

# Panel #2

Hi, my name is Chelsea Kirby. I have been an employee at Elmcroft since January 2011. I started my position here as a housekeeper/dining aid. I then went to the resident aid position, Med tech position, Training and development coordinator, and to my current position Business Office Coordinator. As the business office coordinator it still allows me to interact with the residents and staff daily. I continue to enjoy what I do and the company I work for. Every day I get to help make a difference in the residents life and watch our amazing team impact the resident in such a positive manner.

- What led you to become a direct care worker? Grandmother was in a home and I volunteered while she was there. The resident's reactions made me want to be more involved with them. Why did you choose this line of work? After volunteering, I realized how much I enjoyed helping and making them happy.
- What are the most rewarding aspects of your job? Making the resident's day happier makes the bad days good. This is especially important for the many residents who don't have family that visit often and we become their family. What are the most challenging aspects? Some resident families are unnecessarily difficult. I would also say having to watch the resident's decline, especially on days that are more difficult for them.
- What do you see as the barriers to recruiting direct care workers? A lack of understanding of what the job is, and how rewarding it can be.
- What do you see as the barriers to retaining direct care workers? Wages are a big barrier. Again, not having a clear understanding of what the job requires, especially that it we operate 24 hour/ 7 day a week. This can sometimes lead to feelings of being overworked especially for co-workers that have families.
- How can these barriers best be addressed? Interview shadows allowing candidates to see certain aspects of the job which helps avoid confusion after joining the community. In my case, I worked my way up from a dining aid/ housekeeper to the community's Business Office Coordinator. This path is not a typical one in our industry as there not often clear and accessible career growth opportunities. Communities should work harder to identify strong performers, and work even harder to find ways to allow upward mobility. Another opportunity is to provide REAL training opportunities. While there are a number of required trainings, they often are repetitive and do not allow the co-worker to truly expand their skills and insight.

Thanks,

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**Written Remarks**

**The Nugent Group**

**Delivered by  
Christina Minter  
Staff Development**

**For A**

**Panel on Long Term Care  
Direct Care Workers in Pennsylvania**

**Delivered at the Farm Show Complex**

**Before the  
Pennsylvania Long Term Care Commission**

**December 7, 2017**

Good morning everyone, and thank you for the opportunity to come before the Pennsylvania Long Term Care Council to speak on the role of a direct care worker in today's long term care sector.

I am Christina Minter, and I work for The Nugent Group, a long term care company with five facilities in Pennsylvania. In total, we provide skilled nursing care and personal care to more than 350 residents on a daily basis, as well as home health services. The Nugent Group is represented on the Long Term Care Council by Shane Nugent.

Today, I will share my experience as a direct care worker with you, and the aspects of the job that I truly loved, as well as the parts of that job that make it difficult to find and retain employees today. And I'll hopefully leave you with a blueprint moving forward, so that these issues can be properly addressed in the years to come, as we face a 'silver tsunami' of aging residents with little to no younger Pennsylvanians entering this sector's workforce.

As some of you may know, there are more than 700 skilled nursing facilities in Pennsylvania, and more than 1,200 assisted living residences and personal care homes. There are more than 88,000 nursing home residents and 66,000 assisted living and personal care residents. And the long-term care sector employs more than 83,000 people throughout the state.

I am one of those people. I began my career as a Nursing Assistant at St. Joseph Hospital in Warren, Ohio in 1987. I stayed there until 1996, when I became an LPN and moved to Miller Memorial Hospital in Andover, Ohio, where I worked on the ventilator and rehab unit for 4 years. In 2000, I took a job with The Nugent Group as an LPN, where I did restorative nursing, wound care, meds and treatments. That job allowed me to go back to school, and I graduated in 2009 as an RN. I was at St. Elizabeth Hospital for two years, until I returned to The Nugent Group in 2011. I've been there ever since.

I'm now the Staff Development Director at Nugent's Continuing Care Retirement Community in Hermitage, PA. We're a CCRC, which means that we provide personal care, skilled nursing care and independent living-all in the same place. I've been a utility player at The Nugent Group for many years: I've been the supervisor on the floor, the Registered Nurse Assessment Coordinator, and the Director of Nursing. I know what it takes to ensure each job is done well-and correctly. And I'm in a unique position to be here today to share my experiences from both sides of the long-term care spectrum.

My current title gives me one very important responsibility: it's my job to both recruit good people to work at our buildings, as well as make sure we keep them for the next few years. Too often, we lose good people to facilities down the street for 50 cents or \$1 more an hour. Our LPNs and RNs spend a few months with us, then go to work at nearby hospitals. CNAs go to Walmart or Burger King for better hours and less headaches.

Our buildings, which are very representative of the industry, are struggling mightily with turnover.

These problems are not new. There's always been a stigma associated with working in long-term care. But that never discouraged me. I'm one of the few people who actually left the hospitals and chose to work in long-term care instead. I always felt I could do more for a resident in a longer period of time, whether it was helping them to achieve comfort, stability or simply spending time with them, day after day. On the acute side of healthcare, residents are cared for and out the door in 1-3 days. Long-term care allows employees to tackle chronic issues affecting residents, and teaches staff the best way to manage the WHOLE person, versus just one health issue or ailment.

And there are rewards that come with our work, or no one would be willing to do this job, day after day. By far, the most rewarding aspect of this job is being on the floor, doing rounds, and seeing a resident smile. Or just knowing that a resident is happy with their care. Many of the residents I have cared for have had no family members or friends that come to visit. Direct care workers truly become family members to our residents, and we make our facilities their home. That's something that those who don't work in long-term care can't seem to fully comprehend: nursing homes, personal care, assisted living...they're not just 'holding facilities' for seniors who are ill. These facilities are home for the men and women who reside there. When I was a direct care worker, nothing

made me happier than to see a resident who was enjoying his or her time with us.

But there are certainly challenges that come with working in direct care. The most challenging aspect is being a member of a bigger staff, and the same could probably be said in any other job. But it's different when you have residents relying on you. Some days, your colleagues will call off work. Other days, colleagues will bring baggage in with them that has a negative effect on the rest of the staff. Working with a bigger group is always a challenge. It was also a challenge to work with those family members of residents who were very involved with their care, and who couldn't fully grasp just how much we do for their mother, father, grandmother, grandfather, etc. I completely understand their frustrations, as I'd want my family member cared for by staff just as I would care for them at home. But sometimes, it's never good enough, and it can be hard to keep up with expectations of each individual resident's family members.

As I said earlier in my remarks, in my new job as head of Staff Development at The Nugent Group, I've tried to address and break down barriers that keep us from recruiting and retaining good staff. So what keeps young people from applying for a job with us? Wages are certainly an issue, especially when the competition, including hospitals, other facilities and even stores like Walmart, are able to offer more benefits, higher bonuses, and better hours. Why come work for us when you can take a much easier job at a department store for 50 cents more an

hour? Again, no one should be fooled: this job is hard work. We have nursing students who come to work who leave after only a few weeks or a few months, simply because they could never have anticipated just how tough this job really is.

But it's not as simple as every nursing facility deciding to hand out raises, bonuses and benefits. In my current role, I see the reimbursement side of this business. I see that the reimbursement rate the state pays for a day of Medicaid is dramatically less than the real cost of care. So if we are to invest in our buildings and employees, we first need the state to invest in us.

I also see, firsthand, how the regulatory side of our sector deters folks from staying with us in their roles. From the time I started in long-term care up until today, the amount of regulation and paperwork that has been forced upon our sector has absolutely crippled our ability to use our time caring for our residents. And the scrutiny we're under from state departments has made things so bad that some of my co-workers have simply 'given up' and moved to another profession. The message we get from surveyors and those who regulate us tells me that they don't want us focused on resident care anymore-instead, we should be at a desk, filling out forms and ensuring boxes are checked. So if someone came to the Nugent Group to help residents and care for residents, a majority of their time is, unfortunately, now being spent behind a desk.



These barriers to recruiting and retaining staff can be addressed by focusing on the employers and the government regulators. First, employers must realize that retention starts before their employees begin to look for another job. It has to start on Day 1, with employee-centered work policies and opportunities, open lines of communication and benefits that make it attractive for employees to shun the competition and stay with their company. Employers should give their direct care workers room to grow in the company, and to eventually work their way into management positions. Employers should also encourage continuing education and higher degrees whenever possible.

For government regulators, I'll say it again: you must invest in us so that we can invest in our workforce. Medicaid reimbursement is abysmal. The regulatory environment is atrocious. It's harder and harder to do this job, and we need relief. We need support from you. We want to work with surveyors to make our facilities better. We want to work with the Departments of Aging, Health and Human Services to ensure our residents are being cared for by the best possible workforce.

Thank you again for the opportunity to speak today.

November 20, 2017

Direct Care Worker Panel DMVA Attendee

Name: Nicole Shivock  
Profession: Certified Nursing Assistant  
Location: Gino J. Merli Veterans' Center, Scranton, PA

BIO:  
Nicole Shivock

Nicole is happily married to husband Robert. Loves to spend time with her family. Nicole has been performing direct care for over 10 years. She loves her job at the Gino Merli Veterans' Center which she has been at for 5 years. Takes pride in being able to care for our Veterans.

QUESTION ANSWERS:

- What led you to become a direct care worker? Why did you choose this line of work?
  - Took Care of Grandparents with Alzheimer's disease and Parkinson's disease. I have a caring and outgoing personality and I want to be able to help and care for others
- What are the most rewarding aspects of your job? What are the most challenging aspects?
  - Give back to Veterans; Getting things done in a timely manner; trying to give combative residents care; trying to do my job during challenging times
- What do you see as the barriers to recruiting direct care workers?
  - Starting pay and resident to CNA ratio
- What do you see as the barriers to retaining direct care workers?
  - Resident to CNA ratio
- How can these barriers best be addressed?
  - Increase starting rate. Get more staff