

Long-Term Care Workforce Development Steering Committee

Session #1

Thursday, September 19

9:30 am – 4:30 pm

John A. Cherberg Building, Capitol Campus, Hearing Room #2,
304 15th Ave SW, Olympia, WA 98501

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










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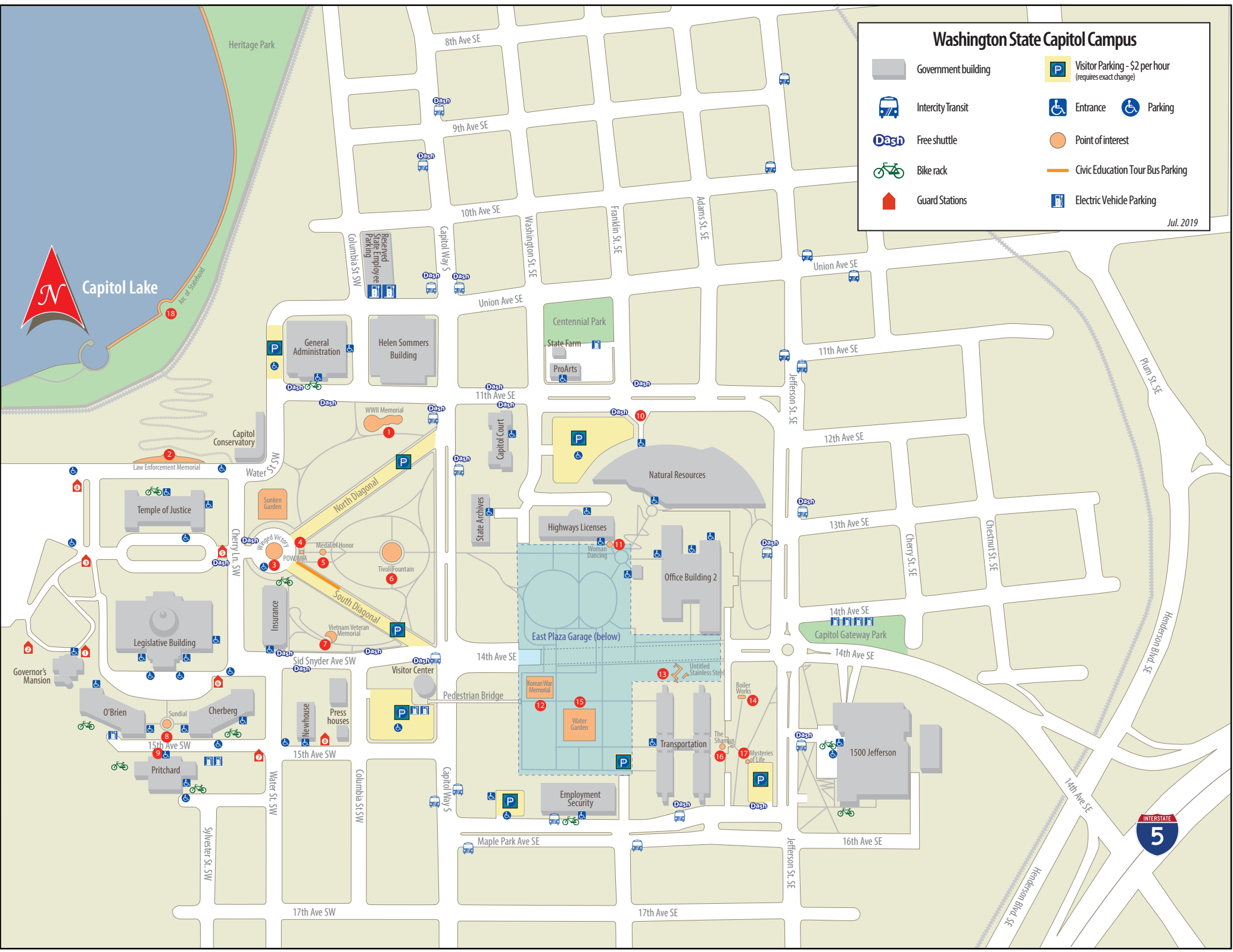
agenda

- Steering Committee Members:** Tracy Rude (Chair), Abby Solomon, Candace Goehring, Carolyn McKinnon, Cheryl Sanders, Doris Barret, Representative Eileen Cody, John Ficker, Josephine Antonio, Julie Ferguson, Kristin Peterson, Laurie St. Ours, Leslie Emerick, Pamela Pasquale, Patricia Hunter, Rachel McAloon, Sheri Shull, Senator Steve Conway
- DOH Staff:** Paula Meyer, Kathy Moisia, Amber Bielaski (Zawislak), Bobbi Allison
- Facilitator:** Porsche Everson
- Guest Speakers:**
- Please Read:**
- Read LTC Workforce Development Charge (from ESHB 1109)
 - Skim [LTC Workforce 2018 Report to Legislature](#)
 - Review Draft LTC Workforce 2019 Work Plan
- Meeting Goals:**
1. Understand charge and scope of work for 2019-2021
 2. Develop/refine group agreements
 3. Participate in one of four workgroup meetings
 4. Develop initial workgroup work plans, set 2019-2020 meetings
 5. Seek advice from Steering Committee on workgroup work plans

Washington State Capitol Campus

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-  Entrance
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-  Guard Stations
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Jul. 2019



LTC Workforce Development Charge (from ESHB 1109, Section 221, Item 9)

1 (9) (a) \$50,000 of the general fund—state appropriation for fiscal
2 year 2020 and \$50,000 of the general fund—state appropriation for
3 fiscal year 2021 are provided solely for the nursing care quality
4 assurance commission to continue the work group on nurses in long-
5 term care settings.

6 (b) The work group must base its work on the assessment of long-
7 term care workforce needs required by chapter 299, Laws of 2018, and
8 included in the long-term care workforce development report to the
9 governor and the legislature submitted in December 2018. The
10 commission shall maintain existing membership of the work group, may
11 add additional stakeholder representation, and may create such
12 technical advisory committees as may be necessary to accomplish its
13 purposes.

14 (c) Work group priorities for the 2019-2021 fiscal biennium
15 include:

16 (i) Identifying data sources necessary to ensure workers are
17 achieving timely training, testing, and certification;

18 (ii) Working with regional workforce development councils to
19 project worker shortages and on-going demands;

20 (iii) Establishing revised nursing assistant training that aligns
21 directly with the learning outcomes of the competency-based common
22 curriculum, and improves access, reduces costs, increases consistency
23 across evaluators, increases pass rates, and provides support for
24 languages other than English;

25 (iv) Recommending requirements to improve skilled nursing
26 facility staffing models and address deficiencies in resident care;
27 and

28 (v) Creating a competency-based common curriculum for nursing
29 assistant training that includes knowledge and skills relevant to
30 current nursing assistant practices; integrated specialty training on
31 mental health, developmental disabilities, and dementia; and removing
32 or revising outdated content. The curriculum must not unnecessarily
33 add additional training hours, and must meet all applicable federal
34 and state laws. The curriculum must be designed with seamless
35 progression from or toward any point on the educational continuum.

36 (d) The commission must provide an interim report on the
37 activities of the work group and its findings and recommendations for
38 statutory and regulatory changes to the governor and legislature by
39 November 15, 2019, and a final report to the governor and legislature
40 by November 15, 2020.

DRAFT work plan for review and discussion with the 2019 Steering Committee.

Long-term Care Workforce Development Plan

2019 Budget Proviso (ESHB 1109)

Nursing Care Quality Assurance Commission
9-6-2019

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Introduction

Purpose of Work

In 2018, the Washington State Legislature directed the Nursing Care Quality Assurance Commission to convene a steering committee to provide recommendations to address clinical care staffing shortages in long-term care (LTC) settings. The steering committee developed a list of 25 recommendations to address the identified issues.

In 2019, the legislature re-convened the steering committee to address the recommendations and provide detailed plans to improve availability and use of workforce-related data, training, and testing—ultimately addressing the workforce shortages. The legislature also directed the steering committee to develop recommendations for skilled nursing facility staffing models and address deficiencies in resident care.

The priority work for the 2019-2021 biennium includes:

- i. Identifying data sources necessary to ensure workers are achieving timely training, testing, and certification;
- ii. Working with regional workforce development councils to project worker shortages and on-going demands;
- iii. Creating a competency-based common curriculum for nursing assistant training that includes knowledge and skills relevant to current nursing assistant practices; integrated specialty training on mental health, developmental disabilities, and dementia; and removing or revising outdated content. The curriculum must not unnecessarily add additional training hours, and must meet all applicable federal and state laws. The curriculum must be designed with seamless progression from or toward any point on the educational continuum.
- iv. Establishing revised nursing assistant testing that aligns directly with the learning outcomes of the competency-based common curriculum, and improves access, reduces costs, increases consistency across evaluators, increases pass rates, and provides support for languages other than English; and
- v. Recommending requirements to improve skilled nursing facility staffing models and address deficiencies in resident care.

Mission and Vision

Mission

To address recognized needs within the LTC workforce by identifying data sources and using data effectively; making recommended revisions to training and testing; and identifying staffing models for skilled nursing facilities that meet the care needs of residents.

Vision

Washington State citizens will have access to quality services provided by qualified and available nurses and nursing assistants in long-term care. Workers will have opportunities for career progression in long-term care settings.

Project Organization and Stakeholders

Project Management Team

Project Management Role	Designated Individual
Project Executive	Paula Meyer, Executive Director
Project Lead	Kathy Moisio, Director of Nursing Assistant Programs
Steering Committee Chair	Tracy Rude, NCQAC Chair
Policy Analyst	TBD
Project Support	Poppy Budrow, Health Services Consultant
Project Support	Bobbi Allison, Education Assistant
External Facilitator/Project Advisor	Porsche Everson, Relevant Strategies, LLC

Steering Committee Members

Most of the members identified below participated in the 2018 LTC Workforce Development group. ESHB 1109 authorizes the Nursing Commission to add additional stakeholder representation to the steering committee as needed. In 2018, home care, hospice, and palliative care sectors were not expressly included in the charge, nor were they represented in the steering committee. The 2019-21 steering committee includes representation from these long-term care services. Nursing assistants play a crucial role in all three areas, and the inclusion of representation for home care, hospice, and palliative care is important for considering changes that may impact these crucial areas. The Nursing Commission also added a nursing assistant-certified and a family caregiver/consumer of long-term care services to the steering committee to gain valuable first-person perspective. Finally, the Nursing Commission invited a representative from the Developmental Disabilities Administration to join the steering committee. These additions to the steering committee round out gaps identified during the initial 2018 work.

Designated Individual	Representing
Tracy Rude, NCQAC and Steering Committee Chair	Nursing Care Quality Assurance Commission
Abby Solomon (Sending Sheena Tomar when unable to attend, representing Service Employees International Union or SEIU)	Representative of largest statewide Home Care Workers Union

Designated Individual	Representing
Candace Goehring	Assistant Secretary of Aging and Disability Support Administration of the Department of Social and Health Services or designee
Carolyn McKinnon	Executive Director of the Washington State Board for Community and Technical Colleges or designee
Cheryl Sanders	American Indian Health Commission
Doris Barret	Department of Social & Health Services Administration, Developmental Disabilities Administration
Representative Eileen Cody (Sending Thea Bird when unable to attend)	Chair of House Health Care and Wellness Committee or designee
John Ficker, Executive Director (Sending Karen Cordero when unable to attend)	Representative of the Adult Family Home Council of Washington
Josephine Antonio	Cornerstone Healthcare Services (Nursing Assistant-Certified)
Julie Ferguson	Advanced Healthcare, Washington Private Duty Association
Kristin Peterson (Sending Trina Crawford when unable to attend)	Representative from the Health Services Quality Assurance Commission of the Department of Health
Laurie St. Ours (Representing the Washington Healthcare Association or WHCA)	Representative of largest statewide Assisted Living and Skilled Nursing Facilities Association
Leslie Emerick	Emerick & Bloom Home Care/Hospice/Palliative Care
Pamela Pasquale (Representing the Washington State Nurses Association or WSNA)	Representative of largest statewide Nursing Agency

Designated Individual	Representing
Patricia Hunter	Washington State Long-Term Care Ombuds or designee
Rachel McAloon (Sending Evan Hamilton when unable to attend)	Member of the Washington Apprenticeship and Training Council (Department of Labor & Industries)
Sheri Shull	Family Caregiver/Consumer of LTC Services
Senator Steve Conway (Sending Kimberly Lelli when unable to attend)	Chair of Senate Health and Long-Term Care Committee or designee

Project Ecosystem

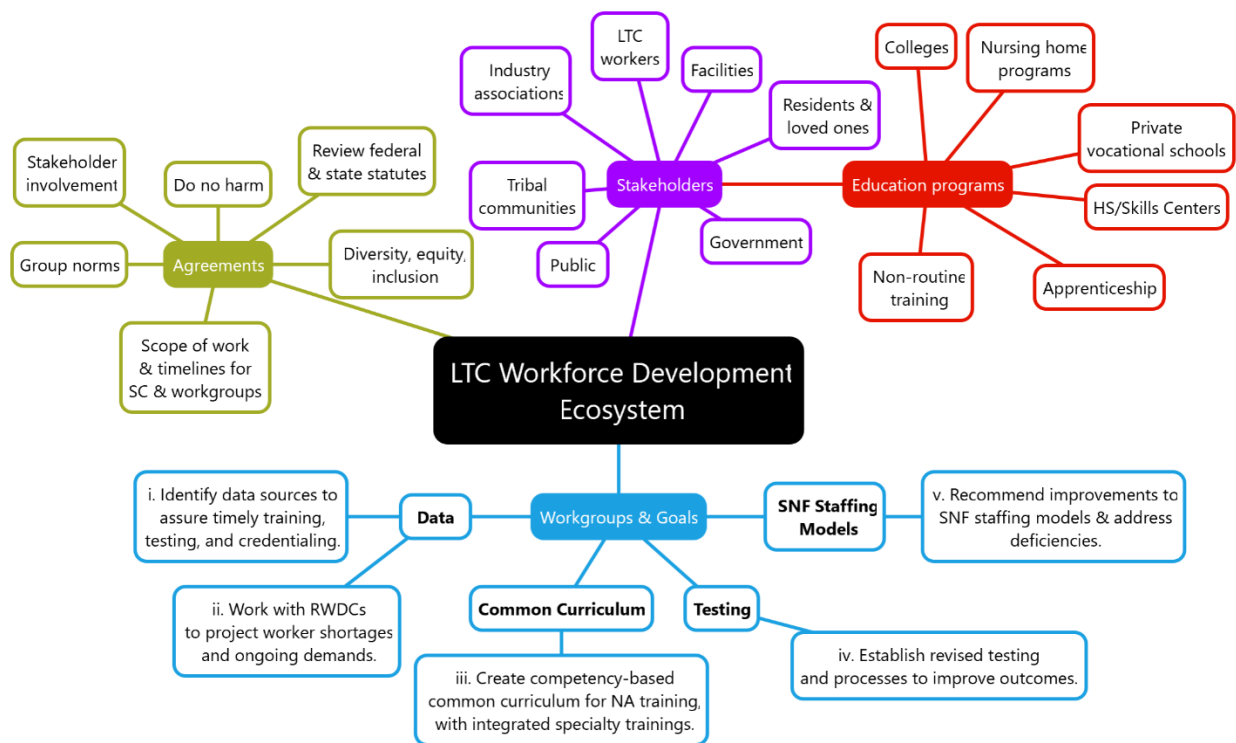


Figure 1. Project map that shows stakeholder groups, workgroups, goals, and agreements.

Stakeholders & Education Programs

Stakeholders for this project include LTC workers, industry associations, long-term care facilities, tribal communities, government, residents/clients and loved ones, and the public. Education programs represent another major set of stakeholders in that there are many types of organizations providing nursing assistant education, including private vocational schools,

colleges, high school skills centers, and nursing homes. Apprenticeship and apprenticeship-like opportunities also exist, as well as pathways that acknowledge equivalent education and training (i.e. students in college or university nursing programs and students with military healthcare training).

Agreements

The steering committee and workgroups will need to discuss and reach agreement on several factors. We will need to address scope of work and timelines within the context of the budget proviso language and how we will work together as a group. We need to take care with major systems changes to ensure that no harm is done, that we are inclusive in our involvement with stakeholder groups, and that recommendations and systems changes meet federal and state statutes and rules, or that we track which state statutes and rules may need to be modified.

Workgroups

Four workgroups will be convened to address detailed recommendations and proposed plans. In addition to coming together for in-person steering committee meetings three times per year, the workgroups will typically meet monthly via web conference call to address the goals assigned to them. The workgroups—titled in relation to their major topic of focus—are: Data, Common Curriculum, Testing, and SNF Staffing Models. Each workgroup is assigned project goals provided in the budget proviso language.



Figure 2. Four workgroups will address detailed recommendations and proposed plans.

The workgroups will be chaired by a steering committee member or an appointee of a steering committee member. They will be comprised of both other steering committee members and other selected stakeholders with expertise in the subject areas being addressed. The project management team will ensure a balance of stakeholder interests on the workgroups. Additional individuals may be called upon as expert consultants to advise workgroups as needed.

The workgroup's role will be to identify detailed and balanced plans, content, and recommendations for consideration by the full steering committee. The workgroups do not have delegated authority to make decisions on behalf of the steering committee.

Data Workgroup

Data Workgroup Core Members	
Designated Individual	Representing
Chair: John Ficker	Adult Family Home Council of Washington
Amy Murray	Nursing Care Quality Assurance Commission
Carma Matte-Jackson	Washington Healthcare Association
Donna Goodwin	Home Care Association of Washington
Helen Myrick	NCQAC
Mike Anbesse	Department of Social & Health Services
Nova Gattman	Workforce Training and Education Coordinating Board
Sheena Tomar	Service Employees International Union
Trina Crawford	Department of Health, Health Services Quality Assurance
Vicki Elting	Washington State LTC Ombuds
Data Workgroup Consulting Members	
Designated Individual	Representing
Bea Rector (possible consult)	Department of Social & Health Services
Carolyn McKinnon	State Board of Community and Technical Colleges

The Data Workgroup is responsible for two legislatively defined goals:

- i. Identifying data sources necessary to ensure workers are achieving timely training, testing, and certification;
- ii. Working with regional workforce development councils to project worker shortages and on-going demands;

Common Curriculum Workgroup

Common Curriculum Core Members	
Designated Individual	Representing
Chair: Vicki McNealley	Village Concepts
Christine Morris (or Adora Brouillard)	Department of Social & Health Services
Dan Ferguson	State Board of Community and Technical Colleges
Doris Barret	Department of Social & Health Services- Developmental Disabilities Administration
Gerianne Babbo	Nursing Care Quality Assurance Commission
Laura Hofmann	Leading Age
Laura Newberry	Aegis Living
Leslie, Emerick	Emerick & Bloom
Mary McKinney	Avamere Health Services
Pamela Pasquale	Washington State Nurses Association
Common Curriculum Consulting Members	
Designated Individual	Representing
Amy Purcell	Service Employees International Union
Jen Graves (possible consultant)	Kaiser Permanente
Jordan Shepherd	Labor & Industries
Josephine (Josie) Antonio	Cornerstone Healthcare Services
Marianna Goheen	Office of Superintendent of Public Instruction
Mary Baroni	Nursing Care Quality Assurance Commission

The Common Curriculum Workgroup is responsible for one legislatively defined goal:

LTC Workforce Development Work Plan

- iii. Creating a competency-based common curriculum for nursing assistant training that includes knowledge and skills relevant to current nursing assistant practices; integrated specialty training on mental health, developmental disabilities, and dementia; and removing or revising outdated content. The curriculum must not unnecessarily add additional training hours, and must meet all applicable federal and state laws. The curriculum must be designed with seamless progression from or toward any point on the educational continuum.

Testing Workgroup

Testing Core Members	
Designated Individual	Representing
Chair: Julie Ferguson	Advanced Healthcare, Washington Private Duty Association
Anne Richter	Department of Health & Social Services
Ashley Winkle	Cornerstone Healthcare Services
Carol White	Regency Canyon Lakes
Elena Madrid	Washington Healthcare Association
Josephine Antonio	Cornerstone Healthcare Services
Karen Cordero	Adult Family Home Council
Sandra Graham	Nursing Care Quality Assurance Commission
Tracy Rude	Nursing Care Quality Assurance Commission
WTB Policy Analyst – New Hire – Name TBD	Workforce Education and Training Coordinating Board
Testing Consulting Members	
Designated Individual	Representing
Amy Purcell	Service Employees International Union
Carolyn McKinnon (or appointee)	State Board of Community and Technical Colleges

Marianna Goheen	Office of Superintendent of Public Instruction
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The Testing Workgroup is responsible for one legislatively defined goal:

- iv. Establishing revised nursing assistant testing that aligns directly with the learning outcomes of the competency-based common curriculum, and improves access, reduces costs, increases consistency across evaluators, increases pass rates, and provides support for languages other than English;

SNF Staffing Models Workgroup

SNF Staffing Models Core Members	
Designated Individual	Representing
Chair: Bill Moss (or Peter Graham as alternate)	Department of Health & Social Services
Adam Canary	Nursing Care Quality Assurance Commission
Bett Schlemmer	Department of Health & Social Services
Deb Murphy	Leading Age
Jim Straub	Service Employees International Union
Maricor Lim	Providence Health & Services
Patricia Hunter	Washington State LTC Ombudsman
Robin Dale	Washington Healthcare Association
Sandra Hurd	Avamere Health Services
Tami Hollingsworth	Washington LTC Ombudsman
SNF Staffing Models Consulting Members	
Designated Individual	Representing
Michele Alishahi – Invited Guest, Possible Consult	Senate Ways and Means Committee
Bonnie Blachly	UW Washington Bothell

Bryce Andersen – Invited Guest, Possible Consult	Office of Financial Management
Kate Gormally – Consulting Member	Providence Health & Services
Mary Mulholland – Invited Guest, Possible Consult	House Appropriations Committee
Evan Hamilton – Consulting Member	Labor & Industries

The SNF Staffing Workgroup is responsible for one legislatively defined goal:

- v. Recommending requirements to improve skilled nursing facility staffing models and address deficiencies in resident care.

Project Plan

The steering committee will meet every four months for a full-day in-person session. The steering committee oversees and guides the work of the four workgroups. Workgroups will have time during each of the steering committee meetings to have an in-person work session. The workgroups will also typically meet monthly via web conference to complete their work. An interim and final report are due in November 2019 and November 2020, respectively.

High-Level Timeline/Schedule

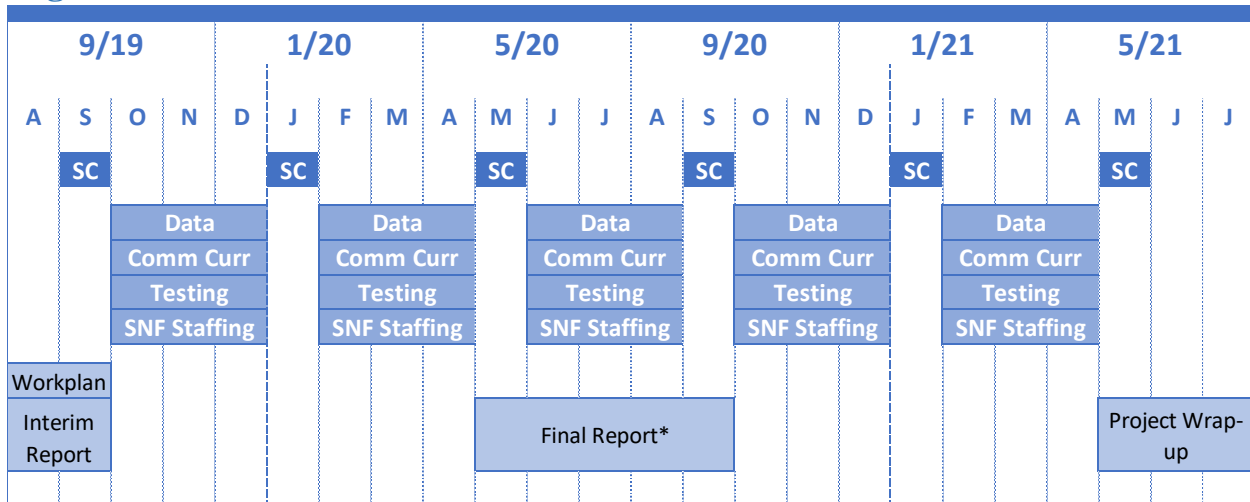


Figure 3. Timeline showing work of the steering committee and workgroups.

*It is recognized that the due date for the final report is not optimal. We will likely make a request to adjust the due date for the final report to 2021 or to add a final summary of the work in 2021.

Steering Committee Meetings and Project Deadlines	
September 19, 2019	Initial Meeting of Steering Committee and Workgroups
November 15, 2019	Interim Report on Activities, Findings, and Recommendations
January 24, 2020	Steering Committee Meeting
May, 2020	Steering Committee Meeting
September, 2020	Steering Committee Meeting
November 15, 2020	Final Report on Activities, Findings, and Recommendations
January, 2021	Steering Committee Meeting
May, 2021	Steering Committee Meeting

Steering Committee Session Activity Plans

The steering committee will have a deep dive on a selected topic at each of the six planned sessions. While the sessions have identified topics for a deep dive, it will not be the total focus of the meeting. All topics will be addressed in each meeting. The first session will include an orientation and progress update since the conclusion of the first LTC Workforce Development group. Subsequent sessions will focus on the topics associated with the legislative priority items as shown below. The focus of the final session in May 2021 will be transitioning from the 2019-2021 steering committee and closing out the project.

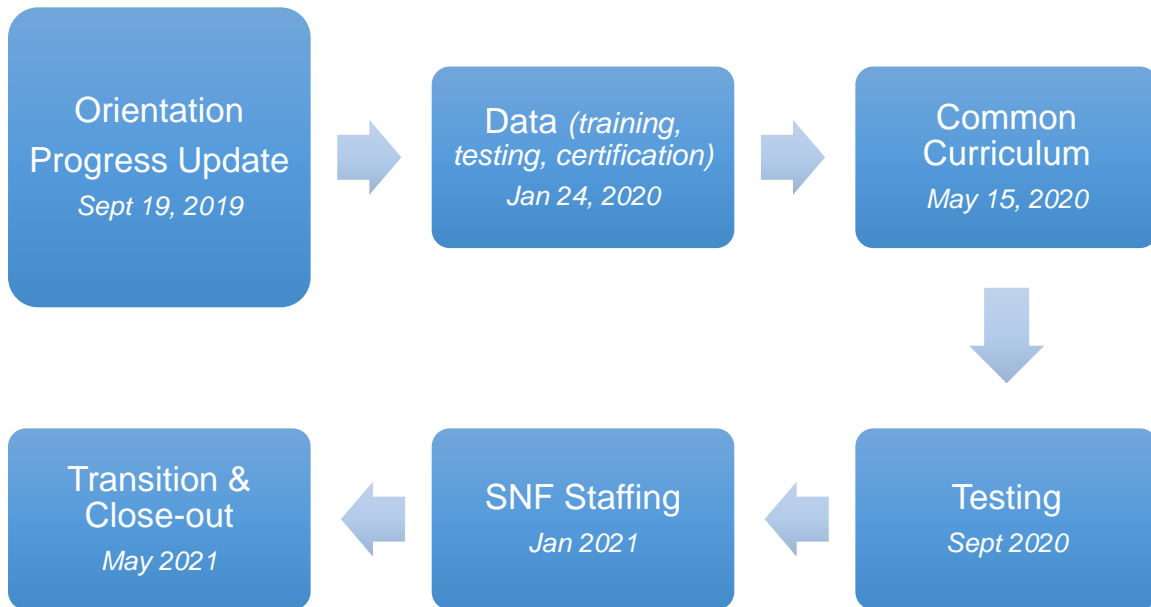


Figure 4. Major topics and timeline for the steering committee's work.

Project Approach

The overall purpose of the steering committee’s work is to implement the requirements of the budget proviso allotted to the Nursing Care Quality Assurance Commission in Engrossed Substitute House Bill 1109. The budget proviso directs the Nursing Care Quality Assurance Commission to continue its workgroup on long-term care workforce needs by acting on key workgroup recommendations provided in the December 2018 report to the Governor and Legislature. The budget proviso calls for action steps with regards to nursing assistant training curriculum and testing; data sources to assure timely training, testing, and certification; and projections for worker shortages and ongoing worker demand. The budget proviso also calls for additional recommendations related to skilled nursing facility staffing models to support quality care.

This work is different than the original workgroup purpose in that this steering committee will be creating detailed change plans, content and recommendations for potential implementation—all within the constraints of the budget proviso language, state fiscal support, and federal and state regulations.

Some of the detailed change plans, content, and recommendations may require changes to state statutes or rules. The project staff will track proposed changes and will work with legislative steering committee members and policy leaders to address needed changes.

As work progresses during the 2019-2021 project period, the steering committee may oversee implementation of the change plans and the detailed recommendations.

Steering Committee Meeting Flow

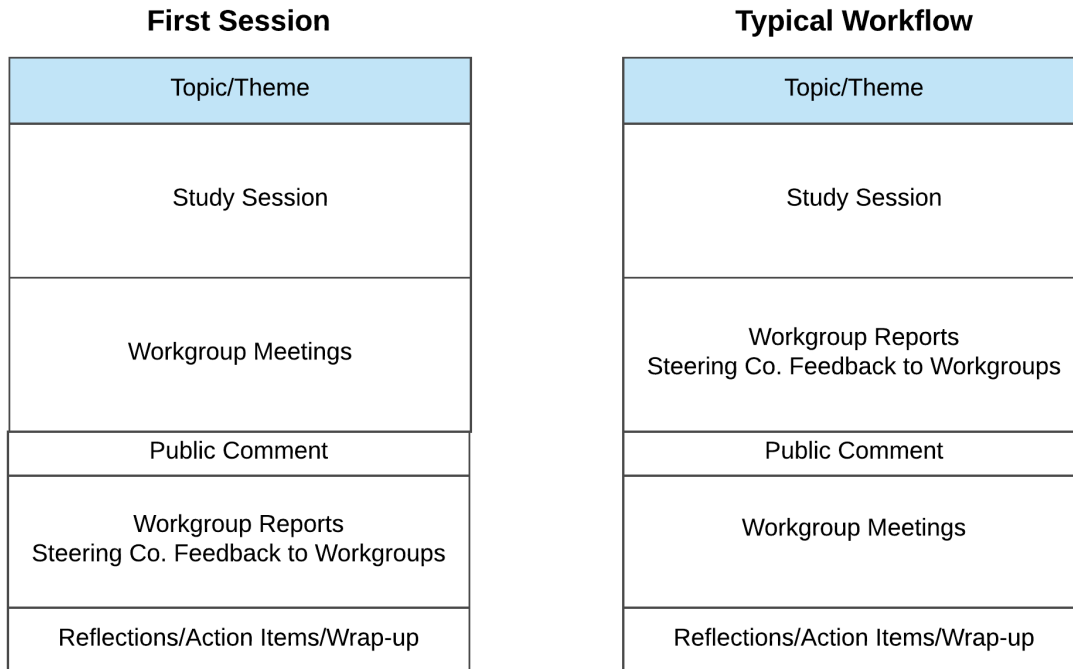


Figure 5. Steering committee workflows.

A typical steering committee meeting will have time set aside at the beginning of the meeting for a study session on a selected topic. Guest presenters, project staff, and/or committee members will provide content and address questions from the steering committee.

Workgroup chairs will report out on their work since the previous subcommittee meeting and seek feedback and advice from the steering committee as needed. Each workgroup report will last about 15-30 minutes, depending upon the degree of support needed from the steering committee.

The steering committee meetings are open to the public, and the public can observe, but not engage in the work of the steering committee. There will be 15-30 minutes set aside at each steering committee meeting for members of the public to address the steering committee. Other forms of public input will be developed and made available as the project progresses.

Workgroups will have 1-2 hours for breakout sessions after the public comment period. The whole group will come back together to wrap up their work, identify action items, and provide feedback for future sessions.

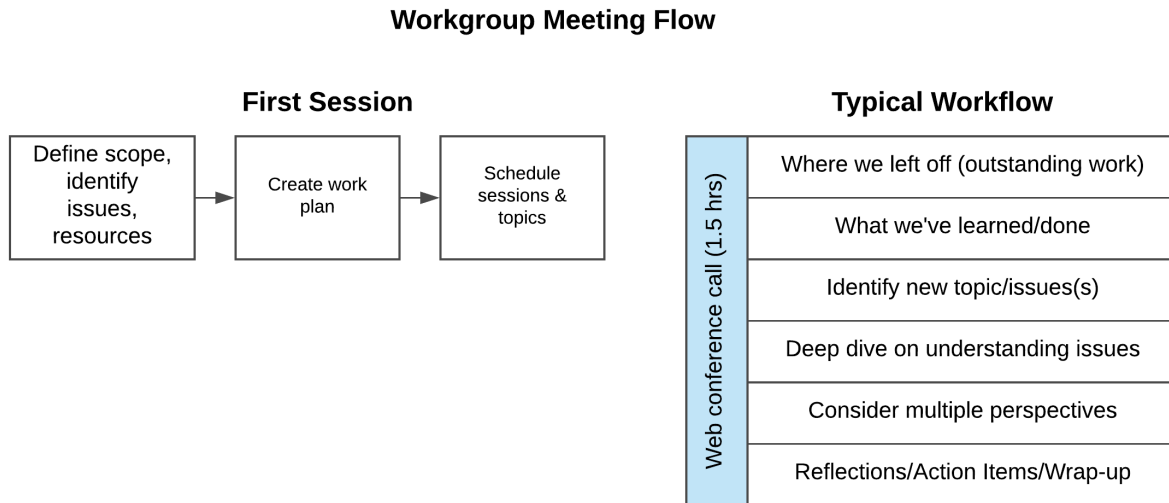


Figure 6. Workgroup meeting flows.

Workgroup meetings will occur during the in-person steering committee meetings and in web conference sessions monthly or nearly every month in between the steering committee meetings.

The workgroup chair will tailor the agenda and the tasks of the workgroup as needed. A typical web conference call will last 1.5 to 2 hours and will address previous work and what’s been done since the last session. The workgroups will follow their work plans developed in the first session to address new topics or issues, perform a deep dive to understand the issues, consider multiple perspectives in their discussions, and document any recommendations or agreements to forward to the steering committee.

The monthly electronic workgroup meetings will not be open to the public, but all decisions and recommendations of the workgroups will be reported at the subsequent steering committee meeting. Most of the detail work of creating change plans, content, and actionable recommendations will occur at the workgroup level. Workgroups have no delegated authority to make systems changes.

As much as possible, a project staff person and/or external facilitator will attend monthly electronic workgroup meetings and provide support to workgroups. This support can include sending meeting invites, initiating web conference calls, sharing insights from other workgroups, taking notes, and performing limited research. Workgroup members are expected to participate in all or most meetings, perform research in between meetings, and consider multiple perspectives when making decisions on recommendations.

The project team may periodically engage the steering committee chair and the workgroup chairs in planning work or coordination as necessary.

Project staff will track proposed changes to statutes and rules and will advise workgroups as needed related to current federal and state statutes and rules.

Constraints and Assumptions

The scope of work for this phase of the overall LTC Workforce Development project is defined in ESHB 1109. It does not include every recommendation from the 2018 work. However, most 2018 recommendations are broadly relevant, and the workgroups should take them into consideration when addressing their goals. See the Appendix for the excerpt from ESHB 1109 creating the charge for the 2019-21 steering committee and the 2018 recommendations.

Reports are due to the legislature in November of 2019 and 2020. The work of the steering committee continues through July 2021. Project staff will seek changes to the 2020 report due date to better reflect the continuing work of the steering committee.

The steering committee must work within the context of federal and state statutes and rules. It is likely that the steering committee will make recommendations that involve changes to state law. Making changes to state statutes and rules will take time and will require a transition period.

The stakeholder groups are diverse and independent. Some decisions are the responsibility of outside agencies. Systems change is complex, time-consuming work. The steering committee recognizes that both incremental and transformational change are necessary to reach the overall vision of the project – that people who live in Washington state will have access to quality services provided by a qualified and available workforce in long-term care.

Communication and Collaboration

Meeting agendas, advance readings, and other materials will be stored on an accessible DOH project website page available to the public. Periodic drafts of deliverables will be sent to the DOH project lead, for distribution or publication as appropriate.

Most communication with the steering committee will occur via email from the DOH project lead, steering committee chair, or administrative contact. On occasion, the facilitator may send information directly to the steering committee.

The facilitator and project management team will meet regularly via web conference or phone conference to plan and evaluate steering committee and workgroup sessions. At least once per month the external facilitator will check in with the project lead to address scope, schedule, budget, and quality issues as necessary.

Change Management

We don't anticipate changes to the project. In fact, the scope, budget, and schedule are fixed in the legislation. However, scope, budget, or schedule changes may happen for reasons unforeseen at present.

The project management team will address any proposed changes to scope, schedule or budget as quickly as feasible and develop a plan. The overall goal will be to work within the established constraints as best as possible.

Appendix

Legislative Charge

1 (9) (a) \$50,000 of the general fund—state appropriation for fiscal
2 year 2020 and \$50,000 of the general fund—state appropriation for
3 fiscal year 2021 are provided solely for the nursing care quality
4 assurance commission to continue the work group on nurses in long-
5 term care settings.

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9 governor and the legislature submitted in December 2018. The
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33 add additional training hours, and must meet all applicable federal
34 and state laws. The curriculum must be designed with seamless
35 progression from or toward any point on the educational continuum.

36 (d) The commission must provide an interim report on the
37 activities of the work group and its findings and recommendations for
38 statutory and regulatory changes to the governor and legislature by
39 November 15, 2019, and a final report to the governor and legislature
40 by November 15, 2020.

Full List of Recommendations from 2018

Long-Term Care Workforce Development Report to Governor Inslee and the Legislature (December 2018, ESSB 6032 Budget Proviso)

RECOMMENDATIONS

Data and Long-Term Care Workforce Needs

1--Direct the State Workforce Development Councils to work with ESD and other stakeholders to convene regional workgroups to identify data gaps and make recommendations to improve existing data reporting systems. If needed, recommendations may include alternative approaches to collect more comprehensive data specific to the long-term care workforce and its needs, including retention and turnover data. Any recommendation to develop new data collection or to expand existing data collection should include a cost-benefit analysis. This effort should incorporate the following elements:

A--Inclusion of demographics and their effect.

B--The use of evidence-based research on staffing ratios to set benchmarks for safe, quality care.

Nursing Assistant Curriculum and Testing

2--Review and revise testing to more accurately reflect essential knowledge and skills relevant to current NAC practices and to align directly with the learning objectives of an updated standardized curriculum.

3--Study the current certification test systems for LTC workers (HCA and NAC) and establish recommendations for improvement. The study should assess:

A--Improving testing access in rural and underserved areas.

B--The cost of testing, and the potential for cost savings through contract or vendor changes.

C--The potential for allowing employers to administer tests.

D--Whether a certificate of completion is sufficient for a HCA, or if a certification test is necessary.

E--The use and value of the bridge program. Create recommendations for improvement, or consider eliminating the program.

4--Provide supports for skills testing evaluation for HCAs and NACs in languages other than English.

5--Direct DOH and DSHS to collaborate with LTC providers and other stakeholders to identify priority learning content and desired learning outcomes to create a competency-based common curriculum for nursing assistant training programs that:

- A--**Efficiently integrates person-centered specialty training (on mental health, developmental disabilities, and dementia) including self-determination.
- B--**Removes/revises outdated content (e.g. HIV/AIDS training requirements).
- C--**Requires adequate program hours without adding more than necessary.
- D--**Reflects minimum standards established through federal and state law.

6--Perform a “Lean” or other performance audit process of NAC and HCA testing programs to identify ways to increase access and efficiency, including:

- A--**Simplifying and speeding up the application and approval process for becoming a test site.
- B--**Increasing test sites and frequency of test offerings to ensure testing availability to all students within 45 days of training program completion.

7--Look at increasing reciprocity among states for licenses and certifications.

8--Perform a root-cause analysis of NAC skills testing to:

- A--**Examine variability in evaluation and identify ways to reduce potential bias and improve evaluator inter-rater reliability, fidelity, and consistency.
- B--**Identify, evaluate, and reduce other potential reasons for low pass rates.
- C--**Identify and implement ways to increase skills pass rates.

9--Explore ways to allow NAC candidates to complete a second attempt of the NAC certification exam at a reduced rate. Perform a cost analysis to ensure that there is not an adverse effect on initial testing fees or on those who pass the exam on the first try.

10--Encourage use of registered apprenticeship programs in the LTC and the health care industry.

LPN Education

11--Support development of more part-time options and hybrid/distance-learning opportunities for students.

12--Standardize prerequisite requirements for LPN programs by convening relevant industry and education subject matter experts to review and streamline.

13--Support the State Board for Community and Technical College’s request to expand high-demand programs, including licensed practical nursing programs.

14--Obtain more data on LPN education (e.g. waitlists, capacity, data related to program availability and demand, including workforce projections).

Barriers to Career Advancement

15--Analyze the needs of LTC populations and identify what needs to be included for the basic scope for nursing assistants that applies uniformly across all LTC settings and is supported by a base or foundational curriculum.

16--Provide funding to analyze requirements at all levels; determine what is needed for integrating the system; and ensure coordinated development of step-wise nursing education continuum for seamless progression from entry-level through the following certification or licensing levels: HCA, NAC, LPN, ADN, BSN, and graduate nursing degrees.

17--Provide numeracy and literacy support programs.

18--Develop and launch a statewide effort to recruit and inform potential workers about the opportunities and value of working in LTC settings.

19--Evaluate reducing or subsidizing licensing fees for HCAs and NACs who are low income.

20--Strengthen the career ladder between high school/skills center programs and the LTC industry.

21--Evaluate and expand use of the nursing technician licensure.

22--Modify the facility-based training standards to:

A--Allow DSHS-qualified adult family home and assisted living providers to provide related continuing education for staff members in the adult family home or assisted living center.

B--Recognize provider experience in meeting instruction qualification requirements.

DOH/DSHS Oversight Responsibilities

23--Assure adequate funding of the O2G Health Professions Account to add the staff necessary to address backlog and to reduce wait times (related to training program/instructor approval, testing, and credentialing processes).

24--Direct DOH/NCQAC/DSHS to continue efforts with stakeholders to review their oversight structure; delineate an efficient division of roles in alignment with federal and state regulations; and provide their recommendations to the legislature by December 2019. This work should:

A--Address oversight roles related to nursing assistant training, testing, credentialing, investigation, and background checks.

B--Analyze current department oversight roles and competencies to assess gaps in knowledge or inefficiencies.

25--Implement a Lean or similar performance audit process to identify ways to simplify forms and speed up processes for:

A--Approval of training programs and instructors (nursing assistants, home care aides, continuing education, specialty training).

B--Credentialing.

C--Tracking of continuing education compliance status for LTC workers.