

**CCoA Master Plan for Aging Special Committee
Master Plan for Aging Recommendation**

Workforce

Issue statement: Increasing the availability of medical, dental and mental health services in California cannot be achieved without expanding the educational opportunities required to develop a well-trained and diverse workforce. The John A. Hartford Foundation’s innovative student stipend and program development grants for geriatric and gerontology programs in the 1990s provided a model for expansion of experts in the field.¹ It is documented that through the Title IVE Child Welfare Educational Program, stipends and support services are effective tools to develop proficient workers . Thus, it is imperative that sustainable, financial educational supports need to be provided to entice workers to careers in aging and to assure they receive a quality education in all disciplines that provide services for older adults.

MPA Framework Goals

Goal 1: Services & Supports. We will live where we choose as we age and have the help we and our families need to do so.

Goal 3: Health & Well-being. We will live in communities and have access to services and care that optimize health and quality of life.

Recommendation: Increase the capacity of a diverse professional and paraprofessional workforce through stipends, foundation supports for enhanced training programs, and maximized scope of practice. California’s workforce must reflect the diversity of the state, including age, race, ethnicity, gender, sexual orientation, gender identity and physical ability.

Target Population: Older adults, individuals with disabilities, caregivers, and medical, dental and mental health professionals and paraprofessionals

Detailed Recommendation:

- Expand the availability of medical, dental and mental health services for older adults throughout the State, with a focus on rural and underserved areas, by authorizing paraprofessionals and healthcare workers/providers to work to work to the full scope of their respective licenses.
- Provide increased training and educational opportunities for those entering the field including high school, technical training programs, and community and four-year colleges.
- Provide advanced practice training for those who are currently working in the field of gerontology.
- Provide stipends for students pursuing university degrees in Social Work with a focus on aging.
- Prioritize geriatric medical students for loan forgiveness through the Song-Brown Family Physician Training Act and other loan forgiveness programs.

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Evidence in Support:

Stipends are available for university students pursuing social work degrees with a goal of working in child welfare through the Title IV-E program.ⁱⁱ

In 2018 California Department of Social Services (CDSs) received a grant from the Administration for Community Living to develop the first-ever loan repayment program for social work master's degree recipients who work for two years as an Adult Protective Services investigator. Based on the successful Title IV-E child welfare program and in collaboration with the Bay Area Social Services Consortium, the state contracted with U.C. Berkeley's California Social Work Education Center to administer the Bay Area pilot program.

Other efforts have included student loan assistance/forgiveness, such as the Song-Brown Family Physician Training Act, for people choosing a medical career.ⁱⁱⁱ

- Allow current paraprofessionals and healthcare workers/providers (e.g., nurse practitioners, dental hygienists, behavioral health peer counselors, social workers) to work to work to the full scope of their respective licenses or certification to increase the availability of services to older adults and persons with disabilities.

Evidence in Support /Other States:

There are 22 states that give nurse practitioners full authority to practice and prescribe without physician collaboration. Those states include Alaska, Arizona, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Iowa, Maine, Maryland, Minnesota, Montana, Nebraska, Nevada, New Hampshire, New Mexico, North Dakota, Oregon, Rhode Island, South Dakota, Vermont, Washington, Wyoming.^{iv}

In Michigan, Public Act 161 Dental Hygienist classification enables hygienists to provide oral screenings and preventive services outside the dentist's office to underserved populations in public and non-profit agencies, schools and nursing homes.^v

Certification is available to mental health peer counselors in 48 states and through the Department of Veteran's Affairs, increasing the number of mental health support providers available across the U.S. Certification allows for standardization, quality assurance, and Medicaid reimbursement for provider services.^{vi}

- Leverage telehealth to allow for long-distance patient monitoring and care. Telehealth would especially benefit care recipients and caregivers in rural areas, reducing the need for travel to medical appointments without sacrificing the practitioner's attention to health conditions.^{vii}

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Evidence in Support: A literature review by National Center for Biotechnology Information studied the impacts of telehealth, telemedicine, telemonitoring and telecare on family caregiver outcomes. The review found positive impacts on families involved in provision of hospice, home care, and chronic disease care.^{viii}

Prioritization: High

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ⁱ Isaacs, J., et al. The John A. Hartford Foundation and the Growth of Geriatrics. Health Affairs, V. 38, No. 1.

ⁱⁱ CalSWEC Title IV-E Program. <https://calswec.berkeley.edu/programs-and-services/calswec-title-iv-e-program>

ⁱⁱⁱ California Office of Statewide Health Planning and Development, Song-Brown Healthcare Workforce Training Programs. <https://oshpd.ca.gov/loans-scholarships-grants/grants/song-brown/>

^{iv} California Health Care Foundation. California's Nurse Practitioners: How Scope of Practice Laws Impact Care. September 2019. <https://www.chcf.org/wp-content/uploads/2018/09/NursePractitionerScopePracticeLaws.pdf>

^v RDH Magazine.com. Direct Access and the dental hygienist: Spotlight on Michigan.

<https://www.rdhmag.com/career-profession/alternative-practice/article/14036882/state-spotlight-michigan>

^{vi} SB 10 (Beall). Senate Floor Analysis 9/5/19.

file:///fsccoa/users/csewell/Downloads/201920200SB10_Senate%20Floor%20Analyses_.pdf

^{vii} National Center for Chronic Disease Prevention and Health Promotion. Telehealth in Rural Communities. May 31, 2019. <https://www.cdc.gov/chronicdisease/resources/publications/factsheets/telehealth-in-rural-communities.htm>

^{viii} National Center for Biotechnology Information. A systemic review of telehealth tools and interventions to support family caregivers. Journal of Telemedical Care. 2015 January; 21(1): 37-44.