

Regional Employment Board of Hampden County, Inc.

Extended Care Career Ladder Initiative

Western Massachusetts ECCLI Informational Conference

Keynote Address

By State Senator Gale D. Candaras

May 8, 2008

Good morning and thank you for the opportunity to speak here at the Western Massachusetts ECCLI Informational Conference. Larry, thank you for your kind introduction and for all the hard work you do day in and day out at the Regional Employment Board.

It is no secret that long term care, be it inside or outside the home, is one of the most pressing public health needs facing the Commonwealth and specifically, Western Massachusetts. We have a generation of seniors who are living longer than any before them, with the "baby boomers" right on their heels. We have populations of people who are benefiting from the tremendous advances in medical technologies and life sciences who otherwise would be told "there is no hope". And we are also facing the logistical consequences of deinstitutionalizing young people as ordered in the "Rosie D." case.

In all three of these cases, we are talking about a rapidly expanding number of people – our mothers, fathers, children and friends – whose numbers already outpace our current direct care workforce.

We are also talking about more complex cases, which demand greater expertise and more intensive services, and we will be looking to our direct care workers to meet these needs as well.

For these reasons, it should not come as a surprise that many of the sectors employing direct care workers are among the fastest growing in the Commonwealth.

We need an enormous number of very capable people who are ready, willing and able to work, and we needed them yesterday!

At a time when there is wide spread concern about economic recession and poor job creation, the direct care fields have grown continuously here in Massachusetts. But that growth is hindered by high turnover

due to low wages and lack of professional advancement opportunities. Those in the field are not seeing the benefits that usually accompany years of professional development and increased demand. Is it any wonder, then, that these workers are leaving direct care work for other opportunities?

Very simply, we must develop and stabilize the human service and direct care work force in order to ensure that we can meet the huge demand confronting us as a state and as a nation.

In order to stabilize the work force here in Massachusetts, we need a commitment to our direct care providers. We need a commitment from those of us in government, which clearly says we value "direct care workers," "they deserve a living wage", and "direct care workers deserve educational opportunities and opportunities for professional advancement."

Without an unequivocal commitment to developing and stabilizing this workforce, our efforts at shifting the model from institutionalized care to home care will suffer and the suffering will extend, invariably, to those who are most vulnerable, our poor, our young with special needs, our frail elders, and, well, I'm sure you get the picture. Moreover, we have little hope of cost containment, so essential to our efforts to provide health insurance and healthcare for all our citizens, unless we can increase the services that we provide to people in their own homes.

Because of this need, I filed a bill known now throughout the Commonwealth as Senate 65. Many of you know it well, have testified as to its importance and advocated across the state in favor of its passage.

I am happy to say we are a step closer to making S65 a reality with the favorable recommendation of the bill from the Children & Families Committee. (The House Chairwoman is Representative Cheryl Coakley Rivera.)

Senate 65 would create a system to restore fairness and coherency in rate setting for human service and direct care workers. Rates will be based on the cost or fair market value of the services purchased instead of being driven solely by budgetary considerations. The proposal shifts the responsibility for setting program rates for contract providers for human and social service programs from Administration

and Finance to the Division of Health Care Finance and Policy (DHCFP) within the Executive Office of Health and Human Services (EOHHS).

Right now, there is no assurance of rate adequacy and no right for contract providers to appeal inadequate rates. There is no transparency in the rate setting process and no checks or balances against unfair, inadequate government payments. It is an understatement to suggest that these factors operate as disincentives to would-be providers, many of whom are operating on the edge.

S. 65 would establish a regular system of rate review within the Division of Health Care Finance and Policy and a social services advisory council to advocate for this growth industry.

The passage of S. 65 will also allow providers to pay their direct care employees enough to retain them and it will afford them the opportunity to make basic improvements and conduct long overdue routine maintenance on buildings that house community-based programs.

Another essential step forward in this process is the continuation and expansion of the Extended Care Career Ladder Initiative. The ECCLI provides key education and professional opportunities to direct care staff who otherwise would have no place to turn.

These opportunities enrich the professional lives of direct care workers and an important key to lowering turnover rates.

We know it will take time and an improved economy to pass S. 65 but we're going to keep on working towards passage of this important initiative. Though S. 65 won't solve all our problems, it will be a big step forward, and an essential step forward, in addressing the current and future needs of the human service and direct care work force and the people we all serve.

Thank you again for inviting me here. Please know that you have an ally on Beacon Hill who will continue to fight on your behalf. I hope that you all have a wonderful conference.