

Editorial

From the Heart: Thank You to Home Health, Home Care, and Hospice Aides!

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The May issue of *Home Healthcare Nurse's* (HHN's) theme was listed as an "Aide Focus"—the Editorial Themes of HHN are available online at the HHN Web site, which is <http://www.homehealthcarenurseonline.com>, and are listed over a year in advance of every issue. In almost all issues, prospective authors submit topics and manuscripts and usually identify a specific month that they believe their article would best fit. For an example, this week an article was submitted for the October issue with the theme for that issue being "Emerging Best Practices in Home Healthcare." Sadly, this May issue had no such submissions on the topic of aides and important aide-related topics—such as aide retention, ongoing education, clinical ladders, specialty programs, hospice aides, programs where aides can continue their education should they wish to be LPNs or RNs, and the like!



So—I would like say a few words about aides and their contribution to excellence in home healthcare and hospice—First, we need them and the numbers support that we will continue to need more aides! As the author of two aide-related books—one an aide's handbook and the other for the supervisor or aide coordinator—I get many letters from aides and their managers. I wonder as nurses age (myself included) and there are not as many of us "coming up" . . . that we may need to rely on our aide colleagues—even more. With reimbursement cuts to hospice and home care, the aides again truly need to be seen as and act as our "eyes and ears." And we need to care for and support these team members with ongoing education, programs, and other innovations that make them stay in the home care and hospice industry. I attended a meeting last October in New Jersey sponsored by Paraprofessional Health Institute (PHI) that highlighted innovative programs for aides and organizations that enhance improvement related to retention. At that meeting I heard many presentations, all related to aides and their support. One of the presentations was given by Marki Flannery. In this issue, Marki authored "Creating and Sustaining an Effective Coaching Culture in Home Care: One Organization's Performance Improvement Related to Aides and Retention." In fact, I believe this article has implications for retaining and supporting all team members—including nurses, therapists, social workers, dietitians, and others. In fact, I have chosen July/August 2012 to be our next aide-focused issue in *Home Healthcare Nurse*. Readers out there who might be managers, aide supervisors, policy makers, researchers, or educators are encouraged to bring us their performance improvement and innovative models related to aides. Any and all home care information related to aides and the care they provide at home would be welcome.

The number of aide positions will continue to increase as noted below. The following is from a PHI report that addresses the direct-care workforce:

“The problematic quality of direct-care jobs continues to undermine America’s capacity to produce a caregiving workforce that can deliver the basic hands-on services and supports demanded by millions of elders and persons with disabilities needing assistance with basic daily activities and tasks,” said Dorie Seavey, Ph.D., PHI director of policy research. In 2008, there were more than 3.2 million direct-care workers—nursing assistants, home health aides, and personal care aides. By 2018, that number is projected to increase to over 4.3 million in order to meet the nation’s aging population’s demand for this workforce. Direct-care workers provide an estimated 70 to 80 percent of the paid hands-on long-term care and personal assistance for elders and people living with disabilities.

Among the findings highlighted by this year’s ‘Direct-Care Worker at A Glance’ snapshot are:

- Majority female (89 percent), over half of the workforce (53 percent) is non-White, nearly a quarter (23 percent) is foreign born, and the average age is 42 years old.
- Almost half (45 percent) of direct-care workers live in households earning below 200 percent of the federal poverty income level;
- Nearly half (46 percent) of direct-care workers depend on public assistance, such as food stamps, Medicaid, or housing, child care, or energy assistance—up from 41 percent the year before;
- In 2009, an estimated 900,000 direct-care workers did not have any health coverage.
- The median hourly wages for home health aides have declined over the past 9 years to under \$8.00 and the personal care aides’ hourly wages have remained stagnant at \$7.50 (both adjusted for inflation).
- Less than half of direct-care workers (47 percent) had employer-sponsored health care coverage in 2009, down from 53 percent in 2008.” (PHI, 2011)

We can contribute to this solution by supporting our aide team members!

This issue of *HHN* addresses many complexities that nurses and other clinicians care for in home health and hospice. “Fecal Ostomies” provides tips on the practical management of these patients with body image and other appropriate concerns and fears. In “Do Sleep Dreams of Palliative Patients Mean Anything?” how encouraging talk about sleep dreams can be a pathway to better and more beneficial relations between patient and practitioner is discussed.

Many home health agencies (HHAs) have been using the resources that come out of the Home Health Quality Improvement Campaign. “The 2010–2011 Home Health Quality Improvement National Campaign” speaks to those resources and their utilization and enhancements that are available to improve practice and implement evidence-based interventions and management. Because home care and hospice at home care for such diverse patients and families, it is important to read “Keeping it in the Family: When Mexican American Older Adults Choose Not to Use Home Health Care Services” authored by Janice D. Crist and Patricia Speaks.

Finally, managers and clinicians will want to be aware of a new report entitled “The Role of Human Factors in Home Health Care: Workshop Summary.” The site describes the book as “a multidisciplinary study to examine a diverse range of behavioral and human factors issues resulting from the increasing migration of medical devices, technologies, and care practices into the home. Its goal is to lay the groundwork for a thorough integration of human factors research with the design and implementation of home health care devices, technologies, and practices” (National Academies Press, 2011).

“On October 1 and 2, 2009, a group of human factors and other experts met to consider a diverse range of behavioral and human factors issues associated with the increasing migration of medical devices, technologies, and care practices into the home. [The Role of Human Factors in Home Health Care] is a summary of that workshop, representing the culmination of the first phase of the study” (National Academies Press, 2011). The workshop summary is 322 pages. The free PDF and the print copy, for \$58.50, are both available from the National Academies Press at http://www.nap.edu/catalog.php?record_id=12927

We Always Welcome Submissions!

Should you wish to contribute a manuscript or have an idea for a topic, please contact me at news@marrelli.com. And we are happy to work with first-time authors if you have an innovative program or project that you think others would also be interested in! If you would like to see some of the topics *HHN* is seeking manuscripts on, please -email me and I can send you a list of those topics. ■



REFERENCES

- National Academies Press. (2011). *Description: The role of human factors in home health care. Workshop Summary*. Retrieved from http://www.nap.edu/catalog.php?record_id=12927
- Paraprofessional Health Institute. (2011). *Press Release: Nearly half of nation's fastest-growing workforce earns near-poverty wages and depends on public benefits*. Retrieved from <http://phinational.org/archives/press-release-nearly-half-of-nations-fastest-growing-workforce-earns-near-poverty-wages-and-depends-on-public-benefits-march-2-2011/>

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