Background

Workforce recruitment and retention is one of the most pressing challenges confronting nursing home and other long term care providers today. The health care system has experienced a shortage of trained caregivers for critical roles for some time; nurses and nurse aides are among the fastest growing occupations, but supply is not keeping pace. The federal government estimates nearly 27 million people will need some kind of long term care by 2050, magnifying the workforce shortage that already exists.

Long term care was already dealing with a workforce shortage prior to COVID, and the pandemic exacerbated the crisis as staff members got sick, had to isolate, or lacked childcare options. At the same time, already thinly stretched staff members had to do more than ever before, as residents required additional one-on-one care to help prevent spread of the virus as well as fill the void of loved ones who could not visit in-person.

We have been highlighting this workforce crisis for years, including testifying before Congress twice in 2019 and incorporating the issue into our strategic plans. It is time we addressed it. We need a comprehensive strategy to recruit more health care heroes to serve our nation’s seniors and individuals with disabilities.

Proposed Solution

A multi-phased approach with incentives and supports necessary to attract, keep, and develop long term care staff by leveraging federal, state, and academic resources—a key first step to increase workforce availability.

Strategies address challenges including financial assistance for potential and current caregivers, training, educational opportunities to develop their skills, and streamlined pathways for professionals to build a career in long term care.

Financial Assistance

- Provide student loan forgiveness for licensed health care professionals who are new graduates and work in long term care (LTC)
- Provide tax credits for licensed health care professionals who work in LTC
- Develop assistance programs for affordable housing, housing down payments, and childcare
- Increase subsidies for schools whose graduates work in nursing homes for 5 years or more
- Provide incentives for mentoring and career ladder programs in nursing homes
- Provide career ladder scholarship that would encourage staff to work their way into the registered nurse (RN) or other positions in aging services
- Increase health professional trainings in needed areas (Health Professional Shortage Area) and retrain mid-career professionals to work in LTC
- Funding for universities who have shown graduation rates with direct correlation to LTC hires with retention of 2 years or more
- Provide more direct incentives to states that invest in nursing education programs to help build workforce

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Financial Assistance (cont.)

- Grant incentives at federal level for nursing homes and universities to establish formal partnerships that include:
  - Tuition-paid scholarships beginning with first year nursing students or other allied health professional students specifically entering LTC
  - Partnership with nursing homes to employ students as certified nursing assistants (CNA) (no certification required)
- Bolster emergency workforce available from local and state sources to rapidly deploy to nursing homes in need during pandemics/emergencies
- Develop national campaign to drive increased workforce supply of nurse faculty with expertise in long-term care and RNs from multiple sources and factors
- Supply grants to pay for ongoing CEU training for infection preventionists, board-certified RNs, administrators, etc.

Regulatory Solutions

- Create a pathway (including training and testing) for temporary nurse aides allowed by the current Public Health Emergency (1135 waiver) to become nurse aides
- Review state policies to reduce burdensome regulations and streamline opportunities to enhance the LTC workforce (e.g., provide facilities the flexibility to run their own CNA training programs)
- End ban on CNA training programs after a nursing home receives a civil monetary penalty (CMP) or substandard quality of care deficiency, or, at minimum, allow facilities to restart their training program when they demonstrate that they are back in compliance. Currently, nursing homes with these citations face a 2-year ban on being able to train CNAs.
- Ensure the Nurse Licensure Compact is available in every state to be able to "share" RNs across state borders
- Expedite the progression in licensed practical nurse (LPN) to RN bridge programs to increase the number of RNs
- For professional licensing boards, change the reporting for adverse events that can trigger, licensure sanctions, personal CMPs and criminal actions, which is a known barrier to recruitment and retention. These changes would not apply to rare events that are egregious or criminal in nature.
- Pass common-sense immigration reform that increases opportunities for foreign-born individuals to work in the long term care profession, including on the frontlines. Expand ability for international nurses to come to the United States.
- Adopt a universal worker policy to offer more job opportunities that support long term care facilities with housekeeping, laundry, or food service
- Request that the Department of Labor evaluate workforce availability and propose additional workforce enhancements

Funded By: Federal and state governments

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