PERFORMANCE AUDIT

Report Highlights



I-1163: Evaluating the Relevance of Required Training for Long-Term Care Workers

Long-term care workers support people who need extended care due to age or disability. Washington requires certain groups of long-term care workers to meet minimum training requirements, and the Department of Social and Health Services (DSHS) is responsible for overseeing their training. Some long-term care workers, known as "individual providers," must take 75 hours of training in order to provide paid care to Medicaid-eligible clients in the clients' own homes. While Washington's training is highly regarded overall, some stakeholders question the relevance of this training for individual providers to certain client needs. As a result, this audit examined how Washington could make the required 75-hour training for individual providers more relevant to clients with complex or special care needs.

Providers and clients were generally satisfied with the required training, though DSHS could further enhance its relevance going forward

The audit found through surveys that providers and clients were generally satisfied with the state's required training. Most providers were satisfied with the training and said the training helped them feel confident about meeting the needs of their clients. Most clients felt that their provider met their needs.

Despite general satisfaction with the training, some providers and clients thought it could be improved. A small percentage of providers and clients were dissatisfied with the training, and a larger percentage felt there was room for improvement. Training that lacks relevance to certain client needs can mean that clients, their families and their providers must take on the responsibility of training. While there are inherent challenges in making standardized training more relevant to the needs of all members of a diverse client and provider population, this audit nonetheless considered opportunities to further enhance the training's relevance.

The training could better cover certain population-specific topics such as mental health, managing challenging behaviors, developmental disabilities and caring for children. Greater flexibility in population-specific training could make it more relevant to diverse client needs.

Some providers would also like training in first aid and CPR, as is required for other long-term care workers in other settings. In Washington, other long-term care workers with the same scope of practice as individual providers receive training in first aid and CPR. Some long-term care training models in other states also require or include first aid and CPR.

DSHS could establish a more robust process for ensuring alignment between training content and client needs

State law requires DSHS to implement a system of quality improvement for long-term care services, with a focus on customer satisfaction and outcomes. DSHS does not currently have a robust process for regularly assessing alignment between training content and client needs, nor does it appear to thoroughly review the training for relevance to client needs when it approves training curricula. Establishing such a process is consistent with the stated goal of DSHS' quality improvement system, and would ensure the training is more relevant to the full range of its providers and clients going forward.

State Auditor's Conclusions

Washington voters have twice approved initiatives to strengthen the training requirements for long-term care providers, and the state's current 75-hour training requirements are some of the best in the country. This sentiment was validated by our surveys of individual providers and clients, with both groups indicating they are happy with the training and how it helped providers better meet the needs of their clients.

The training program for individual providers is clearly strong, but that doesn't mean it can't be improved. Specifically, some providers have expressed a desire to receive training in first aid and CPR, as is required for other long-term care providers in other settings. More broadly, the training could benefit from more population-specific options to recognize that a one-size-fits-all approach may not work. To keep the training relevant over time, we recommend DSHS develop an ongoing process to assess alignment between training content and the needs of clients, and adjust the training requirements accordingly.

Recommendations

We recommended the Department of Social and Health Services better align the first aid and CPR training requirements for individual providers with those of other providers in Washington by offering training in first aid and/or CPR. We also recommended the agency improve the relevance of the training going forward for the full range of clients and individual providers by establishing a more robust process for ensuring alignment between training content and client needs.