

# Iowa's Action Gap on Direct Care Workforce Issues: Too Much Conversation and Not Enough Action

IOWA CareGivers



**Over 15 years ago**, a conversation began in Iowa about the direct care workforce and the care and support they provide to aging Iowans and Iowans of all ages with a disability. The conversation began based on the awareness that while Iowa had a growing demand for long term care services, there may not be enough paid direct caregivers to meet that demand.

## Problems Identified — Solutions Unaddressed

That conversation led to meetings, surveys, committees, councils, task forces, commissions, pilot projects, and summits — and numerous reports all yielding similar recommendations for action. The problems have been identified but the solutions unaddressed.

Consider the following non-exhaustive list of activities and entities from 1998 to the present that discussed the direct care workforce:

**1998-2000:** The Certified Nurse Aide Recruitment and Retention Project

**2002:** Governor Vilsack's Task Force on Nursing Shortages

**2002-2006:** The Center for Healthcare Workforce Planning

**2004-2007:** The Better Jobs Better Care Project

**2005-2008:** Senior Living Coordinating Unit Long Term Care Planning

**2006:** The AARP Iowa Survey on Direct Care Workforce Issues

**2006-2013:** The Direct Care Workforce Task Force/Advisory Council

**2007:** The Health and Long Term Care Workforce Summit

**2007 & 2011:** Alzheimer's Disease Task Forces

**2008-2009:** Money Follows the Person Project

**2010:** Thomson Reuters State Profile on Long Term Care

**2011-2013:** Personal and Home Care Aide State Training Grant

**2011-2013:** Health and Long Term Care Access Advisory Council

**2011-2013:** Sexual Abuse and Violence in Care Facilities Legislative Committees

**2012-2013:** Elder Abuse Task Force

**2012-2013:** Disability Redesign and Mental Health Workforce Committees

**2013:** State Innovation Model for Health and Long Term Care Project



## Who's Been Involved?

The efforts have involved a broad cross-section of Iowans, including multiple agencies of state government, state legislators, community colleges and state universities, advocates for seniors and people with disabilities, employers, consumers and family members, and those who work in the field of direct care.

## The Common Theme in all These Efforts?

The common theme has been that Iowa has pressing direct care workforce issues that need to be addressed. The theme has been discussed in the context of a:

**CARE GAP:** Need for Iowa to fill 20,000 additional direct care positions by 2020 to meet the demand for care and services

**EDUCATION GAP:** Need for better educated workers possessing more knowledge and skills to ensure quality care and services

**OPPORTUNITY GAP:** Need for career advancement opportunities within the direct care profession

**COMPENSATION GAP:** Need for better wages and benefits for those in the workforce

**VALUE GAP:** Need to value the workforce as more than "low-skilled entry level jobs" or as undervalued "women's work."

## Closing the Action Gap – Via Serious, Significant, and Sustained Investment in the Solutions

We've had all these well-intended efforts and all this conversation. As a state, we have been willing to invest in all the task forces, committees, and reports to define the problem but have not been willing to make a serious, significant and sustained investment in the solutions identified.

After 15 years of conversation, we still have the same fundamental workforce and quality of care challenges. The challenges are getting bigger, and the implications more concerning. Failing to address them means that we and our loved ones face a future of delayed care and services, less care and services, and less quality care and services. *These are results no one wants!*

## Our Challenge to Iowa

If we genuinely care: Let's get serious. Let's act and put our focus on a serious, significant and sustained investment in the solutions that have been published by the Iowa CareGivers and others.

Let's work collectively to build the direct care workforce of the future; one that Iowans will want to enter and make a career of due to the respect that it is given, the compensation and career options it provides, the education it offers, and the many opportunities that exist to make a real difference in the lives of the Iowans being served.



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