

# Providing Health Care For Direct Care Workers

## Who are Direct Care Workers?

- **55,000 Iowans** who work on the front lines of nursing homes, assisted living centers, hospitals, hospices, in private residences and other settings throughout the state.
- They are “hands-on” – helping clients and residents eat, dress, bathe, groom, toilet, take medications and exercise. They are there to listen, show interest and demonstrate concern and compassion. They are often viewed as “family” by those they care for.
- They are among Iowa’s oldest and poorest workers:
- **Certified Nurse Aides (CNAs) earn an average of \$10.77 an hour.**
- **One in four CNAs live in a household with income less than \$18,000 per year.**
- They work in an industry with the highest number of workers age 65 and over.
- **77% live in a rural area.**
- **25% of CNAs have NO health care coverage.**
- **12% of CNAs rely on public assistance for health care coverage.**

*The BJBC Coalition is made up of a number of organizations and individuals that have some stake in stabilizing the pool of quality direct care workers. The philosophy of the Better Jobs Better Care Coalition is to be inclusive of those stakeholders who are committed to sharing our goal of nurturing and supporting the direct care worker as a means to ensure quality care for persons with chronic care needs.*



## Turnover Is Unacceptably High!

Turnover of CNAs has been estimated as high as 60% annually.

Turnover occurs due to low pay, poor benefits, lack of high quality initial and ongoing education, few advancement opportunities within the direct care field and the emotional and physical demands of the work.

## Turnover Costs!

Turnover costs dollars. Estimates are that Iowa consumers and taxpayers spend 44.61 million dollars annually to pay for the costs of recruiting and training new employees.

Turnover results in less quality of care. When the continuity of care is disrupted—when a person with a knowledge of and a relationship with a client or resident is replaced by someone new—quality and client satisfaction declines. When turnover leads to a shortage of staff, those who stay on the job have to do more work, do it faster, and do it with more stress and frustration. The impact? Rushed care. Delayed care. Forgone care.

## Turnover Can Be Prevented!

Iowans need to view and treat Direct Care Workers as valued professionals, and acknowledge them with pay and benefits that reflect their worth to society, and the worth of the individuals they care for.

Iowans need to use what they are known for—good old common sense. Common sense Iowans would say that it makes NO sense to continue to spend 44.61 million dollars every year to produce what no one wants...high amounts of turnover that leads to higher costs and less quality of care. Common sense Iowans would suggest that it would be a whole lot smarter to use those same dollars to do things that would PREVENT turnover and produce a higher quality of care...things like improving pay and benefits, enhancing initial and ongoing training, and reinventing workplaces to give direct care workers a greater sense of teamwork and greater rewards for a job well done.

## If We Fail To Act

The trend lines are ominous. Americans, and especially Iowans, are living longer. Those 85 years of age and older are the fastest growing sector of our population. Baby boomers are reaching retirement age. Demand for services is growing.

The concern? When the direct care worker is most needed, there simply will not be the supply of qualified workers to meet the demand. A September 2005 report from a White House Commission on Aging summed it up this way: “We are on the threshold, and may have already crossed the threshold of a large crisis of long term care.” The report warned that the lack of qualified workers threatens to lead to a “warehousing” of elderly in nursing homes in the future.

## Where to Begin

A good start would be to focus on health coverage for direct care professionals. *Iowans would find it odd indeed to discover that those who provide the health care often go without health care of their own.*

Health care coverage is a necessity. If Iowans truly value those who care for and support their friends, neighbors and loved ones, AND if they want to encourage people to enter and stay in the caregiving profession, they must call on Iowa leaders to create ways for direct care workers to get improved access to affordable and meaningful health care coverage.

Without affordable health care, without decent pay, without a climate that truly values those who proudly wear the title of caregiver, the caregiving profession will suffer. Talented and passionate people will not enter the field, and talented and passionate people will leave the field. The quality of the service provided to those we dearly care about will suffer. The quality of the lives led by those we dearly care about will decline. Is that the future we want?

## Support from Better Jobs Better Care Coalition Members

*AARP Iowa*

*Aging Resources of Central Iowa*

*Alzheimer's Association, Greater Iowa Chapter*

*Center for Healthy Communities*

*Des Moines Area Community College*

*Generations Incorporated*

*Iowa Association of Area Agencies on Aging*

*Iowa Association of Homes and Services for the Aging*

*Iowa CareGivers Association*

*Iowa Commission on the Status of Women*

*Iowa Department of Elder Affairs*

*Iowa Department of Human Services, Bureau of Protective Services*

*Iowa Department of Inspections and Appeals, Health Facilities Division*

*Anne Kinzel*

*Northwest Iowa Community College*

*Office of Elder Rights*

*Older Iowans Legislature*

*Southwestern Community College*

*University of Iowa College of Nursing, Certification Center*

The complete version of the “Providing Health Care for Direct Care Workers—A Case Statement/Action Plan” is available from the Iowa CareGivers Association and can be accessed on their website at [www.iowacaregivers.org](http://www.iowacaregivers.org).

### For More Information:

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