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Testimony from Selfhelp Community Services, Inc.  
New York State Senate Standing Committees on Aging, Health, & Labor  
Senator Rachel May, Chair, Standing Committee on Aging  
Senator Gustavo Rivera, Chair, Standing Committee on Health  
Senator Jessica Ramos, Chair, Standing Committee on Labor  
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### Homecare Workforce – Challenges and Solutions

Submitted by Katie Foley, Managing Director, External Affairs and Communications

Thank you for the opportunity to provide testimony on the homecare workforce in New York State. Selfhelp operates a Licensed Home Care Services Agency (LHCSA) in New York City and on Long Island and a Certified Home Care Agency (CHHA) in New York City serving vulnerable older adults including Holocaust survivors. We are committed to helping New Yorkers age with independence and dignity and our home care programs are vital to this purpose.

Selfhelp was founded in 1936 and today is one of the largest and most respected not-for-profit human service agencies in the New York metropolitan area, with 46 programs throughout Manhattan, Brooklyn, Queens, the Bronx, Nassau, and Suffolk Counties. We provide a broad set of services to more than 20,000 elderly, frail, and vulnerable New Yorkers each year, while remaining the largest provider of comprehensive services to Holocaust survivors in North America. Our home care programs, and home care aide training programs, are a legacy of our founder's vision for providing employment and care within our community. Selfhelp offers a complete network of community-based home care, social service, and senior housing with the overarching goal of helping clients to live with dignity and independence and avoid institutional care.

#### **Challenges**

The demand for home care is growing, especially through the pandemic in which New Yorkers sought refuge at home, instead of in congregate settings such as nursing homes which had high death tolls. Policy reforms are necessary to strengthen the home care workforce in order to meet the growing need for more aides, nurses, and coordinators. The ongoing staffing shortage is a threat to being able to provide in-home care at a time when demand is increasing.

In today's testimony, I will focus on four current challenges we are experiencing at Selfhelp: home care aide worker shortage, a limited ability to admit new cases, decreasing size of incoming training classes, and professional staffing shortage. These staffing and funding challenges outlined below will persist without policy changes.

- **Home care aide worker shortage**

The COVID pandemic has been devastating to the home care workforce. While colleagues and families were staying home, home care aides and nurses were in the field caring for vulnerable patients every day. About 250 Selfhelp aides have not returned to work since the start of the pandemic which has created an unsustainable shortage of workers at a time when demand for home care is growing. The emotional and physical toll of the pandemic has been very difficult on our aides. Aides are worried about their health and the health of their families as they've been serving as front line workers throughout the pandemic.

- **Overall staffing shortage**

We are experiencing a widespread staff shortage across all types of professional positions within home care as well – specifically, nurses, coordinators, and recruiters. Although the shortage of home care aides is alarming, we are also concerned about the need to fill administrative, nursing, and recruiter roles, as these are also core to the operations of our home care program. Selfhelp serves a diverse population, including Holocaust survivors, and we need staff who speak multiple languages including English, Chinese, Spanish, and Russian. This is unprecedented hiring challenge will result in fewer home care cases being filled which will force more people into institutionalized care.

- **Inability to admit 100% of newly referred cases**

Due to the staffing shortage, we are currently only admitting about 1/3 of the amount of cases we used to accept before the pandemic. This is extremely frustrating to our staff as we want to be able to serve 100% of the people in need of care who are ready to trust Selfhelp. Given these shortages, we anticipate that the number of cases we are able to fill will only further decrease.

- **Decreases in training class attendance**

Our free HHA/PCA training program is providing classes for 50% fewer aides compared to class sizes from before the COVID pandemic. With fewer training graduates we have far fewer aides to hire internally. Fewer people interested in free job training for home care is related to increased competition for the same type of skills across industries including factories, retail, hospitality, and food service.

## Solutions

We support the testimony from our colleagues at United Neighborhood Houses, Chinese-American Planning Council (CPC), and Al Cardillo, President and CEO of Home Care Association of New York State.

### **Selfhelp supports these four recommendations outlined in CPC's testimony:**

- Pass A3145, the bill to end 24-hour shifts and fully fund split shifts;
- Pass Fair Pay for Home Care, to increase the minimum wage of home care workers to 150% of the minimum wage in the region;
- Remove the spending cap on Medicaid, and fully fund Medicaid to meet the needs of the more than 1/3 of New Yorkers that rely on it;
- Pass the New York Health Act and guarantee universal long-term care.

Additionally, I'd like to note Selfhelp's support for the following suggestions from Al Cardillo's testimony:

- **Allocate new Federal Medical Assistance Percentage (FMAP) funds** that will result in enhanced worker salary and benefit compensation, signing and longevity incentives, and provision of professional and personal supports (peer supports, transportation, child care, wellness).
- **Support expanding training programs with FMAP funds** as well as incorporate funding of training in basic provider rates and MLTC premiums, fund mentoring, and compensate aides in training.
- **Improve the stability of home care providers by enforcing DOH updates** to home health agency rates as required by the Public Health Law, and pass S.2117 /A.293.
- **Amend DOH reimbursement methodologies to recognize key home care costs** and needs for worker recruitment, training and retention and conduct a state-agency-led competitive labor market analysis to determine home care compensation levels and reimbursement rates necessary competitively to recruit and retain workforce capacity in home care to meet community need.

Finally, **Selfhelp supports policy decisions that fully fund the costs of LHCSA and CHHA services, including the costs of administrative work (coordinators), recruitment, and training costs.**

## Conclusion

Thank you for the opportunity to testify today. On behalf of the 20,000 clients we serve, I am grateful for the Senate's support for home care. For further questions, I can be reached at [kfoley@selfhelp.net](mailto:kfoley@selfhelp.net) or 212-971-7605.