

COMMUNITY HEALTH WORKER APPRENTICESHIP

SEPTEMBER 3, 2015 | NASUAD AND HCBS CONFERENCE | WASHINGTON, DC

Cheryl Feldman

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NATIONAL UNION OF HOSPITAL & HEALTH CARE EMPLOYEES, AFSCME

DISTRICT 1199C
**Training &
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Fund**



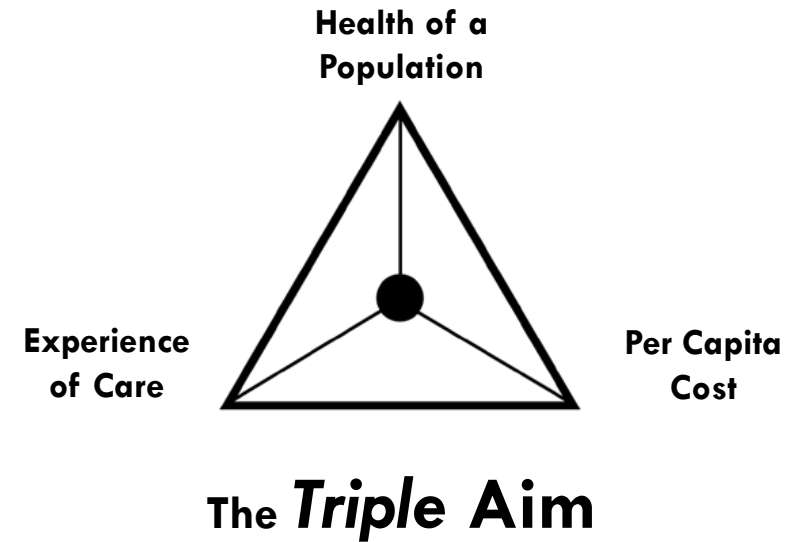
*You choose the career,
together we chart the path.*

CONTEXT

- Rising, unsustainable healthcare costs
- Poor (comparative) health outcomes
- Epidemic of preventable chronic disease
 - 70% of all deaths in the US
 - 75% of US medical care costs
- Persistent health disparities: Aging Pop & Chronic Health Conditions Increasing
 - Asthma
 - Cancer (breast, colorectal, prostate)
 - Cardiovascular disease
 - Diabetes
 - Obesity
 - HIV/AIDS
 - Violence
 - Infant mortality

CHWs HELP ACHIEVE “TRIPLE AIM”

- Improve health access and utilization
 - Health insurance
 - Preventive screenings and treatment
 - Primary care, medical homes
- Improve quality and outcomes
 - Outreach to at-risk populations
 - Care coordination
 - Treatment plan compliance
 - Patient self-management
 - Health literacy
 - Culturally-effective provider practices



CHWs HELP PROMOTE HEALTH EQUITY

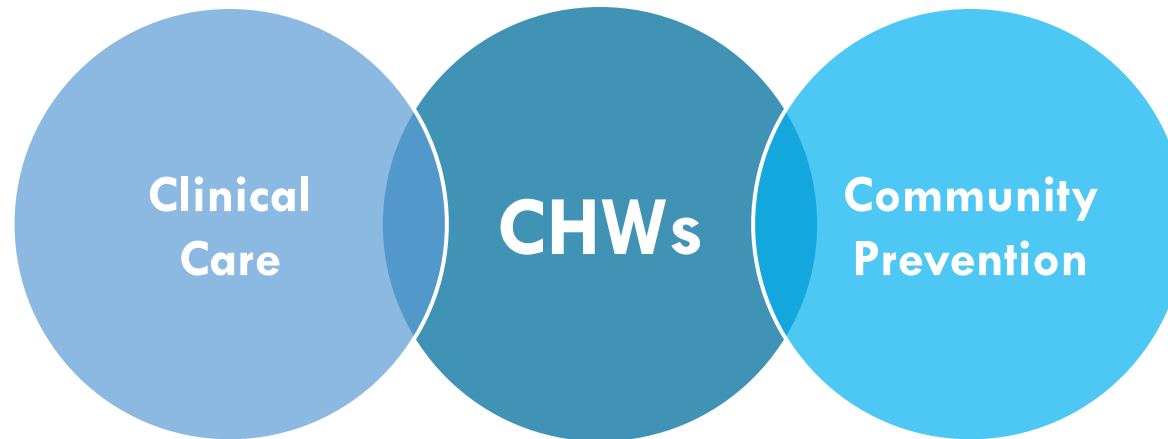
- Highly effective with vulnerable populations
 - Low-income
 - Communities of color
 - Linguistic minorities
 - Immigrants, refugees
 - Children, youth, elders
 - Rural communities

CHWs DON'T *JUST* WORK FOR HOSPITALS

- Hospitals and hospital systems
- Provider practices
- Community clinics and FQHCs
- Education providers (school, HeadStart, etc.)
- Universities
- Public housing and public safety agencies
- Community-based organizations
- Behavioral health settings
- Health insurance firms

CHWs AS “UPSTREAM” HEALTH WORKERS

- Addresses issues related to social determinants of health
- Tradition and culture of flexible response to patient/client needs (despite funding constraints)
- Bridge care systems and communities



CHWs EFFECTIVE WITH OLDER ADULTS & DISABLED

- Helping patients to control diabetes and hypertension through self-management
- Ensuring continuity/coordination of care; appointment keeping
- Developing therapeutic alliance-consumer, provider, community
- Improving healthcare utilization
- Increasing use of preventive services: increasing adherence to recommended regimens, appropriate use of health services
- Linking clients to social services
- Serving as care transition coach for discharged patients

10 CORE COMPETENCIES

- 1.) Outreach methods and strategies
- 2.) Individual and community assessment
- 3.) Effective communication
- 4.) Cultural responsiveness and mediation
- 5.) Education to promote healthy behavior change
- 6.) Care coordination and system navigation
- 7.) Use of public health concepts and approaches
- 8.) Advocacy and community capacity-building
- 9.) Documentation
- 10.) Professional skills and conduct

CHALLENGES FACING CHWs

- Low pay, poor benefits
- Unstable funding – categorical grants
- Poor job security, high turnover
- Inconsistent training, supervision
- Lack of unified professional identity
- ...despite education and skills:
 - Many bilingual or multi-lingual
 - Nationally, 82% have some post-secondary education (nearly 50% hold college and/or graduate degrees, per University of Arizona 2014 *National Community Health Worker Advocacy Study*)

WORKER BENEFITS of CHW APPRENTICESHIP

- Allows workers to earn while they learn – direct connection between education and employment
- Provides portable credential
- Enhances workers' skills and knowledge, professionalizes the field
- Prepares workers for higher education
- Creates basis for career growth and upgraded wage scale

EMPLOYER BENEFITS of CHW APPRENTICESHIP

- Reduces turnover and associated costs
- Increases staff and family members' satisfaction
- Provides a pipeline for recruitment – geared towards each employer's specific skill requirements
- Develops a highly-skilled workforce and creates a culture of learning

HEALTH DELIVERY SYSTEM BENEFITS

- Standardize CHW competencies
- Create a portable national credential
- High-quality training articulated with college credit
- Creates basis for career pathway

1199C TRAINING'S CHW APPRENTICESHIP

- 150 hour “related technical instruction”
- 2,200 hours “on-the-job learning”
(Competency-based models available)
- Sponsored by Philadelphia FIGHT
(HIV/AIDS service provider) since '14
- Articulates with 3 college credits at
Temple University; working with local
university to develop Associate Degree



SCALING CHW APPRENTICESHIP NATIONALLY

- “Pilot sites” for implementation
- Competency identification
 - Core competencies
 - Employer/role-specific competencies
- Assessment design
- Related technical instruction (classroom) curriculum
- On-the-job learning work processes
- Mentoring model

COMMUNITY HEALTH WORKER APPRENTICESHIP

Direct questions to:

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DISTRICT 1199C
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together we chart the path.*



Crisis Into Opportunity: Advanced Home Care Aide Innovation

Sahar Banijamali, Developer
SEIU 775 Benefits Group

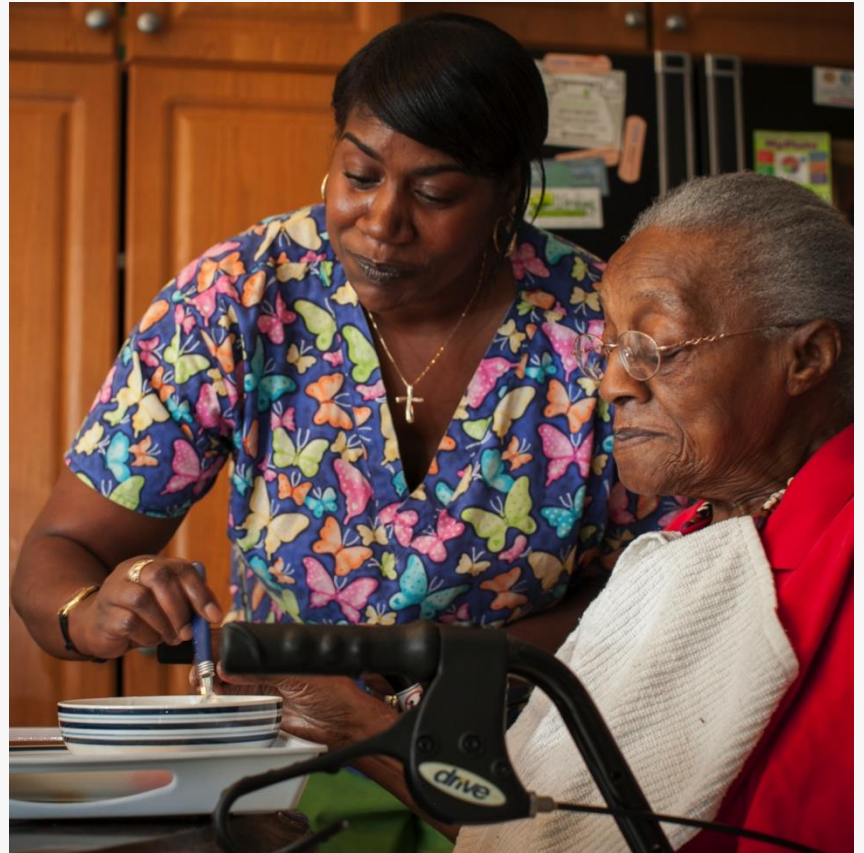
HCBS Conference – NASUAD – Sept. 3, 2015



Two Crises Brewing

Avoidable Care

Top Job



SEIU 775
BENEFITS GROUP

\$200 billion in avoidable care cost



Source:
Institute of
Medicine



SEIU 775
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\$200 billion in avoidable care cost

IMS Health Study Identifies \$200+ Billion Annual Opportunity from Using Medicines More Responsibly

IMS INSTITUTE
FOR
HEALTHCARE INFORMATICS

*U.S. Report Finds Recent Improvements in Patient Adherence,
Antibiotic Prescribing and Generics Use; Advances Observed in
Stakeholder Collaboration and Incentive Alignment*

PARSIPPANY, NJ, June 19, 2013 – Avoidable costs of more than \$200 billion are incurred each year in the U.S. healthcare system as a result of medicines not being used responsibly by patients and healthcare professionals, according to a new study released today by the IMS Institute for Healthcare Informatics. This represents 8 percent of the cost of the U.S. healthcare system.

The report
Responds
based on
polypharmacy
an estimated
million patients

“As our
spending
“Those
Reaching
models,

The IMS
of the cost
among 1
2009. In
prescription

alternatives to branded medications, when available, 95 percent of the time.

The report's key findings include the following:

- **Medication nonadherence drives the largest avoidable cost.** Patients not adhering to their doctors' medication guidance experienced complications that led to an estimated \$105 billion in annual avoidable healthcare costs. While the underlying reasons for nonadherence are varied and longstanding, the growing use of analytics and collaboration among providers, pharmacists and patients appear to be advancing both the understanding and effectiveness of intervention programs.
- **Delays in applying evidence-based treatment to patients lead to \$40 billion in annual avoidable costs.** The study analyzed four disease areas where patients either are not diagnosed early or treatment is not initiated promptly. The largest avoidable impact is seen in diabetes, where such delays increased outpatient visits and hospitalizations. A reduction in this source of avoidable costs is possible if insurance coverage is expanded, and at-risk patients are able to receive appropriate screening and diagnostic testing.

- **Medication nonadherence drives the largest avoidable cost.** Patients not adhering to their doctors' medication guidance experienced complications that led to an estimated \$105 billion in annual avoidable healthcare costs. While the underlying reasons for nonadherence are varied and longstanding, the growing use of analytics and collaboration among providers, pharmacists and patients appear to be advancing both the



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Home care is top job in U.S.

| UNITED STATES DEPARTMENT OF LABOR | | | | | |
|--|------------|-----------|-----------------|---------|-----------------------------|
| BUREAU OF LABOR STATISTICS | | | | | |
| Home care is top job in U.S. | | | | | |
| Economic News Release | | | | | |
| Table 5. Occupations with the most job growth, 2012 and projected 2022 | | | | | |
| Table 5. Occupations with the most job growth, 2012 and projected 2022 | | | | | |
| (Employment in thousands) | | | | | |
| 2012 National Employment Matrix title | Employment | | Change, 2012-22 | | Median annual wage, 2012(1) |
| | 2012 | 2022 | Number | Percent | |
| Total, all occupations..... | 145,355.8 | 160,983.7 | 15,628.0 | 10.8 | \$34,750 |
| Personal care aides..... | 1,190.6 | 1,771.4 | 580.8 | 48.8 | 19,910 |
| Registered nurses..... | 2,711.5 | 3,238.4 | 526.8 | 19.4 | 65,470 |
| Retail salespersons..... | 4,447.0 | 4,881.7 | 434.7 | 9.8 | 21,110 |
| Home health aides..... | 875.1 | 1,299.3 | 424.2 | 48.5 | 20,820 |
| Combined food preparation and..... | 2,969.3 | 3,391.2 | 421.9 | 14.2 | 18,260 |
| serving workers, including | | | | | |
| fast food | | | | | |
| Nursing assistants..... | 1,479.8 | 1,792.0 | 312.2 | 21.1 | 24,420 |



Diagnosing the Top Job



Low wage
(avg. \$9.57)

No career
pathway

High turnover



High touch
provider

High trust

Shared life
experience,
language,
community

Many care
for duals

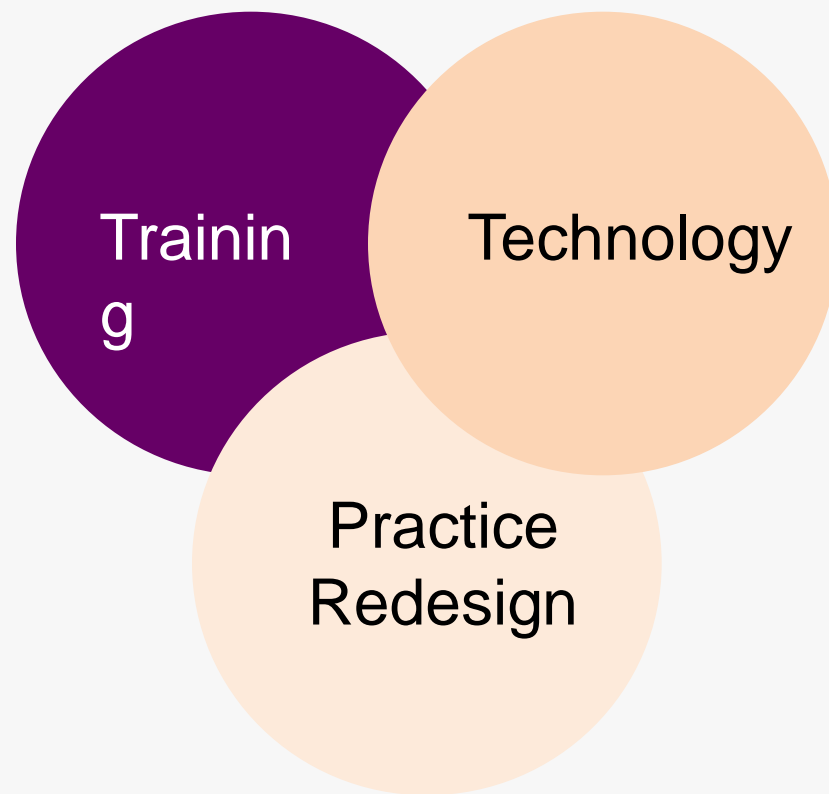


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Innovating in Home Care

Demo and Evaluate

- Evidence & competency-based model
- Pilot with several states
- Focus on dual eligible, high complexity clients
- Build on CHW research
- Target reduce avoidable ER, hospital, nursing home visits



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Role of Advanced Home Care Aide

New curriculum will focus on whole person well being & driven by the claims research, but may include:

- Developing capacity and skills to recognize risks;
- How to coach and provide appropriate behavior supports to consumers
- How to monitor changes in a consumer's status and effectively communicate to appropriate care team members; etc.



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Registered Apprenticeship

ADVANCED TRAINING

- 70 hours of Advanced Training
- 12 hours of Peer Mentoring
- U.S. Department of Labor Certification of Apprenticeship

ENTRY LEVEL

- 75 hours of Basic Training
- Washington State Department of Health certification





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HCBS Conference, September 3, 2015

Registered Apprenticeship

Laura Ginsburg, USDOL Office of
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US Department of Labor

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Apprenticeship**USA**

The Past Year Has Been a Transformational Year for Registered Apprenticeship.

Tonight, I'm also asking more businesses to follow the lead of companies like CVS and UPS, and offer more educational benefits and paid apprenticeships -- opportunities that give workers the chance to earn higher-paying jobs even if they don't have a higher education.

– President Obama, State of the Union Address, January 20, 2015



Ready to Work:
Job-Driven Training and
American Opportunity

July 2014



Training for Success

A Policy to Expand Apprenticeships in the United States
By Ben Chodry and Sarah Ayres December 2013



U.S. Secretary of Labor Thomas Perez visits UAW Apprenticeship Training Center

AMERICAN
APPRENTICESHIP
INITIATIVE

AAI

American
Apprenticeship Grants
\$100 Million



Apprenticeship**USA**

This Trend is Real...and Global!

Expansion in
industrialized countries

England

Canada

Scotland

Australia

South America

Germany

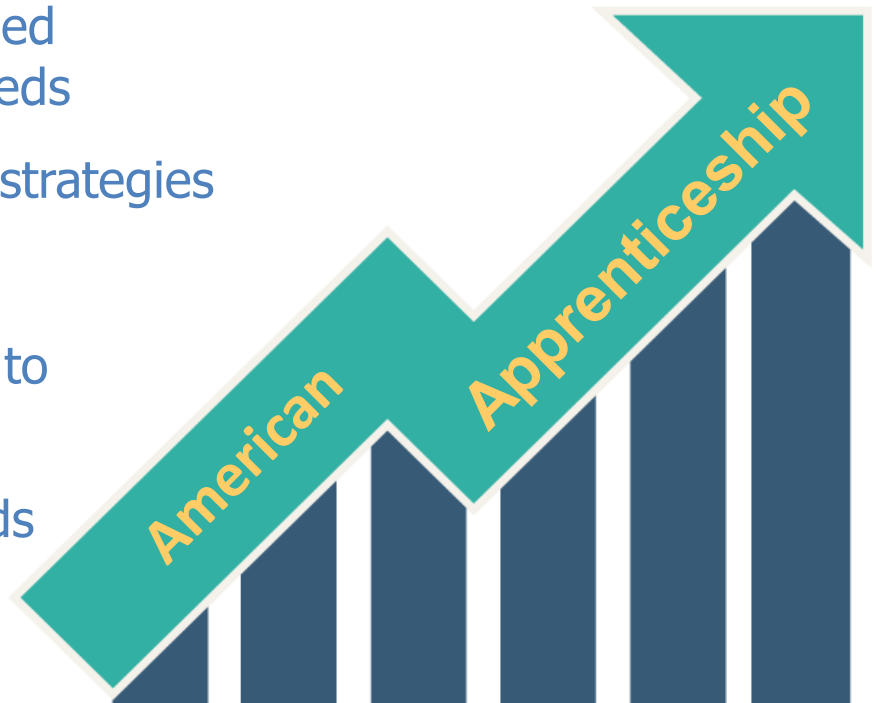
Switzerland



Growing Registered Apprenticeship

American Apprenticeship Initiative Goal: Double the number of apprentices in 5 years

- ❖ Job-driven strategy to train skilled workers and meet employer needs
- ❖ Integral part of industry sector strategies
- ❖ Career pathways for workers
- ❖ WIOA strengthens connections to Registered Apprenticeship
- ❖ Pell Grants and work study funds
- ❖ GI bill benefits



Components of Registered Apprenticeship

**Employment with
on-the-Job Learning**



Related Education



Reward Skills



Fully Credentialed



Registered Apprenticeship is a proven work-based model that delivers results for workers and the nation.

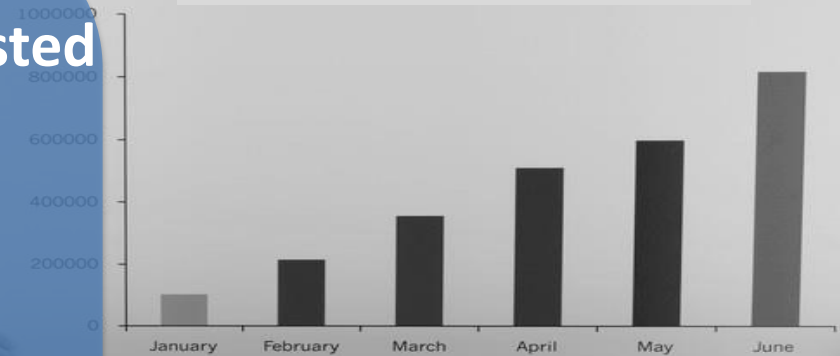
Impressive Public Benefits

- ✓ \$28 in benefits for every \$1 invested by Government*

Strong Outcomes

- ✓ Completers earn approximately \$50,000 per year
- ✓ 87% of completers employed
- ✓ Opportunities to earn college credit
- ✓ Over \$300,000 more than their peers in life-time earnings

OUTCOMES AND RESULTS



*(Source: An Effectiveness Assessment and Cost-Benefit Analysis of Registered Apprenticeship in 10 States, Mathematica Policy Research, 2012)



Apprenticeship and Healthcare

- Apprenticeship fits well into an existing employee development strategy
- Quality of patient care linked to quality of workforce
- “Grow Your Own”
- Fills an employee pipeline
- Effective way to address the need for high-skilled workers
- Career lattice for upward mobility or specialization at the entry level



Apprenticeship Resources

New Apprenticeship Website – www.dol.gov/apprenticeship

Employer Toolkit –

http://www.doleta.gov/oa/employers/apprenticeship_toolkit.pdf

Examples of innovative apprentice programs –

http://www.doleta.gov/oa/new_stories.cfm#innovators

Federal Funding for Apprenticeship Playbook –

<http://www.doleta.gov/oa/federalresources/playbook.pdf>

