

# Understanding the Past to Chart the Future of Supports & Services

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**The Alliance Summit  
Beaver Run Resort and Conference Center  
Breckenridge, CO  
June 22, 2018**

**Joseph M. Macbeth  
Executive Director  
The National Alliance for Direct Support Professionals**

# Workforce Challenges

## Premise One: Not Something New

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**Workforce issues such as recruitment, retention and training of direct support workers have always plagued community services to people with I/DD.**

**There is no surplus of people willing to become direct support workers.**

*The reasons vary, but it may be because the job itself is not easy or because the industry is challenged by high turnover rates, low social value, lack of professional recognition, severe staffing shortages, lack of career ladders and opportunities for direct support workers who earn near poverty level wages.*

# Changes in Services and Supports

## Premise Two: The Times, They Are A Changin'

**Implementation of supports in homes, schools, workplaces and communities requires direct support workers to provide services in scattered sites and isolated settings, often without “site” supervision.**

**Projected budget cuts, insufficient rate setting models, potential block grants to states and managed care models will require provider agencies to deliver services with greater efficiency.**

# What is The NADSP?

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Making a world of difference  
**in people's lives**

## **NADSP VISION STATEMENT**

A world with a highly qualified and professional direct support workforce that partners with, supports and empowers people with disabilities to lead a life of their choosing.

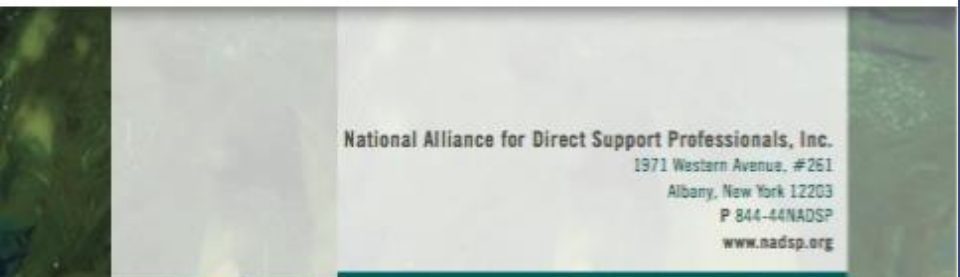
## **NADSP MISSION STATEMENT**

To elevate the status of direct support professionals by improving practice standards, promoting system reform, and advancing their knowledge, skills and values.

# Code of Ethics and Competency Areas Updated 2016



## NADSP Code of Ethics



Updated April, 2016

Embedded in  
all NADSP products  
and services are the  
**Code of Ethics &  
Competency Areas.**

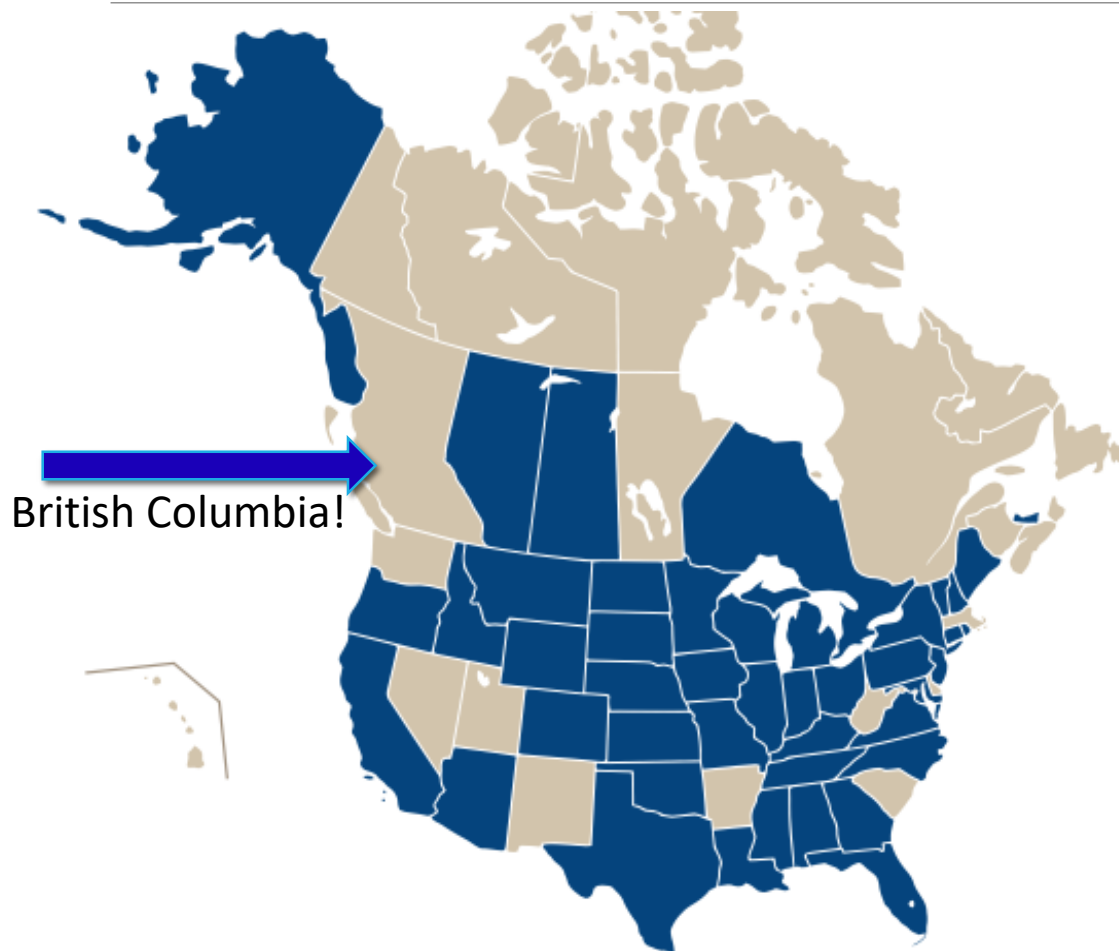


## Direct Support Professional Competency Areas The Foundation of Direct Support Practice



Updated March, 2016

# Starting Out – A Lesson Learned



## 2011 – 2018

We've worked in 43 States and 5 Canadian Provinces and traveled more than 300,000 miles.

Engaged with nearly 90,000 Direct Support Professionals.

Our budget went from \$50,000 (2011) to \$750,000 (2018).



Making a world of difference  
**in people's lives**

### 80% Solution

- \*Comprehensive Technical Assistance Solutions

### Membership

- \*Two Monthly Webinars
- \*Access to Information
- \*Members-Only Website
- \*Annual Conference

### Informed Decision Making Curriculum

- \* HCBS Settings Rules

### E-Badge Academy

- \*DSP Career Ladders & Credentialing

### FLS Training Curriculum

From Management → Leadership

### Culture of Competence Seminars

- \*Code of Ethics
- \*Competency Areas

# Understanding Our Past & How Far We've Come



“We have a situation that borders on a snake pit, children live in filth, our fellow citizens are suffering tremendously because of a lack of attention, **lack of imagination**, lack of adequate manpower”.

*Senator Robert M. Kennedy,  
1968*





# Changing Long-Term Supports and Services Landscape

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HCBS Settings Rule

Olmstead Decision

Department of Justice Litigation and Settlement Agreements

Transitions to Managed Care

Budget Implications

Growth in demand and and Shift to Individualized Supports

Focus on Recovery and Community Inclusion

Supported Decision Making



Now

The *Atlantic*

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HEALTH

## Who Decides Where Autistic Adults Live?

For many intellectually and developmentally disabled people, large campuses or farmsteads may be better options than small group homes. But new state laws could make it hard for big facilities to survive.

Link to article:

<http://www.theatlantic.com/health/archive/2015/05/who-decides-where-autistic-adults-live/393455/>

# Where is Quality Defined?

*“It is defined at the point of interaction between the staff member and the individual with a developmental disability.”*

***John F. Kennedy, Jr. (1995)***

*Chair, President’s Committee for People with Intellectual Disabilities*



*Where are those at the point of interaction of service delivery found on organizational charts?*

# Also at the Point of Interaction: Abuse & Neglect



**The Inquirer**  
DAILY NEWS philly.com



## Abused And Betrayed: People With Intellectual Disabilities And An Epidemic Of Sexual Assault

An NPR investigation finds that people with intellectual disabilities are raped at a rate seven times higher than those without disabilities.

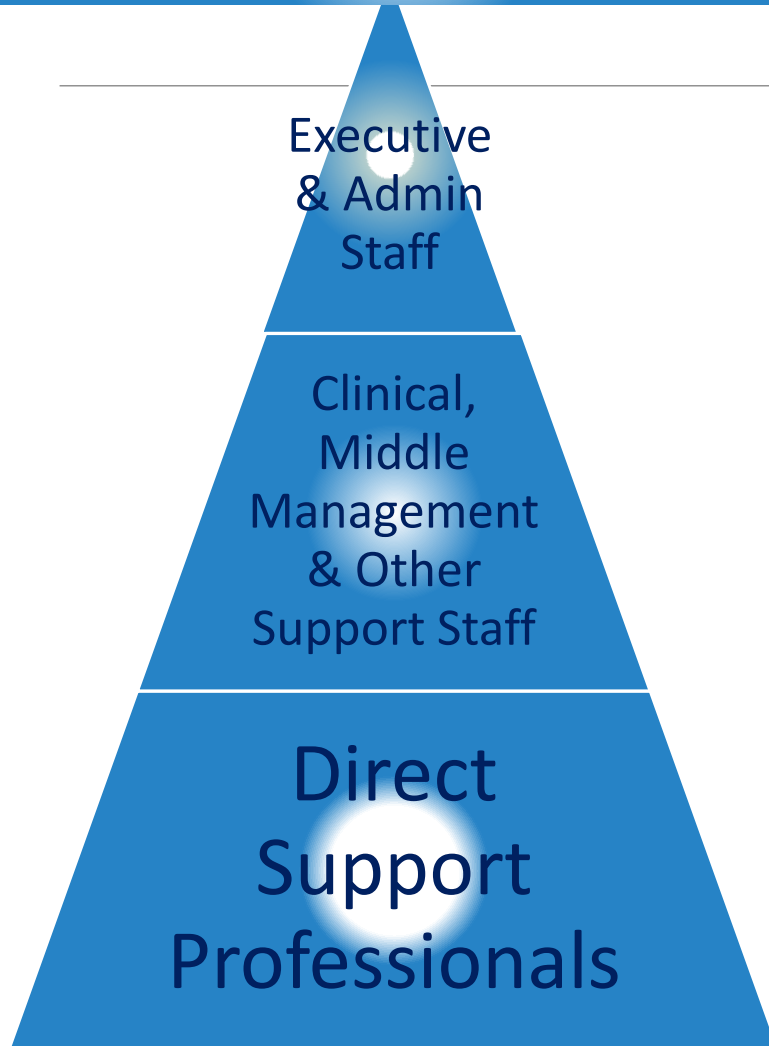
NPR.ORG



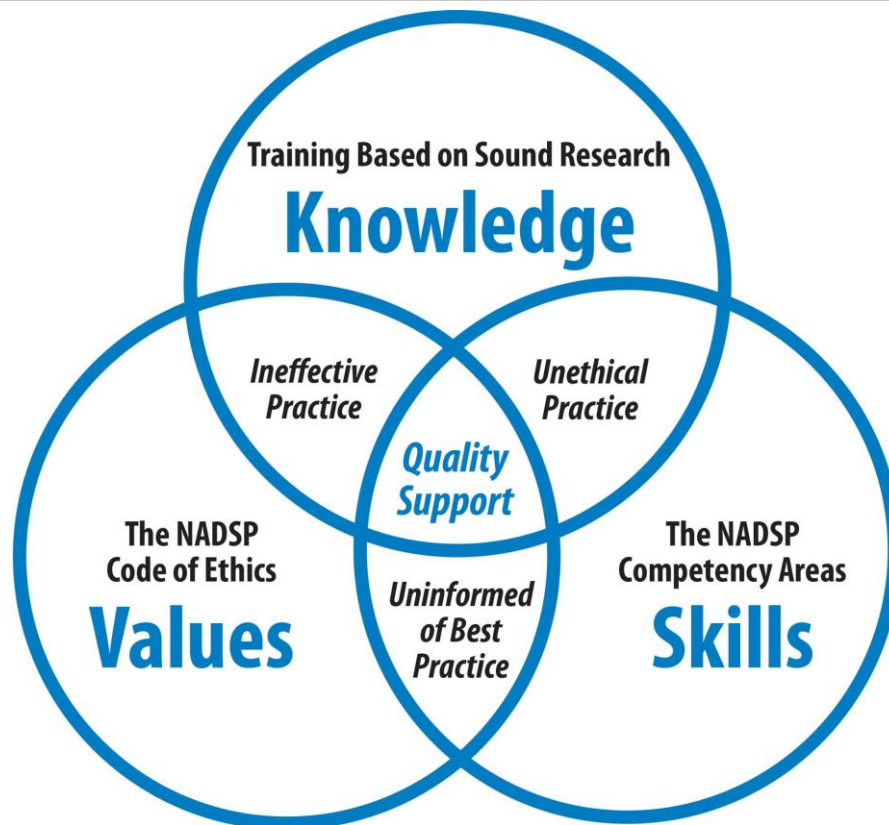
People Receiving Your Services and their Families

Typical Organizational Chart

Future Organizational Chart



# Making Quality Happen



How Quality Happens...**NADSP**

# Continuous Quality Improvement



Making a world of difference  
in people's lives

<b>Focal Questions</b>	<b>I. Era of Institutions</b>	<b>II. Era of Deinstitutionalization</b>	<b>III. Era of Membership</b>
Who is the person of concern?	The patient	The client	The citizen
What is the typical setting?	An institution	A group home, workshop, special school or classroom	A person's home, local business, neighborhood, etc.
How are services organized?	In facilities	In a continuum of options	Through a unique array of supports
What is the model?	Custodial/medical	Developmental/behavioral	Individual support
What are the services?	Care	Programs	Supports
How are services planned?	Through a plan of care	Through an individualized habilitation plan	Through a personal future plan
Who controls the planning decision?	A professional (usually MD)	An interdisciplinary team	The individual
What is the planning context?	Standards of professional practice	Team consensus	A circle of support
What has the highest priority?	Basic needs	Skill development, behavior management	Self-determination and relationships
What is the object?	Control or cure	To change behavior	To change environment and attitudes

Adapted from "The New Paradigm" (Val Bradley, 1994, HSRI, PCMR Chair)

# Transforming a System of Caregiving to One of Providing Dynamic Support

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I do not believe you can do today's job with yesterday's  
methods and be in business tomorrow

— *Horatio Nelson Jackson* —



# HCBS Settings Rules: A Disruptive Innovation?

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## Actions To Complete For Compliance

441.301(c) (4) – Optimizes, but does not regiment, **individual initiative, autonomy, and independence in making life choices**, including but not limited to: daily activities, physical environment, and with whom to interact.

### Proposed State Transition Plan Deliverables:

*“Identify, develop, and distribute training tools and policy updates that are needed for compliance”*

# Disruptive Innovation



## FEDERAL REGISTER

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Part II

Department of Health and Human Services

**System-Transformation**

**Transformation Plans**

**Person-Centered**

**Community**

**Quality**

**Choice**

# What I've Learned About Choice



# People with Disabilities & The Right to Decide

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**When people are supported to make decisions for themselves, they are seen as more capable by others.**

**When people are not allowed to make their own decisions or when someone else makes decisions for them, they are seen as less capable and as having less value in the community.**

*“Independent But Not Alone: A Global Report on the Right to Decide”, Inclusion International, World Congress, 2014*

# “Experience is the Teacher of All Things”

Julius Caesar

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“There are two kinds of decisions;  
the right decision and a lesson learned”.

Simon Sinek

# Are Direct Support Professionals Prepared?

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# The Emerging Role of Direct Support Professionals

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## **Historically....**

**Primarily Seen as Caretaker**

**Focus on Custodial Care**

**Providing Companionship**

**Providing Coverage**

**Primarily Focused on Health & Safety  
Issues**

**Entry-Level Job**

## **Now and in the Future....**

**Ambassador, Mentor & Coach**

**Culturally Competent**

**Close Interactions with Families - often in  
Family Settings**

**Supporting Informed Decisions – Assessing RISK**

**Possession of Complex Skills**

# High Expectation Discrepancy



Specialized knowledge

Work well with others

Teach

Comply with rules and regulations

End shift neat & tidy

Document

Support choice

Maintain health & safety

Culturally competent

Respect rights

Medical support

Problem-solve

Person-centered



# Raising the Expectations of the Direct Support Workforce

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## Historically....

Follow the Plan

Filling shifts

Rely on readily available supervision

Community Outings

System-Centered Identification

## Now and in the Future....

Creating plans *with* People they support

Building meaningful friendships & relationships

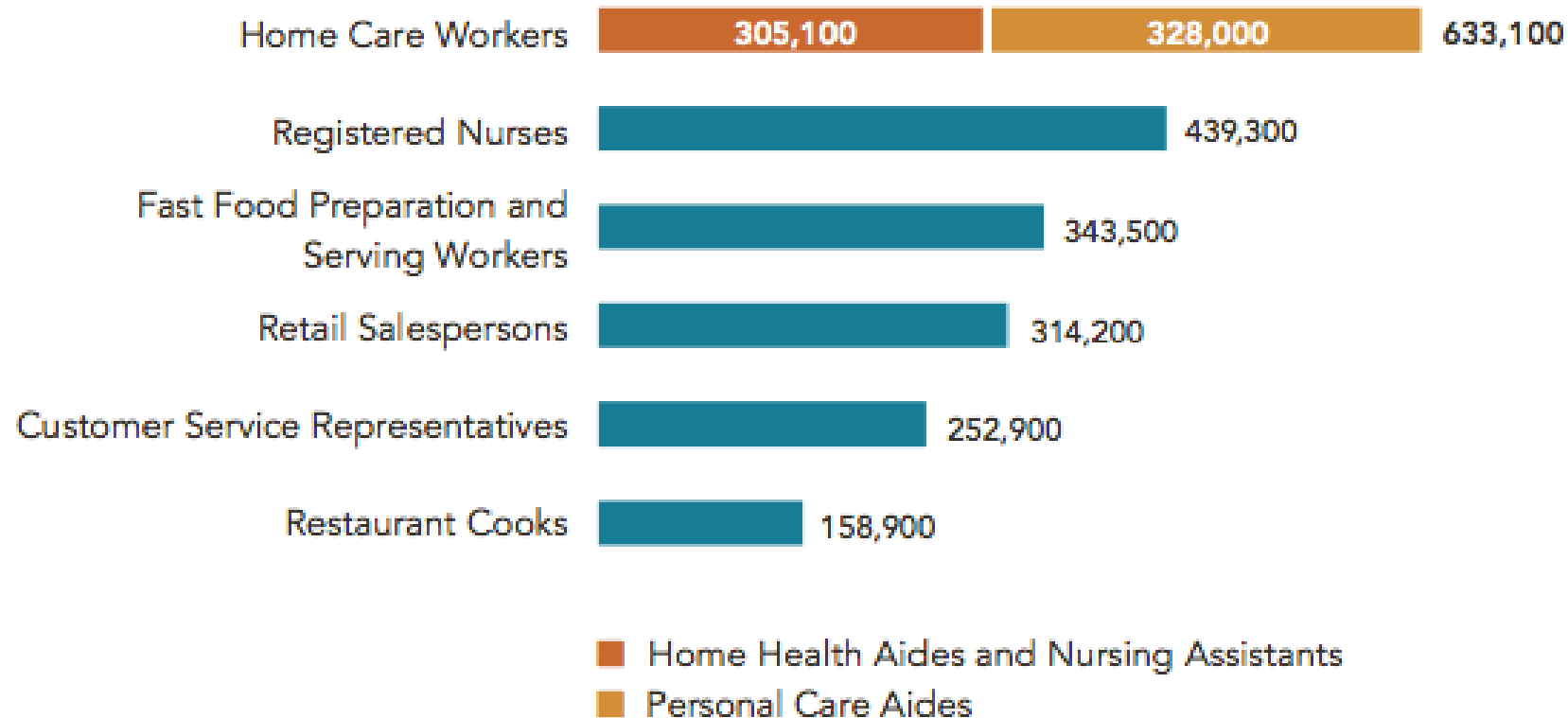
Inclusion – not recreation

Advocating WITH – not FOR people with disabilities

Person-Centered Identification

# Care Giving Job Growth Projections

## OCCUPATIONS WITH THE MOST JOB GROWTH, 2014 TO 2024



# Current Trends: A Quality Crisis

## Tenure

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**Nationally, DSPs who left employment in 2016, nearly 60% were employed for less than a year.**

- ? 38.2% had been employed for less than 6 months**
- ? 21.0% had been employed between 6 and 12 months**
- ? 40.8% had been employed for more than 12 months**

# Current Trends: A Quality Crisis Turnover

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**The average turnover rate for DSPs in 2016 ranged by state from 24.1% to 69.1%. The NCI average was 45.5%. (NCI). Almost half the people hired to support people with I/DD in 2016 were not around in 2017.**

**Think about that for a moment.**

# Current Trends: A Quality Crisis

## Financial Implications of Turnover

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### **The United States – 2017**

- 1,276,000 Direct Support Professionals
- Estimated Cost to Replace Upon Turnover \$4,073
- At the average rate of turnover (45%) 574,200 leave each year
- Cost \$2,338,716,600 (That's Billion)
- That's roughly \$2,000 per DSP or \$1.00 per hour

# Current Trends: A Quality Crisis

## Vacancy Rates

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**DSP vacancy rates for F/T positions range from 4.4% to 14.6% with an average of 9.8%. Vacancy rates for P/T positions ranged from 5.1% to 27.8% with an average of 15.4%.**

**These are point in time vacancy rates, not averages across the year.**

# So, What Are We Going To Do?

## 9 ELEMENTS OF A QUALITY CAREGIVING JOB



### COMPENSATION

- 1 Good wages
- 2 Good benefits
- 3 Full-time hours,  
stable schedule, &  
no mandatory overtime

### OPPORTUNITY

- 4 Excellent training
- 5 Participation in  
decision-making
- 6 Career advancement

### SUPPORT

- 7 Supportive supervisors
- 8 Resources to resolve  
barriers to work
- 9 Owners who lead  
quality improvement

# Suggested Reading Materials on the Workforce Issues



## 2016 Staff Stability Survey Report

January 2018



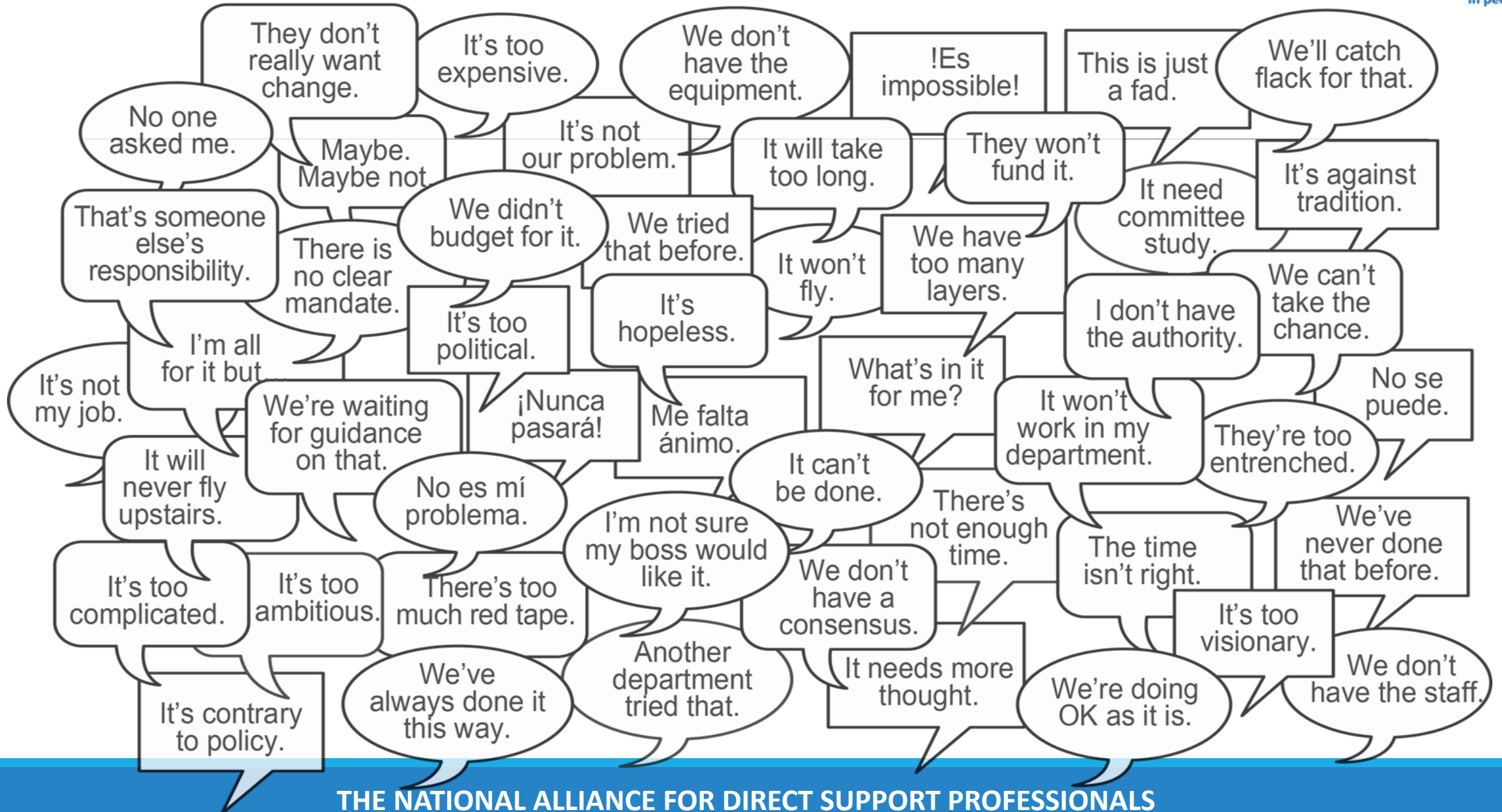
## Report to the President 2017

America's Direct Support Workforce Crisis:  
Effects on People with Intellectual Disabilities,  
Families, Communities and the U.S. Economy





# 50 Reasons Not To Change



# Join Us In St. Louis for our National Conference – “The 4th One” September 7<sup>th</sup> and 8<sup>th</sup>, 2018 [www.nadsp.org](http://www.nadsp.org)

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