

March 26, 2019

Representative Gundrum (Chair)
Assembly Committee on Aging and Long-Term Care
Wisconsin State Capitol, Room 304 N
Madison, WI 53708

Dear Rep. Gundrum and Committee members:

The Wisconsin Board for People with Developmental Disabilities (BPDD) thanks the committee for the opportunity to provide testimony on Assembly Bill 76.

Our analysis finds that reducing the number of training hours required for certified nurse aides (CNAs) will not improve quality of care for people with disabilities, may result in lower quality care, and is unlikely to improve workforce recruitment and retention.

Worker and provider organizations have consistently identified improved training as one of the elements needed to improve care quality and retention of competent workers. While there have been a variety of recommendations to increase training, provide training on different specific topics, provide periodic trainings for workers to refresh or acquire new skills, and to offer training at no cost to workers, disability advocates and the vast majority of home and community based providers have not recommended reducing training requirements as a strategy to improve the workforce.

The WisCaregiver Careers program—developed in collaboration with nursing home advocates and the Board of Aging and Long-Term Care—was launched March 1, 2018 and provides free training and testing for up to 3,000 CNA students to become caregivers in Wisconsin nursing homes. DHS has reported strong interest in the program with more than 5000 people signing up. This program has not been implemented for a sufficient amount of time to be able to assess how free tuition may improve the workforce, however it does indicate significant interest in the training.

Studies have demonstrated that increased training reduces job turnover while increasing job satisfaction.¹ Over half of the states in the U.S. have elected to require training over the minimum 75 hours required by the federal government, and the Institute of Medicine recommends expanding federal training requirements to 120 hours.²

BPDD does not find that training requirements are a driver in the workforce crisis. Low wages, lack of benefits—including health insurance, paid sick and family leave, retirement, dependent care, commuter benefits etc., and lack of career advancement opportunities are all factors that impact the recruitment and retention of quality caregivers. Our analysis finds that of the factors that contribute to the workforce crisis, changing training

¹ Han, K., Trinkoff, A.M., Storr, C.L., Lerner, N., Johantgen, M., Gartrell, K. (2014). Associations between state regulations, training length, perceived quality and job satisfaction among certified nursing assistants: Cross-sectional secondary data analysis. International Journal of Nursing Studies, 51 (8), 1135-1141.
² Paraprofessional Healthcare Institute (PHI) (2016). Raise the Floor: Quality Nursing Home Care Depends on Quality Jobs.
https://phinational.org/sites/default/files/research-report/phi-raisethefloor-201604012.pdf

requirements does not address any of the drivers of the crisis but does have the potential to negatively impact care quality.

With the recent creation of a Caregiver Task Force, BPDD anticipates that advocates and the legislature will be able to develop and advance a comprehensive package to better address the caregiver crisis. One of the charges of the Task Force is to review and address training issues for the overall direct care workforce, including establishment of a career ladder to increase respect for and quality of the workforce.

The broad charge of the Task Force recognizes there are many policies that need to be addressed to improve the workforce. Passage of individual pieces of legislation now without the benefit of the work of the Task Force risks making changes that do not improve the workforce crisis and may have unintended consequences. BPDD recommends that this training hours change be tabled until after the Task Force issues its recommendations.

BPDD is charged under the federal Developmental Disabilities Assistance and Bill of Rights Act with advocacy, capacity building, and systems change to improve self-determination, independence, productivity, and integration and inclusion in all facets of community life for people with developmental disabilities (more about BPDD https://wi-bpdd.org/wp-content/uploads/2018/08/Legislative Overview BPDD.pdf).

Our role is to seek continuous improvement across all systems—education, transportation, health care, employment, etc.—that touch the lives of people with disabilities. Our work requires us to have a long-term vision of public policy that not only sees current systems as they are, but how these systems could be made better for current and future generations of people with disabilities.

Thank you for your consideration,

Bet Sweden

Beth Swedeen, Executive Director

Wisconsin Board for People with Developmental Disabilities