



Improving Continuing Education Opportunities for Iowa's Direct Care Workforce

This issue brief has been developed by the Iowa CareGivers Association (ICA) and the Iowa Better Jobs Better Care Coalition (BJBC). The issue brief is designed to inform policymakers about several important issues relating to Iowa's direct care workforce in an effort to encourage well-informed policies.

Introduction

The direct care workforce provides a variety of services to Iowa consumers and families. Services can range from chore services (cleaning and outdoor maintenance) within an individual's home to checking vitals such as blood pressure within an acute hospital setting. Most people are familiar with Certified Nurse Aides (CNAs), which is only one of many types of direct care workers. Direct care workers, in this case, are defined as individuals who provide long term care and health care services, supervision, and emotional support to people with illnesses and disabilities in various settings (e.g., hospital, nursing home, home care). This definition does not include nurses, case managers or social workers.

This issue brief examines several Federal and state regulations that impact the direct care workforce's ability to access quality and relevant training and education and proposes some potential solutions to improve training and education standards and opportunities for Iowa's direct care workforce.

Federal and State Regulations

Federally, the Centers for Medicare and Medicaid Services (CMS) regulate certain types of direct care workers based on work setting and funding stream. At the state level, the Iowa Department of Inspections and Appeals (DIA), Iowa Department of Public Health (DPH), Iowa Department of Human Services (DHS), and the Iowa Department of Elder Affairs (DEA) are responsible for carrying out the Federal regulations and providing oversight to different types of direct care workers. Below is a list of Federal and state code that impacts education and training requirements for the direct care workforce.

- Federal Code 484.36, Centers for Medicare and Medicaid Services
- P.L. 100-203 Nursing Home Reform Act, Omnibus Budget Reconciliation Act (OBRA)
- Iowa Administrative Code, Chapter 24, Iowa Department of Elder Affairs
- Iowa Administrative Code, Chapter 25, Iowa Department of Elder Affairs
- Iowa Administrative Code, Chapter 58, Iowa Department of Inspections and Appeals
- Iowa Administrative Code, Chapter 80, Iowa Department of Public Health
- Iowa Administrative Code, Chapter 81, Iowa Department of Human Services
- Iowa Administrative Code, Chapter 114, Iowa Department of Inspections and Appeals

Impact of Federal and State Regulations

There are Federal and state regulations that currently impact how direct care workers in Iowa access continuing education and training, and remain a viable part of the long term care and health care workforce. The first issue is impacted by Federal and state regulations, whereby there are no continuing education standards that are linked to a direct care worker's certification. Continuing education and training for direct care workers in Iowa is currently based on the job setting and funding stream and not the functions or services provided by the direct care worker. Similarly, there is no way to ensure that the continuing education and training provided is of high quality.

In most cases, it is the responsibility of employers (nursing homes, home care agencies, hospitals, etc.) to provide twelve hours of in-service annually. There are no specific standards related to the in-services and they often include information about Occupational Safety and Health Administration (OSHA) regulations, fire safety, and patient rights, which should already be included as part of employee orientation and annual review programs. Rather, clinically relevant topics should be a part of the direct care workforce's continuing education in order to improve the level of care given to Iowa's senior and disability population.

The second issue is a Federal regulation which requires that CNAs work and receive compensation for a certain period of time (eight hours in Iowa) every two years to maintain certification and remain active on the State's Direct Care Worker Registry. If they are deemed inactive, they are ineligible for employment and are required to re-take the 75-hour certification course or they can challenge the state test at a cost of \$120 to the direct care worker. Challenging the state test means that the direct care worker opts out of taking the 75-hour course and simply takes the state test.

Additionally, the eight-hour work requirement for CNAs is not an ideal way to prepare the workforce. Quality continuing education would provide for more meaningful professional development as compared to simply working for eight hours every two years. Moreover, since continuing education and training is often tied to the organization where the CNA is employed, it is difficult for a CNA who is not employed to access continuing education and training.

Finally, it should be noted that the current system hampers the ability of CNAs and other direct care workers to easily transition from one work setting to another within the continuum of care available without the risk of losing their certification. This final issue is a systemic one as the long term and health care systems are fragmented. Direct care workers and employers are unclear about all of the regulations and how to interpret them, which ultimately impacts a direct care worker's ability to take personal responsibility and ownership over their credentials. It also means that the direct care workforce can not easily transition to different work settings to best meet the care needs of Iowans.

Solutions

The ICA and BJBC recommend the following solutions, which would impact both the Federal and state level. These recommendations would improve the quality of care received by Iowa consumers and their families, by making continuing education and training opportunities more relevant and meaningful for direct care workers in Iowa. The recommendations would also help to address the issue of retention among the direct care workforce, which would help meet the projected long term care and health care workforce needs in the state.

To address the first issue of overall continuing education and training opportunities, direct care workers in Iowa should be required to complete continuing education and training based on the

functions and services they perform and training should be linked to the maintenance of their certification. This continuing education and training should be of high quality and directly related to improving the level of care provided to Iowa consumers and their families, along with enhancing the professional status of direct care workers. The Iowa General Assembly should adopt the education and training recommendations made by the Iowa Direct Care Worker Task Force, which were submitted to the Iowa General Assembly, the Governor's Office and the Iowa Department of Public Health in December of 2006 (http://www.idph.state.ia.us/hpcdp/workforce_planning_reports.asp). As stated in the Task Force's report, the Iowa Department of Public Health shall oversee and implement this new education and training system in conjunction with DIA, DHS, and DEA.

To address the second issue of the eight-hour CNA work requirement, the state should pursue a waiver from CMS that would allow Iowa to pilot the implementation of continuing education and training standards in lieu of the eight-hour work requirement that CNAs must currently meet every two years to remain on the state's Direct Care Worker Registry. More specifically, annual continuing education and training requirements for CNAs would replace the eight-hour work requirement. This second recommendation would also align and support the Iowa Direct Care Worker Task Force recommendations, which were referenced earlier.

About the Iowa CareGivers Association

The mission of the Iowa CareGivers Association (ICA) is "enhancing the quality of care by providing education, recognition, advocacy, and research in support of direct care workers." ICA partners with workers, providers, consumers, consumer advocates, policy makers, labor, educators and others committed to enhancing the quality and availability of care in Iowa. ICA provides education, information, support and advocacy for those who perform direct resident/patient/client care. ICA also conducts market research relative to staff recruitment and retention.

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