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Robert G. (Bob) Bethell Joint Committee on Home and
Community Based Services and KanCare Oversight
Tuesday, December 15th, 2020

Testimony given by:
Haely Ordoyne, Chairwoman
Kansas Adult Care Executives Association

Chairwoman Landwehr and Members of the Committee:

We thank you for the opportunity to collaborate with you regarding solutions for the adult care sector and for those that serve them.

You are all aware that the largest battle we are fighting right now is staffing. We have prepared the following solutions that we are proposing and hoping you will consider pursuing.

1. ***Future Coronavirus Relief Funding tied directly to increasing staffing wages.*** Homes used funding on PPE early on, but we will need funding for increased wages and hazard pay for outbreaks as they occur including into 2021
 - a. We would like to see a certain amount of money per hour increase for temporary aides, certified nursing aides, and registered nurses for a certain amount of time.
 - b. We would like to see a certain amount of money per hour for COVID-19 manager positions. These individuals would hold the primary jobs of tracking and trending, data gathering, conducting and tracking tests and infection control procedures primarily related to COVID-19.
2. ***State Wage Pass Through Dollars***
 - a. In 2002 twenty-one states implemented "wage pass-through" programs with the stated expectation that doing so will help address the shortage of direct-care workers employed by long-term care providers in their states. A wage pass-through is an additional allocation of funds provided through Medicaid reimbursement for the express purpose of increasing compensation for direct-care workers.
3. ***National Guard Support***

- a. Give us able bodied people, let us train them with an 8 hour course to aid as needed. These individuals can serve in many ways to aid us.
 - i. Nursing if licensed
 - ii. Temporary aide for direct care
 - iii. 1:1 visitations
 - iv. Housekeeping, laundry and environmental services
 - v. Cooking and dietary needs
 - vi. Administrative tracking and trending
 - vii. Testing, sampling, and transporting needs
4. ***Extension/Instill the Temporary Aide position.*** This position is tied to the Emergency Declaration, once it ends, so will this position. This will massively hurt our industry.
 - a. We suggest using temporary aide hours to meet the clinicals requirement and therefore create a permanent pathway for the transition of those who aided us during this pandemic
 - i. In the Texas model every 2 hrs. work experience=1 hr. class training and 1 hr. clinical
 - ii. In the Louisiana model the individual would take the 8hr temp course, then complete 16 hours of orientation time with checklist, serve 60 hours minimum of work as a TNA, then sit for the CNA test with up to 3 attempts to pass the licensing exam
5. ***Holding virtual clinicals for CNA courses as simulated labs***
 - a. These capabilities already exist, we would just need approval and coordination with Health Occupation Credentialing to be recognized.
6. ***State agency support for collecting testing samples***
 - a. The state approved regional labs have been great, but there is not currently someone from our lab that comes on site and administers surveillance and outbreak testing. Currently, we must do all of this and then either deliver or send off in the mail, the samples. This takes time away from direct care for residents and facility infection control practices of our own staff.

We are in a dire need of working towards solutions. We have been warned that a second wave is a high potential. With appropriate measures in place, we can withstand. However, if we take no action and instill no preventative measures, we will be crippled as an industry and will quickly find ourselves closing our doors to our loved ones, your loved ones, our individuals in need and our communities.

As always, we look forward to the opportunity to collaborate and create solutions.