

Washington State Auditor's Office

Troy Kelley

Independence • Respect • Integrity

Performance Audit

Initiative 1163: Long-Term Care Worker Certification Requirements

December 18, 2014

We conducted a performance audit of Washington's voter-approved Initiative 1163. We found the Department of Social and Health Services and the Department of Health made several improvements since early 2012 that helped more applicants obtain the home care aide certification. The percent of applicants achieving certification almost doubled, from 29 percent in early 2012 to 58 percent in 2013. We also found that 96 percent of workers reviewed in our selection of adult family homes met I-1163 requirements, suggesting monitoring efforts are reasonable.



Audit Number: 1012952

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State Auditor's Office contacts

State Auditor Troy Kelley

360-902-0360, Auditor@sao.wa.gov

Chuck Pfeil, CPA:: Director of State & Performance Audit 360-902-0366, Chuck.Pfeil@sao.wa.gov

Lou Adams, CPA:: Deputy Director of Performance Audit

360-725-5577, Louella. Adams@sao.wa.gov

Melissa Wade :: Senior Performance Auditor 360-725-5579, Melissa.Wade@sao.wa.gov

Thomas Shapley:: Deputy Director of Communications

360-902-0367, Thomas. Shapley@sao.wa.gov

To request public records

Public Records Officer

360-725-5617, PublicRecords@sao.wa.gov

Executive Summary

Long-term care workers provide personal care services to elderly and disabled clients, helping them with eating, bathing, dressing and carrying out many activities of daily living. The term covers people who work for assisted living facilities, adult family homes or home care agencies, as well as Individual Providers who contract with the state to provide services to family members or to other people who live in their own homes. Although no firm figures of the long-term care workforce exist, the Department of Social and Health Services (DSHS) estimates there were about 60,000 workers in fiscal year 2013.

In 2011, Washington voters approved Initiative 1163 (I-1163), which expands background check and training requirements for these workers. It also requires them to obtain a home care aide certificate or hold another qualifying certification. Workers have up to 200 days from their date of hire to successfully pass the certification exam, or 260 days if they are non-English speakers. The goal: to ensure long-term care workers are qualified to provide services to vulnerable clients. Workers who do not meet the I-1163 requirements are prohibited from working with vulnerable clients. The Department of Health (DOH) and DSHS are responsible for administering the program.

The law requires that the State Auditor's Office conduct a performance audit every two years, but does not specify what must be audited. This, the second audit, examines whether the completion rate for home care aide certification has increased and identifies improvements DSHS and DOH have made to help more people complete the process. It also examines whether the state has sufficient monitoring processes in place to prevent uncertified people from working with clients in adult family home settings.

DSHS and DOH have already made several improvements that help more applicants obtain certification

Our previous audit examined the first four months of the certification program, January 7 through April 30, 2012, and found that only 29 percent of those who applied obtained a certificate. Acknowledging that the rate was unacceptably low, DSHS and DOH made several improvements, described briefly at right, to help applicants attain certification. These improvements have contributed to a higher completion rate even as many more people are applying for the credential. The number of applicants increased from 406 in early 2012 to 6,776 in 2013; and the percentage of applicants achieving certification has doubled, from 29 percent in early 2012 to 58 percent in 2013.

More work remains to be done

Many applicants dropped out of the program, and of those who became certified, only 59 percent were certified on time.

Despite the extension of the certification deadline in 2013, many applicants did not complete the process and did not obtain a home care aide certificate. Of those applicants who completed the process, 59 percent obtained their certificates within the specified deadline. Program managers told us they believe that the failure of workers to complete the certification has resulted in a higher turnover rate, which can affect continuity of care for clients.

A short list of process *improvements*

- DSHS and DOH added checklists of required steps, and hired employees to help guide workers through the application process.
- DSHS and DOH made training and exam materials available in multiple languages.
- The Legislature extended the timeline for obtaining a certificate from 150 to 200 days, with 60 additional days for non-English speakers.
- The state negotiated with the Service Employees International Union (SEIU) to make state funds available to assist union members with exam and application fees.

Program managers recognize that both completion rates and timeliness need to be improved, but point out that some factors are outside their control. For example, some people caring for a family member might decide not to pursue the 75 hours of required training needed to gain the certificate. Agency officials suggested that some workers leave the home care aide certificate program to pursue other types of certifications. For example, becoming a certified nursing assistant requires about 10 additional training hours but may lead to greater employment opportunities. Some people simply change their minds about working in the field, and others fail background checks. All these reasons affect home care aide certificate completion rates.

Program managers at DOH and DSHS are examining certification data, looking for potential barriers that might make completing the training and exams difficult. The agencies are creating a combined database that will allow them to identify trends and monitor progress. For example, they will look at exam passage rates by instructor, by language and by test site. The data will also allow them to conduct additional monitoring of Individual Providers, such as sending notices to those at risk of missing background check deadlines. The agencies expect to have the database operational by the end of November 2014. DSHS and DOH are also working together to streamline the process by creating a single certification application form.

Most workers meet I-1163 requirements, suggesting monitoring efforts are reasonable

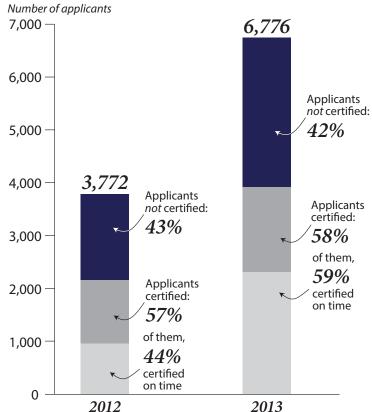
To analyze DSHS's monitoring efforts, we focused our audit on a review of adult family homes. These homes tend to be small businesses – they typically employ between two and six caregivers to serve a maximum of six clients. The modest size of the businesses suggests they may not have sufficient oversight mechanisms and the internal scrutiny necessary to monitor whether their employees are meeting the initiative's requirements.

DSHS inspectors determine whether workers meet certification requirements when they perform inspections of adult family homes. We reviewed a sample of 273 workers from 83 of the

state's 2,753 adult family homes for the month of September 2013. As the graphic shows, 1 percent required and obtained the home care aide certificate; 4 percent did not obtain the home care aide certification although required to do so.

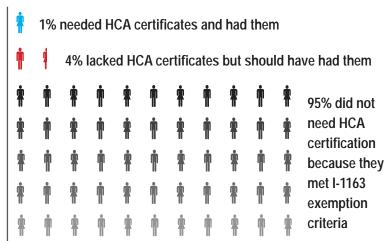
Completion rates for home care aide applicants

All 2012 compared to all 2013



Source: SAO analysis of Department of Health data.

From the 83 adult family homes we reviewed, we identified 273 workers and found...



Source: SAO analysis of data received from adult family homes.

About 95 percent of the workers in our sample did not need home care aide certification because they met other I-1163 criteria. When we project these results to the estimated population of 10,000 workers in adult family homes, we estimate there are about 340 workers who should have certificates but do not.

Based on our review of DSHS's processes, we found their monitoring efforts for adult family homes are reasonable given the size of the program and the number of workers. DSHS managers told us inspectors visit each home about every 12 to 18 months, reviewing many aspects of health, safety and management. Agency resources allow inspectors to review a limited number of workers - about 50 percent at each home per visit – to confirm that they meet I-1163 requirements. If inspectors identify issues with training or certification, they select additional workers for review. However, the inspection frequency cycle means they do not review workers who were employed and terminated between inspections. We found that most workers meet the requirements of I-1163 through means other than by obtaining the home care aide certification created in the initiative.

Recommendations

To ensure long-term care workers meet I-1163 requirements, we recommend:

• The Department of Health and the Department of Social and Health Services continue to work to identify barriers that are keeping workers from applying for, or not completing, the certification process.

We recommend the Department of Social and Health Services:

- Send a written notification to all adult family home providers reminding them of their responsibility to ensure their workers meet I-1163 requirements. The letter should also reiterate that the nursing assistantregistered certificate does not satisfy I-1163 requirements.
- Immediately follow-up on the one caregiver who is still employed as a long-term care worker and has not obtained the required certification.
- During the next inspection, review the qualifications of all caregivers in the homes that employed the other nine uncertified workers in September 2013.
- Follow-up with the adult family homes that did not respond to our audit request to ensure all their workers meet I-1163 requirements.

Initiative 1163 increased background, training and certification requirements for long-term care workers

Before the implementation of I-1163 on January 7, 2012, long-term care workers did not have to be certified in order to work with clients and were subject to only a state background check and fewer training requirements. Workers hired after that date who fail to meet the new requirements are prohibited from working with vulnerable clients. Exhibit 1 sets out the key requirements before and after I-1163 went into effect.

Exhibit 1: I-1163 made the following changes to long-term care worker requirements

Requirements prior to I-1163	New requirements
Pass a state background check before being hired	Pass a state background check before being hired and a federal background check within 120 days of hire
Complete 28 hours of training within 120 days of being hired	Complete 75 hours of training within 120 days of being hired
No exam requirements	Pass a written or oral exam and a skills assessment
No certification requirements	Become certified as a home care aide within 200 days of being hired (or within 260 days for those with limited English proficiency)
Complete 10 hours of continuing education annually	Complete 12 hours of continuing education annually

In fiscal year 2014, DOH spent about \$1.5 million and DSHS spent about \$12.8 million to administer and monitor the home care aide certification program. The agencies have invested time and resources in improvements to website-based information, forms and human resources in an effort to improve access to the home care aide program.

Audit objectives

The objectives of this performance audit were designed to assess whether DOH and DSHS are working to improve certification completion rates and ensure that uncertified workers do not work with clients. We designed this audit to answer the following questions:

- 1. Have certification completion rates among home care aide applicants improved since early 2012? If so, what factors contributed to the increase?
- 2. Does DSHS have sufficient controls in place to keep uncertified workers in adult family homes from working with clients?

Background

Long-term care services are provided by employees of licensed home care agencies, adult family homes, assisted living facilities and by Individual Providers. Workers employed by adult family homes and assisted living facilities care for clients living in those facilities. Home care agency workers provide care for clients in their own homes. Individual Providers contract directly with DSHS to provide care to Medicaid-eligible elderly and disabled people in their own homes; Appendix B has more information on the care providers who employ long-term care workers.

Certain categories of workers are exempt from the requirements of I-1163:

- People who worked in a long-term care setting between January 1, 2011, and January 6, 2012, and completed all training requirements at that time
- People caring for their biological, step or adoptive child or parent
- Those working for a community residential service business (exempt until 2016)
- People who are a Registered Nurse, Licensed Practical Nurse, Advanced Registered Nurse Practitioner or Nursing Assistant-Certified, or are in the process of becoming Nursing Assistant-Certified within the required timeline

Notably, the Nursing Assistant-Registered certification does not satisfy I-1163 requirements.

The law requires all other long-term care workers complete five hours of orientation and safety training before providing paid personal care. While working, the new caregiver has 120 days to complete a further 70 hours of basic training. Workers have up to 200 days from their date of hire to successfully pass the certification exam. Applicants with limited proficiency in English can qualify for a provisional home care aide certificate that allows them an additional 60 days to complete the exam.

Applicants must pass a Washington state background check before they can begin working, and then are allowed to work for up to 120 days while the required federal fingerprint-based background check is processed. Workers must pass a state background check every two years.

All Individual Providers, and certain home care agency employees, are members of the Service Employees International Union (SEIU) Healthcare 775 NW. The state enters into an agreement with SEIU, renewed every other year, that covers the terms and conditions of their employment.

The first line of responsibility for ensuring only properly certified caregivers work directly with clients is the caregiver's employer. This is the case whatever the size of the business, from large home care agencies with a human resources department to a small, family-run business caring for six people in an adult family home setting.

Responsibility for the certification program is shared

Several entities are responsible for different aspects of the home care aide certification program.

- DSHS has the main responsibility for administering the program. It performs most background checks and approves the training curriculum and community instructors. It monitors Individual Providers, publicly funded home care agencies, assisted living facilities and adult family homes to ensure their workers meet I-1163 requirements. This responsibility is described in more detail below.
- DOH verifies applicants meet their training requirements and issues the home care aide certificate. It maintains the licensure database that tracks applicants' progress through the process. DOH contracts with Prometric, an independent testing company, to administer and grade the certification exams. For applicants who do not fall under the definition of a long-term care worker, DOH performs the state background checks and also checks them in a national database containing state licensure and certification actions taken against health care practitioners. In addition, DOH monitors private home care agencies to ensure their employees comply with requirements.
- The Training Partnership is a nonprofit school formed by SEIU Healthcare 775 NW and participating employers, including the State of Washington, to train long-term care workers that are members of the union.

DSHS monitoring responsibilities include inspections of adult family homes

The DSHS division of Residential Care Services (RCS) is charged with promoting and protecting the rights, security and well-being of individuals living in residential settings. It has policies and procedures to guide monitoring, which is done as part of the adult family home inspection process, and it conducts unannounced inspections of adult family homes about every 12 to 18 months.

During these inspections, RCS inspectors review a variety of issues, including whether residents are safe, the home meets standards and staff are qualified. They examine background check results for all employees. They also examine an average of two employee files per home, to verify the worker has met the training requirements and has either a home care aide certificate or is exempt from certification.

RCS is also responsible for taking enforcement action against adult family homes. According to RCS policy, when inspectors find a worker that fails to obtain a certification within the statutory deadline, they will issue a citation to the adult family home owner. They will also recommend enforcement action if negative or potentially negative problems are linked to the failure to obtain the training or certification. Enforcement action can range from a consultation to license revocation.

See Appendix C for a chart showing the oversight responsibilities for ensuring I-1163 requirements are met.

Audit Scope and Methodology

We used three different approaches to address the audit objectives:

To calculate completion rates - We analyzed certification data from the Department of Health for calendar years 2012 and 2013 to determine if the completion rates had increased since the first audit. We eliminated applicants who were exempt from the requirements from the total. We calculated the overall completion rate as a percentage of applicants who had been issued a certificate. We also compared the certification date with the applicants' date of hire to determine if they had met the timeline requirements. Our analysis included 3,772 applicants from 2012 and 6,776 applicants from 2013.

To identify factors affecting completion rates - We identified specific improvements the state has made since the program began in early 2012 intended to help increase the completion rates. We also identified other improvements currently underway to increase completion rates. To do this, we interviewed management at DSHS and DOH, stakeholders and providers and reviewed supporting documentation.

To assess controls – We reviewed RCS's policies and procedures and inspection records to determine if they are following policies. We limited our scope to adult family homes because we identified them as one of the areas at risk for not having certified workers. Within our review of adult family homes, we focused our review on workers who require a home care aide certification. We did not determine if exempt workers had met other legal requirements.

To test controls we selected a random sample of 100 adult family homes in the state. We requested payroll records and certification information for all of their workers providing personal care services during September 2013 to determine whether workers were meeting I-1163 requirements. There were 299 caregivers working in the sample of adult family homes in September 2013. However, we excluded from our analysis the 26 caregivers that had not reached their certification deadline.

We had an 83 percent response rate, and we compared the information we received to RCS's inspection records and found no evidence of non-response bias. We confirmed whether each worker had a home care aide certificate or other exempting certification by reviewing DOH data. We also reviewed Employment Security Department employment data to determine if workers were working in long-term care in 2011 and were therefore exempt. Since the number of workers in adult family homes is unknown, we developed an estimate by multiplying the average number of workers in the homes by the total number of homes in the state. We projected our results to the estimated population of adult family home workers at the 95 percent confidence level with a precision range of \pm 2.2 percent.

We also reviewed inspection reports that were done in the months including and near to September 2013 to determine:

- If the inspectors also cited workers we found to be working improperly,
- The average number of workers inspectors review, and
- The non-response bias in the information we received from the adult family homes.

Audit performed to standards

We conducted this performance audit under the authority of state law (RCW 43.09.470), approved as Initiative 900 by Washington voters in 2005, and in accordance with Generally Accepted Government Auditing Standards (December 2011 revision) issued by the U.S. Government Accountability Office. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. See Appendix A, which addresses the I-900 areas covered in the audit.

Next steps

Our performance audits of state programs and services are reviewed by the Joint Legislative Audit and Review Committee (JLARC) and/or by other legislative committees whose members wish to consider findings and recommendations on specific topics. Representatives of the State Auditor's Office will review this audit with JLARC's Initiative 900 Subcommittee in Olympia. The public will have the opportunity to comment at this hearing. Please check the JLARC website for the exact date, time, and location (www.leg.wa.gov/JLARC). The State Auditor's Office conducts periodic follow-up evaluations to assess the status of recommendations and may conduct follow-up audits at its discretion.

Question 1: Have certification rates among home care aide applicants improved since early 2012? If so, what factors contributed to the change?

Completion rates and timeliness have increased even as the number of applicants has increased dramatically. Several improvements have helped increase completion rates, but more will need to be done if home care aide certifications are to rise.

Several improvements have been made to the program since early 2012

Our first audit, examining the first four months of the program, found that only 29 percent of the applicants obtained a certificate. Acknowledging the rate was unacceptably low, DSHS and DOH formed an Executive Workgroup in mid-2012 to identify barriers that hindered applicants as they attempted to meet the I-1163 requirements. The workgroup included representatives from DOH, DSHS, the Training Partnership, Prometric (the program's test vendor) and other stakeholders. Below is a list of the major changes made in the way the program is administered.

Helping guide applicants through the process. In late 2012, DOH hired a coordinator to help people understand the certification process. In September 2013, the Training Partnership employed five Navigators to help union members in Snohomish, King and Pierce counties through the training and certification process by answering questions and providing encouragement and support. The agencies and stakeholders also created a checklist that walks applicants through the steps and timelines. The checklist – in 13 languages – is available on the DSHS website.

Expanding access to the training materials and exam. The population of long-term care workers is as diverse as the communities they serve, and includes many people whose primary language is not English. Prometric increased the number of languages the exam is offered in from six to 13. Some training materials are available in 13 languages. DSHS posted a list of training programs on its website so applicants can find a program in their area, while Prometric increased the number of testing sites across the state.

Allowing more time to obtain the certificate. The agencies found workers were struggling to meet the 150-day timeline to complete the certification process. To help them, the agencies worked with the 2013 Legislature to extend the time to complete the process from 150 to 200 days for anyone hired as of March 1, 2013. The legislation also added a provisional certification, available through 2016, for people with limited English language skills and learning disabled applicants. These applicants have 260 days from the date of hire to complete the requirements.

Helping union workers with application, training and exam costs. The state, through its 2013-2015 bargaining agreement with the SEIU, set up a certification fund to fully cover the application and exam costs for union workers. In September 2013, DSHS worked with the Training Partnership to allow union members to complete training at no additional cost if they did not complete the required training within 120 days. Previously, applicants had to pay the extra costs if they did not complete their training within the required timeline.

Home care aide certification checklists and testing are available in...

Arabic :: Cambodian :: Chinese English :: Korean :: Laotian Russian :: Samoan :: Somali Spanish :: Tagalog :: Ukrainian Vietnamese

Completion rates have increased —as have the number of applicants

The number of applicants has increased dramatically since the program began. Our first audit, addressing the first four months of the program, found that only 406 workers had applied for the certificate in early 2012. As Exhibit 2 shows, by the end of 2012, that number increased to 3,772. The number of applicants doubled in 2013 to 6,776.

Completion rates have risen since the program began. Our first audit found only 29 percent of applicants completed the process. However, as illustrated in Exhibit 2, completion rates rose sharply during the rest of 2012 and then remained steady through 2013. The rate at which applicants completed the requirements on time increased from 44 percent in 2012 to 59 percent in 2013.

However, additional improvements are needed to increase both the timely completion rate and the overall rate

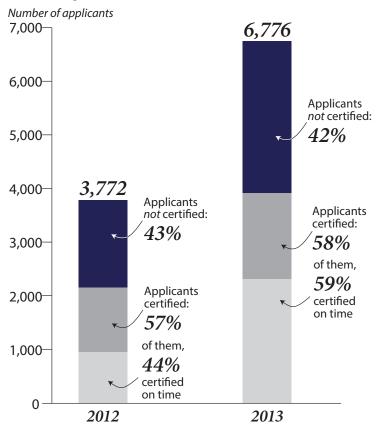
Although the rate of certifications completed on time rose in 2013, Exhibit 2 also shows that only 59% of the certified applicants met the required timeframe, even though most had an extended deadline. Workers who do not meet the I-1163 requirements in a timely manner are prohibited from working with vulnerable clients.

More than 2,800 people – 42 percent of applicants – did not attain a certificate at all.

Program managers are working to improve timeliness and completion rates. They believe that failure to complete the certification process has resulted in higher turnover in the workforce, which can affect continuity of care for clients, Managers point out there are factors outside the state's control that can affect the rate. For example, some people caring for a family member might decide not to pursue the 75 hours of required training needed to gain the certificate.

Agency officials suggested that some workers leave the home care aide certificate program to pursue other types of certifications. For example, becoming a certified nursing assistant, officially referred to as a Nursing Assistant-Certified, requires about 10 additional training hours but may lead to greater employment opportunities. Some people simply change their minds about working in the field, and some fail background checks. All these reasons affect home care aide certificate completion rates.

Exhibit 2: Completion rates for home care aide applicants All 2012 compared to all 2013



Source: SAO analysis of Department of Health data.

The Executive Workgroup continues to seek ways to help applicants gain certification

More focus on helping applicants with limited English proficiency. In 2013, Prometric produced a report examining test results for the six languages offered at the time. As Exhibit 3 shows, 83 percent of English speakers pass the exam. The rate is much lower for non-English-speaking workers, with a pass-rate ranging from 25 percent to 60 percent depending on the language.

Exhibit 3: Prometric 2013 Report – Written/knowledge exam passing rates by language

Language	Exams taken	Pass rate
English	5,537	83%
Russian	316	60%
Korean	172	52%
Chinese	94	44%
Spanish	156	31%
Vietnamese	129	25%

Source: Prometric November 6, 2013 presentation "Washington State Department of Health Home Care Aide Competency Evaluation Program."

In response to this, DSHS and the Training Partnership are looking at ways to better identify applicants who struggle to take written exams due to literacy or learning disability issues. In August 2014, DOH and Prometric began piloting the use of an interpreter during the written and skills exam for those applicants whose preferred language is not among the current 13 options. DOH and Prometric are continuing to evaluate 11 foreign-language versions of the exam to ensure the accuracy and integrity of the exam for these applicants.

Sharing data to identify trends and monitor progress. Responsibility for training, testing and certification is shared by multiple entities, including DSHS, DOH and the Training Partnership. DSHS officials said they found this structure made it difficult for them to monitor progress, take enforcement action and assess the quality of the training materials. DSHS worked with the other entities to develop the Long-Term Care Workers Training and Certification Reporting Project, a database which will allow them to identify points in the process where applicants tend to stall, become confused or leave the program. For example, they are examining trends on exam passage by instructor, by language and by test site, and will look at the number of times applicants attempted but did not pass the exam.

The agency will also use the data to monitor the progress made toward certification by Individual Providers and some home care agency employees. Using the database, staff can produce a report of all the applicants who have missed a deadline, alerting DSHS that it must take enforcement action when they do not meet requirements. This includes contacting those that are in jeopardy of missing a background check deadline, or contacting those that have missed the deadline for training and certification requirements. DSHS plans to have this database fully functioning by the end of November 2014.

Streamlining the application. DSHS and DOH are working together to streamline the certification process by creating one universal application form. DOH has added this as one of their strategic plan goals and plans to have it complete by December 31, 2015.

Question 2: Does DSHS have sufficient controls in place to keep uncertified employees in adult family homes from working with clients?

While primary responsibility for ensuring workers meet the requirements of I-1163 lies with the home care providers, both DSHS and DOH have important oversight roles. To assess whether DSHS's controls, implemented by the Residential Care Services (RCS) division, are sufficient to prevent uncertified workers from serving clients, we focused our review on adult family homes.

We found most workers meet I-1163 requirements and that monitoring is reasonable

In September 2013, the month of our review, more than 2,700 adult family homes were licensed for operation in Washington, employing an estimated 10,000 workers. These homes tend to be small businesses – they typically employ between two and six caregivers to serve between two and six clients. We asked a sample of 100 adult family homes to give us payroll and certification information for caregivers who worked for them in September 2013. The 83 homes that responded to our request employed 299 caregivers. However, 26 people were still within the 200-day certification period, and were not included in our analysis.

Most of the 273 workers (95 percent) met I-1163 requirements without obtaining a home care aide certificate: they either met requirements in place before the law came into effect or held another type of certification. For those who were not exempt, three obtained the home care aide certificate. The remaining 10 workers were not certified during the time of our review. The breakdown of how workers met I-1163 requirements is shown in Exhibit 4.

Exhibit 4 – Most adult family home workers meet I-1163 requirements

Description	Number of workers	Percentage
Met requirements due to another reason acceptable under I-1163, such as having another certification	260	95%
Met requirements because obtained home care aide certificate	3	1%
Did not obtain home care aide certificate	10	4%
Total	273	100%

Source: SAO analysis of data provided by adult family homes.

We used a statistical sampling method to estimate the total number of workers in adult family homes that potentially did not meet I-1163 requirements. Assuming a population of 10,000 workers, our best estimate is 340 people (3 percent) are working without a certificate. But the precision of our projection is affected by the uncertainty around the total population of workers. The potential number of uncertified workers ranges from 123 to 557.

RCS inspections of adult family homes are conducted:

- Unannounced
- · About every 12 to 18 months
- · To ensure residents are safe
- To ensure the home meets standards
- To ensure all employees have current background checks
- · To review a judgmental sample of employee files to verify the worker has met the training requirements and has either a home care aide certificate or is exempt

Monitoring of adult family homes is reasonable given program capacity

It is difficult to say with certainty why the 10 caregivers were allowed to work without a certification or exemption. The ultimate responsibility for ensuring they employ eligible workers lies with the provider.

Inspectors review a limited number of workers at each home per visit to confirm that they meet I-1163 requirements. If inspectors identify issues with training or certification, they select additional workers for review. According to RCS managers, they do not have the resources to allow them to monitor all employees in adult family homes or to do more frequent inspections. In addition, RCS managers said that the inspection frequency cycle means they do not review workers who were employed and terminated between inspections unless a complaint investigation was conducted on the issue between inspections.

We examined the RCS inspection reports closest to the one-month snapshot of our review, which were conducted between July 2012 and July 2014. We found that only two workers of the 10 we found who lacked needed certification were employed by the same homes at the time of the inspection and during September 2013, the time of our review. Both were not chosen for review during the inspection so were not identified as needing the home care aide certificate.

RCS staff told us they periodically send letters to all adult family home providers that describe changes in law or other issues that would affect their businesses. Since eight of the 10 uncertified workers that we identified had nursing assistantregistered certificates, which is not accepted as a substitute for the home care aide certification, this may indicate that some providers are confused about the requirements. Sending a similar written notification reminding them of their responsibility to ensure their workers meet I-1163 requirements, including how requirements can be met, might help improve awareness of the law and compliance with it.

We did not evaluate whether the I-1163 requirements have improved the quality of care or client safety. As a result, we are unable to conclude on whether having uncertified workers in adult family homes is causing any problems. Given their current staffing level, RCS management told us that they do not believe a 3 percent exception rate presents a serious problem, given that the vast majority of workers meet I-1163 requirements. However, they also said they take it very seriously when they find an unqualified caregiver. We found that only one of the 10 uncertified workers was still working in long-term care. We referred the names of these 10 workers to DSHS to investigate. The agency reports that it is following up on them, as well as on the homes that did not respond to our audit request.

Recommendations

To ensure long-term care workers meet I-1163 requirements, we recommend the following:

• The Department of Health and the Department of Social and Health Services continue to work to identify barriers that are keeping workers from applying for, or not completing, the certification process.

We recommend the Department of Social and Health Services:

- Send a written notification to all adult family home providers reminding them of their responsibility to ensure their workers meet I-1163 requirements. The letter should also reiterate that the nursing assistantregistered does not satisfy I-1163 requirements.
- Immediately follow-up on the one caregiver who is still employed as a long-term care worker and has not obtained the required certification.
- During the next inspection, review the qualifications of all caregivers in the homes that employed the other nine uncertified workers in September 2013.
- Follow-up with the adult family homes that did not respond to our audit request to ensure all their workers meet I-1163 requirements.



STATE OF WASHINGTON OFFICE OF FINANCIAL MANAGEMENT

Insurance Building, PO Box 43113 • Olympia, Washington 98504-3113 • (360) 902-0555

December 17, 2014

The Honorable Troy Kelley Washington State Auditor P.O. Box 40021 Olympia, WA 98504-0021

Dear Auditor Kelley:

Thank you for the opportunity to review and respond to the State Auditor's Office (SAO) performance audit report, "Initiative 1163: Long-Term Care Worker Certification Requirements." To provide this consolidated response, the Office of Financial Management worked with the Department of Health (DOH) and the Department of Social and Health Services (DSHS).

We appreciate that the report recognizes the significant efforts undertaken to fully implement the program since its inception in January 2012. We thank the auditors for their time and effort to learn and document the steps DOH and DSHS have taken to increase the certification rates among home care aide applicants since the SAO's last audit. We believe our actions have had positive results.

While significant improvements have been made, the need for qualified long-term care workers exceeds the number of certificate holders. We will continue to monitor completion rates and are working to identify relevant, appropriate benchmarks against which to measure those rates. We also will continue to work together and with other interested parties to identify and reduce barriers to certification.

Sincerely,

David Schumacher, Director

Office of Financial Management

Kevin W. Quigley, Secretary Department of Social & Health Services

John Wiesman, DrPH, MPH Secretary of Health

cc: Joby Shimomura, Chief of Staff, Office of the Governor

Kelly Wicker, Deputy Chief of Staff, Office of the Governor

Miguel Pérez-Gibson, Executive Director of Legislative Affairs, Office of the Governor

Matt Steuerwalt, Director, Executive Policy Office

Tracy Guerin, Deputy Director, Office of Financial Management

Wendy Korthuis-Smith, Director, Results Washington, Office of the Governor

Tammy Firkins, Performance Audit Liaison, Results Washington, Office of the Governor

OFFICIAL STATE CABINET AGENCY RESPONSE TO THE PERFORMANCE AUDIT ON INITIATIVE 1163: LONG-TERM CARE WORKER CERTIFICATION REQUIREMENTS - DECEMBER 17, 2014

This coordinated management response to the State Auditor's Office (SAO) performance audit report received on December 1, 2014, is provided by the Office of Financial Management, Department of Health (DOH), and Department of Social and Health Services (DSHS).

SAO Performance Audit Objectives:

The SAO objectives were designed to assess whether DOH and DSHS are working to improve certification completion rates and ensure that uncertified workers do not work with clients. The audit was designed to answer these questions:

- 1. Have certification completion rates among home care aide applicants improved since early 2012? If so, what factors contributed to the increase?
- 2. Does DSHS have sufficient controls in place to keep uncertified workers in adult family homes from working with clients?
- **SAO Finding 1:** Several certification improvements have been made to the program since early 2012. Completion rates have increased — as have the number of applicants. However, additional improvements are needed to increase both the timely completion rate and the overall rate. The Executive Workgroup continues to seek ways to help applicants gain certification.
- **SAO Finding 2:** We found most workers meet I-1163 requirements and that monitoring is reasonable given program capacity.

SAO Recommendation 1: To ensure long-term care workers meet I-1163 requirements, we recommend the following:

The Department of Health and the Department of Social and Health Services (should) continue to work to identify barriers that are keeping workers from applying for, or not completing, the certification process.

STATE RESPONSE:

The agencies, which have long recognized the need for qualified long-term caregivers, agree with the recommendation and will continue to work together closely and with other interested parties to identify and reduce barriers to certification.

Action Steps and Time Frame

The agencies will continue to work together and with other interested parties. *Ongoing*.

SAO Recommendation 2: We recommend the Department of Social and Health Services send written notification to all adult family home providers reminding them of their responsibility to ensure their workers meet I-1163 requirements. The letter should also reiterate that the nursing assistant registered certification does not satisfy I-1163 requirements.

STATE RESPONSE:

DSHS concurs with the State Auditor's Office audit finding that most workers meet the I-1163 requirements. DSHS has taken numerous actions to educate DSHS staff and remind providers of the I-1163 requirements. These include:

- Sending out a management bulletin in September 2014 to DSHS staff with training grids outlining the long-term care training and home care aide certification requirements. The grids were designed as a tool to assist Residential Care Services (RCS) field staff to make compliance determinations during licensing inspections and complaint investigations.
- Sending out management bulletins and provider letters in March and May of 2013 informing both providers and staff about the I-1163 requirements.

Action Steps and Time Frame

DSHS has drafted a letter to adult family homes reminding them of the training and certification requirements. The letter includes a reminder that the nursing assistant-registered certification does not meet the exemption requirements. This letter is in its final stage of review and is expected to be sent out to all adult family home providers by December 31, 2014.

SAO Recommendations 3-5: We recommend the Department of Social and Health Services:

- Immediately follow-up on the one caregiver who is still employed as a long-term care worker and has not obtained the required certification.
- During the next inspection, review the qualifications of all caregivers in the homes that employed the other nine uncertified workers in September 2013.
- Follow-up with the adult family homes that did not respond to our audit request to ensure all their workers meet I-1163 requirements.

STATE RESPONSE:

DSHS concurs with the State Auditor's Office that the first line of responsibility for ensuring that only properly certified caregivers work directly with clients is the caregiver's employer.

DSHS takes it very seriously when it learns of an unqualified caregiver. When inspectors find a worker who fails to obtain a certification within the statutory deadline, DSHS issues a citation to the provider. If negative or potentially negative problems are linked to the failure to obtain the training or certification, inspectors recommend enforcement actions.

Action Steps and Time Frame

- DSHS immediately called the complaint resolution unit hotline with the information on the one caregiver who had not obtained the required certification. DSHS sent an investigator to the adult family home and found that while the caregiver completed certified nursing assistant training, the caregiver did not have documentation verifying caregiver mental health or dementia training. The provider was cited and the caregiver was terminated. *Completed*.
- DSHS has called the complaint resolution unit hotline with the information on the other nine uncertified workers, and investigators will be sent to the home before the next inspection. If investigations find that the training and certification requirements are not met, DSHS will cite the providers and then follow up to ensure compliance. *Completed*.
- DSHS is following up with adult family homes that did not respond to the audit request. DSHS will investigate the reason for the lack of response and validate to ensure that long-term care training and certification requirements were met for staff in the home. Completed by March 2015.

Appendix A: Initiative 900

Initiative 900, approved by Washington voters in 2005 and enacted into state law in 2006, authorized the State Auditor's Office to conduct independent, comprehensive performance audits of state and local governments.

Specifically, the law directs the Auditor's Office to "review and analyze the economy, efficiency, and effectiveness of the policies, management, fiscal affairs, and operations of state and local governments, agencies, programs, and accounts." Performance audits are to be conducted according to U.S. General Accountability Office government auditing standards.

In addition, the law identifies nine elements that are to be considered within the scope of each performance audit. The State Auditor's Office evaluates the relevance of all nine elements to each audit. The table below indicates which elements are addressed in the audit. Specific issues are discussed in the Audit Results and Recommendations section of this report.

I-9	00 element	Addressed in the audit
1.	Identification of cost savings	No. The audit did not address cost savings for the state.
2.	Identification of services that can be reduced or eliminated	No. The audit focused on the agencies meeting the requirements of Initiative 1163's. It did not evaluate services provided.
3.	Identification of programs or services that can be transferred to the private sector	No. The audit focused on the responsibilities of DOH and DSHS as mandated by law.
4.	Analysis of gaps or overlaps in programs or services and recommendations to correct gaps or overlaps	Yes. The audit examined DSHS's controls for monitoring long-term care workers and makes recommendations to strengthen their processes.
5.	Feasibility of pooling information technology systems within the department	No. Two systems used by the agencies involved in the audit serve two different functions that are unrelated. No analysis was done to pool these systems.
6.	Analysis of the roles and functions of the department, and recommendations to change or eliminate departmental roles or functions	Yes. The audit examined the improvements to the process that were made by both agencies, as well as DSHS's process for monitoring adult family homes.
7.	Recommendations for statutory or regulatory changes that may be necessary for the department to properly carry out its functions	No. The audit report does not contain recommendations for statuatory or regulatory changes.
8.	Analysis of departmental performance, data performance measures, and self-assessment systems	No. The audit did not analyze the performance of either agency.
9.	Identification of best practices	No. The audit report did not examine best practices.

Appendix B: Providers Who Employ Long-Term Care Workers

Long-term care workers serve clients in a variety of employment settings, and they typically work for a provider who can directly contract with the state to provide services to specific clients. The following types of long-term care providers, and their employed caregivers, are subject to the requirements of I-1163.

- Home Care Agencies: These businesses employ caregivers that provide care to clients in the clients' own homes. Home care agencies are licensed by the Department of Health (DOH), and enforcement depends on whether or not the home care agency has a Medicaid contract:
 - agencies with a Medicaid contract are regulated by the Department of Social and Health Services (DSHS) and a local Area Agency on Aging
 - agencies without a Medicaid contract are regulated by DOH

DOH keeps an active list of all home care agencies, but neither DOH nor DSHS actively tracks the number of home care agency workers.

- **Adult Family Homes:** In this provider type, long-term care recipients live in a home with other clients rather than in their own homes. Adult family homes provide housing-related services to their clients, such as food and laundry services, as well as long-term care. An adult family home provider is licensed by DSHS, and DSHS inspects homes as described in the body of this report; the provider employs caregivers as needed. An adult family home can be licensed to serve up to six residents, and can serve a mix of Medicaid- and privately-funded clients. These businesses are typically located in single-family residences that have been properly configured to serve the needs of their clients. DSHS keeps an active list of all adult family homes, but it does not actively track the number of workers employed in them.
- **Assisted Living Facilities:** These providers, formerly known as boarding homes, are similar to adult family homes in two ways: their clients live within the facility and they are monitored by DSHS. However, assisted living facilities are licensed to serve at least seven clients, and they can sometimes serve more than one hundred residents. In general, these facilities rarely operate in converted single-family residences. Assisted living facilities also employ long-term caregivers as needed, and can serve a mixture of Medicaid- and privately-funded clients. As with adult family homes, DSHS keeps an active list of all assisted living facilities, but does not actively track the number of workers in them.
- **Individual Providers:** Rather than a business that hires others as caregivers, Individual Providers care directly for clients in the clients' own homes, and they contract directly with DSHS to provide those services. DSHS maintains a comprehensive list of all Individual Providers who directly contract with the state to provide long-term care services.

Appendix C: I-1163 Oversight Diagram

The chart below shows the involved agencies and their roles in monitoring long-term care workers to ensure they meet I-1163 requirements.

