What can the **Home Health Care Employers** and **Provider Organizations** do?

**FOUNDATIONAL PRINCIPLES**

Advocate for home health aides to be recognized as an essential workforce

Ensure that home health aides are well-supported, financially secure, respected, prepared, and protected so they can fulfill their essential role of caring for patients in their home

Emphasize the key role that home health care plays within the health care continuum, including by using the term “home health care” - not “home care” - to recognize the work of home health aides in promoting their clients’ health and well-being

Collaborate with unions and industry associations to make sure that home health care organizations are represented in all planning by and between government entities and Managed Long-Term Care (MLTC) Organizations

**MAJOR ACTION ITEMS**

**Improve Access to and Use of Personal Protective Equipment (PPE)**

- Develop policies and procedures for maintaining a stockpile of emergency PPE and supplies and monitoring PPE inventory and needs
- Develop policies and procedures for PPE distribution and training on its use
- Utilize creative mechanisms for PPE distribution to keep employees safe, prepared, and available to work (e.g., mailings/drop offs, setting up central or regional distribution sites, working with other home health care organizations)
- Collaborate with unions and industry associations to create or obtain access to online video trainings for proper donning and doffing of PPE
- Provide each home health aide with a kit containing emergency pandemic-related supplies at their start of employment and update the contents of each kit as guidance changes
- Provide home health aides with PPE training at orientation and regularly thereafter to ensure that aides are continuously supplied with, and aware of the importance of, PPE and how to use it
Promote Additional Patient and Worker Safety Practices

- Maintain, regularly update, and actively test an organization level emergency disaster plan
- Develop nimble internal tracking systems to track compliance with changing government regulations of safety mandates
- Allow for flexibility with home health aide schedules to reduce exposure, when possible (e.g., extended hours with fewer patients)
- Collaborate with state department of health, public payers and MLTCs to establish a patient expectations and responsibilities policy outlining what patients must do to receive and continue to receive home health care during a pandemic; communicate these expectations to patients, family, and other caregivers before home health aides enter the home
- Through training, online learning and other skills building activities help home health aides develop strategies for coping with the pandemic, encouraging patients, families, and other caregivers to be compliant with PPE and other safety practices, and communicating with supervisors if conditions in the home are unsafe

Improve Access to Vaccination and Testing and Adherence to Guidelines

- Identify trusted messengers for diverse audiences and develop and disseminate clear, consistent, and culturally sensitive messaging to encourage compliance and comfort with vaccination and testing guidelines
- Use multiple modalities and trusted messengers to promote vaccination information and testing recommendations (e.g., social media, town hall meetings, television, and radio public service announcements)
- Facilitate access to local vaccination and testing sites
- Offer hazard pay or bonuses rather than vaccination incentives to avoid aides’ perceptions of coercion

Address Financial Instability & Access to Work Issues

- Improve engagement with MLTCs to improve understanding of the challenges faced by the home health care organizations and their workforce so that pass through funding can be directed appropriately
- Improve home health aides’ comfort with and use of electronic assignment processes so they can access more opportunities and to allow for more scheduling flexibility
- Increase scheduling flexibility to allow home health aides to accommodate their work schedules to other pandemic-related demands (e.g., childcare or schooling at home)
- Improve home health care organization data management systems proactively and advocate for flexibility with government reporting during the height of a crisis to allow for greater focus on providing care and supporting staff
- Allow home health aides to work overtime hours to reduce patient exposure to multiple home health care staff when possible
- Develop ways to quickly re-organize scheduling to assign work close to home health aides’ homes and improve work access
- Provide home health aides with proof of employment and essential worker status documentation to ensure public transportation access and transportation alternatives during public transit shutdowns
**Improve Communication & Emotional Support**

- Proactively collect and maintain home health aides’ current contact information
- Embrace communication mechanisms that were propelled during the pandemic and establish new standards for communication including:
  - Using broadcast emails and texts
  - Using features within applications that aides currently use for scheduling and reporting
  - Organizing town halls
  - Further developing accessible resource pages, message boards and e-learning platforms
- Make sure all home health aides are informed and engaged regardless of their willingness and/or ability to use new technologies
- Invest in systems that make it easier for home health aides to reach a supervisor when necessary
- Learn about the cultural preferences and community linkages of the home health aide workforce and use this knowledge to inform communication
- Organize support meetings or calls led by clinicians such as social workers or nurses at a variety of times to accommodate all home health aides regardless of their shift schedules
- Offer open forums for peer-to-peer mentor support (establish for support of newly hired staff and leverage in times of crisis)
- Provide peer support opportunities (e.g., through open forums, online small groups, or one-to-one conversations) for home health aides to share strategies for coping with the pandemic e.g., encouraging patients, families, and other caregivers to be compliant with PPE and other safety practices, and communicating with supervisors if conditions in the home are unsafe
- Promote the use of employee assistance program (EAP) benefits
- Implement random check-in calls to home health aides to offer support and promote communication
- Collaborate with unions or other home health care organizations to develop and offer bereavement support services
- Equip field supervisors with the tools and supports needed to empower them to communicate more sensitively with home health aides and patients

**Support Training, Recruitment & Retention of Workforce**

- Develop and provide in-depth training on infection prevention and control and “what to do” during a pandemic
- Create hybrid (in-person/on-line) programs
- Provide pay for participation or participant stipends when training is required for pandemic/emergency preparedness
- Develop and implement training programs on the use of e-applications, texts, and other technology
- Develop and implement training for field supervisors on coping skills, dealing with stress, and providing support for home health aides