



Maine Direct Care and Support Professionals

Focus Group Report

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PREPARED FOR

ETHOS[®]



The Maine Long-Term Care
OMBUDSMAN PROGRAM



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Introduction

Background

Funding for the “Engage and Empower Direct Care Workers Initiative” was provided by the Maine Health Access Foundation (MEHAF) and the Department of Health and Human Services, Office of Aging and Disability Services (OADS). The Maine Long-Term Care Ombudsman Program (LTCOP) implemented the project and Ethos was commissioned to conduct a series of ten (10) focus groups with Maine’s Direct Care and Support Professionals. The primary purpose of the Engage and Empower initiative is to help Direct Care and Support Professionals define and express their collective voice so that they have an impact on Maine’s workforce planning and policymaking. The Initiative is designed to provide opportunities for workers to use their collective voice to inform those who make decisions about their jobs to know what is important to them. It is anticipated that sharing the work and findings of the Initiative with all three groups will inform strategies that ultimately will boost recruitment and improve retention of direct care workers. The focus groups were an initial step in the process of identifying primary issues confronted by this group in their important line of work.

Maine's Direct Care and Support Professionals

Direct care and support professionals encompass a wide range of paraprofessional health care staff. They include certified nursing assistants, home health aides, personal support specialists, personal care attendants, independent support services staff, direct support professionals, and mental health rehabilitation technicians. They are employed by nursing facilities, assisted living facilities, assisted housing programs, adult family care homes, programs for people with intellectual disabilities, programs for people with brain injuries, home health and other home care agencies, and individuals who supervise their own long-term services and supports.

Methodology

Ethos conducted an initial “immersion” or discovery meeting on October 12, 2021, with a group of stakeholders from the LTCOP, the Maine Department of Health and Human Services, PHI International, and the Maine Health Access Foundation. The purpose of the immersion was to identify key messages designed to recruit focus group participation and to develop specific learning objectives for the qualitative research.

Following the meeting, Ethos developed key messages and a recruitment flyer for the LTCOP, who recruited participants for focus groups. Participants were compensated with a \$50 gift card. Ethos also developed a Moderator’s Guide (see Appendix) with identified learning objectives and a series of questions to guide the focus group discussions.

Research Objectives

Engage and Empower Maine's Direct Care Workers

- Understand why Maine's direct care and support professionals chose the profession they did
- Identify the positive attributes of a quality job and of a direct care employer
- Determine why workers stay in their current job or switch to a different job
- Understand what's most appealing about their work and, conversely, what leads to job dissatisfaction
- Understand drivers of the choice between full-time, part-time, and per diem work
- Identify the primary barriers to undertaking this type of work
- Understand the best ways to communicate with direct care workers
- Determine whether or not participants see themselves as a voice for change (leadership characteristics)

Focus Groups

A series of ten (10) virtual focus groups with a total of 58 direct care and support professionals with statewide representation across all long-term care services and support settings were conducted between November 11, 2021 and January 5, 2022. Participants included:

- 52 women, 6 men
- 7 New Americans

Focus groups were recorded on the Zoom platform and transcribed for subsequent review by Ethos in preparing our report. Participants were promised that the recordings would be destroyed following the creation of this report.

IMPORTANT NOTE

Focus groups are qualitative research studies that are effective at gauging the sentiment of Maine's direct care workers, but they do not have statistical significance. The findings are directional rather than statistical conclusions.

Executive Summary

*“Sometimes I get told I care too much.
How can you care for a human being too much?”*

Executive Summary

Maine's direct care and support professional workforce choose their profession out of a desire to do meaningful work that has a positive influence on the lives of others. Many shared that they had a family history in direct care and nursing or found meaning taking care of a sick loved one and subsequently discovered direct care as a potential career. Others left retail or hospitality jobs or returned to the workforce after children to pursue a career in health care. New American direct care workers indicated health care histories in their home countries and discovered direct care employment here in Maine.

"I pretty much grew up in a nursing home. Both my parents worked in a nursing home, so I think it's all I've ever known. I took the CNA when I was in high school and that's all I've ever done and I, I really enjoy it. I wouldn't do anything else."

Executive Summary

When asked to identify the positive attributes of a quality job and of a direct care employer, participants pointed to fair wages and benefits, adequate staffing to support the needs of residents, proactive communication by employers and among employees, as well as the development of consistent standards among employers and comparable direct care positions. New Americans pointed to the importance of teamwork.

“I consider a quality job to have good communication about benefits – we go above and beyond and aren’t compensated for it.”

Executive Summary

Despite numerous challenges outlined in this report, Maine's Direct Care and Support Professional workforce stay in their jobs because of their love for the work and the people they serve. Increasingly, committed workers are staying in their jobs out of a deep sense of obligation and commitment, even if the decision impedes their own career growth.

"I love care. I like caregiving... it's just in me to want to, to take care of people. It makes me feel good at the end of the day as well, knowing that you help someone meet their needs... to give them quality of life."

Executive Summary

Job dissatisfaction among direct care and support professionals arises when the attributes of a positive work environment – fair wages, adequate support, proactive communication, and consistent standards – are missing. By far, the #1 concern among participants was the worker shortage that has arisen over the past decade and been exacerbated by the Covid-19 pandemic. Some participants offered their insight into the worker shortage that is at or near crisis levels.

“When the pandemic first got bad, I was working at a cardiopulmonary rehab as a CNA, you know, and once it got in the facility, it, it killed about 50% of our patients. And even I took a couple months off healthcare after that. And, and I'd say, you know, really at least five or six of my coworkers probably left healthcare over that. It just was too much; it was a lot. So, I think that plays a part. I think people are stressed, you know, and feel this pandemic is hard.”

Executive Summary

When asked what kind of barriers direct care and support professionals encounter undertaking their line of work, group participants pointed to the difficulty of maintaining personal boundaries, the impact to their personal lives, and state of Maine regulations.

“And you know, you say, why, why do I put myself through this? And then you remember because they need you. So as long as I can keep it together and remember it's for them, but it starts to affect your home life. ‘Cause you're, you know, when you are feeling like, oh God, I have to go to work. It's a terrible feeling to feel that, oh God, I got to go to work.”

Executive Summary

Most focus group participants were engaged in full-time employment with many working more than one job or overtime to make ends meet. Others engaged in per diem work for the higher wages and flexible schedules it offered. Some also chose to do part-time work to suit their lifestyle or to augment income.

“The per diem job is less stressful lately and it's been more of like my fun job with those residents and honestly, extra money is very helpful right now.”

Executive Summary

As a final question, focus group participants were asked what they would advise or tell policy makers and employers about direct care work, if given the opportunity to do so. The overriding advice is to “walk in our shoes for a day” to see what we do.

“Put themselves maybe in our shoes... I don't think they realize either what we do out there and they should. I wonder if they got sick or if their family member got sick, I mean, they'd want a good caregiver. And I, I don't think they realize really what we do out there in the home or in the facilities. I wish they could go out once in a while without their, you know, their checklist and just follow a CNA for a couple hours or do a couple of home visits and see if they are able to keep up.”

Implications & Recommendations

“...the people who are in these homes and doing this work are angels walking this earth, but there aren't enough of them. And the more I wish they could understand how, what they decide has ... potentially life and death decisions or consequences to real people.”

Implications & Recommendations

Maine direct care support professionals do important work. They take care of our loved ones and us when we are unable to take care for ourselves. As a group, they are compassionate, kind, and loving – often sacrificing their personal lives to take care of others. They are paid at the low end of the wage scale, and with the Covid-19 pandemic, put themselves in harm’s way each and every day. Like other workers around the country engaged in the “Great Resignation,” many are quitting their positions and leaving fewer hands to perform more work. Arguably, the direct care worker shortage has reached crisis proportions with potential deleterious effects to those requiring higher levels of care.

Implications & Recommendations

While it is beyond the purview of the researcher to provide policy-based recommendations, we do consider the following to be positive steps in the right direction.

- Form the Direct Care & Support Professional Advisory Council to provide a voice for Maine's direct care professions on important issues affecting their jobs.
- Elevate the status of Direct Care & Support Professionals in the eyes of the public as well as employers, policy makers, and payers with the objective of increasing wages and benefits over time.
- Create a "Walk in my Shoes" documentary of a "day in the life" of Maine's direct care professionals that highlights the difficult work they perform and the challenges they encounter.

Implications & Recommendations

- Continue to standardize and professionalize the various job descriptions that encompass the field of direct care and professional support work.
- Provide employers, who are eager to hire direct care professionals, with feedback about how direct care workers think about a quality job and workplace.
- Promote entry level direct care work as a means of starting a career in healthcare – as a stepping stone to a brighter future.
- Partner with Maine’s Community College System and employers to develop programs that enhance the skills and value of direct care professionals and increase their value over time.

Questions?

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