

Better Services for Better Aging

Date: March 26, 2019

To: Members of the Assembly Committee on Aging & Long-Term Care

From: John Sauer, President/CEO, LeadingAge Wisconsin

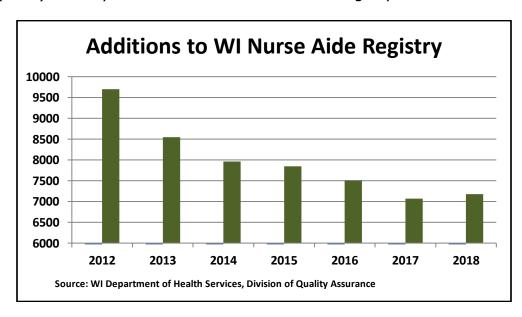
Subject: AB 76, relating to hours of instructional program for nurse aides.

Chairman Gundrum and Committee members - thank you for this opportunity to speak with you today about AB 76.

My name is John Sauer and I am the President/CEO of LeadingAge Wisconsin. LeadingAge Wisconsin is a statewide Association representing mission-driven skilled nursing homes, assisted living facilities, and other community-based providers in Wisconsin. Specifically, the Association represents 185 skilled nursing facilities in Wisconsin who are facing a workforce crisis.

As you know, Wisconsin's population is aging. As baby boomers begin to retire, our State's overall labor force supply is expected to decline while the demand for health care professionals will continue to rise. According to the Department of Workforce Development (DWD), the demand of long-term care workers is over five times the projected growth rate compared to all other industries.

To offer some perspective on the employment challenges facing the nursing home provider community, please consider the disturbing trend in the number of new certified nursing assistants (CNAs) annually added to the State's nurse aide registry since 2012:



As noted in the chart, the number of annual additions to the CNA registry has declined by over twenty-five percent since 2012. This is an alarming situation knowing that Wisconsin is already

experiencing a crisis-level shortage of direct care workers, as reported in our 2018 Workforce Report. That is why I am here today to discuss the need for AB 76. We must remove barriers for people entering the long-term care field, and we must begin to explore other ways to attract more workers into this field.

To be sure, AB 76 will not single-handedly solve the state's long-term care workforce shortage. What it does do, however, is offer an opportunity for long-term care providers to manage their training programs in a way that allows them to better compete for workers. To this point, I offer the following considerations:

First, the current training requirement of 120 hours is a barrier for persons looking to secure a job that pays \$12-\$14/hour. Asking potential CNAs to enroll in a training program before they can secure a job, most often means they are doing so at great expense while forgoing wage-earning time. Reducing the number of hours of classroom training time means a person does not have to sacrifice 45 hours during which she or he incurs costs but most often is not compensated. We have heard from members who recognize that additional training time can be a barrier to employment because individuals may elect to pursue another job that is less demanding, does not require them to forego wages, and/or is immediately available (e.g. Kwik Trip).

Secondly, the provider community agrees that the success of a person serving as a CNA is largely determined by what happens AFTER she or he is hired by the nursing home. It is what occurs during the first 90 days of employment, such as the on-the-job training, mentoring, buddy system, in-service education, and resident-staff ratios during the extended orientation program; combined with the overall culture of the mission-driven organization, that determines a CNA's success. These factors are far more important than the pre-employment classroom training. That is why LeadingAge Wisconsin has made available to members extensive resources/tools on CNA leadership, in-service training, retention strategies, mentorship, team building, communications and competency programs.

Third, without an adequate workforce, it is very difficult for facilities to focus on advancing quality. Our Board of Directors noted that a 75-hour training program can help to attract more aides into nursing homes, allowing them to address quality concerns through adequate staffing. This will help address overtime, double shifts, less than desirable staff-resident ratios, and the need to use pool help. Our RNs have said to us, "Find me the caregiver staff, so we can provide the best care possible; let us train and coach the new CNAs. We can't train and coach persons who never enter the field."

Lastly, the bill does not force training programs to go to 75 hours. If some or most the training programs want to remain at 120 hours, or choose something in between, they will be able to do so. We expect those training programs located near the neighboring states of Minnesota, Iowa and Michigan who are all at the federal standard, to recognize the competitive nature of CNA employment and offer a 75-hour program. **Regardless of the number of training hours offered, all students will be required to pass the SAME competency test (written and clinical skills)**.

Thank you for allowing me the opportunity to speak today in favor of AB 76. I am happy to answer any questions at this time.