

Position Statement on Direct Support Professional Workforce Shortage in Minnesota

Position Statement

Minnesota faces a DSP workforce shortage now and in the future in Home and Community-Based Services for people with intellectual and developmental disabilities. Without change, the quality of care and the quality of life for individuals with intellectual and developmental disabilities will be at risk in Minnesota. The first step to deal with this shortage must be reimbursement rate increases for providers by the Minnesota legislature to provide more competitive wages and benefits. Other changes like credentialing, career ladders, paid career development, strong mentoring and employee recognition are needed to build and retain a more qualified, competent and stable workforce. Compensation and benefits that are commensurate with their job responsibilities and a living wage must be the goal. A stable and reliable funding source must be developed for future funding since piecemeal reimbursement rate increases have proven insufficient to help providers respond to the continuing DSP staffing crisis in Minnesota.

Issue

Thousands of Minnesotans with intellectual and developmental disabilities receive needed assistance using Home and Community-Based Services. A survey by the Best Life Alliance¹ found that for residential, day and home services there are thousands of unfilled positions for Direct Support Professionals, “DSPs”, across Minnesota. Many areas, especially in rural Minnesota, have huge unmet needs due to lack of staffing. Providers cannot take on new clients because they lack staffing to do so.

DSPs provide direct assistance with daily care, medical protocols, and medication administration. They also help to promote choice, independence, and involvement in community life for the people they serve. They are advocates for those they serve and help them to navigate through health care systems.

Minnesota has a low unemployment rate. Employers of all types are competitively pursuing quality workers by offering higher wages. The average hourly salary for DSPs in Minnesota has been low for many years. Imminent demographic changes will bring huge growth in the number of seniors and others who need and want care in the community. A study by the Minnesota Demographic Center projects that demand for DSPs and other support services will grow ten times faster every year until 2022 than the labor force needed to provide the services. Individuals on the Minnesota Waiver waiting list may finally qualify for services only to be unable to find DSPs to provide the care they need. Future Olmstead goals for person-centered support services cannot be realized without DSPs to do the work.

Minnesota DEED predicts that population growth and the increase in the number of people who want care and support in the community will require almost sixty thousand additional DSP positions in Minnesota over the next few years.

DSPs work with the most vulnerable Minnesotans. Their job responsibilities and required skills are not reflected in their continued low wages. This leads to staff turnover, which has a negative impact on those whom DSPs support. Many DSPs must work other jobs to support

their families. More than 60% of DSPs work less than full time.² Many DSPs in Minnesota are forced to use SNAP food assistance and other public services for their families.³

Compensation and benefit increases are the first and most effective way to attract workers to these jobs and move toward a living wage. To accomplish this, the Minnesota Legislature must increase reimbursement rates for Medicaid providers to allow salaries more in keeping with the competitive job market that exists in Minnesota. This is the most effective first step to deal with this shortage.

Since demand for services will exceed the number of potential DSPs available in the near future and the funds needed for a living wage may outstrip the Legislature's tolerance for funding increases, additional ways must be created to attract and, more importantly, retain as many workers in this field as possible. Providers in this industry must find new ways to reach out to as many potential workers as possible to meet staffing needs. This should include an increase in the use of self-directed services, which can reduce turnover and provide the opportunity to pay higher staff wages. In addition, use of assistive technology, monitoring technology, and service animals should be explored as a means of addressing staffing shortages when appropriate to help the person achieve and maintain independence. Policies to foster retention will be crucial as well as increased recognition of employee contributions to quality care and their continued service.

The National Alliance of Direct Support Professionals states that to have a qualified, competent and stable Direct Support Workforce "...it is critical that DSPs have the competence, confidence and ethical decision-making skills with the guidance necessary to provide quality support, receive compensation that is commensurate with job responsibilities and have access to a career path aligned with ongoing professional development."⁴

DSPs need sufficient, high quality training and paid professional development to document and promote skill development. Credentialing for DSPs must be considered to create a more professional workforce that is stable and valued for their documented skills to provide quality care. Minnesota must provide statewide training guidelines and opportunities beyond those required by licensing. Online and classroom training and development must be available for all DSPs, including those who in work in consumer directed services. Paid professional development opportunities for all DSPs must be increased. Specific training in the use of person-centered services must be continued so DSPs can effectively assist people with intellectual and developmental disabilities to realize the promise of Olmstead to be fully included in their communities and reach personal goals. Service providers must foster an organizational culture that promotes and values quality services and supports person-centered goals for their clients and staff.

Approved by The Arc Minnesota Position Statements Task Force, 7/18/16.

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Approved by The Arc Minnesota Board of Directors, August 13, 2016.

Approved by delegates at The Arc Minnesota Annual Meeting, September 23, 2016.

¹ The Best Life Alliance is made up of families, self-advocates, advocacy organizations and over 130 providers of Home and Community-Based Services in Minnesota.

² PHI State Data Center 2014

³ PHI State Data Center 2014

⁴ National Alliance of Direct Support Professionals, See www.nadsp.org