

# There was a pandemic, and I...

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THE DIRECT CARE WORKFORCE CRISIS FROM THE WORKERS  
PERSPECTIVE, INTRODUCTION BY A PERSON-SERVED



*The MI Choice Waiver is a program for persons whose healthcare needs would typically require them to live in a skilled nursing facility (nursing home) and at the same time have limited income and assets which qualify them for Medicaid*

A MI-Choice Waiver participant  
talks about his worker's predicament

After a decade of working for  
person-served using "self-  
determination" the direct care  
worker contracts Covid-19 for a  
2<sup>nd</sup> time and is unable to work

A MI-Choice Waiver participant  
talks about his worker's predicament

Person-served goes w/out care for  
4 weeks as *Waiver Agent* claims he  
"should have had a back-up plan"

A MI-Choice Waiver participant  
talks about his worker's predicament

Person-served spends 6 weeks at  
inpatient rehab receiving daily IV  
antibiotics to treat life-threatening  
infection

A MI-Choice Waiver participant  
talks about his worker's predicament

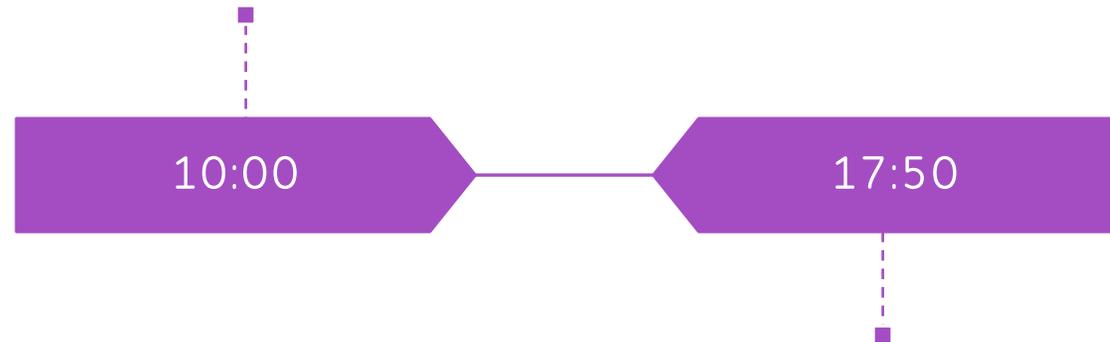
Intervention by advocates leads to  
intermittent solutions to meet the  
personal care and homemaking  
needs of person-served once  
discharged

A MI Choice Waiver participant talks  
about his worker's predicament

Nearly 6 months after this  
disruption began, the direct care  
worker who contracted Covid-19 is  
still unable to work

A MI-Choice Waiver participant talks about his worker's predicament

Worker started at \$10.00 in 2011. When she contracted long haul covid in May 2021 she was making \$12.50/hr.



The institutional (Nursing Homes, Assisted Living, Hospitals, Rehab Facilities) competitive wage currently is \$16.50-\$17.50/hr.

A MI-Choice Waiver participant  
talks about his worker's predicament

Worker was unemployed for 3  
months while I (person-served)  
was hospitalized for months, had  
no income and was denied  
unemployment.



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THE DIRECT CARE WORKFORCE CRISIS FROM THE WORKERS  
PERSPECTIVE

A direct care worker for adults with disabilities ends up needing help

A 29-year old female direct care worker shares an apartment with her spouse in a rural community



A direct care worker for adults with disabilities ends up needing help

- Direct care worker provides community living supports to disabled adults by day, *and*
- Provides in-home help to older adults as a second job to supplement her income

A direct care worker for adults with disabilities ends up needing help

Insufficient household income and medical bills they can't pay, lead the couple to bankruptcy, just before the Covid-19 pandemic

A direct care worker for adults with disabilities ends up needing help

Despite universal precautions and being provided personal protection equipment (PPE) from employer, direct care worker contracts Covid-19

Worker has extended recovery from the virus and is labelled a “long-hauler” exacerbates pre-existing chronic health conditions

A direct care worker for adults with disabilities ends up needing help

A direct care worker for adults with disabilities ends up needing help

- Worker loses her housing arrangement
- Worker loses job(s) because she's too ill to work
- Worker is denied food assistance (Bridge card) from DHS because the ex/spouse still shares the apartment

A direct care worker for adults with disabilities ends up needing help

Nearly 6 months later, former direct care worker's health has deteriorated to a point where the University of Michigan health system determines her condition is life limiting, and she will no longer be able to work

And

A direct care worker for adults with disabilities ends up needing help

Father of direct care worker cashes in a life insurance policy to provide financial supports to ailing daughter

A direct care worker for adults with disabilities ends up needing help

Advocates are in the process of assisting the former direct care worker apply for Social Security Disability



# There was a pandemic, and I...

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THE DIRECT CARE WORKFORCE CRISIS FROM A TRAINER'S  
PERSPECTIVE



- I had the privilege of being able to help MID Michigan College design and test a short-term, non-credit training for direct support professionals to meet the needs of employers who had approached the college in 2019 seeking solutions to the direct care workforce crisis

Provided face-to-face training for  
direct care workers during 2020

DSP-1 teaches communication  
techniques, ethics, and ways to  
assist older adults and people with  
disabilities at home and in the  
community

Provided face-to-face training for  
direct care workers during 2020

Melds some components of  
Community Mental Health group  
home training (CMH) with best  
practices for supporting older  
adults emphasizing person-  
centeredness, ethics, and  
communication

Provided face-to-face training for direct care workers during 2020

Links participants to the National Association of Direct Support Professionals (NADSP) and the e-badge accreditation process where trainees demonstrate their competencies and receive certifications

Provided face-to-face training for direct care workers during 2020



Provided face-to-face training for  
direct care workers during 2020

- All trainees had a high-school diploma, or a GED
- Several, had completed college coursework and/or were enrolled in higher education

Provided face-to-face training for  
direct care workers during 2020

Nearly all the trainees I met fit into what is the ALICE population, a United Way designation defined as persons who are Asset-limited, income constrained, but employed

Provided face-to-face training for  
direct care workers during 2020

Persons meeting the ALICE  
definition, are poor, but live just  
above the federal poverty line

Provided face-to-face training for  
direct care workers during 2020

Trainees in some cases tended to be impacted negatively by social determinants of health such as access to fresh/healthy food, smoking, obesity, etc.

# Provided face-to-face training for direct care workers during 2020



25 direct support professionals attended a two-week face-to-face training on a college campus



DSP-1 was offered 5 times during the calendar year:



Trainees came from six counties



3 people had experienced homelessness, not counting others who were “doubled-up” or couch surfing



Several had contracted Covid-19 in the early months of the pandemic



Most had lost income as a result of being quarantined at some point during the pandemic, and/or as a result of being exposed



Nearly everyone had lost someone close to them, or within their community to the virus

Provided face-to-face training for direct care workers during 2020

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Most were juggling family responsibilities including minor children at home, and/or were responsible for family caregiving of older adults

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Some faced the impossible situation of finding ways to implement “online learning” for their children in rural areas without hi-speed Internet and/or adequate computer equipment

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No one seemed to be hungry, the state’s added funding to BRIDGE cards seemed adequate for both workers (who were eligible) and for persons-served

# Provided face-to-face training for direct care workers during 2020

Nearly all thought their employer was doing a good job managing the pandemic, and were eager to come to class to learn and share

Health insurance also seemed to be surprisingly stable, as a benefit from the employer and/or as a combination of that and Medicaid MI Child

Money was tight for most, if not all AND we continue to lack a universal mechanisms for providing “paid time off” to workers who become ill or unable to work

## Final Thoughts

- Direct care workers are not “*in it for the money*” the \$2/hour addition for essential workers was a welcome offset to the added emotional and physical stress of continuing to work face-to-face in mostly unpredictable conditions caused by the pandemic

## Final Thoughts

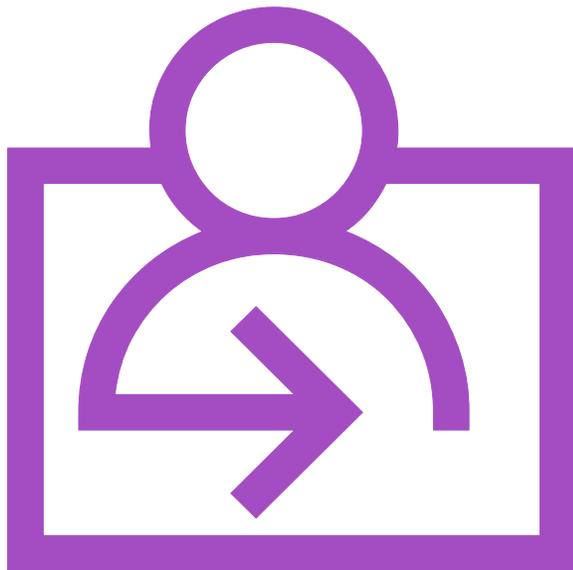
Technology and society has evolved away from rote, task-oriented training to using person-centered thinking, communication and being aware of human needs and the intuitive cues that help the worker best support the person served

## Final Thoughts

- Providing home and community-based supports regardless of how they are funded continues to be:
  - physically and mentally strenuous
  - involves creativity as they work for days/weeks/months and sometimes years on the smallest of accomplishments towards goals of the person served
- Requires competent and confident workers willing to provide personal care, homemaking companionship as well as transporting, engaging, and otherwise keep people involved in meaningful ways in their communities

## Final Thoughts

- For \$850/trainee DSP-1:
  - Helped the worker demonstrate and validate their competency as a direct support professional
  - Reduced staff turnover for the employer and provided an opportunity to explore best practices in caregiving in a classroom setting
  - May open doors to higher paying careers
  - Strengthened the workforce



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