



Washington State Long-Term Care Worker Training Workgroup

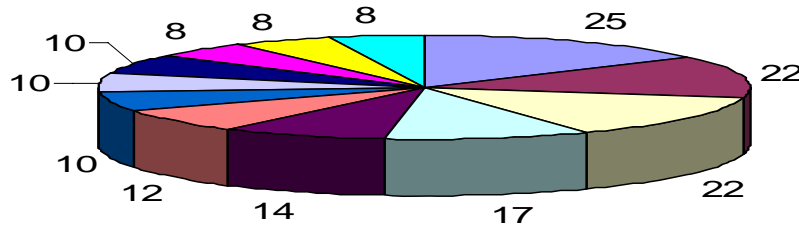
Established by ESSHB 2284

Stakeholder Input Summary

October 18, 2007

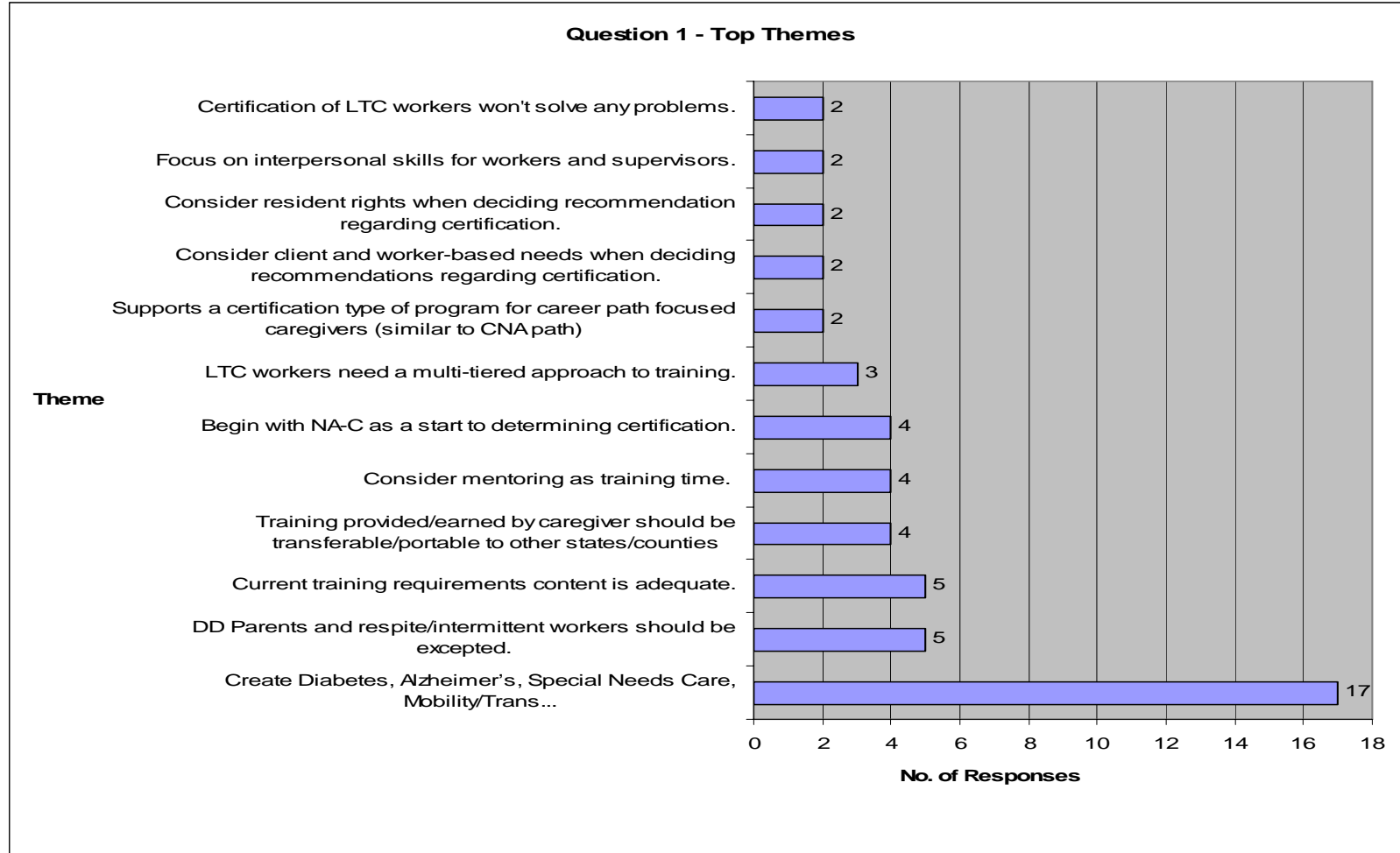
Findings: Top 12 Stakeholder Themes

Top 12 Themes



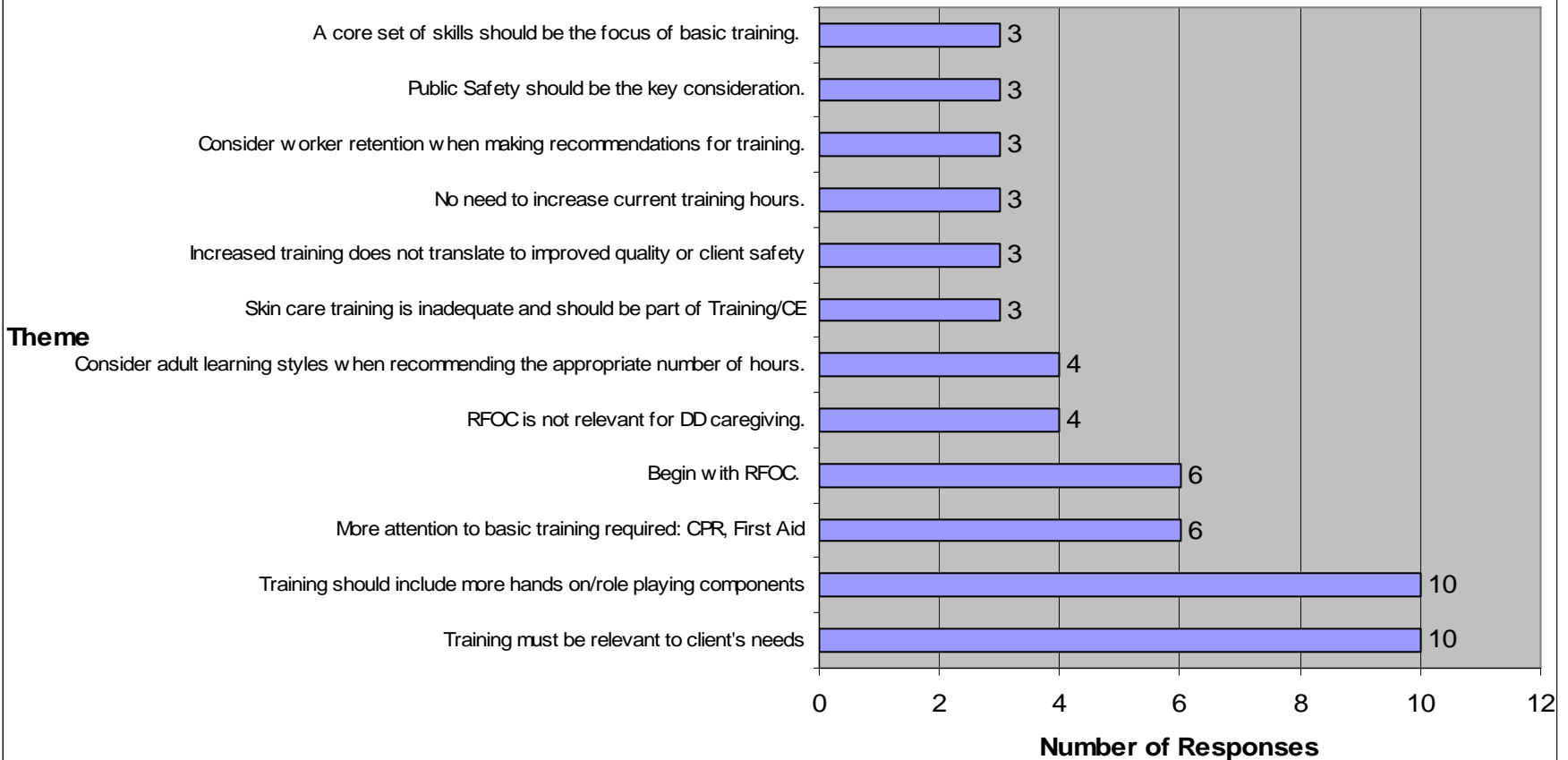
- Training/Continuing Education should be linked to the client situation/environment
- Create separate tracks for training - career oriented vs. family IP situation(s) - Competency basis
- One size fits all model will not work given the diversity of client needs (flexibility)
- Create Diabetes, Alzheimer's, Special Needs Care, Mobility/Transference, and other specialty training certification
- Costs for additional training will be shifted to employer and most likely to clients to bear
- Additional training requirements may affect worker retention/attraction (further reduce available work force)
- Adequate supervision reduces need for additional training
- Training must be relevant to client's needs
- Training should include more hands on/role playing components
- Communications between Client and Caregiver (e.g. ESS, professional boundary awareness, Right of Refusal)
- Training curriculum must be adaptable and flexible for all LTC areas, caregivers and client needs.
- Consider the cost of any additional training.

Findings: Question #1 - Certification



Findings: Question #2 - Hours

Question 2 - Top Themes



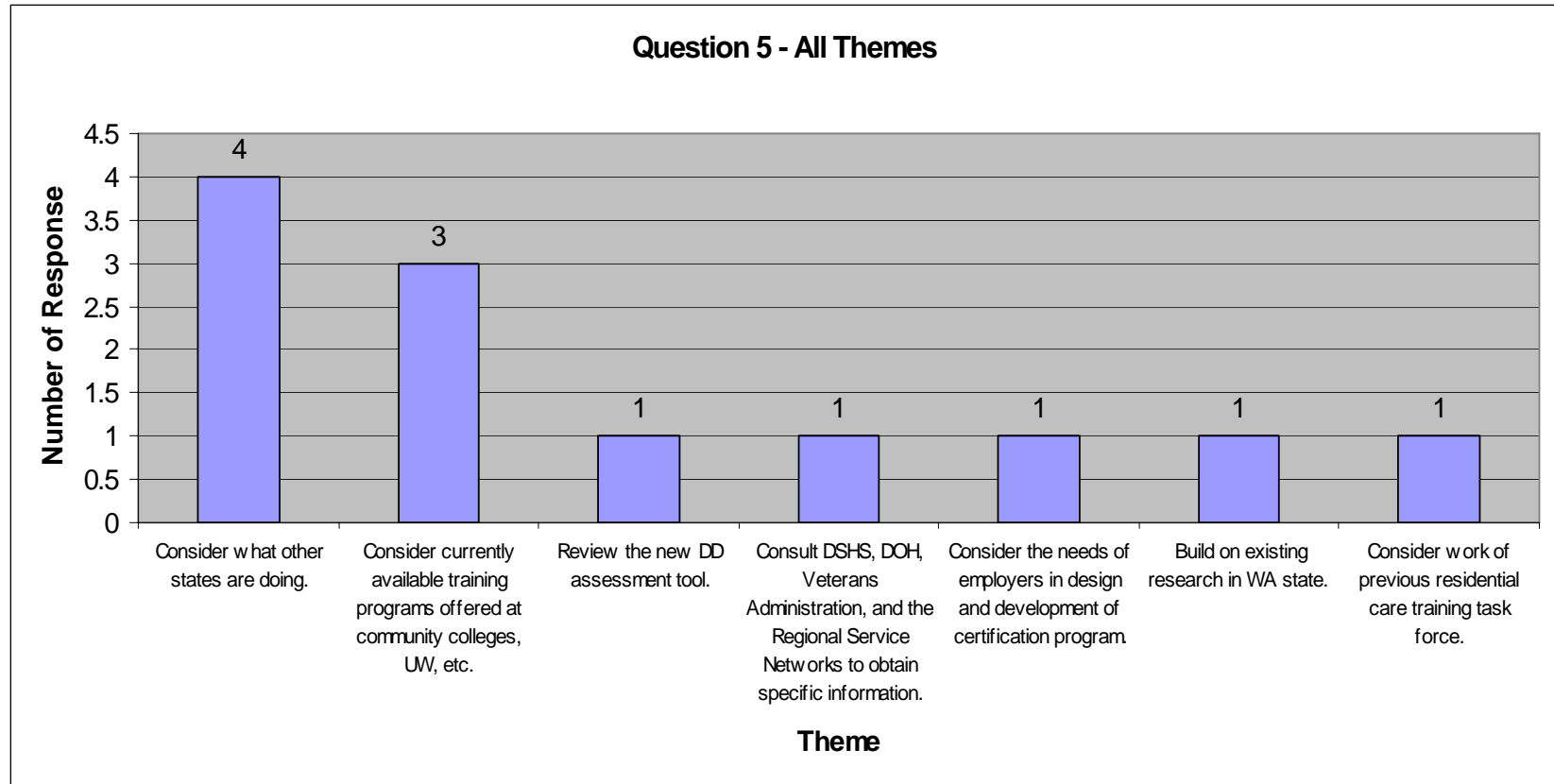
Findings: Question #3 - Content

Top Themes	General Responses
Training/CE should be linked to the client situation/environment	25
All recommendations should be consumer centric.	6
Consider barriers to access for training; don't create new ones.	5
Add basic skills for housekeeping, cooking, etc.	4
Basic practical training is needed.	4
Include culturally relevant training.	4
Consider key training criteria topics, including diversity of workforce, when recommending basic training content.	3
NA-C training is not a place to start to determine basic training curriculum.	3
HH/Pvt Duty should be exempt	3
Consider what is working in the current training requirements.	2
Consider the new LTC recipient and the expected increase, such as veteran, aging population, etc.	2
Consider technology needs for the future of LTC training.	2
Consider the consumer needs for a qualified LTC workforce in the future.	2
Curricula should be evidenced based.	2
Training curriculum, hours should be generated from CARE tool.	2
Look for a consistent program across the state and across the care delivery system	2

Findings: Question #4 - Overarching Considerations

Top Themes	General Responses
Create separate tracks for training/career vs. family IP situation(s) Competency basis	22
One size fits all model will not work given the diversity of client needs (flexibility)	22
Costs for additional training will be shifted to employer and most likely to clients to bear	14
Additional training requirements may affect worker retention/attraction (further reduce available work force)	12
Adequate supervision reduces need for additional training	10
Communications between Client and Caregiver (e.g. ESS, professional boundary awareness, Right of Refusal)	8
Training curriculum must be adaptable and flexible for all LTC areas, caregivers and client needs.	8
Consider the cost of any additional training.	8
Attempt to acquire objective data to determine the nature and degree of training issues	7
IP's do not have the same level of or access to supervision as agencies	5
Training curriculum and hours must be flexible for achieving the requirements - use different methodologies - OJT, etc.	5
Support shadow/backup training concept so caregivers can attend training	5
Mentorship program is another viable alternative to consider	4
Rural area - location of training is an issue (cost and time)	4
Training is more of an Investment that will benefit the state, employers, caregivers, and clients	3
State needs to increase funding contributions for LTC.	3

Findings: Question #5 Specific Information



Findings: Responses by Entity Type

