

AGED AND DISABLED WAIVER

STAFF MANAGEMENT TOOLKIT

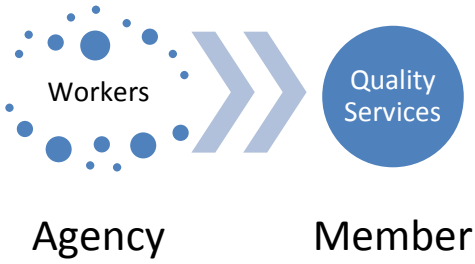
"A Guide for Managing Direct Care Worker Issues"

Introduction

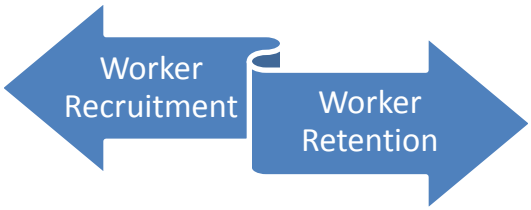
The Aged and Disabled Waiver Quality Improvement Council sponsored the Training Committee. Every year, the Quality Council develops a Quality Work Plan to identify areas in the Waiver Program needing improvement. One of the issues identified was management of staff. The Council recognized that this may present as a challenge on many levels. Many of the issues mentioned by providers and members included staff turn-over, staff shortages, call-offs, utilizations of substitute workers, no-shows and other issues. Committee members included individuals who provided services and individuals who received services. Each member was chosen based on their experience in dealing with worker issues on a daily basis. The goal of the Training Committee was to develop a best practice toolkit for management of staff.

The Purpose of a Staff Management Toolkit

Worker issues directly affect the quality of member services. Worker recruitment, worker retention, and an agency's ability to resolve worker issues may positively or negatively impact the care of the member. The goal is to provide qualified workers and quality services. This reduces member or agency risk and increases the member's positive experience with the service. **Good workers lead to good services.**



WORKER RETENTION AND RECRUITMENT



Interpersonal and Communication Skills Training: Sometimes workers may resign out of frustration or disillusionment if what they are taught in class does not prepare them for what they face on the job. At times, workers are placed in situations that require unusually sophisticated interpersonal and communication skills. They must manage conflict, set limits, make ethical decisions and support other members of the caregiving team. There may be little in their training that addresses such complex psychosocial issues. Providers have found that addressing these issues initially with the worker can enhance the retention of good workers.

Training versus Turnover Rates: Within the in-home care industry, worker training has a positive effect on worker retention. Effective training may reduce turnover rates by giving new workers the confidence that they are doing the job right. In fact, one study suggests that workers who were provided an

educational program on dementia care had a lower turnover rate than the untrained workers within six months of the training. The study revealed that the workers felt more empowered and better able to communicate with members. In fact, additional training was linked to the worker feeling more valued and remaining on the job longer. Another survey revealed that "worker training, orientation and education" were reported to have had an impact on improving the member's quality of care and improving communication between the member and the provider. Trained workers are more likely to stay and adapt.

Link-Classroom and On the Job: Workers and their supervisors report a gap between skills taught in the classroom and what the worker is required to do on the job. It is often negatively viewed by workers because they see the training as "not having application to their everyday work". Studies recommend incorporating more hands-on practice for direct care workers and providing training that is "relevant, practical and consistent". Provide training that prepares them for the "day to day realities of the world". Ask long term workers about the training gaps they experienced initially when placed on the job and learn from that. Gear training toward removing those reported gaps.

Teaching Methods: Workers are typically educated through a combination of lectures, readings and videotapes, with a limited amount of supervised hands-on practice. Educators and workers reveal that the utilization of traditional teaching methodology does not always result in the worker absorbing the information. The more the worker participates in the class, the more the worker is likely to learn. Worker training is now moving toward "learner centered" classrooms, where the training is geared toward the worker.

New Focus: Nationally, providers have found that successful recruitment and retention may require an increased focus on the following:

> **Job Readiness:** The addition of worker training on basic **l**ife skills, employment skills, goal setting, time management, and how to balance work/home responsibilities within basic employment curriculum.
>
> **Literacy**: Offering help to workers to assist with reading and/or basic understanding of written instructions regarding forms and basic writing skills for documenting care provided.
>
> **Cultural Competency and Diversity:** Helping workers understand cultural, ethnic, and religious differences among the members whom they serve. This focus offers depth in understanding the individual and reduces misunderstandings which alleviate tension between the worker and the member.
>
> **Reinforce On the Job Training:** Combination of on the job orientation, on the job supervision, or peer mentoring has proven to be successful in other areas.
>
> **Responsiveness to Member Preference**: Teaching workers to respect member needs/desires, and how to practice person-centered care can enhance the experience for both the worker and the member. Person centered practice enhances an individual's ability to make choices and live as fully as possible. This type of professional practice focuses on healthy, strong relationships between the caregiver and the person they support. It stresses problem solving, interpersonal skills and helps the worker maintain a balance between member preference and health and safety concerns.

Staff Satisfaction: Involving staff in decision-making processes and quality improvement of services positively impacts staff satisfaction. Workers who are satisfied tend to stay employed.

Code of Ethics

Most professional groups develop a code of ethics which is adopted by the professionals who work in the specific field. The National Alliance of Direct Support Professionals has developed a code of ethics for direct care workers. Providers nationally are adopting a professional code of ethics for workers, asking workers to commit to abide by the ethical code and sign as a means of formalizing their desire to serve members in an ethical manner. The code of ethics specifically spells out what is expected of the professional. The following is the code of ethics developed by the National Alliance of Direct Support Professionals:

1. **Person-Centered Supports:** I recognize that each person must make their own decisions about their life and services; they are unique; I support their preferences.

2. **Promoting Physical and Emotional Well-Being**: I will promote the member's health, safety and emotional well-being; maintain professional boundaries; respect their values and choices; report any situation of member abuse, neglect, exploitation or harm.

3. **Integrity and Responsibility**: I will support member choices; I am aware of my own values and how they influence my decisions; I will make sure that I understand job training and meet requirements for the job; assume responsibility and accountability for my decisions and actions; seek advice on ethical issues; be a good role model for co-workers; practice responsible work habits.

4. **Confidentiality**: I will respect their confidentiality and privacy.

5. **Justice, Fairness and Equity: I** will be fair; support member's human rights, civil rights; help member understand their rights and responsibilities.

6. **Respect**: I will respect their dignity; value the person; understand their personal history; honor choices and preferences; protect privacy; respect human rights; interact respectfully with member; recognize and respect their culture (e.g. religion, sexual orientation, ethnicity, socio-economic class).

7. **Relationships:** I will help the member maintain family or informal support relationships; not express negative views, harsh judgments, my personal views or stereotype about the relationships.

8. **Self-Direction:** I will support the member in making their own decisions; know that everyone has the potential to learn and grow.

9. **Advocacy**: I will support their right to speak for themselves; promote their human, legal, and civil rights; find trustworthy assistance with advocacy when a member needs it.

Note: *The following organizations were referenced in regards to any studies, data, or information listed in this toolkit.*

The Institute on Aging
http://www.nia.nih.gov/

Paraprofessional Healthcare Institute (PHI) Works
http://phinational.org/

National Alliance for Direct Support Professionals
https://www.nadsp.org/

THE INTERVIEW PROCESS

The interview process is the time to begin to "get to know" the potential employee. One means of learning more about the applicant is the job application. However, this document often includes very little about the person. It is important to begin a conversation with the applicant to learn more about them. One way to do this is to ask questions. This opens the door for the applicant to share information and lends insight into their qualifications and experiences. The following is a list of standardized questions that would apply to an applicant who is applying for a direct care worker position. The questions are broad enough to solicit a conversation, yet specific enough to yield valuable job related information. It is the applicant's opportunity to share and the employer's opportunity to learn. This set of questions was specifically developed for the Staff Management Toolkit by a human resource professional, agency directors, and human resource professor from Marshall University.

Assess the Job Applicant's Potential in Job Interview: People who come to apply at job fairs may or may not have what is needed for the job. They may report they have experience but agencies find that the potential worker really does not know what to do in the home. Ask the potential employee questions to determine whether they know what the job entails. Individuals take jobs for various reasons. At times, the applicant is interested in any job, not this job. The person may not know what they are getting into or know how to do this job. Use the interview process to assess the person's interest and skills (refer to sample interview questions).

Education in the Interview Process: Conduct education for the job applicant within the interview process. Education informs the applicant before they accept the job position. It gives the applicant the opportunity to make an informed decision, as well as the employer making an informed decision about the job match. There are various options for training the applicant such as video, including a person who receives services in the process, or allowing a member to "tell their story". This will provide the applicant an opportunity to know what the job is, before saying "yes". The education component can be brief and may yield a positive result in the end.

Interview Questions: The interviewer may ask the job applicant about their past, provided it is pertains to the job. Example: Have you had to help someone before? Example: Samaritan personality. If you see

someone on the side of the road, are you going to help the person? This is an example of an individual who may be compassionate. If that person doesn't hesitate to answer, "Yes. I helped my grandma or my grandpa". The interviewer may "get a feel for that individual". This gives the applicant an opportunity to tell their story. It takes a certain personality to do this job; someone who cares for people and has empathy toward others. Providers and members both recommended that the employer should ask the right questions to learn about the potential employee. If the interview takes less than 15 minutes, it is not a good job interview. You do not know the person well enough in 15 minutes. It was recommended to "treat each individual as if they are my mom, brother, etc." Do I want this person to care for my mom? If the answer is no, then that's probably not the person you want to hire. Human resource specialists recommend making the interview informal and relaxed to encourage conversation. The interview questions need to be worded correctly. An interviewer would not ask "do you have children? But an interviewer could ask "have you ever helped small children?" or "Have you ever helped the elderly?" Get a formal set of questions and miscellaneous questions specific to match the situation (refer to sample interview questions for an example).

Standardized Questions for Staff Management Toolkit

1. **Have you ever heard of our company before? If so, how so**. **Explanation:** It is important for workers to know the "work" of the company. This differentiates between an interested applicant and an applicant who "just wants ANY job".
2. **Do you know what we do here? Explanation**: A worker who is in the business of providing care to people should be interested in people. This is the time to allow the applicant to elaborate on his/her interest in the business of caring for people.
3. **Have you ever worked with disabled or elderly persons? Explanation:** This question encourages the applicant to provide information related to their "working knowledge" of the business.
4. **What did you find rewarding? What part of this kind of work did you find not as rewarding? Explanation:** This question allows the applicant to explore his/her reason for doing this kind of work, what they like about the work and what is not as pleasing to them. This encourages applicant insight and confirmation that it is a good "job match" for the applicant. An applicant or the employer may decide at this point, this match is not right. It is a time for both the applicant and the employer to learn.
5. **Is transportation a problem for you? What about in extreme weather? Explanation:** This is called "getting to know your potential worker". This question presents the opportunity for an applicant to demonstrate their problem solving skills and expand on their own unique set of attributes for the job. Agencies may have specific requirements for a job and this is the opportunity to discuss.
6. **On a scale of 1 to 10, how reliable are you? If the answer is anything under 8, ask the following question: what foreseen circumstances do you see hindering your reliability in the future? Explanation:** This is another applicant insight question. How does the worker see himself or herself? This is a learning experience for both the applicant and the employer. If I

know that I have to be at work at 6:00 a.m. and I am "not a morning person", I might find that this is not the job for me.

7. **Do you find yourself getting attached to clients easily? Explanation:** This question provides the applicant the opportunity to explore personal insight and emotions related to this job. It provides the applicant the opportunity to discuss the balance of passion for the work and professional boundaries. This is a question related to their working knowledge of this business.
8. **Has there ever been a situation where you knew the client was doing something wrong but said nothing because of the relationship? Explanation:** This question gives the applicant the chance to provide real-life examples of their ethics in action and how they handled on-the-job situations.

OFF LIMITS QUESTIONS: The following is a list of questions that cannot be asked in an interview and a list of alternative questions.

What you <u>CANNOT</u> ask: Are you a US citizen? How long have you lived here?

What you CAN ask: Are you authorized to work in the US? What is your current address?

What you <u>CANNOT</u> ask: What religion do you practice? What religious holidays do you observe?

What you CAN ask: What days are you available to work? Are you available to work our schedule?

What you <u>CANNOT</u> ask: How old are you? How much longer do you plan to work before you retire?

What you CAN ask: Are you over the age of 18? What are your long term career goals?

What you <u>CANNOT</u> ask: Can you get a babysitter on short notice for travel? Do you plan on coming back to work after maternity leave?

What you CAN ask: Are you available for overtime on occasion? You'll be required to travel. Can you do this on short notice? What are our long term career goals?

<u>What you CANNOT ask:</u> We've always had a man or a woman to do this job, how do you think this will work? Have you ever supervised men or women?

What you CAN ask: What do you have to offer our company? Tell me about your previous managing experience.

<u>What you CANNOT ask</u>: Do you have any disabilities? How much do you weigh? How many sick days did you use last year? Have you had any recent illnesses or surgeries?

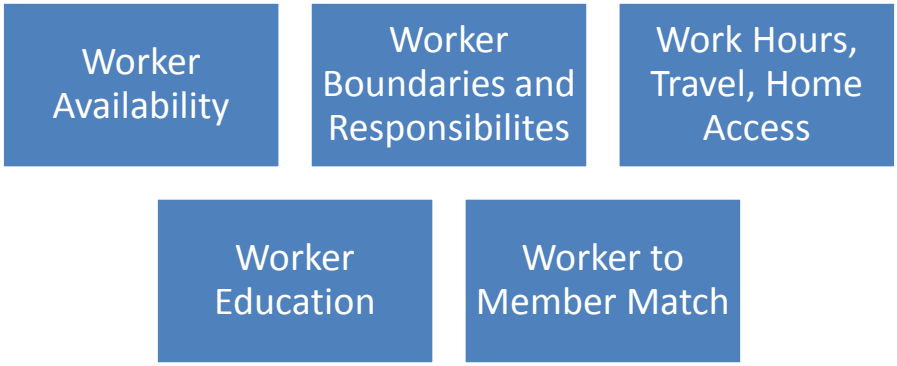
What you CAN ask: Are you able to perform the specific duties of this position? Can you lift boxes up to 50 pounds (job related)?

<u>What you CANNOT ask:</u> How far is your commute? Do you live nearby? Have you ever been arrested?

What you CAN ask: Are you able to start work at 8:00 a.m.? Are you able to relocate? Have you ever been convicted of (a fraud, theft, etc.)?

http://www.focus.com/fyi/30-interview-questions-you-cant-ask-and-30-sneaky-legal-get/

IDENTIFIED ISSUES



The Committee's first activity involved discovery of the problem. The providers and members on the committee developed a working list of identified issues related to staff management. Each area of the state may have a unique set of issues so all issues may not apply to a single agency. Therefore, it is important for an agency to develop an issues list unique to their specific agency. Once the issues are identified, methods for resolution may be developed to attempt to improve staffing issues in the area. The following is a general list of state-wide staff management issues that were identified by West Virginia.

WV's Identified Staff Management Issues are as follows:

1. Lack of staffing
2. Competition-other companies
3. Travel time (no income) gas
4. Guaranteed hours
5. Consumer living conditions
6. Lifting, moving furniture
7. Personality conflicts
8. Ethical boundaries
9. Attachment to members

10. Safety issues (unsafe environment)

11. Access to home.

12. Cultural issues

SUGGESTED RESOLUTIONS AND STRATEGIES

Once the list of staff management issues was identified, resolutions and strategies were outlined by committee members to address the problems. Many of the providers across the state had already developed known strategies for their specific agency that have worked. The committee members consulted with other providers or members on the issues as well.

Resolutions and strategies listed below have been tried and have proven effective with West Virginia providers and in other states as well. While this is not an all-inclusive list or an all-inclusive response, this process allows for brainstorming and problems solving for unique situations.

1. **Lack of staffing**: Recruitment of new staff and retaining the staff already employed by the agency.
   1:1 Worker to Patient Staffing Ratio: Providers have found that by advertising "1:1 staffing" within the newspaper job posting that this can assist with worker recruitment. 1:1 staffing may be an easier ratio of worker to member than hospital or nursing home settings where the worker may care for multiple patients on a given shift. The lower worker to patient ratio can be an appealing aspect of the job.

   Post Job Openings to Craigslist: This is a free option for providers to advertise open job positions in their agency.

   Newspapers online: Many online local newspapers allow posting of job positions for a minimum of a $1 per day, if the posting is for a minimum of 30 days. This allows a provider to maintain an ongoing job posting and plan ahead for any new staff vacancies.

   Job Fairs: Job Fairs take place on college campuses and various community functions. Example: In Huntington every Thursday night there is a concert in the community (Pullman Square). This is a venue where companies can set up booths with brochures and job applications. Another example: Charleston has a similar free concert where agencies could also set up booths for job applications as well (Live on the Levee). Research the local community events (fairs, community concerts, etc.) to establish a presence for recruiting new employees.

   Seniors: The group identified a specific workforce that providers believed had served the program well. It is also important to match the worker to the member. The applicant should meet the qualifications for the job (job requirements to serve some members may include lifting, use of equipment, etc.). The group identified individuals age 55 or older as a targeted group of employees who often applied for positions. They worked well in the positions, evidenced good work ethics and tended to remain on the job. West Virginia's demographics revealed a large population of individuals over age 55. This market for employees was identified

as potential employees with a history of long retention of employment with the agencies. Some individuals are retired or have second careers. This group was identified as typically retired nurses and retired LPN's, retired hospital and nursing assistant workers, retired private duty workers and retired housekeeping workers. This group of individuals was reported to have been already acclimated to going into a person's home or providing similar direct care to individuals. It was suggested that we investigate federal and state Title V programs or Senior Employment Programs as an option as well. Check state websites for information on senior employment programs as a resource or Workforce Investment programs

Counties: At the county level, various counties conduct job fairs for multiple employers. Research the local county where the agency is located for county fairs (examples are Cabell, Wayne and Lincoln County fairs). This provides an opportunity for outreach to a large number of potential employees in one place. One agency reported attending multiple local job fairs. Colleges and Workforce Investment sends out information to agencies about job fairs. Ask to be placed on the list of the career centers for the colleges and call their secretary to send emails for notifications.

Newspapers: Local newspapers often sponsor job fairs or could be a resource to initiate a job fair in a local community since many agencies often post job openings in their classified ads. The Charleston newspaper sponsors an annual job fair at the Charleston Civic Center. If the local area does not have a job fair, approach the newspaper to start one or find out what can be done to organize a job fair.

Schools: Many job fairs are held at high schools, colleges, career centers, and vocation technical schools. By contacting or attending a school job fair, your agency will be placed on a list for notification of other job fairs as well.

Health Fairs: Some agencies have senior health fairs in malls, apartment buildings, community events, civic center events, hospital health fairs or others. Providers report that this is an opportunity to set up a booth for applications for potential employees.

Workforce WV: On the website, there are job fairs listed for the current month. This is also a source for the provider to post job openings.

2. **Competition (from other companies):** Allow the worker to have input with their work schedule (provided the member's needs are met). Be willing to negotiate rate of pay or hours of work within agency policy and labor laws. This is a cost decision that each agency would need to make independently before implementing this option. Some providers have implemented this option with success.

Mandatory overtime: Providers and members both reported that workers with mandatory overtime were not as satisfied with the job and did not tend to stay with the agency. They both recognized there were clearly situations when overtime may be necessary. Recognition of an

employee's own commitments was both respected and appreciated by the employee. This is a factor in retention.

Staff Communication: Staff communication is important for worker retention. The agency should provide honest, accurate, and frequent communication about staff responsibilities and expectations.

3. **Travel time (no income) gas**

Organization: Organize workers geographically so the worker has limited travel. Gas can be costly for a worker and can be a hardship to pay up front. Keep the worker in the same area so the worker does not have to travel as much. Example: One provider reported to have assigned a worker in the eastern part of the county and one in the western part of the county. This reduced the amount of travel for the worker.

Travel from One Home to Another: Some providers recommended that agencies consider payment to the worker to travel from one member's home to another member's location. Based on the cost, this is a decision that each agency would need to make independently before implementing this option. Some providers have implemented this option with success and have seen positive results.

Reimburse for Member Travel: Not all providers reimburse the worker for member travel. Consider reimbursement of the worker for transportation conducted on behalf of the member for essential errands and community activities. Again, this is a cost decision that each agency would need to make independently before implementing this option. Some providers have implemented this option with success.

4. **Guaranteed hours**

Float Pool: At any given time, there are members who do not need service or other members who are in desperate need of a substitute homemaker. Consider utilizing the float pool concept. Staff are placed on the float pool list if their member is in the hospital or nursing home and made available for other members on the program to utilize. Providers report that this would involve cross training of workers to implement this concept. This same concept is utilized in other healthcare settings such as hospitals or in home care programs. Example: One provider assigned a worker to four hours in the morning to one member. For the afternoon hours, the worker was a "floater". He guaranteed the worker 40 hours and the floater would fill-in when other workers were unable to provide services. On any given day, he found that there were reasons workers could not be at the home. By assigning the same floater, the member was familiar with this worker as well.

Team: Utilize a team approach to serving a member. Instead of assigning one worker to the member, assign two workers to the member. The second person will work a shift during the

week so the member is familiar with them and the worker knows the type of assistance needed. The second worker is considered the back-up worker.

Investigate Full Time Employment Status: Providers report that some agencies do not hire full time employees and employees do not receive full time benefits. Workers stay below the 40 hour per week limit. As agency cost allows, providers report that full time status or full time benefits impact worker retention and worker recruitment.

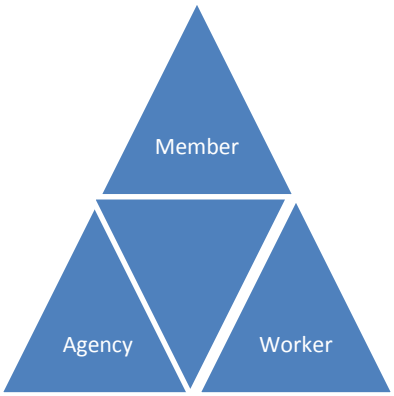
Quality: Providers and members of the Training Committee stressed that the agency's primary focus should be on quality, not quantity. Therefore, it is important to "do a good service and members will come your way." If the focus is the number of people or amount of hours, both providers and members felt the quality of care might suffer. The Training Committee elaborated that "it is a people business and should be people focused".

Serve at Capacity: Providers and members on the Training Committee both recommended that an agency not commit to serve a member when the agency knows that they cannot provide the member's necessary level of staffing. If shifts are not covered, committee members felt that this could be a risk to both the member and the agency.

Organization: The committee members felt that it is important to organize the available employee hours for maximum benefit. Committee members recommended that the agency pay attention to the employee's travel time and member's home location. Know where the workers live and match the worker to members who live in the same general location. An option for workers who have three hours left in the day is to place the worker on a split shift for a member who needs assistance later in the day.

Communication: Maintain open communication between the agency, the worker and the member. The worker should not be the mediator between the agency and the member. It is an equal responsibility for all three parties. It is important to ask the question "is the intended message the one that was received?" Communication boundaries include relationships which consist of respect, accountability, responsibility and honesty. Verify what you hear. In the tri-level relationship, strive for healthy boundaries and social interactions among all parties.

Communication Triangle



Crisis Management: DO NOT use crisis management as a daily tool to manage staff. Example: who is not covered today, where do I send a worker? The agency must plan ahead for the unexpected. It is important to know member back-up plans and verify informal support coverage for members. Implement agency emergency plans for natural disasters (floods, fires, snow, etc.) and contact members or legal representatives when there are problems with workers. People need to know to plan. Communicate any plans to scheduling staff at the agency and provide training to ensure they are aware of what to do and when.

Extra Hours: Providers suggested that agencies should "over-staff" to maintain capacity. On a given day, "call-offs" are always possible. Utilization of internet programs or call-in systems can allow for workers to post available hours of work. This alleviates calling at the last minute. Example: If a worker is available to work on Fridays as an extra, they could post those hours to the list on the agency's internet. The agency now has a resource for extra hours in a given week and allows the agency to "over staff".

Scheduling System to Track Workers: It was recommended that the employer utilize a database to track workers (a simple Excel spreadsheet would work). Enter staff name, days of week, member assignment and location. Enter all call-offs. This allows the scheduler to see the "bigger picture" and know that they can deploy workers assigned to the member's home area. Providers suggested that it may be worth investigating a web-based system for purchase, provided it was not cost prohibited. This would allow for maximum utilization of available personnel. Make a list of members with critical needs for agency emergency planning (for snow, flooding, etc.). Include any special requirements for members so the scheduling process factors in important clinical information on each member. Examples: Time Clock Management; Digital Communications-Caregiver calls into the agency to report they have arrived and calls agency when ready to leave the member's home.

On-Call: Assign workers for on-call for a few hours, outlining the time frame for the on-call period.

Software: Software is already available to assist companies by tracking available workers. The system will provide names of all workers, when they are available and where they are located.

5. **Consumer living conditions**

Nurse Involvement: It was recommended that when there are issues with living conditions, it is important to involve the nurse or case manager to develop a plan to address any problems.

Education: Educate members and family members that the worker is not there to take care of family members in the home. The worker is there to assist the member only.

Supervision: Stress to the worker that they must go to the supervisor and have the supervisor address any problems.

Communicate Expectations Up Front: Communicate to member up front the expectations, what the service can do and establish boundaries.

Educate Workforce: Train and educate the workforce. It is important to note that the home may not be as tidy at first due to the member needing assistance in the home. Over time, this will improve as services are offered. Make sure the worker is aware of this issue.

6. **Heavy Cleaning, Lifting and Moving Furniture**

Communicate Expectations Up Front: First, communicate to the member expectations, service limitations, member rights and responsibilities and establish boundaries. Then, educate the worker on the same issues (Worker's Compensation).

Written Explanation of Roles/Service/Boundaries: In a separate document, the provider may spell out the role of the worker, the activities of the service and set boundaries in a document. By doing this up front, all parties understand what can and cannot be done. A document makes it clear and brings it to the forefront for the worker and the member. This worker is here to assist you. These are things that will help protect you and the worker.

7. **Personality Conflicts**

Match: It works best if there is a good match between the member and the worker. This can be a challenge and may take several attempts before a match is found. Ask the member up front about their preferences.

Contract: We are all different, so it is inevitable that a personality conflict might happen at some point. At times, the conflict can be very difficult. Within the contract, specify the issue to be addressed and what the member needs to do to resolve the problem. Also it is helpful to review member program responsibilities again with the member. A behavior contract provides an opportunity for people to work on issues in a proactive manner.

Cultural Training and Communication Training: Provide cultural training to educate workers about similarities or differences. Encourage good communication between the worker, the member (member's legal representative), the nurse and case manager.

Clinical Oversight: Agency staff should provide clinical supervision of the worker. They should conduct debriefing with the worker when a crisis arises in the member home, and discuss ethical boundaries with the worker. The Unsafe Environment Toolkit posted on the Bureau of Senior Services website provides information regarding crisis response. http://www.wvseniorservices.gov/

Worker Training: Involve members in formal worker training. Individuals who receive the service can bring up the issues such as "they might be cranky due to being in pain". The member assisting with the training can explain that he/she is not upset with the worker but upset with the circumstances. They can stress that it is not personal toward the worker. It is also important to train the worker in how to deal with emotions.

Behavior Contract: Set limits with people regarding inappropriate issues in the home. The nurse and case manager should address the issues outlined on the behavior contract, keeping it direct, to the point and simple. Ensure the member understands his/her member responsibilities in the program.

8. **Ethical boundaries**

Contract: It is important to spell out ethical boundaries, expectations, etc.

Code of Professional Conduct: An agency may establish a professional code of conduct and provide training on the content. The agency could ask the worker to sign the agreement as a sign of commitment. The National Alliance for Direct Support Professionals has developed a professional code of conduct that has been utilized successfully in other states and other programs. This organization has a great deal of information regarding direct care workers and educational opportunities such as conferences.

It is important to educate both worker and member that loaning money or borrowing items is never acceptable. Set boundaries. When problems arise, providers suggested that other agencies may be brought into the situation when needed such as Adult Protective Services for abuse, neglect or exploitation or law enforcement for illegal issues. Medicaid Fraud may be notified for allegations of fraud.

9. **Attachment to members**

Code of Professional Conduct: Establish a code of professional conduct, train worker/member regarding contents, and ask the worker to sign a commitment agreement to formalize the expectations of the Direct Care Worker ethical expectations.

Two Workers: Train two workers to go into the home. Only one worker goes into the home at any given time (no duplication in service). However, having two trained workers to meet the member's needs, allows for the member to know both workers equally as well. Time away, can provide perspective for the team worker who is not on shift. This may prevent "burn out" of a worker when they are dealing with a challenging situation on a regular basis. One Waiver provider stated their agency had seen a reduction in abuse, neglect and exploitation by rotating workers every six months. This provider reported they would bring the old worker back as substitute worker. The provider felt that changing workers every six months prevented workers from crossing professional boundaries.

10. **Safety issues**

Unsafe Environment Tool Kit: The Unsafe Environment Toolkit is posted to the Bureau of Senior Services website.
http://www.wvseniorservices.gov/DocumentCenter/ProgramSpecificDocuments/tabid/92/Default.aspx

Behavior Contract: The Registered Nurse and Case Manager are to develop a behavior contract with the member outlining the safety areas and expectations. Refer to the Unsafe Environment Toolkit for examples.

Treatment: The worker must communicate issues to the nurse or the case manager to assist in the situation. Options are available for members who need treatment for mental health issues or substance abuse issues. The nurse may help the member if referrals or appointments are needed.

Referrals: When issues of safety or illegal activity exist, it is always necessary to make referrals to either Adult Protective Services or Law Enforcement

Training: It may be helpful to provide mental health or crisis management training to the worker. For training resources, refer to the Bureau of Senior Services website for the Mental Health Toolkit, Mini Mental Health Curriculum or Mental Health Training Power Point (website listed below).
http://www.wvseniorservices.gov/DocumentCenter/ProgramSpecificDocuments/tabid/92/Default.aspx

Potential Threat: When a worker experiences a threat to their safety, notify the agency immediately and call 911 if necessary. It is important that the worker knows to remove themselves from the unsafe situation immediately! Threats may occur from family members or someone else who is in the home.

11. Access to Home: At times, a worker can only access the home with a four wheel All-Terrain Vehicle (ATV) or four wheel drive vehicle. This state is primarily rural so there are locations where no roads to the home exist or it is necessary to cross a creek to get to the home. There are locations where bad weather such as snow or ice may prevent access to a member's home. Agencies should work at adjusting their policies which may limit access the member. All attempts should be made to accommodate and assist the member in any possible way. There is a balance between liability and the

member's dignity of risk. Sometimes there are challenges for a worker who needs to access a "secure senior high rise building." The building may require an access card for entry for security purposes. Building managers are often careful with the number of keys and may only allow one key per person. Making sure the worker has the proper access to the home may be a challenge. Some agencies do not allow the worker to have keys or key cards, and prefer the worker request entry to the building. Providers report that the type of access to the building is dependent upon the age of the senior high rise and the physical set-up of the entry to the building. Some buildings provide access buttons in the apartment so the member can let the worker into the building. The following are suggestions.

- Contact another resident of the building
- Contact the building manger
- Research whether the building authority could make adaptations to the building (switches to allow entry)
- Provide a list of workers to the building manager and identification tags to the workers
- Identify a back-up person to let the worker into the building
- List the back-up person on the member's Service Plan under "Back-up Plan" (may consider more than one person, with member's approval)
- Identify family members or informal supports who can assist with access to the home
- Tenants may be able to file a complaint with the housing authority for access problems
- Add to the Member Assessment: type of transportation required to access the home, area specific issues (can't access with 2 wheel drive), home has many steps, walk through a pasture to access home, will need to cross a creek, or other challenges unique to access of the home.
- The case manager can assist the member with locating a more accessible home
- The case manager or the nurse can assist member in asking whether building can upgrade accessibility or adaptation for member
- It was noted by the Training Committee members that a company called "Schlage" provides technical equipment that can control the home environment with a key pad or cell phone. It was reported that this computerized system may be available in the future on a discounted basis for individuals with disabilities. This type of system could open a door, turn on a lamp or television, turn off the overhead lights, etc. Access codes can be provided for the system. Resources may also be available to assist with cost and members should speak with their case manager, nurse or resource consultant for assistance.

12. Cultural Issues: (or Diversity Issues)

Workers are hired from various locations, different ages, diversity of race, and religion. Members also have varying types of cultural or diversity issues. One provider reported that they have encountered problems with members who request the agency not send a specific worker with clear cultural biases. Providers on the committee report this is challenging as they do not want to comply with this request. The committee's suggestions are as follows:

Train Worker- Help the worker understand that they may encounter this type of problem. Committee members stated that the member may have a lifetime of cultural biases. Assist the worker in understanding the issues. At times, the employer's choices may be limited. Workers are not there to change the member's cultural values and the agency is trying to make arrangements to assist the member. Committee members suggested that the agency can let the

worker know that he/she may be the Jackie Robinson of the agency (the first African American baseball player). At first, they may experience problems but then, the situation may turn around. Providers and members on the committee suggested that the agency prepare the worker by educating them about certain situations when there are issues. It may be helpful to bring the worker and the member together to address the problem and set boundaries about "no phobias". A provider suggested that the worker may need to have "thick skin". The employer will need to see that the worker is prepared to deal with these situations. Not all workers may be willing to work in a situation where these types of issues are being addressed. Make sure the worker is accepting before putting the worker into this type of situation. Geographically, people are different. Even from one county to the next, there is a difference in the way people interact. It may be entirely based on the area. Respect the interactions and social practice of the member's home area.

Communication: May encounter language or cultural barriers. Does the member need an interpreter; can the family interpret; or do they understand when another language is spoken? Ask questions about how the member's culture religion or heritage affects his/her routine. Does the member's culture require shoes off at the door? Does the religion require food prepared in a certain way? The member's culture, religion or heritage affects the member's care. Be respectful of all member's choices, culture, heritage or religion.

Explain that the member and the worker will co-exist for a period of time. At least, the agency will have done their part to help the person. Address the issues and provide quality care.

CULTURAL SENSITITVITY

Assumptions: Culture is shared experiences and commonalities. Cultural identity is how a person identifies themselves based on their own personal experiences. Cultural misinformation is when perceptions of a culture are inaccurate and certain group cultural attributes are assigned to individuals. Example: stereotyping. Be aware of one's own biases, prejudices or knowledge about the person with whom you are interacting. Therefore, it is important to be aware of your own assumptions. Challenge those assumptions and always use appropriate language. Use non-judgmental questions and do not assume that everyone is like you because they are NOT! And, that is ok.

Listening: For a worker to effectively communicate with the member, the worker must "listen". There are three main listening skills.

- **Attending:** giving your physical and mental attention to another person.
- **Following**: making sure you are engaged by using eye contact, un-intrusive gestures (nodding head, saying okay or asking infrequent questions).
- **Reflecting**: paraphrasing and reflecting, using the feelings of the other person (empathy).

It is not good to perform any other activities or multi-task when listening. There is difference between hearing and listening. Be an empathetic listener. Do not be judgmental. Do not ignore the person or

pretend to be paying attention. Listen to what the person is really saying. Re-state the message. Clarify the message. Repeat the message. Be empathetic. Validate (I understand why….not in agreement with). Try to establish rapport with the other person and pay attention to what people are saying nonverbally.

ADDITIONAL RESOURCES

Employment Programs brochure:

http://www.wvseniorservices.gov/LinkClick.aspx?fileticket=lbwdbPPTuf8%3d&tabid=90

Workforce WV website:

http://www.wvcommerce.org/business/workforcewv/default.aspx

The Staff Management Toolkit was developed by the Training Committee and the Aged and Disabled Waiver Quality Improvement Advisory Council.

PROFESSIONAL CODE OF CONDUCT AGREEMENT

I, _____ , agree to follow the Professional Code of Conduct as outlined below and conduct myself in an ethical manner at all times when interacting with members or providing services to members.

1. **Person-Centered Supports:** I recognize that each person must make their own decisions about their life and services; they are unique; I support their preferences.

2. **Promoting Physical and Emotional Well-Being**: I will promote the member's health, safety and emotional well-being; maintain professional boundaries; respect their values and choices; report any situation of member abuse, neglect, exploitation or harm.

3. **Integrity and Responsibility**: I will support member choices; I am aware of my own values and how they influence my decisions; I will make sure that I understand job training and meet requirements for the job; assume responsibility and accountability for my decisions and actions; seek advice on ethical issues; be a good role model for co-workers; practice responsible work habits.

4. **Confidentiality**: I will respect their confidentiality and privacy.

5. **Justice, Fairness and Equity: I** will be fair; support member's human rights, civil rights; help member understand their rights and responsibilities.

6. **Respect**: I will respect their dignity; value the person; understand their personal history; honor choices and preferences; protect privacy; respect human rights; interact respectfully with member; recognize and respect their culture (e.g. religion, sexual orientation, ethnicity, socio-economic class).

7. **Relationships:** I will help the member maintain family or informal support relationships; not express negative views, harsh judgments, my personal views or stereotype about the relationships.

8. **Self-Direction:** I will support the member in making their own decisions; know that everyone has the potential to learn and grow.

9. **Advocacy**: I will support their right to speak for themselves; promote their human, legal, and civil rights; find trustworthy assistance with advocacy when a member needs it.

Date: _____ Worker Signature: _____

Date: _____ Agency Signature: _____

PROFESSIONAL CODE OF CONDUCT CERTIFICATE

This certificate is presented to

_____

For agreement to follow the

Professional Code of Conduct Agreement

On

_____

Agency Signature: _____