ISSUE: Direct Care Workforce Central Data Base System



A reoccurring theme of the 2015 – 2016 Direct Care Workforce 2020 Regional Listening Sessions is the need for a central data base to ensure direct care workers (DCWs), employers, and consumers have access to a DCW central data base that provides information related to a DCW's verified education and training records, credentials or certifications, and experience.

Direct care workers recognize the importance of maintaining a portfolio in a secure place where documentation of their training, credentials or certifications, experience, community service, etc. is located. This will become even more important as there is increased portability of training and credentials across all settings.

Employers and consumers would benefit from having access to the documentation during recruitment, selection and continuing throughout employment of the DCW whether as an agency employee or consumer directed/private.

Background:

The Iowa Better Jobs Better Care (BJBC) Program (2004 – 2007)

One of the BJBC objectives was to expand the lowa Nurse Aide Registry. It was recognized that DCW education standards and the systems that govern them are fragmented, inconsistent, inadequate, and outdated. With funding (\$125,000) from the BJBC program to the Department of Inspections and Appeals, major technological changes were made to expand the lowa Nurse Aide Registry, creating fields that would track education/training/certifications of direct care workers and changing the name to the lowa Direct Care Worker Registry. With the expansion, the Registry would have accommodated all DCW job classifications; however, with the end of the grant, the Expanded DCW Registry was never brought to scale.

lowa Direct Care Worker Advisory Council Final Report – March 2012

The 2012 final report included a summary of work and resources invested into the development of a Direct Care Information Management System. The system would have provided the Iowa Department of Public Health (IDPH) with a sophisticated way of tracking the workforce and allowing individuals to apply for and maintain credentials online. At the time of application, DCW would have provided demographic and other information to assist Iowa in tracking and making projections for the workforce.

One of the recommended components of the system was a **comprehensive workforce data collection and tracking system**, and an interface allowing employers and members of the public to look up information about the qualifications and credentials of DCW. DCW would have received recognition for the training they received, and could demonstrate competency and qualifications to potential employers and consumers. A recent progress report indicates these recommendations remain an issue with ongoing discussion.

Personal and Home Care Aide State Training (PHCAST) Grant (2010 – 2013)

Based on recommendations from the Direct Care Workforce Advisory Council and with the opportunity provided by the PHCAST grant, IDPH developed a direct care workforce portal within AMANDA, a professional licensure computer system. Using both state funding and a portion of the federal PHCAST grant, IDPH invested \$400,000 for the direct care workforce portal component of the AMANDA system for tracking DCW training and certification. Due to several issues including the lack of funding and the end of the PHCAST grant, the AMANDA portal/the direct care workforce portal within this system was not finished.

Impact if Issue is Not Addressed:

Most tracking of DCW training and credentials or certifications would remain with the employer – usually in paper format – and not readily available to the DCW or consumers and would not be portable across settings.

Recommendations:

- A phased approach to development of the robust DCW data base needed to ensure continuous assessment of the direct care workforce, analyze data, and make data-based decisions regarding assuring all lowans have access to high quality care and support through a stable health and long-term services and support (LTSS) workforce.
- The lowa Department of Public Health (IDPH) should have oversight in developing and implementing a comprehensive DCW Data System. This system should be developed in a phased-in approach in collaboration with multiple stakeholders and utilizing interagency agreements with other state agencies; i.e. Department of Inspections and Appeals, Iowa Workforce Development, Department of Education.
- Re-visit the earlier work efforts in the development of a DCW Data Collection and Tracking System (2012), finishing the AMANDA/DCW Portal, and working with DIA to facilitate uploading of CNA information from Head Master resulting in an Expanded DCW Registry. Building upon work and resources already invested would reduce the amount of investment necessary now.
- It will be essential to have both the public and private sector represented in developing this system to reach consensus on any additional data needed, ensure the platform is developed in such a manner as to accommodate additional purposes for future phases, and assist in identifying funding to support the DCW central data base/data system.

Desired Outcome:

- Foundation for collecting and analyzing additional DCW data needed to better understand the direct care workforce, needs, emerging trends.
- DCW ownership of achievements; i.e. training, credentials or certifications, experience, other. Resume builder. Portability of trainings/certifications across all settings,
- Facilitate maintaining a skilled DCW to meet employer demands; i.e. changes to training/curriculums to accommodate changes in delivery of LTSS
- Quality assurance, consumer protection/resource

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