LTSS Subcommittee Meeting

7/11/2024

Attendees: Kim Gilbert, Melanie Highland, Mindy Ulstad, Dottie, McKenzie Tuttle, Michelle Vickers, Bill Bates, Bob Pieper, Venice Wood, Jenny Hollandsworth, Jamie Saunders, Tracy Niekamp, Beth Dauber, Helen Sheridan, Paula Darr, Stacey Rosenzweig, Amy Mack, Angelina Alpert, Marjorie Moore, Melissa Robinson, Nicole, Ryon Richmond,

Break Out Sessions:

Group 1 – LTSS Workforce Recruitment and Retention AND Advanced Planning for LTSS

Group 2 – Education and Training AND Affordability for consumers

Group 3 – Expand continuum of care and service array AND Respect and dignity of consumers

In each break-out session, we will consider the following:

1. What does this category mean to each of us? (Ensure shared understanding)
2. What do we want to accomplish within this category?
3. Develop three tasks that work towards accomplishing this goal.

**Expand Continuum of Care and Service Array**

**1. What does this category mean to each of us? (Ensure shared understanding)**

Think specifically about people in middle income range, may not be appropriate to go on Medicaid yet- nursing home- not at home fully- need something in the middle. Doing full jump from home and need support and Medicaid with full nursing.

People with mental health needs, not getting supports need in current LTSS system. Even for people who have aged into that area.

Most people don’t know that there is a continuum of care- don’t know how to navigate. Don’t know what don’t know. When you need help, you need help, seems to be no help available.

Running I&A at SLAAA get over 15 calls a month people asking where to go for services. Comprehensive resource referrals. People don’t even know what is available. So many services are “a secret”. Don’t ask the right questions, may not get connected to services available at minimal cost or free. Need to market information. Websites and companies say they can bring everyone together. Best source has historically been word of mouth. Need outreach and commercials. Meet people where they are (doctor’s offices, etc.).

Lack of knowledge of current services. Especially on the entrance side. Give education to help them understand their situation and policies.

Some of the big companies that are in same space can market and flood the system with paid services, but hard to get the word out on free services.

 2. **What do we want to accomplish within this category?**

Outreach and Education on current services

Gaps in services- like brain injury- when occurs = what is available

Gaps due to income- Medicare paying for some home care services.

Someone in St. Charles County needs light chore services- can’t find someone to do this. Can lead someone who needs temp services to end up in nursing home.

Filling gaps in services in rural areas.

Skilled nursing, having trouble finding placement for people with tracheotomy. When you get past a certain point, hospital won’t keep you.

Hard to find placement for people who are blind and hard of hearing.

Medically fragile adult waiver, when caregivers are aging, can’t find facility that allows for trachs.

Accessing gaps in services as a veteran.

**3. Develop three tasks that work towards accomplishing this goal.**

A browser for aging services (directory where people could find information) put AI to use to help with this. Speaking and typing accessibility component to this to help find assistance.

Finding ambassadors in each region to disseminate information. (When do Scamborie the phones blow up with calls about scams!)

Census information made public for individuals living in nursing facilities with mental health issues and other frailty issues. (Would help with identifying individuals who are in facilities who are not appropriate and could help local entities with applying for grants and other funding sources.)

**Respect and Dignity of Persons we are Serving**

1. **What does this category mean to each of us? (Ensure shared understanding)**

Person Centered Care- Eden Model of Training. Available for LTC Staff.

Must permeate all the pieces, from first I&A call- be intentional about getting questions answered and really listening. Good case managers can help do a lot of this.

Must be cross-cutting regarding what your position is, not siloed training. Must have mental health background and a LTC background. Administrator knows what loss does to staff.

Respect self-determination.

1. **What do we want to accomplish within this category?**

Help people recognize their own situation that may be abusive, protect your neighbor campaign may help others recognize own issue.

Must respect a person’s own culture and values.

Must be well yourself to be able to treat others with dignity and respect. Need to care for self and staff to ensure they can do the best work they are capable of.

Must be respect and dignity for direct care staff- will make services better for the people they serve.

Must come from a trauma informed care perspective and recognize that aging adults can have multiple traumas that affect their behaviors and decisions.

No assumptions should be made based on someone’s physical appearance, ability to hear or speak, presence of a guardian.

Must respect different identities (transgender, LGBTQIA+, racial minorities, religions, etc.), have a hard time finding care.

1. **Develop three tasks that work towards accomplishing this goal.**

Suggest Eden model (or another PCC training) to be required training for all LTSS continuum employees. Taught to look at a person and not a diagnosis.

Trauma informed care training for all LTSS staff.

What can we learn from DEI(A) movements that we can learn to use with ageism and other related trainings to ensure adequate training.

Fully fund the ombudsman program.

Office of Aging Ombudsman should be created. (Illinois has a model)

Work with younger ages to get integrated into curriculum in the schools. Who takes care of grandma and grandpa conversations.

Make homecare more robust and available to people of all income levels.

Aging simulation similar to the poverty simulations.

**LTSS Workforce Recruitment and Retention**

1. **What does this category mean to each of us? (Ensure shared understanding)**

To try and incentivize workers to come to and stay in the field

Any strategy has to address appropriate training, burnout, improved pay, and be streamlined

1. **What do we want to accomplish within this category?**

More people that are committed to quality care

1. **Develop three tasks that work towards accomplishing this goal.**

Emphasize careers, not just jobs, to allow individuals to grow in the LTSS field

* Public and private investment in career ladders
* Create both medical and social advancement opportunities, including upskilling

Develop innovative recruitment ideas

* Spotlight caregiving careers and their natural attraction for those seeking gratifying and needed human services work
* Create pathways for foreign-born residents
* Develop cohesive high school training programs (irrespective of setting)
* Re-brand aging and caregiving fields (needs content creation)

**Advanced Planning for LTSS**

1. **What does this category mean to each of us? (Ensure shared understanding)**

Discussed what is meant by “advanced”…When would that occur? Some strategies could be done with youth and adolescents, some as young adults, and others when approaching retirement. Important to note that LTSS advanced planning isn’t just needed for those aging, but for all ages to consider how they would want to be cared for if they were in a catastrophic event.

1. **What do we want to accomplish within this category?**

Improve financial literacy and normalize LTSS decisions for participants and their loved ones

1. **Develop three tasks that work towards accomplishing this goal.**

Financial Literacy

* Include LTSS considerations in existing middle school and high school based courses
* Education on various savings arrangements and legal decision making tools

Tax Credit for LTSS savings (similar to retirement savings models like 401K, incentivize contributions with matching…see Washington model)

**Education and Training**

1. **What does this category mean to each of us? (Ensure shared understanding)**

Provide caregivers/individuals industry and agency training to be successful in delivering quality services in client’s homes which will help with retention. Provide tools and training opportunities that are topic specific (i.e. OSHA, dementia, body mechanics, meal prep and nutrition that meet state requirements), person-centered and holistic (integrated star)

* Soft Skills – very important (how to hold a job)
* Multicultural training
1. **What do we want to accomplish in this category?**
* Recruitment and retention of a qualified workforce
* Identify areas of gaps and needs in current training practice (mental health issues, etc.) for targeted training development
* Improved health outcomes to the population we serve
* Expanded career path through DESE (High School and Higher Education) – establish education and training early on in the LTSS career path (aged & disabled population); Work with nursing schools (University of MO nursing students) – capture interest of individuals at an early stage of education; transferrable skillset
1. **Develop three tasks that work towards accomplishing this goal.**
* Outreach to DESE to introduce more limited C.N.A. and licenses; Vo Tech and collaborate with stakeholders to encourage LTSS industry career path
* Develop standardized training curriculums that include both hard and soft skills.
* Develop and implement a media campaign

**Affordability for Consumers**

1. **What does this category mean to each of us? (Ensure shared understanding)**

Access and the ability to take care of individuals regardless of income (low to high); knowledge of the spectrum of services and resources available; need to research the middle class and identify what this means to them.

1. **What do we want to accomplish in this category?**
* Educate individuals on available resources
* Educate professionals on resources and the NWD philosophy
* Education on understanding the payor sources and programs
* Ensure as much of the population is fully insured through LTC, Medicare of other advantage plans.
* Encourage greater savings and planning like spend down
1. **Develop three tasks that work towards accomplishing this goal.**
* Convene communications project that will discuss mass market publication and website (NWD – establish database by specific sectors of the healthcare industry) User friendly for professionals and family members
* Use multi-faceted approach; website; advertising campaign; practioner/social worker outreach
* Deep dive into benefit plans (tax credits) to educate legislature
* Federal legislation