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# **Nursing and Allied Health Trust Report FY21 – FY22**

**April 2022**



## Legislative Mandate

Line item 4000-0020 of Chapter 24 of the Acts of 2021, the Fiscal Year (FY) 2022 budget, requires the Executive office of Health and Human Services to submit a report on the expenditures out of the Massachusetts Nursing and Allied Health Workforce Development Trust Fund and both short and long term strategies to increase the number of public and private higher education faculty and students who participate in programs that support careers in fields related to nursing and allied health

### I. **Commonwealth Medicine was funded at \$103,371 (FY21) and \$115,182.28 (FY22).**

Throughout FY21-FY22, Commonwealth Medicine (CWM) worked collaboratively with the Executive Office of Health and Human Services (EOHHS) to develop and support strategies that respond to the healthcare workforce including, but not limited to, COVID-19 Long-term Care Portal, Chapter 257 rate review, and the Supplemental Nutrition Assistance Program (SNAP) grant, *Leveraging SNAP Path To Work To Advance The Commonwealth's Direct Care Workforce Grant* (SNAP Path to Work). In addition, CWM supported the priorities of the MA Healthcare Collaborative, Nursing, Direct Care, and Behavioral Health subgroups.

## Special projects

**COVID-19 Long-term Care Portal:** In April 2020, EOHHS and Elder Affairs (EOEA) convened a meeting with Commonwealth Medicine (CWM) and Northeastern University (NEU) to plan an immediate strategy to address urgent staffing demands at Massachusetts' long-term care (LTC) facilities (nursing homes, rest homes, and assisted living centers). Referred to as the LTC Portal Operations Team, EOHHS, EOEA, NEU, and CWM met daily to design a strategy to collect demand from Massachusetts (MA) 300 LTC facilities and recruit and match nine different worker types: certified nursing assistants (CNAs), licensed practical nurses (LPNs), registered nurses (RNs), social workers (SWs), physical and occupational therapists (PT/OT), physical and occupational therapy aides (PTA/OTA), and activities coordinators. The strategic plan included development of a web-based staffing platform (the Portal) and a matching algorithm to control the distribution of the limited available workers.

CWM developed and maintained the web-based Portal. The Portal provided a system for LTC facilities to enter their emerging demand for credentialed workers and for workers to share their availability. The matching algorithm, developed by NEU, ensured equitable distribution of workers across LTC providers; high risk facilities with COVID outbreaks amongst staff and residents were prioritized.

<b>Worker Type</b>	<b>Total Demand</b>	<b>Total Workers</b>
RN	6,303	1,476
LPN	6,565	591
CNA	13,082	1,358
OT	309	68
OTA	96	32
PT	158	93
PTA	97	37
SW	271	45
AC	584	224
RCA	1,051	2,091
<b>Total</b>	<b>28,516</b>	<b>6,015</b>

From April 2020 to June 2021 the Portal collected 2,212 intakes from facilities across thirteen Massachusetts counties. The LTC facilities demand for workers totaled 28,516 with CNAs having the greatest demand at 46% (n=13,082). When comparing the total demand to total number of workers that entered availability into the Portal, the number of workers remained low (6,015). The Portal's ability to collect regional and worker demographic data proved invaluable as the COVID response team was able to monitor the fluctuating supply (workers), compare to the demand (facilities) gaps, and then target these areas for recruitment.

The LTC portal represented one of several strategies employed during COVID-19 to support LTC facilities. The web-based Portal and the matching algorithm allowed the state to facilitate the distribution of workers during the pandemic. The targeted allocation of workers was imperative, specifically for facilities experiencing acute staffing shortages. The partnership between EOE, EOHHS, CWM and NEU proved to be invaluable in supporting facilities to address their worker demands during this unprecedented time of need.

**Chapter 257:** CWM worked collaboratively with EOHHS to conduct a Human Service Workforce Analysis to support the FY21 Chapter 257 (C.257) Rate Review. C.257 places authority for determination of reimbursement for human and social services with the Secretary of EOHHS.

CWM tasks included data collection of MA provider organizations (job titles, wages, and vacancies); cross sectional analysis of state labor data, workforce data from the Bureau of Labor Statistics (BLS), BLS Occupational Employment Statistics, and O\*Net data bases. Individual provider data was obtained through survey data and interviews conducted by the University of Massachusetts Boston. The outcomes of the Human Service Workforce Analysis project informed the C.257 rate review process.

*Direct Care:* From FY21 through FY22, CWM has supported EHS on the Health Care Collaborative Direct Care Workgroup, offering expertise and insight for the Direct care/CNA Project, Executive Office of Labor and Workforce (EOLWD) CNA project. CWM tasks include identifying and recommend to EOHHS and EOLWD strategies to extend the current career pathway for direct care workers to achieve a nurse aide certificate. To accomplish this task, CWM guided and managed a Rappaport Fellow to complete a comprehensive study of the CNA workforce. The Rappaport CNA study objectives included:

- Review training and certification requirements for CNAs and HHAs for neighboring states
- Review advanced knowledge and skills training for CNAs and HHAs for other states
- Develop recommendation for advanced skills required to increase CNA employability (nursing home, assisted living, acute and post-acute care)
- Develop recommendation for incorporating acute care experience for CNA and HHA training in Massachusetts

In Massachusetts, workforce recruitment and retention is a critical issue particularly for long-term care facilities. CNAs serve a critical role in providing care to older adults and people with disabilities who reside in long-term care facility settings or are receiving temporary care in a hospital or rehabilitation center. MA has seen a 2% decline in the number of CNAs, as of May 2019, there were approximately 39,900 nursing assistants working in a variety of settings, down from 40,700 in May 2014. However, the demand for nursing assistants is anticipated to grow by 8% between 2019 to 2029.

The outcomes of the Rappaport study were presented to the Healthcare Collaborative leadership and continues to drive ongoing CNA pathway initiatives.

*Behavioral Health:* From FY21 through FY22, CWM responded to the Healthcare Collaborative Behavioral Health Goal to create a standardized peer support to mid-level position on the behavioral health career ladder, and in alignment with the Behavioral Health Roadmap to increase client access to Peer Supports while promoting a career pathway for entry level behavioral health workers.

To accomplish these two goals, CWM gathered information to develop a comprehensive list of peer support roles and associated pathways across state and non-state programs, and core competencies for entry-level and mid-level positions. The tasks included:

- A. Researching new and existing peer roles and associated career pathway opportunities across MA provider network and within other state models
- B. Collecting and analyzing information to inform list of core competencies for entry-level positions, and support a career pipeline to mid-level positions

- C. Identifying credentialing requirements for entry-level and mid-level roles on career pathway

This project is ongoing.

**II. Quinsigamond Community College was funded at \$98,677 (FY'21-FY'22) and Springfield Technical College was funded at \$134,058 (FY'21-FY'22).**

**SNAP Path to Work:** In May 2019, the NAHI Trust solicited responses from community colleges to create or expand direct care workforce training offered under the Department of Transitional Assistance Supplemental Nutrition Aid Program ([SNAP Path to Work](#)) Program, leading to increasing allied health employment opportunities in the Commonwealth. The SNAP Path to Work program is the Commonwealth's Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) program.

The goal of the *Leveraging Snap Path to Work To Advance The Commonwealth's Direct Care Workforce Grant* was to support the growth of existing SNAP Path to Work programs or to assist starting up new programs within community college settings.

The objectives included:

- A. To create a sustainable source of Direct Care Worker (DCW) training funding for community colleges by leveraging federal reimbursements through the SNAP Path to Work program;
- B. To increase the recruitment of SNAP participants into direct care skills-training and Wrap Around Support Services, such as transportation, childcare, English for Speakers of Other Languages (ESOL), and benefits planning, which EOHHS anticipates will lead to sustained employment and improved economic stability; and
- C. To provide direct care workforce core competency training that aligns with a healthcare career pathway, in partnership with long-term care employers such as home care agencies and long-term care settings to promote job placement and retention (e.g. EOHHS Personal and Home Care Aide State Training (PHCAST) ABCs for Direct Care Worker training, PHCAST Nurse Aide Bridge, or CNA).

In FY21, NAHI Trust issued one-year grants to two community colleges: Springfield Technical Community College (STCC) and Quinsigamond Community College (QCC). However, due to the unforeseen challenges of the COVID-19 Pandemic, the SNAP Path to Work grant programs were extended to December 2021. CWM managed the ongoing activities of the SNAP Path to Work grantees and provided support as needed to ensure their success.

The total outcome of the SNAP Path to Work Grant includes:

<i>Provider</i>	<i>Program Name</i>	<i>Participants Served</i>	<i>Award</i>	<i>Claim Amount</i>	<i>Federal 50/50 Reimbursement*</i>
<i>QCC</i>	<i>CNA/HHA</i>	<i>266</i>	<i>98,677.00</i>	<i>51,756.22</i>	<i>25,878.11</i>
<i>STCC</i>	<i>CNA II</i>	<i>46</i>	<i>149,906.02</i>	<i>134,058.05</i>	<i>67,029.04</i>
<b><i>Total</i></b>	<b><i>CNA</i></b>	<b><i>312</i></b>	<b><i>248,583.02</i></b>	<b><i>185,814.27</i></b>	<b><i>92,907.15</i></b>

QCC proposed to create a Certified Nursing Assistant/Home Health Aide (CNA/HHA) training program focused on preparing SNAP recipients for employment and supporting their move to self-sufficiency in the Southbridge area. The Direct Care program aimed to solve a substantial, unmet need for CNAs. To support learner success, QCC used the I-Best model to integrate supplemental classroom instruction to strengthen basic language skills during technical skills instruction. Workplace readiness training was provided that included employer expectations, effective communication, time management and the BOUNCE readiness program. In BOUNCE, participants learned interpersonal skills development, resume and cover letter preparation, as well as job interviewing skills, networking, negotiation, business etiquette, ethics, and presenting themselves for success. Clinical internships provided participants with real life workplace experiences to reinforce classroom lessons and classroom instruction. Career preparation workshops and seminars were integrated into classroom instruction.

They included completing career exploration, resume development, interviewing skills, what to expect from employers, what employers will expect from participants and time management. Job search and job placement activities were used to reinforce classroom lessons and activities, particularly employer expectations, effective communication and time management, and provided employers with the opportunity to observe the participants in the workplace and evaluate their skills, attitudes and demeanors for potential employment. Organized virtual career fairs with area employers and students were given the opportunity to interview via Zoom. Attendance was mandatory for students.

STCC sought to become a new SNAP provider through the SNAP Path to Work program. As a new provider, STCC established a CNA II program that prepared SNAP recipients to take the MA State board exam to become a CNA. To support learner success and reduce attrition, wrap around supports, such as case management, career planning, childcare, ESOL courses, benefit planning, transportation, books, training materials, certification fees, work clothes, tools, and equipment. In addition, workforce readiness training included, but was not limited to work readiness, communication, cooperation, problem-solving and initiative.

### **III. Nursing Council of Workforce Sustainability FY'22 (\$499,179)**

The Executive Office of Health and Human Services executed an Interdepartmental Service Agreement (ISA) with the UMass Chan Medical School's (UMass Chan) Commonwealth Medicine (CWM) division to operationalize the Nursing Council on Workforce Sustainability

(NCWS) as envisioned by the Massachusetts Healthcare Collaborative, jointly through the work of the EOHHS, the Executive Office of Labor and Workforce Development (EOLWD) and the Executive Office of Education.

The NCWS will address challenges faced by the nursing workforce in the Commonwealth of Massachusetts by convening stakeholders from across the state to work together to drive change and improve the supply of nurses in the workforce.

CWM's priority was to work with EOHHS to develop a recruitment and hiring schedule for the NCWS executive director and related staff by December 1, 2021. The NCWS executive director position recruitment began in October 2021, and Andrea Bresnahan, DNP, was hired on December 13, 2021.

Since then, Bresnahan has worked with the CWM leadership team and state partners to:

1. Understand the work of the Massachusetts Healthcare Collaborative to date, including reviewing available data, reference materials, and other prepared documentation.
2. Organize a team of staff to work with her to support initial NCWS objectives (see Attachment B). The team includes data analytics and data visualization subject matter experts, project management resources, and finance support personnel.
3. Define a budget tracking system for FY22 and FY23 financial management and financial trend analysis to inform long-term sustainability via the pursuit of alternative funding solutions.
4. Develop key relationships with advisors from EOHHS, EOLWD, and the Organization of Nurse Leaders (ONL), including Lauren Peters, JD, undersecretary for health policy, EOHHS; Patricia Yu, PhD, senior director of healthcare workforce policy, EOHHS; Jennifer James, MCP, undersecretary for workforce development, EOLWD; and Amanda Oberlies, PhD, chief executive officer, ONL.
5. Initiate internal strategic planning activities, including reviewing and assessing initial NCWS goals and strategic priorities as identified in the ISA.
6. Commence identification of key stakeholders for initial meet-and-greet sessions and ongoing engagement.