For the Editors

For many people with disabilities, life in their communities – in the workplaces, schools, neighborhoods, and multitude of places people gather socially – is influenced by the availability of qualified, reliable Direct Support staff. The Direct Support workforce is made up of people whose skills, knowledge, and commitment equip them to assist individuals with disabilities in maintaining health, self-determination, and community participation. That workforce and the supports it provides is in jeopardy today because the demand and need for such services is outgrowing the pool of individuals willing and able to fill those essential positions.

The forces impacting the availability of quality Direct Support services are many: wages, benefits, education, professional status and standards, and budgets, as well as the steadily growing total number of Direct Support staff needed. The articles in this Impact describe how these issues are being addressed across the country through strategies that reach from the U.S. Congress to the homes of individuals in local communities. We hope that these articles will provide readers with ideas that they can implement to ensure that individuals with disabilities continue to have access to the supports they need to live lives of their choosing in their local communities.

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Direct Support Then and Now: Reflections on My 35 Years in the Profession

by Rita McAninch-Hastings

We’re sitting around a table discussing the upcoming Presidential election. The individuals whose apartment I am in are hoping that the people they will vote for will change the direction of the services they are currently getting. I’m hoping they will also. The thought that runs through my mind is that when I started in this field the people I supported were never given the option of voting.

My life has come full circle. The people I support now are like the people I supported when I started in this field 34 years ago. My role as a Direct Support Professional (DSP) was just beginning. I didn’t know then what my role was going to become and how the lives of the people I support would change. Wisdom comes with education and experience. It also comes with living this life long enough to be able to look back to where we were and where we are now. I say “we” because this is a journey I have taken with the people I have been fortunate enough to support. I never planned on this being my career. I stumbled across the job because it was close to my home and I didn’t think it would be that tough. After all, I had two cousins with developmental disabilities who lived at home. Sometimes they needed a little more help than their siblings, but so what. I could not have been more wrong or more right.

Imagine a two-story building with brick walls that housed 50 women who slept in metal cots one foot apart. There were gang showers and bathrooms where the toilets did not have any dividers for privacy. Things like the clothes room, the TV locked in a [Hastings, continued on page 32]
In their 2003 Joint U.S. House/Senate Direct Support Professional Recognition Resolution (S. Con. Res. 21/H. Con. Res. 94), Congress noted that “private [service] providers and the individuals for whom they provide support and services are in jeopardy as a result of the growing crisis in recruiting and retaining a direct support workforce” and that “it is the sense of the Congress that the Federal Government and the States should make it a priority to promote a stable, quality direct support workforce for individuals with mental retardation and other developmental disabilities that advances our nation’s commitment to community integration.” In pursuit of greater specification of actions that would promote a “stable, quality direct support workforce,” in 2004 Congress requested that the Department of Health and Human Services (DHHS) conduct a study on the shortage of Direct Support Professionals (DSPs) supporting persons with intellectual and other developmental disabilities (ID/DD). This study was to include analysis of “the root causes associated with high vacancy and turnover rates and an examination of the impact this shortage may be having on services for people with ID/DD.”

That requested report was transmitted to Congress in 2006 (U.S. Department of Health and Human Services, 2006). It confirmed the crisis in direct support, reporting back to the Congress that in the 15 years between 2005 and 2020 the number of DSPs needed to provide long-term supports for individuals with ID/DD would increase by about 323,000 or about 37% because of population growth, increased life expectancy among persons with ID/DD, aging of family caregivers, and expansion of home and community-based services. The report further observed that “meeting the future demand for DSPs will be extremely difficult to achieve through enhanced recruitment,” and that “it will be critically important to improve the retention of existing DSPs along with efforts to attract new ones” (U.S. Department of Health and Human Services, 2006, p. vi). To highlight the importance of retention the report summarized 26 studies yielding an average turnover rate of 50% among DSPs supporting persons with ID/DD. To demonstrate the significance of retention to the challenge of maintaining a sufficient DSP workforce up to 2020 the report provided the graph above (see Figure 1) to show the dramatic effects of very modest decreases in DSP turnover on the total number of new DSPs that would need to be recruited each year to meet the projected growth in service need. It shows the number of DSPs who will be needed each year between 2005 and 2020 if (as shown in the dark line) DSP turnover remains at 50% each year as opposed to an alternative scenario (shown in the light line) in which DSP turnover were reduced by 2% each year for 10 years and then remained at 30% between 2015 and 2020 (i.e., 48% in 2006, 46% in 2007, etc.). As shown, the net effect of the second scenario would be a need to recruit 289,000 fewer DSPs to meet the needs of persons with ID/DD in 2015 than if turnover were to stay at current levels, and a need to recruit 346,000 fewer new DSPs in 2020.

There are many factors that have been identified over the past 30 years to have constant association with DSP turnover. But without question the most consistent and consistently strong predictors of DSP turnover are factors related to compensation (e.g., amount of pay, value of wages and benefits, satisfaction with pay, pay relative to local cost of living). Concerns about the low pay of community DSPs, its effects on staff recruitment and retention, and ultimately the links between these and the viability of the nation’s commitments to community lives for people with disabilities have led to Congressional activity.
In March 2007, Representatives Capps (D-CA) and Terry (R-NE) introduced the Direct Support Professionals Fairness and Security Act of 2007 (H.R. 1279). Its operational purpose is to provide federal funding to States to allow them to respond to the crisis in recruiting and retaining DSPs in private community service settings. The legislation specifically targets private agency DSPs because, as the DHHS report to Congress notes, DSPs in private agencies earn on average 26% less in wages and substantially less in fringe benefit contributions than public agency DSPs. To address the crisis in wages for private agency DSPs, H.R. 1279 focuses on the discrepancy between public and private employee wages and authorizes states to develop a “Direct Support Professional Wage Enhancement Plan” by which the State would utilize federal funding augmentations over a five-year period to equalize average wages (and fringe benefits up to 20% of wages) for private and public agency DSPs. In addition to its primary provision, H.R. 1279 would authorize State planning grants and require Inspector General and Government Accountability Office audits of the implementation and outcomes of the program.

The proposed legislation has a steadily growing number of co-sponsors, more than 100 at this writing. Its critics view the proper environment for such policies to be with States, which control Medicaid expenditures and are free to implement policies to increase DSP wages, but are also responsible for paying the State’s share of those increases (25-50% depending on the state’s per capita income). The critics in Congress should, however, be held accountable for their own characterization of the current situation as a crisis and their associated responsibility to act accordingly. Alternatives to H.R. 1279 are certainly possible, but doing nothing in the face of the recognized crisis will only contribute to the vulnerability of already vulnerable people.

Reference

Charlie Lakin is Director of the Research and Training Center on Community Living, University of Minnesota, Minneapolis. He may be reached at 612/624-5005 or at lakin001@umn.edu. The full text of H.R. 1279 can be found at http://thomas.loc.gov (enter H.R. 1279).

DSP Fairness and Security Act: ANCOR’s “You Need to Know Me” Campaign

When the 109th Congress closed in 2006, 86 legislators had signed on as co-sponsors of the Direct Support Professionals Fairness and Security Act (H.R. 1264), a historic first for the developmental disabilities community. Born of an arduous effort championed by the American Network of Community Options and Resources (ANCOR) since 2001, its goal is passage of federal legislation that would bring fairness to compensation levels that work to discourage people from seeking employment as Direct Support Professionals (DSPs). The legislation received unparalleled attention last year thanks to more than 50,000 viewers. To address the crisis in wages for private agency DSPs, H.R. 1279 focuses on the discrepancy between public and private employer wages and authorizes states to develop a “Direct Support Professional Wage Enhancement Plan” by which the State would utilize federal funding augmentations over a five-year period to equalize average wages (and fringe benefits up to 20% of wages) for private and public agency DSPs. In addition to its primary provision, H.R. 1279 would authorize State planning grants and require Inspector General and Government Accountability Office audits of the implementation and outcomes of the program.

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A quality, sustainable Direct Support workforce is an essential component in the quality of life for individuals with disabilities and their families. In fact, Direct Support Professionals (DSPs) are a key ingredient in an effective support model. The importance of developing a high quality, stable DSP workforce is clear, yet numerous challenges exist in the traditional DSP workforce model.

Current workforce issues have resulted in significant concerns about the quality of care and outcomes for individuals with disabilities. A significant DSP shortage exists (Hewitt, Larson, & Lakin, 2000). Staff quality and inadequate training are persistent concerns. Issues of distrust and maltreatment are often directly related to lack of skills and poor training of support staff. Staff turnover rates have consistently averaged between 45 to 70% (Larson, Hewitt, & Knoblach, 2005). These complex problems require creative solutions that consider alternative ways to find, recruit, and retain quality staff. Program options that allow the flexibility for individuals and families to manage their individual budgets and services, such as consumer-directed supports, are an example of such a solution (Hewitt, 2004).

**Benefits of Consumer Direction**

Consumer-directed supports is a service option in which individuals with disabilities and their families use individually-set and controlled budgets to select and purchase their own supports. It offers a myriad of positive benefits to individuals, families, Direct Support staff, and funding agencies. Services are provided in a way that minimizes administrative costs and maximizes services and support. Consumer-directed models focus less on organization priorities and more on individual and family needs. They empower individuals and families by providing greater control and choice in relation to their support services. One of the most promising aspects of the consumer-directed supports option is its potential to effectively address many significant DSP workforce challenges.

The active participation of individuals with disabilities and their families in recruitment and hiring helps to address the issue of staff shortages. Individuals and families are often best equipped to understand potential resources in their lives as well as the type of employees that are a good match for their individualized needs. The individual’s and family’s active participation in recruiting and hiring staff provides an opportunity to increase the pool of potential DSPs.

Families and individuals often look beyond traditional staffing options to their networks of friends, family, and community members. This flexibility allows for the inclusion of individuals who may not have previously been involved in delivering services to individuals with disabilities (Mellum & Heffernan, 2004).

Under the consumer-directed supports model, staff training is often tailored to the individual’s specific needs. Instead of learning generally about evacuation procedures the staff learns the specific evacuation procedures for the individual they support. Instead of

**Challenges in Consumer Direction**

Consumer-directed programs present some new workforce challenges. One challenge is building a sense of community.
nity and increasing professionalization for DSPs. The sometimes isolating nature of providing support for a family, without the larger community of professionals, can be a challenge. Although DSPs in consumer-directed services gain closeness to the family and individual, they may lose the network of peers. The informal nature can lead to a lack of professional identity.

An additional challenge is one of boundaries. With greater individual control comes increased responsibility for individuals and families. Both staff and families report that roles and boundaries may be less clear. Further, some families miss the support system of a larger organization to manage training, administrative tasks, and challenging staff issues.

**Overcoming the Challenges**

Consumer-directed supports represents an innovative and creative way of looking at services. It also requires new approaches for supporting staff. Although compensation remains an important factor in keeping quality staff, a sense of respect and value remains among the most significant components in the retention equation. Families may need to implement specific supports to facilitate a sense of professionalism and connection for DSPs. Individuals and families can support DSP professionalism by encouraging participation and subsidizing membership in professional organizations such as the National Alliance of Direct Support Professionals (see www.nads.org) and professional conferences.

To build a sense of community it may be helpful to have regular staff meetings and appreciation events. Professional listservs can facilitate communication and a sense of community among DSPs. Families may also find it beneficial to assign another DSP as a mentor. Some families have pooled resources for training and connections across staff. Training such as the online College of Direct Support (see www.collegeofdirectsupport.com) and Realis tic Job Previews are helpful tools for providing effective DSP training in individual and family settings.

While DSPs in the consumer-directed model often make higher wages than when they work in traditional organization-driven services and supports, and individuals and families can access benefits for their employees through fiscal support entities, it remains uncertain how benefit utilization compares to traditional services. The University of Minnesota is currently studying individuals and families who use consumer-directed supports to gain more understanding of wages, benefits, and retention of DSPs who work in individually-directed services and supports.

**Conclusion**

Consumer-directed supports is an important component of the workforce solution. This model may not solve everything, but it is an important, innovative step toward promoting meaningful, sustainable change in the DSP workforce.

**References**


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After an adult lifetime of independently caring for my personal needs, a spinal cord injury forced me into a crash course on finding and managing people to help me with my most basic and personal activities. The resources available to me were (1) the money in my savings account, which eventually would be supplemented with Medicaid dollars; (2) a service provider agency to assist me with things like completing background checks on prospective DSPs and managing payroll; and (3) a neighborhood and community that I needed to trust would hold the social capital I needed to first survive, and eventually have a life I truly enjoyed. My most immediate need was to find people to help me with essential activities, such as getting out of bed every morning and having something to eat a few times each day. My two greatest fears were losing my sense of control over activities that I was asking for help with, and depending on people who proved not to be dependable.

My DSPs have very difficult jobs. I ask that they come to work, usually early in the morning or late in the evening, and work shifts only 2-3 hours long (sometimes less). I ask them to often get “up close and personal,” to perform tasks such as lifting me (which is not easy), and to help me with nearly every aspect of my personal life. Their jobs are not ones that anyone can jump in and do well, a fact that is sometimes forgotten. Though I sometimes forget it myself, the DSPs who have been with me the longest and who I trust the most have developed a unique set of skills, knowledge, and attitudes. They are the first to admit they are not experts on providing personal care to all people with disabilities nor are they gourmet chefs. But they do have expert knowledge in providing personal care that matches my needs and preferences, and in preparing the kind of meals I enjoy the most. This is exactly why it is so important for me to recruit and hire quality people, and to make the job attractive enough for people to stay around once they get the hang of it.

I need several hours of support each week. I have chosen to have several people working for me part-time, instead of having fewer people, or one person, covering most shifts. While this presents the challenge of managing several people and means that no one person feels a sense of ultimate responsibility for my care, I value the flexibility this provides in managing changing work schedules. I also like it because it assures I have ultimate responsibility and clear authority in deciding how things will be done in my home. As I have grown to trust my DSPs I have become more comfortable with and appreciative of them trading hours without my involvement so that all shifts are covered, and with them providing ideas about how to do things at home.

Each of my DSPs has developed a work routine of their own. My role has become to listen to what they need from me to get things done more efficiently. I see my increased trust in each of my DSPs and their judgment as signs of my increased maturity as a supervisor. I have let go of some of my control over the small things, but maintain my influence in setting the tone and deciding what’s important in my home.

Being responsible for managing my DSPs includes recruiting and hiring enough candidates to meet my support needs, and developing some ways to punt at times when I do not have enough of them. Recruiting DSPs has become easy for me because I live on the edge of a large university campus. I have used classified ads in the student newspaper, posted flyers, as well as word of mouth and personal contacts to find people interested in being a DSP for me. As the method of recruitment moves closer to me, my chances of finding someone with strong interest increase (i.e., a personal contact is more likely to follow through than someone answering a newspaper.
ad). As I have lived in my current apartment longer and have gotten to know my neighbors, it has become easier to find people to work as a DSP for me. I try to pay a higher hourly wage than other jobs in my area. Currently, all of my DSPs earn the same wage and I find ways to give people bonuses when they do exceptional work. In the future, I will probably begin giving raises to people as they stay with me.

When I started, someone with more experience advised me that my DSPs could not be my friends. Though confusing at times, I now consider my DSPs colleagues. When they come to my house, they are coming to work. As their supervisor, I need to assure all our relationships are grounded in an environment of respect, patience, and flexibility. As I ask my DSPs to honor these values, it is important that I model them in my relationships with each of them. For example, I need to show respect to my DSPs and the work they do by being home and done with my activities each night when my DSP comes to help me go to bed. Similarly, I expect my DSP to arrive on time each evening so I’m not forced to bide my time waiting when I could be doing other things. Being flexible means I sometimes go to bed a little earlier or later if my DSP has special plans. I am usually happy to accommodate such requests because I know an evening will be coming when I will need to ask that DSP for a similar favor.

Patience, of course means being understanding if someone is occasionally late and even honest when the tardiness didn’t cause any real problems, and trusting that as I give someone a break, that person or maybe someone else will soon be giving me a similar break. We are usually able to maintain an atmosphere of respect, flexibility, and patience. I am amazed at the way some very difficult situations do not turn into catastrophes or interpersonal struggles as my DSPs and I model these behaviors for each other. I shudder to think how quickly everything would unravel if I began to ignore any of them.

My need for personal assistance has thrust me into the role of a supervisor for several people, as well as a recruiter when I need to be. After two years, I have learned a lot and still have more to learn. I have been lucky enough to have a very solid group of DSPs, and worry about the day that each will leave to get a “real job.” Though it is neither good nor bad, the task of managing DSPs will be a lifetime challenge for me. I would not have it any other way.

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NADSP Code of Ethics for Direct Support Professionals

The Code of Ethics developed through the National Alliance for Direct Support Professionals (NADSP) guides DSPs through the ethical dilemmas they face daily and encourages the highest professional ideals. Direct support staff, agency leaders, policymakers, and people receiving services are urged to read the code and to consider ways that these ethical statements can be incorporated into daily practice. This code is not the handbook of the profession, but rather a roadmap to assist in staying the course of securing freedom, justice, and equality for all.

1. Person-Centered Supports. As a DSP, my first allegiance is to the person I support; all other activities and functions I perform flow from this allegiance.

2. Promoting Physical and Emotional Well-Being. As a DSP, I am responsible for supporting the emotional, physical, and personal well-being of the individuals receiving support. I will encourage growth and recognize the autonomy of the individuals receiving support while being attentive and energetic in reducing their risk of harm.

3. Integrity and Responsibility. As a DSP, I will support the mission and vitality of my profession to assist people in leading self-directed lives and to foster a spirit of partnership with the people I support, other professionals, and the community.

4. Confidentiality. As a DSP, I will safeguard and respect the confidentiality and privacy of the people I support.

5. Justice, Fairness and Equity. As a DSP, I will promote and practice justice, fairness, and equity for the people I support and the community as a whole. I will affirm the human rights, civil rights and responsibilities of the people I support.

6. Respect. As a DSP, I will respect the human dignity and uniqueness of the people I support. I will recognize each person I support as valuable and help others understand their value.

7. Relationships. As a DSP, I will assist the people I support to develop and maintain relationships.

8. Self-Determination. As a DSP, I will assist the people I support to direct the course of their own lives.

9. Advocacy. As a DSP, I will advocate with the people I support for justice, inclusion, and full community participation.

Reprinted with permission from the National Alliance for Direct Support Professionals. For information on ordering Code of Ethics brochures, wallet cards, and posters visit www.nadsp.org/library/code.asp or call the Institute on Community Integration at 612/624-4512.

Families caring for a loved one with a disability know first-hand that finding and keeping good Direct Support Professionals (DSPs) is not always easy. Many families struggle with the coming and going of DSPs. Some DSPs leave after only a few days and others leave after a few months. These constant changes affect the family’s quality of life as well as that of their family member. Families want good workers to show up, be on time, and stay on the job for longer than a few months. They need and want DSPs who are qualified, caring, creative, and competent.

There are a number of things that families can do to increase their chances of finding and keeping good DSPs. The remainder of this article describes strategies for families in five key areas: finding a good match, using insiders, creating and using a Realistic Job Preview, interviewing that works, and keeping new staff.

**Finding a Good Match**

The overall hiring goal is to find someone who is a good match for your needs and wants. There are a number of strategies that help you match the person’s skills and interests to your wants and needs. For instance, make a list of your wants and needs. Talk with DSPs who work for you to find out what skills are needed to do the job. Then figure out what is most important by ranking each item starting with the item that is most important and ending with the least important item. This will help you define clearly who you are looking for and what your expectations are. A better match means the needs and wants of your family member are more likely to be met by the person you hire.

**Using Insiders**

Second, you must look in the right places to find the right DSP. Some families use agencies to help them find DSPs while others advertise in local newspapers or use Internet ads, flyers, and job postings. These *outside* recruitment sources are less effective, cost more, and can lead to applicants who do not match well with your needs and wants. Outside sources often don’t work because people who respond to these approaches usually do not fully understand what you expect.

A better strategy is to ask DSPs who already work for you or other people who know you well to help you find new DSPs. This is called *inside* recruitment sources. Someone who knows you and your family member knows what it takes to do the job and can explain expectations to possible applicants. When DSPs understand what is expected on the job they have fewer unmet expectations and are less likely to leave soon after they start.

Encourage “insiders” to recruit for you by offering recruitment bonuses such as money and other gifts. Recruitment bonuses can be set up so the insider gets part of the bonus when the new DSP completes orientation and part after they have been on the job for six months. Help insiders recruit for you by providing calling cards; these are business cards that help insiders tell others about the job. Insiders can give these cards out to the people they know who are interested in coming to work for you. Include a mini-job description (one or two statements about what you are looking for) and the name and number of the person they can talk to about the job.

**Creating and Using a RJP**

Tell applicants about the job by doing a Realistic Job Preview (RJP). A RJP is a recruitment strategy used to give applicants detailed and balanced information about what is expected of them on the job, what a typical day is like, your family as the employer, and the work setting. RJPs can be short videos, scrapbooks or photo albums, slide show presentations, or other formats that describe and illustrate the daily work of the DSPs you employ. RJPs tell applicants about both the fun parts of the job and the challenging parts of the job. Be sure to include what other DSPs who work for you say about the job, along with favorite moments and important duties. Share the RJP with an applicant before you offer them a job to help them make a good decision about accepting or not accepting a job offer. Applicants who are not a good match often decide they are not interested in the job after they’ve experienced a RJP.

**Interviewing that Works**

Interview applicants based on whether they can meet your needs. Review resumes and applications to make sure applicants meet minimum requirements. If they don’t, then don’t interview them. You do not have to interview every applicant.

Before an interview, prepare a list of questions based on what you need and want DSPs to do on the job. Decide what type of questions will help you find the information you need to make a good decision about who to hire. Asking ques-
tions about past work behaviors (structured behavioral questions) will provide information about what the applicant will do on the job if you hire them. Ask about real situations and how the person has handled them in the past. Situational questions ask what a person might do in a make-believe situation or what they would do if given two equally desirable/undesirable outcomes. Asking fact-finding questions will give you a clear picture about the person’s work history, education, knowledge and values. Avoid asking illegal questions (such as age, religion, marital status) by sticking to questions based on what the person needs to be able to do on the job.

Make the process of deciding who to hire easy by setting up a scorecard and rating each person you interview. A scorecard has a list of important things you want and need in someone who works for you and your family member. Rate each applicant by how they answered the questions and decide who you will hire based on their score.

Keeping Them Once You Hire Them

If you want new staff to stay on the job for a long time, make sure they feel welcomed and are trained to do what you need to have them do. Welcoming new DSPs helps them feel at ease on the job. Welcome them by showing them around and explaining any “house rules” on their first day. Introduce the whole family and other DSPs who work for you and your family member. Train them to do the job the way you would like it done. Learning a new job is not always easy. Your role is to teach the new DSP. This can be difficult because different people learn in different ways. Find out the best way to teach someone something by asking the person how they learn best. When training DSPs remember the following steps: (1) Tell them what they are expected to do, (2) show them what they are expected to do, (3) have them do the job, (4) check to make sure they are doing the job, and (5) give them feedback about their work.

Conclusion

Finding and keeping great DSPs can be challenging. Using these simple strategies can help to make the task easier. Another resource that families and individuals with disabilities may find useful is Find, Choose, and Keep Great DSPs, two toolkits designed for individuals with disabilities and families that provide easy-to-use tips and strategies to help people to find, choose and keep high quality DSPs. Anyone can download a free copy at www.ildspinitiative.com/.

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Overview

National Direct Support Workforce Resource Center

The National Direct Service Workforce Resource Center offers information, resources, and assistance to state and local governments, employers, Direct Support Professionals (DSPs), people with disabilities, families, and researchers, with the goal of improving the quality, recruitment, and retention of the direct service workforce nationwide. It brings together in one place the nation’s premier resources on the topic of direct support, offering the following:

- A comprehensive online searchable database of resources, current research, best practices, and policy briefs related to improving recruitment and retention of DSPs. Among the resources listed are program materials such as worker and supervisor training curricula, guidance on measuring workforce outcomes, recruitment materials, and peer mentorship program designs.
- “Find a Direct Support Professional/ Caregiver” resource page providing links to state worker registries around the country as well as Area Agencies on Aging and the Centers for Independent Living nationwide.
- Access to information, resources, and advice from a diverse and experienced team of direct service workforce policy professionals through a national toll-free telephone number.
- Individualized, in-depth technical assistance for selected state Medicaid agencies awarded through an annual application process.

The center is funded and supported by the Centers for Medicare and Medicaid Services (CMS) under the U.S. Department of Health and Human Services. The partnering organizations contributing their expertise include:

- The Lewin Group
- Paraprofessional Healthcare Institute
- Research and Training Center on Community Living, University of Minnesota
- The Westchester Consulting Group
- Institute for the Future of Aging Services
- The Annapolis Coalition

For more information about the National Direct Service Workforce Resource Center visit www.dswresourcecenter.org or call toll-free 877/822-2647.
Finding, hiring, training, and retaining Direct Support Professionals (DSPs) are enormous challenges for agencies and the people they support. Thankfully, there are many research-based solutions available to address these challenges. People may be wondering, “Where should I start? Where do we go from here?” The answers depend on precisely what challenges need to be addressed.

Assess the Situation

The first step toward addressing workforce challenges is to assess the situation to understand the precise nature of the challenge. Is it a recruitment, retention or training issue – or all three? What’s the specific nature of the challenge? Assessing the situation may include examining turnover rates, current vacancy rates, and the proportion of new hires who left their jobs within six months of hiring for both DSPs and frontline supervisors. It may involve assessment of staff demographics, job satisfaction, job performance, consumer satisfaction, teamwork, training needs, reasons for leaving, and other factors. It is most helpful to review this information on a site-by-site basis. These assessments can clarify whether the initial understanding of the problem is accurate, and provide documentation useful later in determining the effectiveness of interventions.

Implement Interventions

The next step is to work with an intervention team that includes representatives from each of the affected stakeholder groups (DSPs, supervisors, administrators, people with disabilities, and families) to select an approach and develop a plan to address the top priority challenge. The team should identify the goal toward which it will work and select a strategy to achieve it. The plan should clearly identify: (1) the components of the strategy, (2) major barriers (the “yeah buts”) and how those will be addressed, (3) strategies for measuring progress, and (4) a timeframe for implementing and evaluating the intervention. Many different strategies could be selected to address challenges identified by the intervention team. The chart, “Challenges and Suggested Strategies to Overcome Them” (see opposite page), shows common recruitment, retention, and training challenges and lists interventions that can be used for each. The intervention team must become familiar with the strategies that are most likely to be helpful so that an informed decision can be made about which one(s) to implement.

The intervention strategies fall into four basic categories:

- Finding and hiring employees. Includes recruitment interventions designed to increase the number of qualified people who apply for open positions. Realistic Job Preview interventions that help applicants make informed decisions about whether the organization and job are a good fit for their interests and needs, and selection interventions designed to choose from among the qualified applicants the ones whose skills and characteristics best match the position.
- Welcoming and training employees. Includes orientation and socialization interventions that welcome new employees to the organization and help them understand “the way we do things around here,” and training interventions to build competencies needed to perform the job well.
- Motivating and supporting employees. Includes supervision and management training interventions to build skills and improve practices, team-building interventions to prevent and reduce conflict and improve team functioning, recognition interventions to let employees know they are appreciated and to acknowledge accomplishments, and career development interventions to help employees move along a career path.
- Changing systems. Includes networking interventions to build collaboration across organizations and groups of individuals or families struggling with similar challenges, policy interventions to reduce inequities and improve systemic support for broader initiatives (e.g., wage and benefit issues), and professional development interventions that build opportunities for DSPs nationwide to be recognized as professionals.

Plan for Success

Regardless of the intervention selected, there are several common keys to success. Having a local champion who values the intervention and has the skill and power within an organization to ensure that it is carried out is essential. It is also important to have an inclusive planning process so that individuals with disabilities, family members, DSPs and supervisors are participants in the change process. In addition, successful interventions are based on accurate assessments of the challenge and well thought-out solutions. Finally, successful interventions include an evaluation component that measures whether the intervention was implemented as designed, reviews progress on an ongoing basis so adjustments can be made as needed, and measures whether the intervention actually produced the final outcome that was desired.

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Challenges and Suggested Strategies to Overcome Them

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Few qualified applicants • Trouble finding new DSPs</td>
<td>• Expand recruitment sources • Use inside sources for recruitment • Use recruitment bonuses • Advertise and implement hiring bonuses • Build regional recruitment consortia • Build recruitment networks with schools and other community organizations • Market the organization • Implement internship programs for students</td>
</tr>
<tr>
<td>• Turnover rates are too high • New hires quit in the first 3-6 months</td>
<td>• Use inside recruitment sources and bonuses • Give Realistic Job Previews • Improve selection practices • Conduct structured behavioral interviewing • Conduct effective orientation • Improve socialization practices • Establish peer mentoring programs • Improve training practices</td>
</tr>
<tr>
<td>• New staff are unsure of their job roles and functions</td>
<td>• Conduct effective orientation • Establish peer mentoring programs • Improve coworker support for new hires</td>
</tr>
<tr>
<td>• Supervisors have difficulty finding time to coach and mentor new employees</td>
<td>• Establish peer mentoring programs • Reduce turnover so there are fewer new employees to coach and mentor • Share training resources with other organizations so that the supervisor can focus on coaching and mentoring</td>
</tr>
<tr>
<td>• Lack of training opportunities</td>
<td>• Use Web-based training or distance learning • Develop a training calendar • Collaborate with other organizations to share training resources • Create a staff development culture instead of offering only regulatory-driven training opportunities</td>
</tr>
<tr>
<td>• Poor performance • Training doesn’t produce desired results</td>
<td>• Establish competency-based training • Use skills mentors to coach staff as they learn new skills • Create a staff development culture instead of offering only regulatory-driven training opportunities</td>
</tr>
<tr>
<td>• Supervisors report being overwhelmed, don’t know how to do their job</td>
<td>• Support and train supervisors • Mentor supervisors • Give Realistic Job Previews for supervisors</td>
</tr>
<tr>
<td>• Morale problems</td>
<td>• Implement participatory management • Offer recognition • Create mentoring and other career advancement opportunities • Reward long-term employees</td>
</tr>
<tr>
<td>• Conflict between staff and supervisors or managers</td>
<td>• Use teams/team-building • Provide networking opportunities • Support and train supervisors • Implement high performance supervision practices</td>
</tr>
<tr>
<td>• Co-workers don’t get along</td>
<td>• Use teams/team building • Improve selection practices • Provide supervisor training • Train on conflict resolution</td>
</tr>
<tr>
<td>• Long-term staff are dissatisfied</td>
<td>• Enhance career development opportunities • Offer mentoring programs • Provide networking opportunities • Treat DSPs as professionals • Allow competent staff to test-out of required training • Offer advanced training • Recognize tenure, reward years of service • Implement equitable wage/benefit plans</td>
</tr>
<tr>
<td>• Dissatisfied individuals with disabilities or family members</td>
<td>• Conduct a job analysis • Implement competency-based training • Integrate code of ethics into socialization, orientation, and training practices</td>
</tr>
<tr>
<td>• Inadequate wages or benefits</td>
<td>• Investigate possible policy changes • Tie competency-based training to salary increases • Develop career paths • Professionalize direct support roles</td>
</tr>
</tbody>
</table>


The Importance of Competency-Based Training for Direct Support Professionals
by Traci LaLiberte and Amy Hewitt

High quality supports result in a higher quality of life for individuals who use direct support services. With the demand to fill open direct support positions, and a shrinking labor pool skilled in direct support services, it is critical that staff be effectively trained so that they can deliver high quality supports. Currently, much of the training and education available to Direct Support Professionals (DSPs) falls short of achieving that desired quality. Too often training and education programs focus heavily on regulatory requirements such as prescribed topics and the number of hours a DSP attends a training, rather than on the development of knowledge, skills, and attitudes that enable them to effectively support people with disabilities.

Competency-based training and education have been among the fastest growing and changing elements in human services. Currently, much of the training and education available to Direct Support Professionals (DSPs) falls short of achieving that desired quality. Too often training and education programs focus heavily on regulatory requirements such as prescribed topics and the number of hours a DSP attends a training, rather than on the development of knowledge, skills, and attitudes that enable them to effectively support people with disabilities.

Competency-based training is an avenue to achieve a highly knowledgeable and skilled workforce. A systematic approach to training that is monitored and revised in light of performance and outcomes is the hallmark of a competency-based training program. Clear and detailed outcomes or competency statements are used to develop the training curriculum and measure learners’ competence. Competency statements are derived from a thorough job analysis of the learner’s duties, which contributes to the training goal of meeting individual learner needs as they master various skill levels.

In community human services, competency requirements and corresponding competency statements for DSPs have increased with the evolution of community support and consumer-directed support practices. The Community Support Skill Standards (CSSS) serve as the national set of competencies for the field of direct support. The CSSS were developed in 1996 by the Human Services Research Institute in collaboration with a multidisciplinary advisory group. A comprehensive job analysis was completed across a variety of community human services settings resulting in the development of 12 broad competency areas with corresponding detailed skill statements. The competency areas are as follows (Taylor, Bradley & Warren, 1996):

- Participant Empowerment
- Communication
- Assessment
- Community and Service Networking
- Facilitation of Services
- Community Living Skills and Supports
- Education, Training and Self-Development
- Advocacy
- Vocational, Educational and Career Support
- Crisis Prevention and Intervention
- Organizational (employer) Participation
- Documentation

Over the last decade, three additional competency areas have emerged:

- Relationships and Friendships
- Person-Centered Goals and Objectives
- Supporting Health and Wellness

A national validation study conducted by the Research and Training Center on Community Living (RTC/CL) (Larson et al., 2007) validated the importance of adding the Relationships and Friendships, and Supporting Health and Wellness competency areas to the CSSS.

Competency-based training is being used increasingly in community human service settings. While there is more to accomplish, there are many exciting advances. For instance, several states, including California, Oklahoma, and Illinois, have moved toward statewide competency-based training programs where a standardized curriculum is used to deliver training during the initial period of a DSP’s employment. Other states, such as North Dakota, Indiana, Georgia, and Minnesota are using community colleges and other postsecondary education systems to deliver competency-based training to DSPs.

The College of Direct Support (www.collegeofdirectsupport.com), an Internet-based, multimedia training program, has built its competency-based training curriculum on the CSSS. It has the essential elements of a competency-based training curriculum, including a...
comprehensive transfer of knowledge from classroom to workplace component. This competency-based, online training has resulted in more skilled DSPs throughout the world. The College of Direct Support is currently used in the United States by nearly 65,000 DSPs who cumulatively have been assigned over 2 million lessons. Australia has also recognized the need for the high quality competency-based training and credentialing, and the College of Direct Support is being incorporated into the Australian credentialing program.

Today’s DSPs desire the opportunity to acquire the knowledge, skills, and attitudes necessary to perform at a level of excellence in their jobs.

Staff development and training are what yield increased wages; without high quality, competency-based training, there will likely be little progress toward adequate wages for DSPs. The direct support profession must learn from other professions such as nursing, social work, substance abuse, and child care that have connected training, education, and credentialing to career advancement and wage increases. To that end, in July 2006 the National Alliance for Direct Support Professionals (NADSP) launched the first national voluntary credential for Direct Support Professionals, with competency-based training requirements based on the CSSS competencies as its cornerstone (see www.nadsp.org). This credentialing will help ensure that people who pursue careers in direct support share a common knowledge base and skill set. It will further ensure that DSPs make a commitment to practice according to the NADSP Code of Ethics. In other words, the job will no longer be left to chance. DSPs will be required to show mastery in the nationally-validated competency areas through skill demonstration on the job and through a portfolio of work samples.

Conclusion

Direct Support Professionals have long been overlooked and undervalued. Yet, an individual with disabilities enjoys a higher quality of life when supported by competent, consistent, and reliable DSPs. Looking back over the past decade of advancements in workforce development, competency-based training and education have been among the fastest growing and changing elements in human services. With this recognition, the field is both energized and challenged to continue to move forward in an effort to provide all DSPs with competency-based professional development opportunities they need to become recognized, appreciated, credentialed, and well-paid professionals with a career path in community human services.

References


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Resources from Around the Country

• The Right People for the Job (2002). A publication for agencies and individuals with disabilities offering straightforward information on how to recruit, assess, and select direct care workers for home and community-based care. Published by the Paraprofessional Healthcare Institute and MEDSTAT. Available online at www.paraprofessional.org/publications/WorkforceTools_Vol1No1.pdf.


• Responding to the Challenge of a Changing Workforce (2002). A journal article discussing recruitment strategies for use with non-traditional groups such as Baby-Boomers, Generation Xers, and racial and ethnic minorities. Authored by Dennis Doverspike, Marianne Taylor, Kenneth Shultz, and Patrick McKay and published in the journal Public Personnel Management, 2000, 29(4).

• American Society for Training and Development (www.astd.org, 703/683-8100). Through its Web site and other resources ASTD provides extensive information for training and staff development professionals in a variety of fields. Resources include its publication Infoline, a single-topic how-to reference that addresses training questions. Among the many topics in Infoline are team-building, successful orientation programs, and identifying core competencies for job success.

The development disabilities field needs to develop a more comprehensive approach to the frontline workforce, an approach that encompasses wages, health insurance, and educational benefits. Low salaries have barely kept pace with inflation while higher health care costs continue to erode modest incomes. Access to higher education is the only true way to professionalize the workforce and gain a measure of economic security for dedicated, competent staff.

**Health Insurance**

With funding for community agencies limited by reimbursement rates, it is inevitable that the need for modest wage increases will conflict with efforts to contain health costs. Health expenditures have increased dramatically and a growing share of agency operating budgets is going toward health coverage. Responses, although expedient, may be counterproductive. Wages are stagnant, while increases in health costs are passed along as higher premiums. Inferior plans are offered, with less coverage, more out-of-pocket expenses, and longer waiting periods for new employees. Fewer direct support workers are able to afford health coverage even if eligible.

Increasingly, agencies are replacing full-time workers with part-timers or contract employees who are not eligible for health benefits. In addition, more are shifting the health insurance burden to public insurance by expanding “opt-out” bonuses to Medicaid-eligible budgets, resulting in a further erosion of the employer-sponsored system. Some workers are even turning down higher paying promotional opportunities to maintain their income eligibility for public insurance. At the same time, there is evidence that employer-provided health insurance is an important factor in recruiting and retaining frontline staff. Increased job tenure has been reported at agencies that have higher rates of employer-sponsored health coverage, and at agencies that spend more per worker for health coverage. Also, turnover may increase if quitting a job does not result in the loss of health benefits. In surveys, many workers say that employer-sponsored health insurance is an important factor in their decision to take or keep a job. Many employers believe that insurance coverage enhances employee health, morale, and productivity. Thus the value of employer-provided insurance for the health of an organization far exceeds its direct cost.

**Higher Education**

Educational benefits that provide access to higher education and opportunities for career advancement must be part of the effort to strengthen the workforce. The new service paradigm requires an educated workforce with increased responsibility, more autonomy, knowledge about the disability field, a strong value base, and critical thinking and communication skills. Many agencies now require some college or even a degree for the most challenging direct support positions. For example, of the almost 2,000 direct support staff employed by the YAI/National Institute for People with Disabilities, a large non-profit provider in New York, more than half have at least an associate’s degree, and over 40% hold a bachelor’s degree. To support this trend more employers are providing partial tuition assistance and/or paid educational release time. Creative collaborations with public colleges have leveraged additional resources. Compared to non-credit trainings, educational attainment based on college credits and degrees is recognized nationally, portable to other employers, transferable to other colleges, and linked to promotions and higher earnings.

Disability Studies is an emerging multidisciplinary area of study that has gained acceptance within academia. This dynamic field is rooted in the Disability Rights Movement and starts with the premise that the perspectives and experiences of people with disabilities are central. Increasingly it is playing a role in the graduate education and daily practice of clinicians, teachers and other professionals. Many University Centers for Excellence in Developmental Disabilities are now offering certificate or degree programs in Disability Studies. It is equally important that frontline staff becomes familiar with the core knowledge and shared values inherent in this approach and that it informs their daily practice. Enhancing access to college, and linking Disability Studies coursework to career ladder opportunities, can transform the culture of our field. The incorporation of Disability Studies within higher education, at both the undergraduate and graduate level, is the key to professionalizing the frontline workforce.

**Conclusion**

The problems facing low-wage workers in our field are similar to those confronting workers in related health and human services occupations. We need to forge an alliance with other stakeholders, including representatives of the long-term care field and organized labor, in the effort to provide a living wage, offer decent health benefits, and expand access to higher education. All these elements must be in play to achieve a stable, well-educated, professional frontline workforce.

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Managing Diversity Within Human Services

by Richard Oni

Cultural diversity has been around a long time, though we have perhaps not realized it. The old idea of the United States as a “melting pot” of different cultures all combining to form one has given way to a new idea of a cultural “salad” or “quilt,” one where cultures still maintain their unique qualities and combine to form a large richer world. America is now, and has been since its inception, the destination of choice for immigrants. Two-thirds of all global immigration is into the United States, and most of these immigrants are from contrasting cultures that do not blend readily into American life.

Many human service providers must interact with staff and with people receiving their services who are culturally different from themselves. Diversity in hiring must be coupled with training and a long-term commitment to managing diversity. Managing diversity should include the following:

- Create opportunities for staff, individually and collectively, to discuss issues related to ethnic, racial, cultural or gender differences in an honest and upfront manner, while protecting each person’s sensitivities and not invading his or her private life.
- Create opportunities for staff to explore the values, perspectives, and communication methods of the different groups represented within the agency and among those to whom they provide services.
- Make explicit to all staff the unwritten rules of the agency.
- Establish and regularly revisit the agency rules regarding anti-discrimination and harassment.
- Develop a mentoring program to help DSPs from diverse cultures to succeed on the job.
- Include managing diversity, understanding cultural differences, and problem-solving in a diverse workforce on the agenda at staff meetings as well as in formal training.
- Eliminate discrimination by ensuring that all selection devices are job related (valid), and free of cultural bias.
- Institute aggressive recruitment from groups that are under-represented in the agency.
- Provide training and sensitization to diversity and cultural differences for all managers involved in the hiring process.
- Establish realistic goals (not rigid quotas) for hiring a diverse workforce so that an agency can assess its progress in the hiring and promotion processes.
- Appoint members of diverse groups to committees of the company.

Managing Diversity Within Human Services

Top management commitment is mandatory for successfully managing diversity in human services. The explicit and implicit signals sent by top management through its support of diversity in leadership, attendance at training programs, promotion of high-visibility diversity projects, and swift and forceful responses to people and practices that stand in the path of accomplishing true multiculturalism in the workplace will determine whether agencies and their staff are successful in providing services for individuals with disabilities in an increasingly multicultural country.

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The College of Direct Support (www.collegeofdirectsupport.com) is an online curriculum for Direct Support Professionals (DSPs) and Frontline Supervisors (FLS) nationwide. It is providing nearly 65,000 learners with hundreds of thousands of hours of flexible, self-paced, multi-media training in areas critical to DSPs and FLS today. But being a tool for training is only one aspect of the power of the College of Direct Support (CDS).

Most people who provide services to people with intellectual or developmental disabilities are familiar with training. Many states have a required number of hours and topics or even specified curriculum that they mandate providers to use. However, too few are using their training as a component of workforce development.

Workforce development is different than simply training people. It is a way of building and keeping a pool of qualified and committed workers. It is an effort to learn about the number of workers in a community and increase the number available to the industry. It is also an active process of improving the quality and preparation of those available workers. When workforce development efforts are successful, there is always a person with basic or even advanced skills waiting to fill an open position.

Direct support workers are hard to find. Industry leaders report feeling pressured to hire and retain workers who are lacking essential skills or aptitudes. A “warm-body” approach to hiring has developed that compromises the quality of services. It also perpetuates discouragement among high quality workers because under-qualified workers lack respect for and understanding of the work. It also can make the day-to-day realities of work far more difficult. Left unchecked, individual companies and the industry as a whole can feel the effects as qualified workers lose motivation. Or worse, they leave for jobs that provide more respect, prestige, and opportunities. This creates a downward spiral in the workforce that can be hard to escape.

Training is one aspect of workforce development. Providing training that is recognized outside of the individual employer or state in which the person is employed can be critical. This could mean that workers earn college credits for completing training. It could mean that it smoothly transfers into “credit for prior learning” from a college or university. It could mean that training is part of a meaningful credential. Meeting the educational component of an established apprenticeship is another option. These options make training more valuable to the employee. Because credit or credentials are portable, employees do not have to repeat training in areas where they already have competence. Training time can be spent on learning new skills and thus can lead to further opportunities.

Providing training that is credit-bearing or related to credential also increases the employee’s value to the community. The pool of workers is more prepared when expectations in education and training are clearly defined and meaningfully applied. Career paths are more easily defined and rewarded. There is a clear difference between entry-level and advanced skills. The skills and education have a clear connection to the work. This not only ensures individual workers are prepared; it also increases the positive visibility of the work as a whole. This in turn makes it easier to find new workers.

When building the CDS, we were careful to consider what needed to be in the content and the structure to make it helpful to people who needed good training materials for current employees. The 24/7/365 availability of the material and the self-paced nature made it a new way to deliver high-quality, consistent training to employees. However, other important components were included in the CDS content and programming structure as well, to make it helpful to larger efforts in developing the workforce as a whole.

In particular, the material is carefully crafted to ensure that it is in line with national efforts to create portable, mean-
ingful training. CDS content is based on several nationally validated skills sets and an accepted code of ethics for DSPs. These skill sets and ethics are also the foundation of the educational components of the Apprenticeship Guidelines developed by the U.S. Department of Labor (see http://rtc.umn.edu/docs/DOL-DSPApprenticeshipNotification.pdf). They are a basis for the education, skills, and attitudes that are part of the credentialing efforts of the National Alliance for Direct Support Professionals (see www.nadsp.org). Assessment methods built into the CDS provide guidance to learners in developing professional portfolios that help establish their competence and ability to apply learning.

CDS content is available at the pre-service or entry level, as well as at specialized and advanced levels. Some of the current course offerings for DSPs are:

- Safety at Home and in the Community
- Maltreatment of Vulnerable Adults and Children
- Supporting Healthy Lives
- Individual Rights and Choice
- Community Inclusion
- Positive Behavior Support
- Documentation
- Cultural Competence
- Personal Care
- Medication Supports
- Introduction to Developmental Disabilities
- Direct Support Professionalism
- Introduction to Medication Support
- Teaching People with Developmental Disabilities
- Person-Centered Planning and Supports
- Introduction to Employment Supports
- You've Got a Friend: Supporting Family Connections, Friends and the Pursuit of Happiness
- Training and Orientation
- Fueling High Performance
- Recruitment and Selection
- Developing an Intervention Plan

More courses bridging the move from DSP to FLS and creating effective supervisors are coming. They offer more experienced DSPs new and more challenging content, and also provide core content for advancement and career paths.

Finally, the programming behind the CDS content is helpful to workforce development. Training records are maintained and can be transferred or recalled when needed. The CDS comes with the capacity for building survey tools and reports. These let purchasers create and distribute online surveys to help them understand key aspects of workforce development. A pre-made set of surveys is included to help understand things like turnover and vacancy rates, worker and customer satisfaction, and worker commitment to the field or organization. These tools and the automatic reporting are extremely helpful in understanding if recruitment, training, and retention efforts are making a positive difference.

Tackling workforce issues as a whole can seem overwhelming at times. It requires collaboration and cooperation between entities that have often seen themselves as competitors. It requires a strong vision and long-term efforts. Fortunately, organizations have a tool that can help them get on board with some of the critical aspects of workforce development now. The College of Direct Support provides answers to a lot of internal training needs. And, by using the CDS effectively in their own way, employers are becoming part of a critical effort to improve the entire workforce.

Using CDS at Starkey, Inc.

The crisis of workforce development continues to be a challenge: the challenge of hiring the right people, training, nurturing, celebrating and keeping them. Carolyn Risley Hill, CEO at Starkey Inc. in Wichita, Kansas, and her staff are doing everything they can do to make the College of Direct Support (CDS) a significant part of their workforce development efforts. Starkey has 265 employees to support approximately 400 persons with disabilities. Judy Leiker, Starkey’s Training and Development Supervisor, says the CDS is a part of the recruiting and interviewing process for prospective employees. “We tell them about the CDS and our training and let them know up front it will be available for them,” she says. In 2006 Starkey introduced a new incentive program for employees – $25 for completing the first half of the learner’s assigned CDS lessons, $25 for completing the second half, and entry into a drawing for $20 upon completing a module in a calendar month. The workforce is responding. “We really haven’t formally announced this and people are already signing up for the training,” Leiker says. “We are currently not restricting the amount of overtime DSPs work in order to encourage them to complete assigned lessons.” In addition, Starkey is working to institute hourly pay increases and bonuses in the next fiscal year as incentives for more and more employees to complete the CDS training as well as the training in the College of Frontline Management and Supervision. “We’re proud to have the CDS and it continues to make a difference for us,” says Leiker. “A trained workforce is a more stable workforce.”

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In 2003, the University of Minnesota’s Research and Training Center on Community Living (RTC/CL) began a three-year project to train community human service employer “change agents” in workforce development practices and strategies to improve recruitment, retention, and training of Direct Support Professionals (DSPs) and Frontline Supervisors (FLSs). The purpose of the project – titled the National Training Institute for Frontline Supervisors (NTIFFS) – was to refine, test, and deliver to participating agencies a national train-the-trainer and technical assistance model on DSP workforce development interventions.

**Project Approach and Activities**

This project shared workforce strategies and interventions employers and FLSs can use to improve DSP retention and lower vacancies rates. Training was based on the College of Direct Support and the College of Frontline Supervision and Management online curricula (www.collegeofdirectsupport.com), the *Removing the Revolving Door* curriculum developed at the RTC/CL, and the book *Staff Recruitment, Retention, and Training Strategies for Community Human Service Organizations* (Larson & Hewitt, 2005) written by RTC/CL staff.

More than 200 applications were received from organizations around the United States for five spots in the project. Participants had to commit to the project fully by providing information regarding turnover and vacancy rates at the beginning of the project and annually for its duration. In addition, they had to submit documentation of support and commitment of resources with their application in order to be considered. The organizations selected to participate were:

- New Horizons Resources of New York
- Orange Grove Center of Tennessee
- Potomac Center of West Virginia
- A partnership of Bancroft Neuro-Health and Devereux, both from New Jersey
- A Wyoming partnership of the Southwest Wyoming Rehabilitation Center, Community Entry Services, and Rehabilitation Enterprises of Northeastern Wyoming

The project trained a cadre of “change agents” to help the participating community human service employers improve their DSP workforce outcomes. Seventeen participants attended two one-week intensive train-the-trainer sessions in Minneapolis during 2004 and 2005; they left equipped with the information they needed to train the FLSs in their agencies. These change agents received training in proven workforce development intervention strategies that help employers find and keep high quality DSPs. In return, the participants committed time and people willing to learn new skills, share their expertise, implement changes, and provide feedback to the project advisory committee on how to make these changes.

**NTIFFS Profile #1: Orange Grove Center**

Despite being the key to the delivery of quality care in the community, Frontline Supervisors have historically been under-appreciated and underdeveloped. Orange Grove Center, an agency with over a half a century of distinguished leadership in the support of individuals with developmental disabilities, recently seized an opportunity to strengthen its Frontline Supervisors. Selected as one of five organizations in the country to participate in NTIFFS, Orange Grove made a commitment to address its problems with staff recruitment and retention. At the core of our commitment was a self-appraisal that questioned our commitment, our mission, and the depth of our skill sets. With the realization that our Frontline Supervisors, house managers, and supported living companions were overwhelmed, over-burdened, and over-extended we welcomed the practical programmatic tools provided by the “Removing the Revolving Door” curriculum used in the project. Supervisors were groomed in methods of providing ownership to scores of DSPs, the true “delivery king pins” in any human service organization. The DSPs were motivated to see firsthand how their actions, methods, and strategies affected the lives of the people they supported. The supervisors began to support, not intimidate, the staff, encouraging true working partnerships and providing environments that encouraged and invited DSP input and viewpoints. Supervisor use of Realistic Job Previews, participatory house meetings, and opportunities for meaningful contributions to individual support plans reinvigorated, re-motivated and re-energized the DSPs. The need for rewarding staff diligence and achievement was realized through the adoption of the Tier Program, a board-supported approach to merit pay incentives based on mastery of needed skills. The creation of the novel DSP Games, an Olympic-like event allowing staff to compete in games designed to highlight their skills was the icing on the cake. Our outcomes testify to our success – we have finally tamed the beasts of retention, recruitment and staff esteem. We believe that we have begun to create an environment that encourages dedication and commitment, and that provides an opportunity for individuals to be engaged in a profession that clearly makes a “difference.”

Contributed by Jenny Foster, Director of Compliance and Training, Orange Grove Center, Chattanooga, TN. She may be reached at 423/493-2919 or jfoster@orangegrove.org.
work best across the country. The project provided specific technical assistance to participants on assessing their workforce challenges and developing long-term plans to address these challenges. Technical assistance was provided through on-site and remote contacts with the change agents in each participating agency. During the last year of the project participants developed sustainability plans and provided technical assistance to other organizations eager to learn what they had learned about improving DSP and FLS recruitment, retention, and training.

**Project Accomplishments**

Overall, 4,617 DSPs, FLS and other staff participated in the following:

- 317 supervisors or managers completed 3,075 College of Frontline Supervision and Management lessons online.
- 590 supervisors or managers attended Removing the Revolving Door training.
- 238 supervisors or managers attended other supervisory training.
- 2,090 DSPs saw a Realistic Job Preview.
- 409 DSPs participated in a recruitment or hiring bonus program.
- 101 DSPs received training through the College of Direct Support.
- 552 DSP applicants were interviewed using a structured behavioral interview.
- 194 DSPs were recruited using marketing and recruitment materials from the training.
- 521 DSPs were oriented using revised procedures based on the training.
- 505 DSPs were welcomed to their organizations in a new way.

Additionally, in other organizations in the participating states 49 FLSs received technical assistance from the participants, and 19 legislators were contacted [McCulloh, continued on page 34]

### NTIFFS Profile #2: Bancroft NeuroHealth

When Bancroft NeuroHealth was chosen to participate in the NTIFFS project, our DSP turnover rate was 36%, costing our organization $1.4 million the previous year. That is an estimated cost of $3,500 per terminated employee, which only reflects the financial loss. Turnover takes a toll on staff morale, productivity, and subsequently the quality of care, as well.

The organization made staff retention its highest priority for its NTIFFS participation, and mandated that all Frontline Supervisors (FLSs) participate in the “Removing the Revolving Door” curriculum training. Ninety percent of our FLSs completed the training. The main point of the training was to prepare FLSs to do the following in relation to DSPs: (1) develop a realistic site-specific job preview, (2) utilize behavioral-based interviewing techniques (picking the right candidate), (3) standardize the on-boarding process (training), and (4) give staff recognition. Since beginning this process, policies and procedures have been changed to facilitate program and organizational goals. Now candidates who apply for a position are interviewed by two FLSs using behavioral-based interviewing. Once a candidate is hired, his or her on-site orientation is more extensive. The hope is that if we pick the right candidate, train better, provide more support, and give appropriate recognition, the chances of retaining that staff member will increase.

While we continue to struggle with reimbursement rates and the resulting low wages, the “Removing the Revolving Door” training has had a tremendous impact on the organization. Bancroft NeuroHealth has seen a 5% reduction in our turnover rate in the last year. While the numbers are showing promising signs, there are other benefits. For example, FLSs are more confident when hiring people, and just as importantly, are taking a pass on candidates who would not be a good fit.

Contributed by Brian Horsmon, Staff Education Specialist, Bancroft NeuroHealth, Haddonfield, NJ. He may be reached at 856/348-1157 or bhorsmon@bnh.org.

### NTIFFS Profile #3: The Potomac Center

Those of us who have long been in the business of serving and supporting people with developmental disabilities know that one of the major challenges is the performance of DSPs. The quality of their work is affected by many factors, but a primary one is the effectiveness of support and supervision they receive. In short, if we want good DSPs, we need great Frontline Supervisors. Faced by this challenge, we were happy to participate in NTIFFS. That training was stimulating and hectic, but fun, and it introduced us to the “Removing the Revolving Door” curriculum. That exposed us to a wealth of research-based materials, but more importantly allowed us to interact with its authors, and to learn with people from other states who shared similar problems but maybe had different solutions. Together there was a synergy that strengthened our determination to improve supervision.

Returning from train-the-trainer sessions, we trained our Frontline Supervisors using the curriculum. Not only did they benefit from it, but training revealed strengths and skills we didn’t know they had. It became a real catalyst for change.

While we looked at many potential areas for improvement, we settled on three: Realistic Job Previews (RJP), changes in new employee orientation, and development of a mentoring program. The RJP is used to screen job applicants, and also to set some expectations concerning the work we do. Orientation was changed from just covering the mind-numbing regulatory requirements to focus on welcoming and acclimating new employees into our organizational culture. Mentoring pairs a new DSP with a more seasoned staff member who assists the new employee in learning their responsibilities.

NTIFFS has been a good beginning on the path to quality we must continue to take. The people we support deserve no less.

Contributed by David Plowright, Executive Director, Potomac Center, Romney, WV. He may be reached at 304/822-3861 or dplowright@potomaccenter.com.
Embracing an Immigrant Workforce: The SOREO Perspective

by Wendy Sokol

SOREO is a Tucson, Arizona based company that provides in-home supports to approximately 650 people with disabilities. One-third of the people we support have a preferred language other than English, including 26% whose preferred language is Spanish and 7% whose preferred language is Russian. To support the needs and preferences of these individuals and their families we employ a large immigrant workforce, with more than half of our Direct Support Professional (DSP), manager, and administrative positions held by people who have immigrated to the United States. How have we successfully grown our ability to provide services in this culturally and linguistically diverse environment? The remainder of this article will describe some of our challenges and celebrations.

Our Setting

Tucson is 45 minutes from the Mexican border. Prior to the Gadsden Purchase in 1853 Tucson was part of Mexico. Based on the 2000 U.S. Census, 36% of the Tucson metropolitan population is Hispanic or Latino. Arizona was the fastest growing state in 2006, and has the seventh largest Hispanic population (U.S. Bureau of Labor Statistics, 2002). Between 2000 and 2020 the population of White Arizonans will grow 5% while the population of Hispanics/Latinos will grow 68% (Latino Perspectives Magazine, 2007). In addition, we have a significant Russian refugee population. We have found that people receiving in-home services and supports prefer to have DSPs who are not only well trained, honest, reliable, empathetic and have solid independent problem-solving skills, but who are also linguistically and culturally competent.

Recruiting, Training and Supporting Our Immigrant Workforce

SOREO contracts with the State of Arizona’s Medicaid agency to support people with developmental disabilities, and also contracts with two counties to support people with physical disabilities and seniors. SOREO is the preferred provider in the Tucson area for people requesting a DSP who is linguistically and culturally competent for the Hispanic/Latino population. Twenty-six percent of the families we support prefer to communicate in Spanish. Fifty-four percent of all our DSPs are Hispanic as are 42% of our management and administrative personnel. In addition, Tucson supports a significant Russian refugee population and 6.5% of the people we support prefer to speak in Russian. Among our employees, 12% of DSPs and 10% of our management and administrative team are immigrants from Russia or the Ukraine. It is not coincidental that the percent of people who need supports and have a preferred language of English, Spanish, or Russian matches SOREO’s complement of direct support, management, and administrative staff (see Tables 1-3 on page 33).

This is the crux of embracing an immigrant workforce.

In communities with an immigrant workforce that has limited opportunities for advancement in other labor markets, agencies prepared to train and support the workforce in their language and at their pace will find that workforce to be hard-working, motivated, and honest. Most immigrant workers chose to come to the United States, giving up the security of their homes because they believed in the “American dream” and wanted a better future for themselves and their families. Immigrant workers who legally reside in the United States have had their backgrounds scrutinized by the United States government before they entered this country. They come with a “green card,” “Resident Alien Card” or as a “Naturalized Citizen.” Those who have not yet become Naturalized Citizens are concerned that they not break any laws because a felony charge could result in their deportation.

Recruitment of immigrant workers to satisfy the demand for trained DSPs has not been an issue for SOREO. We rarely advertise to recruit applicants for DSP positions, do not have vacancies, and our staff typically does not work overtime. We offer a competitive wage, company-sponsored health care and life insurance, 401K, as well as paid time off and paid holidays to full-time employees. SOREO does not require applicants to have a high school diploma or speak English. We offer accommodations to support an immigrant worker during training and as they slowly develop proficient skills in English. Because of these things, SOREO has a reputation in Tucson as an employer of choice.

Training and supporting a non-English speaking immigrant workforce has unique challenges created by both the language barrier and cultural differences. Providers who launch recruitment
My American Dream

My name is Araceli Rivera. I emigrated to the United States of America in 2001 from Mexico. I am a single mother with three children. My husband and I came to America because we wanted to work hard to create a better future for ourselves and our children. My husband did not like the USA and he returned to Mexico within three years. I chose to stay with my children without his support.

In 2001 I started working as a direct support aide with an agency in Tucson, Arizona. I liked working with families, especially the children. I liked helping and seeing them grow and learn. There were many things I did not like about my first employer, however. My interview lasted five minutes. I was required to work seven days per week; I would leave home at 6:00 a.m. and not get home until 7:30 p.m. I received no formal training when I started (except First Aid and CPR), and this training was in English. The company provided services to many people with developmental disabilities. I do not understand why they did not properly train their staff. I decided I had to leave. I knew I had to spend more time with my children. A mother should be able to see her children off to school.

In late 2001 I interviewed with SOREO. It was a long interview and my sister translated. I was drawn to SOREO because I liked the philosophy. Wendy Sokol, CEO, spoke about choice and dignity. She referred to the people they supported as “our families” and to the staff as “my staff.” There was a feeling of caring and belonging.

I worked as a DSP with SOREO for two years. When I started, SOREO had just begun to translate all their training and forms into Spanish. I would help with the translation so that it made sense to employees from Mexico. SOREO always offered information in Spanish or through the help of translators. They created an environment where you could learn and you felt comfortable to ask questions. My questions were always responded to in a positive way. I was matched with families where I felt comfortable. Some of the families spoke Spanish and English. They would teach me English and I would teach them Spanish. My schedule worked for me and my family. SOREO was sensitive to my needs and understood when I needed to be with my children or to return to Mexico to be with my family. As my English improved SOREO offered me hours in the office to help translate for and train other DSPs. Wendy was my mentor. She gave me opportunities to learn and advance. She had faith in my skills. God brought me to SOREO so that our lives might cross-over.

In 2003, I became a Service Coordinator. SOREO paid for me to attend college to improve my English. The classes made me feel more confident. Today I am one of SOREO’s top Service Coordinators. I am proud of what I do. I know I make a difference in the lives of people with disabilities. I have grown my referrals so that I now have an assistant who I am training so that she can have the same opportunities that I had. With hard work she will one day become a Service Coordinator. In July 2006, I bought my own home. I have worked hard to achieve everything that I have, but I always believed that through hard work I could make a difference and also achieve the American dream.

Contributed by Araceli Rivera, Service Coordinator, SOREO, Tucson, Arizona.
State Initiatives to Strengthen the Direct Support Workforce

by Steve Edelstein and Carrie Blakeway

As states strive to rebalance their long-term care service systems and improve access to home and community-based services for individuals with disabilities, they have found that access to community services depends on the availability of a well-trained, stable, and sizable direct support workforce. Obstacles to achieving such a workforce include low wages, poor benefits, lack of training and professional development opportunities, lack of respect and appreciation from supervisors, lack of control over their jobs, and limited opportunities for advancement. Recognizing that the quality of the workforce has a direct and immediate impact on the quality of long-term services, states are intensifying their efforts to find innovative solutions to these workforce challenges.

Several national grant programs and initiatives have supported states in implementing significant workforce improvement activities, including:

- **The Centers for Medicare and Medicaid Services (CMS):** Real Choice Systems Change, Direct Service Workforce (DSW) Demonstration, and Direct Service Workforce Resource Center Technical Assistance grant projects
- **The Robert Wood Johnson Foundation and Atlantic Philanthropies:** Better Jobs, Better Care (Robert Wood Johnson and Atlantic Philanthropies)
- **The U.S. Department of Labor:** High Growth Job Training Initiatives

States are drawing from a growing set of best practices in pursuing a range of strategies within these programs to improve the recruitment and retention of their direct support workforce, such as:

- Offering better employee benefits, including health care.
- Providing enhanced training for Direct Support Professionals (DSPs) and supervisors.

- Creating opportunities for professional development and advancement.
- Recognizing and rewarding performance of individual workers and of employer agencies.
- Implementing more effective recruitment and selection strategies.

Twenty-eight states are participating in at least one of these initiatives and many are participating in several. Four states with particularly innovative initiatives underway are featured here:

- **Kentucky:** DSW Demonstration (CMS) and Real Choice Systems Change (CMS)
- **North Carolina:** Real Choice Systems Change (CMS), DSW Demonstration (CMS), DSW Resource Center Intensive TA (CMS), and Better Jobs, Better Care (Robert Wood Johnson and Atlantic Philanthropies)
- **Pennsylvania:** Better Jobs, Better Care (Robert Wood Johnson and Atlantic Philanthropies), and High Growth Job Training Initiative (U.S. Department of Labor)
- **Washington:** DSW Demonstration (CMS)

Details of these efforts are provided in the remainder of this article.

**Kentucky**

Through a DSW Demonstration grant awarded in 2004, eight provider agencies in the metro-Louisville region established the Support Providing Employees’ Association of Kentucky (SPEAK). SPEAK (www.dspspake.org/) provides professional development opportunities and bonus payments for DSPs employed by its provider agency members. One of SPEAK’s most successful initiatives is a preservice orientation they provide to prospective job candidates—a Realistic Job Preview (RJP) that occurs before an individual is hired. Once a member agency finds a prospect, the agency does an initial interview. If the agency is still interested in the job candidate after the initial interview, they refer that individual to SPEAK to participate in the RJP. The RJP is delivered in-person by the SPEAK project coordinator, an employee of one of the lead organizations in the project. The session lasts up to five hours and includes three components: an initial visit with the SPEAK coordinator, a site visit, and a family visit. The session is extremely informal and casual by design, to increase the comfort level of the prospective employee. Prospective employees are given a $50 cash payment at the completion of the session. Because of this practice, as well as the other activities of SPEAK, turnover in partnering organizations has dropped from 62% to 27% in three years. All of the SPEAK partners plan to continue using the preservice orientation as a selection tool beyond the grant period.

In 2001, Kentucky was awarded a Real Choice Systems Change grant to develop a Direct Support Work Certificate program offered through the state’s community and technical college system. The certificate prepares people to work in a variety of community programs. The outcomes are currently being evaluated and it is hoped that increased education will result in better wages for direct support workers and lead to lower turnover for employers.

**North Carolina**

In the past five years, North Carolina has received several grants resulting in a flurry of activity aimed at improving the recruitment and retention of a quality direct support workforce. Through a 2001 Real Choice Systems Change grant, the state created a career ladder for direct support workers by recognizing two
advanced practice job categories – medication aide and geriatric nurse aide. The state also created the Direct Care Worker Association of North Carolina to support the professional development of direct support workers and to promote public awareness of the importance of the profession, and trained a cadre of trainers to help providers implement a more supportive, coaching style of supervision.

With a Better Jobs, Better Care grant, the state created the North Carolina New Organizational Vision Award (NC NOVA), a special licensure designation that recognizes long-term care providers who demonstrate their commitment to their direct support workforce through supportive workplace practices and leadership and career development opportunities. With the pilot phase near completion and the full implementation stage getting underway, the state is measuring specific outcomes such as reductions in turnover, decreases in job vacancies, and increases in job satisfaction in order to make the case to state policymakers to tie financial incentives to the special licensure.

In 2004, a group of agencies in the western part of the state received a DSW Demonstration grant to explore the impact of providing health insurance coverage to home care workers on the workers’ decision to stay in direct support. Although the project encountered difficulty finding affordable comprehensive coverage, it did have a positive impact on retention and turnover from the coverage it was able to offer. Based on the study, the grantee hopes to interest other agencies in the state in creating a bigger pool of workers that would improve coverage and lower costs.

**Pennsylvania**

In Pennsylvania, the State Workforce Investment Board and the Governor’s Office of Health Care Reform convened a group of over 100 stakeholders representing providers, labor representatives, people with disabilities, and other advocates across all service sectors to address its workforce crisis. Through this unique high-level collaboration between the State’s workforce development and health care systems, the group laid out a comprehensive vision for improving direct support job quality and building adequate workforce capacity to meet future long-term care needs. The group’s key recommendations included a system for training, credentialing, and career advancement for direct support workers; creation of statewide quality standards to encourage supportive workplace practices; exploration of options for affordable health insurance; and an analysis of rate setting and reimbursement practices to ensure that policies are consistent with workforce goals.

The signature achievement of the Pennsylvania Better Jobs, Better Care project was the development of a universal core curriculum to provide initial training to all direct support workers, regardless of setting. Project leaders are seeking to promote the curriculum in connection with the Commonwealth’s efforts to create a competency-based training program for direct support workers. Through a U.S. Department of Labor High Growth Initiative grant to the Paraprofessional Healthcare Institute, Pennsylvania also served as a pilot site for a new apprenticeship for home care workers. The apprenticeship is also using a competency-based training model and creates a structured career ladder for direct support workers in home and community-based settings.

**Washington**

Washington State has a consumer-directed in-home services workforce composed of 23,500 workers, called Individual Providers (IPs). In 2002, this workforce unionized and bargained with the state for wage increases and health insurance benefits. Today, IPs who work at least 86 hours a month and meet other eligibility requirements can enroll in either of two comprehensive health insurance plans.

Washington’s Home Care Quality Authority (HCQA) received a DSW Demonstration grant in 2004. With this grant, HCQA has marketed and promoted the new health benefit to IPs across the state and implemented several other interventions designed to improve staff recruitment and retention. The grantee piloted Home Care Referral and Registry Centers (HCRRs) in four regions of the state, and the number of sites has now expanded to 14. The HCRRs provide worker orientation, training, and peer mentorship. Case managers at the HCRRs help to match workers with people with disabilities needing services in the community.

HCQA developed a Web-based worker referral registry that matches worker skills, training, and abilities with consumer needs and preferences. Potential workers can visit the registry’s Web site (www.hcqa.wa.gov/) to find out about jobs in home care, and people with disabilities looking for workers can search the registry to find qualified IPs to interview.

**Future Trends: Evaluation**

With so many different strategies and initiatives underway, states are turning their attention to evaluation and outcomes measurement. State policymakers need to know which strategies work and which have the greatest impact. However, many states do not consistently or systematically collect workforce data, such as retention and turnover rates, worker wages, benefits, and training. States will have to invest considerably in evaluation and make an enduring commitment to data collection, so that they can monitor their progress, learn from their experiences, and continue to develop good workforce policy going forward.

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People with developmental disabilities often rely on Direct Support Professionals (DSPs) to assist them with daily activities ranging from self-care and homemaking to employment and community participation. DSPs influence the quality of life for the people they support. Nationwide, low wages, limited opportunities for training and career advancement, as well as a lack of recognition for the essential work they do, have resulted in high turnover among DSPs. In Kansas, these aspects of the DSP workforce crisis are being addressed by the award-winning systems change effort, Kansans Mobilizing for Direct Support Workforce Change (KMFC).

**KMFC Overview**

Kansans Mobilizing for Direct Support Workforce Change focuses on enhancing educational opportunities for and the status of DSPs. Its overall goal is improving recruitment and retention rates, leading to improved quality of services. Two years of initial funding (2002-2004) from the Kansas Council on Developmental Disabilities united stakeholders in the project, which still continues today with other funding. The participants in KMFC are service providers, self-advocates, families, state policymakers (representatives from the Kansas Departments of Commerce, Health and Environment, and Social and Rehabilitation Services), representatives from the U.S. Department of Labor, and other Kansas DSP workforce development stakeholders along with researchers from the University of Kansas (additional researchers from the University of Minnesota participated in the initial project). Among the key areas on which project partners have focused are education of Frontline Supervisors and DSPs, as well as development of a recognized direct service career path.

**Enhancing Educational Opportunities and Career Status**

Educational opportunities addressing the essential functions of the direct service profession are critical to providing quality services and to DSP career development. Online training through the College of Direct Support (CDS) and the College of Frontline Supervision and Management, a nationally available competency-based training curriculum developed at the University of Minnesota, was introduced during the initial KMFC project (see www.collegeofdirectsupport.com). The online curriculum was customized with Kansas-specific content and used to transition from face-to-face training to computer-based training with personal follow-up. CDS provided increased flexibility and availability of high-quality training, and when grant funding ended, KMFC members continued to meet and explore ways to fund this training option. Purchase of the CDS by a pool of employers was much more affordable than individual purchase, so KMFC pursued this option. Member advocacy resulted in CDS being identified as an immediate priority in the State’s Social and Rehabilitation Services Strategic Plan 2005-2010. When CDS was not included in the final budget request, KMFC was successful in getting the legislature to add funding for FY 2007. Ongoing advocacy resulted in funding being included in base Social and Rehabilitation Services current budget request.

CDS is now available statewide, and in the first 10 months of this expansion over 90 service providers have taken advantage of this training opportunity. KMFC members are sharing their CDS implementation strategies and success stories with others across the state. DSPs who work for individuals who self-direct services, for small providers who support only a few individuals or for larger service providers are now all accessing the same training. Several employers are also linking wage increases to training.

To help build a career ladder, KMFC developed a credentialing and apprenticeship program for Kansas DSPs. The Ad Astra Direct Support Registered Apprenticeship Program promotes a fundamental shift from direct support as “just another job” to a conscious career choice. It provides coherent, step-by-step, multi-level staff training built on nationally recognized Community Support Skills Standards (HSRI, 1997) that define the skills a DSP needs to know to provide high-quality support for people with developmental disabilities. Ad Astra provides employers with a coaching protocol involving both mentors/journeyworkers (highly skilled current employees) and Ad Astra apprentices (candidates). The Kansas Apprenticeship Council has registered this voluntary credentialing program leading to journeyworker status.

**Outcomes**

Outcomes of the initial two-year project show that the strategies used hold promise for addressing the need for enhanced educational opportunities and status for DSPs, as well as reducing turnover. Outcomes include the following:

- Overall in the 12 organizations that completed the project interventions, there was a 15% reduction in DSP turnover from their baseline assessments in 2002 through project completion in 2004. Turnover for frontline supervisors declined 29% from the baseline level, suggesting that the project’s activities had the greatest impact initially on supervisors, but by the end of the second year a healthy decline in DSP turnover was also evident.
• At the start of the project 40% of agency participants reported that they limited provision of services to new individuals with disabilities due to their workforce crisis. In the final year of the project only 15.4% reported their workforce challenges forced them to limit new services.

As mentioned earlier, over 90 Kansas service providers are now making CDS training available to their staff. In addition, two agencies are participating in the apprenticeship program. KMFC participants have also created a number of workforce initiatives to continue the efforts of KMFC beyond the initial grant, including establishing a Kansas Chapter of the National Alliance of Direct Support Professionals, and advocating at the state level for increased wages and benefits for DSPs.

In 2005, KMFC received the Moving Mountains Award (see below) for its work in direct support workforce systems change. Despite the promising success of the initial two-year project, additional work must be done to address DSP challenges in Kansas. Toward that end KMFC members continue to meet face-to-face quarterly and collaborate with others in their local communities and across the state to build on the earlier work – especially in the areas of training through the CDS and credentialing – bringing about continued systems change to resolve the direct support workforce crisis in Kansas.

NADSP Moving Mountains Award Winners by Year

The following 15 organizations are recipients of the Moving Mountains Awards, presented annually to organizations and agencies that demonstrate best practice in direct support workforce development. Awards are given by the Research and Training Center on Community Living, University of Minnesota, in partnership with the National Alliance for Direct Support Professionals (NADSP). Nominations are solicited through NADSP member organizations and reviewed by a panel of NADSP members using selection criteria based on the mission and goals of the NADSP. For more details on the award and profiles of the recipients see www.nadsp.org/training.

2005-2006 Award Winners
• Ark Regional Services (WY): For excellence in competency-based training for DSPs.
• Community Supports for People with Disabilities Program, South Central College (Minnesota): For excellence in promoting DSP career development through credit-bearing coursework.
• Kansans Mobilizing for Workforce Change: For excellence in creating and sustaining meaningful direct support workforce change at the systems level.
• The Arc Northern Chesapeake Region Stars Program (MD): For excellence in creating a career track to raise the value and status of DSPs.

2004 Award Winners
• PATHS (Ohio Alliance of Direct Support Professionals): For excellence in DSP career development through apprenticeship and credentialing.
• Everyday Heroes Leadership Initiative (NY): For excellence in building DSP leadership for community inclusion.

2003 Award Winners
• Elm Homes (MN): For excellence in redesigning human resource practices for DSPs.
• Mid-Hudson Coalition Inc. (NY): For excellence in DSP education, training and development.
• SPIN (PA): For excellence in DSP training, leadership development and career development.

2002 Award Winners
• Dakota Communities, Inc. (MN): For excellence in DSP training for their Advocating Continuing Education Program.
• Vinfen (MA): For excellence in creating, developing, and nurturing Self-Managed Work Teams (SMTs) with DSPs as team leaders and members.
• OHI (ME): For excellence in supporting DSPs.

Reference

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Improving Recruitment, Retention and Training in California: CDSN

by Carol Zabin

California, like many other states, faces a staffing crisis due to poor conditions of employment for workers who provide direct support to individuals with disabilities in community settings. A reliable, committed, and professional direct support staff is critical to developing “person-centered” services that help people to lead self-directed lives in integrated settings of their own choosing. This article addresses the specific roots of the staffing crisis in California and a new initiative to overcome it. The initiative includes the creation of a new non-profit social enterprise, called the Consumer Directed Services Network (CDSN), designed to provide a comprehensive package of recruitment and training supports to multiple provider agencies. In addition, the new initiative has put forth a policy proposal to improve compensation for workers in agencies that meet specific training benchmarks. The initiative supports building a political partnership among organized labor and parts of the provider and advocacy community to support policy reform.

The Workforce Crisis in California’s Community System

California’s community services system assists more than 200,000 people with developmental disabilities, employs approximately 90,000 workers, and costs over $3 billion per year. Developmental services in California have undergone a dramatic transformation since the 1969 Lanterman Developmental Disabilities Services Act recognized the civil right of people with developmental disabilities to determine their own life plans, places of residence, and service providers. The Lanterman Act created an entitlement to services, and established a community-based system operating under the principles of decentralization and local community control. Over time, a steady progression of federal and state legislation, court decisions, and Medicaid Home and Community Based Services (HCBS) waivers have facilitated the development of flexible and innovative programs in the community system.

As a result of this transformation, services that once were delivered by large, segregated public institutions now operate through private nonprofit and for-profit community-based agencies. This dramatic change in the type of entity that provides services has had enormous and often unforeseen consequences for the direct support workforce, for employee-employer relations, for the level of training and professionalization of the workforce, and for other aspects of the direct support labor market. Four consequences are of particular importance:

- **Poor wages and benefits.** Dismantling the state system of institutional care turned public-sector, unionized jobs with health insurance, pensions, training, and career ladders into poorly paid jobs with fewer benefits and even fewer opportunities for career advancement. The labor standards that exist in public sector and/or unionized jobs do not exist in private labor markets, and agency reimbursement rates are determined based on the going wage for low-skilled workers. Simple mechanisms such as cost of living adjustments that are built into public sector contracts or collective bargaining agreements are absent, as is access to state-administered health insurance and retirement benefits.

- **Changing job descriptions and lack of training support.** DSPs providing person-centered services designed to maximize self-determination have very different job responsibilities than workers in institutions and traditional services. While the latter work under the direction of on-site supervisors in structured and routinized programs, workers providing person-centered services perform a broad array of tasks autonomously as they help people with disabilities lead self-directed lives. For example, they provide medication supports; implement behavioral plans; teach new self-care skills; assist people with disabilities in navigating relationships with family, neighbors, co-workers and others; advocate for their rights; teach self-advocacy; and interact in many different work, home, and social environments.

- **Workers in person-centered services are accountable not only to their employers but to people with disabilities and families, who play a significant role in hiring, supervision, and possible termination.**

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California’s community-based developmental services system has not invested in training for direct support workers in these new services. Moreover, it has not tapped into the state’s workforce investment system nor its community college system, the two major sources of funding for workforce training and education. Instead, community agencies are held responsible for providing training to their direct support staff, but they have limited capacity to design or deliver this training.

- **Proliferation of employers.** The shift to a decentralized community-based...
system resulted in the creation of 8,000 community-provider agencies, with an estimated average employment of fewer than eight full-time-equivalent workers. In many cases, agency directors value small agency size because they associate it with a higher quality of personalized service and responsiveness to local needs. In fact, decentralization and community control are core values of California’s service system. The proliferation of small agencies also has some drawbacks, however. Small agencies often lack business expertise and face high administrative costs. Healthcare insurance, which is one of the keys to retaining workers in this industry, is cheaper with a greater number of workers in the health insurance pool. In addition, the smaller agencies provide only minimal on-the-job training for their workers and are unable to provide career advancement opportunities. These inefficiencies absorb resources that could otherwise be used for service provision. Decentralization in California has meant that the staffing crisis, which must be addressed on a multi-employer or sector-wide basis, has been severely neglected.

- Families as employers. In California, more than 30,000 families now directly hire workers to provide respite, daycare, and other services, and another 9,000 people with disabilities will be eligible for self-directed service vouchers over the next three years. Evaluations have shown that people with disabilities who are able to choose and arrange their own services and personnel have shown an overall increase in measures of satisfaction and quality of life because of their increased flexibility and choice. Although increased choice has had positive results for the families involved, it can create difficulties for workers, who experience greater difficulty finding work, often receive no Workers’ Compensation insurance coverage, and rarely have access to health insurance, training, or career advancement. Although many of the people who provide these services are family and friends who may not need this level of workforce supports, others are trying to make a living doing this work and want to stay in the field.

A Strategy for Change

Absent state action to address the staffing crisis on a sector-wide basis, creativity and innovation have emerged from the bottom-up. The Consumer Directed Services Network (CDSN) has initiated a new strategy that combines the creation of infrastructure to help agencies recruit and train workers, a legislative proposal that creates funding for compensation increases tied to training, and outreach to promote positive relationships among stakeholders, including organized labor, for policy reform. Components include the following:

- **CDSN: Creating the infrastructure for workforce development.** The CDSN is a non-profit organization that offers services to agencies providing person-centered services to people with developmental disabilities in California. Incorporated in 2006, CDSN is now poised to launch as a financially self-sufficient enterprise. CDSN is designed to help small and medium-size agencies address their workforce issues by providing administrative and workforce development services while preserving the autonomy of agencies and people with disabilities over all aspects of service delivery. The CDSN’s services include payroll, tax compliance, recruitment, and staff training. This investment in a multi-employer training infrastructure is made possible through foundation grants, agency fee for service, and will eventually tap into public training and education funds that have not been previously used in this sector.

- **Legislative reform: Using rate reform to create incentives for stabilizing and professionalizing the workforce.** CDSN sponsored legislation (AB 1427) in 2007 to allocate funds for rate increases for agencies that met specified benchmarks for training their workforce. The bill was passed by the legislature, but was vetoed by Governor Schwarzenegger. The bill garnered the support of major consumer advocacy groups and SEIU, and sets the stage for future efforts to fund training linked to improvements in worker compensation.

- **Partnerships for power: Uniting the political voices of people with disabilities, families and advocates, agency providers, and labor organizations.** CDSN seeks cooperative relationships with all stakeholders, including organized labor, because convincing policymakers of the importance of passing this type of legislation will require joint stakeholder advocacy. In the past, the voice of workers has been absent in policy debates in this sector, which has weakened the potential for rate reform significantly. Since CDSN seeks to promote a worker voice in this industry, it requires that agencies receiving its services remain neutral if their workers seek representation from a labor union.

Conclusion

The disability rights movement calls for services that promote self-determination, community inclusion, choice, and independence. Achieving this goal will require continuing commitment and innovation. The CDSN initiative is a comprehensive strategy for stabilizing and professionalizing the direct support workforce that has great promise to not only improve the lives of the direct support workforce, but also the lives of the people with disabilities it supports.

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One Strong, Caring Voice: DSPs Band Together

by Gail Abbott

We are Direct Support Professionals (DSPs). Our job is to support, not accomplish. How well do our job is reflected in the lives of the individuals we support. The thanks we receive is in the shining face of someone who has just gotten their first apartment, or in the profound joy of a person who has applied for many jobs and after months of searching has just been gainfully employed. Our joy is in the realization of another’s life-long dream. Our jobs and our goals are to treat everyone with the respect and dignity they deserve, while supporting them to accomplish their goals in the workplaces and communities and encouraging them to express themselves through leisure activities of their own choosing. This is who we are.

Although professional caregivers have always shouldered a multitude of responsibilities directly related to individuals’ health and immediate safety, the hourly pay has always been low. Along with insufficient training, limited educational and career opportunities, and low social status for caregivers this has been an immediate threat to our DSP workforce as well as to the people with disabilities we support. In Tennessee and across the country we are organizing to address these threats and ensure that our DSP workforce can meet the needs of those we support today and in the future.

At the national level, DSPs and their allies formed the National Alliance for Direct Support Professionals (NADSP) in 1996 to address issues relating to professional caregivers. NADSP is a coalition of organizations and individuals committed to strengthening the quality of human service support by strengthening the direct support workforce. We are proud to report that the times indeed are changing. With the establishment of the NADSP, a chain reaction of sorts began. DSPs around the country began to band together. NADSP affiliate organizations formed in Arizona, Arkansas, California, Connecticut, Florida, Georgia, Kansas, Illinois, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, New Hampshire, New Mexico, New York, Ohio, Pennsylvania, and Tennessee.

In Tennessee where I live, the Direct Support Professional Association of Tennessee (DSPAT) works in conjunction with the NADSP on a national level, and local chapters have also formed to assist with communication and unity. The DSPAT motto is: “Many Caring People, One Strong Voice.” We have a voice, and that voice is growing steadily louder. For example, in 2005 the Tennessee Department of Mental Retardation Services (DMRS) in conjunction with DSPAT began examining the DSP rate of pay, and realized that it was decidedly lacking. DMRS recognized the need for well-trained professional caregivers, and approved a pay increase for providers. This increase was meant solely for DSPs, and could not be used for any other purpose. In March 2006, providers began receiving increased payments to fund DSP bonuses. This gave our Tennessee DSPs a much-needed raise at the state level.

At the local level, the Anderson County DSPAT chapter is a wonderful example of how a NADSP affiliate has helped bring the concept of pride and strength in numbers to individual DSPs. Anderson County has added to the DSPAT motto the line “Every Voice Counts.” The strength this motto represents demonstrates the camaraderie and pride that now exists between these organizations and the importance we as a whole place on listening to our members. This chapter holds monthly potluck dinners to promote membership growth, and bake sales to raise money to support the chapter. It can now afford to publish its own newsletters and mail them to its members in East Tennessee. Monthly award winners receive DSPAT award certificates and cash prizes at chapter meetings to promote peer recognition, and pictures are taken for a chapter scrapbook, to post on the DSPAT Web site, and to send to local papers. The members take care of each other by starting a fund for and donating money to DSPs who need a helping hand with groceries, shelter, or clothing.

These efforts in Tennessee have produced wonderful results. For example, Meredith Zirkel joined the DSP workforce at Emory Valley Center in Oak Ridge three years ago. She has a degree in criminal justice. Her son has Autism, and when faced with the choice of how to provide him with the best opportunities, she felt that she needed to see what his life would be like as a consumer with a provider agency. She now continues as a DSP because she wants to be part of the movement toward better education and training for professional caregivers. She has a large stake in the DSP workforce and its potential.

Teresa Luke is another wonderful DSP. She has a Bachelor’s degree in human services and works as a job coach at Emory Valley Center. When asked why she chose this profession she says she feels that a Higher Power called her to this field. She could have chosen many fields with her degree, but chooses to stay where she feels she is truly needed. The dedication she feels to the people she supports is commendable, and this attitude is one of the many reasons that we cannot, and will not, fail in our efforts.
The dedication of Meredith and Teresa and other DSPs with the same spirit will ultimately promote our success on all levels. The NADSP, DSPAT, and other local chapters must work collectively to provide the support that DSPs such as Meredith and Teresa need to do their jobs. DSPs need support from the national, state, and local levels to be the professionals they need to be for the people they support. In the words of DSPAT’s Executive Director, Earl Foxx Jr., “The greatest benefit and honor of being a NADSP affiliate is the idea of being a part of the nationwide movement to equip our workforce with the resources needed to instill character and ethics that are required to responsibly perform their job duties. I foresee the future of the NADSP as a growing organization, with establishment of affiliates that will eventually encompass our nation.”

Direct Support Professionals have begun to educate others that ours is a true career choice, and not “just a job.” Martin Luther King Jr. said: “All labor that uplifts humanity has dignity and importance and should be undertaken with painstaking excellence.” We are proud of who we are and what we do. The happiness and the very lives of the people we support depend on our excellence. We are Direct Support Professionals.

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**The NADSP Credential: How Being a DSP-R Affects My Life**

September 30, 1981 was a day that changed my life, more so than I would have imagined back then. That was the day my son Jonathan was born. I have learned so much over the years not only by caring for my son, but also by going through the school systems in the places we have lived, the different testing that has been done to determine his placement in the classes, and the different physicians he has seen for his neurological disorder and his behavior issues. I guess I should explain a little more: Jonathan has intellectual disabilities, and speech and behavior issues. I’ve always been his primary caregiver – taking him to the doctor, dentist, psychiatrist, and school. I’ve always been the main brunt of his behaviors when he had them – I’ve been hit, bit, kicked and scratched. When it got real bad he was admitted to a hospital for a time.

Now you’re probably wondering what that has to do with being a Registered Direct Support Professional (DSP-R). Well, when I think about it, I’ve done Direct Support work since my son was born. I don’t consider caring for my son “work” mind you, but I don’t care any less for the women I’ve supported in the Comet Trail group home for the last eight years, or for the other women and men I’ve supported in other residential houses where I’ve worked as a substitute DSP. Taking care of my son gave me the experience to work in this field. It also gave me the confidence and the incentive to learn as much as I can so I can do a better job supporting every individual in whose home I have the privilege of working.

When I first read about the National Alliance for Direct Support Professionals (NADSP) credentialing program I was very interested and excited. Having DSP credentials could not only assist us when we apply for a job, but we have the chance for advancement in the credentialing process. The best thing to me, though, was the fact that we get recognition for the work we do. The credentialing program will show government officials, employers, and even the families of the people we support that we are willing and committed to do the best we can to provide the quality support our individuals deserve.

I have recently transferred to the Training and Compliance Department of Orange Grove Megaconference. The fact that I went the extra step and got my DSP-R credentials was a plus for my resume. I have also completed the American Heart Association CPR Instructor course and teach CPR classes here with another instructor, and have been attending Department of Mental Retardation Services classes so I will be able to teach our core training classes, too. Knowing I am doing my best to train quality DSPs and letting them know that we have a voluntary credentialing process, out there is something I would have never thought I would be doing when I first began working in the group homes. To be honest, I’m proud of myself. My children and my husband have told me they are proud of me, too. I get a feeling of satisfaction when I look at my certificate hanging on the wall by my desk in the office.

Regardless of where I end up in my career, I’ll always be a DSP-R and eventually I hope to be a DSP-Specialist in Supervision and Mentoring. I will also continue to work in the group homes as much as I can, and do my best to enrich the lives of the people I support.

Contributed by Laura Pittman, DSP-R, Administrative Assistant Training and Compliance, Orange Grove Center, Chattanooga, Tennessee. In the photo are Laura and her son Jonathan at the Tennessee Disability Megaconference.
In 2004, the Illinois Council on Developmental Disabilities made a three-year, $900,000 investment to facilitate statewide systems change to address Illinois' direct support workforce issues. The project, titled the Illinois Direct Support Professional (DSP) Workforce Initiative, created a partnership between the Council; the University of Minnesota's Research and Training Center on Community Living; the Institute in Disability and Human Development at the University of Illinois at Chicago; the Human Service Research Institute from Cambridge, Massachusetts; and Illinois organizations, families, and individuals with disabilities concerned about improving workforce outcomes.

The project vision is that people with developmental disabilities, and their families and support networks, have trained, valued, and creative DSPs to assist them in living quality lives and fully participating in their communities. Toward that end, the main activities of the initiative include the following:

- Providing training and technical assistance to 10 individuals or families who direct their own supports to assess key workforce challenges and select workforce intervention strategies to make their lives less complicated with regard to finding, choosing, and keeping good DSPs.

SAC created the following work groups to implement specific action plans:

- The Recruitment and Retention Strategies Work Group, which identified strategies and activities to attract and retain qualified DSPs in the Illinois workforce.

- The Education, Training and Career Development Work Group, which developed intermediate and advanced education opportunities that could yield college credit and lead to voluntary specialized credentialing programs.

- The Workforce Data and Statistics Work Group, which developed systemic strategies to identify and prioritize statewide data needs; establish a uniform set of and methods to gather pertinent data; and monitor DSP wages, benefits, and workforce outcomes.

- The Status and Awareness Work Group, which organized a set of actions to elevate the awareness, understanding, status, and respect for the direct support profession.

- The Mentoring and Supervision Work Group, which supported DSPs by creating strategies to help develop skilled and effective supervisors and mentors.

The accomplishments of this initiative have been numerous. The 14 participating organizations made changes to help them move toward the initiative vision. Their activities included revising training for DSPs (including using the College of Direct Support), customizing and using Realistic Job PREviews, providing competency-based training for supervisors and managers, using structured behavioral interviews, improving orientation and socialization practices, using participatory management techniques, measuring workforce outcomes, improving employee recognition, creating an Illinois Chapter of the National Alliance for Direct Support Professionals (the Illinois Direct Support Professional Association), and establishing mentoring programs. In addition, a number of resources were developed through the initiative, including:

- A video, Direct Support: A Realistic Job Preview, distributed to members of the SAC and to the participating organizations to use in recruitment. Three organizations received a customized version specific to their organization.

- The College of Direct Support, a national competency-based training curriculum for DSPs on the Web was customized with Illinois-specific content.

- A comprehensive DSP Workforce Development Plan was developed and disseminated statewide by the SAC stakeholders.

- A toolkit of strategies, processes, and activities to find, choose, and keep great DSPs was developed for the participating individuals with disabilities and another for families.

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Resources from the Institute’s Research and Training Center on Community Living

- **Frontline Initiative.** A newsletter that provides practical information for Direct Support Professionals and shares professional successes. Published by the National Alliance for Direct Support Professionals with support from the Institute’s Research and Training Center on Community Living. To subscribe visit www.nadsp.org/pdf/orderform.pdf or call 612/624-0060. Back issues are also available for downloading at http://rtc.umn.edu/dsp/pub1.asp.

- **Removing the Revolving Door: Strategies to Address Recruitment and Retention Challenges.** A curriculum designed to train Frontline Supervisors to be active and effective in recruiting, retaining, and training Direct Support Professionals within their agencies. Available in print and online. For ordering information visit http://ici.umn.edu/products/curricula.html or call 612/624-4512. To download the curriculum visit http://rtc.umn.edu/publications/#training.

- **Research and Training Center on Community Living Direct Support Professional Workforce Development Web Site (rtc.umn.edu/dsp).** This Web site of the Institute’s Research and Training Center carries over 70 newsletter issues, research-based reports, multimedia tools, and other resources of use to Direct Support Professionals, Frontline Supervisors, managers, individuals with disabilities, families, researchers, policymakers, and others.

- **Higher Ground: The Dedication of Direct Support Professionals During and After Hurricanes Katrina and Rita.** A documentary on DVD telling the stories of some of the heroic Direct Support Professionals from New Orleans who, despite long hours, low pay, and tremendous stress and trauma, continued to provide support services during and after the storms while often not knowing the fate of their own families. Produced by the Institute’s Research and Training Center in conjunction with Volunteers of America of Greater New Orleans. To order visit www.highergroundthemovie.org or call 612/625-1566.

- **Find, Choose & Keep Great DSPs: Toolkits for Families and People with Disabilities.** A pair of easy-to-use toolkits designed to help families and people with disabilities find quality, caring, committed Direct Support Professionals. Two versions of the toolkit are available: one for individuals with disabilities, and one for family members and support providers. Available for downloading at http://rtc.umn.edu/ildspworkforce/docs/ToolkitforFamilies.pdf, and http://rtc.umn.edu/ildspworkforce/docs/ToolkitforPeoplewithDisabilities.pdf. Also available in print; for ordering information call 612/625-1566.

- **Direct Support: A Realistic Job Preview.** A video package illustrating the everyday work of Direct Support Professionals. In it, DSPs offer advice about this important career choice. Customized versions for individual agencies are available. For more information visit http://rtc.umn.edu/wdssp/rip.html or call 612/625-1566.

- **Direct Support Professional Recruitment Toolkit.** A resource to help employers recruit and retain quality Direct Support Professionals. It provides tools to create an exciting, dynamic recruitment plan, resulting in a large pool of qualified applicants. Designed for agencies, individuals, families, and organizations. For ordering information visit http://ici.umn.edu/products/multimedia.html or call 612/624-4512.

- **QualityMall (www.qualitymall.org).** A Web site sharing information from around the country useful in promoting quality of life for persons with disabilities. It especially focuses on promising person-centered practices, and includes over 75 resources related to direct support.

- **You Know That It’s Got to Be Real: The Experiences of Direct Support Professionals During and After Hurricanes Katrina and Rita, and Aftermath.** A report describing the experiences of Direct Support Professionals who worked for Volunteers of America of Greater New Orleans before, during and after Hurricanes Katrina and Rita. Published by the Institute’s Research and Training Center in conjunction with the Volunteers of America. Available online at http://rtc.umn.edu/docs/NOLAFinalReport.pdf.

Today, people with disabilities are active participants in their communities. The people I support expect that any discussion I have with them is just that, a discussion. The direction they want their lives to go is determined by them.

wooden cabinet, and a juke box were accessible only by staff. The few personal possessions a person owned could be stored in a small wooden cubby with a curtain in front of it. Staff were the keepers of the keys. My job was to make sure people ate, assist with personal hygiene, and give pills.

Training? Well, that was eight days at the main regional center (they were called state hospitals). I remember sitting in a dark room watching individual after individual dressed in their underwear paraded onto a stage while a voice in the background droned on about their diagnoses. No names, no humanity, just a diagnosis, a medical label you wore for life that defined who you were and how you were to be treated by staff. I had more training on how to make the perfect square corners on flat sheets than I did on the effects of the medication I gave or teaching life skills. The people I worked for back then were divided into two categories. They were either individuals who were capable of receiving training, or those who were not. The criterion for this was set by a psychologist who came in to test people he met for the day without any input from the staff who interacted with them on an ongoing basis. Once given this label it was theirs for life. People were categorized by their disabilities, not any abilities they might have. Of course, the staff members were not encouraged to teach life skills nor were they trained to do so. There was no effort put into changing the staff’s knowledge base. Every day was much like the one before. In that extremely dismal place, what could ever have been right?

What was right was the spirit of the people I supported and their families. They created a community and changes that had a ripple effect on the attitudes of politicians in Washington who listened because they had family members with developmental disabilities. However, without families, self-advocates, and advocates pushing nothing would have changed. The change that began in the late 1960s and early 1970s meant many things, like the downsizing and closing of state regional centers and individuals having the right to live where they wished. Today, people with disabilities are active participants in their communities. The people I support expect that any discussion I have with them is just that, a discussion. The direction they want their lives to go is determined by them.

These changes have brought a need for a workforce with improved education, training, and resources to assist the people we support. DSPs need a deep understanding of how to support the people with whom we work, and a code of ethics to promote their true independence so that we are advocates for their rights. The days of eight days of training are gone. DSPs need both formal education and ongoing training. Depending on who you are supporting you may need extensive medical training, or training in occupational therapy, body mechanics, or life skill development. This is no longer a job anyone can walk into and expect to coast through the work. On any given day I might have to use training I have received in medication supports to assess how a person is reacting to a new medication, use body mechanics to provide range of motion for someone who has physical disabilities or be able to turn a desire that an individual has expressed into steps they will take to meet their goal. I need to understand the needs of the individual I work with whether that person has the ability to communicate with words or uses non-verbal communication. I may need to know how to use a variety of orthotic devices, assist with mobility challenges, or help someone with eating and specialized diets. I might work with someone whose medication and nutritional needs are met through a gastrostomy tube. Or I might be working with someone whose anxiety is expressed indirectly and it is my job to interpret this and help that person work through what is upsetting them.

Direct support has become a profession requiring not only ongoing training, but an extensive complicated skill set. The training and educational needs of DSPs change as the needs of the people we support change. Ten years ago we knew little about Alzheimer’s; today it is a challenge for many of the people we support. Autism was something we knew little about; now DSPs have a growing need for education and training on supporting people with Autism and their families. What once was a one-size-fits-all criteria for assisting people with developmental disabilities has grown into a career requiring an extensive knowledge base to help the individuals we support in their daily lives.

This is not a job, it is a profession. The people in the field now and who will enter the field in the future will be called upon to do more and know more. Unfortunately, the ability to attract and retain those individuals is becoming more and more of a struggle. Low wages and rising medical costs create constant turnover. Families, self-advocates, and provider agencies face an ongoing challenge to find qualified individuals whose commitment and knowledge will add to people’s lives.

Rita McAninch-Hastings is a Direct Support Professional living in Crystal, Minnesota.
before a DSP is allowed to work directly with an individual or family. This training is offered in English, Spanish and Russian. SOREO has also taught it, with the assistance of translators, in Korean, Japanese, Chinese and Vietnamese. DSPs who are not proficient in English are encouraged to attend ESL classes. During the time that they’re learning English, they are trained to complete their paperwork and tracking documents in their native language; once the document comes to the office it is translated into English by the supervisor. SOREO mandates competency-based DSP training through the online College of Direct Support (CDS) for all English speaking DSPs. If the DSP is not proficient in English they complete their training in a standard classroom in their native language. Once the DSP is proficient in English by the supervisor. SOREO mandates competency-based DSP training through the online College of Direct Support (CDS) for all English speaking DSPs. If the DSP is not proficient in English they complete their training in a standard classroom in their native language.

SOREO also sponsors DSPs who wish to pursue credentials from the National Alliance for Direct Support Professionals. It was challenging to find competent translators to translate all our training materials into multiple languages. The development of training materials for people who had emigrated from Mexico was the most difficult. Expert professional translators either attempted to translate literally or they translated into “formal” or “proper” Castilian Spanish. Some translators were offended when we insisted that training materials were to be translated into the Mexican dialect. Translation of training material into Russian was also challenging. The Russian language does not use an English alphabet so we had to purchase special software and a different keyboard so we could physically produce the documents that we needed. The use of translators is expensive, slow and challenging. We have to screen and test translators carefully. The simplest method is to have them translate a page of information that is pertinent to a DSP’s job and then ask a bilingual supervisor and a DSP to read the translated materials and see if they can understand what is being said. We have learned that we cannot assume because someone says they are a translator or they have an advanced degree that they can translate material so that it is meaningful to our workforce.

Finally, we match the DSP applicants to the preferences and needs of the individual and families they will support. Some people have a specific preference regarding language and/or culture. Failure to honor that preference will result in the failure of the DSP to satisfy the needs of that person. To support effective matching SOREO has a policy that the family/individual may choose their DSP and may terminate services from a DSP for no reason at all. A DSP who is not comfortable providing supports to an individual or family may also request a change and may terminate their services to that person or family. This accommodation supports the choices of the people we support and of the DSP.

**Conclusion**

Currently 650 individuals and their families receive services from SOREO. During 2006 we experienced a 78% growth in services. Our families, funding entities, and DSPs choose SOREO. As agencies face tougher competition to recruit, hire and retain a trained workforce perhaps they may consider the path that SOREO has pioneered and embrace an immigrant workforce.

**References**


Wendy Sokol is CEO and Co-Owner of SOREO, Tucson, Arizona. She may be reached at 520/881-4477 or wendy@soreo.com.
Continuation

[McCulloh, continued from page 19]
about DSP workforce challenges and solutions.

The six partners from five states who finished the project saw significant decreases in DSP turnover by the end of the project. Across the partners, DSP turnover was reduced from 40% in 2004 to 23% in 2006. In addition, each participating organization had its own successes and challenges in relation to the training. Some of the specific experiences of the participating agencies, and their views of the training, are highlighted in the six agency profiles accompanying this article.

Conclusion

The NTIFFS project is important because it creates a model for training frontline supervisors and organizational leaders on workforce development intervention strategies. It demonstrates that when frontline supervisors and leaders implement these intervention strategies in a thoughtful, planned way, they reap the benefits of increased retention and decreased turnover of DSPs.

Note: The training project was funded by a Field Initiative Development grant #H133G030058 from the National Institute on Disability and Rehabilitation Research (NIDRR), U.S. Department of Education.

Reference


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NTIFFS Profile #4: Devereux

“Give a man a fish and he will eat for a day. Teach that man to fish and he will eat forever.” With that in mind we wanted to teach our residential management staff to become effective managers. Prior to participating in the “Removing the Revolving Door” curriculum through the NTIFFS project, our turnover was 54%, with DSPs representing 92% of that number. Given our turnover rate we were an ideal candidate for the project.

With the support of our National Training Director, Mary Imbornone, we embarked on the journey of implementing the curriculum within Devereux New Jersey. It was not difficult to sell it to our senior management. Our Director, Maureen Walsh, became a key advocate for its implementation. With our National Training Director and Executive Director’s support, we had the major ingredients for a successful kick-off. We also had to sell it to our residential management staff who were very protective of their staff’s work schedule. It was not uncommon for them to feel that training merely took away valuable service delivery time. The task was to put together a marketing plan to get them on board with the training. Since turnover was their challenge, the marketing plan was to educate them on the cost of turnover. We presented turnover rates and their cost and impact on the operation. At the kickoff meeting, our Executive Director, Corporate Vice President Sara Ellen Lenahan, senior staff members, and National Training Director were there in full force promoting the program. It was a winner! We captured the attention of the directors, managers and program supervisors in our residential operations. They understood we were giving them tools to do their job. The race was on!

We conducted six training sessions per month, which covered the entire “Removing the Revolving Door” curriculum. Because we did not have a facility large enough to accommodate a class of 30, we rotated training classrooms between public libraries throughout the state. We trained the entire direct support management staff. In addition to classroom modules, everyone was required to complete one online module. We used additional online modules as make-up sessions for participants who missed the live classes. The participants were engaged in learning application exercises that included:

- Calculating turnover statistics and costs.
- Creating new recruitment materials.
- Critiquing ads and developing new formats.
- Assessing effectiveness of Realistic Job Pre-views (RJPs) and developing RJPs for each program (e.g., film, scrapbooks).
- Re-evaluating our structured interview process and developing new behavior-based questions.
- Revising our orientation checklist.
- Re-evaluating and rewriting our structured observation process and forms.

• Practicing aligning the mission, values and vision of Devereux with common coaching statements.

It was an exhilarating experience that culminated in a graduation ceremony with 28 graduates. Within six months of adopting the program, we had an 11% decrease in turnover with a 13% reduction in the proportion of staff leaving within 12 months of hire. Since the inception of the program we have continued to see a downward trend in our turnover. We ended the fiscal year in June 2006 with a 38% turnover rate.

Today we offer bi-annual “Removing the Revolving Door” training to our new residential management and potential managers. We have linked elements of the curriculum to specific competencies within our managers’ role descriptions. Our corporate operation has embraced the program and it has been adopted with all our operations throughout the United States. Our formula for success was top level commitment; a strong working partnership between training, human resources, and operations areas; and an openness to change. The adoption of the program has made a difference in our organization, but most of all in the lives of those we support.

For more information about Devereux’s residential manager training contact Mary Imbornone, National Director of Training and Development, at mimborno@devereux.org.
Implemented were the following: several new strategies. Among the changes we small teams of participants to implement problems at once, in the end we developed of the intervention strategies to fix all the efforts of other DSPs. While we wanted to try all support new DSPs, and recognize long-term retention statistics, improve DSP teamwork, helping them learn to evaluate turnover and the motivation and performance of their workforce. We also learned that turnover is directly related to one’s experiences with co-workers and with immediate supervisors.

In 2003, New Horizons led 10 Mid-Hudson Coalition agencies in the NTIFFS training program to improve direct support staff retention and recruitment issues through a comprehensive frontline supervisor training curriculum and organization development interventions. The program used the curriculum “Removing the Revolving Door,” the online College of Frontline Supervision and Management curriculum, and the book “Staff Recruitment, Retention and Training Strategies.” As a result, the following changes have been implemented by New Horizons and other agencies of the coalition:

• Using a realistic job preview in the hiring process.
• Bridging mission/orientation/training/evaluation of staff.
• Employing strategies of recruiting direct support staff, such as replacing newspaper ads with internal referral bonuses equivalent to the cost of a media ad.

• Using structured behavior-based interview questions.
• Distinguishing training from orientation.
• Setting up a strategic welcoming program.
• Focusing on reducing turnover in the first six months of employment.

New Horizons closely tracks recruitment and retention rates of direct support staff as one important measure of quality services. As a result of our participation in NTIFFS, our DSP turnover rates declined from 26% in 2003 to 10% in 2006, and we reduced turnover in the first six months of employment from 26% in 2003 to 13% in 2006.

Contributed by Regis Obijiski, Executive Director, New Horizons Resources Inc., Poughkeepsie, NY. He may be reached at 845/473-3000, x304 or robijiski@nhrny.org.

NTIFFS Profile #5: New Horizons Resources
Providers of services and supports for people with developmental disabilities know in their hearts that the fragility and vulnerability of our work lies not in our clientele, but in our workforce. The nature of our work is relationships and the quality of our work is defined at the point of service. NTIFFS has given our organization one very important tool to use to encourage the retention of competent and dedicated direct support staff and also to recruit effectively. It helped us understand that, vagaries of the economy aside, organizations can increase the attractiveness of their cultures, the competency of their management, and the motivation and performance of their workforce. We also learned that turnover is directly related to one's experiences with co-workers and with immediate supervisors.

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NTIFFS Profile #6: Community Entry Services
Training supervisors who may be as far apart as 350 miles is always a challenge. Through the NTIFFS project 23 of our 24 supervisors had access to online training through the College of Frontline Supervision and Management, helping them learn to evaluate turnover and retention statistics, improve DSP teamwork, support new DSPs, and recognize long-term efforts of other DSPs. While we wanted to try all of the intervention strategies to fix all the problems at once, in the end we developed small teams of participants to implement several new strategies. Among the changes we implemented were the following:

• Revised job descriptions and duties to include skill sets from the community residential core competencies in the curriculum. This provided staff with a clearer picture of their responsibilities.
• Completed a written Realistic Job Preview (RJP) that is now required reading for people interviewing for positions. This resulted in some people not completing interviews, relieving our organization of high training costs for people who would have left within the first couple of weeks. This RJP is also used as a recruiting tool at job fairs.
• Developed a mentoring program. Upon completion of the pilot project, where 10 DSPs acted as mentors, a mentoring program was implemented for all new DSPs. Both mentors and mentees agree that this helps in building co-worker relationships and learning new job duties. We discovered we needed to make certain that mentors work the same shift and possibly even at the same site. This makes accessibility to the mentor possible when the questions arise. Mentoring has allowed us to recognize long-term DSPs who are dedicated to the job and can help others learn the job.

The one challenge I was unable to overcome was finding an individual at each of the other organizations from Wyoming who would be the driving force behind “Removing the Revolving Door” training at their organizations. One organization started to implement training and all Frontline Supervisors were excited, but when that key person left the organization the training ended.

Based on our experience with NTIFFS, I would say to others that if you find your organization at a plateau, provide training for your Frontline Supervisors. When they feel important enough to receive more education, they will use the training to help their DSPs feel important. When DSPs are important enough to have the support of their supervisors, the services provided to those we support can only be called excellent.

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