
	
	<b>Meeting Topic:</b> Workforce Development Workgroup
	<b>Date:</b> April 5, 2007
	<b>Time:</b> 1:00 – 4:00pm
	<b>Location:</b> Air Center Room M152

<b>Meeting Attendees:</b>	Wendy Cort OCHC, Paulette Luneborg AOPHA, Heidi Savage ODMRDD, Judy Kellum BIAOH, Paul Mosher ORSC, Bob Pawlak Goodwill Easter Seals Miami Valley, Christina Miller ODMRDD, Bettie Meadows ODDC, Amy Gerowitz OADSP/PATHS, Kim Linkinhoker OACBMR/DD, Mike Heifner UCBDD/Worknet, Mark Miller OACBMR/DD, Dom Frissora OHCA
<b>Purpose of Meeting:</b>	Workforce Development Workgroup - MFP

## AGENDA ITEMS:

Time	Topic	Discussion Lead
10 minutes	Check In – introductions, review agenda, review and approve meeting minutes	Work Group Lead
10 minutes	Updates on administrative items (website etc.)	Work Group Lead
20 minutes	Updates/Information sharing – general	All
60 minutes	Review and complete categorization of the barriers/factors identified with Goal #1	All
15 minutes	<i>BREAK</i>	
45 minutes	Discuss process for gathering supporting evidence for each of the factors; discuss next steps	Work Group Lead/All
10 minutes	Review Timeline	Work Group Lead/All
20 minutes	Check Out – action items, next agenda Evaluate meeting	Work Group Lead/All
Adjourn		


	
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## Meeting Notes:


Introductions for all new attendees. Meeting notes from 3/22/07 were approved by members.

A general administrative update was provided by co-leads that included the following:

- MFP website still in progress – this poses a bit of an issue for getting reading material out to team members.
- Scott suggested team members get thumb drives so that we can exchange information at the Air Center using one of the computers available in our meeting room. There was no indication that team members preferred this option.
- Bibi provided an update on the MFP Advisory Planning Group meeting. At this time it was also discussed that the MFP grant does not provide funding for specific workforce development initiatives or the recommendations that will be developed by this group.
- Amy Gerowitz provided an update on the DOL grant; basically that ODJFS is not applying for the grant.
- The draft charter was passed out; it includes additional ground rules developed by the workgroup on 3/22/07.
- Kim Linkinhoker asked whether it was acceptable/appropriate to bring in other attendees/representatives to the workgroup meetings. The response is that all meetings are open to anybody who has an interest in the subject matter; if it comes to making a decision by vote, each representative organization would still only cast one vote regardless of the number of representatives on the workgroup.
- The rest of the meeting was used to review the categorization of factors/barriers (as prepared by Scott), identify more specific issues under each one, and identify supporting evidence if possible. **The following is a summary of that discussion:**

	
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<b><u>FACTORS</u></b>	
<p><b>I. COMPENSATION</b></p> <ul style="list-style-type: none"> <li>• Reimbursement Rates</li> <li>• Set schedule (NF) vs. HPC</li> <li>• Transportation costs</li> <li>• Benefits (some staff don't receive any)</li> <li>• Need to look at not only how much providers get paid, but what they then pay their Direct Support staff</li> <li>• Hypothesize: If wages were increased by X% [e.g., 50%], what would that do to the workforce?</li> </ul>	
<p><i>Homework (HW):</i>  Amy/Wendy – Look at other states' rebalancing efforts/wage info/impact on the workforce; also look at what will the impact be on the need for HPC? If up, by how much?</p> <p><i>Cost benefit model – what's already out there?</i></p>	
<p><b>II. PROFESSIONAL DEVELOPMENT</b></p> <ul style="list-style-type: none"> <li>• Home health aide - not licensed</li> <li>• Voluntary</li> <li>• Some training requirements/certification for specific fields</li> <li>• Lack of career ladder (which feeds into poor compensation)</li> <li>• Disparity of wages between systems (Aging, MRDD, etc.) <ul style="list-style-type: none"> <li>i. Solve with a unified LTC budget</li> <li>ii. Need to keep in mind the differences between NFs and ICFs/MR</li> <li>iii. Suggest a chart that shows what JFS pays out for NFs, ICFs/MR, etc., across systems – What is the reimbursement? (Medicaid reimbursement rates)</li> </ul> </li> <li>• Look at Labor Market Information (LMI) percentage data</li> <li>• Potentially also look at Connecticut, Kansas and Oregon models (What have other states done and what has the impact been?)</li> <li>• Salary Survey</li> <li>• Some partial certifications (Medication Administration)</li> </ul>	
<p><i>HW: Look at impact in NF environment vs. MRDD [ICF/MR] environment – CAEL/Career Lattice model</i></p>	

	
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**III. RESPECT**


- PR – Get a positive image out there
- Agencies are doing more to let new people know how welcome they are
- Training going on at management level to ensure positive attitudes, address problems, etc.
- Is this ACTIONABLE? Can we turn around public perceptions? [Ex – Cleveland: “Make CARE your CAREER”]
- Part of the issue are employers who treat employees as less than important
- Issue also stems from the attitudes put forth by an agency’s executive staff, not just management/supervisors

HW: Paulette; Heidi/Chris – List of employers that have done good training and examples of what’s been done

**IV. DEMOGRAPHICS**

- Currently the typical Direct Support worker is a Caucasian female aged 16 – 44; that population is projected to decrease by 16%
- Supply vs. Demand
- Differences between rural vs. urban areas of the state and their access to services – some areas of the state have more resources than others
  - i. Levies: MRDD; PASSPORT
- Paying family member to provide care/be DSW
- Look at community to bridge cultural barriers
- There are other ways vs. HPC to serve people in congregate settings
- Can’t just conjure up people who care
- Technical assistance to help with constant care issue – State needs to support that in some way

HW: Paulette – Look at technical assistance possibilities

	
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<p><b>V. TURNOVER</b></p> <ul style="list-style-type: none"> <li>• Some facilities have added use of technology (i.e., lift device), which helps reduce the turnover rate</li> <li>• Microboards (family/friends) to be responsible to hire, set pay, etc. (MRDD)</li> <li>• Connected to career ladder issues – requires money for agencies to move people through a career ladder</li> <li>• In MRDD, supervisor has great impact</li> <li>• Other cultures seem to value this work willingly – but even those that want to stay may not be able to</li> </ul> <hr/> <p><b>No HW</b></p>

Action Item	Person Responsible	Deadline
Identified within meeting notes.		