The Honest Truth: CNAs Speak Out on Workforce Issues

By Joanne Kaldy

“T his event comes with a warning. Viewer discretion is advised,” said Lori Porter, CEO and cofounder of the National Association of Health Care Assistants (NAHCA) at the start of “The New CNA Workforce: Frontline Lessons from the Pandemic,” a virtual workshop her organization held in November. She noted the intense stress among nursing assistants (CNAs) would be speaking the truth about what is happening in post-acute and long-term care facilities and this may be hard for some people to hear. “The pandemic told stories that CNAs already knew, but they couldn’t tell them because they didn’t have an audience. They have one today.”

What Difference Did a Year Make?

A year ago, David Grabowski, PhD, suggested that frontline workers in nursing homes had one of the most dangerous jobs in America. He stressed the need to do more to protect, recognize, and retain these team members. At the NAHCA workshop this year, Dr. Grabowski observed that there is still a crisis that needs immediate attention.

“We’ve seen a tremendous decline in nursing home workers since the start of the pandemic. It’s staggering,” he said. In fact, there are actually 425,000 fewer nursing home workers since the start of the pandemic. There are several reasons for these departures, Dr. Grabowski noted, including burdensome regulations/guidance, concern for self and/or family, personal protective equipment/testing constraints, burnout, public blame, and challenges with teamwork, community, and flexibility.

There are two short-term solutions to the staffing crisis, Dr. Grabowski suggested. These are getting residents and staff vaccinated and investing in the workforce. Both of which, he indicated, will take some effort.

Dr. Grabowski noted that “there is quite a bit of variability by state regarding staff vaccination rates.” He further observed, “Mandates may help a lot in certain parts of the country to move the needle. They may draw some individuals back into the workforce.” However, he cautioned that it may cause some unvaccinated workers to leave the field. “The key question for policy-makers is whether it’s better to have some unvaccinated staff or lower staff rates.” There’s not an easy answer to this, he suggested, as both can be dangerous or even deadly to residents.

Ultimately, Dr. Grabowski said, “We need better pay, better benefits, and better working conditions.” He proposed, “If we raised the pay of all the nation’s CNAs by $10,000 per year, or $5 an hour for a full-time worker, this would have a total cost of $20 billion per year.” This may sound like a huge sum, Dr. Grabowski said, but “it’s actually a drop in the bucket. It’s less than 1% of the amount we’ve spent in six weeks to fight COVID.”

Other ideas for positive investments in staffing, he suggested, include setting minimum staffing standards, offering increased benefits, raising reimbursement rates, increasing financial transparency, providing career advancement, and improving the work environment. He concluded, “Investing in the workforce is the number one way to improve long-term care, and this can be done right away.” He further noted, “Making CNA a real career option will improve the amount of autonomy, voice, and direction these team players have. There is much we can do. We need to start tomorrow, if not today.”

Find individual ways to recognize, help, and support all of these workers. She stressed, “Flexibility — in terms of scheduling and benefits — is key and gives everyone an equal voice. One size does not fit all.”

Instead of being laser focused on attracting staff, Ms. Perry urged her audience to attend to keeping the workers they have. “Create career ladders within CNAs’ scope of practice. Allow them to take on more responsibility that is compensated by wages and recognition,” she suggested.

Board Vice Chair Sheena Bumpas noted that negative workplace cultures can drive away CNAs. In facilities where CNAs are undervalued, disrespected, ignored, and overwhelmed, she said, this is a negative culture. “This is not one should think it has no value. “That pizza may be the only food someone has had that day or the only recognition they’ve gotten. Don’t stop the pizza, but add to it with other meaningful ways to appreciate and recognize your CNAs.”

Medical Directors Weigh In

Medical directors, particularly members of AMDA – The Society for Post-Acute and Long-Term Care Medicine, have long had a special relationship with CNAs. They see these individuals as valuable clinical team members. Leslie Eber, MD, CMD, a Colorado-based medical director and the Society’s 2021 Medical Director of the Year, said, “It has always been about building trusting relationships.” She added, “Trustworthiness is more than just good outcomes. It is in the process of the delivery of care.” She stressed that trust can’t be faked: “Authenticity is palpable. People know when they see it.”

Demonstrating a real investment in staff and their well-being has never been more important, Dr. Eber said. “This will promote trust, optimism, and retention, and it’s something we need to do now.”

Michael Wasserman, MD, CMD, noted that COVID-19 has “unmasked” structural issues in PALTIC that need to be addressed to help solve the staffing crisis. He said, “Not until we address these structural elements will we be able to address other issues.” He added, “The ‘secret sauce’ needed to make things work is a geriatrics approach to care, the structure to allow it, and the leadership to implement it.”

Dr. Arif Nazir, MD, CMD, past president of the Society and chief medical officer at SignatureHealthCARE, said, “We are on a mission to improve staffing.” He noted that better wages are the “basic foundation of fairness.” Without that, he suggested, “nothing can be corrected.” Of course, it doesn’t end there. He said, “We need to give [people] opportunities to be motivated and not tell them what to do every second of the day.” He emphasized, “The value of autonomy is huge.” For instance, at Signature, CNAs are a robust part of the rounding process and have a real opportunity to share their insights and be part of problem-solving and innovation.

Dr. Nazir said, “Nothing motivates people more than when they can see the impact of their work and know that their goals are being met. It is important to share outcomes so everyone on the team can be proud and actually see how they are improving lives.”

Strong, Harmonious Voices From the Field

A panel featuring NAHCA board members offered some insights and ideas from the frontlines. For instance, board chair and long-time CNA Sherry Perry, who also is a COVID survivor, said, “CNAs are no longer standing for unfair treatment. They are tired, sick, and physically and mentally exhausted.” She added, “People say that when COVID is over, CNAs will come back. That’s not necessarily true.”

Ms. Perry suggested a few solutions, including flexible benefit options. “There are five generations working in health care, and they want different things according to where they are in their careers. Employers should consider a point-based reward system, and let staff choose those that are most meaningful for them, she said.

Although pizza’s not enough to attract and keep talent, Ms. Wooten said, no

“Make recognition a fundamental part of the workforce. Start incorporating this into your culture. Make it a regular, individualized thing, and catch it in the moment. Make it fun.” – Celeste Wooten, NAHCA

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