

FOR IMMEDIATE RELEASE: March 25, 2008

Vermont Legislative Study Tackles Direct Care Workforce

Study Reveals that Wages, Health Coverage, Training are Keys to Retention

Montpelier, VT—An impending health care crisis has not gone unnoticed in the Green Mountain State. The number of Vermonters age 65 and older is expected to double between 2005 and 2030 while the direct-care workforce continues to decline. A new study funded by the Department of Disabilities, Aging & Independent Living, The Community of Vermont Elders, and PHI has made nine recommendations to help avert this crisis. The Legislative Study of the Direct Care Workforce in Vermont reveals that wages, benefits and training are critical to retaining workers in this field.

LEGISLATIVE STUDY RESULTS

The study analyzed survey responses from 1,700 direct-care workers in Vermont regarding wages, benefits, training, and career development. Key findings include:

- Only half of the respondents expect to receive a raise. The forces of inflation, without annual cost-of-living increases, actually decrease wages over time. The responses show that the higher the wage, the longer caregivers remain in the profession.
- Only one-third of direct-care workers in Vermont receive health insurance coverage as an employment benefit. However, workers with employee-sponsored health coverage remain in their jobs an average of 2.5 years longer.
- Only 42 percent of respondents received formal job training. Those caregivers who do receive professional training remain in their jobs significantly longer.
- Direct-care workers currently see few opportunities for advancement because of a lack of standardized and portable curricula and credentials. However, national research shows that workers who receive training, recognition, and advancement opportunities tend to remain in their profession.

Other results from the study show that 64 percent of Vermont's current direct-care workers are over the age of 40.

In anticipation of the report, workforce and consumer advocates (the Community of Vermont Elders, the Vermont Association of Professional Care Providers, the Vermont Center for Independent Living and PHI) joined forces at a recent town meeting that featured Vermont Senator Bernie Sanders, members of the community, and direct-care workers, who gathered to address the need to support caregivers.

Several direct-care workers spoke candidly about the profession, noting the low wages, poor benefits, and lack of training for what is a remarkably difficult job.

"I've been working as a direct-care worker for 23 years. It can be back-breaking and emotionally wrenching work," said Diane McGill, a licensed nursing assistant at Visiting Nurse Association of Chittenden and Grand Isle Counties. "We are caring for people whose lives have been drastically altered due to debilitating conditions such as spinal cord injuries, multiple sclerosis, cerebral palsy, mental disorders, etc.

“Why do I do it? I guess it’s in my heart. I do it because I make a difference in people’s lives. They’re so grateful for the help, whether that involves physically moving them with a lift or something as small as picking up a pencil off the floor. When I make them smile or laugh, that makes my whole day.”

Deborah Lisi-Baker, the executive director of Vermont Center for Independent Living, spoke about the need to improve the lives of caretakers to address the current and expected future declines of the workforce.

“Direct-care workers, whether they work in nursing homes or private homes must be compensated for their time and recognized for the critical work they perform in our communities,” said Lisi-Baker. “In order to retain direct-care workers and attract more young people into the field, we must provide – at a minimum – livable wages, training, and benefits such as health insurance and a chance to advance.”

Direct-care workers provide crucial hands-on assistance to persons who are unable to perform basic activities of daily living (ADL) that many take for granted. Examples of ADLs include getting out of bed, attending to personal hygiene, eating, and other such tasks. Some people need help communicating, remembering, or simply engaging in meaningful activities. These workers provide 80 to 90 percent of the hands-on care for Vermont’s elders, children and adults with disabilities, and persons with chronic conditions.

PHI, a nonprofit organization that supports quality long-term care by improving direct-care jobs and served on the study group’s advisory board, notes that the Vermont study echoes their findings that direct-care workers are truly invested in their work and want to make a positive difference in other people’s lives.

However, PHI also notes that the common industry practices—including low wages, few opportunities for advancement, lack of training, and inadequate benefits—make it difficult to attract new workers and retain current ones in this field. This problem will only grow in the future, unless the state focuses on improving the quality of direct-care jobs.

For more information on this study, visit www.dail.vermont.gov/dail-publications.

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