

Aging Network Workforce Competencies

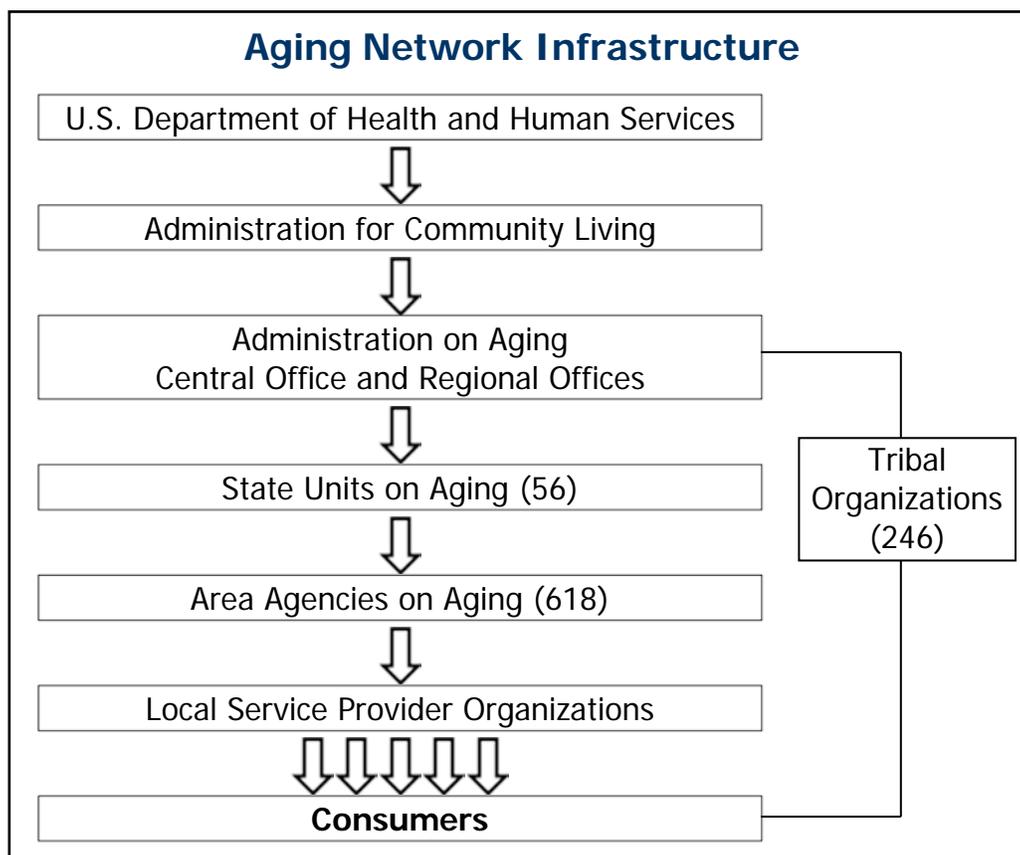
Research Brief
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Nancy Hooyman, PhD, Council on Social Work Education Gero-Ed Center
Mark Sciegaj, PhD, National Resource Center for Participant-Directed Services at Boston College
Virginia Dize, MS, n4a

A Critical Service Network

The National Aging Network (Aging Network), created in 1965 with the passage of the Older Americans Act (OAA), is the largest provider of long-term services and supports for older persons and their caregivers in the U.S.

The Administration on Aging (AoA) oversees the Aging Network, which consists of 56 State Units on Aging, 618 Area Agencies on Aging (AAAs), 246 tribal organizations, approximately 30,000 service providers, and 500,000 volunteers.



The Aging Network serves more than 10.9 million adults over the age of 60—3 million of whom rely on intensive supportive services provided by AAAs and local service providers, including home delivered meals, personal care services, transportation, and adult day care. Additionally, approximately 700,000 caregivers receive information assistance and support, including respite care.

A Service Network in Transition

The Aging Network is in the midst of a sea change created by the Affordable Care Act (ACA), the formation of the Administration for Community Living (ACL) (of which AoA is now one office), and persistent budget constraints. Responding to these new realities, AAAs in many parts of the country are redefining the scope of their missions, expanding their services to meet the needs of people with disabilities as well as older adults, and assuming new roles in long-term services and supports.

The vast majority of AAAs are launching initiatives requiring new knowledge and skills (e.g., the care transitions program, veteran- and participant-directed care, and options counseling expansion), where staff would benefit from enhanced training. Staff turnover due to retirement, which has increased in recent years and is projected to continue, has often resulted in recent graduates replacing more seasoned employees. These new hires may require training about the Aging Network and proven interventions for working effectively with older adults and persons with disabilities.

Identifying Aging Network Areas of Competency and Need

The Aging Network Workforce Competencies (ANWC) Partnership¹ conducted a survey of AAA directors and staff to identify competency-based workforce initiatives and needs within the Network in four key domains—gerontology, cultural competence, person-centered care, and participant-direction.

Key Findings

AAA staff recognize the need for ongoing training.

Although the vast majority of staff respondents reported that they were proficient or advanced in the four competency domains, they nevertheless specified needing additional training in participant direction (ranked first) and person-centered practices (ranked second). These rankings may reflect that gerontological and cultural competencies have been implemented in the field for a longer time than other

¹ The partnership includes the National Association of Area Agencies on Aging (n4a), the National Resource Center on Participant-Directed Services (NRCPSD) and the Council on Social Work Education National Center for Gerontological Social Work Education (CSWE Gero-Ed Center).

competencies. In addition, most staff in social work positions indicated that they received gerontological training as part of their social work education, especially through their field placements. Staff need for additional training in participant direction and person-centered practices reflects the growing number of AAAs that now serve adults with disabilities and the increased emphasis in the field on coordination and collaboration between these two systems.

AAAs currently do not have adequate time and funding to provide needed staff training.

Of AAA director respondents, 82% reported that less than 5% of their budget is used for staff training and development. In addition, 82% of AAA directors expressed concern regarding inadequate resources to meet training needs and 79% described time constraints as negatively impacting their ability to provide training. These barriers to training—lack of resources and time—are not unexpected: AAA director participants in the post-survey focus groups all agreed that training funds tend to be the first area cut in economic downturns. Additionally, AAAs struggle to maximize limited resources by focusing on training most likely to enhance immediate performance needs. Another time constraint is that staff time spent in training may interfere with or reduce their time in direct service provision.

AAA directors are receptive to exploring different training technologies and modalities.

Although the majority of staff respondents preferred in-person training, creative use of technology could serve the professional development needs of the large, widespread geographic areas covered by many AAAs. Webinars, an underused training method, are often viewed by staff as a less desirable approach than face-to-face modalities. However, this finding may reflect staff respondents' lack of experience with webinar technology or the fact that many small AAAs have outdated software/computers to take advantage of online offerings. One AAA director reported using webinars to train staff distributed across a large rural area, but required participation in face-to-face group discussions following the webinars. This hybrid method ensures comprehensive exposure to the same information and underscores the value the agency places on training, while providing opportunities for interaction. It has the potential for adoption by other AAAs.

AAAs often lack the resources to implement a systematic competency-based approach to workforce development.

The majority of AAA directors indicated that their agencies are measuring competencies “to some extent”; 26% indicated “to a great extent” or “very great extent”; with 19% noting little or no competencies measurement. Reasons for AAA directors to select “to some extent” may reflect the current state of the field of competency development: lack of measurement tools, uncertainty if the tools exist, and inadequate time to implement

measurement. Other barriers may be that the agencies' organizational structures (e.g., government or nonprofit) or other requirements (e.g., state-mandated training or competency initiatives) may not support the additional time needed to implement a competency-based approach. Job descriptions, which are tied to annual performance reviews and evaluation, are the primary measurement tool. In other words, while respondents use competencies, the identification of appropriate competency measures and barriers to their use requires further exploration, and has implications for future staff development.

Conclusion

Training is a high priority for most AAA directors and staff, but few survey respondents indicated that they are able to offer or obtain adequate training, due primarily to limited time and funding. The quality of the eldercare workforce is vital to the quality of care for older adults. The need for a competent workforce cannot be overstated, given the increasing complexity of older adults' needs, which demand higher-level skills and new, more consumer-driven approaches to care. AAA staff also need to be able to work in partnership with the health care community, necessitating a well-trained, qualified, and respected workforce to lead these critical efforts.

Analysis of the survey findings along with extensive input from the field led the ANWC Partnership to conclude that a coordinated national effort is required. Ideally, the AoA would work in partnership with the Aging Network to create standardized content and mechanisms to design effective and timely staff development training. However, the implementation of such a national training agenda will require both public and private funding to find the most efficient and effective approaches to address the training needs of the rapidly changing Aging Network.

