

# HOUSE BILL REPORT

## HB 1872

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**As Reported by House Committee On:**  
College & Workforce Development

**Title:** An act relating to establishing the care worker center to promote caregiving professions.

**Brief Description:** Establishing the care worker center to promote caregiving professions.

**Sponsors:** Representatives Senn, Slatter, Berry, Leavitt, Santos, Sells, Simmons, Bronoske, Shewmake, Taylor, Chopp, Ramel, Callan, Riccelli, Lekanoff, Bateman, Macri, Harris-Talley, Valdez, Duerr and Pollet.

**Brief History:**

**Committee Activity:**

College & Workforce Development: 1/19/22, 1/26/22 [DPS].

**Brief Summary of Substitute Bill**

- Establishes the Care Worker Center under the authority of the Workforce Training and Education Coordinating Board.

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### HOUSE COMMITTEE ON COLLEGE & WORKFORCE DEVELOPMENT

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 7 members: Representatives Slatter, Chair; Entenman, Vice Chair; Leavitt, Vice Chair; Hansen, Paul, Pollet and Sells.

**Minority Report:** Do not pass. Signed by 4 members: Representatives Chambers, Ranking Minority Member; Jacobsen, Assistant Ranking Minority Member; Kraft and Sutherland.

**Staff:** Megan Mulvihill (786-7304).

**Background:**

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*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.*

There are various types of care workers who provide individual care to clients or client family members in their homes, daycare centers, institutions, and other settings. Care workers include for example, child care providers, long-term care workers, and personal care attendants. Long-term care workers provide paid, personal care assistance to individuals with developmental disabilities or other long-term care needs. Long-term care workers include individual providers of home care services. There are also paid caregivers in adult family homes and assisted living facilities who care for residents with special needs, such as dementia, developmental disabilities, or mental illness.

The Workforce Training and Education Coordinating Board (Workforce Board) staffs a task force, called the Health Workforce Council (Council), that is charged with creating a statewide plan to address healthcare workforce shortages. The Council provides updates to policymakers on health workforce supply and demand, tracks progress on implementation of new programs, and brings key stakeholders together to develop and advocate for sustainable solutions.

In its 2018 annual report, the Council recommended that the Workforce Board and the Council convene stakeholders to research career pathways, review available workforce data, and develop a policy framework for a "care worker career lattice" to address the retention and advancement of frontline entry-level and mid-level care workers.

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### **Summary of Substitute Bill:**

The Workforce Board must establish the Care Worker Center as a central access point of knowledge, research, resources, and best practices for care workers, employers, career counselors, education and training providers, policymakers, and others. Initially, the Care Worker Center must focus on three caregiving professions: child care and early learning, long-term care, and caregivers working with people with disabilities including personal care attendants and direct service professionals. During the first two years, the Workforce Board must set up the Care Worker Center with staff, conduct an introductory marketing campaign, and work with relevant stakeholders to fulfill the duties of the Care Worker Center, which are as follows:

- review labor force data on wages, benefits, health and safety, educational output, staffing needs, and current and expected workforce shortages;
- perform research and analysis on trends within Washington to provide an accurate depiction of the caregiving workforce;
- conduct surveys to better understand the reasons care workers remain and leave the occupation and make recommendations for increasing retention;
- maintain a searchable repository of original and existing research, track policy recommendations from other entities engaged in similar work, and periodically disseminate findings and recommendations;
- establish an online resource center linking care workers to information about free and low-cost services or other resources to support the well-being of care workers and

- their families;
- create and launch a marketing campaign to promote and help recruit people to the caregiving field with resources that can be used by a variety of entities, and the materials must be made available in the top five most common languages spoken in Washington;
- establish and provide online resources that visualize career ladders and necessary education and training, discuss employer types and relevant union information, link to job search assistance, and highlight free or low-cost resources;
- identify similarities and differences across care worker occupations, including commonalities across licensing requirements to facilitate worker mobility within and between care worker professions;
- map care worker skill sets, competencies, abilities, and experiences to job progression opportunities and identify areas where additional occupational licensing categories or education and training credentials are needed; and
- administer a transformation grant pilot program to promote new care practice methods and ideas to transform the care worker sector, develop metrics and reporting mechanisms to collect data and track progress, and disseminate results.

The Workforce Board must develop policy recommendations that include:

- maintaining, supporting, and increasing diversity, equity, and inclusion in the care worker fields, which may include additional language supports, evidence-based practices in cultural competency, collecting demographic data, and exploring opportunities for career progression;
- increasing recruitment and retention, which may include additional methods and pathways to recruit employees and recommendations for workplace culture and safety, compensation, and benefits; and
- increasing flexibility and affordability of education and training, experience and educational equivalencies, licensing, and credentialing for care workers.

The Workforce Board must report to the Legislature by September 1 of the first year of each biennium, beginning with September 1, 2022, on three things: (1) the progress of meeting the goals of the Care Worker Center; (2) the results of the transformation grant pilot program; and (3) policy and practice recommendations based on the research and data collected.

### **Substitute Bill Compared to Original Bill:**

The substitute bill makes a variety of language changes, including removing duplicate language and further explaining the duties of the Workforce Board. The contents were also reordered. The requirement that the Care Worker Center be an online central portal is removed and instead is referred to as a central access point. The requirement that the Workforce Board create and launch a marketing campaign to promote and recruit people into the care worker fields is added, along with the requirement that the materials be made available in the five most commonly spoken languages in Washington. The Workforce

Board is required to also review data on wages, benefits, health and safety, educational output, staffing needs, and current and expected workforce shortages. Also, the online resources that are provided through the Care Worker Center need to include visuals of potential career ladders and necessary education and training. The Workforce Board is also required to collect data on the transformation grant pilot program and to disseminate the results. The policy recommendations that the Workforce Board must develop are explained in greater detail, adding that additional items may be addressed, such as collecting additional demographic data and addressing wages and benefits.

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**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date of Substitute Bill:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) There are desperate employment shortages in key areas: long-term care, child care, and direct services to people with disabilities. These three professions really make up a sector of caregiving that is critical, but not often thought of jointly. The Care Worker Center will help recruit people into the pipeline, to get education and training, and to serve as care workers. This will help care workers feel supported and have mobility to progress and switch roles. The vision is an online portal with the Workforce Board as administrators who will be doing the research, data collection, and trying to better understand why people are in the field. It will provide a place for care workers to find resources and to ask questions.

There are lot of people who are not receiving services because there are not enough care workers. There are overworked staff, people who are neglected, and unnecessary medical problems because of lack of staff. The turnover rate has been around 50 percent, and it is incredibly hard to recruit staff with the intense work and low wages. The training programs should follow best practices and be reviewed periodically for accuracy. It would be great to build upon current programs.

(Opposed) None.

(Other) Caregiving sectors are some of the fastest growing, and the intent is appreciated. However, this sector hinges on compensation improvements to better compete with different sectors of the economy. There are concerns about duplication of efforts and some of the language could be refined. Initiatives and current programs already in place should be used and invested in. There are many experts from each sector that should be included, and specific stakeholders should be called out.

Washington may be short about half a million licensed child care slots. Across the country, 80 percent of child care providers report that they cannot serve at capacity because of lack of providers. There are concerns around the accessibility of an online portal. Internet access is already inequitable, and there are language barriers. Child care providers already have to navigate multiple online portals and experience has shown that there needs to be robust technological support to teach folks how to navigate those. Every family with a caregiver knows that they will have to train the caregiver themselves because many basic safety and health requirements are missing from training. These should be addressed.

There needs to be recognition of the low wages, which contribute to turnover and makes recruiting hard. People need to be able to envision a long-term career in which they can support a family on one wage. Someone who goes to the Developmental Disabilities Administration has to wait a month to get through the paperwork for approval whereas they can make the same amount of money at a fast food restaurant immediately. Child care workers are in the third percentile of all occupational wages. For child care, there was movement on wages with the state subsidy rates, but this only reaches providers accepting subsidy children.

The language for people working with disabilities is a little unusual. Direct support professionals is what they are typically called.

Care is provided behind the doors of facilities and in homes. The pandemic has highlighted the invisible crisis. To transform these sectors, the solutions must be multifaceted, interdisciplinary, and informed by the care worker community. This proposal aligns with the Governor's budget for long-term care. The intention is appreciated, but want to make sure it reaches folks and that the state keeps working on compensation.

**Persons Testifying:** (In support) Representative Tana Senn, prime sponsor; Anna Nikolaeva, State Board for Community and Technical Colleges; Noah Seidel, Office of Developmental Disabilities Ombuds; Melissa Johnson, Community Residential Services Association; and Darla Helt, Parents Empowered and Communities Enhanced.

(Other) Madeleine Foutch, Service Employees International Union 775; Erin Haick; Diana Stadden, The Arc of Washington State; Adrienne Stuart, Washington State Developmental Disabilities Council; Ryan Pricco, Child Care Aware of Washington; and Eleni Papadakis, Workforce Training and Education Coordinating Board.

**Persons Signed In To Testify But Not Testifying:** None.