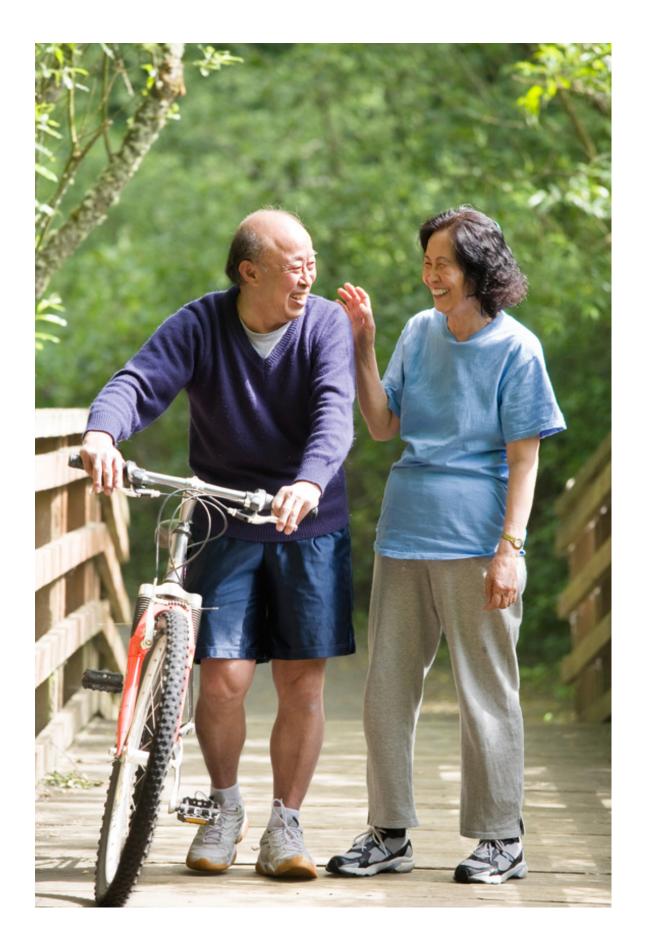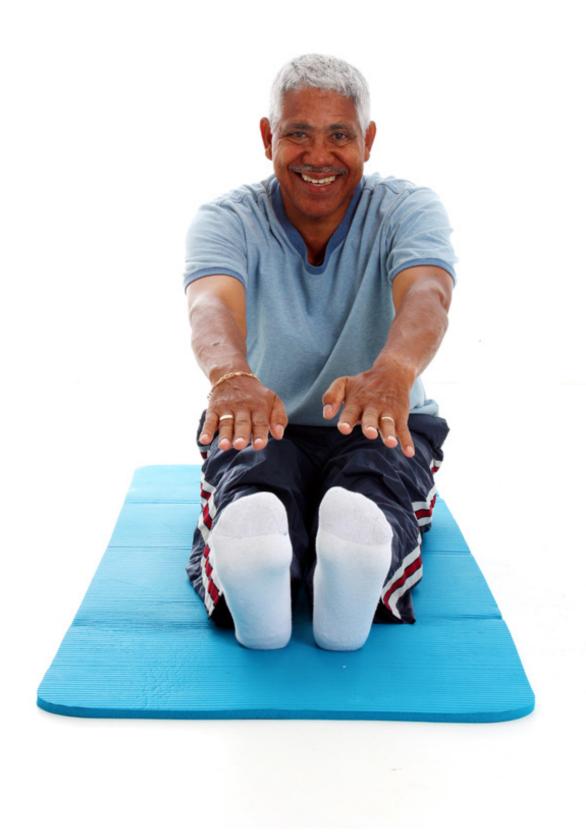
POTENTIAL PHOTOS

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