**Iowa Better Jobs Better Care Program**

2007 Summary of Accomplishments

### Policy Initiatives

**Engaged Key Stakeholders:**

**BJBC Coalition:**

Key stakeholder members who represented workers, providers, and consumers came together to form the BJBC Coalition. The Coalition guided and directed the research and policy initiatives set forth in the objectives. Beyond the BJBC grant, the Coalition will function in a less formal capacity. Much of the success of the Coalition’s efforts can be attributed to an existing relationship between many of the Coalition members, and the workgroup structure that was developed around each of the grant objectives.

Future issue advocacy specific to direct care worker recruitment and retention and quality of care will be carried out through ad hoc workgroups and will include expansion of their membership dependent upon the issue.

**Coalition Members include:**

- **AARP Iowa**
  - Aging Resources of Central Iowa
  - Alzheimer’s Association, Greater Iowa Chapter
  - Center for Healthy Communities
  - Department of Inspections & Appeals Health Facilities Division
  - Des Moines Area Community College
  - Generations Incorporated/Wesley Community Services
  - IA Department of Human Services, Bureau of Protective Services
  - Iowa Association of Homes and Services for the Aging
  - Iowa CareGivers Association
  - Iowa Commission on the Status of Women
  - Iowa Department of Public Health
  - Iowa Department of Elder Affairs
  - Ankeny Neighborhood Center
  - Mid-Iowa Health Foundation
  - Northwest Iowa Community College
  - Office of the Long-Term Care Ombudsman
  - Older Iowans Legislative
  - Saluberry
  - Southwestern Community College
  - University of Iowa College of Nursing Certification Center

Iowa Better Jobs Better Care Program: A 3 ½ year, $3 million grant, was funded by the Robert Wood Johnson Foundation and the Atlantic Philanthropies. The program was established in response to growing concerns about the dramatic gap between the numbers of well educated, skilled, and committed direct care workers available and the increasing demand for the care and supportive services being brought on by the explosive numbers of people reaching retirement age over the next several years. The purpose of the BJBC program was to impact policy and practice to bring about improvements in the long term care system that would increase the recruitment and retention of direct care workers.

The study findings were used to:

1. Inform policy recommendations and support the DCW Education Task Force
2. Educate legislators
3. Identify gaps in the systems that need to be addressed during the course of the grant and into the future
4. Glean valuable information to assist in the development of programs that will aid in the recruitment and retention of direct care workers.

Reports are available at [www.iowacaregivers.org](http://www.iowacaregivers.org)
Direct Care Workers Need Health Care Too

Objective 4: Health Care Coverage for Direct Care Workers

Problem: BJBC and ICA studies reveal that:
- About 9% of Iowa’s population is uninsured and thousands more are underinsured BUT
- 25% of CNAs in Iowa’s nursing homes have no health care from any source.
- 12% rely on public assistance.
- And even though many long term care employers “offer” health care coverage, it is unaffordable to direct care workers earning between $9-11 an hour.

Outcome: The BJBC Coalition has played a leading role in health care reform efforts in Iowa by:
- Participated in the planning of Governor’s Bicentennial forum on health care reform.
- Hosted two health care reform forums including Massachusetts Day in Iowa.
- Developed a video that captures the stories of uninsured direct care workers that was shared with legislators.
- Testified at a legislative hearing regarding the plight of direct care workers and their lack of access.
- The 2007 Legislature passed legislation to create a Commission on Health Care Reform. The Iowa CareGivers Association is seeking one of the 5 consumer positions to be appointed to the Commission. A convening of conveners to determine whether there are benefits to creating a Coalition of Coalitions, particularly in readiness for the upcoming presidential caucuses with a common message with which to educate candidates.
- Collaborated with various other groups on health care reform initiatives (Citizens for Health Care; Health Care for Workforce; Education, etc.)

Visit the ICA website at www.iowacaregivers.org for related reports and links to other Health Care Reform activities in the country. Also view the “Real Stories” video of 3 direct care workers’ health care stories.

Practice Initiatives

Objective 5: Demonstrate reduced direct care worker turnover rates through external (community) and internal (workplace) interventions.

Interventions included:
- Direct Care Worker Leadership
- Direct Care Worker Mentor Program
- Provides more meaningful orientation and work experience for new CNAs/DCWs.
- Provides an opportunity for professional growth for veteran DCWs seeking advancement within the field of direct care.
- Note: The program was not modified and tested in the home care setting.
- Hartman Color Code (personality/communication systems)
- Information Exchanges among all BJBC provider sites that included administration, CNAs, Mentors, other members of the care team.
- Access to various other tools and resources

Lessons Learned:
- Success of the Mentor program is contingent upon clear expectations, and the full commitment from administration, management, and charge nurses.
- Planning for the implementation of the program is critical.
- The rural nature of our state and the inflexible schedules of DCWs present challenges in the way of program accessibility. It’s difficult to make the program accessible onsite while also trying to provide opportunities for DCWs to receive education outside the workplace where they can benefit from networking with peers.

Practice Initiatives

Objective 6: Dissemination of BJBC Program Results

Methods of dissemination of BJBC Program information included: presentations, news releases, press conferences, forums, newsletters, web sites, features in state and national publications. In addition, the Comedy Program, funded by the Robert Wood Johnson Foundation, afforded us the opportunity to attend a training on how to “connect” with the members of our Congressional delegation to showcase the successes of the BJBC program and to ask their assistance in sharing the information and furthering the efforts. Meetings with 5 Iowa members of Congress were arranged by the BJBC program staff which yielded some positive responses to the following requests: 1) letter of a Congressional Record Statement; 2) letter to the editor on health care reform by a congressman which ran in The Des Moines Register on the day of one of our health care reform forums; 3) site visit to one of the BJBC provider sites; 4) letter of support for IA’s fund development campaign case statement to establish a Center for Excellence in Caregiving; 5) assistance in seeking grant opportunities.

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Policy Initiatives Continued

Major Systems Changes

Objective 2: Standardize Direct Care Worker Education Requirements

Objective 3: Expand the Iowa Nurse Aide Registry

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