Caregiver shortage demands focus on solutions, not status quo

John Halle, a better Iowa contributor

This new legislation is in session. Its job is to make Iowa a better place to live. One of the ways legislators can do so is by addressing the growing crisis in the paid caregiving workforce.

I’ve written about the problem: that we don’t have enough qualified direct care workers — home health and home care aides, certified nurse aides, personal support attendants, etc. — to meet the demand from a growing number of aging seniors and those with serious disabilities.

Why? Because direct care is tough work that isn’t rewarded with the pay, benefits and training deserved.

And the impact on Iowa? With thousands of vacancies in direct care positions across Iowa, services are being delayed, denied or of poor quality.

The good news for the legislature, and for Iowans, is that solutions exist. Here are some of them.

Give this workforce the respect it deserves.

Direct care work is often viewed in a negative light. It’s frequently described as unimportant, entry-level work that anyone can do. The workers are considered to be “unskilled” or “unsure”, and are compared to babysitters or migrant workers.

It’s time to do a 180 — to start viewing and treating these workers with the same degree of dignity and respect we give to other occupations.

The reality is that high-quality direct care workers are priceless. They possess unique skills and knowledge that cannot be bought — compassion, caring, patience, tolerance and empathy. And, they have the willingness to perform difficult work that most highly educated “professionals” would not and could not do — assist, support and nurture their fellow human beings who desperately need help.

Start paying for what we want.

Historically, most employers of direct care workers have made minimal investments in their employees and accepted high rates of staff turnover that have averaged 50 percent annually. They’ve done so in part because the payment systems of government enabled; tax solars have paid for the volumes of services; rather than the quality — promised — and reimbursed the costs associated with losing employees and hiring new ones.

If the systems were smart enough to pay employees for what’s wanted — high quality services and high customer satisfaction — employers would see more attention being given to hiring and retaining exceptional staff who produce high quality care.

To make this happen, all those who pay for the services — consumers, insurance companies, managed care companies and policy makers in state government — must begin to insist on and pay for quality.

Embrace Innovation.

The situation will not improve if we continue to do what we’ve always done. We’ve got to try new approaches.

Here’s just one: Create a Community Care Corps throughout Iowa that encourages students — and people of all ages — to give back to their community by serving some of its most vulnerable citizens. Give them exposure to the direct care profession and encourage them to make it a career. Such a program could provide a unique opportunity for collaboration among state and local governments, high schools and colleges, health and long-term care employers, and philanthropic organizations.

So, what’s preventing us from acting on these things? Two fundamental obstacles have stood in the way. In the final installment of this series, I’ll show them with you and challenge Iowa to address them. Thanks for reading, and thanks for caring.