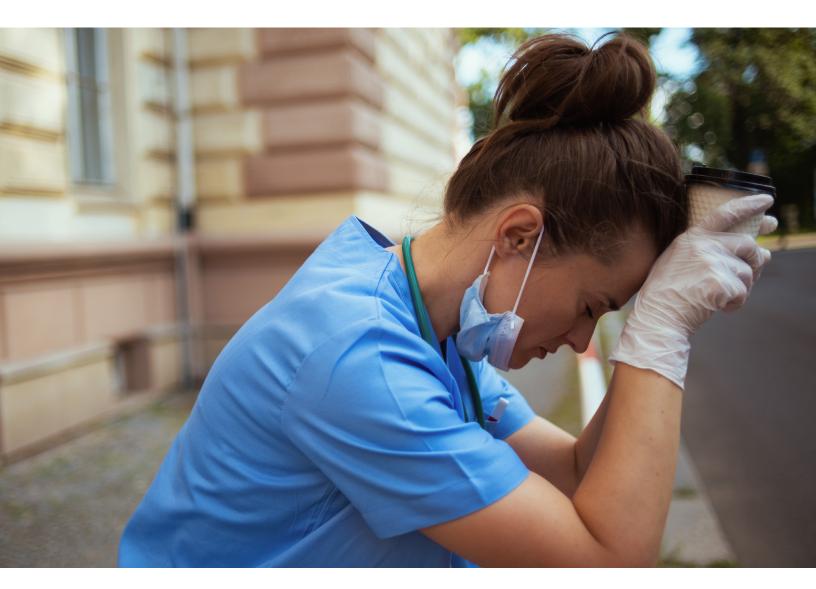
COVID-19: Experiencesof Direct Care Workers in Aging Services

Research Brief



In partnership with:





About This Report

The LeadingAge LTSS Center @UMass Boston would like to thank Aging in America, Inc., for its generous support of this work.

We would also like to thank David Gehm, president & CEO of Wellspring Lutheran Services in Flint, MI, and Jon Golm, president of WeCareConnect TM in Frankenmuth, MI, for their collaboration with LTSS Center researchers on this study.





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About the LTSS Center

The LeadingAge LTSS Center @UMass Boston conducts research to help our nation address the challenges and seize the opportunities associated with a growing older population. LeadingAge and the University of Massachusetts Boston established the LTSS Center in 2017. We strive to conduct studies and evaluations that will serve as a foundation for government and provider action to improve quality of care and quality of life for the most vulnerable older Americans. The LTSS Center maintains offices in Washington DC and Boston, MA.

For more information, visit <u>LTSSCenter.org</u>.

Table of Contents

Overview	2
The Research Study	3
Detailed Findings	4
How Can Providers Support Stressed Workers?	9
Conclusion	10
References	11

Overview

Approximately 4.6 million direct care workers in the United States provide life-sustaining care to people who are older, live with disabilities, or have complex medical needs. These workers include home care aides, home health aides, nursing assistants, and certified nursing assistants (CNA). They all play a critically important role in helping care recipients remain healthy, maintain their independence, and avoid unnecessary use of expensive health care services.

Since March 2020, direct care workers have found themselves on the frontlines of the coronavirus pandemic. Despite the significant personal risk they encounter on the job each day, these professional caregivers often lack access to hazard pay, paid time off, pandemic-specific training, affordable and accessible childcare, or adequate personal protective equipment (PPE).

Direct care workers faced challenges prior to the pandemic, but COVID-19 has exacerbated these challenges. These workers are:

- Under-valued: A majority of direct care workers are women (87%) and people of color (59%), and approximately one-quarter are immigrants (27%). These workers can face discrimination on the job. In addition, the demands and value of their work are often underestimated (PHI, 2020).
- Financially insecure: Direct care workers typically earn a median hourly wage of \$12.80. One in eight workers lives in poverty and more than half receive public benefits (PHI, 2020).
- Inadequately supported: Many direct care workers lack access to reliable and affordable transportation and childcare (Famakinwa, 2020).



Direct care workers are particularly susceptible to contracting COVID-19 and are at increased risk of severe illness if they become infected with the virus. These risks are directly associated with several factors. For example, workers:

- Have daily exposure to residents and clients who have been infected with the virus.
- Live in communities with high rates of COVID-19.
- Delong to demographic groups—including people of color and older adults—that are at high risk for contracting the virus.
- Often use public transportation, which puts them at higher risk for COVID-19 exposure.
- Work multiple jobs, which increases their exposure to the virus and their ability to spread the virus to multiple care settings (PHI, 2020; True et al., 2020; Lee et al, 2020).

As of Nov. 24, 2020, more than 100,000 residents and staff at organizations providing long-term services and supports (LTSS) have died from COVID-19, accounting for 40% of all coronavirus-related deaths nationwide (Chidambaram, Garfield & Neuman, 2020). Studies are needed to gauge the impact of COVID-19 on direct care workers, catalog the pandemic-related challenges these workers face, and identify strategies for supporting this workforce.

The Research Study

During the early days of the coronavirus pandemic, the LeadingAge LTSS Center @UMass Boston partnered with WeCareConnect™ to study the impact of COVID-19 on LTSS direct care staff working for LeadingAge provider members.

WeCareConnect[™] is an employee engagement and management system created by Wellspring Lutheran Services, a Michigan-based LeadingAge member. The WeCareConnect[™] system helps 165 organizations, with more than 1,200 locations around the country, solicit regular feedback from their employees. Staff member responses to an online battery of questions helps employers better understand staff challenges with onboarding, training, supervisor relationships, job fit, job satisfaction, expectations, and the physical and organizational environment.

The WeCareConnect™ platform's non-anonymous approach allows for immediate interventions to help individual employees with any issues they may have. Organizations use the platform to facilitate continuous quality improvement and develop real-time solutions that help reduce turnover and improve retention.

During May 2020, WeCareConnect[™] added several pandemic-related questions, created by LTSS Center researchers, to its employee interview battery. The WeCareConnect[™] employee interview battery sample for this study included 1,414 current and resigned direct care workers in assisted living and independent living communities, nursing homes, home and community-based services (HCBS) agencies, and health care services.

Researchers sought to answer three questions during the study:

- **1.** What specific challenges (external and work-related) and level of stress are frontline workers experiencing during the coronavirus health crisis?
- 2. How do workers perceive their own preparedness to care for residents/patients/ clients with COVID-19 and how do workers rate the quality of employer communication around COVID-19?
- 3. Do the stresses/challenges experienced by workers, and worker perceptions of their own preparedness and the quality of employer communication around COVID-19, differ by care settings?

Key Findings

The study yielded five key findings:

- 1. A substantial percentage of direct care workers experienced a series of external and work-related challenges during the COVID-19 pandemic.
- **2.** Resigned employees experienced these challenges more frequently and reported higher levels of COVID-related stress, when compared to current employees.
- **3.** Preparedness and organizational communication were rated high by current workers.
- **4.** Direct care workers at nursing homes and assisted living communities faced increased workload demands and experienced understaffing more often than workers in home and community-based settings.
- **5.** Direct care workers employed in nursing homes, assisted living communities, and HCBS agencies had similar perceptions about their own preparedness and the quality of employer communication.

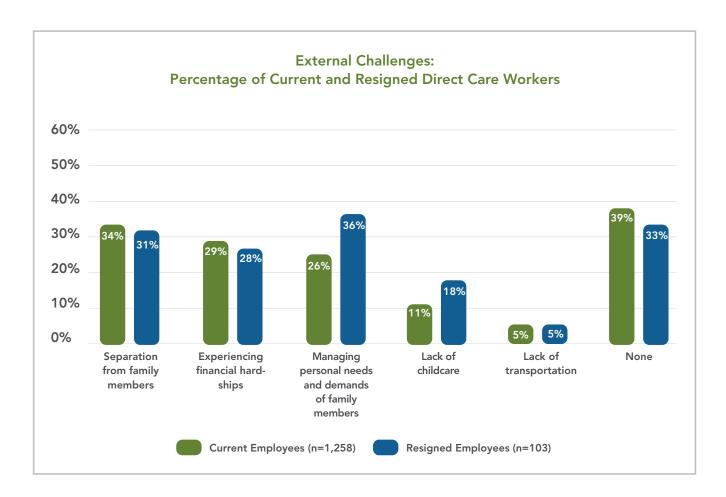
Detailed Findings

Direct Care Worker Challenges

External Challenges: The top challenges direct care workers reported experiencing outside of work included:

- Separation from family members.
- Managing the personal needs and demands of family.
- Experiencing financial hardship.

Resigned employees experienced these external challenges more frequently. A smaller percentage of resigned employees (33%) did not report any challenges, compared to current employees (39%).

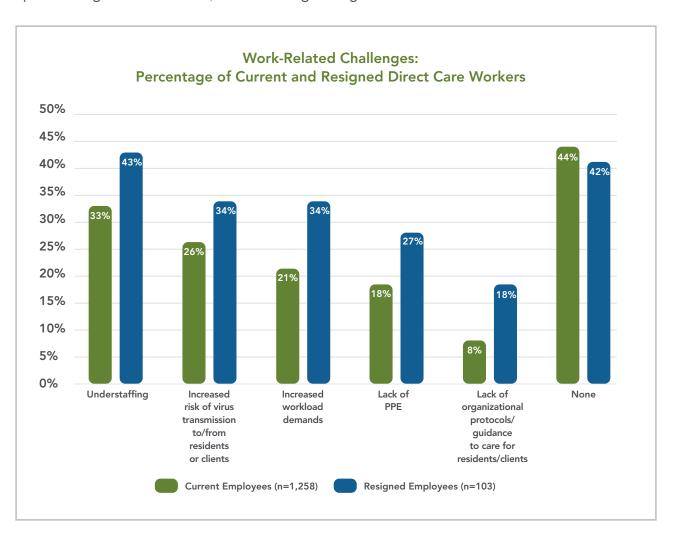


Work-Related Challenges: The top work-related challenges experienced by direct care workers included:

- Increased workload demands.
- Increased risk of virus transmission to and from residents or clients.
- Understaffing.

When compared with current employees, resigned employees more often reported understaffing as a work-related challenge (43% of resigned employees versus 33% of current employees). Resigned employees were also more likely than current employees (18% versus 8%) to identify as a challenge their organizations' lack of protocols or guidance on caring for residents or clients. Approximately 40% of current and resigned employees did not report any work-related challenges.

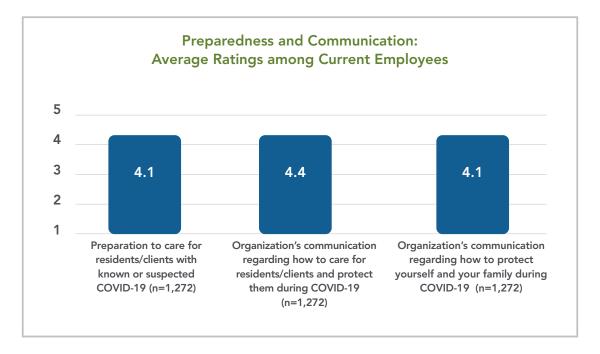
Direct care workers have felt stressed during the pandemic. On average, current employees rated their stress level at 2.9 on a scale from 1 to 5, with 5 being the most stressed. Resigned employees reported a higher level of stress, with an average rating of 3.3.



Preparedness and Communications

Direct care workers reported that their employers adequately prepared them to care for residents/patients/clients with COVID-19. Workers also indicated that their employers communicated adequately with them during the pandemic. On average, current direct care workers gave their employers a high score of 4, on a scale of 1 to 5, for:

- Preparing workers to care for residents or clients with COVID-19.
- Communicating with workers about how to care for and protect residents or clients and how to protect themselves and their family members during the pandemic.



Prevalence of Challenges by Setting

Nursing Homes: Separation from family members was the top external challenge reported by direct care workers in nursing homes. Understaffing was the top work-related challenge. Approximately four in 10 nursing home workers did not report any work-related or external challenges.

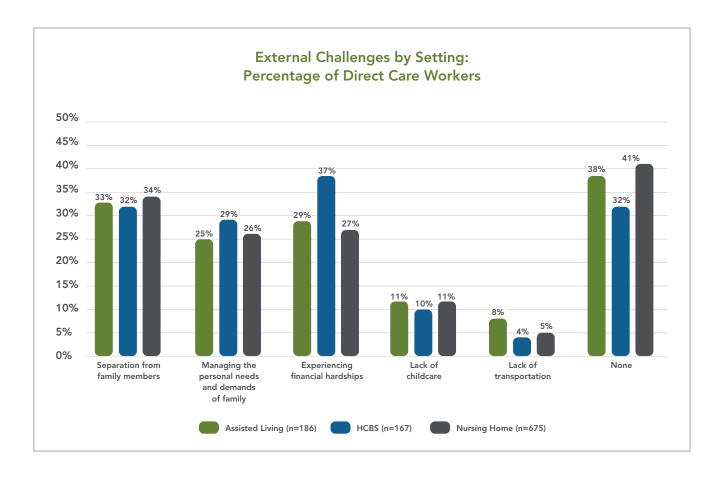
Assisted Living: Separation from family members also topped the list of external challenges identified by direct care workers in assisted living communities. Understaffing topped the list of work-related challenges. About 40% of direct care workers in assisted living did not report any work-related or any external challenges.

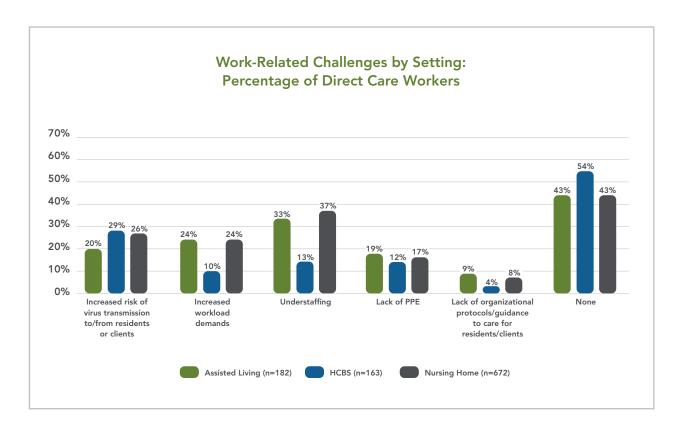
HCBS: Financial hardship was the top external challenge reported by HCBS direct care workers. Increased risk of virus transmission to or from clients was the top work-related challenge reported by these workers. More than half of HCBS direct care workers did not report any work-related challenges and one-third did not report any external challenges.

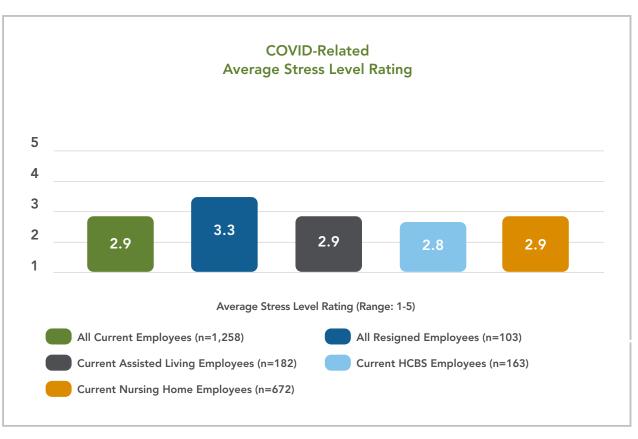
Differences by Setting: Direct care workers in nursing home and assisted living communities were statistically more likely than HCBS direct care workers to report increased workload demands and understaffing as challenges. Specifically:

- Increased Workload: 24% of nursing home and assisted living direct care workers reported increased workload as a challenge, compared to 10% of direct care workers in HCBS agencies.
- Understaffing: 37% of nursing home direct care workers and 33% of assisted living direct care workers reported understaffing as a challenge, compared to 13% of workers in HCBS agencies.

Direct care workers in all three settings had similar levels of stress, with an average rating of 3 on a scale of 1 to 5.







How Can Providers Support Stressed Workers?

This study provided practical insights into how providers of aging services can support their direct care workers during the coronavirus pandemic and future pandemics.

Wrap-Around Services

Direct care workers experience difficulties managing family needs and financial hardship. Wrap-around services can provide workers with needed support. Providers of aging services can offer that support by:

- Providing laundry services and groceries.
- Connecting workers with information and referrals to help them address specific challenges.
- Staying current on, and communicating changes in, unemployment benefits, food stamps, childcare services, and other benefits and community services.

Mental Well-Being

Providers of aging services can build the capacity of staff members to address pandemic-related challenges by supporting employees' mental well-being. This support could include offering workers access to:

- Individual counseling.
- Team member support groups.
- Mental health resources offered through partnerships with community organizations.
- De-stress rooms featuring quiet music and tips for how staff can take short breaks from stress.
- Relevant articles that normalize the emotions people may be experiencing. These articles could be included in the organization's employee newsletter or posted on a bulletin board.

Activities that cultivate a spirit of fun and camaraderie.

Staffing Levels and Workload Demands

The pandemic will last longer and have a greater impact on staffing than other, shorter-term emergencies. Providers of aging services cannot assume that issues relating to understaffing and workload demands will disappear in the near future. Instead, providers should take immediate action to increase their staffing levels by:

- Strengthening the worker pipeline by training new cohorts of workers to fill vacant positions.
- Employing temporary nurse aides to address staffing shortages and help provide resident care. In March 2020, the Centers for Medicare & Medicaid Services (CMS) waived the 75-hour CNA training and certification requirements for four months after CNAs are hired. Hiring these temporary aides is not a permanent solution to understaffing, but it can reduce current staffing shortages and support the work of experienced CNAs. Nursing homes can provide onboarding and peer mentoring to temporary nurse aides to minimize the safety risks associated with reduced training. Providers should first determine whether their state enacted the CMS waiver and what its requirements entail.
- Creating flexible and creative work schedules. Home care agencies may negotiate revised schedules with clients, cluster cases together to minimize travel time, and temporarily reduce client hours when it is safe to do so. Nursing homes and other residential care providers may also stagger shifts and allow staff to work different shifts than usual (Graham, 2020).

Access to Testing and PPE

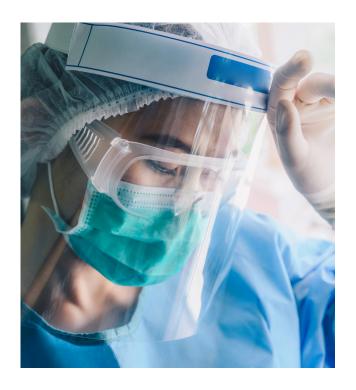
The shortages of testing and PPE have been widely acknowledged since the pandemic began. Yet, it remains imperative for providers of aging services to do whatever they can to give staff members access to these tools, to adopt policies addressing infection control and treatment, and to train staff in implementing those policies.

Conclusion

This study sheds light on the external and work-related challenges that direct care workers have experienced during the COVID-19 pandemic. Resigned employees felt several of these challenges more frequently and reported higher overall COVID-related stress levels than current employees. Nursing home and assisted living workers also experienced more challenges than HCBS employees.

Direct care workers participating in this study believe their organizations prepared them for the pandemic. Workers also gave their organizations high marks for how they communicated with employees.

Study findings suggest that providers can help mitigate some of the stress workers feel by offering wrap-around services and support for mental well-being, increasing the worker pipeline to reduce understaffing and heavy workloads, and finding ways to reduce the demands on nursing home and assisted living workers during the coronavirus pandemic.



Direct care workers participating in this study believe their organizations prepared them for the pandemic. Workers also gave their organizations high marks for how they communicated with employees.

References

Chidambaram, P., Garfield, R., & Neuman, T. (November 2020). COVID-19 has claimed the lives of 100,000 long-term care residents and staff. KFF. https://www.kff.org/policy-watch/covid-19-has-claimed-the-lives-of-100000-long-term-care-residents-and-staff/

Famakinwa, J. (2020). Coronavirus worsening workforce challenges for many in-home caregivers. Home Health Care News. https://homehealthcarenews.com/2020/04/coronavirus-worsening-workforce-challenges-for-many-in-home-caregivers/

Lee, C., Podury, A., Kaduthodil, J., & Graham, L. (2020). Long-term care facilities must prioritize immigrant workers' needs to contain COVID-19. Health Affairs Blog. https://www.healthaffairs.org/do/10.1377/hblog20200914.520181/full

PHI. (2020). It's time to care: A detailed profile of America's direct care workforce. PHI: Bronx, NY. https://phinational.org/resource/its-time-to-care-a-detailed-profile-of-americas-direct-care-workforce.

True, S., Cubanski, J., Garfield, R., Rae, M., Claxton, G., Chidambaram, P., & Oregera, K. (2020). COVID-19 and workers at risk: Examining the long-term care workforce. KFF. https://www.kff.org/coronavirus-covid-19/issue-brief/covid-19-and-workers-at-risk-examining-the-long-term-care-workforce/



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